



# PROTECTING OUR CHILDREN

## 51A Mandated Reporting: What Schools Need to Know

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# Mandated Reporting Laws

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- All 50 states, the District of Columbia, and the US Territories have laws governing the filing of and response to reports of child maltreatment
- In MA = 51A Law
  - G.L. c. 119, s. 51A

# Purpose of 51A Law

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- Every child has the right to be safe and protected from harm
- Mandated reporting laws:
  - Are designed to protect children from abuse, neglect, and exploitation (maltreatment)
  - Provide an opportunity for early detection & intervention

# ALL children are at risk!

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- Children of **every** gender, age, race, ethnicity, culture, religion, sexual orientation, family structure, socioeconomic status, immigration status, and geographic location are at risk of maltreatment.
- Higher risk children:
  - Young children
  - Children with disabilities
  - GLBTQ youth

# Sobering Statistics

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- On average, 4 children die each day as a result of abuse/neglect
  - >80% of child deaths due to maltreatment are of children <4 yo
- Before turning 18 ...
  - 1 in 4 girls is sexually abused
  - 1 in 6 boys is sexually abused
- 9 yo = mean age of child sex abuse victims
- Average age of entry into the commercial sex industry
  - 11-13 yo for boys and transgender youth
  - 12-14 yo for girls

# BE AWARE ...

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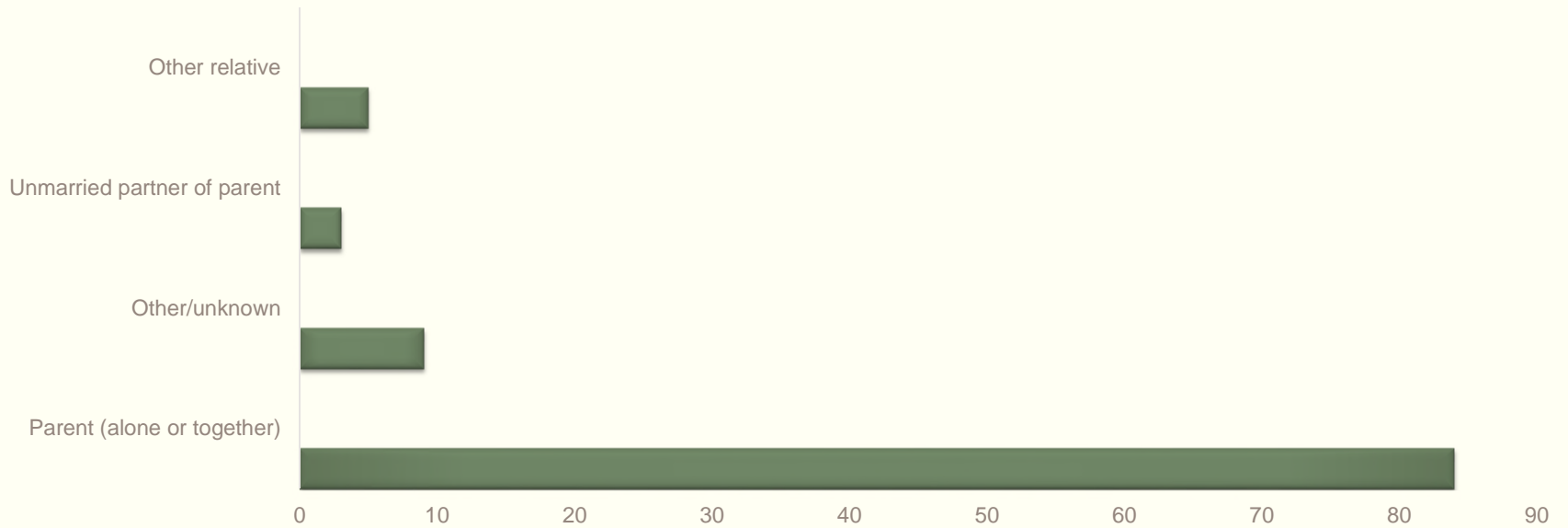
... of your own values, beliefs and biases, and how they influence your expectations of others.



# Relationship of most perpetrators to their victims?

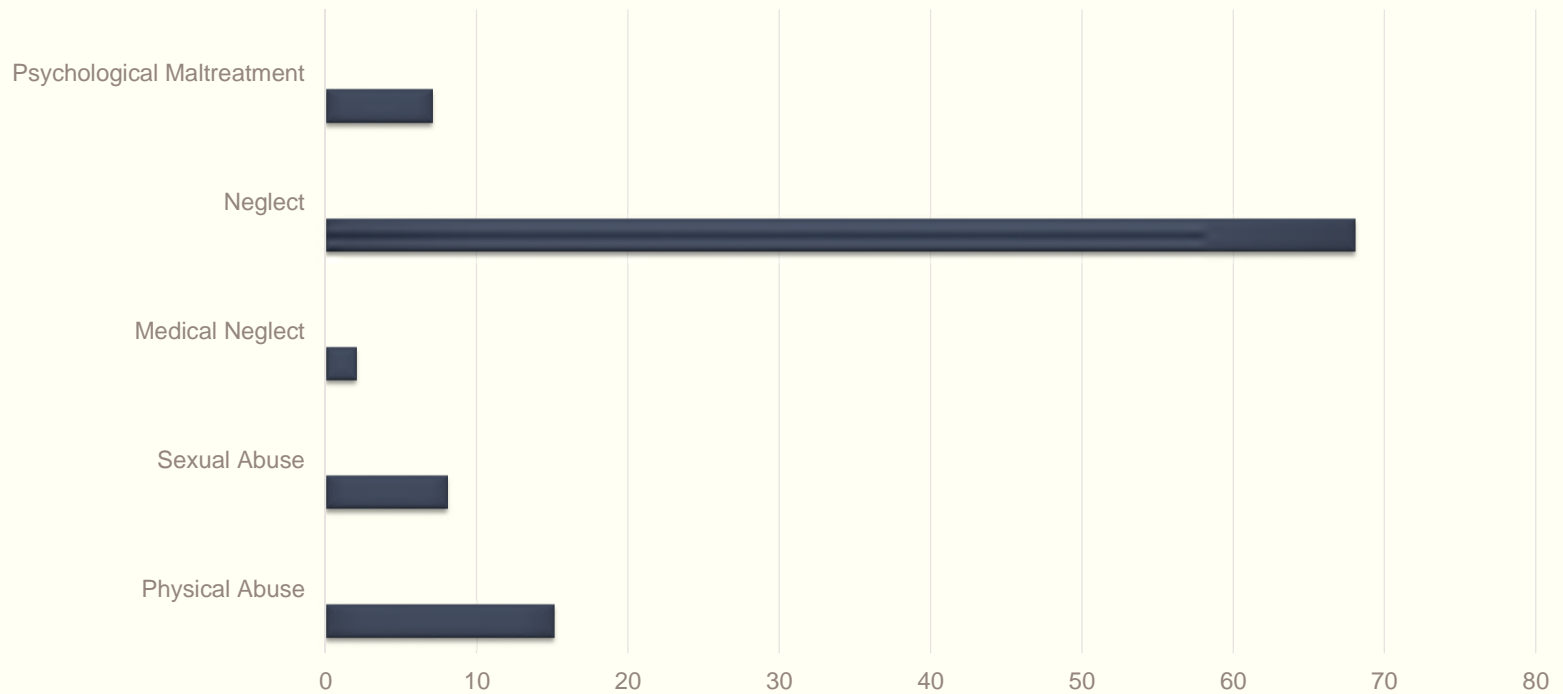
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Chart Title



# What types of child maltreatment are most frequently reported?

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# LEGAL OBLIGATIONS

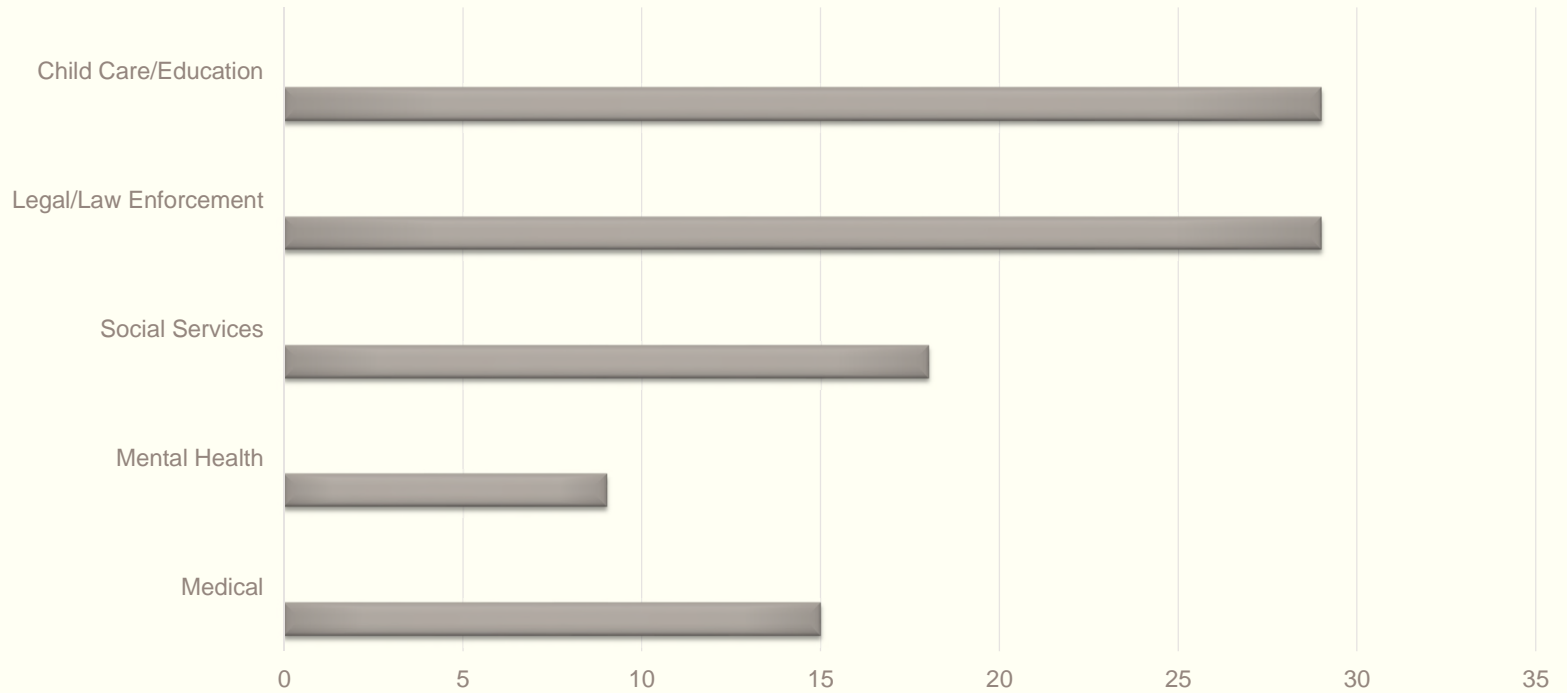
# Who is a Mandated Reporter?

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- Individuals specifically designated by the legislature to report suspected child maltreatment
- Often are the first adults to see signs of or be told about abuse/neglect due to nature of their work
- Examples:
  - Teacher (public or private)
  - Educational administrator
  - Person in charge of a public or private school
  - Nurse
  - Guidance counselor/educational psychologist/social worker
  - School attendance officer
  - Police Officer (SRO)

# Professional mandated reporting sources?


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# MR must file a 51A Report if ...

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- In your professional capacity
- You have reasonable cause to believe (suspect)
- A child [currently] under 18 is suffering from one or more of the following conditions:
  1. Physical or emotional injury resulting from **abuse** inflicted upon him, which causes harm or substantial risk of harm to his health or welfare, including SA
  2. **Neglect**, including malnutrition
  3. Physical dependence upon an addictive drug at birth
  4. Being a **sexually exploited** child
  5. Being a **human trafficking** victim



FAQ:  
WHAT IF I'M NOT ACTING IN MY  
PROFESSIONAL CAPACITY?

You are only **required** to file if you are acting in your professional capacity, but *anyone* who suspects a child is being abused/neglected **can & should** file a 51A.



## FAQ: SHOULD I INVESTIGATE BEFORE FILING?

No. **Suspect** = to have an idea or impression of the existence, presence, or truth of something without certain proof. **Absolute proof is NOT NEEDED.**

MRs are not permitted to weigh the credibility of witnesses, sift through the evidence, or determine whether DCF would ultimately support the report. You should exercise your professional judgment to determine whether you have reasonable cause to believe a child has been maltreated.



FAQ:  
WHAT IF MY COMMUNICATIONS ARE  
NORMALLY CONFIDENTIAL?

Privileges such as social worker or psychotherapist-client “shall not prohibit” the filing of a 51A Report or providing information to DCF during their response (investigation).

The only exception is for “clergy” when the information is gained solely from confession.



# PROTECTIONS FOR MANDATED REPORTERS

IN COURT, AT WORK & CONFIDENTIALITY



# Immunity

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- A MR **shall not be civilly or criminally liable** for filing a 51A Report or contacting LE or OCA pursuant to their duties *if*:
  - Filed in good faith
  - Didn't file a frivolous report, and
  - Didn't cause the abuse/neglect

# Protections at Work

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- **A MR cannot be discharged, discriminated or retaliated against by their employer** for filing in good faith or testifying (or about to testify) in any proceeding involving child abuse/neglect.
- If you are, your employer shall be liable for treble damages (\$\$\$), costs, and attorney's fees.

# Confidentiality

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- A MR's name is protected from disclosure **unless ordered by a Court.**
  - This does not mean the family will not figure out you filed or ask you if you did in an attempt to find out
  - You are under no obligation to tell the family, but you can if you feel comfortable doing so.



# CRIMINAL LIABILITY FOR MANDATED REPORTERS

It is a **crime** for a mandated reporter to ...

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- Fail to file a 51A Report as required by law

# You can be criminally charged ...

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- **Failure to File:**

- Punishable by a fine up to \$1000

- **Failure to file resulting in death/serious injury:**

- MR cannot willfully fail to file if has knowledge of child abuse/neglect that resulted in death or serious injury
- Punishable by NMT 2 ½ years jail and \$5000 fine
- Notification of prof. licensing authority with G or CWOF

- **Failure to notify DA and OCME of death:**

- MR has additional reporting obligations when a child dies as a result of a reportable condition
- Punishable by fine up to \$1000



FAQ:  
CAN I CONTACT OTHER AGENCIES?

Yes. In addition to DCF, you are authorized to contact local law enforcement authorities and the Child Advocate



FAQ:  
DO I STILL HAVE TO FILE IF THE  
ALLEGED PERPETRATOR IS A  
SCHOOL EMPLOYEE?

Yes. After you file, the school, DCF, and LE can work together to meet the protective and investigative concerns + school's employment law obligations.





FAQ:

DO I STILL HAVE TO FILE IF  
ANOTHER MANDATED REPORTER IS  
INVOLVED?

Yes. Each professional may have different information due to the focus of their involvement and we want DCF to have the most complete information possible.



**FAQ:  
WILL I BE NOTIFIED ABOUT DCF'S  
DECISION?**

Yes. DCF will notify a MR in writing within 30d of its determination of the nature, extent, and cause(s) of injuries and services to be provided.



# HOW TO FILE A 51A REPORT

# How quickly must I file?

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- TWO reports are required:
  1. Oral report “immediately”
  2. Written report within 48 hours

# How do I file my ORAL REPORT?

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- During evenings, weekends, holidays, call:
  - **Child-At-Risk-Hotline:**  
**800-792-5200**
- During business hours, call the local area office covering the city/town where the child lives



# Where do I send my WRITTEN REPORT?

Mail, fax, or submit online to the local area office covering the city/town where the child lives.



# Online Reporting

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You are encouraged to use DCF's online reporting option through the Virtual Gateway

[https://sso.hhs.state.ma.us/VGPortal/faces/SelfReg.jspx?SelfRegU=SRwarProvider&\\_adf.ctrl-state=147qtubdkj\\_3](https://sso.hhs.state.ma.us/VGPortal/faces/SelfReg.jspx?SelfRegU=SRwarProvider&_adf.ctrl-state=147qtubdkj_3)

# What must be included in written report?

1. Names/address of child + parent/person responsible for child's care
2. Child's age
3. Child's sex
4. Nature and extent of child's injuries, abuse, maltreatment or neglect, including any evidence of prior injuries, abuse, maltreatment or neglect
5. Circumstances under which you first became aware of the child's injuries, abuse, maltreatment or neglect



## What must be included cont'd

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6. What action, if any, was taken to treat, shelter or otherwise assist the child
7. Your name
8. Any other information you believe might be helpful in establishing the cause of the injuries
9. Identity of the person(s) responsible for the neglect or injuries
10. Other information required by DCF

## 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.

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

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### PARENT, GUARDIAN OR CAREGIVER 1

Name: \_\_\_\_\_

First	Last	Middle
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Address: \_\_\_\_\_

Street & Number	City / Town	State	Zip Code
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Phone #: \_\_\_\_\_ Age/Date of Birth: \_\_\_\_\_

Language Spoken: \_\_\_\_\_ Relationship to Child(ren): \_\_\_\_\_

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**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):

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**REPORTER / REPORT**

Report Date:

Mandatory Report

Non Mandatory Report

Reporter's Name:

First

Last

Middle

(If the reporter represents an institution, school or facility, please indicate)

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.)

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

Substance Use/Misuse

Acute/Chronic Medical Condition

Runaway

Substance Exposed Newborn

Housing Instability/Homelessness

Gang Involvement

Neonatal Abstinence Syndrome

Human Trafficking/Labor

None Applies

Domestic Violence

Human Trafficking/Sexually Exploited Child

Unknown

Mental/Behavioral Health Challenges

Teen Parenting

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.).

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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.

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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):

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

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Are there any concerns for social worker safety?

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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.

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Signature of Reporter:

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FAQ:  
WHAT IF I DON'T HAVE ALL THAT  
INFORMATION?

Just file with the information you have.



FAQ:  
CAN I REFUSE TO PROVIDE  
INFORMATION THAT I HAVE?

No. The Legislature has designated 10 areas of information that “shall be contained” in the report.

- MR cannot file anonymously
- You cannot leave out perp’s ID because think best



FAQ:  
CAN I DELEGATE THE FILING OF  
THE REPORT?

If you are “a member of the staff of a ... school ...,” you may notify the person in charge or their designated agent who shall become responsible for filing the report.



FAQ:  
CAN I DELEGATE THE DECISION TO  
FILE?

No. If you suspect a child has been abused/neglected .a report must be filed. If the person in charge or designated agent disagrees, you should file yourself.





IDENTIFYING CHILD MALTREATMENT AND  
RECOGNIZING POSSIBLE SIGNS &  
SYMPTOMS

# Defining “abuse” and “neglect”

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- The Legislature has not defined the terms as they are used in the 51A Law.
- You should interpret them broadly
- You should not attempt to weigh the seriousness of the maltreatment
- Other statutes and DCF regulations can be used as guidelines, but DCF regs are for their internal use *after* a report is filed and reflect their mandate to protect children from their caregivers.



# PHYSICAL CHILD ABUSE

# Physical Child Abuse

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- = a non-accidental act that causes or creates a substantial risk of physical injury to a child
- This includes situations in which:
  - P intended to cause injury to the child
  - P knowingly or recklessly engaged in behavior that was dangerous to the child and resulted in injury, regardless of whether P intended to cause injury
    - Ex: battering a spouse who is holding an infant who falls and is hurt

# For guidance from DCF regulations ...

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- Physical *injury* includes:
  - Death
  - Fracture of bone
  - Subdural hematoma
  - Burns
  - Impairment of any organ
  - Other such nontrivial injury
  - 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

# Skin Injuries

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- These are the most common manifestation of PCA
- Accident v. Inflicted Injury:
  - Injuries to non-mobile child are concerning
  - Once moving, injuries are commonly seen to bony areas such as shins, elbows, knees, forehead, chin
  - Common areas of abusive injuries include abdomen, buttocks, back, ears, sides of face, upper arms, neck, thighs, and genitalia

# Corporal Punishment

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- MA courts recognize the right of a **parent/guardian** to use **reasonable force** against a **minor child under their care and supervision** as a means of **discipline**, but this must be limited by the compelling interest of protecting children from actual or potential harm.

# Discipline v. Abuse

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- Use your professional judgment taking into consideration:
  - Was the force reasonable or excessive in nature?
  - Was it reasonably related to the purpose of safeguarding or promoting the welfare of the child, including the prevention or punishment of misconduct?
  - Did it cause/create a substantial risk of causing gross degradation, serious mental or emotional injury, or physical harm to the child?
  - Child's age
  - Child's physical, cognitive, and emotional maturity
  - The presence, nature, and extent of any injuries
  - The nature of the child's misconduct
  - Whether the child had the capacity to understand or appreciate the reason for the punishment



# Recognizing Physical Child Abuse

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- The best indicator a child is being abused is if he/she discloses to you.
- Some children will show signs and symptoms of abuse while others will not exhibit outward signs.
- If a child discloses abuse, you should file a 51A regardless of the presence or absence of any signs or symptoms.

## *Possible* signs & symptoms of PA of child

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- Injuries that are unexplained, inconsistently explained, or improbably explained
- Injuries in various stages of healing
- Injuries on several planes of the body at same time
- Injuries in shape of an object (belt, hanger, bite mark)
- Pattern burns (cigarette, iron) or immersion burns
- Difficulty walking or sitting
- Extreme vigilance or watchfulness
- Attempts to hide marks on typically exposed areas of skin
- Drastic behavioral changes in and out of parent/caregiver's presence
- Extreme fear or over-protectiveness of a parent/caregiver
- Depression, substance abuse, suicide attempts, sleeping/eating disorders



# SEXUAL CHILD ABUSE

WHETHER COMMITTED BY AN ADULT OR ANOTHER CHILD

# Sexual Child Abuse

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- Includes either:
  - Engaging in a non-accidental sexual act(s) with a child that causes harm or substantial risk of harm to the child's health or welfare (such acts may qualify as the commission or attempted commission of a criminal sexual offense); or
  - Sexual contact between a caregiver and a child in his/her care

## For guidance from DCF regulations ...

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- Can be physical, verbal, or written
- Includes oral/genital/digital/anal penetration, fondling, sexual molestation, masturbating or exposure of sexual organs in front of a child
- Verbal sexual contact is sexually-oriented communication that is not reasonably intended to provide information and direction for the child's education and physical and emotional well-being

# Young children

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- Sexual curiosity/behaviors that are developmentally appropriate for children  $\leq 6$  don't qualify as child SA
  - Preschoolers may show their genitals to others, touch their own genitals in public or private, or want to be naked
  - As children get older, they are more modest/aware of societal mores
  - Age-appropriate sexualized behaviors in young children are transient and often only require adult guidance/redirection
- Consider the following when deciding whether to file:
  - Are acts beyond child's developmental stage (asking to engage in specific sex act, inserting object in genital opening)?
  - Do acts involve threats, force, or coercion?
  - Are acts intrusive or disruptive?
  - Do acts provoke emotional distress or physical pain?

# Teens & Age of Legal Consent

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- Many of our laws criminalizing sexual acts with minors incorporate an age of consent, which presumes that children “are not sufficiently mature to understand fully the physical, mental, and emotional consequences of sexual intercourse, and are therefore incapable of making a rational decision about whether to consent to such conduct.”
- Children are incapable of consenting to:
  - Sexual touching until 14<sup>th</sup> birthday
  - Sexual penetration until 16<sup>th</sup> birthday
- Children are provided increased protections against exploitation until their 18<sup>th</sup> birthday
- Penalties are enhanced when convicted of raping a child:
  - Under 12 and there is a >5 year age difference
  - Between 12-16 and there is a >10 year age difference

# Teens & Legal Consent cont'd

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- Not all underage sex is child SA requiring a 51A Report
- Consent must be freely & knowingly given so you have to file a 51A whenever:
  - Act is committed w/o child's consent (force/threat bodily injury)
  - Child is incapable of consenting (intoxication, sleep, disability)
- In determining whether to file, you should assess in addition to child's age:
  - Any age disparity between child and partner
  - Child's cognitive, emotional, psychological & social maturity
  - Any power imbalance between child and partner
  - Whether coercive factors are present (DV, gang involvement)



# Teens & Legal Consent cont'd

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- Although DCF may forward some cases to LE per law, this does not necessarily mean criminal charges will be sought
- DCF and LE work collaboratively as part of a MDT with the best interest of the child in mind. This includes ensuring any needed appropriate services are offered.
  - **BE SURE TO INCLUDE** any information you have about the parent/guardian's awareness of relationship, cultural issues, and any pregnancy and intention re: pregnancy in your report so DCF and/or LE can make informed decisions

# *Possible signs & symptoms of child SA*

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- Sexually transmitted infections
- Pregnancy
- Recurring pain or itching in genital/anal areas
- Frequent bladder and urinary tract infections
- Genital injury such as bruising or tearing
- Premature sexual knowledge, language, behaviors
- Not wanting to be left alone with particular individual
- Increase in nightmares or sleep problems
- Unusual interest in/avoidance of all things of sexual nature
- Self-destructive behaviors (self-mutilation, substance abuse, eating disorders)

# Recognizing Sexual Child Abuse

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- The best indicator a child is being sexually abused is if he/she discloses abuse to you = file 51A
- Some children will show signs & symptoms of abuse while others will not.
- If you see signs & symptoms in absence of a disclosure, use your best judgment to determine whether you have reasonable cause to believe the child is being sexually abused



# CHILD NEGLECT

# Neglect (DCF Regulation)

- The failure *by a caregiver* 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, including malnutrition.
- Can be deliberate or through negligence or inability,
- **Cannot be due solely to inadequate economic resources or a handicapping condition.**
- **INJURY IS NOT REQUIRED**

# Who qualifies as a caregiver

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- Should be broadly construed to encompass any person who at the time in question is entrusted with a degree of responsibility for the child
- Specifically includes a person who is a child under 18
- Examples:
  - Parent/stepparent
  - Guardian
  - Child care provider
  - Babysitter
  - Teacher
  - School bus driver
  - Camp counselor

# Educational Neglect

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- Consistent participation in school and school-based activities plays a critical role in the ability to make a successful transition from childhood to adulthood.
- A 51A must be filed when parent/guardian fails to:
  - Enroll/register a school-aged child in school
  - Fails to provide proper home-schooling
  - Permits habitual truancy or tardiness
- Factor to consider:
  - Child's age/ability to be responsible for own regular attendance
  - Whether parent responds to requests from school to meet regarding child's attendance problems
  - Whether parent makes efforts to work with the school to encourage child's future attendance, including cooperating with any intervention plan
  - If applicable, whether family is following an approved home-schooling plan

# Medical Neglect

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- Occurs when a parent/guardian fails to provide medical, dental, or mental health care necessary to prevent or treat serious physical or emotional injury or illness to a child despite the financial ability to do so or having been offered financial assistance or other means to do so:
  - Failing to seek treatment for failure to thrive
  - Failing to seek essential medical attention for obvious injury
  - Failing to seek treatment for dental cavities causing them to become abscessed or septic
  - Failing to follow up on prescribed treatment, appointments, and tests for diagnosed chronic disease (diabetes, asthma, cancer)
  - Failing to follow up on mental health issues



# Caregiver Substance Use

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- When a caregiver's use of substances (even if legal) interferes with their ability to meet child's basic physical, emotional, medical, and safety needs, it qualifies as neglect and a 51A Report must be filed
- Factors to consider in deciding whether to file:
  - Exposure to sale or distribution of drugs
  - Controlled substances being manufactured or cultivate in presence of child or on premises occupied by child
  - Home environment unsanitary or unsafe (e.g., drugs, chemicals, paraphernalia accessible to child)
  - Caregiver consistently prioritizes own need for substances over child's basic needs
  - Substance use interferes with ability to provide a safe, nurturing environment
  - Transporting child while under influence of substance that impairs ability to drive safely

# Neglect & Domestic Violence

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- Exposing children to DV places them at increased risk of physical injury, promotes desensitization, leads to acceptance of physical harm, and fosters imitating behaviors to seek control.
- It also is associated with a risk of lasting psychological, developmental, and social problems regardless of whether the children are abused themselves.
- When to file a 51A:
  - P makes threats to kill caregiver, children, or self and caregiver in fear
  - Child was physically injured in incident where caregiver was target
  - Child was coerced to participate in or witness abuse of caregiver
  - Incident involved use or threatened use of a weapon and caregiver believes P intended to or has ability to cause harm

## *Possible* signs & symptoms of neglect

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- Lack of medical or dental care, immunizations, glasses
- Chronically dirty or unbathed
- Lack of appropriate clothing for the weather
- Frequently late or absent from school
- Regularly displays fatigue, lethargy, falls asleep in class
- Beggars or steals food or money
- Substance abuse
- Medicated when not necessary
- Lack of supervision



## FAQ: AT WHAT AGE DOES MASSACHUSETTS ALLOW YOU TO LEAVE CHILD HOME ALONE?

MA has no set age and the level of risk for each child may be different. Consider:

- child's developmental, emotional, cognitive and physical maturity
- behavioral history
- whether child is comfortable with arrangement
- whether child knows how to call for help or reach parent if needed
- prior discussions about not using dangerous appliances, emergency preparedness and escape plans



# CHILD EXPLOITATION

# CSEC/Human Trafficking

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- Any child may be vulnerable to a person who promises to meet their emotional and physical needs, especially runaway children, those who have been previously sexually abused, and those experiencing trouble at home (substance abuse, DV, loss of parent).
- A pimp targets and lures vulnerable children into the commercial sex industry using psychological manipulation to make them believe he/she loves and cares for their well-being. After establishing trust and allegiance, the pimp uses physical control to make the child feel trapped and powerless (trauma bond).

# Child Sexual Exploitation

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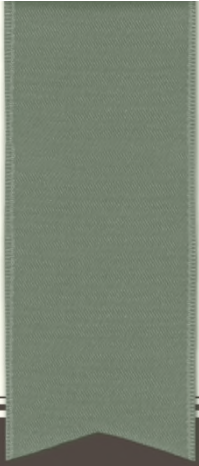
- A “sexually exploited child” is one who has been subjected to sexual exploitation because he/she:
  - Is the victim of the crime of sexual servitude, sex trafficking, or inducing a minor into prostitution
  - Agrees, offers or engages in sexual conduct in exchange for a fee, food, shelter, clothing, education, or care
  - Engages in common night walking or streetwalking
- A child who is subjected to trafficking for forced services or sexual servitude is a “human trafficking victim.” This includes engaging in:
  - Commercial sexual activity
  - Sexually-explicit performance
  - Production of unlawful pornography

# *Possible* signs & symptoms of exploitation

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- History of running away or current status as a runaway
- Unexplained absences from home/residential program/school
- Visible signs of abuse (to body, but not face)
- Has a tattoo he/she is reluctant to explain
- Involved with a male who is significantly older and/or gang involved
- Change in physical appearance (unexplained higher quality clothes, jewelry, hair)
- Multiple cell phones
- History of multiple STIs and/or pregnancies
- Behaviors consistent with PTSD
- Interest in pornography or other parts of “the life”
- Disconnected from family/other caregivers
- Lost interest in age-appropriate activities





# LAST FEW TIPS

# What to do if a child discloses abuse to you

- Find a private place to talk
- Listen to what the child is telling you
- Don't ask a lot of questions
- Ask for clarification if you don't understand rather than assuming information
- Do not ask the child to write a statement even if old enough
- Do not ask leading questions
- Do not conduct multiple or extensive interviews of child

# Delayed disclosures of sexual abuse

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Many reasons children do not immediately report or recant abuse, including:

- Threats of bodily harm to child or loved one
- Fear of being removed from home/family breaking up
- Fear of not being believed
- Fear of being blamed or getting in trouble
- Feelings of shame, guilt, or embarrassment
- Fear of losing attention or special gifts
- Pressure from others to deny the abuse
- Too young to comprehend the significance of the abuse

# After you file your 51A Report

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- DCF will make a screening decision
- DCF may investigate the case
- DCF may open a case with the family for services
- DCF may refer the report to the local DA and police
- If so, a MDT approach is employed to reduce the number of investigative interviews and court appearances, allow for services to be more quickly and effectively coordinated, and ensure the team has the appropriate information to reach a result that is in the best interest of the child
- A specially trained professional will interview the child in a setting that ensures reliable information is elicited in a legally sound, culturally sensitive, and clinically and developmentally appropriate manner.

## RESOURCES

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**Middlesex District Attorney's Child Protection Unit:**

781.897.8400

[www.middlesexda.com](http://www.middlesexda.com)

**Middlesex Children's Advocacy Center:**

[www.middlesexcac.org](http://www.middlesexcac.org)

**Online 51A Training + Recertification Program:**

<http://51a.middlesexcac.org>