CHILD ABUSE AND ITS KNOWLEDGE AMONG DENTISTS

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Abstract: To survey about the knowledge about child abuse, various objectives to identify child abuse, to manage and report child abuse. Child abuse may be defined as an act by parents or caregivers which endangers a child's or young person's physical or emotional health or development. Child abuse is a disturbingly common finding in society today and it's important to know that dentists and general physicians are in a strategic position to recognise and report child abuse.

Keywords: Child Abuse, neglect, dentists, physical, emotional

INTRODUCTION

Child abuse is any action by another person adult or child that causes significant harm to a child. It can be physical, sexual or emotional, but can just as often be about a lack of love, care and attention. We know that neglect, whatever form it takes, can be just as damaging to a child as physical abuse. An abused child will often experience more than one type of abuse, as well as other difficulties in their lives. It often happens over a period of time, rather than being a one-off event. It can increasingly happen online. Definitions of what constitutes child abuse vary among professionals, and between social and cultural groups, as well as across time. The terms abuse and maltreatment are often used interchangeably in the literature.

There are many types of child abuse being reported, they are domestic abuse, sexual abuse, neglect, physical abuse, emotional abuse, online abuse. Hence this study is done to evaluate the dentist knowledge

Domestic abuse

Witnessing domestic abuse is child abuse, and teenagers can suffer domestic abuse in their relationships. Domestic and family violence is a pattern of abusive behaviour in an intimate relationship, which features coercion and control, which that over time puts one person in a position of power over another, and causes fear. It can incorporate a range of abuses including but not limited to: physical, sexual and emotional assaults; stalking; isolating the person from friends and family; financial abuse; spiritual/cultural abuse; legal abuse; damage to personal property; threats of harm to pets and loved ones; psychological abuse e.g. manipulation, denial etc.

Sexual abuse

A child is sexually abused when they are forced or persuaded to take part in sexual activities. This doesn't have to be physical contact, and it can happen online. Child sexual abuse describes any incident in an adult, adolescent or child uses their power and authority to engage a minor in a sexual act, or exposes the minor to inappropriate sexual behaviour or material. A person may sexually abuse a child using threats and physical force, but sexual abuse often involves subtle forms of manipulation, in which the child is coerced into believing that the activity is an expression of love, or that the child bought the abuse upon themselves. Sexual abuse involves contact and non-contact offences.

Neglect

Neglect is the ongoing failure to meet a child's basic needs. It's dangerous and children can suffer serious and long-term harm.

Online abuse

Online abuse is any type of abuse that happens on the web, whether through social networks, playing online games or using mobile phones.

Physical abuse

Physical abuse is deliberately hurting a child causing injuries such as bruises, broken bones, burns or cuts. Physical abuse refers to 'any non-accidental physical act inflicted upon a child by a person having the care of a child'. It is not always a result of intent to hurt a child but sometimes can be justified as being a form of discipline. However when it is fear based, and involves unpredictability or lashing out in anger, it constitutes physical abuse. Physical abuse is the type of abuse most likely to be accompanied by another form, specifically emotional abuse or neglect. When a parent or caregiver 'makes up' an illness it is also considered physical abuse

Emotional abuse

Children who are emotionally abused suffer emotional maltreatment or neglect. It's sometimes called psychological abuse and can cause children serious harm. Emotional abuse or maltreatment, also known as psychological abuse or maltreatment is the most

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common form of child abuse. It is also experienced by children witnessing domestic violence. While many parents are emotionally abusive without being violent or sexually abusive, emotional abuse often accompanies physical and sexual abuse. It includes acts of omission (what is not done) e.g. emotional neglect e.g. not expressing or showing love and affection and commission (what is done) e.g. rejection, humiliation, insults, setting unreasonable expectations or restricting opportunities for the child to learn, socialise or explore. Each can negatively impact a child's self-esteem and social competence.

Child sexual exploitation

Child sexual exploitation is a type of sexual abuse in which children are sexually exploited for money, power or status.

Bullying and cyberbullying

Bullying can happen anywhere – at school, at home or online. It's usually repeated over a long period of time and can hurt a child both physically and emotionally.

CAUSES:

Child abuse is a complex phenomenon with multiple causes (1). No single factor can be identified as to why some adults behave violently toward children. The World Health Organization (WHO) and the International Society for Prevention of Child Abuse and Neglect (ISPCAN) identify multiple factors at the level of the individual, their relationships, their local community, and their society at large that combine to influence the occurrence of child maltreatment. At the individual level, such factors include age, sex, and personal history, while at the level of society, factors contributing to child maltreatment include cultural norms encouraging harsh physical punishment of children, economic inequality, and the lack of social safety nets(2).WHO and ISPCAN state that understanding the complex interplay of various risk factors is vital for dealing with the problem of child maltreatment(2). Parents who physically abuse their spouses are more likely than others to physically abuse their children.(3)However, it is impossible to know whether marital strife is a cause of child abuse, or if both the marital strife and the abuse are caused by tendencies in the abuser.(3) Sometimes, parents set expectations for their child that are clearly beyond the child's capability. When parents' expectations are far beyond what is appropriate to the child (e.g., preschool children who are expected to be totally responsible for self-care or provision of nurturance to parents) the resulting frustration caused by the child's non-compliance is believed to function as a contributory if not necessary cause of child abuse.(4)

Most acts of physical violence against children are undertaken with the intent to punish.(5) In the United States, interviews with parents reveal that as many as two thirds of documented instances of physical abuse begin as acts of corporal punishment meant to correct a child's behavior, while a large-scale Canadian study found that three quarters of substantiated cases of physical abuse of children have occurred within the context of physical punishment.(6)Other studies have shown that children and infants who are spanked by parents are several times more likely to be severely assaulted by their parents or suffer an injury requiring medical attention. Studies indicate that such abusive treatment often involves parents attributing conflict to their child's willfulness or rejection, as well as "coercive family dynamics and conditioned emotional responses".(7)Factors involved in the escalation of ordinary physical punishment by parents into confirmed child abuse may be the punishing parent's inability to control their anger or judge their own strength, and the parent being unaware of the child's physical vulnerabilities.(8)

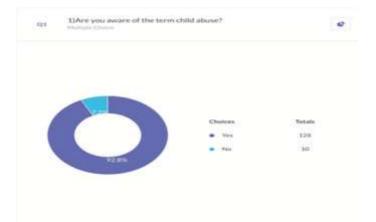
BACKGROUND

Child abuse is widespread and can occur in any cultural, ethnic, or income group. Child abuse can be physical, emotional, verbal, or sexual. It can also result from neglect. Abuse can result in serious injury to the child and possibly even death. Symptoms of child abuse Is not always easy to recognize.. Children who are abused are often afraid to complain because they are fearful that they will be blamed or that no one will believe them. Additionally, the person who abused them may be someone they love very much and want to protect. Parents are often unable to recognize symptoms of abuse because they may not want to face this reality.If you suspect a child has been sexually abused, the child should be examined as soon as possible by a trained health care professional; it can't be stressed enough that an abused child needs immediate access to special support and treatment. A doctor's exam should not be delayed for any reason. Many signs of injury related to sexual abuse are temporary. Ideally, the exam should occur within 72 hours of the event or discovery. A complete physical exam must always be performed so that the examiner can look for any signs of physical or sexual abuse. These two forms of abuse may coexist. The longer the abuse continues, the less likely the child will make a full recovery.

As a dentist when you come across a case of child abuse or if a child abuse has been reported, it's the responsibility of a dentist to identify child abuse and report it.

MATERIALS AND METHODS

A survey was conducted to assess the knowledge about child abuse among dentists. This survey was conducted among dentists using a self administered questionnaire to investigate participants about the knowledge about child abuse. The questionnaire consisted of 10 questions which were closed end type and the dentist was asked to choose one among them. A total of 140 dentists participated .The data was collected and analysed statistically. The most common answer was described in terms of percentage. The questionnaire consisted of various questions related to child abuse including questions like the awareness of child abuse, common abuse noted by the dentists, types of abuse, the awareness of reporting child abuse, the methods of reporting child abuse etc.



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59.3% dentist have come across physical abuse 27.1% have come across sexual abuse and 13.6% have come across parental abuse

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51.6% dentist identified by themselves and 48.4% dentist identified from the child

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38.7% dentist says that they reported suspicious or definitive case of child abuse in last 6 months and 61.3% dentist says that they haven't reported any suspicious or definitive case of child abuse



49.6% dentist rated that 3-6 were recognise the sign and symptoms of a child abuse

19.50% dentist rated that 6-10 were recognise the sign and symptoms of a child abuse and 30.8% dentist

rated that 1-3 were recognise the sign and symptoms of a child abuse

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51.9% dentist says that most common abuse reported to them were abused physicaly 29.6%by sexually and 18.50% by parental abuse

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66.7% dentist says that they were aware that dentist are responsible and have right to identify and report child abuse and 33.3% dentist says that they were not aware and they responsible to identify reporting child abuse

DISCUSSION

An abused child will often experience more than one type of abuse, as well as other difficulties in their lives. Child abuse should be identified and reported for the welfare of the child. As dentists they are at high position to identify and report child abuse .Mostly child abuse can be identified easily by the injuries and signs that can be seen clinically on the orofacial region. Hence a dentist should first be aware of child abuse and to know how to identify child abuse.

In this survey according to the survey 92.8% dentist are aware and 7.2% where not aware about child abuse.76.4% dentist have come across child abuse and 23.6% have not come across child abuse. About 20 in 100 are not aware about child abuse which will lead to misdiagnose child abuse as some other problem.

59.3% dentist have come across physical abuse 27.1% have come across sexual abuse and 1.6% have come across parental abuse. Increasing report of physical abuse has been given because physical abuse is common which may even occur from friends, siblings etc.

51.6% dentist identified by themselves and 48.4% dentist identified from the children. Dentists should differentiate the signs and symptoms of child abuse to identify that the child has been abused.

48.5% dentist says that they where abused by strangers 30.9% where abused by guardians and 20.6% where abused by parents. Mostly child gets abused by strangers, secondarily by the guardians and then by the parents.

51.9% dentist says that most common abuse reported to them were abused physically 29.6% by sexually and 18.50% by parental abuse

38.7% dentist says that they reported suspicious or definitive case of child abuse in last 6 months and 61.3% dentist says that they haven't reported any suspicious or definitive case of child abuse.

57.1% dentist says they know mechanism of reporting child abuse and 42.9% says that they don't know any mechanism of reporting child abuse. There are certain mechanisms to report child abuse which the dentist should be aware of and bring it to practice in case of any identification of child abuse.

66.7% dentist says that they were aware that dentist are responsible and have right to identify and report child abuse and 33.3% dentist says that they were not aware and they responsible to identify reporting child abuse.

CONCLUSION

This study showed that dental practitioners have insufficient knowledge about the manifestations of child physical abuse, the actions that should be taken if physical abuse against a child is suspected, and the circumstances in which they should report suspected cases. Moreover, only a small proportion of the participants knew the correct legal authority to which suspected abuse cases should be reported. The participants reported a positive attitude towards the dentist's role in detecting and reporting cases of child physical abuse. The low reporting rate was primarily due to a lack of knowledge about referral procedures and fear of anger from family members and parents. A small proportion of suspected cases were reported by participants. An important strategy for improving knowledge and behaviors among dental practitioners in cases of possible child abuse is to increase the coverage of this topic in dental school curricula, particularly given that the respondents reported that their main source of knowledge was their undergraduate studies. However, the issue of detecting and preventing further child abuse is complex and multifactorial and improving education is a single step in the process. Healthcare and academic institutes must have clear referral procedures to follow in suspected cases of abuse. Providing materials, seminars, and continuous education courses to dentists would increase their awareness about the referral procedures available at the institutes where they are practicing.

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