Parent-Friendly Guide to Research: O.U.R. Children Project

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Last month I summarized what we have learned as result of the O.U.R. Project work, i.e.,

- We have learned to focus upon the safety and success we want for our children, vs. the harm and trauma of maltreatment.

- We have learned that individuals must be willing to talk about our children's safety before they can act to enhance that safety.

- We have learned that the safety and well being of our children is inherently grounded in the safety and well being of our parents.

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- We have learned that while we must trust our instincts when we think a parent, or a child, is experiencing trauma, we are frequently not ready to act on those instincts.

- We have learned that educational professionals are often hesitant to incorporate child safety into IFSP and IEP plans.

- We have learned that parents need "just in time" vs. "just in case" information concerning the safety of their children.

- We have learned that we need partners to successfully and systematically enhance the safety of our children.

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- We learned that while H&V Headquarters should lead, real change occurs at the Chapter and member level.

- Finally we learned that the safety and success of our children is not a "one and done" task, but rather an ongoing process through which we must continually welcome and support others to join the OUR Children Project.

Questions I was asked to address…

- I support other parents of children who are deaf/hh. How can I bring up this topic as a Guide By Your Side, ASTra Guide, Chapter leader, or through another family-based organization?

- I am a professional who works with children who are deaf/hh. What can I do to increase awareness, prevention and/or reporting?

- I am a parent of a child who is deaf/hard of hearing plus, What can I do to inform and encourage the professionals who work with my child to "build" safety into their work?

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Strategies…

- Start a conversation by asking a question, or making a statement. e.g.,
  - Sometimes I become frustrated, angry and scared because I do not know what to do, how to help my child, how to get my husband more involved.
  - "I want my child to learn to know the name for the parts of his body and how better express his emotions, while also improving his reading skills, do you have any ideas?
  - "I think my daughter is very socially isolated and lonely, I would like her to have some friends her own age, do you have any ideas?"
  - "Story telling is vey important in my family, I would really like for my child to improve his ability to share the who, what, when, where and why of a story, can you help me with this?"
  - "I know my daughter will soon enter puberty, but I do not think she understand how her body and emotions will change, how can this knowledge be incorporated into her IEP?"
  - My child is very, very compliant, he will do just about anything any adult ask him to do, as a result, I am concerned he will get into trouble, or even worse be abused, can you help me with this problem?
  - My child has experienced some significant trauma in his life, as a result, he may "act out" when he experiences an emotional "triggered," what can we do to help him?
  - …additional "starter" questions or statements?

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- Use the individual's response to share your concern for your child's interpersonal safety and success.
- If the individual agrees with your concern and is ready to act, "jump" to the slides re. :
  - Prevention &
  - Response
- If the individual seems confused, uncertain or unresponsive re. the need to address your concern, then share information from the following slides that "ground" your request in the professional literature:
  - Professional Responsibilities
  - Definition
  - Incidence
  - Causes
  - Impact
  - Timing
  - Perpetrators
  - Recognition
  - Reporting

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We know…

- **Professional Responsibility**: …In September of 2018, the Council for Exceptional Children formally recognized "…that all children and youth with disabilities have the right to live and flourish in a safe environment where they are protected and have support to protect themselves from all forms of maltreatment—neglect as well as physical, sexual, and psychological abuse" (Corr, C., 2019). Key points of the Policy:

  - Establishing clearly articulated maltreatment prevention and response policies, procedures, and curricula.

  - Incorporating maltreatment intervention strategies—including prevention, assessment, and instruction—within multitiered systems of support, partnerships with community agencies, and parent-to-parent expertise

    - Web Resource: *CEC's Policy on the Prevention of and Response to Maltreatment.*"

We know…

- **Definition**: …individuals who harm children are either actively (abuse), or passively (neglect) using a child to satisfy their own needs and desires in such a way to cause significant harm to the child (Lightfoot, 2019).

  - Web Resource: Definitions of Child Abuse & Neglect

- **Incidence**: …children with disabilities are 3-4 times more likely to maltreated (neglected & abused) than their nondisabled peers (Sullivan & Knutson, 2000). Particular types of disabilities, e.g., those with behavior and/or communication disabilities, experience higher rates of maltreatment (Christoffersen, 2019).

  - Web Resource: The Risk and Prevention of Maltreatment of Children with Disabilities

We know…

- **Causes**: …children with disabilities are at greater risk for maltreatment due to their:

  - …social isolation, stigma and discrimination (Lightfoot, 2019; Lomas & Johnson, 2012).

  - … limited language skills that reduce their understanding and ability to report maltreatment (Miller, Verson, & Capella, 2005).

  - …limited understanding of their emerging sexuality and what constitutes maltreatment (Miller, Verson, & Capella, 2005).

  - …conditioning to be compliant to adult commands and being touch by adults without consent or understanding (Hibbard & Desch, 2007; MacDougall, 2000).

    - Web Resource: [Child Factors That Contribute to Child Abuse and Neglect](#)

We know…

- **Impact**:…children who experience abuse are at increased risk for:
    - Health: increased probability of experiencing obesity, high blood pressure, and cardiovascular disease (Dye, 2018).
    - Behavior: self-injurious behaviors, eating disorders, aggression, substance abuse (Dye, 2018).
    - Emotional: depression, learned helplessness, attachment disorders, inability to trust others, difficulty in regulating stress, suicidal behavior (Dye, 2018).
    - Education: decreases school attendance, poor academic performance, and increases school drop outs (Fry, D., Xiangming, F., Stuart, E., Casey, T., Xiaodong, Z., Jiaoyuan, L., Lani, F., & Gillean, M., 2018)
        - Web Resource: Long-Term Consequences of Child Abuse and Neglect

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We know…

- **Timing**: …children are at greatest risk for neglect and physical abuse during their first five years of life when they are the most isolated and dependent on others for the health and wellbeing (Wildeman, Emanuel, Leventhal, Putnam-Horstein, & Waldfogel, 2014). As children grow older, their risk for neglect decreases and their risk physical, sexual and emotional abuse increases (Putnam-Hornstein & Needell, 2011). Abuse is most likely to occur when the abuser can isolate and be alone with a child (Winters & Jeglic, 2017).

  - Web Resource: Child Maltreatment 2019: Summary of Key Findings (full report)

- **Perpetrators**: …most individuals who neglect children are female vs. most individuals who abuse children are males. Individuals who have the most contact with, control over and isolated time with a child have the greatest opportunity to abuse the child. In the majority of cases, such individuals are the child's parents, followed by those who are known and trusted by the parents. Most perpetrators are in the early to late 20s. (Hurren, Thompson, Jenkins, Chrzaniwsju, Allard &Stewart, 2018).

  - Web Resource: Child Maltreatment 2019: Summary of Key Findings (full report)

We know…

- **Recognition**:

  - …children who are experiencing abuse often: (1) show sudden changes in behavior; (2) excessively vigilant/watchful; (3) are overly compliant, withdrawn, or aggressive; (4) are reluctant to be around a particular individual, or go to a particular setting.

  - …adults who are abusing children often: (1) blame the child for problems; (2) show littleconcern or empathy; (3) encourage harsh discipline for the child; (4) demand unreasonable levels of performance; (5) are excessively controlling; (6) rely upon the child to meet their (i.e., the adults) needs.

  (Child Welfare Information Gateway, 2019)

  - Web Resource: What is Child Abuse and Neglect? Recognizing the Signs and Symptoms

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We know…

- **Reporting**: …

  - …there is significant hesitancy to report a child suspected to be experiencing child abuse due a fear of being wrong, uncertainty re. how to make a report and a lack of knowledge of what happens after a report has been made (Alvarex, Kenny, Donohue & Carpin, 2004; Kenny, 2001; 2004).

    - Web Resources:

      - CheldHelp Hotline +

      - State Statues Regarding Child Maltreatment +

      - State Child Abuse & Neglect Reporting Numbers

We know…

- **Prevention**: … The abuse of children with disabilities can be addressed by turning risk factors into safety strategies, e.g., parent support and home visitation programs, reducing children's social isolation, enhancing children's self-empowerment, etc. (Christoffersen, 2019).
  - Web Resources:
    - Hands & Voices: O.U.R. Children Project
      - Parent Tool Kit
      - IFSP/IEP Assessment & Intervention: Safety Check List
      - Helping Parents Talk to Children About Child Abuse & Neglect
      - Vook Club Book & Video List
    - CDC: Adverse Childhood Experiences
      - Violence Prevention: Risk & Protective Factors
      - Prevention Strategies
    - Child Welfare Information Gateway: Child Abuse & Neglect
      - Parent Focused Protective Factors
    - Kidpower International
      - Safety Signals

We know…

- **Response**: …Most teachers are unsure how to respond to their students traumatic experiences and how to balance the needs of the traumatized student with those of the entire class (Alistic, 2012). The use of "trauma informed practices is now addressing this problem by shifting the question from "what is wrong with you" to "what has happened to you?" (Thomas, Crosby & Vanderhaar, 2019).

  - Web Resources: **Building knowledge and understanding on the nature and impacts of trauma**

    - National Child Traumatic Stress Network: Child Trauma Toolkit for Educators

    - Washington Education Association: Trauma-Informed Care Resources for Educators …

  - Web Resources: **Shifting perspectives and building emotionally healthy school cultures**

    - Washington Office of Superintendent of Public Instruction: The Heart of Learning: Compassion, Resiliency, and Academic Success

    - Massachusetts Advocates for Children: Helping Traumatized Children Learn Volume 1 + Volume 2

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Conclusion…

- Enhancement of children's safety and success starts in a conversation with a key individual in your child's life.

- A conversation…
  - …in which a question, or a statement of concern, is raised;
  - …where specific knowledge and resources are shared; and
  - …which results in an action plan for your child.

- Actions that support families in their attachment, understanding and care for their children and for themselves.

- Actions that inform parents how to establish a safe and nurturing home environment.

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- Actions that enriches children's educational plans by the inclusion of learning objectives that enhance both their safety and success.

- Actions that change our perspective on children's "acting out behavior" from "**what is wrong with you**" to "**what happened to you**?"

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- In preparation for these conversations, rely upon the progression of knowledge, skills and resources shared in the Hands & Voices Parent Tool Kit , IFSP/IEP Safety Checklist, Recommended Book List from the VOOK Club and this PowerePoint presentation to guide the safety requests for your child.

- **Above all, persist**. Continue to initiate conversations where you raise concerns, ask questions and share the knowledge and resources developed by the Hands & Voices O.U.R. Children Project.

Who is the first "key" individual you will have this conversation with?

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