

Guidance to Maine Pediatricians/Family Physicians Concerning Increased Risk for Child Maltreatment

The novel coronavirus pandemic (COVID-19) has abruptly disrupted the normal daily life for every family across the United States, and Maine is certainly no exception. The [Stay Healthy At Home](#) order from Governor Mills along with many other local and regional “physical distancing” orders are necessary to slow the spread of a very serious infection across the state. But cumulative anxiety and stress in the community has increased and children are very much affected by all of this. In addition to the economic stress for some families being suddenly unemployed, furloughed, or otherwise having markedly reduced income, there is added stress from households being cooped up for days on end and with no set end date. In addition, many parents are now having to become adjunct teachers for their homeschooled children and daycare providers. Children sense the anxiety in their adult caretakers, and this may result in an increase in acting-out behaviors. This may be amplified in the homes with family members who have become infected or have been exposed to infected people.

Previously in times of societal stress, there have been increases in reported cases of child abuse, such as was noted during the “Great Recession” of 2007-2009 when there was a near doubling of abusive head trauma (AHT) cases (Berger 2011). With this pandemic, physical distancing is creating an additional challenge. Children may not have teachers or child care workers to see their bruises or hear their stories. Maltreatment may be more likely to go unrecognized and unreported. Layered on top of that, most pediatric offices are appropriately trying to reduce face-to-face visits by providing more telehealth services via telephone and/or videoconferencing.

As pediatricians, you are aware of the increased stress being placed on all families with children during this time. You also need to stay attuned to the fact that increased stress in the home could increase the incidence of child maltreatment occurrence of all types, but particularly of neglect and physical abuse, including abusive head trauma. The following are a few suggestions to consider in order to assist families with children and at the same time, screen for the possibility of child maltreatment.

- When triaging patients on the phone, do not forget to inquire about risk factors for maltreatment in addition to the fever, cough, and abnormal breathing. Ask about how the parent/caregiver is handling the stress. Ask if they have adequate food and income resources. Be prepared to direct them to resources to assist them if they report problems. A social service resource to direct them to such as the Social Care Network: <https://www.auntbertha.com/> or 211 Maine may be helpful. Be prepared to counsel caretakers on positive parenting techniques. One excellent resource to direct them to is the AAP’s Healthychildren.org website (<https://www.healthychildren.org>).
- If the caretaker is reporting symptoms or injuries concerning for abuse, **those children should be seen urgently and in person**, not managed over the phone. You should also call the child abuse team at the **Spurwink Center for Safe and Healthy Families at 207-879-6160**.
- To help recognize bruises concerning for abuse, remember the pneumonic, **TEN-4 FACESp**:
 - **T**orso (chest, abdomen, back, genitals, or buttocks)
 - **E**ars
 - **N**eck
 - Under the age of 4 years along with any bruising under 4 months of age.
 - **F**renula (upper & lower lip and tongue)
 - **A**ngle of the jaw
 - **C**heek
 - **E**yelids
 - **S**cleral/subconjunctival hemorrhages
 - **p**atterned bruises
- Other concerning symptoms & situations include:

- Symptoms of head injury with lethargy, change in consciousness, vomiting, irritability, seizures
 - Ingestion of a toxic or illicit substance
 - Large area or patterned burns
- Sexual abuse concerns that should be examined directly face to face, not delayed or performed using telemedicine:
 - Any reported inappropriate sexual contact that occurred within the previous 72 hours should be directed to the nearest pediatric SAFE examination center.
 - Children reporting ano-genital pain, bleeding, blisters, bruises, or vaginal discharge
 - Menstruating female reporting contacts that increase the risk for an STI or pregnancy.

If you suspect child maltreatment, you must report your concerns to DHHS through the **Child Abuse Hotline 1-800-452-1999 (Voice) 711(TTY)**. If you are concerned for physical or sexual abuse, you should also call the Child Abuse team at the Spurwink Center for Safe and Healthy Families. If you have urgent concerns about the safety of the child (or children) in the home, you should contact the local law enforcement agency (LE) and ask them to check on the children in the home. If you notice concerning injuries while performing a videoconference telehealth visit, you need to report your concerns to DHHS or LE, but the timing of notifying the caretaker/parent that you are making the report will depend on your concern for the immediate safety of the child. There is no one correct answer for this scenario and ultimately the safety of the child should always take priority.

AAP Resources:

- AAP Tip sheet for parents at home due to COVID-19: <https://www.aap.org/en-us/about-the-aap/aap-press-room/Pages/The-American-Academy-of-Pediatrics-Advises-Parents-Experiencing-Stress-over-COVID-19.aspx>
- Healthy Children website: <https://www.healthychildren.org/English/Pages/default.aspx>

Other Resources:

- Maine Department of Health and Human Services Office of Child and Family Services website: <https://www.maine.gov/dhhs/ocfs/>
- [Spurwink Center for Safe and Healthy Families 207-879-6160](https://www.spurwinkcenter.org/207-879-6160)
- National Child Traumatic Stress Network: https://www.nctsn.org/sites/default/files/resources/fact-sheet/outbreak_factsheet_1.pdf

Reference:

1. Berger RA, et al. Abusive head trauma during a time of increased unemployment: a multicenter analysis. *Pediatrics* 2011;128 (4):637-643.

Amanda Brownell, MD, Medical Director, Child Abuse Pediatrician, Spurwink Center for Safe and Healthy Families

Adrienne Carmack, MD, Medical Director, Pediatrician, Maine Office of Child and Family Services

Deborah Hagler, MD, Medical Director, Midcoast Community Health and Wellness, Pediatrician, Maine AAP President