



# **Steps Toward Child Abuse Prevention & Creating Safe School Environments:**

## **A “How-to” Manual for Massachusetts Educators**

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# Foreword

I am pleased to present the 4<sup>th</sup> edition of this Manual to the districts, schools, and education programs throughout the Commonwealth. Since the last edition was published in 2016, significant progress has been made in the field of child sexual abuse prevention. The updates to this Manual are meant to reflect that progress and provide you with new and expanded evidence-based and informed guidance, insights, strategies, and tools to help you in your work to create school environments that help keep our children safe and prevent their abuse.

Through our co-chairmanship of the Massachusetts Legislative Task Force on the Prevention of Child Sexual Abuse, extensive regional community outreach and engagement, and direct interaction with administrators, faculties, and staff at the schools and other child- and youth-serving organizations across the state, we have listened to your needs and gathered, curated, and in some cases created a set of guidelines, tools, checklists, model documents, resources, criteria, and implementation and decision-making strategies that outline the major elements of comprehensive, effective, and actionable child abuse prevention structures.

We have also taken that set of resources and created and launched a new website called Safe Kids Thrive<sup>1</sup> - a free, state of the art primary prevention platform that is interactive and searchable and allows users to create customized learning center that reflect their unique organizational needs, risks, and responsibilities. You will find many links to the website and its resources throughout this Manual.

On behalf of the Children’s Trust, it is our hope that Massachusetts schools, as key stakeholders in the prevention of child abuse and neglect, will use this Manual to update and renew their efforts to create and maintain an atmosphere of vigilance that protects children by preventing child abuse before it occurs; equips faculties and staffs with knowledge sufficient to recognize and stop abuse that is occurring; and puts into place policies, procedures, protocols and training such that, should child abuse be suspected, observed or disclosed to any faculty member, school employee or adult volunteer - that individual will possess the knowledge, information and resources needed to help the child and ensure their safety.



Jennifer Valenzuela  
Executive Director  
The Children’s Trust

The Massachusetts Children’s Trust is a prevention organization that has dedicated itself and its resources to being part of the solution in the Commonwealth of Massachusetts since 1988. The Children’s Trust is the only Massachusetts organization solely dedicated to preventing child abuse and neglect and reaches every community in the Commonwealth to ensure that parents have the skills and knowledge necessary to raise safe and healthy children. It is a community leader in proactive efforts designed to support this goal through education and training programs, parent support groups, activities at Family Centers, and home visiting programs that provide information, support and referrals.



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**“Education is the most powerful weapon which you can use to change the world”**  
- Nelson Mandela. Madison Park High School, Boston, 23 June 1990

Note: The current edition of this Manual is the 4<sup>th</sup> in a series published by the Massachusetts Children’s Trust. The Manual’s initial purpose was to serve as a resource for educators and other school personnel on their responsibilities as mandated reporters to recognize, respond to, and report suspicions of child abuse and neglect. Later editions included an additional emphasis on providing guidelines, strategies, and tools for the primary prevention of child abuse, particularly child sexual abuse, in school settings. This 4<sup>th</sup> edition advances both of these intentions and is grounded in the evidence-based and evidence-informed advancements in the field of child protection from the last edition (2016) to the present. Additional detail on the history of this document can be found in Appendix A, and acknowledgments of the agencies and individuals who graciously supported, reviewed, and edited this 4<sup>th</sup> edition can be found in Appendix B.

## Introduction

While it is true that most children spend a significant amount of their time in a mix of organizational and institutional settings like Scouts, youth sports programs, YMCAs, day and overnight camps, dance and gymnastics lessons, Boys and Girls Clubs, etc., the time spent in these settings does not come close to the amount of time a child spends in school.

In fact, in the United States, from Kindergarten through Grade 12, approximately 13-15 percent of an average individual’s life is spent in school.<sup>2</sup> Adding Pre-Kindergarten and after-school program time to that percentage can increase it to as much as 20 percent.<sup>3</sup> Clearly, in terms of its influence and impact on a child’s growth, self-image, and development, the school environment is second only to that of the family.

The public usually assumes that most child abuse and neglect, particularly child sexual abuse, occurs in the home. However, child abuse and neglect can happen in any youth-serving organization (YSO) where there are children and youth - and individuals who are motivated to harm them. Schools are no exception. Previous editions of this Manual emphasized the critical role of educators and school staff in recognizing the physical and behavioral signs and symptoms that children exhibit as a result of abuse or neglect whether it occurred at home or in the community. Similarly, we have explained the role and legal responsibilities of educators as mandated reporters of child abuse and neglect in the Commonwealth. This edition will reiterate and, in some areas, expand upon information related to these responsibilities, further aiding the educator in responding to all aspects of their students’ educational needs.

Throughout this Manual, we will be providing statistics on child abuse and neglect as reported to specific data collection agencies. These agencies use a variety of data collection methods and definitions so the numbers and percentages being reported can vary among reports. Where possible, the reports we cite use combined data and ranges that have proven to be reliable indicators of national and state trends - but all data must be read with some understanding of its limitations.



It is difficult to determine the exact number of children who are abused and neglected because, first, not all cases of child abuse and neglect are reported and in addition, different agencies have different roles, responsibilities, and legal mandates. For example, child protective service agencies address abuse and neglect by caregivers, while child sexual abuse by non-caregivers is investigated by law enforcement. Regardless of how accurate the statistics may be, the abuse and/or neglect of one child is one child too many. Educators are with children for a significant part of those children's lives, and therefore have a special role in protecting them from abuse and neglect through prevention efforts and reporting concerns to appropriate state entities.

In this edition of the Manual, educators will also find expanded information and guidance about preventing child sexual abuse in institutional and organizational settings, and an array of interactive and downloadable tools to assist them via links to our new "[Safe Kids Thrive](#)" website<sup>4</sup> (these links are live in the online version of the document, printed in the endnotes, and compiled in Appendix C). Among these are an interactive assessment tool and a set of checklists that identify the major elements of a comprehensive child sexual abuse prevention framework and help to inventory and evaluate the school's existing safety structure for completeness and depth. A set of recommended minimum required safety standards along with implementation guidance grounded in best practices can be helpful in refining the safety elements to meet individual school needs and activities. **Schools can use the guidance and tools in this Manual as well as the links to external resources to take the actions necessary to reduce the risk of children being harmed and strengthen the elements that can protect them.** These actions involve considering institutional characteristics like the physical condition and characteristics of the facility; child safety policies and procedures; the screening, training, and supervision of staff and volunteers; and also the less tangible factors of institutional culture, climate, and norms.

We hope that this Manual will provide guidance for both administrative staff and decision makers as well as for classroom teachers, support staff, volunteers and others who work directly with your students. All adults have a role in protecting children from maltreatment, and we have organized this Manual and its resources to provide suggestions for both administrators and child-facing staff at all levels. We believe that all levels of school personnel should have input to ensure a school structure that not only protects children but gives them the best environment for healthy learning. As you look over this Manual, you will likely find sections that are more pertinent to your particular role, but we urge you to become familiar with the whole document.

As a whole, this edition of the Manual represents a major step forward that provides educators with a unique set of resources, tools, and links to understand, build, assess, and maintain school environments that increase their capacity to recognize, respond, and above all to prevent harm to the children in the care of Massachusetts schools. **We strongly suggest that the investment of time in learning about child safety and implementing the primary prevention strategies and practices presented in this Manual before a child is harmed far outweighs the lifelong consequences of that harm to a single one of our students.**

## Scope

Child sexual abuse is generally defined as a type of maltreatment that refers to the involvement of a child or youth in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including contacts for sexual purposes, molestation, statutory rape, prostitution, pornography, exposure, incest, or other sexually exploitative activities.<sup>5</sup> Children and youth of all ages, races, ethnicities, and socioeconomic backgrounds can and do experience sexual abuse in all kinds of neighborhoods, communities, youth-serving organizations, and schools. In the vast majority of cases, the child victim knows the perpetrator. The Massachusetts-specific definitions of child sexual abuse and other forms of child maltreatment can be found in Appendices E and L.

The Children's Bureau of the U.S. Department of Health and Human Services collects national child abuse incidence data on an annual basis and posts the most recent data on its website. Its most recent report, *Child Maltreatment 2021*<sup>6</sup> (published in 2023) reported that an estimated 4 million referrals, involving the alleged maltreatment of approximately 7.2 million children were received by Child Protection Services (CPS) agencies across the country. Of the substantiated allegations, 76 percent of the children suffered from neglect, 16 percent suffered physical abuse, and slightly more than 6 percent (6.4%) suffered emotional or psychological abuse.



The report also estimated that 1,086 children were victims of sex trafficking, and 1,820 children died from abuse and neglect. A little more than 10 percent (10.1%) of the cases involved sexual abuse. It has been estimated in various studies that 25-40% of women and 5-13% of men experience at least one episode of sexual abuse victimization before they reach their 18th birthday.<sup>7,8,9</sup>

Sexually abusive acts can include sexual penetration, sexual touching, sexual exploitation or non-contact sexual acts such as exposure, voyeurism, sending/receiving nude or sexually explicit photos, and showing a child pornography. National statistics also indicate that, instead of strangers, the majority of these sexual offenses (85 - 90%) are carried out by a person the child knows or trusts (i.e., in the child’s family or social network).<sup>10</sup> Another common misperception is that it is only adults who sexually assault children. Approximately 40 percent of the reported cases concerning those who commit sexual offenses against children under the age of 11 years are juveniles - many of whom have been victimized themselves.<sup>11,12</sup> However, more recent research based on self-reports from a sample of over 13,000 children indicates that the prevalence of sexual offenses by children and adolescents involving other children and youth could be as high as 70 - 77%.<sup>13</sup> Unfortunately, estimates are that between 70 and 90 percent of child sexual abuse cases are never reported.<sup>14,15</sup> The under-reporting of sexual abuse is so significant that we must address specifically what researchers now document is affecting as many as one in ten children nationwide.<sup>16</sup>

The scope of child abuse and neglect in Massachusetts is no less concerning. In FY2022, the Massachusetts Department of Children and Families (DCF) received 91,427 reports of the alleged abuse or neglect of children under the age of 18 through the 51A report process. Historically, as well as currently, first responders, school personnel, and childcare and health care providers in the Commonwealth are the source of the vast majority of reports received. FY2022 saw a post-pandemic increase in those reports from both school and public safety personnel. More than 49,000 reports were screened in for a response. The most frequently present allegation types were neglect (73.1%), physical abuse (21.3%), and sexual abuse (12.1%).

Following the DCF response, the number of supported allegations of abuse/neglect or concerns for risk represented the maltreatment of a minor child in Massachusetts approximately every 20 minutes. At the end of June 2020, DCF was serving 86,453 open consumers across the Commonwealth.<sup>17</sup> In approximately 80% of these cases, DCF provides supervision/services to these children and families while they remain in their own homes.

Given these national and state statistics, it is clear that child abuse and neglect are significant and persistent public health problems. More than two decades of research on thousands of adults who experienced various levels of childhood abuse, neglect, and family dysfunction as children have identified links between childhood trauma and adult illness and death (heart disease, chronic pulmonary lung disease, hormonal dysfunction, hepatitis, depression, and suicide) in the United States.<sup>18</sup> In a heartbreaking cycle, exposure to these traumatic childhood experiences leads to social, emotional, and cognitive impairment in children, which leads to the adoption of risky health behaviors in adolescents and adults, which in turn leads to disease, disability, social dysfunction, and earlier death than those who did not experience such trauma. Scientists have also discovered that brain development can be negatively altered through exposure to trauma.<sup>19</sup>

It is clear from these studies that child abuse is detrimental to lifetime health in a number of ways. Beyond the psychological and emotional effects that we have come to understand as the consequence of childhood abuse and neglect, we are now learning that its effects are lifelong and life threatening in ways that were unknown only a few years ago. In light of the above, the researchers themselves, in the closing remarks of many of these studies, have identified a number of societal and community strategies as essential in combating the problem of adverse childhood experiences - the very first being strategies that include the *prevention* of their occurrence.



# Keeping Children Safe - The Importance of Prevention

The term prevention is applied in many contexts. Often it is classified into three types: primary, secondary, and tertiary.<sup>20</sup> Primary prevention in the context of this Manual focuses on work within the school and community to stop child maltreatment before it starts. Secondary prevention is focused on individuals or families in which maltreatment is more likely (high risk), and tertiary prevention is targeted toward families when maltreatment has already occurred or is suspected and is designed to prevent any reoccurrences.

The ideal societal approach to prevention encompasses all three levels, which results in a comprehensive service framework focused on improving outcomes for children and families. Although the bulk of primary, secondary and tertiary prevention services and programs are carried out by collaborations of social service, community, and public health agencies, schools can and do play a vital role in protecting children from abuse and neglect, and in mitigating the debilitating effects of maltreatment that has already taken place.

Educators know that schools have a responsibility to ensure that their students are available to learn. A safe school environment is one where students of all ages feel physically, emotionally, and socially comfortable. They know that their needs are taken care of and that they are protected by caring and supportive teachers and members of their community. It is no surprise that children learn best when they feel safe. As a protective factor, school connectedness can improve both student health and academic achievement - important for all children and youth, but especially so for those who may be at-risk.<sup>21</sup> Where conditions or circumstances exist - either in the school environment or outside of it - that disturb and disrupt that sense of safety and connectedness, students can find it both physically and emotionally harder to learn and easier to act out or drop out. Yet, the voices of students and their teachers tell us that a significant number of them continue to feel unsafe at school.

The National Center for Education Statistics and the Institute of Education Sciences, in collaboration with the Bureau of Justice Statistics publish an annual report on school crime and student safety. Their most recent report (and update)<sup>22,23</sup> covers topics such as personal victimization, teacher injury, bullying/cyber-bullying, sexual assault, school conditions, fights, weapons, the availability of, and student use of drugs and alcohol, and student perceptions of personal safety at school.

The report states that in the 2017-18 school year, about 80% of public schools in the U.S. recorded one or more violent incidents, and 21% recorded one or more serious violent incidents. In 2017, 4-6% of students in Grades 6-10 reported being afraid that someone would attack or harm them at school, and 3% in the same grades reported they were afraid of being attacked or harmed when away from school. In the same year, about 6% of students related that they avoided at least one school activity (or one or more places in school) during the previous school year because they feared being attacked or harmed.<sup>24</sup>

A more recent (2021) literature review<sup>25</sup> of 43 studies - mostly from the US - on students' perception of their safety in school reported that 19.4% of students in Grades 3-12 felt unsafe at school. Many of the studies reviewed identified school-related environments where students are most likely to feel unsafe as: on the bus, walking or biking to and from school, in the cafeteria, near their lockers, in the halls, on the playground, and in gym locker rooms or showers. A common factor in these locations was the absence of a trusted adult or teacher with formal responsibility for monitoring the area.

Closer to home, [statistics reported in 2019](#) by the Massachusetts Departments of Elementary and Secondary Education and Public Health<sup>26</sup>, indicate that 21.8% of high school students reported being offered, sold, or given an illegal drug by someone on school property during the previous 12 months. Ten percent (10%) of attending high school students reported having carried a weapon in the previous 30 days (3% identified that weapon as a gun), and 6.4% reported skipping school in the past 30 days because they felt unsafe. The same percentage (6.4%) were involved in a fight while in school during the past year. During the same period, thirty-five percent (35%) of middle school students reported being bullied at school, while 15% reported being victims of cyber-bullying in the last 12 months.

A school must be safe. Creating a safe school environment requires a comprehensive framework that includes - among other things - a clear set of policies and procedures, attention to the security and safety of the facilities; creation of codes of conduct for student, staff, and visitor behavior and interaction; staff pre-employment and volunteer screening; frequent and effective communication with parents, families, and the school community; staff training and professional development; periodic assessment; and actions focused on sustainability. These safety elements combine into a comprehensive organizational framework that is proactive in terms of preventing child abuse and other forms of victimization because it anticipates how and where students can be harmed and actively works to deny the opportunities for it to occur. This prevention framework facilitates training, communication, and organizational structures that work together to help staff recognize abuse and victimization (whether suspected or already taking place). Further, this initiative guides educators on how to stop and report abuse and victimization as quickly and effectively as possible.



# The Elements of Prevention

## Policies and Procedures

Schools come in all shapes and sizes, but whether large or small, public or private, preschool only or Pre-K to Grade 12, all of them have at least one thing in common: the desire to keep their children and youth safe from harm. A school's policies, procedures, and guidelines for child safety and abuse prevention serve as the backbone of its efforts to protect children and youth, by providing an overarching framework that should present, first and foremost, its commitment to the safety and well-being of the children and youth entrusted to its care.

A well-written and unambiguous set of policies provides the means for any school and its board<sup>27</sup> to clearly express, in a public way, a commitment to its parents, to its community, and to the children and youth it serves by:

- Outlining the steps it takes to protect children and youth from sexual and other forms of abuse and neglect while on school grounds or off-campus under school supervision;
- Describing the type of environment it strives to build and maintain; and
- Outlining the safeguards it employs to ensure that all staff, employees and volunteers are properly vetted and trained to recognize and respond to inappropriate and/or harmful behaviors.

A clear set of policies and procedures also takes the guesswork out of what should happen when incidents of abuse and neglect are observed, suspected, or alleged – and reduces the chance of error and unnecessary delay in providing an effective response. Thus, effective policies focus on the creation and maintenance of safe, preventive environments for children and youth, as well as on the responsible management of incidents or alleged incidents of abuse.

Development and implementation of a policy is best done as a collaborative effort. **School leadership must, of course, take the lead and maintain a visible role throughout the process to reinforce its importance and to demonstrate a commitment to its goals and success.** A policy will be more effective if the people it affects – faculty, staff, employees, volunteers, and students – are aware of it, feel some sense of ownership towards it, and have the opportunity to express their views on how it will, should, or will not work. Such a group may also be sensitive to any potential biases embedded in the policies and point to possible unintended consequences. Thus, whether creating a set of child safety policies and procedures for the first time, or reviewing and updating those that already exist, input from a representative and diverse set of stakeholders is important to consider.

In this way, the document becomes a collaborative product that explains the implementation of, and rationale for key safety policies, practices, and protocols that foster child safety, and describes the school's efforts to identify and mitigate environmental, situational, and organizational conditions that allow child maltreatment (particularly child sexual abuse) to occur or continue.

Effective prevention is predicated on:

- Creating a positive, open, and inclusive organizational culture in which the safety of children is paramount;
- Ensuring that conversations about child safety and abuse prevention are ongoing and normative rather than by exception after a child has already been harmed; and
- A culture that is led by senior management and wholeheartedly endorsed and owned by staff at all levels.

Whether you are creating a set of abuse prevention policies and procedures for the first time or need to evaluate an existing one, the Safe Kids Thrive website provides guidance on the [building blocks](#)<sup>28</sup> of an effective set of policies and procedures; a list of [guiding principles](#)<sup>29</sup> for their creation; steps to create, implement and periodically assess them; a short [assessment tool](#)<sup>30</sup> that can help inventory the necessary elements of a school's existing policies; a [comprehensive checklist](#)<sup>31</sup> that outlines the general standards for effective policies (see items a – n); a set of [sample policy documents](#)<sup>32</sup>; guidance on [leadership, organizational culture, and sustainability](#)<sup>33</sup>; and other resources as part of its material on the [Elements of Prevention](#).<sup>34</sup>

## Safe Physical and Virtual Environments

There are both physical and procedural elements involved in building safe environments for students that reduce the possibility of victimization.

### Physical Elements

From a physical perspective the general rule in protecting children is visibility. One of the greatest fears of those who would bully, assault, steal from, sexually abuse, or otherwise victimize children is being seen. **Schools can employ best practices strategies to look at all safety factors and areas of risk, including the physical and virtual spaces children inhabit, and work to strengthen the safety and security of those environments. The key strategies to employ, either on-site or off-site, are visibility, access, supervision/training and communication.**



A periodic review of the school’s buildings and surrounding property provides an opportunity to assess any risk it presents to its students. Physical spaces that offer opportunities for anyone to isolate a child and possibly cause harm without being observed or interrupted must be addressed as a priority. Options to modify the space might include considering the placement of lighting, windows, doors, mirrors, and cameras. Risk can also be reduced through establishing policies that guide behavioral expectations between staff and students, and between the students themselves (see Code of Conduct section below).

Schools are encouraged to take actions to design, build or adapt existing spaces to maximize visibility include the following<sup>35</sup>:

- Allow for clear sightlines throughout the building and grounds - minimize “blind corners” and “blind spots.”
- Landscape to ensure open, visible spaces without the possibility of concealment.
- Secure all areas in the building not used for program purposes that would allow for entrapment, concealment, and isolation (boiler rooms, maintenance closets, storage rooms, unused classrooms, etc.).
- Clearly define areas that are off limits to students, staff, volunteers and others.
- Improve lighting in all areas that are poorly illuminated (basic lighting should allow the identification of a face from a distance of about 10 yards for a person with normal vision).
- Ensure that access routes to toilet facilities and locker/shower rooms are well lit and visible.
- Use signage to delineate areas that require staff supervision when in use, or to steer students away from using concealed or isolated walkways or corridors by showing alternate routes.
- Install windows in all classroom doors, and prohibit them from being covered in a way that obstructs a clear view inside the classroom.
- Utilize empty space and bulletin boards to post signs and information about safe environments, including how, and to whom to report maintenance issues.
- Consider, if possible, the installation and use of security mirrors and closed-circuit surveillance systems in areas that are difficult to monitor.

Procedural Elements

A school’s safe environment policies should complement the safety measures established for the physical environment by establishing procedures that govern such things as:

- Controlling access to the school campus and buildings;
- Developing entry and exit procedures;
- Developing policies regarding the use of the facilities;

- Fostering effective internal and external communication;
- Outlining the expected responsibilities and behaviors of staff, students and visitors; and
- Establishing monitoring responsibilities for all spaces.

A clearly articulated, written set of safety policies and procedures allows school leadership to demonstrate a commitment to building and maintaining an environment in which every student is safe. It also affords the ability for leadership to set the example and build confidence in the commitment through action, and helps everyone to be on the same page. **Copies of these policies should be distributed widely, posted in public spaces, taught as a focused lesson or integrated into the curriculum, added to student handbooks, reviewed in regular faculty training, and sent home to parents and caregivers in the primary language of the household.** Some of these actions might include but are not limited to:

- Control access to school buildings by keeping outside doors locked, establish which door visitors must use and monitor it during school hours, and establish policies about who will be allowed access and how that can occur (i.e., sign-in procedures that require photo ID, wearing visitor badges, being accompanied while in the building, etc.).
- Establish schedules for school staff and faculty to monitor and supervise bus stops, playgrounds, lunchrooms and hallways - particularly between class periods and during high traffic activities.
- Establish a school safety committee of administrators, staff, and students that periodically walk the premises and conduct safety surveys noting such things as potential problem areas and maintenance needs - thus fostering a sense of collaboration, ownership, and responsible school citizenship.
- Create entry and release procedures for students - the whereabouts of every student should be known at all times.
- Establish procedures for use of bathrooms, shower facilities, and changing rooms by students. Consider assigning school personnel to monitor these areas and ensure procedures are being followed.
- Prohibit adults from using the same bathroom facilities as students, prohibit students from using faculty bathrooms, and avoid sending younger students to bathrooms when they are in use by older students.
- Prohibit adults and students from bringing/using cell phones in the bathrooms or locker rooms
- Encourage staff and volunteers to avoid being alone with a single student behind closed doors. When necessary, however, ensure that another adult knows about the situation, that the door is left ajar, and/or that the interaction can be observed or interrupted.



- Ensure that vendors and other service/maintenance providers are restricted to the area in which their service is being provided, and are escorted/monitored if they need to leave that area. Make sure that staff, faculty and students are aware of their presence in the building or on the property, and that students are prohibited from entering the areas in which the work is being performed unless escorted.
- Publish a school Code of Conduct that addresses expected behaviors and interactions between faculty, staff and students, and between/among the students themselves (see Code of Conduct section below).
- Ensure that leadership addresses periodically and publicly the issue of school safety to the student body, to parents, and to school staff during periods of professional development.

These are just some – but not all – of the physical and procedural steps that can be taken to create safe school environments. Additional guidance, strategies, and tools can be found on the Safe Kids Thrive website in the [Safe Environments](#) section.<sup>36</sup> These include expanded information (for both on and off-site activities) on topics of visibility, access, supervision, communication, safety considerations when transporting students, a set of minimum physical and procedural safety standards, and a 3-step decision-making and implementation process to help schools assess risk and determine what additional safety elements might be needed. The website also has a facilities design checklist on its [Safe Environment Resources page](#)<sup>37</sup> and a more detailed interactive and printable Safe Environment [Checklist](#)<sup>38</sup> that helps schools to take inventory of their safe environment framework.

Additional information on building safe environments pertinent to schools can also be found on the websites of the [Centers for Disease Control](#)<sup>39</sup>, and the [National Center for Education Statistics](#).<sup>40</sup> The assumption is that most schools have already made provisions for the above but listing them allows you to check your policies against those that are recommended for child safety.

## Building a Safe Cyber-Environment

At one time, educators needed to worry only about the physical environment within the school building. Today, however, the learning and social environment extends beyond the physical due to the use of cyberspace. Electronic and social media have become a significant part of all of our lives requiring that roles and expectations be redefined. Undoubtedly, additional social media technologies, tools and devices will be developed in the future, and will continue to grow in sophistication and usefulness. In a matter of only a few years, technology has profoundly changed the nature of communication forever, and is already a preferred means of communication among children, youth and young adults. The skills learned in social networking – cooperation, collaboration, the management of information, organization, communication, etc. – are key skills for current students as they prepare for the totally connected world they not only experience now, but will also have to navigate in future employment and professional work. Social networks and constructive communities of learning can expand and enrich the learning environment to not only make it more interesting, but also more applied and relevant for the students.

Nevertheless, social media can, and has been misused and employed to facilitate communication among youth and between adults and youth in ways that are inappropriate, violate boundaries, and do not reflect the standards of visibility or accountability. The 24/7 nature of social media communications blurs many boundaries as our formerly private spaces become more public. Questions of liability for educators cannot be ignored. Thus, efforts at building a safe school environment must also take the cyber-environment into account.

Some school districts and states have taken a hard-line approach and banned student cell phones, blocked or filtered topics on social networking sites, prohibited educators from connecting with students on social media in any way, or restricted classroom use unless the sites could be viewed by school administrators and students' parents – only to have the laws repealed when challenged. In other states and districts, including Massachusetts, superintendents and school boards have solicited input from teachers, Information Technology (IT) personnel, school legal counsel and others to help craft social media policies that can prevent misuse, but not interfere with the educational benefits of the technology. These “acceptable and responsible use” policies and guidelines tend to focus on prevention and training rather than solely on prohibition and consequences. They also take the approach that students need to learn how to be responsible users, make informed choices, and be held accountable for their behaviors.

The guidance described above advocates for guidelines and policies that foster “digital literacy and citizenship” – regarding the student as a person responsible for ethical and healthy use of the Internet and mobile devices. It also encourages teachers to help students acquire the skills for responsible use, avoid inappropriate contact and malicious sites, and acquire the skills to assess the validity of information found on the Internet or passed along by others via social networking.

The National Association of State Directors of Teacher Education and Certification (NASDTEC) also provides a [model code of ethics for educators](#)<sup>41</sup>, as does the [Association of American Educators](#)<sup>42</sup>. Each school no doubt has, or will want to develop its own code of ethics and social media policy to guide staff in what can be an otherwise ambiguous arena.

As we seek to promote safe environments, it is important to remember that the Internet may also be used to exploit children by those who seek to sexually exploit or abuse them. In addition, cyberbullying has become a problem among peers. Therefore, educators must be sensitive that any online interactions with students do not in any way replicate the traumatic experiences they may have already had. Taking these factors into consideration, guidelines and codes of conduct related to the use of social media might include some of the following:

- Educators should not submit “friend” requests to students or accept friend requests from them.
  - Options for educators may be to join a professional networking site (Classroom 2.0, LinkedIn, The Teacher Collaborative, edWeb, the school's Facebook page, etc.) or create an online profile that is maintained as a professional page only. Students can then become followers or friends of this professional page. It is important that all social media interactions conform to the professional boundaries of a teacher/student relationship and that these interactions are educationally valid.<sup>43</sup>



- If the school sanctions accepting friend requests from students, at least one other school staff member should have access to the adult’s profile and correspondence.
- If there is contact between educators and students, all applicable privacy settings should be used to protect the student from any content that might be inappropriate.
- Both educators and students should be informed that any communication sent through digital methods (e.g., e-mail, social networking, Twitter, Instagram, site note, texts or posts) conforms to the professional boundary guidance in the bullets above, is not to be kept confidential and may be reported to or shared with others.

Educators are also encouraged to make clear their rules about ethical behavior and the Internet by some of the following:

- Involve students in creating rules for Internet use.
- Post the rules for what is acceptable within the classroom and the school. Include rules about what is not acceptable (e.g., peer to peer sharing of nude or sexually explicit photos).
- Reinforce acceptable behavior recognizing that offenses may not always be intentional on the part of the students. (e.g., an incorrect url may bring up unintended sites).
- Pair up students into technology buddies so that those who are more adept at technology, and use it responsibly, can assist their peers.
- Model appropriate behavior in one’s own cyber use.
- Help students see parallels between unethical behavior in their daily lives and on the Internet. (Adapted from Education World - [Tools for Teaching Cyber-Ethics](#)<sup>44</sup>).

**Schools can and should also partner with parents by asking them for their input and for assistance in monitoring their children’s use of social media - whether they are at home, on vacation, or even over the summer if the students will be returning to the school in the fall. By encouraging parents to approach the school with any concerns about technology use, administrators and faculty can more quickly become aware of and address issues as they arise.** Schools should also obtain a signed acknowledgment from employees (and students and their parents) that they have received and read the social media policy. Training should also be provided for faculty, staff, employees, volunteers and the students themselves on the school’s policies on the appropriate use of social media, and related issues such as cell phones and texting, and cyber-bullying.

The Safe Kids Thrive website section on Building Safe Environments has a [Safe Environments Strategies](#)<sup>45</sup> section that includes guidance on the safe use of technology, and a sample [Electronic Communications Policy](#)<sup>46</sup> that schools can download and use as a starting point. The aforementioned [Checklist for Safe Environments](#)<sup>47</sup> also contains technology-related items that should be included as part of the school’s safe environment framework. Additional detail on all the above can also be found on the Safe Kids Thrive website Section entitled [Ensuring Safe Physical Environments and Safe Technology](#).<sup>48</sup>

Additional policy guidance and information, including sample code of conduct language and acknowledgment forms can be found in the following:

[Guidelines for Implementation of Acceptable Use Policy for Digital Information](#)<sup>49</sup>, Communication, and Technology Resources, Boston Public Schools (2019-2020)

[Responsible Technology Use in Public Schools](#), Massachusetts Educational Technology Advisory Council (2010)<sup>50</sup>

[Guide to the Boston Public Schools, Using Technology in School, Student Responsible Use](#) (2020-2022)<sup>51</sup>

## Screening and Hiring Practices

One of the most effective means of preventing child abuse in organizations is screening out potential abusers before they come to the school, or other youth serving organization. **All employees, faculty, staff, volunteers and other members of the community whose potential employment or volunteer service activity involves direct and unmonitored contact with children (including individuals who are contracted to regularly provide transportation to children) should be given thorough reference and background checks including the review of criminal and (in some cases) sexual offender records.**

The term “background check” is a generic term that can mean different things to different people. [Massachusetts law](#)<sup>52</sup> requires “all schools to conduct criminal background checks on current and prospective employees and volunteers, including those who regularly provide school-related transportation to students, who may have direct and unmonitored contact with children.” In January 2013, the Governor signed [Chapter 459 of the Acts of 2012, “An Act Relative to Background Checks.”](#)<sup>53</sup> The law expanded what public schools and other youth serving organizations were already doing in conducting state Criminal Offender Record Information (CORI) checks on all employees at least once every three years. It requires a fingerprint-based state and national criminal record check for all school employees and any contractor employees who may have direct and unmonitored access to children in the performance of their duties.

All newly hired school employees, including educators, student teachers, maintenance staff, cafeteria workers, and bus drivers, who work in the schools and may have direct and unmonitored contact with children are now required to complete the new fingerprint-based state and national background check. Volunteers at schools will continue to be required to submit to state CORI checks at least once every three years, as currently required by statute. The decision to require the submission of fingerprints by volunteers for the fingerprint-based state and national checks will be made locally, by schools or districts.



In practice, however, a comprehensive background check requires more than a search of criminal history. As stated elsewhere in this Manual, most instances of sexual abuse are not reported and are, therefore, not prosecuted. As a result, a criminal record of the abuse does not exist. In efforts to build a safe school or other child and youth serving environments, the term refers more to a comprehensive process with multiple components – each of which provides a piece of information about an individual’s overall suitability to be with the children. Schools, day and overnight camps, YMCAs, Scouts, Boys and Girls Clubs, mentoring organizations, communities of faith, and others – virtually all youth-serving organizations – can augment the safety of their environment by implementing a thorough and comprehensive screening and hiring process. For Massachusetts schools, the responsibilities for the various components of this process are distributed among the school districts and school boards, as well as the leadership of the schools themselves, with decisions for the procedures designed and implemented at the local district level. Since there is no “one size fits all” approach, the guidance provided in this section outlines the suggested elements of a screening and hiring process without assigning responsibility to particular individuals or offices.

The elements of a comprehensive background check (inclusive of the statutory requirements listed)<sup>54</sup> should include:

- A written application and a “statement of suitability” requiring a signature from the applicant stating that they know of no reason or prior circumstance that would preclude them from working safely with minor children.
- A personal interview.
- Credential check depending on the position being sought.
- Reference checks from prior employers (2 - 3).
- The assurance that all background screening complies with the Fair Credit Reporting Act and other relevant privacy laws.
- Criminal history records check: CORI, fingerprint-based state and national (and sometimes international) options depending on where the applicant is coming from and the position being sought. Note: Massachusetts requires an Authorization Form to be filled out and signed by the applicant before a criminal records check can be accomplished.
- Criminal history records check for any potential employee and/or volunteer currently residing in another state but applying to work/volunteer at your school.
- Request for a criminal history records check from the former state of residence for any potential employee and/or volunteer residing in Massachusetts less than 1 year.
- Sex offender registry check (SORI/eSORI<sup>55</sup>). It is strongly recommended that schools/districts utilize the national sex-offender registry and the Massachusetts Sex Offender Registry Board (SORB) to check for sexual offenses or classification as a Level 2, or 3 offender.<sup>56</sup>

- Published procedures as to how and by whom criminal history records will be reviewed and the criteria by which they will be evaluated – including a description of the appeals process as required by law. Note that in Massachusetts, as in many states, an applicant who is being denied employment based on a criminal history records check that the applicant believes is in error must be supplied (by the potential employer) with the documents necessary to have the criminal record reviewed and potentially corrected.
- Screening procedures not only for employees, faculty, staff, and volunteers (including subcontractors and laborers employed by the school), but also require verification from the parent company that contractors, vendors and other service providers (either providing services to the organization/facility when minors are present, or providing services to minors they bring to the organization using the facilities of the host organization) have been screened appropriately.

**School administrators should also reserve the right, and make clear to employees and volunteers, that they will conduct additional background checks any time after employment or volunteer service has begun – and should do so periodically.** As stated above, Massachusetts requires CORI checks no less than every 3 years for individuals who have the potential for direct and unmonitored contact with children. It should also be made clear to all applicants that any misrepresentations, falsifications, or material omissions in the information provided by the applicant, whenever discovered, may result in disqualification from, or termination of employment or volunteer service.

Again, while employee and volunteer screening and selection are important elements of a safe school environment, they are not – by themselves – a guarantee of safety, and should therefore be integrated into other measures and efforts described in this Manual. **Schools must continue to maintain their vigilance and ensure that all faculty, staff, employees and volunteers receive adequate training, supervision and management support to fulfill the school’s commitment to safety.** Screening and hiring procedures can be time consuming (and sometimes expensive) for organizations, but the cost can be exceeded exponentially by the cost of an organization’s failure to screen.

Additional information and detail about best practices in the screening and hiring process can be found on the Safe Kids Thrive website in the section on [Screening and Hiring](#)<sup>57</sup> in the Elements of Prevention (this page includes a set of minimum standard requirements and a 3-step decision making and implementation process). The website also includes links to a [Screening Toolbox on Background Checks](#)<sup>58</sup>, a [Checklist for Conducting Criminal Background Checks](#)<sup>59</sup>, a set of [Sample Questions for Screening and Selecting Employees and Volunteers](#)<sup>60</sup>, sample language for a [Statement of Suitability for Employment/Volunteer Applications](#)<sup>61</sup>, a detailed section on [Screening and Background Checks for Selecting Employees and Volunteers](#)<sup>62</sup>, and a set of [appendices](#)<sup>63</sup> that include a list of sample questions for previous employers, CORI/SORI request forms, and details on the process of accessing, reviewing, and evaluating the results of a criminal background check.



# Codes of Conduct and Monitoring

The public and private conduct of administrators, faculty, employees, and volunteers acting on behalf of a school (or any youth-serving organization) can inspire and motivate those with whom they interact, or can cause great harm if inappropriate. As an additional element of building a safe school environment, a Code of Conduct is one of the tools that helps schools to clearly identify what is acceptable and expected of adults (as well as of students) in terms of behavior, risk, sensitivity to the appearance of impropriety, interpersonal communication with children, and compliance with the policies and procedures of the school, the district, and the reporting laws of the Commonwealth.

When safety policies and a Code of Conduct are enforced through supervision, staff meetings, and other training or professional development opportunities, it becomes easier for staff to talk about their concerns and highlight the smaller day-to-day behaviors that give them some concern. In this way, a Code of Conduct serves as another prevention tool. If everyone in the school understands and complies with the requirements outlined in the Code of Conduct, behaviors that fall outside of the Code are more easily noticed and addressed.

**The basic elements of Codes of Conduct acknowledge, usually by means of the educator's or volunteer's signature on an acknowledgement page, that teachers and others will not initiate or participate in practices that are emotionally damaging, physically harmful, disrespectful, degrading, dangerous, exploitative, or intimidating to children. The Codes should be distributed to all employees and included as part of the initial orientation and ongoing training structure.**

In constructing a Code of Conduct, essential elements generally include topics such as:

- Awareness of the power differential between adults and children and the responsibility to maintain appropriate boundaries.<sup>64</sup>
- Use of discretion when touching a child - with examples of appropriate, inappropriate, and harmful touch.<sup>65</sup>
  - **Appropriate** physical behavior includes contact that maintains physical boundaries at all times and only comprises touches that are public and non-sexual, such as pats on the back or shoulder, child-initiated hugs, fist bumps, and holding hands to safely cross the street.<sup>66</sup>
  - **Inappropriate** physical behavior includes any contact that violates boundaries and can be seen as an intrusion on the child's space beyond the bounds of propriety. These include tickling, wrestling, backrubs, massage, seating a child on one's lap, and unwanted affection.

- **Harmful** physical behavior includes any contact that abuses, exploits, or harasses the child such as slapping, shaking, spanking, pinching, hitting, pushing, grabbing, kicking, corporal punishment, patting the buttocks, touching private body parts, intimate/romantic/sexual contact, and involving students in pornographic activities.<sup>67</sup>
- How to handle 1-on-1 meetings, with preference expressed for a team approach. All adults interacting with minors should do so in open, public spaces in which at least two adults are present. If one-on-one meetings are necessary for educational or emergency purposes, then they should be conducted in a public area; in a room where the interaction can be (or is being) observed and can be interrupted; or in a room with the door left open and another adult is notified about the meeting.
- Prohibition against smoking, drinking, drug use, profanity, and other inappropriate communication when around children.
  - Appropriate communication includes praise and/or positive reinforcement and should be used consistently and equally for all students.
  - Yelling, threatening, ridiculing, comments about physical appearance or comments that are degrading should be expressly prohibited.
  - Comments, gestures, jokes or innuendos that are sexual in nature should be prohibited.
- Use of social media, text, email with minors restricted to use within the role of the professional or volunteer relationship - and subject to periodic monitoring by the administration.
- Possession of sexually-oriented materials (magazines, cards, videos, books, clothing, music) or accessing similar materials on the internet prohibited in the presence of the students.
- Guidance on distinguishing violations of the Code that require a report to law enforcement or DCF, from those that may be handled organizationally (e.g., are correctable by principals or supervisors).<sup>68</sup> Employees and volunteers - even those who are not mandated reporters - should be required to report any behaviors and practices that may be harmful.
- Compliance with Massachusetts and organizational reporting policies/protocols.
- A clear set of steps to follow if a violation of the Code is observed, or if there are any concerns about student safety. Create a climate that encourages people to question confusing, concerning, or behaviors and practices about which they are uncertain.
- The requirement for the Code of Conduct to be read by all current, prospective, and new employees and volunteers and signed to acknowledge receipt and agreement. Acknowledgement should be kept in the employee's/volunteer's personal file.



Again, clearly articulated Codes of Conduct are meant to protect all parties, and represent to parents and to the community that the school is serious about protecting the welfare of the children entrusted to its care. Implementing a Code of Conduct will also require frequent communication and [monitoring](#).<sup>69</sup> Consider opportunities to discuss its content, providing a copy to all prospective and current employees and volunteers, making the Code part of an annual training requirement, discussing the Code as part of an annual orientation, and posting the Code on bulletin boards and other public spaces.

Just as important as monitoring the physical and procedural elements of a school's safe environment initiatives, monitoring the behaviors and interactions contained in the Code of Conduct will require vigilance and building a school culture that will encourage people to speak up if they see something appropriate (thus acknowledging and reinforcing positive, supportive and healthy behaviors and interactions) or inappropriate (understanding the boundaries the school has set for inappropriate or harmful behaviors and immediately responding themselves, and/or reporting their concerns to the appropriate authority). There is more detail on the reporting process in the section below.

The boundaries between appropriate, inappropriate, and harmful behaviors are not always clear in every situation. Some concerning behaviors may be due to inexperience and can be addressed by closer supervision and monitoring. But many of those same behaviors can also be part of a pattern used by offenders to [groom](#)<sup>70,71</sup> and otherwise desensitize their intended victim to increasingly sexualized touch. (Use the link or url to see more on grooming behaviors (below) and how to recognize them in adults on Safe Kids Thrive).

More information about the basic elements of Codes of Conduct and guidance on building and implementing them can be found on the Safe Kids Thrive website in the Elements of Prevention section entitled [Code of Conduct](#).<sup>72</sup> Here you will also find suggestions about [assessing risks](#)<sup>73</sup> that could influence how the Code is structured; the best ways to integrate a Code of Conduct into the overall safety structure of any organization; and the relationship between a Code of Conduct and [Mission Statements and Codes of Ethics](#).<sup>74</sup>

The website also contains a detailed [Prevention Evaluation Tool](#)<sup>75</sup> (checklist) that details standards for Codes of Conduct (See Standard 2), and Implementation and Monitoring (Standard 3). [Sample Codes of Conduct](#)<sup>76</sup> for different types of youth-serving organizations can also be found on the website, as well as a version that can be customized and printed along with a [Statement of Receipt and Agreement](#)<sup>77</sup>.

Examples of school-based Codes of Conduct and ethics can also be found on the web sites of the National Association for the Education of Young Children (<https://www.naeyc.org/>), the Association of American Educators (<https://www.aateachers.org/index.php/about-us/aae-code-of-ethics>), and the National Education Association (<https://www.nea.org/resource-library/code-ethics-educators>). A sample Code of Conduct, and a sample Statement of Receipt and Agreement are attached in Appendix J.

## ***Building a School/District Reporting Protocol: Recognizing, Responding to, and Reporting Child Abuse and Neglect***

Another aspect of keeping children safe is to create and implement a school reporting protocol designed to help school personnel to respond appropriately and effectively to students who either disclose that they are being (or have been) abused or neglected, or about whom abuse or neglect is suspected. School reporting protocols include information and guidance on the definitions of the various types of child maltreatment; the physical and behavioral symptoms through which they can be recognized; guidance about responding to children who disclose; a clearly defined school reporting chain; the details and timelines of the mandatory DCF reporting process; the information educators should be prepared to provide when reporting, the legal responsibilities of mandated reporters; and training requirements.

The work of an educator today is increasingly complex and challenging. Expanding class sizes, greater awareness of the varied learning styles of students, diverse cultural backgrounds that impact relationships in the classroom, the realities of the pandemic-driven shift to remote learning, hybrid learning and the subsequent return to the classroom environment, and the struggles and stress in students' home lives, combine to create expectations of teachers that have never been higher. In addition, educators and administrators are constantly dealing with a range of behavioral, social, emotional, and discipline concerns that impact the learning culture for all students.

In the midst of this complex classroom atmosphere, educators must also be aware of the signs and symptoms of child abuse and neglect, and act on their legal responsibility to report their concerns and suspicions. [Chapter 119, Section 51A](#) of the Massachusetts General Laws<sup>78</sup> names educators among the list of mandated reporters - those who are obligated to report suspicions of child maltreatment (Also see Appendix E). Failure to report may result in a fine of up to \$1000 - a penalty that reflects the ethical duty of educators to protect their students and to see that the children in their care are free from barriers to learning. The trauma of abuse and neglect is indeed one of those barriers.



To assist educators in fulfilling these responsibilities there are also requirements in both MA Law and Regulations, as well as in DESE/DCF Advisories that mandate training. The 51A(k) statute states that “a mandated reporter who is professionally licensed by the commonwealth shall complete training to recognize and report suspected child abuse or neglect”. Likewise, MGL, Part I, Title XII, Chapter 71, Section 37L states that “The school committee of each city, town or regional school district shall inform teachers, administrators, and other professional staff of reporting requirements for child abuse and neglect under section 51A of chapter 119...”. MA Regulation 603 CMR 18.05(i) also states that “The school shall describe in writing procedures and staff training relative to the reporting of suspected child abuse or neglect to the Department of Social Services as required by M.G.L. c.119, s.51A and B or, for students over the age of 18, to the Disabled Persons Protection Commission.” Finally, the training requirement is reiterated for school personnel in the [Joint DESE/DCF Advisory Regarding Mandated Reporting Responsibilities of School Personnel in Cases of Suspected Child Abuse and Neglect](#)<sup>79</sup>: “This [training] requirement applies to teachers and administrators licensed by DESE, as well as school psychologists, nurses, and other clinicians licensed by the Commonwealth. It is recommended that such training is completed annually.” (See section on Training below for links to online training).

Education personnel and other mandated reporters are required to immediately report child abuse and neglect to the [Department of Children and Families](#)<sup>80</sup> (followed by a written report within 48 hours) when in their professional capacity they have “reasonable cause to believe that a child is suffering physical or emotional injury resulting from: (i) abuse inflicted upon him which causes harm or substantial risk of harm to the child’s health or welfare, including sexual abuse; (ii) neglect, including malnutrition; (iii) physical dependence upon an addictive drug at birth, or (iv) being a sexually exploited child; or (v) being a human trafficking<sup>81</sup> victim as defined by [section 20M of chapter 233](#)<sup>82</sup> (Also see Appendix E).

There is also a provision in MGL Chapter 119, Section 51A that mandated reporters who are employees of a school (as well as several other public and private institutions), can notify the person in charge (Principal, Head of School, etc.), or an individual designated by that person, of allegations of abuse or neglect. This provision effectively transfers the reporting responsibility to the person in charge or to the school’s “designated agent.” For example, a teacher who learns of allegations of abuse or neglect regarding a student may alert the principal of those allegations and the principal would then be legally responsible to make the report to DCF. If the principal has designated the vice-principal or school counselor as the reporting agent, the report would be made to them. It then legally becomes that individual’s responsibility to file the 51A report rather than the teacher’s. However, nothing in this provision precludes a mandated reporter from contacting DCF themselves (more on this below).

Although it may be difficult for educators to identify and express their concerns about a child who may be experiencing child abuse or neglect, there are several factors that can help to facilitate an immediate and effective response. First, [the physical and behavioral indicators of child abuse and neglect](#)<sup>83</sup> can be identified and educators can learn to recognize them. Teachers and other school support people who have taken courses or had training in child maltreatment will tell you they now have more confidence in their ability to identify the symptoms of maltreatment and feel better able to help children whom they would not have known how to help prior to their course work. Secondly, an educator need not be alone in the process of identifying and reporting suspected child abuse or neglect.

Peers within the school setting can be invaluable in their support. And finally, children who are helped by a concerned educator can benefit from the intervention in a variety of ways. Every year, the prompt intervention of concerned educators ensures that children and their families receive the help they need. But in order to do this, educators must be proactive in their approach. This Manual is also designed to help you in this effort by reviewing the symptoms of the various types of child maltreatment and identifying the steps necessary to respond appropriately through the development and utilization of a school reporting protocol. The development of a school reporting protocol is also encouraged in the aforementioned [“Joint DESE/DCF Advisory Regarding Mandated Reporting Responsibilities of School Personnel in Cases of Suspected Child Abuse and Neglect”](#) (see Section 8). An effective protocol can help to ensure schools that their intervention in child maltreatment situations reflects the best interests of the child.

# Definition of Child Maltreatment

Many educators today are very much aware of the signs and symptoms of child abuse and neglect and for you, this may be a review. However, a review never hurts since abuse and neglect may take very different forms depending upon the case. In this section of the Manual, we have tried to present a variety of different circumstances that reflect the environment in which children live today. But, first, let’s consider the types of abuse and neglect that children may suffer.

Child maltreatment can be broadly defined as any type of cruelty inflicted upon a child, including mental or emotional abuse, physical harm, neglect, sexual abuse, and sexual exploitation and human trafficking by way of being a sexually exploited child or a subject of labor trafficking. Although all states have child abuse prevention statutes and regulations that define these basic categories, specific definitions from state to state may differ. For purposes of this Manual, the Massachusetts Department of Children and Families (DCF) [regulations](#)<sup>84</sup> offer the following [definitions of child abuse and neglect](#)<sup>85</sup>:

- **Abuse:** The non-accidental commission of any act by a caretaker upon a child under age 18 which causes, or creates a substantial risk of physical or emotional injury; or constitutes a sexual offense under the laws of the Commonwealth; or any sexual contact between a caretaker and a child under the care of that individual. Abuse is not dependent upon location (i.e., abuse can occur while the child is in an out-of-home or in-home setting).
- **Neglect:** Failure by a caretaker, either deliberately or through negligence or inability, to take those actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, emotional stability and growth or other essential care; provided, however, that such inability is not due solely to inadequate economic resources or solely to the existence of a handicapping condition. This definition is not dependent upon location (i.e., neglect can occur while the child is in an out-of-home or in-home setting).



- **Emotional Injury:** Is an impairment to or disorder of the intellectual or psychological capacity of a child as evidenced by observable and substantial reduction in the child's ability to function within a normal range of performance and behavior.
- **Physical Injury:** Death, or fracture of a bone, subdural hematoma, burns, impairment of any organ, and any other such nontrivial injury; or soft tissue swelling or skin bruising, depending on such factors as the child's age, circumstances under which the injury occurred, and the number and location of bruises; or addiction to a drug or drugs at birth; or failure to thrive.
- **Institutional Abuse or Neglect:** Abuse or neglect which occurs in any facility for children, including, but not limited to, group homes, residential or public or private schools, hospitals, detention and treatment facilities, family foster care homes, group day care centers and family day care homes.
- **Sexually Exploited Child**<sup>86</sup>: Any person under the age of 18 who has been subjected to sexual exploitation because such person:
  - is the victim of the crime of sexual servitude pursuant to section [50 of M.G.L. chapter 265](#)<sup>87</sup> or is the victim of sex trafficking as defined in 22 United States Code 7105 (See more below on Commercial Sexual Exploitation of Children)
  - engages, agrees to engage or offers to engage in sexual conduct with another person in exchange for a fee, in violation of subsection (a) of section [53A of M.G.L. chapter 272](#)<sup>88</sup>, or in exchange for food, shelter, clothing, education or care.
  - is a victim of the crime of inducing a minor into prostitution under section 4A of M.G.L. chapter 272.
  - engages in common night walking or common streetwalking under section 53 of M.G.L. chapter 272.
- **Human Trafficking**<sup>89</sup>: A person who is subjected to harboring, recruitment, transportation, provision, obtaining, patronizing, or soliciting for the purpose of:
  - sex trafficking (i.e., inducement to perform a commercial sex act, forced sexual services and/or sexually explicit performance).
  - labor trafficking (i.e., forced services, involuntary servitude, peonage, debt bondage or slavery).
- **Problematic Sexual Behaviors (PSB):** PSB are deviations from normative or typical sexual behavior. They are child-initiated behaviors involving sexual body parts (i.e., genitals, anus, buttocks, or breasts) and are [developmentally inappropriate and/or potentially harmful to themselves or others](#)<sup>90</sup> (See more below).

## The Need for a Protocol

As discussed earlier in the section on Scope, the prevalence of child abuse and neglect in the United States is a national tragedy. The purpose of a child abuse and neglect reporting protocol is to help guide one's involvement in the intervention process. Administrators, staff, faculty, and volunteers should be involved in this process for three key reasons:

**First, the effects of abuse and neglect on children are as much a detriment to learning as is any other type of learning disability.**

In addition to teaching, educators also have a responsibility to do all they can to address issues that impede a child's ability to learn. Child maltreatment impacts both [immediate and long-term physical, emotional, and mental health](#)<sup>91</sup>; bonding with caretakers; the ability to concentrate and to learn; and can give rise to behavioral problems. All of these can be barriers to a child's successful school experience.

**Secondly, the teacher is one of the most significant people in a child's life, in many cases, second only to the parent.**

If it is the parent who is abusing or neglecting the child, that child needs the teacher as an ally, someone they can trust and go to for help. This is especially true for elementary age children who develop strong ties with their teacher. But even middle and high school age students will often establish a relationship with a particular teacher or counselor whom they trust and to whom they feel they can turn when in crisis.

**And finally, in every state, educators are mandated by law to report suspected child abuse and neglect.**

Although each state has a different set of regulations and laws regarding child maltreatment, educators are mandated reporters in every one (Crosson-Tower, 2002, 2003, 2021).

But, you may ask, why do we need a protocol for reporting? A protocol is, in a sense, an investment – an investment in a rational, thorough, caring, and fair handling of each and every child maltreatment situation. When child abuse or neglect is suspected, it is often due to a crisis. Or, when a child discloses, or when an educator decides that it is now time to report, it may certainly feel like a crisis. The events that follow may take place in quick succession with little time to think.

When faced with the reporting of child abuse and neglect, it is not uncommon for the educator to feel vulnerable. We often question whether the situation was as bad as we believed it to be. Were these symptoms really indicative of child abuse or neglect? "If I report," educators speculate, "will I get the reputation for being someone who tries to make trouble?"

**A well thought-out protocol is invaluable in enabling the educator to handle a crisis situation quickly and effectively, and goes a long way to make reporting of concerns or suspicions better for both the teacher and the child.**



There are some situations in which the educator may feel that they do not know enough about the type of abuse and need encouragement that their instincts are accurate.

**Having a protocol provides administrators, faculty and staff with support.**

Not only may an educator consult with other professionals and benefit from their expertise, but having a protocol also makes one feel less alone in their suspicion that what is being observed is abuse or neglect. The supported person feels less vulnerable.

According to [state law](#), the educator who reports suspected abuse or neglect in good faith cannot be held liable for doing so<sup>92</sup> (Also see M.G.L., c119, § 51A in Appendix E). Yet, some educators have expressed a fear about being legally vulnerable. A protocol provides not only a record of the procedure to ensure accountability, but also provides a sense of protection for the reporter. Knowing that you are mandated to report, and that you have followed the expected procedure gives further support and assurance that you are not alone.

If you have recognized that a protocol is essential, the content of this Manual and the implementation guidance, model forms, flowcharts, and tools on the Safe Kids Thrive website in the section on [Reporting](#)<sup>93</sup> will enable you to develop one which is tailored to your particular school. Not all schools are alike. Each school has a different population and, therefore, different needs. It is important that you design a protocol that fits your needs, and not simply adopt one from another school.

Perhaps you already have a protocol for reporting suspected child abuse and neglect. This Manual will enable you to review and perhaps fine-tune your protocol. The Safe Kids Thrive website also has both a short, downloadable [self-assessment tool](#)<sup>94</sup> and a comprehensive [child sexual abuse prevention evaluation tool](#)<sup>95</sup> (See Standard 5) to help you assess the elements of your reporting structure. Or you may discover after reading this material that you have a superior protocol. You should then feel confident in the knowledge that you are intervening in the lives of children who are much in need of your help.

# Considerations Before Getting Started

As you consider designing a protocol to meet your school’s needs, it is important to assess exactly what those needs and necessary resources are. Here are a few suggestions:

**What staff do we have to do what?**

It is often good to have someone in the key role of reporter - the person to whom children and staff come to talk about the suspected abusive or neglectful situation. In this day of cutbacks, not all schools have the same support staff. For example, while some protocols have stipulated that allegations of maltreatment should be reported to the school nurse, who would also then examine the child, other schools do not have a full-time nurse.

If the nurse does have a pivotal role, what happens on the days they are not at your school? The best plan is to list or diagram the support personnel and administrators to identify their respective roles and availability. You might also want to consider these factors:

- How do the children see this individual? For example, although the assistant principal may be in a good position to be contacted when teachers suspect abuse, this person may be seen by the students as someone who is in charge of discipline, or someone to whom they are sent when they are in trouble. Consequently, this individual might not be one best suited to deal with children who are being abused or neglected. Or, is the guidance counselor someone who just does scheduling - not someone to whom children might come? It might be best, although this can get tricky, to consider the receptivity of the individual to be designated as the key person rather than just considering their job description. Another approach is to handle this administratively and have the principal do all the reporting to DCF (i.e., the “Designated Reporter” as allowed by the 51A law), while another person is identified as the one who talks to the children and teachers.
- Who, in the school, has the training to become involved in reporting? It is certainly advisable for the people in key roles to be knowledgeable of DCF procedures. One person may wish to develop a knowledge of what will happen when allegations are reported, and a rapport with the local DCF office, so that reporting and intervention can go much more smoothly. It is vital that this person have confidence in the system. The system does work when accessed properly. If those reporting have little confidence in DCF’s ability to help, the child may not be best served.

# Creating a Child Protection Team (CPT)

The following are issues to consider when forming a team:

- How many members will be on the team?
- Who will the members be? Who decides?
- Will the team include a representative from DCF?
- When, where, and how often will the team meet?
- Will the team be responsible only for reviewing allegations of suspected child maltreatment, or will the team also be responsible for making the initial report and filing the 51A?
- Since reporting suspected abuse and neglect is an immediate requirement, what happens if team members are unavailable?
- If the team will be responsible for filing the 51A report, which team member will do this?



- What type of feedback will be provided to the educator who referred the case to the team, and what mechanism will be used to communicate this information?
- What role will the team take after the report has been filed?
- Who determines if, at what intervals, and how the composition of the team will change?
- What type of training will be needed for all school personnel and for team members specifically to effectively implement the protocol?

## Designing a Protocol

### Training

As mentioned above, training is a vital part of implementing a child abuse and neglect reporting plan and is a mandatory annual requirement for educators in the Commonwealth. School personnel should be trained to understand the terms used in child maltreatment allegations, physical and behavioral indicators of child abuse and neglect (Also see Appendix D), applicable law and its implications, reporting procedures, and [what happens when a case is reported](#)<sup>96</sup> to DCF (Also see Flowchart on [Safe Kids Thrive](#)<sup>97</sup> and Appendix I below).

While all of these pieces of information are vital, the well-informed educator should also recognize their own feelings about abuse and neglect, and understand why parents maltreat their children. There are two excellent online training resources for mandated reporters<sup>98</sup> - one offered by the Middlesex District Attorney's Office ([here](#)), and a new mandated reporter training specific to school personnel ([here](#)) - and others - offered by the MA Office of the Child Advocate. These interactive trainings allow you to test your knowledge and responses as well as providing important information. There are other good training resources available both locally and nationally. The Children's Trust and states' Children's Advocacy Centers are good sources of information about a variety of prevention programs for faculty and staff as well as for students. The Safe Kids Thrive website has an [interactive map](#)<sup>99</sup> that allows you to find resources near you, as well as a listing of [state and national resources](#)<sup>100</sup> and their contact information. The website also contains a [schedule of upcoming trainings](#)<sup>101</sup>, meetings and conferences on its "Events" page.

Prevent Child Abuse Georgia (PCA Georgia) and Georgia State University have recently published a [Technical Assistance Resource Guide](#) (TARG 2024) that evaluates multiple school-based abuse prevention programs.<sup>102</sup> In addition the local DCF office may have information regarding community-based resources.

To reinforce the importance and critical role of training, an effective protocol should include a statement to this effect:

The [designate the responsible party] shall be responsible for ensuring that all school staff are provided with in-service training to familiarize them with [at the minimum] the symptoms of child abuse and neglect, their reporting responsibility and procedures, the school protocol, DCF procedures, and their obligations once the case has been reported. (NOTE: All suggested policy language is compiled in Appendix F)

It will be up to the individual school to determine who will be responsible for arranging staff training, as well as the length and content of that training. Ideally, training should be repeated at regular intervals (DESE regulations require annual training) as staff turnover occurs. Additional training (other than the basics) on areas of interest to all staff is also helpful. For example, teachers might find a workshop on promoting positive self-concepts in students helpful for use in the classroom. Or, instead of in-service training for more advanced topics, staff may be encouraged to take advantage of online training programs offered by child protection organizations, colleges and universities, or other groups. In addition to providing needed updates on information, these outside training opportunities often give Continuing Education Units and/or Professional Development Points. If there is a college or university in your area, educators can benefit from taking classes in topics related to child abuse and neglect. Some schools have arranged to have a particular college course taught at their school, and college/university faculty also can be invited to participate in training organized by schools.

In addition to training, many schools have a library of materials such as books, journal articles and audio-visual aids for use by both educational staff and in the classroom (a partial list of available resources is included in the appendices below entitled "Resources for Educators" (Appendix M) and "References and Suggested Reading". Teachers should expect to remain relatively current on child maltreatment materials, and those who need to update their knowledge should request formal training through their school.

Some schools also arrange training for parents. Many parents are receptive to training on parenting skills, and there are several ready-made curricula to address this. The Children's Trust (<https://childrenstrustma.org>) has a lending library of parenting education curricula that schools can access, as well as training programs called "Keeping Kids Safe" and "One Tough Job". Such training helps parents to explore alternatives to behavior which could become abusive, and might include training on discipline techniques alternative to spanking. Many parents will appreciate the support such training can provide in their sometimes difficult role as caregiver. In addition, training sessions for parents provide the school with an opportunity to present the steps they are taking to make the school as safe an environment as possible - including an overview of the policies, procedures, codes of conduct, and screening and hiring practices designed to protect their children from harm.



# Formation of a Child Protection Team

Describing the formation of the Child Protection Team and its responsibilities, and including it in the reporting protocol helps to ensure that it will become a reality:

The [designate the administrator responsible for the formation] will oversee the formation of a Child Protection Team (henceforth called CPT) which will be responsible for reviewing suspected allegations of child maltreatment. The CPT will consist of [list of job titles] and will meet [weekly/as needed/monthly]. The CPT will be chaired by [designate chairperson] who is responsible for convening meetings.

Although some schools believe that the CPT should only meet as needed, it is advisable to schedule more regular meetings. This not only helps the team to form a productive working relationship but keeps communication open and everyone up to date on possible school concerns. Of course, if the CPT is to have a role in the reporting process they will need to be convened quickly since once a mandated reporter’s suspicions of child abuse or neglect reach the threshold of “reasonable cause to believe” the reporting requirement is immediate. If the school’s CPT or designated agent cannot be reached, the mandated reporter must contact DCF and report the suspected abuse or neglect themselves.

# Implementation of Protocol

Once the protocol has been created and adopted, copies should be distributed to all staff, and formal training sessions should be provided to familiarize staff with the content. Although schools may find it difficult to fit in to their existing training or professional development schedules, these should ideally be repeated on a yearly basis. Again, a memo explaining the protocol is far less effective than providing one or more training sessions, perhaps featuring speakers with expertise in child maltreatment and prevention. The secret to having a staff “buy into” the use of a protocol is to demonstrate to them the usefulness of such procedures in making their jobs easier and in helping children. The memo addressing protocol implementation might read:

All school staff will be expected to attend [number] hours of training. This training will be provided by the school and will be designed to promote accurate interpretation and effective ongoing application of the protocol.

It is also useful to discuss this protocol with parents. The subject needs to be presented in such a way that parents recognize that the intent of the protocol is to protect their children by establishing a standardized process that provides direction and supports educators in meeting their responsibility to report, and that reporting is a way to help children who may be crying out for help.

# Recognizing Child Abuse and Neglect

As we consider how to report abuse and neglect situations, it is important to review how information becomes known to educators:

- An educator may suspect or become aware that a child has been maltreated because they observe certain [physical or behavioral symptoms](#)<sup>103</sup> (Also see Safe Kids Thrive section on [Recognizing Abuse and Neglect](#)<sup>104</sup>, and Appendix D);
- Another child, educator, or other adult points out the symptoms or otherwise indicates that a child is at risk; or
- A child self-discloses the alleged abuse or neglect.

Observation: Children who are being abused or neglected may demonstrate behavior which gives us clues about what is happening to them.

Depending on their age, children tell us that there is something wrong in a variety of ways. Physically abused children may strike out against others or, conversely, withdraw and be wary of contact. Neglected children may steal or hoard food or lack the organizational skills necessary to learn. Sexually abused children may demonstrate sexual awareness that is too advanced for their ages, and younger children may regress to earlier behaviors or show fear of certain people (See Safe Kids Thrive section on [Recognizing Abuse and its Effects](#)<sup>105</sup> for additional indicators).

It is important that teachers learn to recognize these “red flags.” Children may actually be crying out for help and telling us, in the only way that they feel safe doing so, that they cannot handle what is happening in their lives. Sometimes suspicion is aroused either by the child’s behavior or by physical indicators such as bruises, but there may not be enough information to give you reasonable cause to believe that the child may have been abused or neglected. So what does the educator do?

The best recourse is to keep your own informal notes. By recording, not in the child’s record, but in your own notes, the child’s name, the date, and the nature of the suspicion, you establish ongoing documentation of what is happening. As you look back on this, you may discover that over time you have gathered enough information to report. This information will also be helpful to the CPT and DCF and should be provided to the intake worker when you call.

Peer Reports: Sometimes friends or classmates of maltreated children learn or suspect that their peer is being abused or neglected.



Out of concern for that child, the classmate may tell a teacher that they believe a peer is being abused, often attempting first to swear the teacher to secrecy. In fact, this is a secret that the educator cannot keep. The classmate must be helped to recognize that the only way to help is to intervene. A classmate may be encouraged to urge the child to come forward. Perhaps the support of a peer will make this possible. Or the teacher may want to talk to or have someone talk to the child who is suspected of being abused or neglected. If the child does not disclose the abuse or neglect, and there is not sufficient evidence to give you reasonable cause to believe that the alleged abuse or neglect has occurred, the teacher should document and be observant in the future.

Disclosure by the Child: Some children will tell a trusted adult about their maltreatment.

When a child discloses that they have been abused or neglected, a teacher or counselor may feel at a loss initially about how to respond. First and foremost, it is necessary to communicate several things to the child: that you are glad the child told you, that you believe them, and that they are not to blame. It often helps for children to know that it has happened to other children and that they are not alone. The response to a child who discloses abuse, if supportive, can have a positive effect on the child’s recovery. The Safe Kids Thrive website section on [Reporting](#)<sup>106</sup> contains more detailed guidance on [responding to self-disclosed maltreatment](#)<sup>107</sup> as well as the following set of printable guidelines.

## Guidelines for Handling Disclosures

As we consider how to report abuse and neglect situations, it is important to review how information becomes known to educators:

- Do not let a child swear you to secrecy before telling you something. You may need to report. Let the child know that there are some things you cannot keep secret if you believe they are harmful to them.
- If a child asks to speak with you, try to find a neutral setting where you can have quiet and few interruptions.
- Do not lead the child in telling their story. Just listen, letting them explain in their own words. Do not pressure them for a lot of additional detail. Remember, educators are not investigators. Forensic interviewing should be left to the professionals at DCF. Trying to get additional detail may interfere with that process.
- Respond calmly and matter-of-factly. Even if the story that the child tells you is difficult to hear, it is important not to register disgust or alarm.
- Do not make judgmental or disparaging comments about the abuser. It is often someone the child loves or with whom they are close.

- Do not make promises to the child that things will get better. In reality, things may get worse before they get better, but conveying this to the child may make them more anxious.
- Do not confront the abuser. This may cause more harm to the child.
- Ask the child if they feel unsafe going home. If they do, and you feel the child is in immediate danger, this should be considered an emergency report and handled immediately by contacting DCF and possibly the local police department (consult with the DCF intake worker). Do not take the child home with you! Provisions should be made by an appropriate agency.
- Respect the child’s confidence and limit the number of people with whom you share the information. You may tell the Child Protection Team, but other staff need not know.
- Explain to the child that you must tell someone else to get some help. Try to let the child know that someone else also will need to talk with them and explain why.

Children who report may be anxious or frightened and need gentle reassurance. They may continue to need encouragement and support at the time, as well as after the report has been made.

## Problematic Sexual Behavior

Up to this point in the Manual we have provided guidance on understanding, preventing, responding to, and reporting child maltreatment perpetrated by adults against the children and youth who are your students. However, children and adolescents can also be subjected to maltreatment by their peers. Problematic Sexual Behavior (PSB), as defined earlier, involves sexual behaviors between children that lie outside of normative or typical sexual behavior. PSBs are child-initiated behaviors involving sexual body parts (i.e., genitals, anus, buttocks, or breasts) that are developmentally inappropriate and/or potentially harmful to themselves or others.<sup>108</sup> As you will see, our understanding of this issue is an evolving one. Our goal in including this section is to provide educators and others with the latest research, information, resources, and guidance as well as an update on the actions the Commonwealth is taking to enhance interagency collaboration and to build effective intervention and treatment strategies.

In recent years, there has been an increasing awareness as well as a number of research studies about the high number of children (0-18 years) who are sexually harmed by other children or adolescents. Among the reported cases, early research indicated that over one third (35.6%) of all incidents of child sexual maltreatment in the U.S. are committed by other children or teens.<sup>109</sup> However, more recent survey studies of older adolescents and parents of younger children found that as many as 70-77% of the sexual assaults and abuse experienced by children and teens were committed by other children or teens.<sup>110</sup> The difference in these estimates has been attributed to the fact that the earlier studies relied either on case information that had been reported to the authorities or on information being recalled retrospectively by adults who were harmed as children. Conversely, the newer studies used anonymously gathered parent reports (for children up to age 9) and self-reports from youth ages 10-17.



Thinking of children or youth as capable of causing sexual harm or engaging in problematic sexual behavior with other children or youth can be difficult to consider and challenging to address. We must be cautious, however, not to look at children with problematic sexual behavior through the same lens as adult sexual offenders. Even though some of the behaviors of children and adolescents with PSB may resemble those of adult sexual behavior, the reasons for the behavior are quite different. Research has shown that PSB in childhood (and the risk of reoffending) arise from combinations of individual, family, social, and developmental factors which are in contrast to the motivations of adult sex offenders and their low levels of responsiveness to treatment<sup>111,112</sup>. Research also shows that children with PSB are at minimal risk to reoffend, or to become adult sex offenders, especially if they receive appropriate treatment.<sup>113,114,115</sup> In fact, [a recent meta-analysis of children and adolescents with PSB](#) who received appropriate intervention (education, skills training, and therapy that included parent engagement) concluded that the recidivism rate was less than 3%.<sup>116</sup>

Another caution for educators and other caregivers to be aware of (especially those unfamiliar with the issue) is that it's not always easy to tell the difference between normal sexual curiosity and behaviors that are problematic or potentially harmful or abusive. The following may be helpful in that regard.

## Normal Sexual Development vs. Sexually Harmful/ Abusive Behaviors

Children's bodily and sexual awareness starts in infancy and continues to strengthen throughout preschool and school-age years. Many children engage in some form of sexual behavior or play - sometimes with other children or siblings - and show sexual interests throughout their childhood years, even before they reach puberty. Knowing about children's behavior and how it changes as they grow can help educators determine if a child's sexual behavior is typical or something to be concerned about. It is important to be able to distinguish between age-appropriate and age-inappropriate sexual behaviors. In general, normative (or expected) sexual behaviors in young children:

- Are usually not overtly sexual (do not include simulating adult-like sexual behaviors);
- Occur between children of about the same age and size;
- Are more exploratory, spontaneous, and playful in nature rather than planned;
- Do not show a preoccupation with sexual interactions;
- Occur infrequently;
- Are not hostile, aggressive, or hurtful to the child or to others; and
- Are easily diverted when parents/caregivers tell the children to stop and explain the privacy rules.

In contrast, sexual behaviors of childhood and adolescence are a concern when they are extensive or suggest preoccupation or involve others in ways that are not consensual. That is, sexual behaviors in children are problematic and present a special concern:

- When they appear as prominent features in a child's or youth's life;
- Where there are greater differences in the children's/youths' ages and size or developmental ability;
- When manipulation, bribery, coercion, threat or force are employed;
- When sexual play or behaviors aren't welcomed by other children/youth involved in the play;
- When the behaviors are beyond the expected knowledge for the child's/youth's age; or
- When the behaviors interfere with other age-appropriate activities.

This is the point where "play" crosses the line into sexually problematic, harmful, and aggressive behaviors. There are a number of publications that describe the differences between normative and problematic sexual behaviors in children and youth. For example, the website of the [National Center on the Sexual Behavior of Youth](#)<sup>117</sup> (NCSBY) has descriptive information for both parents and professionals on the [differences between normative and problematic sexual behavior](#)<sup>118</sup> divided into different age ranges from early childhood to adolescence.

Often, the types of behaviors that "cross the line" can be warning signs that a child or youth has witnessed physical or sexual violence at home and are copying what they have seen. Others may have been exposed to, or had contact with, inappropriate sexual activities or material and are reacting to the experience. These children/youth may express or demonstrate knowledge of sexual activity that is normally beyond the understanding of others of similar age. Still others may have been exposed to sexually explicit movies, video games, or other pornographic materials. In other instances, a child or youth may act on a passing impulse with no harmful intent but may still cause harm to other children/youth. It is always important to seek help promptly in instances of suspected or observed problematic sexual behaviors between children and/or youth.

Children who report may be anxious or frightened and need gentle reassurance. They may continue to need encouragement and support at the time, as well as after the report has been made.

In these cases, you and your staff should take the following steps:

- If there is reasonable cause to believe that a child/youth has been sexually abused, file a 51A with DCF. (DCF Office locations, office hours, phone numbers, instructions, and report forms can be found in the DCF's [Report Child Abuse or Neglect](#) page on the Mass.gov website<sup>119</sup>).
- DCF will screen the 51A Report to determine if a response is warranted.



- Regardless of the outcome of the screening decision, DCF typically makes a DA referral.
- The CACs (Children’s Advocacy Centers<sup>120</sup>) work collaboratively with the DA offices and will determine their response to these referrals; this could include therapeutic services.

Additional information for Massachusetts educators and others can also be found in several policy, guidance, and district-specific model documents:

- [Joint DESE/DCF Advisory](#)<sup>121</sup> Regarding Mandated Reporting Responsibilities of School Personnel in Cases of Suspected Child Abuse and Neglect (2021). See paragraph 19.
- [EOHHS Interagency Collaboration & Practice](#)<sup>122</sup> Related to Problematic Sexual Behaviors (2016)
- [DCF Adolescent Sexual Offender Policy](#)<sup>123</sup> (2008) (Ages 13-18)
- Boston Public Schools Superintendent’s Circular EQT-3 (School Year 2021-2022): [Sexual Misconduct Toward Students](#)<sup>124</sup>
- Supplemental Guidance to Support EQT-3 Superintendent’s Circular: BPS Responses to Child-Child Incidents of Sexual Behavior [ages 11 and under]: Guidance for Informing Caregivers (Updated September 2021 - See Appendix N).

Problematic sexual behavior in schools and other youth serving organizations requires coordinated intervention and services in a number of areas. Children and youth who engage in problematic sexual behaviors with other children/youth need specialized help and support to stop the behavior, and the children/youth who are victimized by those behaviors need help to recover from the trauma. Counseling for the caregivers and the families of the children/youth is also an important component to successfully stop the behavior

Massachusetts laws and policies in this area can be confusing but are continuing to evolve in order to ensure that the intervention for children and youth with PSB is focused on identification, intervention, and effective treatment rather than criminal investigation and punishment. For example, legislation was passed in 2018 ([An Act Relative to Criminal Justice Reform, Bill S.2371](#)) that decriminalized sexual behaviors by children under the age of 12 which allows for families to seek help without fear of prosecution (See Nov 2019 [commentary](#)<sup>125</sup> on the law from the MA Juvenile Justice Policy and Data Board).

Several efforts are currently underway in Massachusetts and elsewhere to support a better, more coordinated and comprehensive response to children and youth with problematic sexual behaviors. Since July 2020, the MA Legislative Task Force on the Prevention of Child Sexual Abuse (co-chaired by the Children’s Trust and the MA Child Advocate) has funded a PSB Learning Collaborative administered by the Massachusetts Children’s Alliance (MACA). This initiative - in conjunction with training staff from the National Center on the Sexual Behavior of Youth - is designed to increase clinical training and capacity, services, and awareness of PSBs across the state through the network of Children’s Advocacy Centers.

In 2021, the Task Force also created a PSB Working Group co-chaired by the [Massachusetts Society for a World Free of Sexual Harm by Youth](#)<sup>126</sup> (MASOC), and the Children’s Trust (CT). Working group membership includes representation from the MA Children’s Alliance (MACA), the Children’s Advocacy Center of Suffolk County (SUF), the Office of the Northwestern District Attorney, UMass Lowell, Whitney Academy, The Center for Hope and Healing, and the MA Departments of Elementary and Secondary Education (DESE), Children and Families (DCF), Public Health (DPH), Early Education and Care (EEC), and Youth Services (DYS). This multi-agency collaboration is in the process of conducting an in-depth environmental scan to outline the gaps and challenges as well as the unique strengths and opportunities in the state for developing a comprehensive, evidence-based approach to preventing and responding to children and adolescents with PSB. The first portion of this scan, [Overview of the Research on Children and Adolescents Engaging in Problematic Sexual Behavior](#),<sup>127</sup> was published on the Safe Kids Thrive website in February 2023. Updates will be posted on the Safe Kids Thrive website.

Additional resources for understanding and responding to students with PSB in school settings:

[Responding to Problem Sexual Behavior in Children and Young People: Guidelines for Staff in Education and Care Settings](#)<sup>128</sup> (2013). Department for Education and Child Development, Catholic Education South Australia, Association of Independent Schools of South Australia

[Protocol for Responding to Sexualized Behavior in Schools](#)<sup>129</sup> (2019) Ministry of Education, British Columbia, Canada

[Problematic sexual behavior among children and youth: Considerations for reporting, assessment, and treatment](#)<sup>130</sup> (2018). Auburn, AL: Military REACH.

[National Center on the Sexual Behavior of Youth: Resources and Downloads \(Schools\)](#)<sup>131</sup>

## *The Impact of Culture*

With the increasing diversity in the population of the United States, and therefore in our schools, comes the need to recognize the impact of culture on the recognition of child maltreatment and the educator’s response to it. Some cultures have values, attitudes and practices that, while accepted in the country of origin, may be considered to be abusive or neglectful in this country. For example, some ethnic groups favor corporal punishment, even to the point of being severe, as a form of discipline. Other groups have practices that leave scars that make it appear that the child has been abused. For example, “cao gío” or coin rubbing used in some Vietnamese families to ward off illness may leave scars that look like welts. If one is teaching in an area where a particular cultural group is prevalent, it is advisable to learn about their customs. However, DCF workers are trained in cultural differences as well and if there is any question on your part that a child is being abused or neglected, a call to the DCF office is warranted.



In addition, some cultural groups are more open about discussing their family issues than others. It is not always easy for us, as those who observe and must report child maltreatment, to discern what are cultural issues from actual abuse or neglect. It may also be difficult to separate our values from our interpretation of what we observe.

Responding to cultural differences suggests the need for educators to have training in cultural sensitivity, but even this may not always suffice in all situations. Having a knowledgeable CPT with whom to discuss suspected maltreatment can be especially helpful in instances where culture is a factor. And having a representative of DCF available to that team helps to support staff in making the appropriate decision about reporting.

# Can I Really Believe this Report?

You have either heard the child’s report, or another child has told you that a friend is being abused, but it is still hard to believe. Perhaps one of the most difficult types of reports is that of sexual abuse. For this reason, it might be helpful to share another piece of information: Sexual abusers do not just groom the child; they often groom the family and the community as well (Crosson-Tower, 2003, 2015, 2021).

# Grooming

Grooming refers to one of the ways in which an adult abuser can manipulate a child into a sexual relationship - by using a process that desensitizes the child to the abuse. Sexual abuse may begin with seemingly benign behaviors like rubbing a child’s back, tickling, or observing the child nude or while using the bathroom. Over time the abuser will become more sexual and intrusive in their behavior toward the child. This is physical grooming. However, by this time the child has often learned to trust the abuser and enjoys the attention they are receiving from that person (psychological grooming). If the child resists at some point, most abusers will not use force, but rather will cajole (“Come on, this is our special game together.”) or coerce the child (“If you don’t do this, I won’t be your friend anymore.”). Eventually the child begins to believe that they might even have invited the abuse, so skillful is the abuser in the grooming process.

At the same time, a sexual abuser might well be grooming the family, co-workers, and/or the community so that when the child reports, that child may not be believed. Abusers groom other adults by portraying themselves as very concerned about the well- being of children, while at the same time convincing others that they are responsible, caring citizens (See the Safe Kids Thrive section on [Grooming](#)<sup>132</sup>, and a list of [warning signs](#)<sup>133</sup>). Offenders are active decision makers who constantly evaluate the risk of what they are doing against the risk of being caught.

Some abusers will actively try to manipulate organizational conditions to create an opportunity to sexually abuse. Organizational culture was cited as a key contributory factor in a significant number of inquiries into institutional child sexual abuse. Recent studies report that a significant proportion of perpetrators surveyed stated that the culture of the organization in which they offended did not proactively promote child welfare (Erooga et al., 2012; O’Leary et. al., 2017). When an abuser has successfully accomplished grooming the adults around them, it is not uncommon for a community to actually protect the abuser against a child’s report.

Again, the fact is that children rarely make false reports about sexual abuse and, if and when they have the courage to disclose their abuse, should be believed. Nevertheless, it is not up to you, the educator, to determine if a report is true or false. It is DCF’s responsibility to assess the situation at intake, decide if child abuse and/or neglect occurred, and make the appropriate response. **Educators are not investigators.** When in doubt, make the report to DCF and leave the decisions to the professionals.

# Procedure in Child Abuse and Neglect Situations

The actual procedure for reporting should be straightforward and easy to follow. It might be worded in your protocol as follows:

Any educator or support staff member who has reasonable cause to believe that a child is being exploited or the victim of human trafficking is mandated to report this suspicion. No person so required to report shall be liable in any civil or criminal action by reason of such report if made in good faith.

The staff member who suspects child maltreatment (henceforth referred to as the reporter) should immediately notify the [designated person] who will convene the CPT, which shall meet as soon as possible. The reporter will present their suspicions to CPT and provide the team with any documentation that may be available. If the CPT deems this a reportable situation, the [designated individual] representing the CPT and the reporter will immediately telephone the Department of Children and Families (DCF) to report and file a 51A report.

If the CPT cannot be convened in a timely manner, and the reporter has determined that there is reasonable cause to suspect child maltreatment or that the child is at immediate risk, the law requires that a mandated reporter shall immediately report such condition to DCF by oral communication and by making a written report within forty-eight hours.



It may also happen that an educator will consult with the CPT, and the team does not feel that the case should be reported to DCF. Does the reporter have any recourse? The law states that all educators are mandated to report. A teacher who has reasonable cause to believe that the alleged abuse or neglect occurred, even if the CPT decides not to report, must act upon their suspicions.

In this case, the educator, as a mandated reporter, is legally obligated to call DCF and make the report. Again, the purpose of the CPT is to be a consultative and supportive body rather than a limiting one. The CPT cannot prevent a teacher from reporting. Thus you might include in the protocol a statement such as this:

The fact that the CPT does not advise reporting a situation to DCF does not relieve the educator from their responsibility to report directly to DCF if they continue to have reasonable cause to believe that the suspected abuse or neglect did occur. The (name of school) will not discharge or in any manner retaliate or discriminate against any person who, in good faith, submits a report of child abuse or neglect.

A comment should be made about documentation. Documentation refers to facts gathered and observations that the educator may have made regarding the child. It is not necessary to establish “certainty” in order to report. The law states that it is only necessary to have “reasonable cause to believe.” Documenting what one has observed and heard from the child and parents is very helpful. But again, **the educator must realize that they are not the investigator.** Keep in mind that it is neither appropriate nor necessary to question the child in detail about the alleged abuse or neglect, even if the child has told you about it. This is not only unfair to the child, who may be questioned again by DCF and possibly by other professionals, but you may also run the risk of compromising future interventions if it is determined that your questioning of the child constitutes “leading” or “biasing” a witness. If a child discloses alleged abuse or neglect, just let them talk and explain things in their own terms. Remain sympathetic but ask as few questions as possible. If you are in doubt as to whether the situation being described by the child is reportable, call DCF.

## Bringing in Others

Let us now return to the process of filing a report through the CPT. An educator has brought their concerns to the team, and the CPT determines that this situation should be reported to DCF. It may be helpful for the CPT also to give DCF the names of other school personnel who are familiar with the child in question and can provide information regarding the allegations of the report. All mandated reporters are required by law to answer questions posed by a DCF investigator in the course of an investigation even if they are not the individual who filed the 51A report being [investigated](#).<sup>134</sup> The protocol might stipulate:

When making the report, the CPT will identify other individuals within the school who may have information about the particular child that is relevant to the alleged abuse or neglect. These individuals should be notified by the CPT so that they may be contacted by DCF.

It is certainly possible for an individual educator to file the 51A report directly with the support of the CPT. It is recommended that schools designate a person to be the primary contact with the local DCF office.<sup>135</sup> This can help to ensure that there is at least one person designated to represent the school who is sufficiently knowledgeable about child abuse/neglect reporting and response procedures, and who can facilitate communication between DCF and the school.

Within 48 hours of the oral report, the CPT will submit a written report to the Department of Children and Families.

DCF will supply schools with written forms upon request. The 51A form may be also downloaded from their website [here](#)<sup>136</sup> and from the Safe Kids Thrive website in the section entitled “[How to Report Child Sexual Abuse](#)”.<sup>137</sup> Note that this form is updated periodically, so it is a good idea to check the DCF website from time to time to see if your school has the correct updated forms. A copy of the updated form is also included in this Manual as Appendix H.

Finally, an important document for educators to be aware of is the revised “Joint DESE/DCF Advisory Regarding Mandated Reporter Responsibilities of School Personnel in Cases of Suspected Child Abuse and Neglect” (October 27, 2021). A copy of the Advisory can be found [here](#).<sup>138</sup> It might be helpful for a member of the CPT to keep up to date on any changes and make others within the school aware of them. The responsibilities of mandated reporters might also be a part of the periodic safety training that the school provides.

## Understanding the Department of Children and Families (DCF) Response

It is important for educators to realize that DCF may screen out a report of abuse or neglect and not pursue an investigation/response. It is the responsibility of DCF to determine if there is reasonable cause to believe that the child has been maltreated. Certainly, documentation by the educator of any facts that support the allegation(s) helps DCF make the decision as to whether there is reasonable cause to believe that the child has been, or may be at risk of being, abused or neglected.



If a case is screened out due to insufficient current evidence, or the need to refer the case to another agency (i.e., to law enforcement because the alleged perpetrator was not a caregiver), this does not necessarily mean that the case is closed or that the educator was wrong to suspect abuse. While not every call results in an investigation by DCF, teachers may not know what information was previously or subsequently reported about the child or the family by other concerned individuals (dentist, pediatrician, Sunday school teacher, etc.). The screening process includes DCF reaching out to collateral contacts for more information. The cumulative effect of all the reports may lead DCF to screen in the case and to provide help and intervention.

Some schools may choose to keep a confidential record of the reports made by the CPT. The purpose of this is to have something to refer to if, at a later date, the team once again feels that there is a possibility of abuse or neglect. These records, for confidentiality purposes, should be kept locked and separate from the child’s file. They are only available to one person who can bring them to the CPT. This individual is usually the school counselor, as this knowledge may be helpful in understanding the child’s future behavior.

All reports made by any member of the school staff should remain confidential. The reports of the CPT will be kept in a separate confidential file by the designated person for as long as the child is a student in that school district. This information should NOT be part of the child’s academic records or folders. Education laws and regulations regarding student records and their retention can be found on the [DESE website](#).<sup>139</sup>

# Anticipating Emergencies

Provisions should also be made in the school protocol for emergency and other potentially reportable situations which do not fall within the school day:

If an educator determines that it is necessary to file a report after school hours, they must notify [designated person or persons]. This individual will notify, by phone if necessary, the members of the CPT. The CPT and the reporter will then be responsible for filing the report with DCF. If the educator making the report feels it is an emergency and is unable to reach the [designated person] or any CPT member in a reasonable amount of time, they file the report directly with DCF and notify the CPT as soon as possible.

When making a call to DCF, the educator will probably be asked if the reporter feels that there are any factors in the situation that require an immediate response. It is sometimes difficult for educators to answer this question. While it is not the educator’s responsibility to determine what is an emergency, they may be aware of factors that would be helpful for DCF to know. For example, factors such as substance abuse or domestic violence in the home, a parent with anger issues and a very short fuse, and the possibility that the parents may take the child and flee can pose more risk to the child. If the educator is aware of such risk factors, they should mention them to DCF during the initial call.

Educators who learn of maltreatment after school hours may be unsure of how soon to respond. Should they call the emergency hotline or wait until the next morning to call DCF? In other words, what constitutes an emergency? Whenever a child tells us about alleged abuse or neglect it may feel like an emergency - and we certainly do not want to leave a child unprotected. As we have said elsewhere in this Manual, if what the child is describing to you gives you a reasonable cause to suspect that the child is being (or is in danger of being) abused or neglected, then DCF must be contacted immediately.

Educating oneself on what is needed for an organized and rational report, may help to prevent the panic and haste that often accompany having to report an abuse or neglect situation. Some types of maltreatment–neglect for example–may have been going on for some time and may not be classified as an emergency by DCF. But if other risk factors are present, the situation may require more immediate attention.

Therefore, if you feel that the child might be in any danger if they go home, advise the DCF worker of your concerns and the reason for them. **Remember, it is the responsibility of the DCF intake worker to decide if the situation represents a true emergency and requires an immediate response.**

When children tell, they are usually seeking help then and there. Therefore, it is important that whatever procedure your school puts in place, it can operate effectively after hours as well. The potential reporter should have a list of people on the CPT who can act so that if one is not available, another can be reached. There is nothing worse for either the teacher or the child than seeking help and reaching dead ends wherever one turns. It is always possible for a child to disclose after normal business hours. For this reason, DCF maintains an after-hours hotline (1-800-792-5200) that can be called on nights, weekends, and holidays. It is important that school personnel are provided with this information.

Schools may find it helpful to construct a 1-page flow chart (See Appendix K) that consolidates this information in a step-by-step process with reporting instructions, phone numbers at DCF (both during and after business hours), the names and numbers of CPT contacts, and the numbers of local law enforcement offices. A printable [sample](#)<sup>140</sup> can be found on the Safe Kids Thrive website in the section on [Downloadable Resources](#).<sup>141</sup>



# Notifying the Family

In creating procedures for reporting, the question always arises: “Should the school notify the family and, if so, when?” This is a much-debated concern. On one hand, if a family is told before DCF has had a chance to become involved, there is a possibility that the child could be further harmed with little or no protection being offered. The family could remove the child from school or flee the area. Yet, some people argue that if the family is told before the report is made, they can be helped to recognize that the intent of the report is to help rather than punish. It is obvious that there are pros and cons to each approach. The rule used by most schools is to ask direction from DCF. Does DCF want the school to tell the family or will DCF do so? **The bottom line is the protection of the child and this must always be the paramount concern.**

Educators have sometimes asked if they will be in any kind of danger if the family knows they have reported. DCF regulations do not allow it to disclose the name of a reporter unless ordered by a court or required by statute such as when DCF is required to provide the 51A report to the District Attorney or other law enforcement (110 CMR 12.08). Schools should follow suit and have internal policies referring family questions to DCF about which staff member brought the concern forward rather than disclose the name. Even if the family was told, abusive families, with few exceptions, are dangerous only to their own children and to each other, usually not to other adults outside of the family. Most families desperately need assistance and can be helped to recognize that concerned adults want them to be successful in their parenting. If, however you feel that you might be in personal danger, let the DCF worker know this and why.

After the report has been made, the reporter is usually interested in what happens. Some reporters voice their frustration with DCF for not giving follow-up information. This is true in many cases for confidentiality reasons. If a report is screened out, DCF is required to provide the mandated reporter (who files the report) a letter explaining that this action was taken. If the case is screened in for investigation, DCF also is required to inform the mandated reporter, in writing, of the outcome of the response. Some reporters suggest that this is not always done, and/or they do not receive sufficient information. If a mandated reporter does not hear back about the status of the filing, they should call DCF and ask for the information they are entitled to. That said, it is important to remember that information sharing is governed by a number of state and federal statutes which limit the amount of case-specific information that DCF is able to provide. The best suggestion is to develop a rapport with DCF, possibly through the representative to the CPT. While this person may not be able to tell you about a particular report, they can sufficiently acquaint you with DCF procedure so that you and the school may feel better informed. It is usually best to designate one person to be a liaison with DCF. For example, the protocol may read:

After reporting a case to DCF, the [designated reporter], representing the CPT, will monitor the outcome of the report. This information will be kept confidential and will be available only to the CPT and the original reporter.

If you continue to have questions or concerns about a decision made by DCF, you can speak to a supervisor at the Area Office. If you are still dissatisfied, talk to the Area Program Manager, and then the Area Clinical Director. There is also an Ombudsman at the Department’s Central Office with whom you can discuss your concerns (see Appendix G below). You may also speak with the Office of the Massachusetts [Child Advocate](#).<sup>142</sup>

# Protecting the Child’s Privacy

Once a report has been filed, it is important that the child not be singled out in any way. A child from an abusive or neglectful home has enough stress at home without experiencing it at school. Therefore, the child should not be questioned about the reported situation. If the child chooses to talk about it to the reporter, this is fine, but the educator should not initiate the discussion. Some school protocols address this by saying:

Once the information has been provided to the CPT, no child will be subjected to further emotional stress or risk by being questioned by any member of the team or by other school personnel.

# When the Department of Children and Families (DCF) Becomes Involved

You have made the call to DCF and then filed a 51A report. Now what will happen? When DCF receives a report of abuse and/ or neglect from a mandated reporter (or from anyone else concerned about a child’s welfare), Department personnel are required to evaluate the allegations and decide about the risks to, and the safety of the child(ren) involved. This process is guided by the DCF [Protective Intake Policy](#)<sup>143</sup> (May 18, 2021) and is designed to clearly articulate a primary and immediate focus on child safety in screening and responding to reports of child abuse and neglect.

The Protective Intake Policy is divided into two phases: (1) the screening of all reports; and (2) an investigative response to any report that is screened in. The screening and investigative response contained in the Policy are briefly summarized below.



# Screening

- Requires non-emergency reports of abuse and neglect to be reviewed and screened in or out in one day. Emergency reports require an immediate screening decision and an investigatory response must be initiated within two hours.
- Mandates review of all information about the child and caregiver’s prior DCF involvement and review of any comparable information available from child welfare agencies in other states, including cases in which a parent has previously lost custody of a child.
- Requires CORI (Criminal Offender Record Information), SORI (Sexual Offender Record Information), and national criminal history database checks of parents/ caregivers and all household members over 15 years old.
- Requires requests from law enforcement for information on 911 calls and police responses to the residence of any child or family involved in a report of abuse or neglect.
- Requires a mandatory referral to the responsible District Attorney’s Office and local law enforcement if it is determined that the report involves a criminal act against a child (as defined in the policy) that requires such a referral (e.g., sexual assault, sexual exploitation, human trafficking, serious physical abuse, etc.)
- Establishes a formal Screening Team in all 29 area offices comprised of screeners, supervisors, managers, and others that meet daily, review reports of abuse or neglect as defined by the policy, and make a screening decision (screen in or screen out) on non-emergency 51A reports and reports that involve 3 separate 51A incidents in 12 months. Reports requiring an emergency response are NOT held for review by the Screening Team.

# The Investigative Response

All reports that are screened in:

- Are immediately assigned for a response by a Response Worker. The response must be initiated and completed within the time frames defined in the Policy.
- Require Response Workers to interview parents, caregivers and other children in the home as well as the person allegedly responsible for the abuse or neglect.
- Enable Response Workers to search online sources for information relevant to assessing child safety.
- Include an assessment of parental capacity by evaluating whether the parent understands how to keep the child safe, uses appropriate discipline methods and provides for the family’s basic needs, among other criteria.

- Mandate use of the Department’s Risk Assessment Tool to assess potential future risks to the child’s safety.

The policy framework also includes staff and case supervision requirements, and outlines circumstances that require supervisors to seek assistance from Department managers, attorneys or clinical specialists for collaborative review of complex cases.

During DCF’s screening and response process, all mandated reporters are required to answer the Department’s questions and provide information to assist in determining whether a child is being (or is at risk of being) abused and/or neglected, or is a victim of human trafficking for sexual exploitation, or of human trafficking for labor, and in assessing the child’s safety in the household.

When the initial call is made, and when filling out the 51A, the reporter should be prepared to provide the following information if known (Also see [Mandated Reporter’s Guide](#)<sup>144</sup> on the Safe Kids Thrive website):

- Your name, address and telephone number, and your relationship (if any) to the child(ren).
- All identifying information you have about the child and parent or other caregiver, and information about other children in the household if known.
- The nature and extent of the suspected abuse and/or neglect, sexual exploitation and/or human trafficking, including any evidence or knowledge of prior injury, abuse, maltreatment, or neglect.
- The identity of the person(s) you believe is/are responsible for the abuse and/ or neglect.
- The circumstances under which you first became aware of the child’s injuries, abuse, maltreatment or neglect, sexual exploitation, and/or human trafficking.
- What action, if any, has been taken thus far to treat, shelter, or otherwise assist the child(ren).
- The child’s visibility within the community (e.g., child care, school attendance. etc.).
- Emergency contact information for the children being reported, and languages spoken in the household.
- Any concerns about alcohol, drug use, misuse by the parent/caregiver.



- Any other information you believe might be helpful in establishing the cause of the injury and/or person(s) responsible, any concerns you have for social worker safety.
- Any information that could be helpful to DCF staff in making safe contact with an adult victim in situations of domestic violence (e.g., work schedules, place of employment, daily routines).
- Any other information you believe would be helpful in ensuring the child’s safety and/or supporting the family to address the abuse and/or neglect concerns (other contributing or high risk factors, the family’s strengths and capacities, etc.).
  - Other examples of information you may have: restraining orders between members of the child’s household (particularly if active at the time of the report); identified weapons in the home; known sex-offenders in the home; information on other non-caregiver adults living in the home

NOTE: If you do not have all this information, do not let this keep you from filing. File with what information you do have and let the professionals make their determinations.

Next, as outlined above, the report is screened. The purpose of the screening process is to gather sufficient information to determine whether the allegation meets the Department’s criteria for suspected abuse, neglect, or risk of human trafficking (i.e., is a “reportable condition”); whether there is immediate danger to the safety of a child; and whether DCF involvement is necessary to ensure the child’s safety and well-being. Reports that are determined to be emergencies are screened in immediately and a response must be initiated within two hours. Reports that are not emergencies are screened within one working day.

During the screening process DCF obtains information from the person filing the report and also gathers information from other sources including professionals involved with the family, such as doctors, nurses, or other service providers who may be able to provide information about the child’s condition. Screeners will also review DCF records and databases to determine any prior involvement of the parents or caregivers or their children; talk with other DCF staff who may have knowledge of the child or family; request information from child protection services in other states; conduct CORI/SORI checks of parents/ caregivers and others living with the family; contact the District Attorney’s Office and local law enforcement;<sup>145</sup> search online sources and social media; and may request a clinical review.

As a result of this process, the report is either screened in for an emergency response, screened in for a non-emergency response, or screened out. If the report is screened in for emergency response, the screener has determined that the failure to take immediate action would pose a substantial risk of death, serious emotional or physical injury or sexual abuse to a child, and an investigative response is initiated within two hours. An initial determination of the child’s safety is completed within 24 hours, and all response activities as well as a report documenting the DCF response must be completed within five days.

If a report is screened in for a non-emergency response, it has been determined that although the child may have been abused or neglected, or may be at risk for abuse, neglect, or human trafficking, the situation as reported does not pose an immediate threat to the child. In these cases, a response must be initiated within 2 working days and all response activities including a report must be completed within 15 working days (See Appendix I: What Happens When DCF Receives a 51A Report). In either case, when the case is screened in, and the DCF response supports the initial allegation(s), the case is assigned to a response worker who is responsible to complete the assessment and response plan.

## Anticipating the Impact of Implementation

Whenever educators consider reporting child abuse and neglect situations, questions arise which should be considered. The following are a few of the most commonly asked questions:

### What if DCF does not respond immediately?

There are several reasons why DCF might not respond immediately. First, although you have immediate concerns about a child, DCF may determine that the situation does not warrant an emergency response (Earlier, we discussed that situations involving suspected child abuse or neglect may or may not represent a true emergency). One way to avoid confusion is to ask, during the initial contact with the Department, what time frame DCF anticipates for responding to this situation. This may also help you to give anticipatory guidance to the child – that is, to be able to tell the child what will happen next. Certainly, if it appears that the child is in immediate danger and cannot go home, the school should ensure that they provide DCF with all available information explaining the immediacy of the situation. If this requires an additional call and the social worker who took the initial report is not available, ask to speak with their supervisor. **In cases of immediate danger, the reporter should also contact law enforcement in addition to calling DCF and filing the 51A.**

Remember that emergencies are something the DCF social workers have learned to assess. A report is not considered to constitute an emergency if DCF determines that available information does not indicate that the situation is one in which failure to take immediate action would pose a threat of immediate danger to the child. In non-emergency investigations, DCF is required to respond with a home visit and to have a face-to-face meeting with the reported child within three working days of receipt of report and to complete its response within fifteen days.



As stated above, if DCF determines that the report does constitute an emergency the investigation will commence within two hours of initial contact and an interim report with an initial determination regarding the child’s safety and custody will be completed as soon as possible but not more than twenty-four hours after initial contact. DCF’s final report will be complete within five business days of initial contact.

When DCF determines that an allegation does not require an immediate course of action, staff will often help the reporter with suggestions for the interim. No matter how frustrated you feel, it does not help the child or the situation to become angry and critical of DCF. Just like educators, these professionals attempt to do the best job they can with a limited amount of time and resources.

**What if I know that the police (or other mandated reporters) have filed a 51A on the same situation that concerns me? Do I still need to file?**

Yes. Keep in mind that your report may not be the only piece of information DCF has on the child or the child’s situation. Other reporters (friends, neighbors, pediatricians, relatives, a Sunday school teacher, etc.) may have also alerted DCF about their suspicions. There may already be an open case on the child. The point is that even if you know other mandated reporters have filed a 51A concerning the same situation, it remains your legal obligation to call DCF and file a report. Your information or experience with the child may (or may not) be the piece that tips the scale and causes DCF to intervene. Only DCF has access to this accumulated “universe” of information - individual reporters do not. This information puts DCF in the best position to make decisions about how and when to respond. The benefit of the doubt should always be given to the child - if you suspect a child is in danger - REPORT.

**What if DCF screens out the report?**

Among the reasons presented in this section (below), if available information is not sufficient for DCF to determine that there is reasonable cause to believe that a child has been abused or neglected, the report will be screened out. As such, it is important that you provide the Department with all the information which you believe might aid DCF in determining whether or not the alleged abuse or neglect occurred. It is wise to have as much information available as possible when you call the Department (See Appendix G, “Filing an Effective 51A Report.”). Again, if you do not have all this information, do not let this impede your filing. File with what information you have and let the professionals make their determinations.

Having documentation of relevant facts, dates, quotes, etc., can help to ensure that information is accurately conveyed at the time the report is filed. Documentation can also facilitate your recollection of what has gone on with the child over time. However, your decision to file or not file a report should not be based on whether or not you think you have sufficient documentation.

Remember, as a mandated reporter you are required to report if you have a *reasonable cause to believe* that a child is suffering abuse or neglect. The suspected abuse or neglect must be immediately reported to the Department by oral communication and by making a written report within 48 hours after the oral communication (See Appendix H, “51A Report Form”).

If a report is screened out, it may also be because the alleged perpetrator of the abuse or neglect has been identified, and they were not in a caregiver role during the time when the abuse or neglect took place. With the exception of human trafficking allegations, cases where the alleged perpetrator was not in a caregiver role are beyond DCF’s authority to address and are normally referred to the District Attorney. Cases of problematic sexual behavior between children and youth (which are currently required to be reported to DCF) are also situations that DCF will normally screen out with a referral to the DAs and agencies equipped for evaluation and treatment.

Also, if a report is screened out, it does not mean that you cannot file another report at a later date. In the interim, documenting can help in establishing your own record of what is going on with the child, and this information can be useful if you decide to file a report in the future. Again, the case that has received several reports, whether screened in or out, can be a source of critical information. In the meantime, help the child by remaining available, acknowledging concerns, helping them to enhance self-esteem, and continuing to provide them a positive school experience. Educators can be an invaluable source of support, and one should not underestimate the influence that they have on children.

**What if the child knows that DCF has been contacted and DCF has screened out the report?**

Explain, as appropriate to the child’s age and development, that they are believed, but the Department will not be conducting an investigation because there is not sufficient information and/or the situation (i.e. alleged perpetrator is clearly not a caretaker) does not fall within the Department’s mandate and is being referred to others for help. In the meantime, you hope that you and the child can continue to talk and you also will work with them to find additional ways to address the concerns they have raised. Above all the child should not feel abandoned by you. The fact that DCF did not screen in the report does not preclude you from offering help by exploring other mechanisms and resources to assist the child and their family.



## What if the parents remove the child from school?

This has happened - and there is always a possibility that it will happen again. However, once the report has been made, approaching the parents with concern and offers to help (perhaps through the local [Family Resource Center](#)<sup>146</sup>) can often help to prevent this situation. Remember that most abusive and neglectful parents are those who have not had their own needs met. They often feel overwhelmed, and even those who are initially angry may respond positively to the caring professional. If the child is moved to another school, that school will have to send for the records. A call to DCF informing them of the child’s removal, and to the child’s new school or teacher may ensure that they will be protected in the future.

## What if the child has made up a story about being abused or neglected?

As stated above, children usually do not make up stories of this type. Even the children who present themselves as mistreated may have discrepancies in the story, or their affect may also provide clues that the story is fabricated. However, the educator may not always be able to determine the extent to which a child’s story is accurate. Consult the chart on physical and behavioral indicators of abuse and neglect (see Appendix D). Remember, educators are not investigators. If enough of these appear to be present, you are mandated to report your suspicions.

# A Word About Commercial Sexual Exploitation of Children (CSEC) and Human Trafficking

As stated elsewhere in this Manual, the term Human Trafficking is used by DCF as an umbrella term to include the two allegations of abuse: Human Trafficking - Sexually Exploited Child, and Human Trafficking - Labor.

Victims of human trafficking in the United States include children, both girls and boys, involved in the sex trade who are coerced or deceived into commercial sex acts for the financial benefit of another person, and children forced into different forms of labor or services, for example, as domestic workers held in a home, or farm-workers forced to labor in exchange for shelter or threats of deportation.

While exact numbers are difficult to assess, it was reported that in 2020 there were 10,583 confirmed instances of human trafficking in the United States that involved the sex or labor trafficking of 16,658 individuals.<sup>147</sup> In terms of human trafficking and the commercial sexual exploitation of children (CSEC) within the United States, the National Center for Missing and Exploited Children (NCMEC) reported that in 2020 it received 17,200 reports of possible child sex trafficking - and those reports came from all 50 states.<sup>148</sup> In 2021, the NCMEC CyberTipline received more than 29.4 million reports of online child sexual abuse material (CSAM) involving photographs and videos of the sexual assault of minor children (including infants), most of which were related to online enticement, including “sextortion”, child sex trafficking, and child sexual molestation.<sup>149</sup>

Other examples of human trafficking of children include the commercial sexual exploitation of boys and girls on the streets or in a private residence, club, hotel, spa, or massage parlor; exotic dancing/stripping; agricultural, factory, or meatpacking work; construction; domestic labor in a home; restaurant/bar work; illegal drug trade; door-to-door sales, street peddling, or begging; or hair, nail, and beauty salons. Traffickers may target minor victims through social media websites, telephone chat-lines, after-school programs, at shopping malls and bus depots, in clubs, or through friends or acquaintances.

As with child abuse and neglect, there are certain signs and vulnerabilities that children exhibit when they are victims of human trafficking. Children with these background elements can and do fall prey to this form of victimization:

- History of emotional, sexual, or other physical abuse.
- History of running away or current status as a runaway. Traffickers know runaways are in a vulnerable situation and target places such as shelters, malls, or bus stations frequented by such children.
- Signs of current physical abuse and/or sexually transmitted diseases. Such signs are indicators of victimization, potentially sex trafficking.
- Inexplicable appearance of expensive gifts, clothing, or other costly items. Traffickers often buy gifts for their victims as a way to build a relationship and earn trust.
- Presence of an older boy- or girlfriend. While they may seem “sophisticated” and “protective”, older boyfriends are not always the caring men they appear to be.
- Drug addiction. Pimps frequently use drugs to lure and control their victims.
- Withdrawal or lack of interest in previous activities. Due to depression or being forced to spend time with their trafficker, victims lose control of their personal lives.
- Gang involvement, especially among girls. Girls who are involved in gang activity can be forced into prostitution.

A more complete list of physical and behavioral indicators can be found on the NCMEC fact sheet entitled “[Child Sex Trafficking Overview](#)” (2022).<sup>150</sup>



Children or youth who may be at risk of or who are victims of human trafficking may also show signs of shame or disorientation; demonstrate an inability to attend school on a regular basis and/or have unexplained absences; make references to frequent travel to other cities; exhibit anxiety, or fear; lack control over their schedule and/or identification or travel documents; are hungry, malnourished, deprived of sleep, or inappropriately dressed (based on weather conditions or surroundings); and have coached or rehearsed responses to questions<sup>151</sup>. **Children who exhibit these physical and behavioral symptoms must be brought to the immediate attention of DCF, as this form of abuse (human trafficking) requires mandatory reporting.**

In terms of CSEC prevention education for children and educators, a recent (2021) [literature review](#)<sup>152</sup> showed that although there are a few promising programs, there is little available in terms of training programs that have undergone any formal or rigorous evaluation for effectiveness. There is significant evidence that prevention education in school settings has proven to work across a variety of contexts. Yet, despite the [policy guidance and national-level agreement](#)<sup>153</sup> that schools are uniquely positioned to provide trafficking prevention education, only three states have enacted legislation to mandate CSEC education for children. A small number of other states, including Massachusetts, require educators to receive training on child trafficking awareness and identification, but stop short of making it mandatory.

A [2013 report](#)<sup>154</sup> by the Massachusetts Interagency Human Trafficking Policy Task Force did recommend trafficking education for educators, school nurses, school counselors, and other school personnel but, again, no state mandate was enacted.

However, in 2019 the U.S. Department of Justice awarded the Massachusetts Attorney General's Office a grant to develop a Massachusetts Task Force to Combat Human Trafficking. The [Commonwealth Anti-Trafficking \(CAT\) Task Force](#)<sup>155</sup> is a multidisciplinary organization that is a model for locally led anti-human trafficking task forces. The effort is a collaboration between the U.S. Attorney's Office, the Massachusetts Attorney General's Office, direct service providers, and state, local, and federal law enforcement to proactively investigate and effectively prosecute human trafficking in Massachusetts while also providing trauma-informed comprehensive services for its victims. The CAT Task Force receives referrals for all types of human trafficking cases and has a list of Massachusetts victim services providers. Referrals or questions should be communicated to the CAT Task Force through the Attorney General's Office or via email to [CATTaskForce@mass.gov](mailto:CATTaskForce@mass.gov).

Finally, the [Massachusetts Office for Victim Assistance](#)<sup>156</sup> provides a downloadable list of [Human Trafficking & Commercial Sexual Exploitation of Children Services by County](#)<sup>157</sup>, and the Children's Advocacy Center of Suffolk County has a [fact sheet on the Commercial Sexual Exploitation of Children](#)<sup>158</sup> including a list of physical, behavioral, and emotional indicators and red flags. Despite the caveats above, CSEC training and awareness programs and resources do exist and are available through the websites of the [Justice Resource Institute](#),<sup>159</sup> [My Life My Choice](#),<sup>160</sup> [Darkness to Light](#),<sup>161</sup> the National Center for Homeless Education<sup>162</sup> (with specific links for educators), and the [Polaris Project](#).<sup>163</sup>

# ***Sustaining A Trauma-Sensitive Environment***

We began this new edition of the Manual by discussing how to create school-wide safe environments and abuse prevention frameworks for children that are trauma-sensitive, promote safety, and reduce the risk of child maltreatment. We have identified the signs and symptoms and outlined the reporting process and the DCF response.

In addition to creating healthy, trauma sensitive school environments for all children, and developing familiarity with the reporting process, school personnel should consider other ways in which they can contribute to prevention and intervention that are specific to child abuse and neglect and can be adopted in every classroom.

Although the purpose of this Manual is to guide educators in preventing, recognizing and reporting child maltreatment it is important that this be seen in the context of creating a safe and trauma-sensitive environment for all children. Trauma-sensitive environments are those that recognize that trauma can contribute to school failure both academically and socially. Statistics tell us that a significant number of children in the United States today have been victims of some type of trauma including child maltreatment.

Trauma-sensitive environments as well as success in educational environments have been found to be protective factors associated with recovery from traumatic experiences in childhood. Building a school environment that is trauma-sensitive begins with a shared understanding among all educators and staff that children come from varied backgrounds and many have been exposed to different types of trauma. The goal within the school setting is that all children should feel safe (including traveling to and from school), comfortable, and able to learn. Further, through the use of a well-integrated team of educators and staff, the school helps not only to remove students' barriers to learning but facilitates the development of individual students according to their unique needs. For more information on trauma-sensitive schools, see the section entitled [Helping Traumatized Children Learn](#)<sup>164</sup> on the website of Harvard University's Trauma and Learning Policy Initiative.

Part of protecting children from trauma, or from the effects of trauma involves not only the above-described reporting process, but other ways in which school personnel can contribute to prevention and intervention in situations involving child abuse and neglect.

There are many excellent abuse-specific prevention materials available today, and it is possible to integrate them into the curriculum pieces which will help both the maltreated and the non-maltreated child. One example was suggested by pediatrician Ray Helfer, an early expert in the field of child maltreatment. Helfer's "five concepts which parents from dysfunctional families have never learned" may still have some credibility today. By helping their children to learn these simple skills, one can interrupt the cycle of abuse.



These skills are:

- How to get one's needs met appropriately
- How to separate feelings from actions
- How to delay gratification
- How to take responsibility for one's own actions and not the actions of others
- How to make decisions (Crosson-Tower, 2021)

Incorporating these skills into lessons in the classroom is not difficult and can benefit all children. There are also many different types of programs and curricula designed to teach educators, parents, and other adults about child abuse and neglect, the types of disclosures, the ways that offenders operate in communities, the signs and symptoms children exhibit when they are being or have been abused, and the local and state statutes regarding the reporting of suspected abuse or neglect to civil authorities. These programs also include instruction on how to communicate with children about these issues, how to create and maintain safe environments, and how to intervene when children are at risk.

The more comprehensive programs employ taped interviews with offenders, parents of victims, and the victims themselves to train educators about the grooming process, and the warning signs of abuse and its aftermath. Many also offer other preventive suggestions about the employment application process, criminal background checks, standard interviews, and reference checks for all employees and volunteers, monitoring programs, school security, communicating with children, and communicating concerns about behaviors or circumstances that lead one to suspect abuse is taking place.

The Children's Trust and the state's Children's Advocacy Centers are good sources of information about a variety of prevention programs for faculty and staff. The Child Welfare Information Gateway also has a web page dedicated to [multiple prevention topics](#).<sup>165</sup>

There are also a variety of specific tools which teachers can use to provide special help to a maltreated child. For example, there are books (designed for children) about the court process which might give the child a better understanding of (and diminish anxiety about) what may happen if they go to court. Introducing these and other such aids into the curriculum would help not only the abused/neglected child but also provide new insights for their classmates. There are also school-based child personal safety programs such as "Talking About Touching" (TAT), that is now part of an expanded Second Step curriculum and an online Child Protection Unit (CPU) created by the [Committee for Children](#) (cfchildren.org) based in Seattle, Washington.

In addition to Second Step and the Child Protection Unit, there are many other personal safety programs that teach children basic skills that will help them keep safe from dangerous or abusive situations, particularly sexual abuse. But care must be taken in their selection. Well-designed, evidence-based, and developmentally sequenced personal safety programs enable teachers, parents, caregivers, and child-care providers to provide the rules, information, encouragement, and skills practice children need to help protect themselves against abuse. The best programs are based on the most current research in prevention education and are rigorously evaluated for effectiveness.

National research (sponsored by the National Center for Missing and Exploited Children and others (NCMEC)) has defined the elements that go into an effective abuse prevention training program for children, and has suggested a range of evaluative criteria to test outcomes. This research indicates that the best quality, most effective programs are those that are:

a) research based; b) begin early; c) use developmentally appropriate materials; d) utilize active, systematic and specific skills training; e) have multiple program components such as classroom training combined with parental involvement; f) use interactive instructional techniques that provide children multiple opportunities to observe the desired behavior, model the behavior and get feedback; and g) are instituted as a comprehensive part of the child's education - being repeated many times during the school year, and instituted over several years of instruction.

NCMEC has developed guidelines to assist educators and others in their review of prospective programs. A report entitled [Guidelines for Programs to Reduce Child Victimization, A Resource for Communities When Choosing a Program to Teach Personal Safety to Children](#)<sup>166</sup> continues to be an excellent resource that outlines a set of criteria, resources, and tools for consideration.

The National Sexual Violence Resource Center has evaluated multiple programs and presents its findings in a report titled [Child Sexual Abuse Prevention: Programs for Children](#).<sup>167</sup> Prevent Child Abuse Georgia (PCA Georgia) and Georgia State University have recently published a [Technical Assistance Resource Guide](#) (TARG 2024) that evaluates multiple school-based abuse prevention programs.<sup>168</sup> The Safe Kids Thrive website also has a section on Training that includes [Guidelines to Help You Build an Effective Training Program](#)<sup>169</sup> and includes a [Training Program Design Checklist](#),<sup>170</sup> resources, and a [Child Sexual Abuse Evaluation Tool for Organizations](#)<sup>171</sup> (See Standard 6).

Creating an environment where traumatized children can flourish and learn can present more of a challenge than finding prevention materials. Children who have been traumatized by maltreatment may seem less academically engaged and less socially competent, having more difficulty connecting with other children. This may also present a challenge in terms of ways to interest them in learning activities. [Current research](#)<sup>172</sup> suggests that prolonged exposure to trauma alters brain chemistry which in turn impacts learning. Some children suffer from post-traumatic stress (PTSD) as a result of their abuse. This means that they become constantly attuned to threats they perceive from the environment and may also re-experience the feelings they had when being abused. They may also be diagnosed with attachment disorder meaning that they have difficulty bonding with adult caretakers and may therefore not be eager to comply with requests that might be another child's way of pleasing adults. For more information on these factors in a school environment see Garofoli (2018).

Educators seeking to provide trauma-sensitive environments in their classrooms must first educate themselves as to the effects of trauma not only on cognition and learning but on behavior. Staff-wide training by those familiar with trauma-sensitive care is highly recommended as such sensitivity is attitudinal in nature (Rossen, 2020). Some traumatized children may be eligible for special education services and this is also important. Trauma-sensitive schools must also be aware of the needs of the staff whose own possible trauma histories might be triggered by working with traumatized children. To learn more about these issues, see the website of the [Center on Child Wellbeing and Trauma](#)<sup>173</sup> (CCWT) - a new resource for child-serving organizations in Massachusetts, delivering trauma-informed and responsive (TIR) information, tools, and training.



The educator must also consider how to help the child after they become involved with DCF. Today [trauma-sensitive and trauma-informed care](#)<sup>174</sup> is the guiding principle among social service agencies and DCF strives to not re-traumatize children in the act of helping. For this reason, the child’s supports - especially educators - can be instrumental in insuring that they are helped effectively. While confidentiality concerns limit the amount of case-specific information that can be shared, DCF and the schools are not precluded from collaborating to meet the child’s needs. A child’s best interests are of paramount concern to both, and the extent to which professionals understand their respective roles and limitations and work together can help to ensure that children’s needs are best met. Remember that being involved in the DCF system is not easy for children. It might be the concerned teacher who provides security and consistency as the child goes through this process.

## Self-Audit and Sustainment

An important element - both to answering questions about progress, and providing feedback to staff, students, parents and other school stakeholders, is data. Therefore, it is important in the early stages of building a child safety framework to also think about the questions that need to be periodically answered, the data that need to be collected to answer those questions, and opportunities and methods to measure quality, improvement, and outcomes. Some questions - among others - that might help frame your thought process about data collection and analyses are:

- How many people are there in the school (and in each job classification) who require the safety training?
- How many of those have received the required training?
- How many are left to train? (by which you can be aware of organizational elements that are excelling or lagging)
- How many abuse reports have been filed? What types? (Who is collecting the incident reports?)
- Have race and ethnicity data on the reports also been collected?
- Were the incident reports handled properly? (Did the person aware of the incident know what to do, and do it within school policy and state guidelines and time frames?)
- Have the safety materials been distributed?
- Has everyone who received the required training also received a background and criminal history check?
- Have all members of the organization received and signed the Code of Conduct?
- Do staff, faculty and volunteers in direct contact with students know what to do in an emergency, whom to contact, what to report, the resources available to them?
- If students are also part of the training initiative, are they learning and using the skills that the program is intended to teach?

- What other criteria will you use to judge program performance?
- What standards of performance on the criteria must be reached for the program to be considered successful?
- What conclusions about program performance are justified based on the available evidence?
- How often will you conduct data collection?

In short, sustaining the significant accomplishment of establishing a child abuse prevention framework requires more than just implementing it. It requires an ongoing commitment to continuously assess the efficacy of what has been accomplished and to regularly communicate progress and outcomes to all elements of the school community.

The website of the Child Welfare Information Gateway has a comprehensive list of evaluation methodologies, including some state and local examples, on its page entitled [Tools for Evaluating Prevention Programs](#).<sup>175</sup> The Safe Kids Thrive website also provides guidance on program [Analysis, Review, and Self-Audits: Collecting Data](#)<sup>176</sup> that also includes a section on [Incorporating Training Programs into Organizational Culture](#)<sup>177</sup> as well as a sample data collection tool.

## Projections for the Future

Recent research indicates that, despite year-to-year fluctuations, various forms of child abuse and maltreatment, including both reported and substantiated allegations, have declined over the past decade and a half.<sup>178,179,180</sup> Although encouraging, we must not lose sight of the fact that millions of children in the United States continue to be maltreated and victimized every year. They are among our most vulnerable citizens and deserve our protection.

The more violent our society becomes, the more involved children are in abusive situations. It is critical that school personnel fully understand their roles and responsibilities relative to the reporting of child abuse and neglect, that they work to increase their knowledge of prevention strategies, and are aware of and collaborate with the range of intervention and prevention services available.

As the opioid epidemic remains prevalent, children will continue to be exposed to parents and family members who are addicted to drugs, and infants will continue to be born addicted. The effects on the children are myriad. From developmental problems to fetal alcohol syndrome, children feel not only the physical effects but the emotional ones as well. For example, it is becoming more common for children to experience the trauma of a family member’s overdose. In addition to educators being informed about the effects of these substances, prevention programs can be helpful in attempting to intervene in this national problem.



Children also continue to be the victims of domestic violence at home. Even if the child is not physically injured, the emotional scars of fear, powerlessness, and rage take their toll. DCF is addressing this problem through expanded training initiatives, and there are domestic violence specialists available to all area offices. Thus, children who witness one parent’s abuse by the other can also be helped.

Many of the social problems of today will be eased by education, awareness, and preventive action. Where better to promote such awareness than in school? Prevention programs may not only help the children of tomorrow, but may identify the children who are suffering today. And, through school-sponsored programs like classes and support groups, parents can learn better parenting skills and be more effective in their roles. In fact, the educator is in an important position to help both children and parents. How many adults owe their survival through a difficult childhood to the perseverance of one concerned educator?

While the school as a whole is important in preventing child maltreatment, it is the individual who is often in a position of carrying out these efforts. As mentioned previously, reporting suspected child maltreatment is necessary to prevent it from continuing. The attitude of the reporter can affect the progress the family is able to make once the report is filed. The educator, who recognizes the strengths of both children and their parents and is supportive and available to the family throughout the investigation, treatment, and rehabilitation process, helps the family maintain its dignity and protects the child.

But simply implementing a safety and abuse prevention framework as outlined in this Manual is not the same as sustaining its effectiveness over time. It is critically important that school leadership speak regularly with staff about the commitment to maintain a school environment that is conducive to the safety of children, and the importance of what the individual teacher does to support that commitment. Child abuse is neither a pleasant topic of conversation, nor an issue that most people are comfortable discussing. But your attitude will go a long way to maintaining the required vigilance and openness required to deal with it effectively. You can learn more about strategies to implement and sustain systemic organizational change on the Safe Kids Thrive website in the section on [Sustainability](#)<sup>181</sup> and its resources.

By the same token, staff should be helped to recognize that most abusive and neglectful parents sincerely care about their children and are in need of help themselves. Parents will be much more amenable to working with you if their concern for their children is recognized and communicated to them by your staff.

The bottom line is that we can help to ensure the creation of safe, healthy, and trauma-sensitive environments for our children and their protection from child abuse and neglect by educating children about appropriate and inappropriate contact with adults and helping them to develop the skills and language to communicate with parents and caretakers; by building faculty and staff awareness of the signs and symptoms of child abuse and the responsibilities and mechanics of mandated reporting; by involving parents as partners in prevention education; and by instituting capable Child Protection Teams and preventative policies, practices, and protocols in our schools.

A Note to Readers Outside of Massachusetts: As a Manual for Massachusetts educators, you will find a certain amount of state-centric material and information (reporting laws and timelines, forms, state agencies, etc.). But the preponderance of evidence-based and evidence-informed guidance, decision-making structures, tools, primary prevention concepts, organizational concerns, and implementation and sustainment practices are universal and can be applied to the goal of protecting children in any school or youth-serving organization no matter how large or small. If you consider the Manual to be potentially useful to your consumers and stakeholders, please feel free to tailor the material by inserting your own state specific content as needed.



# References and Suggested Reading

- CAPTA (Child Abuse Prevention and Treatment Act). Health and Human Services, Administration for Children and Families. (2010), at <https://www.acf.hhs.gov/cb/law-regulation/child-abuse-prevention-and-treatment-act-capta>
- Caldwell, M. F. (2016, July 18). *Quantifying the decline in juvenile sexual recidivism rates*. *Psychology, Public Policy, and Law*, 22(4), 414-426. doi: 10.1037/law0000094.
- Chaffin, M. (2008). *Our minds are made up--Don't confuse us with the facts: Commentary on policies concerning children with sexual behavior problems and juvenile sex offenders*. *Child Maltreatment*, 13(2), 110-121. <https://doi.org/10.1177/1077559508314510>
- *Child Maltreatment* (2021). U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2023). Available from <https://www.acf.hhs.gov/cb/report/child-maltreatment-202>
- Christiansen, A. K., & Vincent, J. P. (2013). Characterization and prediction of sexual and nonsexual recidivism among adjudicated juvenile sex offenders. *Behavioral Sciences & the Law*, 31(4), 506-529. <https://doi.org/10.1002/bsl.2070>
- Craig, S. (2017). *Trauma-Sensitive Schools for the Adolescent Years*. New York: Teachers College Press
- Crosson-Tower, C. (2002). *When Children are Abused: An educators guide to intervention*. Boston: Pearson.
- Crosson-Tower, C. (2003). *The role of educators in preventing and responding to child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services.
- Crosson-Tower, C. (2015). *Confronting Child and Adolescent Sexual Abuse*. Thousand Oaks, CA: SAGE.
- Crosson-Tower, C. (2021). *Understanding Child Abuse and Neglect*. Boston: Pearson.
- Cowley, E.P. (2018). *Preventing Abuse and Neglect in the Lives of Children with Disabilities*. New York: Springer.
- Dorias, M. (2009). *Don't Tell: The Sexual Abuse of Boys*. Montreal, CA.: McGill-Queens University Press.
- Education World (2016). "Incorporating Cyber Ethics into Your Culture" retrieved on May 29, 2016 from [https://www.educationworld.com/a\\_tech/tech/tech055.shtml](https://www.educationworld.com/a_tech/tech/tech055.shtml)
- Erooga, M. and Masson, H. (Eds.). (2006). *Children and Young People Who Sexually Abuse Others*. New York: Routledge.
- Erooga, M, Allnock, D & Telford, P (2012), Towards safer organisations II: using the perspectives of convicted sex offenders to inform organisational safeguarding of children, NSPCC, UK, <https://www.nspcc.org.uk/globalassets/documents/research-reports/towards-safer-organisations-2012-report.pdf>
- Finkelhor, D. and Jones, L. (2006). Why Have Child Maltreatment and Child Victimization Declined? *Journal of Social Issues*, Vol. 62, No 4, pp. 685-716.
- Finkelhor, Ormrod, and Chaffin (2009). Juveniles Who Commit Sex Offenses Against Minors: *OJJDP Juvenile Justice Bulletin*, (December 2009): <https://www.ojp.gov/pdffiles1/ojjdp/227763.pdf>
- Finkelhor, D., Saito, K., and Jones, L. (2020) Updated Trends in Child Maltreatment 2022: Crimes Against Children Research Center, University of New Hampshire. ([https://www.unh.edu/ccrc/sites/default/files/media/2023-03/updated-trends-2021\\_current-final.pdf](https://www.unh.edu/ccrc/sites/default/files/media/2023-03/updated-trends-2021_current-final.pdf))
- Fontes, L. A. (2008). *Child Abuse and Culture*. New York: Guilford
- Ford, J.D. (2012). Ethnoracial and Educational Differences in Victimization History, Trauma-Related Symptoms, and Coping Style. *Psychological Trauma: Theory, Research, Practice, and Policy*, 4, 177-85.
- Garofoli, L. (2018). "Trauma-Sensitive Educational Settings". In C. Crosson-Tower, *Exploring Child Welfare: A Practice Perspective*, (pp 129-146). Boston: Pearson.
- Gewirtz-Meydan & Finkelhor (2019). Sexual Abuse and Assault in a Large National Sample of Children and Adolescents. (<https://www.unh.edu/ccrc/sites/default/files/media/2022-03/sexual-abuse-and-assault-in-a-large-national-sample-of-children-and-adolescents.pdf>).
- Horwath, J. (2007). *Child Neglect: Identification and Assessment*. London: Palgrave Macmillan.
- Iwaniec, D. (2006). *Emotional Abused and Neglected Child: Identification, Assessment and Intervention*. New York: John Wiley and Sons.
- Jennings, P.A. (2018). *The Trauma-Sensitive Classroom*. New York: Norton.
- Jennings, P.A. (2019). Teaching in a Trauma-Sensitive Classroom: What Educators Can Do to Support Students, *American Educator*, 43:2, 12-17.
- Johnson, T. C. (2010). *Understanding Children's Sexual Behaviors*. San Diego, CA.: Institute on Violence, Abuse and Trauma.
- Jones, L. and Finkelhor, D. (January 2001). The Decline in Sexual Abuse Cases. U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention (OJJDP) *Juvenile Justice Bulletin*, at <https://ojjdp.ojp.gov/library/publications/decline-child-sexual-abuse-cases>
- McElvaney, R. (2013). Disclosure of Child Sexual Abuse: Delays, Non-disclosure and Partial Disclosure. What the Research Tells Us and Implications for Practice. *Child Abuse Review*, 2013. (<https://www.nationalcac.org/wp-content/uploads/2016/10/Disclosure-of-child-sexual-abuse-Delays-non-disclosures-and-partial-disclosures.-What-the-research-tells-us-and-implications-for-practice.pdf>)



- O’Leary, P, Koh, E, & Dare, A (2017), Grooming and child sexual abuse in institutional contexts, Royal Commission into Institutional Responses to Child Sexual Abuse, Sydney. (<https://www.icmec.org/wp-content/uploads/2018/04/Research-Report-Grooming-and-child-sexual-abuse-in-institutional-contexts-Prevention.pdf>).
- Rizzuto, A.P. and Crosson-Tower, C. (2012). *Handbook on Child Safety for Independent School Leaders*. Washington D.C.: National Association of Independent Schools.
- Rossen, E. (Ed.). (2020). *Supporting and educating traumatized students: A guide for school-based professionals* New York, NY: Oxford University Press.
- Rossen, E., & Cowan, K. (2013). The Role of Schools in Supporting Traumatized Students. *Principal’s Research Review*, 8, 1-8.
- Saul J, Audage NC. (2007). *Preventing Child Sexual Abuse Within Youth-serving Organizations: Getting Started on Policies and Procedures*. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007.
- Sax, R. (2009). *Predators and Child Molesters: What Every Parent Needs to Know to Keep Kids Safe*. New York: Prometheus.
- Shawler, P. M., Elizabeth Bard, M., Taylor, E. K., Wilsie, C., Funderburk, B., & Silovsky, J. F. (2018). Parent-child interaction therapy and young children with problematic sexual behavior: A conceptual overview and treatment considerations. *Children and Youth Services Review*, 84, 206-214.  
<https://doi.org/10.1016/j.childyouth.2017.12.006>
- Shewchuk, D. (2019) *Understanding & Healing Children Who Act Out Sexually*. New Westminster, British Columbia, Canada: Shewchuk-Dann.
- Silovsky, J. F., Swisher, L. M., Widdifield, J., & Burris, L. (2012). Clinical considerations when children have problematic sexual behavior. *In Handbook of Child Sexual Abuse* (pp. 399-428). Wiley-Blackwell.  
<https://doi.org/10.1002/9781118094822.ch18>
- Statman-Weil, K. (2015). Creating Trauma-Sensitive Classrooms. At <https://www.naeyc.org/resources/pubs/yc/may2015/trauma-sensitive-classrooms>
- vanDam, C. (2006). *The Socially Skilled Child Molester*. New York: Haworth.





# Appendices

## APPENDIX A: A History of This Manual

The original version of this Manual was published by the Children’s Trust in 1998 under the title “Designing and Implementing a School Reporting Protocol: A How-To Manual for Massachusetts Educators”. Upon completion, as with all subsequent editions, the Manual was posted on the Trust’s website, distributed electronically, and printed and distributed in hardcopy to schools across the Commonwealth free of charge.

The Manual was updated and reissued in 2012 as a second edition under the same title, and a third edition followed in 2016. However, in addition to its updates on reporting requirements, abuse statistics, and current research, the third edition of the Manual purposefully integrated an additional emphasis on child sexual abuse *prevention* - including evidence-based guidance, practices, and resources.

To reflect this new emphasis and expanded focus, the title of the 2016 Protocol was changed to “Steps Toward Child Abuse Prevention & Creating Safe School Environments: A How-To Manual for Massachusetts Educators.”

The impetus for the integration of more prevention-oriented content into the Manual was derived from the responsibilities of the Children’s Trust as co-chair (with the Office of the Child Advocate) of a (then) new Legislative Task Force on the Prevention of Child Sexual Abuse.<sup>182</sup> The Task Force (established by the MA Legislature in 2014) convened in 2015 for the purpose of developing guidelines and tools for the development of child sexual abuse prevention and intervention plans for Massachusetts child- and youth-serving organizations (YSOs). The Task Force Report<sup>183</sup> was published in June 2017 and represented a significant step forward in terms of providing evidence-based guidance, tools, model policies, checklists, toolkits, and resources focused on the prevention of child sexual abuse

The publication of the Report was immediately followed by a series of regional public consultations in 2017 and 2018 (called Community Forums) with schools and other YSOs across the Commonwealth to introduce the community to the work of the Task Force and the existence of the report; to discuss the current state of primary prevention practice in the regions; and to gauge the kinds of supports, tools, and technical assistance needed by the YSO community to assist their organizational efforts in the primary prevention of child sexual abuse. These consultations provided a wealth of information about child sexual abuse prevention policies, procedures, practices, protocols, and needs in the state’s YSOs. Among the strongest need expressed was a desire for easier accessibility to the primary prevention guidance and resources in the Report.

Consequently, the Task Force and the Trust turned their attention to the development and refinement of a free, publicly available website designed to host the Report in an online, user-friendly, interactive, and searchable format. This was accomplished in late 2020 with the launch of “[Safe Kids Thrive](#)”.<sup>184</sup> With the continuing support of DESE, EEC, the MA Afterschool Partnership, the Alliance of Boys and Girls Clubs, DPH, and others, subsequent forums/training series focused in 2021 on introducing the Safe Kids Thrive website to YSOs that were either opening as the COVID-19 pandemic quarantines were being lifted or anticipating opening during the summer and early fall. These trainings included the participation of, and feedback from K-12 principals and district administrators, early education programs, after-school programs, community learning center initiatives, residential education programs, day care centers, day and overnight summer camps, Boys and Girls Clubs, and others.

During this same period, there were also significant developments in the evolving area of the identification, intervention, and treatment of children and youth who exhibit Problematic Sexual Behavior (PSB). PSBs occur when a child’s sexual behaviors go beyond what is typical for their age and development and may pose a risk to the safety and well-being of themselves or others. Since July 2020, the Children’s Trust and Task Force have funded a PSB Learning Collaborative administered by the Massachusetts Children’s Alliance (MACA) to increase clinical training, services, and awareness of PSBs across the state through their network of Children’s Advocacy Centers, and an environmental scan being conducted by MASOC to collect information about what services are offered to children and adolescents with PSB in Massachusetts as well as any opportunities to improve the services and resources for these children and their families.

Finally, in 2018, the Children’s Trust and the Task Force participated as a panelist on the DESE/DOE effort to update the 1999 Massachusetts Comprehensive Health Curriculum Framework for Massachusetts public schools. The panel - comprised of school superintendents, district managers, principals, school nurses, guidance counselors, teachers, parents, and others from schools in every region of the state - worked from November 2018 to April 2019 to accomplish this task. As a panelist, the Trust and Task Force ensured the integration of learning standards and objectives related to personal safety, healthy relationships, and child sexual abuse prevention for students in Pre-K to Grade 12 into the draft document. The interaction with other panelists provided additional insight into the perspectives of school leadership and front-line staff and their desire to have a positive impact on their students’ health and well-being.

In summary of the above, a lot has happened since the 2016 Manual was published. These separate, but interrelated projects, experiences, and developments provide a body of resources and content that did not exist during any previous update. Certainly, the impact of the pandemic years has been felt in the provision of services and will continue to influence and perhaps change policies in the future. (It may be too soon to tell how these changes will play out).

This fourth edition, therefore, seeks to capitalize on this body of work, and to expand its prevention focus further by linking to the resources and content (particularly on the SKT website) to the fullest extent possible without significantly expanding the size of the Manual. Our goal is to continue to define the resources, knowledge, tools, and actions available to educators for the primary prevention of child sexual abuse, and to support the critical task of building and sustaining a strong, effective and safe school environment.



# APPENDIX B: Acknowledgements

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The MA Sex Offender Registry Board - in particular Judy Norton, Director, Victim Service.

# APPENDIX C: Safe Kids Thrive Web Addresses (by prevention elements and section and endnote number)

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(1) <https://safekidsthive.org/>

## Introduction

(4) <https://safekidsthive.org/>

## Policies and Procedures

(28) <https://safekidsthive.org/prevention-topics/policies-procedures/>

(29) <https://safekidsthive.org/prevention-topics/policies-procedures/whats-in-a-child-protection-policy/>

(30) <https://safekidsthive.org/prevention-topics/policies-procedures/sample-self-audit-form-for-ysos/>

(31) <https://safekidsthive.org/prevention-topics/policies-procedures/child-sexual-abuse-prevention-evaluation-tool-for-organizations/>

(32) <https://safekidsthive.org/prevention-topics/policies-procedures/sample-policies-and-procedures>

(33) <https://safekidsthive.org/prevention-topics/sustainability/>

(34) <https://safekidsthive.org/elements-of-prevention/>

## Safe Physical and Virtual Environments

(36) <https://safekidsthive.org/prevention-topics/safe-environments/>

(37) <https://safekidsthive.org/prevention-topics/safe-environments/checklist-for-safety-checks-in-your-facility/>

(38) [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-10\\_Ensuring-Safe-Physical-Environments-and-Safe-Technology\\_Checklist-for-Safe-Environment-1.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-10_Ensuring-Safe-Physical-Environments-and-Safe-Technology_Checklist-for-Safe-Environment-1.pdf)

(45) <https://safekidsthive.org/prevention-topics/safe-environments/safe-environment-strategies-technology/>



(46) [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-10\\_Ensuring-Safe-Physical-Environments-and-Safe-Technology\\_Sample-Electronic-Communications-Policy.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-10_Ensuring-Safe-Physical-Environments-and-Safe-Technology_Sample-Electronic-Communications-Policy.pdf)

(47) [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-10\\_Ensuring-Safe-Physical-Environments-and-Safe-Technology\\_Checklist-for-Safe-Environment-1.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-10_Ensuring-Safe-Physical-Environments-and-Safe-Technology_Checklist-for-Safe-Environment-1.pdf)

(48) <https://safekidsthive.org/the-report/key-sections/section-4-ensuring-safe-physical-environments-and-safe-technology/>

**Screening and Hiring Practices**

(57) <https://safekidsthive.org/prevention-topics/screening-hiring/>

(58) <https://safekidsthive.org/prevention-topics/screening-hiring/screening-toolbox-national-criminal-sexual-abuse-background-checks/>

(59) <https://safekidsthive.org/prevention-topics/screening-hiring/checklist-for-conducting-criminal-background-checks/>

(60) [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-8\\_Screening-Hiring-and-Licensing\\_Sidebar-Questions-for-Screening-and-Selecting-Employees-and-Volunteers.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-8_Screening-Hiring-and-Licensing_Sidebar-Questions-for-Screening-and-Selecting-Employees-and-Volunteers.pdf)

(61) [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-8\\_Screening-Hiring-and-Licensing\\_Sample-Questions-and-Statement-of-Suitability-for-Employment-Volunteer-Applications.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-8_Screening-Hiring-and-Licensing_Sample-Questions-and-Statement-of-Suitability-for-Employment-Volunteer-Applications.pdf)

(62) <https://safekidsthive.org/the-report/key-sections/section-2-screening-and-background-checks-for-selecting-employees-and-volunteers/>

(63) <https://safekidsthive.org/the-report/section-specific-appendices/screening-hiring-and-licensing/>

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(65) <https://safekidsthive.org/prevention-topics/code-of-conduct/guidelines-for-interactions-at-your-organization/>

(69) <https://safekidsthive.org/prevention-topics/monitoring-behavior/>

(70) <https://safekidsthive.org/about/about-child-sexual-abuse/about-grooming/>

(71) <https://safekidsthive.org/the-report/introduction/other-warning-signs/>

(72) <https://safekidsthive.org/prevention-topics/code-of-conduct/>

(73) <https://safekidsthive.org/prevention-topics/code-of-conduct/getting-started-on-your-code-of-conduct-creating-a-risk-and-strengths-assessment/>

(74) <https://safekidsthive.org/prevention-topics/code-of-conduct/about-mission-statements-codes-of-ethics/>

(75) <https://safekidsthive.org/the-report/appendices/resources/child-sexual-abuse-csaprevention-evaluation-tool-for-organizations/>

(76) <https://safekidsthive.org/the-report/section-specific-appendices/code-of-conduct-and-monitoring/>

(77) <https://safekidsthive.org/prevention-topics/code-of-conduct/make-your-own-code-of-conduct/>

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(83) <https://safekidsthive.org/prevention-topics/reporting/recognizing-abuse-neglect/>

(85) <https://safekidsthive.org/about/about-child-sexual-abuse/what-is-child-abuse-and-neglect/>

(93) <https://safekidsthive.org/prevention-topics/reporting/>

(94) <https://safekidsthive.org/prevention-topics/policies-procedures/sample-self-audit-form-for-ysos/>

(95) <https://safekidsthive.org/prevention-topics/policies-procedures/child-sexual-abuse-prevention-evaluation-tool-for-organizations/>

(96) <https://safekidsthive.org/prevention-topics/reporting/dcf-what-happens-when-a-report-is-made/>

(97) <https://safekidsthive.org/the-report/section-specific-appendices/recognizing-responding-to-and-reporting-allegations-and-suspensions/>

(99) <https://safekidsthive.org/join-the-community/local-resources/>

(100) <https://safekidsthive.org/join-the-community/other-resources/>

(101) <https://safekidsthive.org/join-the-community/events/>

**Recognizing Child Abuse and Neglect**

(103) <https://safekidsthive.org/prevention-topics/reporting/physical-and-behavioral-indicators-of-abuse/>

(104) <https://safekidsthive.org/prevention-topics/reporting/recognizing-abuse-neglect/>



(105) <https://safekidsthive.org/the-report/introduction/recognizing-abuse-its-effects/>

**Guidelines for Handling Disclosures**

(106) <https://safekidsthive.org/prevention-topics/reporting/>

(107) <https://safekidsthive.org/prevention-topics/reporting/responding-to-direct-disclosures/>

(119) <https://safekidsthive.org/report-abuse/>

**Problematic Sexual Behaviors**

(127) <https://safekidsthive.org/wp-content/uploads/2023/04/Youth-PSB-Report-2023.pdf>

**Grooming**

(132) <https://safekidsthive.org/about/about-child-sexual-abuse/about-grooming/>

(133) <https://safekidsthive.org/the-report/introduction/other-warning-signs/>

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(137) <https://safekidsthive.org/prevention-topics/reporting/how-to-report-child-sexual-abuse/>

**Anticipating Emergencies**

(140) [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-11\\_Recognizing-Responding-to-and-Reporting-Allegations-and-Suspicious-of-Child-Sexual-Abuse\\_Reporting-Child-Abuse-and-Negl1.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-11_Recognizing-Responding-to-and-Reporting-Allegations-and-Suspicious-of-Child-Sexual-Abuse_Reporting-Child-Abuse-and-Negl1.pdf)

(141) <https://safekidsthive.org/the-report/downloadable-resources/>

**Investigative Response**

(144) <https://safekidsthive.org/the-report/section-specific-appendices/recognizing-responding-to-and-reporting-allegations-and-suspicious/>

**Sustaining A Trauma-Sensitive Environment**

(169) <https://safekidsthive.org/prevention-topics/training/>

(170) <https://safekidsthive.org/prevention-topics/training/training-program-design-checklist/>

(171) <https://safekidsthive.org/the-report/appendices/resources/child-sexual-abuse-csaprevention-evaluation-tool-for-organizations/>

**Self-Audit and Sustainment**

(176) <https://safekidsthive.org/prevention-topics/sustainability/analysis-review-and-self-audits-collecting-data/>

(177) <https://safekidsthive.org/prevention-topics/training/incorporating-training-programs-into-organizational-culture/>

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APPENDIX D: Physical and Behavioral Signs of Abuse and Neglect

APPENDIX D: Physical and Behavioral Signs of Abuse and Neglect\*

Type of Abuse	Physical Indicators	Behavioral Indicators
Physical Abuse	<ul style="list-style-type: none"><li>• Unexplained bruises (in various stages of healing)</li><li>• Unexplained burns, especially cigarette burns or immersion burns</li><li>• Unexplained fractures, lacerations or abrasions</li><li>• Swollen areas</li><li>• Evidence of delayed or inappropriate treatment for injuries</li></ul>	<ul style="list-style-type: none"><li>• Self destructive</li><li>• Withdrawn and/or aggressive - behavioral extremes</li><li>• Arrives at school early or stays late as if afraid to be at home</li><li>• Chronic runaway (adolescents)</li><li>• Complains of soreness or moves uncomfortably</li><li>• Wears clothing inappropriate to weather, to cover body</li><li>• Bizarre explanations of injuries</li><li>• Wary of adult contact</li></ul>
Neglect	<ul style="list-style-type: none"><li>• Abandonment</li><li>• Unattended medical needs</li><li>• Consistent lack of supervision</li><li>• Consistent hunger, inappropriate dress, poor hygiene</li><li>• Lice, distended stomach, emaciated</li><li>• Inadequate nutrition</li></ul>	<ul style="list-style-type: none"><li>• Regularly displays fatigue or listlessness, falls asleep in class</li><li>• Steals food, begs from classmates</li><li>• Reports that no caretaker is at home</li><li>• Frequently absent or tardy</li><li>• Self destructive</li><li>• School dropout (adolescents)</li><li>• Extreme loneliness and need for affection</li></ul>

\* From the handbook on Child Safety for Independent School Leaders, by A. Rizzuto and C. Crosson-Tower, Copyright 2012, Reprinted with permission from the National Association of Independent Schools.

APPENDIX D: Physical and Behavioral Signs of Abuse and Neglect\*

Type of Abuse	Physical Indicators	Behavioral Indicators
Sexual Abuse	<p>Sexual abuse may be non-touching: obscene language, pornography, exposure - or touching: fondling, molesting, oral sex, intercourse</p> <ul style="list-style-type: none"><li>• Torn, stained or bloody underclothing</li><li>• Pain, swelling or itching in genital area</li><li>• Difficulty walking or sitting</li><li>• Bruises or bleeding in genital area</li><li>• Venereal disease</li><li>• Frequent urinary or yeast infections</li></ul>	<ul style="list-style-type: none"><li>• Excessive seductiveness</li><li>• Role reversal, overly concerned for siblings</li><li>• Massive weight change</li><li>• Suicide attempts (especially adolescents)</li><li>• Inappropriate sex play or premature of understanding sex</li><li>• Threatened by physical contact, closeness</li></ul>
Emotional Abuse	<p>Emotional abuse may be name-calling, insults, put-downs, etc., or it may be terrorization, isolation, humiliation, rejection, corruption, ignoring</p> <ul style="list-style-type: none"><li>• Speech disorders</li><li>• Delayed physical development</li><li>• Substance abuse</li><li>• Ulcers, asthma, severe allergies</li></ul>	<ul style="list-style-type: none"><li>• Habit disorder (sucking, rocking, biting)</li><li>• Antisocial, destructive</li><li>• Neurotic traits (sleep disorders inhibition of play)</li><li>• Passive and aggressive - behavioral extremes</li><li>• Delinquent behavior (especially adolescents)</li><li>• Developmentally delayed</li></ul>

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# APPENDIX E: Massachusetts General Laws, Chapter 119, Section 51A

## Section 51A: Reporting of suspected abuse or neglect; mandated reporters; collection of physical evidence; penalties; content of reports; liability; privileged communication

### Section 51A.

(a) A mandated reporter who, in his professional capacity, has reasonable cause to believe that a child is suffering physical or emotional injury resulting from: (i) abuse inflicted upon him which causes harm or substantial risk of harm to the child’s health or welfare, including sexual abuse; (ii) neglect, including malnutrition; (iii) physical dependence upon an addictive drug at birth, shall immediately communicate with the department orally and, within 48 hours, shall file a written report with the department detailing the suspected abuse or neglect; or (iv) being a sexually exploited child; or (v) being a human trafficking victim as defined by section 20M of chapter 233.

If a mandated reporter is a member of the staff of a medical or other public or private institution, school or facility, the mandated reporter may instead notify the person or designated agent in charge of such institution, school or facility who shall become responsible for notifying the department in the manner required by this section.

A mandated reporter may, in addition to filing a report under this section, contact local law enforcement authorities or the child advocate about the suspected abuse or neglect.

(b) For the purpose of reporting under this section, hospital personnel may have photographs taken of the areas of trauma visible on the child without the consent of the child’s parents or guardians. These photographs or copies thereof shall be sent to the department with the report.

If hospital personnel collect physical evidence of abuse or neglect of the child, the local district attorney, local law enforcement authorities, and the department shall be immediately notified. The physical evidence shall be processed immediately so that the department may make an informed determination within the time limits in section 51B. If there is a delay in processing, the department shall seek a waiver under subsection (d) of section 51B.

(c) Notwithstanding subsection (g), whoever violates this section shall be punished by a fine of not more than \$1,000. Whoever knowingly and willfully files a frivolous report of child abuse or neglect under this section shall be punished by: (i) a fine of not more than \$2,000 for the first offense; (ii) imprisonment in a house of correction for not more than 6 months and a fine of not more than \$2,000 for the second offense; and (iii) imprisonment in a house of correction for not more than 21/2 years and a fine of not more than \$2,000 for the third and subsequent offenses.

Any mandated reporter who has knowledge of child abuse or neglect that resulted in serious bodily injury to or death of a child and willfully fails to report such abuse or neglect shall be punished by a fine of up to \$5,000 or imprisonment in the house of correction for not more than 21/2 years or by both such fine and imprisonment; and, upon a guilty finding or a continuance without a finding, the court shall notify any appropriate professional licensing authority of the mandated reporter’s violation of this paragraph.

(d) A report filed under this section shall contain: (i) the names and addresses of the child and the child’s parents or other person responsible for the child’s care, if known; (ii) the child’s age; (iii) the child’s sex; (iv) the nature and extent of the child’s injuries, abuse, maltreatment or neglect, including any evidence of prior injuries, abuse, maltreatment or neglect; (v) the circumstances under which the person required to report first became aware of the child’s injuries, abuse, maltreatment or neglect; (vi) whatever action, if any, was taken to treat, shelter or otherwise assist the child; (vii) the name of the person or persons making the report; (viii) any other information that the person reporting believes might be helpful in establishing the cause of the injuries; (ix) the identity of the person or persons responsible for the neglect or injuries; and (x) other information required by the department.

(e) A mandated reporter who has reasonable cause to believe that a child has died as a result of any of the conditions listed in subsection (a) shall report the death to the district attorney for the county in which the death occurred and the office of the chief medical examiner as required by clause (16) of section 3 of chapter 38. Any person who fails to file a report under this subsection shall be punished by a fine of not more than \$1,000.

(f) Any person may file a report under this section if that person has reasonable cause to believe that a child is suffering from or has died as a result of abuse or neglect.

(g) No mandated reporter shall be liable in any civil or criminal action for filing a report under this section or for contacting local law enforcement authorities or the child advocate, if the report or contact was made in good faith, was not frivolous, and the reporter did not cause the abuse or neglect. No other person filing a report under this section shall be liable in any civil or criminal action by reason of the report if it was made in good faith and if that person did not perpetrate or inflict the reported abuse or cause the reported neglect. Any person filing a report under this section may be liable in a civil or criminal action if the department or a district attorney determines that the person filing the report may have perpetrated or inflicted the abuse or caused the neglect.

(h) No employer shall discharge, discriminate or retaliate against a mandated reporter who, in good faith, files a report under this section, testifies or is about to testify in any proceeding involving child abuse or neglect. Any employer who discharges, discriminates or retaliates against that mandated reporter shall be liable to the mandated reporter for treble damages, costs and attorney’s fees.

(i) Within 30 days of receiving a report from a mandated reporter, the department shall notify the mandated reporter, in writing, of its determination of the nature, extent and cause or causes of the injuries to the child and the services that the department intends to provide to the child or the child’s family.



(j) Any privilege relating to confidential communications, established by sections 135 to 135B, inclusive, of chapter 112 or by sections 20A and 20B of chapter 233, shall not prohibit the filing of a report under this section or a care and protection petition under section 24, except that a priest, rabbi, clergy member, ordained or licensed minister, leader of a church or religious body or accredited Christian Science practitioner need not report information solely gained in a confession or similarly confidential communication in other religious faiths. Nothing in the general laws shall modify or limit the duty of a priest, rabbi, clergy member, ordained or licensed minister, leader of a church or religious body or accredited Christian Science practitioner to report suspected child abuse or neglect under this section when the priest, rabbi, clergy member, ordained or licensed minister, leader of a church or religious body or accredited Christian Science practitioner is acting in some other capacity that would otherwise make him a mandated reporter.

(k) A mandated reporter who is professionally licensed by the commonwealth shall complete training to recognize and report suspected child abuse or neglect.

**Chapter 233, Section 20M**

(a) “Human trafficking victim” or “victim”, a person who is subjected to the conduct prohibited under sections f 50 or 51 of chapter 265.

**Chapter 265, Sections 50 and 51**

**Section 50.**

(a) Whoever knowingly: (i) subjects, or attempts to subject, or recruits, entices, harbors, transports, provides or obtains by any means, or attempts to recruit, entice, harbor, transport, provide or obtain by any means, another person to engage in commercial sexual activity, a sexually-explicit performance or the production of unlawful pornography in violation of chapter 272, or causes a person to engage in commercial sexual activity, a sexually-explicit performance or the production of unlawful pornography in violation of said chapter 272; or (ii) benefits, financially or by receiving anything of value, as a result of a violation of clause (i), shall be guilty of the crime of trafficking of persons for sexual servitude and shall be punished by imprisonment in the state prison for not less than 5 years but not more than 20 years and by a fine of not more than \$25,000. Such sentence shall not be reduced to less than 5 years, or suspended, nor shall any person convicted under this section be eligible for probation, parole, work release or furlough or receive any deduction from his sentence for good conduct until he shall have served 5 years of such sentence. No prosecution commenced under this section shall be continued without a finding or placed on file.

(b) Whoever commits the crime of trafficking of persons for sexual servitude upon a person under 18 years of age shall be punished by imprisonment in the state prison for life or for any term of years, but not less than 5 years. No person convicted under this subsection shall be eligible for probation, parole, work release or furlough or receive any deduction from his sentence for good conduct until he shall have served 5 years of such sentence.

(c) A business entity that commits trafficking of persons for sexual servitude shall be punished by a fine of not more than \$1,000,000.

(d) A victim of subsection (a) may bring an action in tort in the superior court in any county wherein a violation of subsection (a) occurred, where the plaintiff resides or where the defendant resides or has a place of business. Any business entity that knowingly aids or is a joint venturer in trafficking of persons for sexual servitude shall be civilly liable for an offense under this section.

**Section 51.**

(a) Whoever knowingly: (i) subjects, or attempts to subject, another person to forced services, or recruits, entices, harbors, transports, provides or obtains by any means, or attempts to recruit, entice, harbor, transport, provide or obtain by any means, another person, intending or knowing that such person will be subjected to forced services; or (ii) benefits, financially or by receiving anything of value, as a result of a violation of clause (i), shall be guilty of trafficking of persons for forced services and shall be punished by imprisonment in the state prison for not less than 5 years but not more than 20 years and by a fine of not more than \$25,000.

(b) Whoever commits the crime of trafficking of persons for forced services upon a person under 18 years of age shall be punished by imprisonment in the state prison for life or for any term of years, but not less than 5 years.

**Chapter 265, Section 26D**

(a) As used in this section, the term “entice” shall mean to lure, induce, persuade, tempt, incite, solicit, coax or invite.

(b) As used in this section, the term “electronic communication” shall include, but not be limited to, any transfer of signs, signals, writing, images, sounds, data or intelligence of any nature transmitted in whole or in part by a wire, radio, electromagnetic, photo-electronic or photo-optical system.

(c) Whoever, by electronic communication, knowingly entices a child under the age of 18 years, to engage in prostitution in violation of section 50 or section 53A of chapter 272, human trafficking in violation of section 50, 51, 52 or 53 or commercial sexual activity as defined in section 49, or attempts to do so, shall be punished by imprisonment in a house of correction for not more than 2 1/2 years or in the state prison for not more than 5 years or by a fine of not less than \$2,500, or by both such fine and imprisonment.

(d) Whoever, after having been convicted of, or adjudicated delinquent by reason of a violation of this section, commits a second or subsequent such violation, shall be punished by imprisonment in the state prison for not less than 5 years and by a fine of not less than \$10,000. Such sentence shall not be reduced to less than 5 years, or suspended, nor shall any person convicted under this subsection be eligible for probation, parole, work release or furlough or receive any deduction from the sentence for good conduct until that person has served 5 years of such sentence.



## APPENDIX F: Policy Suggestions in Review

**P. 33:** The [designate the responsible party] shall be responsible for ensuring that all school staff are provided with in-service training to familiarize them with [at the minimum] the symptoms of child abuse and neglect, their reporting responsibility and procedures, the school protocol, DCF procedures, and their obligations once the case has been reported.

**P. 34:** The [designate the administrator responsible for the formation] will oversee the formation of a Child Protection Team (henceforth called CPT) which will be responsible for reviewing suspected allegations of child maltreatment. The CPT will consist of [list the job titles] and will meet [weekly/as needed/monthly]. The CPT will be chaired by [designate chairperson] who is responsible for convening meetings.

**P. 34:** All school staff will be expected to attend [number] hours of training. This training will be provided by the school and will be designed to promote accurate interpretation and effective ongoing application of the protocol.

**P. 43:** Any educator or support staff member who has reasonable cause to believe that a child is being physically abused, neglected, sexually abused, emotionally injured, sexually exploited or the victim of human trafficking is mandated to report this suspicion. No person so required to report shall be liable in any civil or criminal action by reason of such report if made in good faith.

The staff member who suspects child maltreatment (henceforth referred to as the reporter) should immediately notify the [designated person] who will convene the CPT, which shall meet as soon as possible. The reporter will present their suspicions to the CPT and provide the team with any documentation that may be available. If the CPT deems this a reportable situation, the [designated individual] representing the CPT and the reporter will immediately telephone the Department of Children and Families (DCF) to report and file a 51A report.

If the CPT cannot be convened in a timely manner, and the reporter has determined that there is reasonable cause to suspect child maltreatment or that the child is at immediate risk, the law requires that a mandated reporter shall immediately report such condition to DCF by oral communication and by making a written report within forty-eight hours.

**P. 44:** The fact that the CPT does not advise reporting a situation to DCF does not relieve the educator from contacting DCF directly if the educator has reasonable cause to believe that the suspected abuse or neglect did occur. The (name of school) will not discharge or in any manner retaliate or discriminate against any person who, in good faith, submits a report of child abuse or neglect.

**P. 45:** When making the report, the CPT will identify other individuals within the school who may have information about the particular child that is relevant to the alleged abuse or neglect. These individuals should be notified by the CPT so that they may be contacted by DCF.

**P. 46:** If an educator determines that it is necessary to file a report after school hours, they must notify [designated person or persons]. This individual will notify, by phone if necessary, the members of the CPT. The CPT and the reporter will then be responsible for filing the report with DCF. If the educator making the report feels it is an emergency and is unable to reach the [designated person] or any CPT member in a reasonable amount of time, they should file the report directly with DCF and notify the CPT as soon as possible.

**P. 48:** After reporting a case to DCF, the [designated reporter], representing the CPT, will monitor the outcome of the report. This information will be kept confidential and will be available only to the CPT and the original reporter.

**P. 49:** Once the information has been provided to the CPT, no child will be subjected to further emotional stress or risk by being questioned by any member of the team or by other school personnel.



# APPENDIX G: Filing an Effective 51A Report

Adapted from an earlier guide by Jeff Roberts, Coordinator, Middlesex County Sexual Abuse Investigation Network

When filing a 51A report of child abuse or neglect with the Department of Children and Families, it is helpful to have as much factual information as possible at hand, including:

- The name and birth date of the child being reported
- The names and birth dates of any siblings or any other children in the home
- The names, addresses, and birth dates of both parents, or other caretakers
- The primary language spoken in the child’s home
- The mandated reporter’s name, address, telephone number, profession, and relationship with the child (non-mandated reporters may request anonymity)
- As much information as possible about the alleged perpetrator of the abuse (if not one of the above-named persons)

You will find it helpful to have the answers in mind to the following questions, which a DCF screener will likely ask when you file a 51A report:

- Have you informed the parents of the reported child that you are filing a report with DCF? If yes, what was their response? (DCF recommends that you do not inform a family if you believe it will increase the risk to the child).
- Are you alleging neglect, physical abuse, sexual abuse, emotional maltreatment of the child, or that the child is a victim of human trafficking for sexual exploitation or labor?
- To your knowledge, what is the nature and extent of the child’s injuries, abuse, neglect, or maltreatment?
- What is the specific incident, behavior, or disclosure that is causing you to report at this time?
- If there was a verbal disclosure, what specifically did the child say in his or her own words?
- Where did the abuse occur? (This is especially important in physical or sexual abuse allegations, which may involve criminal activity and need to be reported to the appropriate District Attorney’s Office).
- Have there been past observations of the child that have caused you concern prior to the filing of this report?
- Do you believe that the child is at current / immediate risk of further harm? Do you believe this to be an ongoing situation, or a short-term crisis?

- What is the child telling you about his/her feelings of personal safety?
- To your knowledge, is the family currently involved with DCF?
- To your knowledge, does the child have regular visits with a counselor or therapist? (If possible, provide the name and telephone number of the child’s therapist.)
- Are you aware of any 51A reports that have been filed on this child by your agency? (If possible, provide the dates of these reports).
- What are the child’s general demeanor, school performance record, and attendance record?
- What actions if any have been taken to treat, shelter, or assist the child?
- Does the child have any special needs or developmental limitations?
- Is there any emergency contact information for the child(ren) being reported?
- Is there any other information you believe might be helpful in establishing the cause of the injury and/or person(s) responsible?
- Is there any information that could be helpful to DCF staff in making safe contact with an adult victim in situations of domestic violence (e.g., work schedules, place of employment, daily routines)?
- Any other information you believe would be helpful in ensuring the child’s safety and/or supporting the family to address the abuse and/or neglect concerns (other contributing or high risk factors, the family’s strengths and capacities, etc.).
  - Other examples of information you may have: restraining orders between members of the child’s household (particularly if active at the time of the report); identified weapons in the home; known sex-offenders in the home; information on other non-caregiver adults living in the home

Remember that as a mandated reporter, you are required to file a written report with the Department of Children and families within 48 hours of making the oral report. DCF will provide the form for this report. It is also available online at: <http://www.mass.gov/eohhs/docs/dcf/child-abuse-reporting-form.pdf>. DCF is required to notify you, in writing, of its decision on your report within 60 days. If you have any questions about whether or not to report a situation, don’t hesitate to call your area DCF office for further information and advice. You may also call the Department Ombudsman’s office during regular working hours at (617) 748-2444 or email any questions to the office website (<https://www.mass.gov/service-details/dcf-office-of-the-ombudsman>).



## APPENDIX H: 51A Report Form



### Report of Child(ren) Alleged to be Suffering from Abuse or Neglect

Massachusetts law requires mandated reporters to immediately make a report to the Department of Children and Families (DCF) when they have reasonable cause to believe that a child under the age of 18 years is suffering from abuse and/or neglect by:

**STEP 1: Immediately reporting by oral communication to the local DCF Area Office (see contact information at end of form); and**

**STEP 2: Completing and sending this written report to the local DCF Area Office within 48 hours of making the oral report.**

For more information about requirements for mandated reporters and filing a report of alleged abuse and/or neglect please see **A Guide for Mandated Reporters** available on the DCF website at [www.mass.gov/dcf](http://www.mass.gov/dcf).

Please complete all sections of this form. If some data is uncertain or unknown, please signify by placing a question mark ("?") after the entry.

 **CHILDREN REPORTED**

Name	Current Location/Address	Language Spoken	Birth Sex		Age or Date of Birth	ICWA/Tribal Affiliation
			Male	Female		

**EMERGENCY CONTACT(S) FOR CHILDREN REPORTED:** Please list the emergency contact information for all of the reported children, including contact name, relationship, and contact number information.

**OTHER CHILDREN:** Please include information about other children in the home/family, including name and age/date of birth (if known).

**PARENT, GUARDIAN OR CAREGIVER 1**

Name:			
First	Last	Middle	
Address:			
Street & Number	City / Town	State	Zip Code
Phone #:		Age/Date of Birth:	
Language Spoken:		Relationship to Child(ren):	

**PARENT, GUARDIAN OR CARGIVER 2**

Name:			
First	Last	Middle	
Address:			
Street & Number	City / Town	State	Zip Code
Phone #:		Age/Date of Birth:	
Language Spoken:		Relationship to Child(ren):	

## REPORTER / REPORT

Report Date:	Mandatory Report		Non Mandatory Report	
Reporter's Name:				
First (If the reporter represents an institution, school or facility, please indicate)	Last	Middle		
Reporter's Address:				
Street & Number	City / Town	State	Zip Code	
Phone #:				
Has reporter informed caregiver of report ?	Yes	No		
What is the reporter's relationship to the child(ren)?				

What is the nature and extent of injury, abuse, maltreatment or neglect? Please list any prior evidence of same and/or other worries regarding danger to the child(ren). (Please cite the source of this information if not observed firsthand.)

 **RELATED CONCERNS:** Please check all that apply.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Substance Use/Misuse                | <input type="checkbox"/> Acute/Chronic Medical Condition            | <input type="checkbox"/> Runaway          |
| <input type="checkbox"/> Substance Exposed Newborn           | <input type="checkbox"/> Housing Instability/Homelessness           | <input type="checkbox"/> Gang Involvement |
| <input type="checkbox"/> Neonatal Abstinence Syndrome        | <input type="checkbox"/> Human Trafficking/Labor                    | <input type="checkbox"/> None Applies     |
| <input type="checkbox"/> Domestic Violence                   | <input type="checkbox"/> Human Trafficking/Sexually Exploited Child | <input type="checkbox"/> Unknown          |
| <input type="checkbox"/> Mental/Behavioral Health Challenges | <input type="checkbox"/> Teen Parenting                             | <input type="checkbox"/> Other            |

**DESCRIPTION OF RELATED CONCERNS:** Please include additional information that will help DCF further understand the concerns checked above. This includes any specific concerns about alcohol/drug use by the parent/guardian/caregiver. If there are concerns related to domestic violence, please also list any information that will help DCF make safe contact with the family (e.g., work schedule, place of employment, daily routines for the adult victim, etc.).

If known, please provide the name(s) and address, phone #, DOB/age, relationship to child, and language spoken of the person(s) responsible for the injury, abuse, maltreatment or neglect and/or any other information that you think might be helpful in establishing the cause of the injury, abuse, maltreatment or neglect.



What are the circumstances under which the reporter became aware of the injury, abuse, maltreatment or neglect? Please include information on dates and timeframes for when the injury, abuse, maltreatment or neglect occurred.

Pedikit# (if applicable):

Incident Date (if known):

What action has been taken thus far to treat, shelter or otherwise assist the child(ren) to deal with the situation?

Are there any concerns for social worker safety?

Please provide any information about the family's strengths and capacities that you think will be helpful to DCF in ensuring the child's safety and supporting the family to address the abuse and/or neglect concerns.

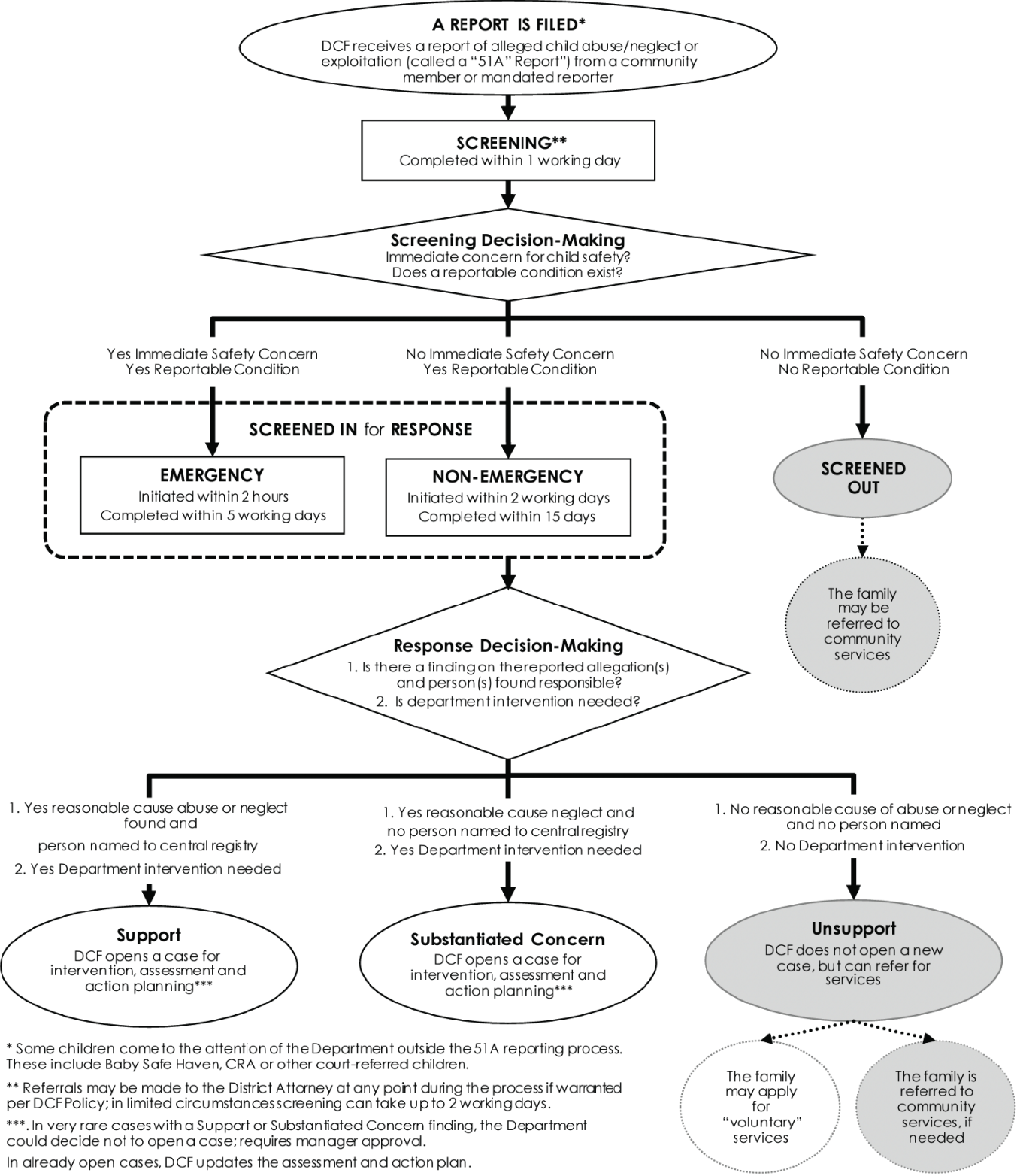
Signature of Reporter: \_\_\_\_\_

**To report child abuse and/or neglect:** Weekdays from 9:00 am to 5:00 pm call the local DCF Area Office.  
Weekdays after 5:00 pm and 24 hours on weekends and holidays call the **Child-At-Risk-Hotline 1-800-792-5200**

DCF AREA OFFICES

<b>Boston Region</b>		<b>Central Region</b>		<b>Northern Region</b>	
Dimock Street, Roxbury	617-989-2800	North Central, Leominster	978-353-3600	Cambridge/Somerville	617-520-8700
Harbor, Chelsea	617-660-3400	South Central, Whitinsville	508-929-1000	Cape Ann, Salem	978-825-3800
Hyde Park	617-363-5000	Worcester East	508-793-8000	Framingham	508-424-0100
Park Street, Dorchester	617-822-4700	Worcester West	508-929-2000	Haverhill	978-469-8800
				Lawrence	978-557-2500
				Lowell	978-275-6800
				Lynn	781-477-1600
				Malden	781-388-7100
<b>Southern Region</b>		<b>Western Region</b>			
Arlington	781-641-8500	Greenfield	413-775-5000		
Brockton	508-894-3700	Holyoke	413-493-2600		
Cape Cod & Islands	508-760-0200	Pittsfield	413-236-1800		
Coastal, Braintree	781-794-4400	Robert Van Wart Center, East Springfield	413-205-0500		
Fall River	508-235-9800	Springfield	413-452-3200		
Plymouth	508-732-6200				
New Bedford	508-910-1000				
Taunton/Attleboro	508-821-7000				

APPENDIX I: What Happens When DCF Receives a 51A Report?



\* Some children come to the attention of the Department outside the 51A reporting process. These include Baby Safe Haven, CRA or other court-referred children.

\*\* Referrals may be made to the District Attorney at any point during the process if warranted per DCF Policy; in limited circumstances screening can take up to 2 working days.

\*\*\*. In very rare cases with a Support or Substantiated Concern finding, the Department could decide not to open a case; requires manager approval.

In already open cases, DCF updates the assessment and action plan.

Key: Grey means the family is outside the DCF system; White is inside the system. Circles are starting and end points. Dashed arrows are optional paths.

From MA DCF, Protective Intake Policy, Revision date: 6/22/20, used with permission



# APPENDIX J: Sample Code of Conduct and Acknowledgment Form

## Sample code of conduct:

(Name of School) Code of Conduct Involving Interactions with Minors

(Name of School) is committed to the safety and protection of children. This Code of Conduct, along with the (Name of School) child safety policies and procedures applies to all staff, employees, and volunteers who represent the (Name of School) and who interact with children or youth in both a direct and/or unsupervised capacity. The public and private conduct of staff, employees, and volunteers acting on behalf of (Name of Organization) can inspire and motivate those with whom they interact, or can cause great harm if inappropriate. We must, at all times, be aware of the responsibilities that accompany our work.

We should be aware of our own and other persons’ vulnerability, especially when working alone with children and youth, and be particularly aware that we are responsible for maintaining physical, emotional, and sexual boundaries in such interactions. We must avoid any covert or overt sexual behaviors with those for whom we have responsibility. This includes seductive speech or gestures as well as physical contact that exploits, abuses, or harasses. We are to provide safe environments for children and youth at all times.

We must show prudent discretion before touching another person, especially children and youth, and be aware of how physical touch will be perceived or received, and whether it would be an appropriate expression of greeting, care, concern, or celebration. (Name of School) personnel and volunteers are prohibited at all times from physically disciplining a child.

Physical contact with children can be misconstrued both by the recipient and by those who observe it, and should occur only when completely nonsexual and otherwise appropriate, and never in private. One-on-one meetings with a child or young person are best held in a public area; in a room where the interaction can be (or is being) observed; or in a room with the door left open, and another staff member or supervisor is notified about the meeting.

We must intervene when there is evidence of, or there is reasonable cause to suspect, that children are being maltreated in any way. Suspected abuse or neglect must be reported to the appropriate organizational and civil authorities as described in the (Name of School) child safety policies and procedures. Staff and volunteers should refrain from the illegal possession and/or illegal use of drugs and/or alcohol at all times, and from the use of tobacco products, alcohol and/ or drugs when working with children. Adults should never buy alcohol, drugs, cigarettes, videos, or reading material that is inappropriate and give it to young people. Staff members and volunteers should not accept or give gifts to children without the knowledge of their parents or guardians.

From DCF Protective Intake Policy (5/18/2021), used with permission

Communication with children by staff and volunteers is only allowed for (Name of School) business. For the protection of all concerned, the key safety concept that will be applied to these interactions is transparency. The following steps will reduce the risk of private or otherwise inappropriate communication between staff, volunteers, and minors:

- Communication between (Name of School) personnel (including volunteers) and children/youth that is outside the role of the professional or volunteer relationship is prohibited.
- Where possible, email exchanges between a minor and a person acting on behalf of the organization are to be made using a (Name of School) email address.
- Electronic communication that takes place over a (Name of School) network or platform may be subject to periodic monitoring.
- Staff, and volunteers who use text messaging or any form of online communications including social media (Facebook, Twitter, etc.) to communicate with children/youth may only do so for activities involving (Name of School) business.

## Sample code of conduct: “Acknowledgment Form”

I promise to strictly follow the rules and guidelines in this Code of Conduct as a condition of my teaching and/or providing services to the children and youth of (name of school).

### I will:

- Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration.
- Never be alone with individual children and/or youth at school activities without another adult being notified.
- Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth.
- Maintain appropriate physical boundaries at all times and touch children - when necessary - only in ways that are appropriate, public, and non-sexual.
- Comply with the mandatory reporting regulations of the Commonwealth of Massachusetts and with the (name of school) Policies and Procedures to report suspected child abuse. I understand that failure to report suspected child maltreatment to civil authorities is against the law.
- Cooperate fully in any response of abuse of children and/or youth.

### I will not:

- Touch or speak to a child and/or youth in a sexual or other inappropriate manner.
- Inflict any physical or emotional abuse such as striking, spanking, shaking, slapping, humiliating, ridiculing, threatening, or degrading children and/or youth.
- Smoke or use tobacco products, or possess, or be under the influence of alcohol or illegal drugs at any time while working with children and/or youth.

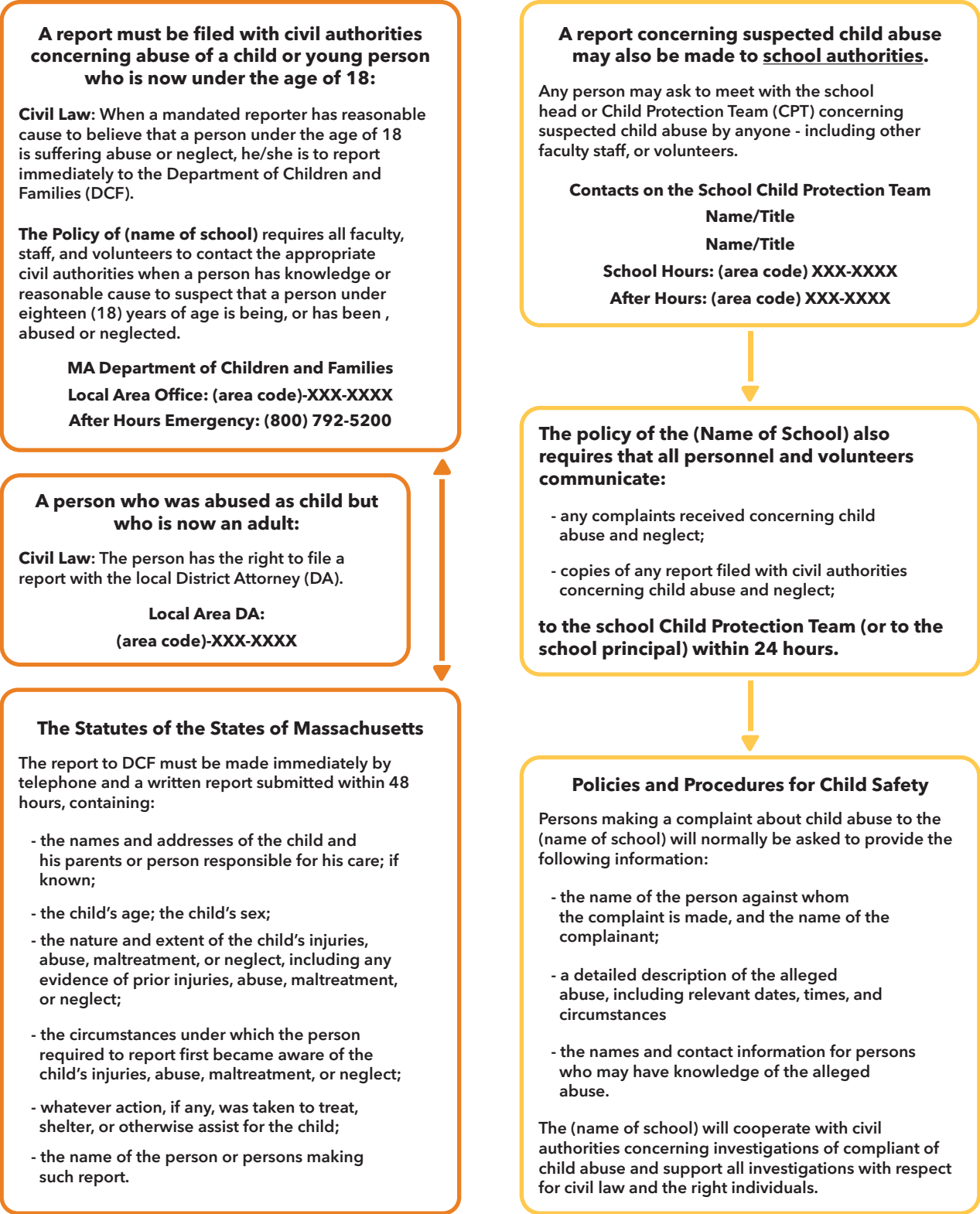


- Give a child who is not my own a ride home alone.
- Accept or give gifts to children or youth without the knowledge of their parents or guardians.
- Engage in private communications with children via text messaging, email, Facebook, Twitter or similar forms of electronic or social media.
- Use profanity in the presence of children and/or youth at any time.

I understand that as a person working with and/or providing services to children and youth under the auspices of (name of school) I am subject to a criminal history background check. My signature confirms that I have read this Code of Conduct and that as a person working with children and youth I agree to follow these standards. I understand that any action inconsistent with this Code of Conduct or failure to take action mandated by this Code of Conduct may result in disciplinary action up to and including removal from my position.

Name (print): \_\_\_\_\_ Signature/Date: \_\_\_\_\_

APPENDIX K: Sample Reporting Flow Chart



NOTE: In the event of imminent danger to a child, school property, or to school personnel responsible for the child, call the local (name of city/town/county) Sheriff's Office or Police Department for help: (area code) XXX-XXXX.



# APPENDIX L: Glossary

**Alternative Response** - Refers to the provision of services to a family rather than an abuse investigation, when DCF (or other Child Protective Services) determines that the problem is something other than abuse. For example: homelessness that is at first thought to be neglect.

**Assessment** - The process through which DCF (or other Child Protective Services) determines whether a child or family is in need of services and whether the family problem involves child maltreatment. During this process, DCF seeks to get a better understanding of the family’s strengths as well as the resources that are needed.

**CAPTA** - The Federal Child Abuse Prevention and Treatment Act (CAPTA), (42 U.S.C.A §5106g), as amended by the Keeping Children and Families Safe Act of 2003, defines child abuse and neglect as, at minimum:

- “Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of serious harm” (CAPTA 2010).

Child maltreatment generally falls into several distinct categories: physical abuse, emotional abuse, neglect and sexual abuse. Expanded definitions of child abuse and neglect gathered from a number of resources follow:

- **Physical abuse** refers to a non-accidental injury caused by a parent or caretaker who has responsibility for that child’s care. These injuries may be a result of the child being beaten, thrown, kicked, bitten, punched, choked, stabbed, burned or in some other way harmed. The injury may be intentional or unintentional and may also result from severe discipline, a punishment inappropriate for the child’s age or condition, or may result from parental lapses brought upon by immaturity, the use or abuse of substances, or extreme stress. It is also important to note that a non-accidental injury to a child committed by anyone other than a parent or caretaker is considered to be a criminal act and falls under the jurisdiction of law enforcement rather than child protective services.
- **Emotional abuse**, although almost always underlying other types of abuse or neglect, can also occur alone. Emotional abuse, sometimes referred to as psychological abuse, is behavior that impairs the child’s emotional development or feelings of self-worth including belittling, blaming, or rejecting a child; constantly treating siblings unequally; and persistent lack of concern by the caretaker for the child’s welfare. Usually one recognizes emotional abuse through behavior but it is also possible that the child has so internalized the messages of the abuse that he or she exhibits developmental delays, psychosomatic symptoms (e.g. asthma) and other physical effects (e.g. stuttering or other speech disorders).

- **Neglect** refers to the caretaker’s lack of attention to the child’s basic needs such as the failure to provide food, shelter, clothing, supervision, medical care, or education. Unlike physical abuse that tends to be episodic, neglect tends to be chronic - causing the victims to grow up believing that everyone lives as they do. As a result, they may not confide how they are being treated to anyone. Often, these families have multiple problems although not every multi-problem family is neglectful.
- **Sexual abuse** is defined as inappropriate sexual behavior of an adult or an adolescent with a child. This may include fondling a child’s genitals, making the child fondle an adult’s genitals, intercourse, incest, rape, sodomy, exhibitionism, sexual exploitation, or the production of, or exposure to, pornography. Sexual abuse may take place within the family (incest), or be perpetrated by relatives, friends, by the boyfriend or girlfriend of the parent, or by others in caretaking roles (e.g. babysitter). Although sexual abuse may occur at the hands of a stranger, most victims know their abusers. Sexual abuse may also be committed by other children or teens and is considered to be abusive when the perpetrator is significantly older or has control over the victim.

**Caregiver** - A child’s parent, stepparent, guardian, or any household member entrusted with the responsibility for a child’s health or welfare. Also any other person entrusted with the responsibility for a child’s health or welfare whether in the child’s home, a relative’s home, a school setting, a daycare setting (including babysitting), a foster home, a group care facility, or any other comparable setting. The caretaker definition is meant to be constructed broadly and inclusively to encompass any person who is, at the time in question, entrusted with a degree of responsibility for the child. This specifically includes a caretaker who is him/ herself a child (i.e., a babysitter under the age of 18).

**Child** - Any person under the age of 18 years, not including unborn children. However, when a distinction needs to be made that differentiates younger from older minors by age or developmental stage, a child is defined in this Manual as an individual between newborn and age 11, and a youth is defined as an individual between age 12 and the attainment of their 18th birthday

**CAC** - Children’s Advocacy Center

**Children’s Bureau** - The Children’s Bureau is a federal agency that partners with federal, state, tribal, and local agencies to improve the overall health and well-being of our nation’s children and families. It is the federal agency responsible for the collection and analysis of NCANDS data.

**CPS** - Child Protective Services refers to the state or county agency designated to handle child maltreatment reports and investigations. The name of the actual agency differs state to state.

**CSAM** - Child Sexual Abuse Material. United States federal law defines child pornography as any visual depiction of sexually explicit conduct involving a minor (a person less than 18 years old). Outside of the legal system, The National Center for Missing and Exploited Children (NCMEC) chooses to refer to these images as Child Sexual Abuse Material (CSAM) to most accurately reflect what is depicted - the sexual abuse and exploitation of children.



Not only do these images and videos document victims' exploitation and abuse, but when these files are shared across the internet, child victims suffer re-victimization each time the image of their sexual abuse is viewed.

**CSEC** - The Commercial Sexual Exploitation of Children (CSEC) refers to a range of crimes and activities involving the sexual abuse or exploitation of a child for the financial benefit of any person or in exchange for anything of value (including monetary and non-monetary benefits) given or received by any person. CSEC also includes situations where a child, whether or not at the direction of any other person, engages in sexual activity in exchange for anything of value, which includes non-monetary things such as food, shelter, drugs, or protection from any person.

**DCF** - The Massachusetts Department of Children and Families.

**Human Trafficking Victim** (MGL Chapter 233, Section 20M) - refers to the enticement, recruiting, harboring, transport or other means to involve a child in commercial sexual activities including the production of pornography.

**Immunity from Civil or Criminal Liability** - States that no mandated reporter who suspects that a child is suffering from child abuse or neglect and who reports this suspicion to the Child Protection Team or the Department of Children and Families shall be held liable in any civil or criminal action as a result of making this report if made in good faith.

**Investigation** - One CPS response that involves the gathering of objective information to determine whether a child was maltreated or is at-risk of maltreatment and to establish if an intervention is needed. Generally, includes face-to-face contact with the alleged victim and results in a disposition as to whether the alleged maltreatment occurred.

**Mandated Reporter** - Defined at M.G.L. c. 119, 21: a person who is: (i) a physician, medical intern, hospital personnel engaged in the examination, care or treatment of persons, medical examiner, psychologist, emergency medical technician, dentist, nurse, chiropractor, podiatrist, optometrist, osteopath, allied mental health and human services professional licensed under section 165 of chapter 112, drug and alcoholism counselor, psychiatrist or clinical social worker; (ii) a public or private school teacher, educational administrator, guidance or family counselor, child care worker, person paid to care for or work with a child in any public or private facility, or home or program funded by the commonwealth or licensed under chapter 15D that provides child care or residential services to children or that provides the services of child care resource and referral agencies, voucher management agencies or family child care systems or child care food programs, licenser of the department of early education and care or school attendance officer; (iii) a probation officer, clerk-magistrate of a district court, parole officer, social worker, foster parent, firefighter, police officer or animal control officer; (iv) a priest, rabbi, clergy member, ordained or licensed minister, leader of any church or religious body, accredited Christian Science practitioner, person performing official duties on behalf of a church or religious body that are recognized as the duties of a priest, rabbi, clergy, ordained or licensed minister, leader of any church or religious body, accredited Christian Science practitioner, or person employed by a church or religious body to supervise, educate, coach, train or counsel a child on a regular basis; (v) in charge of a medical or other public or private institution, school or facility or that person's designated agent; or (vi) the child advocate.

**NCANDS** - The National Child Abuse and Neglect Data System is a federally funded agency that annually collects and analyzes data on cases of child maltreatment that are reported to child protective services (CPS) agencies in the United States. Much of our statistical data in this Manual are derived from this source.

**Perpetrator** - Refers to an individual who has knowingly maltreated a child.

**Problematic Sexual Behavior (PSB)** - PSB are deviations from normative or typical sexual behavior. They are child-initiated behaviors involving sexual body parts (i.e., genitals, anus, buttocks, or breasts) and are developmentally inappropriate and/or potentially harmful to themselves or others

**Reasonable Cause** - Means a basis for judgment that rests on specific facts which have been observed directly or obtained from reliable sources and that support the belief that a particular event probably took place or a condition probably exists.

**Reportable condition** - Refers to a serious physical or emotional injury resulting from abuse or neglect, or the commission of an act by a caretaker with a child which constitutes a sexual offense under the criminal laws of the Commonwealth, or the physical dependence of a child upon an addictive drug at birth, or being a sexually exploited child, or being a human trafficking victim.

**S.A.I.N. (Sexual Assault Intervention Network) Interview** - When sexual abuse occurs, the victim may get interviewed numerous times and be forced to repeatedly relive the trauma. The Sexual Abuse Intervention Network (SAIN) intends to reduce the number of interviews the child is faced with. The SAIN eliminates multiple separate interviews. The team members involved in a SAIN interview include: Assistant District Attorney, SAIN Coordinator, Forensic Interviewer, Family Service Advocate, Law Enforcement, The Department of Children and Families (DCF), a Sexual Assault Nurse Examiner (Pediatric SANE) and/or a mental health consultant can occasionally be present during the interview.

During a SAIN interview, the forensic interviewer conducts the interview of the child behind a one-way mirror room. The interviewer of the child will often have an earpiece in his/her ear to hear questions from the team observing the interview from behind the one-way mirror. The team can see into the room with the interviewer and the child, but the interviewer and the child cannot see out of the room hence the one-way mirror.

**Sexually Exploited Child** (MGL Chapter 119, Section 21) - A child who is a victim of sexual trafficking, or sexual contact with another person for a fee (prostitution).

**Support** - To find after a response (by DCF) that there is reasonable cause to believe a report that a child has suffered abuse or neglect inflicted by a caretaker.

**Unsupported** - To find after a response (by DCF) that there is a lack of reasonable cause to believe a report that a child has suffered abuse or neglect inflicted by a caregiver. Unsupported reports of abuse by non-caregivers - especially in cases of sexual abuse, serious physical injury, or death - are reported to law enforcement.

**YSO** - Youth-serving organization



# APPENDIX M: Resources for Educators

## Reporting Child Abuse and Neglect

**Massachusetts Department of Children and Families**  
600 Washington Street, Boston, MA 02111

Child-at-Risk Hotline (24 hours) 1-800-792-5200  
Central Office (617) 748-2000  
Auto Attendant (617) 748-2400  
Fax: (617) 261-7435  
Website: <https://www.mass.gov/how-to/report-child-abuse-or-neglect>  
Listing of Area Offices: [https://www.mass.gov/orgs/massachusetts-department-of-children-families/locations?\\_page=1](https://www.mass.gov/orgs/massachusetts-department-of-children-families/locations?_page=1)

**Office of the Massachusetts Child Advocate**  
One Ashburton Place, Fifth Floor Boston, MA 02108

Telephone: (617)979-8374 and toll-free (866)790-3690  
FAX: (617)979-8379.  
Website: <https://www.mass.gov/orgs/office-of-the-child-advocate>

Investigates critical incidents involving children receiving services from the Commonwealth, reviews complaints regarding these services, and works with state agencies to develop inter-agency coordination. Has a special responsibility toward children in the care of the Commonwealth and in helping to resolve the problems of youth in foster care.

**National Center for Missing & Exploited Children® (NCMEC)**  
Charles B. Wang International Children’s Building 699 Prince Street  
Alexandria, Virginia 22314-3175

Hotline: 1-800-THE-LOST® (1-800-843-5678)  
TTY: 1-800-826-7653  
Telephone: 703-224-2150  
Fax: 703-224-2122  
Website: <http://www.missingkids.org/>  
CyberTipline: <https://www.missingkids.org/gethelpnow/cybertipline>  
NetSmartz: <https://www.missingkids.org/netsmartz>

The National Center for Missing & Exploited Children (NCMEC) serves as a clearinghouse of information about missing and exploited children. It provides technical assistance to the public and law-enforcement agencies; distributes photographs of and descriptions about missing children worldwide; and coordinates child- protection education and prevention programs, training, and publications. NetSmartz is The National Center for Missing & Exploited Children’s website about internet and technology safety – for parents, teens, and educators. NCMEC’s CyberTipline is the nation’s centralized reporting system for the online exploitation of children.

**Child Welfare Information Gateway**  
Children’s Bureau/ACYF Eighth Floor  
1250 Maryland Avenue, Southwest Washington, DC 20024-2141

Toll-free: 1-800-394-3366  
Telephone: 703-385-7565  
Fax: 703-385-3206  
Website: <http://www.childwelfare.gov>

Provides toll-free and local telephone numbers for reporting child abuse and neglect in each state. In most cases the toll-free numbers listed are only accessible from within the state. Also listed are links to state websites, which may provide additional information.

**Childhelp USA**  
S 6730 N. Scottsdale Road, Suite 150, Scottsdale, AZ 85253

Hotline: 1-800-4-A-CHILD (1-800-422-4453)  
Telephone: 480-922-8212  
Website: <https://www.childhelp.org/>

Staffed 24 hours daily by professional crisis counselors, this confidential hotline is accessible throughout the U.S., its territories, and Canada. Through interpreters, communication is possible in 140 languages.

**National Center for Victims of Crime (NCVC)**  
Suite 480, 2000 M Street, Northwest Washington, DC 20036-3307

Telephone: 202-467-8700  
Website: <https://victimsofcrime.org/>  
E-mail: [gethelp@ncvc.org](mailto:gethelp@ncvc.org)

The National Center for Victims of Crime is an organization dedicated to providing information, resources and advocacy for victims of all types of crime, as well as the people who serve them. NCVC offers help, information about options, and referrals to local victim services anywhere in the country.

## Prevention and Treatment Organizations

**The Children’s Trust**  
55 Court Street, 4th Floor Boston, MA 02108

Phone: 617-727-8957 Toll Free: 1-888-775-4KID Fax: 617-727-8997  
Website: <https://www.childrenstrustma.org/>  
Parenting information: [www.onetoughjob.org](http://www.onetoughjob.org)  
Email: [info@childrenstrustma.org](mailto:info@childrenstrustma.org) (general information)



The Children’s Trust leads statewide efforts to prevent child abuse and neglect by supporting parents and strengthening families. The Children’s Trust reaches families across Massachusetts. Funds family support and parenting education programs in communities throughout Massachusetts. Parents can join support groups; families can attend activities at Family Centers; and young, first-time parents can enroll in a home-visiting program to get information, support and referrals. Programs include training in Shaken Baby Syndrome Prevention, helping fathers be involved in raising their children, and the prevention of child abuse.

**Massachusetts Children’s Alliance (MACA)**  
11 Beacon St Suite 321, Boston, MA 02108

Phone: (617) 573-9800  
Website: <https://machildrensalliance.org/>

MACA is an accredited state chapter of the National Children’s Alliance (NCA) and membership organization of the 12 Children’s Advocacy Centers (CACs). MACA pioneers the most promising, leading-edge ways that help victims of child abuse receive the best possible care. A local, state, and national go-to resource for proven interventions, effective educational programs, and informed and committed legislative support. Works to enable an integrated, multidisciplinary team response to child abuse, and is committed to strengthening collaboration and driving systemic and societal change to protect children.

**Massachusetts Society for a World Free of Sexual Harm by Youth (MASOC)**  
201 East Street, Easthampton, MA 01027

Phone: (413) 540-0712 x14  
Email: [info@masoc.net](mailto:info@masoc.net)  
Website: <https://masoc.net/>

MASOC’s mission is to ensure that children and adolescents with problematic or abusive sexual behaviors live healthy, safe, and productive lives. Strives to prevent sexually abusive behaviors in these youth by training professionals and educating the community about developmentally appropriate interventions, evidence-based treatment, and effective public policies.

**Massachusetts Association for the Treatment of Sexual Abusers (MATSA)**  
P.O. Box 92062, Needham, MA 02492

Phone: 857-244-1416  
Email: [matsaboardpresident@gmail.com](mailto:matsaboardpresident@gmail.com)

The Massachusetts Association for the Treatment of Sexual Abusers, Inc. (MATSA). MATSA is a non-profit local chapter of the national parent organization (ATSA). It was formed to carry out the mission of ATSA at the state level: to promote responsible assessment and treatment practices for adults with problematic sexual interests, behavior, or offending. ATSA remains dedicated to principles that foster research and information exchange, further professional education, and advance professional standards and practice in the field of sex offender evaluation and treatment. The MATSA Resource Directory offers a simple way to identify treatment providers in your area with an easy to use map.

**Massachusetts Citizens for Children**  
112 Water Street, Suite 502, Boston, MA 02109

Phone: 617-742-8555  
E-mail: [info@masskids.org](mailto:info@masskids.org)  
Website: <https://www.masskids.org/>

Massachusetts Citizens for Children (MassKids) is the oldest state-based child advocacy organization in the country. Their mission is to improve the lives of the state’s most vulnerable children and youth through advocacy by concerned citizens. Since the mid-70s, they have been committed to preventing the abuse and neglect of the state’s children. To ensure better and fairer outcomes for all children, they commit to involving and reflecting the diverse communities they serve; adopting policies that support equity; and practices that value and respect everyone.

**National Children’s Trust Fund Alliance**  
P.O. Box 15206 Seattle, WA 98115

E-mail: [info@ctfalliance.org](mailto:info@ctfalliance.org)  
Website: <https://ctfalliance.org/>

Assists state children’s trust and prevention funds to strengthen families and protect children from harm.

**National Children’s Alliance**  
516 C Street, NE Washington, DC 20002

Phone: 202-548-0090 or 800-239-9950  
FAX: 202-548-0099  
Website: <https://www.nationalchildrensalliance.org/>

Provides training, support, technical assistance and leadership on a national level to local children’s and child advocacy centers and communities responding to reports of child abuse and neglect. A children’s advocacy center is a child-focused, facility-based program in which representatives from many disciplines, including law enforcement, child protection, prosecution, mental health, medical and victim advocacy, and child advocacy, work together to conduct interviews and make team decisions about investigation, treatment, management and prosecution of child abuse allegations.

**Committee for Children**  
2815 Second Ave., Suite 400, Seattle, WA 98121

Phone: 800-634-4449  
E-mail: [info@cfchildren.org](mailto:info@cfchildren.org)  
Website: <https://www.cfchildren.org/>

Provides award-winning social skills curricula for the prevention of child abuse, bullying, and youth violence, as well as family education, training and technical assistance to educators throughout North America.



Crimes Against Children Research Center  
University of New Hampshire  
125 McConnell Hall, 15 Academic Way  
Horton Social Science Center  
Durham, NH 03824

Phone: (603) 862-3541  
Website: <http://unh.edu/ccrc/>

The mission of the Crimes against Children Research Center (CCRC) is to combat crimes against children by providing high quality research and statistics to the public, policy makers, law enforcement personnel, and other child welfare practitioners. CCRC is concerned with research about the nature of crimes including child abduction, homicide, rape, assault, and physical and sexual abuse as well as their impact.

Safer Society Foundation  
P.O. Box 340, Brandon, VT 05733-0340

Phone: (802) 247-3132  
Fax: (802) 247-4233  
Website: <https://www.saferociety.org/>

The mission of Safer Society Foundation, Inc., a 501(c)3 nonprofit organization, is to provide services and resources for preventive and restorative responses to sexual and social violence.

Stop It Now  
351 Pleasant Street, Suite B-319, Northampton, MA 01060

Helpline: 1.888.PREVENT or email the Helpline  
Tel: 413.587.3500 (non-Helpline related inquiries only)

Stop It Now’s vision was to have the sexual abuse of children recognized as a preventable public health problem and to help adults take responsibility to prevent and stop sexual abuse of children. With a commitment to prevention, Stop It Now! creates and disseminates effective programs based on this principle of adult responsibility, shared through a hopeful and compassionate lens.

NOTE: A more complete list of local and national reporting and prevention organizations can be found on the Safe Kids Thrive website on its National and Statewide Resources page: <https://safekidsthive.org/join-the-community/other-resources/>

## APPENDIX N: Supplemental Guidance to Support EQT-3 Superintendent’s Circular

### BPS Response to Child-Child Incidents of Sexual Behavior: Guidance for Informing Caregivers

When Incidents Involve Children Ages 11 and Under (criminal charges not allowed for children under age 12 per MA law)

Goal is to help caregivers to:

- Understand BPS reporting requirements
- Anticipate next steps.
- Receive sufficient information about the incident
- Receive support and reassurance

Inform caregiver of school reporting requirements (School Police, Confidential Log, DCF), including:

- a. that the purpose of the reporting is both to share information about concerning incidents that occur between students AND to provide safety and support for all children/families affected;
- b. that BPS collaborates in this response with the other agencies who must be notified;
- c. that reports made involving children’s problematic sexual behavior are reviewed by the Boston Police Crimes Against Children Unit (CACU) and by the Suffolk County District Attorney’s Office;
- d. that reports concerning the sexual behavior of children ages 11 and under are not investigated by the Boston Police or District Attorney’s Office but are, instead, referred to the Children’s Advocacy Center of Suffolk County (CAC) for support and services.
- e. that, when there is no criminal investigation, the Boston Police Department and District Attorney’s Office will not be contacting the family.
- f. that, some incidents of sexual behavior by children ages 12 and over may also be referred to the Children’s Advocacy Center when a criminal investigation is not considered the best approach.



Further explain referral to the Children’s Advocacy Center of Suffolk County (CAC)

With a referral to the Children’s Advocacy Center, the focus is on providing support and services for all the children and families affected.

A CAC Family Advocate (FA), with specialized training in children’s problematic sexual behavior, will follow up with the school and caregivers of all children involved. CAC FAs will try to learn more about what happened, how children and families are coping, and assess whether the sexual behavior is reason for concern. The CAC FA can assist with any services needed.

When indicated, the CAC FA will also explain the CAC’s free specialized services available for children ages 7-12 with problematic sexual behavior (Problematic Sexual Behavior-Cognitive Behavioral Therapy / PSB-CBT).

- a. With caregiver consent, school can contact CAC directly to expedite contact with a Family Advocate, or;
- b. School can provide caregiver with CAC contact information and caregiver can contact CAC.

Provide caregiver with the essential factual information about the incident.

Caregivers typically expect the school to share details about what happened whether their child is the victim/target of sexual misconduct or the alleged initiator. Caregivers are likely to be more receptive to and collaborative with the school’s response, when they are adequately informed.

Updated September 2021  
Supplemental Guidance to Support EQT-3 Superintendent’s Circular

**General Guidelines:**

- a. Emphasize school’s priority focus on child safety and well-being
- b. Inform caregiver how incident came to adult attention;
- c. Share child’s exact words to describe the incident;
- d. Invite caregivers of a child initiating sexual behavior to share any explanations they may have for the behavior (What do they think could be the cause? Have they had prior concerns about their child’s sexual behavior?)
- e. Convey an understanding that children engage in sexual behavior for a variety of reasons and abuse is not the only cause.
- f. Communicate that most children with problematic sexual behavior can learn to stop this behavior with specialized counseling support for them and their family.

**Examples”**

- 1. “A child in your child’s class reported to the classroom teacher that your child rubbed this child on their private parts on top of their clothes.”

- 2. “Several children told the teacher that while on the playground, your child chased them and grabbed them on their butts with both hands. When one of the children told her to stop, the child said your child said, “I can do whatever I want.”
- 3. “Your child told his/her teacher that while in the bathroom today, another child who is the same age told your child to pull down his/her pants and when your child said “no”, the other child pulled down your child’s pants and poked him/her in the private area”.

Assure caregiver that the school’s first concern is the safety of all children involved.

- Explain school safety measures taken & planned (immediate, short-term, long-term).

Inform caregiver of school practice to speak with the caregivers of all children involved.

Provide general guidance for caregiver on how to follow up with their child about what happened:

- Try to remain calm.
- Allow their child to share what happened in their own words and at their own pace.
- Be patient and try not to insert words when your child is talking.
- Tell your child that all the adults (you, their teacher) are working together to keep them safe and healthy.
- Use this opportunity to talk with their child about personal safety/rules about touching.
- Let your child know you are there to listen to them and answer any questions.

**Overview of the Children’s Advocacy Center of Suffolk County**

The CAC is a non-profit agency that works in collaboration with many different agencies (DCF, police, prosecutors, schools, hospitals and other community providers) within Boston and throughout Suffolk County when child abuse is reported: [www.suffolkcac.org](http://www.suffolkcac.org)

Model Contact Information:  
Main CAC number: xxx.xxx.xxxx  
Information about referral/services and to request consultation: Director of Mental Health at the CAC: xxxxxxxx@cac.org  
(Reprinted with Permission)



APPENDIX O: Endnotes

1 <https://safekidsthive.org/>

2 <https://www.naesp.org/sites/default/files/resources/2/Principal/2004/S-Op6.pdf>

3 <https://www.reference.com/world-view/percentage-average-life-american-spent-school-b4bf5e983cdb6f65>

4 <https://safekidsthive.org/>

5 Child Welfare Information Gateway. (2022). Definitions of child abuse and neglect. U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. <https://www.childwelfare.gov/topics/systemwide/laws-policies/statutes/define/>

6 U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children’s Bureau. (2023). Child Maltreatment 2021. Available from <https://www.acf.hhs.gov/cb/data-research/child-maltreatment>. (NOTE: In this edition, Chapter 7 focuses on racial and ethnic differences within child maltreatment data).

7 Finkelhor, D. (2009). The prevention of childhood sexual abuse. *The Future of Children*, 19(2). (<http://unh.edu/ccrc/pdf/CV192.pdf>).

8 David Finkelhor, Anne Shattuck, Heather A. Turner, & Sherry L. Hamby, *The Lifetime Prevalence of Child Sexual Abuse and Sexual Assault Assessed in Late Adolescence*, 55 *Journal of Adolescent Health* 329, 329-333 (2014). (<https://www.unh.edu/ccrc/resource/lifetime-prevalence-child-sexual-abuse-sexual-assault-assessed-late-adolescence>)

9 Darkness to Light, *Child Sexual Abuse Statistics*, ([https://www.d2l.org/wp-content/uploads/2017/01/all\\_statistics\\_20150619.pdf](https://www.d2l.org/wp-content/uploads/2017/01/all_statistics_20150619.pdf)).

10 David Finkelhor (2009). The Prevention of Child Sexual Abuse *The Future of Children*, 19(2). (<http://unh.edu/ccrc/pdf/CV192.pdf>).

11 Snyder, *Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident and Offender Characteristics* (2000), National Center for Juvenile Justice, NCJ 182990. (<http://www.bjs.gov/content/pub/pdf/saycrlc.pdf>).

12 Finkelhor, David; Ormrod, Richard and Chaffin, Mark (2009). Juveniles who commits sex offenses against minors. *Juvenile Justice Bulletin* – NCJ227763 (1-12pgs). Washington, DC: US Government Printing Office. (<https://scholars.unh.edu/cgi/viewcontent.cgi?article=1014&context=ccrc>)

13 Ateret Gewirtz-Meyden and David Finkelhor (2019). Sexual Abuse and Assault in a Large National Sample of Children and Adolescents, Crimes Against Children Research Center, UNH. (<https://www.unh.edu/ccrc/sites/default/files/media/2022-03/sexual-abuse-and-assault-in-a-large-national-sample-of-children-and-adolescents.pdf>)

14 Collin-Vezina, et. al. (2015). A Preliminary Mapping of Individual, Relational, and Social Factors that Impede Disclosure of Childhood Sexual Abuse, *Child Abuse & Neglect*, Volume 43, May 2015, Pages 123-134. (<https://www.sciencedirect.com/science/article/pii/S0145213415000940?via%3Dihub>)

15 Manay, N., Colin-Vezina, D. (2021) Recipients of children’s and adolescents’ disclosures of childhood sexual abuse: A systematic review, *Child Abuse & Neglect* Volume 116, Part 1, June 2021. (<https://www.sciencedirect.com/science/article/pii/S0145213419303692>)

16 Pérez-Fuentes G, Olfson M, Villegas L, Morcillo C, Wang S, Blanco C. Prevalence and correlates of child sexual abuse: a national study. *Compr Psychiatry*. 2013 Jan;54(1):16-27. (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3518746/>)

17 Massachusetts Department of Children and Families Annual Report for FY2022 (December 2022). <https://www.mass.gov/doc/fy-2022/download>

18 Felitti VJ1, Anda RF, Nordenberg D, Williamson DF, Spitz AM, Edwards V, Koss MP, Marks JS., Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study (1998 May) *American Journal of Preventive Medicine*;14(4):245-58. (see: <https://pubmed.ncbi.nlm.nih.gov/9635069/>)

19 Carrion, V., Weems, C., Reiss, A. (2007) Stress Predicts Brain Changes in Children: A Pilot Longitudinal Study on Youth Stress, Posttraumatic Stress Disorder, and the Hippocampus, *Pediatrics*, 2007; 119:509. ([https://www.researchgate.net/publication/6474878\\_Stress\\_Predicts\\_Brain\\_Changes\\_in\\_Children\\_A\\_Pilot\\_Longitudinal\\_Study\\_on\\_Youth\\_Stress\\_Posttraumatic\\_Stress\\_Disorder\\_and\\_the\\_Hippocampus](https://www.researchgate.net/publication/6474878_Stress_Predicts_Brain_Changes_in_Children_A_Pilot_Longitudinal_Study_on_Youth_Stress_Posttraumatic_Stress_Disorder_and_the_Hippocampus))

20 <https://www.iwh.on.ca/what-researchers-mean-by/primary-secondary-and-tertiary-prevention>

21 CDC (2019). Fostering School Connectedness: Improving Student Health and Academic Achievement: Information for School Districts and School Administrators (<https://stacks.cdc.gov/view/cdc/21067>).

22 Wang, K., Chen, Y., Zhang, J., and Oudekerk, B.A. (2020). Indicators of School Crime and Safety: 2019 (NCES 2020-063/NCJ 254485). National Center for Education Statistics, U.S. Department of Education, and Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice. Washington, DC. (<https://nces.ed.gov/pubs2020/2020063.pdf>)



- 23 Irwin, V., Wang, K., Cui, J., Zhang, J., and Thompson, A. (2021). Report on Indicators of School Crime and Safety: 2020 (NCES 2021-092/NCJ 300772). National Center for Education Statistics, U.S. Department of Education, and Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice. Washington, DC. Retrieved 12/29/21 from. <https://bjs.ojp.gov/sites/g/files/xyckuh236/files/media/document/iscs20.pdf>
- 24 NOTE: “Avoided school activities or one or more places in the school” includes avoiding any (extracurricular) activities, avoiding any classes, staying home from school, avoiding entrance to the school, hallways or stairs in school, parts of the school cafeteria, school restrooms, and other places inside the school building.
- 25 Feeling Unsafe at School and Associated Mental Health Difficulties among Children and Adolescents: A Systematic Review (2021), Children (Basel). 2021 Mar; 8(3): 232. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8002666/>
- 26 The Health and Risk Behaviors of Massachusetts Youth, 2019. (<https://www.mass.gov/doc/health-and-risk-behaviors-of-massachusetts-youth-2019/download>)
- 27 NOTE: School policies in Massachusetts must be approved by the relevant school boards prior to implementation.
- 28 <https://safekidsthive.org/prevention-topics/policies-procedures/>
- 29 <https://safekidsthive.org/prevention-topics/policies-procedures/whats-in-a-child-protection-policy/>
- 30 <https://safekidsthive.org/prevention-topics/policies-procedures/sample-self-audit-form-for-ysos/>
- 31 <https://safekidsthive.org/prevention-topics/policies-procedures/child-sexual-abuse-prevention-evaluation-tool-for-organizations/>
- 32 <https://safekidsthive.org/prevention-topics/policies-procedures/sample-policies-and-procedures>
- 33 <https://safekidsthive.org/prevention-topics/sustainability/>
- 34 <https://safekidsthive.org/elements-of-prevention/>
- 35 Adapted from the National Crime Prevention Council’s “School Safety and Security Toolkit”: ([https://www.ncpc.org/wp-content/uploads/2017/11/NCPC\\_SchoolSafetyToolkit.pdf](https://www.ncpc.org/wp-content/uploads/2017/11/NCPC_SchoolSafetyToolkit.pdf)) and the Canadian Red Cross “Ten Steps to Creating Safe Environments for Children and Youth (2015): ([https://www.redcross.ca/crc/documents/Where-We-Work/Canada/Yukon-%20NWT-%20Nunavut/Ten-Steps-Manual\\_English-PDF.pdf](https://www.redcross.ca/crc/documents/Where-We-Work/Canada/Yukon-%20NWT-%20Nunavut/Ten-Steps-Manual_English-PDF.pdf))
- 36 <https://safekidsthive.org/prevention-topics/safe-environments/>
- 37 <https://safekidsthive.org/prevention-topics/safe-environments/checklist-for-safety-checks-in-your-facility/>
- 38 [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-10\\_Ensuring-Safe-Physical-Environments-and-Safe-Technology\\_Checklist-for-Safe-Environment-1.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-10_Ensuring-Safe-Physical-Environments-and-Safe-Technology_Checklist-for-Safe-Environment-1.pdf)
- 39 Saul J, Audage NC. Preventing Child Sexual Abuse Within Youth-serving Organizations: Getting Started on Policies and Procedures. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2007. Note: currently under revision to be released in 2022. (<https://www.cdc.gov/violenceprevention/pdf/preventingchildsexualabuse-a.pdf>).
- 40 Wang, K., Chen, Y., Zhang, J., and Oudekerk, B.A. (2020). Indicators of School Crime and Safety: 2019, National Center for Education Statistics, Indicator 19: Safety and Security Practices at Public Schools (<https://bjs.ojp.gov/content/pub/pdf/iscs19.pdf>)
- 41 [https://www.nasdtec.net/page/MCEE\\_Doc](https://www.nasdtec.net/page/MCEE_Doc)
- 42 <https://www.aaeteachers.org/index.php/about-us/aae-code-of-ethics>
- 43 For additional information, see Connect Safely: “Educators Guide to Social Media” (2017) by Larry Magid. (<https://www.connectsafely.org/eduguide/>)
- 44 [https://www.educationworld.com/a\\_tech/tech/tech055.shtml](https://www.educationworld.com/a_tech/tech/tech055.shtml)
- 45 <https://safekidsthive.org/prevention-topics/safe-environments/safe-environment-strategies-technology/>
- 46 [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-10\\_Ensuring-Safe-Physical-Environments-and-Safe-Technology\\_Sample-Electronic-Communications-Policy.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-10_Ensuring-Safe-Physical-Environments-and-Safe-Technology_Sample-Electronic-Communications-Policy.pdf)
- 47 [https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-10\\_Ensuring-Safe-Physical-Environments-and-Safe-Technology\\_Checklist-for-Safe-Environment-1.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-10_Ensuring-Safe-Physical-Environments-and-Safe-Technology_Checklist-for-Safe-Environment-1.pdf)
- 48 <https://safekidsthive.org/the-report/key-sections/section-4-ensuring-safe-physical-environments-and-safe-technology/>
- 49 <https://www.bostonpublicschools.org/domain/2330>
- 50 <https://studylib.net/doc/7600565/responsible-technology-use-in-public-schools>
- 51 <https://www.bostonpublicschools.org/Page/8352>
- 52 <https://malegislature.gov/Laws/GeneralLaws/PartI/TitleXII/Chapter71/section38r>



53

<https://malegislature.gov/laws/SessionLaws/Acts/2012/Chapter459>

54

Statutory guidance can be found on the DESE website " Careful Hiring Practices and Reporting Misconduct to DESE – Reminder of State and Federal Requirements", September 2020, (<https://www.doe.mass.edu/lawsregs/advisory/2020-0914reporting-misconduct.html>); "Advisory on CORI Law" (<https://www.doe.mass.edu/lawsregs/advisory/cori.html>); and "Criminal History Checks for School Employees" (<http://www.doe.mass.edu/lawsregs/603cmr51.html?section=03>).

55

New eSori Portal: <https://sorb.chs.state.ma.us/esori-portal/login.xhtml>

56

For definitions see: (<https://www.mass.gov/service-details/levels-of-sex-offenders>)

57

<https://safekidsthive.org/prevention-topics/screening-hiring/>

58

<https://safekidsthive.org/prevention-topics/screening-hiring/screening-toolbox-national-criminal-sexual-abuse-background-checks/>

59

<https://safekidsthive.org/prevention-topics/screening-hiring/checklist-for-conducting-criminal-background-checks/>

60

[https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-8\\_Screening-Hiring-and-Licensing\\_Sidebar-Questions-for-Screening-and-Selecting-Employees-and-Volunteers.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-8_Screening-Hiring-and-Licensing_Sidebar-Questions-for-Screening-and-Selecting-Employees-and-Volunteers.pdf)

61

[https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-8\\_Screening-Hiring-and-Licensing\\_Sample-Questions-and-Statement-of-Suitability-for-Employment-Volunteer-Applications.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-8_Screening-Hiring-and-Licensing_Sample-Questions-and-Statement-of-Suitability-for-Employment-Volunteer-Applications.pdf)

62

<https://safekidsthive.org/the-report/key-sections/section-2-screening-and-background-checks-for-selecting-employees-and-volunteers/>

63

<https://safekidsthive.org/the-report/section-specific-appendices/screening-hiring-and-licensing/>

64

Physical boundaries and caregiving may change with the age of the child, and children with disabilities may need additional physical contact, but the standards of touch (public, appropriate, and non-sexual) do not change.

65

See: "Guidelines for Interactions at Your Organization" on the Safe Kids Thrive website: <https://safekidsthive.org/prevention-topics/code-of-conduct/guidelines-for-interactions-at-your-organization/>

66

Note: Appropriate touch can sometimes become inappropriate if a student is clear that any contact is unwanted or if the contact is repeated so often it becomes invasive.

67

A Regulatory Guidance on the use of physical restraint when warranted can be found at <https://www.doe.mass.edu/lawsregs/603cmr46.html?section=all>

68

In situations where the response to a violation of the Code of Conduct appears discretionary, school counsel should also be involved in the discussion.

69

Tips on monitoring behaviors, the role of staff, a checklist on monitoring documenting monitoring and reporting behavior: <https://safekidsthive.org/prevention-topics/monitoring-behavior/>

70

<https://safekidsthive.org/about/about-child-sexual-abuse/about-grooming/>

71

<https://safekidsthive.org/the-report/introduction/other-warning-signs/>

72

<https://safekidsthive.org/prevention-topics/code-of-conduct/>

73

<https://safekidsthive.org/prevention-topics/code-of-conduct/getting-started-on-your-code-of-conduct-creating-a-risk-and-strengths-assessment/>

74

<https://safekidsthive.org/prevention-topics/code-of-conduct/about-mission-statements-codes-of-ethics/>

75

<https://safekidsthive.org/the-report/appendices/resources/child-sexual-abuse-csaprevention-evaluation-tool-for-organizations/>

76

<https://safekidsthive.org/the-report/section-specific-appendices/code-of-conduct-and-monitoring/>

77

<https://safekidsthive.org/prevention-topics/code-of-conduct/make-your-own-code-of-conduct/>

78

<https://malegislature.gov/laws/generallaws/parti/titlexvii/chapter119/section51a>

79

Advisory Regarding Mandated Reporting Responsibilities of School Personnel in Cases of Suspected Child Abuse and Neglect (October 2021). (<https://www.doe.mass.edu/lawsregs/advisory/child-abuse.html>)

80

<https://www.mass.gov/how-to/report-child-abuse-or-neglect>

81

Note that for DCF purposes, the term Human Trafficking is used as an umbrella term to include two allegations of abuse: Human Trafficking – Sexually Exploited Child, Human Trafficking – Labor.

82

<https://malegislature.gov/Laws/GeneralLaws/PartIII/TitleII/Chapter233/Section20m>

83

<https://safekidsthive.org/prevention-topics/reporting/recognizing-abuse-neglect/>



- 84 See 110 CMR, Section 2.00 (<https://www.mass.gov/doc/110-cmr-2-glossary/download>). Note that Massachusetts has no statutory definition of child abuse and neglect applicable to mandated reporters. DCF's regulations indicate what DCF screens-in and investigates, not the full scope of what can be considered child abuse and neglect. When in doubt, call DCF and seek guidance.
- 85 <https://safekidsthive.org/about/about-child-sexual-abuse/what-is-child-abuse-and-neglect/>
- 86 <https://www.mass.gov/info-details/mass-general-laws-c119-ss-21#section-21->
- 87 <https://www.mass.gov/doc/human-trafficking-statutes-102018/download>
- 88 <https://malegislature.gov/Laws/GeneralLaws/PartIV/TitleI/Chapter272/Section53A>
- 89 <https://malegislature.gov/Laws/GeneralLaws/PartIII/TitleII/Chapter233/Section20m> and <https://malegislature.gov/laws/generallaws/partiv/titlei/chapter265/section50>, and <https://malegislature.gov/Laws/GeneralLaws/PartIV/TitleI/Chapter265/Section51>.
- 90 National Center on the Sexual Behavior of Youth (<https://ncsby.org/content/overview-and-definitions>)
- 91 Centers for Disease Control and Prevention (<https://www.cdc.gov/violenceprevention/aces/index.html>)
- 92 <https://malegislature.gov/laws/generallaws/parti/titlexvii/chapter119/section51a>
- 93 <https://safekidsthive.org/prevention-topics/reporting/>
- 94 <https://safekidsthive.org/prevention-topics/policies-procedures/sample-self-audit-form-for-ysos/>
- 95 <https://safekidsthive.org/prevention-topics/policies-procedures/child-sexual-abuse-prevention-evaluation-tool-for-organizations/>
- 96 <https://safekidsthive.org/prevention-topics/reporting/dcf-what-happens-when-a-report-is-made/>
- 97 <https://safekidsthive.org/the-report/section-specific-appendices/recognizing-responding-to-and-reporting-allegations-and-suspicions/>
- 98 <https://51a.middlesexcac.org/>
- 98 <https://mandatedreportertraining.com/massachusetts/>
- 99 <https://safekidsthive.org/join-the-community/local-resources/>
- 100 <https://safekidsthive.org/join-the-community/other-resources/>
- 101 <https://safekidsthive.org/join-the-community/events/>
- 102 <https://abuse.publichealth.gsu.edu/targ/>
- 103 <https://safekidsthive.org/prevention-topics/reporting/physical-and-behavioral-indicators-of-abuse/>
- 104 <https://safekidsthive.org/prevention-topics/reporting/recognizing-abuse-neglect/>
- 105 <https://safekidsthive.org/the-report/introduction/recognizing-abuse-its-effects/>
- 106 <https://safekidsthive.org/prevention-topics/reporting/>
- 107 <https://safekidsthive.org/prevention-topics/reporting/responding-to-direct-disclosures/>
- 108 <https://www.ncsby.org/content/overview-and-definitions>
- 109 Finkelhor, Ormrod, and Chaffin (2009). Juveniles Who Commit Sex Offenses Against Minors: OJJDP Juvenile Justice Bulletin, (December 2009): <https://www.ojp.gov/pdffiles1/ojjdp/227763.pdf>
- 110 Gewirtz-Meydan & Finkelhor (2019). Sexual Abuse and Assault in a Large National Sample of Children and Adolescents. (<https://www.unh.edu/ccrc/sites/default/files/media/2022-03/sexual-abuse-and-assault-in-a-large-national-sample-of-children-and-adolescents.pdf>).
- 111 Silovsky, J. F., Swisher, L. M., Widdifield, J., & Burris, L. (2012). Clinical considerations when children have problematic sexual behavior. In Handbook of Child Sexual Abuse (pp. 399-428). Wiley-Blackwell. <https://doi.org/10.1002/9781118094822.ch18>
- 112 Shawler, P. M., Elizabeth Bard, M., Taylor, E. K., Wilsie, C., Funderburk, B., & Silovsky, J. F. (2018). Parent-child interaction therapy and young children with problematic sexual behavior: A conceptual overview and treatment considerations. Children and Youth Services Review, 84, 206-214. <https://doi.org/10.1016/j.childyouth.2017.12.006>
- 113 Chaffin, M. (2008). Our minds are made up--Don't confuse us with the facts: Commentary on policies concerning children with sexual behavior problems and juvenile sex offenders. Child Maltreatment, 13(2), 110-121. <https://doi.org/10.1177/1077559508314510>
- 114 Finkelhor, Ormrod, and Chaffin (2009). Juveniles Who Commit Sex Offenses Against Minors: OJJDP Juvenile Justice Bulletin, (December 2009): <https://www.ojp.gov/pdffiles1/ojjdp/227763.pdf>
- 115 Christiansen, A. K., & Vincent, J. P. (2013). Characterization and prediction of sexual and nonsexual recidivism among adjudicated juvenile sex offenders. Behavioral Sciences & the Law, 31(4), 506-529. <https://doi.org/10.1002/bsl.2070>



116

Caldwell, M. F. (2016, July 18). Quantifying the decline in juvenile sexual recidivism rates. *Psychology, Public Policy, and Law*, 22(4), 414-426. doi: 10.1037/law0000094. (<https://psycnet.apa.org/record/2016-35228-001>)

117

<https://ncsby.org/>

118

<https://ncsby.org/content/normative-sexual-behavior>

119

<https://www.mass.gov/how-to/report-child-abuse-or-neglect>

120

CACs are child-friendly centers where a multidisciplinary team (MDT) of professionals offer a coordinated response to allegations of child sexual and severe physical abuse. CACs coordinate a single forensic (SAIN) interview to gather the information needed by each member of the MDT to successfully investigate allegations of abuse.

121

<https://www.doe.mass.edu/lawsregs/advisory/child-abuse.html>

122

<http://commissiononsexoffenderrecidivism.com/wp-content/uploads/2016/03/Interagency-Collaboration-EOHHS.pdf>

123

<https://www.mass.gov/doc/adol-sex-offender-policy/download>

124

<https://drive.google.com/drive/folders/1KdPD12saP7GidxA4dWEqny0APfKKKp8F>

125

<https://www.mass.gov/doc/early-impacts-of-an-act-relative-to-criminal-justice-reform-november-2019/download>

126

<https://masoc.net/>

127

<https://safekidsthive.org/wp-content/uploads/2023/04/Youth-PSB-Report-2023.pdf>

128

[https://ncsby.org/sites/default/files/responding\\_to\\_problem\\_sexual\\_behaviour\\_in\\_children\\_and\\_young\\_people.pdf](https://ncsby.org/sites/default/files/responding_to_problem_sexual_behaviour_in_children_and_young_people.pdf)

129

[https://sd83.bc.ca/wp-content/uploads/2019/09/11E.xii\\_1-Protocol-for-Responding-to-Sexualized-Behavior-in-Schools.pdf](https://sd83.bc.ca/wp-content/uploads/2019/09/11E.xii_1-Protocol-for-Responding-to-Sexualized-Behavior-in-Schools.pdf)

130

<https://militaryreach.auburn.edu/dr?id=24e05882-fd26-4057-a5e0-da22912f8ad8&rt=rs>

131

<https://ncsby.org/resources#tab-0-schools>

132

<https://safekidsthive.org/about/about-child-sexual-abuse/about-grooming/>

133

<https://safekidsthive.org/the-report/introduction/other-warning-signs/>

134

<https://malegislature.gov/laws/generallaws/parti/titlexvii/chapter119/section51b> (see subparagraph “m”)

135

During regular business hours (8:45 a.m.-5 p.m. M-F) call the Department of Families and Children (DCF) area office that serves the city or town where the child lives. Nights, weekends, and holidays dial the Child-at-Risk Hotline at (800) 792-5200.

136

<https://www.mass.gov/doc/child-abuse-reporting-form/download>

137

<https://safekidsthive.org/prevention-topics/reporting/how-to-report-child-sexual-abuse/>

138

<https://www.doe.mass.edu/lawsregs/advisory/child-abuse.html>

139

<https://www.doe.mass.edu/lawsregs/603cmr23.html?section=06>

140

[https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext\\_Appendix-11\\_Recognizing-Responding-to-and-Reporting-Allegations-and-Suspicious-of-Child-Sexual-Abuse\\_Reporting-Child-Abuse-and-Negl1.pdf](https://safekidsthive.org/wp-content/uploads/2020/08/HYPertext_Appendix-11_Recognizing-Responding-to-and-Reporting-Allegations-and-Suspicious-of-Child-Sexual-Abuse_Reporting-Child-Abuse-and-Negl1.pdf)

141

<https://safekidsthive.org/the-report/downloadable-resources/>

142

<https://www.mass.gov/orgs/office-of-the-child-advocate>

143

<https://www.mass.gov/doc/dcf-protective-intake-policy/download>

144

<https://safekidsthive.org/the-report/section-specific-appendices/recognizing-responding-to-and-reporting-allegations-and-suspicious/>

145

Contact is mandatory if a child has died or has been sexually assaulted/exploited/trafficked or is the victim of serious physical abuse or injury.

146

<https://www.frcma.org/>

147

<https://polarisproject.org/2020-us-national-human-trafficking-hotline-statistics/>

148

<https://www.missingkids.org/theissues/trafficking#bythenumbers>

149

<https://www.missingkids.org/ourwork/impact>, and <https://www.ecpatusa.org/statistics>

150

[https://www.missingkids.org/content/dam/missingkids/pdfs/CST\\_Overview.pdf](https://www.missingkids.org/content/dam/missingkids/pdfs/CST_Overview.pdf)

151

U.S. Department of Education, Office of Elementary and Secondary Education, Office of Safe and Healthy Students, Fact Sheet (2013) Human Trafficking of Children in the United States. (<https://www2.ed.gov/about/offices/list/oese/oshs/factsheet.html>)

152

<https://www.cfchildren.org/wp-content/uploads/policy-advocacy/policy-papers-csec-education.pdf>



153 National Center on Safe Supportive Learning Environments. (2021b). School policies and protocols to combat trafficking. US Department of Education, Office of Safe and Supportive Schools. <https://safesupportivelearning.ed.gov/human-trafficking- americas-schools/school-policies-protocols-to-combat-trafficking>

154 [https://www.mass.gov/doc/interagency-human-trafficking-policy-task-force-findings-and-recommendations/download?\\_ga=2.4037747.216696748.1647273021-1577966823.1609852691](https://www.mass.gov/doc/interagency-human-trafficking-policy-task-force-findings-and-recommendations/download?_ga=2.4037747.216696748.1647273021-1577966823.1609852691)

155 <https://www.mass.gov/info-details/commonwealth-anti-trafficking-task-force>

156 <https://www.mass.gov/orgs/massachusetts-office-for-victim-assistance>

157 <https://www.mass.gov/doc/human-trafficking-commercial-sexual-exploitation-of-children-services-by-county-printable/download>

158 <https://www.suffolkcac.org/what-we-do/seen/what-is-commercial-sexual-exploitation-of-children-csec>

159 <https://jri.org/training/finder/child-exploitation>

160 <https://www.mylifemychoice.org/>

161 <https://www.d2l.org/education/additional-training/child-exploitation/>

162 <https://nche.ed.gov/csec/>

163 <https://polarisproject.org/resources/human-trafficking-101/>

164 <https://traumasensitiveschools.org/trauma-and-learning/the-solution-trauma-sensitive-schools/>

165 <https://www.childwelfare.gov/topics/prevention/>

166 <https://resourcecentre.savethechildren.net/pdf/5411.pdf/>

167 <https://www.nsvrc.org/publications/child-sexual-abuse-prevention-programs-children>

168 <https://abuse.publichealth.gsu.edu/targ/>

169 <https://safekidsthive.org/prevention-topics/training/>

170 <https://safekidsthive.org/prevention-topics/training/training-program-design-checklist/>

171 <https://safekidsthive.org/the-report/appendices/resources/child-sexual-abuse-csaprevention-evaluation-tool-for-organizations/>

172 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3968319/>

173 <https://childwellbeingandtrauma.org/>

173 <https://www.mass.gov/news/office-of-the-child-advocate-and-umass-chan-medical-school-launch-state-center-on-child-wellbeing-and-trauma>

174 <https://www.nctsn.org/trauma-informed-care>

175 <https://www.childwelfare.gov/topics/preventing/evaluating/tools/>

176 <https://safekidsthive.org/prevention-topics/sustainability/analysis-review-and-self-audits-collecting-data/>

177 <https://safekidsthive.org/prevention-topics/training/incorporating-training-programs-into-organizational-culture/>

178 Finkelhor, D. and Jones, L. (2006). Why Have Child Maltreatment and Child Victimization Declined? Journal of Social Issues, Vol. 62, No 4, pp. 685-716. <https://www.unh.edu/ccrc/resource/why-have-child-maltreatment-child-victimization-declined>

179 Finkelhor, D., Saito, K., and Jones, L. (2022) Updated Trends in Child Maltreatment 2020: Crimes Against Children Research Center, University of New Hampshire. <https://www.unh.edu/ccrc/sites/default/files/media/2022-03/updated-trends-2020-final.pdf>

180 Child Maltreatment (2021). U.S. Department of Health & Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2023). Available from <https://www.acf.hhs.gov/sites/default/files/documents/cb/cm2021.pdf>

181 <https://safekidsthive.org/prevention-topics/sustainability/>

182 <https://malegislature.gov/Laws/SessionLaws/Acts/2014/Chapter431>

183 [https://childrenstrustma.org/uploads/files/PDFs/Child\\_Sexual\\_Abuse\\_Prevention\\_Task\\_Force\\_Report.pdf](https://childrenstrustma.org/uploads/files/PDFs/Child_Sexual_Abuse_Prevention_Task_Force_Report.pdf)

184 <https://safekidsthive.org/>





[childrenstrustma.org](http://childrenstrustma.org)