

Indicators of Abuse

Indicators may be observed in both **children** and **adults** that could signal that child abuse is occurring.

These indicators may be observed on their own or in combination. Abuse concerns should be shared with appropriate people or relevant external agencies/support services as soon as possible to best support any child involved.

Type of abuse	Indicators from children	Indicators from adults
Physical abuse	<ul style="list-style-type: none">• Disclosing abuse• Bruises, burns, sprains, dislocations, bite marks, cuts• Fractured bones (especially in an infant where a fracture is unlikely to occur accidentally)• Pressure marks from fingers• Location and extent of injury does not fit the explanation given• Difficulty recalling how injuries happened or giving inconsistent explanations• Poisoning• Showing wariness or distrust of adults or particular individuals• Seasonally inappropriate clothing (to hide bruising or other injury)• Demonstrating fear of parents and of going home, running away• Becoming fearful when other people cry or shout• Being excessively friendly to strangers• Being very passive and compliant• Being violent to animals or other children• Being extremely aggressive or withdrawn• Bed wetting	<ul style="list-style-type: none">• Overly rough play• Pinching, pushing, dragging, slapping, throwing, or shoving a child• Shaking an infant• When explaining causes of injury to a child, their story changes or is vague• Believing in physical punishment• Perspective of "Didn't do me any harm"• Delay in seeking medical help for a child• Hitting a child with hands or objects• Making threats to harm• Animal abuse• Restraining a child as a punishment• Force-feeding a child• Choking, strangling, or suffocating a child, even if only attempted• Lashing out or threatening a child in front of others• General low empathy
Emotional abuse	<ul style="list-style-type: none">• Disclosing abuse• Developmental delays (being behind peers of the same age)• Displaying low self-esteem• Tending to be withdrawn, passive, or tearful• Displaying aggressive or demanding behaviour• Being overly compliant, trying to keep everyone happy• Being highly anxious• Complaining of headaches or stomach pains (psychosomatic complaints)• Displaying difficulties in relating to adults and peers• Avoiding certain people, places, and situations• Sleep disturbances• Regression (acting like a much younger child) e.g. soiling, wetting pants• When playing, behaviour may model or copy abusive behaviour and language• Bed wetting	<ul style="list-style-type: none">• Rejecting a child (not giving them attention, love, and affection)• Calling a child names and/or publicly humiliating them• Frightening a child with threats• Misusing authority, power, or position of trust• Verbal abuse, yelling, swearing• Being critical of a child's efforts or ability• Bullying and intimidation• Forcing compliance• Unpredictable responses (sometimes kind, sometimes volatile)• Humiliation, making degrading comments/insults• Having unrealistic expectations• Severe or harsh interaction with a child• Exposing a child to adult issues• Shunning or rejecting a child• Lack of emotional responsiveness and low empathy• Having a harsh parenting style• Threatening a child with physical harm• Forcing a child to watch physical harm being caused to someone they love

Indicators of Abuse (continued)

Type of abuse	Indicators from children	Indicators from adults
Sexual abuse	<ul style="list-style-type: none"> • Disclosing abuse • Acting in a sexual way with toys or objects • Nightmares • Being withdrawn or clingy • Personality changes, such as seeming insecure or anxious • Complaining of headaches or stomach pains • Fear of particular people or places without an apparent reason • Experiencing problems with schoolwork • Sexually transmitted infections • Unusual or excessive itching or pain in genital or anal area • Changes in eating habits • Genital injuries (bruising, cuts, redness, swelling, bleeding) • Blood in urine or faeces • Pregnancy • Being secretive • Receiving gifts or favouritism from a particular person or people • Displaying sexual behaviour or knowledge that is unusual for that child's age • Perpetrating sexual abuse • Inappropriate masturbation • Experiencing difficulty sleeping • Persistent soiling or bed wetting or regression (starting to wet the bed again having stopped) • Having difficulties relating to adults and peers • Unexplained absences, unexplained gifts or money (often signs of sexual exploitation) • Bed wetting 	<ul style="list-style-type: none"> • Refusing to allow a child sufficient privacy • Insisting on physical affection • Selecting/Favouring a particular child • Abnormal interest in the sexual development of a child or teenager • Discussing or sharing sexual jokes or sexual knowledge/material with a child • Insisting on time alone with a child, including babysitting and outings • Spending most of their spare time with children • Buying children expensive gifts or giving them money for no apparent reason • Treating a particular child as a favourite • Frequently walking in on a child using the bathroom, changing rooms, or toilet • Grooming • Forced hugging and kissing • Encouraging a child to behave in sexually inappropriate ways • Voyeurism (secretly watching or filming children) • Exposing of genitals • Non-contact abuse can also involve failing to protect a child from seeing and hearing sexual activities, media, or conversations
Family violence	<ul style="list-style-type: none"> • Disclosing family violence • Physical injuries • Concentration difficulties • Adjustment difficulties • Being anxious or nervous • Depression • Fear of a parent, or partner of a parent • Isolation from friends and family • Unusual absences • Fear of conflict • Violent outbursts • Aggressive language • Bed wetting 	<ul style="list-style-type: none"> • Being jealous and possessive • Exhibiting controlling behaviour, making all of the decisions • Threatening, criticising, blaming, or humiliating • Mood swings • Having a history of bad relationships • Having a dominant belief system that supports being controlling

Indicators of Abuse (continued)

Type of abuse	Indicators from children	Indicators from adults
Neglect	<ul style="list-style-type: none">• Disclosing neglect• Lack of sanitary protection for girls who are menstruating• Frequent hunger• Malnutrition• Poor hygiene with few self-care skills• Dental decay• Medical conditions not being managed, not improving, or getting worse• Seasonally inappropriate clothing• Being left unsupervised for long periods• Medical needs not attended to, being ill more than average• Stealing food• Staying at school outside of school hours• Often being tired, falling asleep in class or at meal times• Abusing alcohol or drugs• Demanding affection or attention from adults, including strangers• Displaying aggressive behaviour• Not getting on well with peers• Bed wetting	<ul style="list-style-type: none">• Prioritising needs of adults over needs and rights of children• Failing to attend to a child's basic needs• Unresponsive parenting• Failing to take the child for medical appointments• Leaving the child unattended• Repeated "accidents"• Being emotionally unavailable• Appearing to be indifferent to the child• Seeming apathetic or depressed• Believing children are unimportant and their needs are secondary to adults or community needs• Ignoring or belittling children's needs or rights

SchoolDocs appreciates the input of **Safeguarding Children** in providing these indicators and for their review of associated child protection content.

If there is evidence of the indicators above, concerns should be shared with appropriate people or relevant external agencies/support services. In a school context, the recommended first point of contact is the designated child protection person. An overview of the abuse response procedures at school is provided below. For more information, see **Abuse Recognition and Reporting** on **SchoolDocs**.

Abuse response overview:

- Maintain awareness of the indicators of abuse.
- Support any person disclosing abuse.
- Ensure student safety. Contact the police if there is immediate danger, or Oranga Tamariki for support.
- Record all available information, including disclosures, observations, and concerns.
- Consult with the designated child protection person or seek support from an external agency. Do not act alone.
- The designated child protection person supports the student through the school or external agencies.
- Any person that identifies abuse or receives a disclosure is also advised to seek support for themselves.