

DEFINITION

The physical or mental injury, sexual abuse or exploitation, neglect treatment or maltreatment of child under the age of 18 by a person who is responsible for the child's welfare under circumstances which indicate that the childs health or welfare is harmed or threatened.

TYPES OF CHILD ABUSE

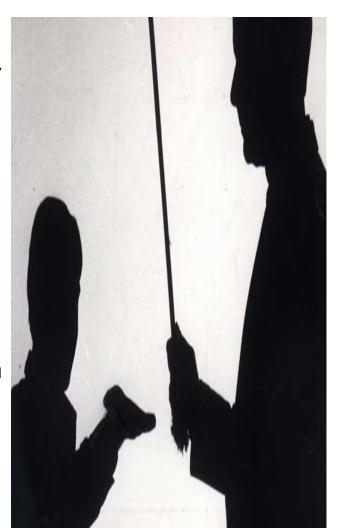


PHYSICAL ABUSE

Any non accidental injury to a child under the age of 18 by a parent or caretaker. These injuries may include beatings, shaking, burns, human bites, strangulation or immersion in scalding water or others, with resulting bruises, fractures, scars, burns, internal injuries or any other injuries.

CORPORAL PUNISHMENT

- Its in the form of biting, punching, kicking or beating .
 - socially and legally accepted in most countries.
 - In many it is a significant phenomenon in schools and other institutions and in penal systems for young offenders.



PSYCHOLOGICAL MALTREATMENT DEFINITION

- **psychological neglect** – the consistent failure of a parent or caretaker to provide a child with appropriate support, attention and affection.

- **psychological abuse** — a chronic pattern of behaviors such as belittiling, humiliating and ridiculing a child.

EMOTIONAL ABUSE

Includes the failure of a caregiver to provide an appropriate and supportive environment, and includes acts that have an adverse effect on the emotional health and development of a child.

such acts include restricting a childs movements, denigration, ridicule, threats and intimidation, discrimination, rejection and other nonphysical forms of hostile treatment.

NEGLECT

Refers to the failure of a parent to provide for the development of the child – where the parent is in a position to do so – in one or more of the following areas: health, education, emotional development, nutrition, shelter, and safe living conditions.

Neglect is thus distinguished from circumstances of poverty in that neglect can occur only in cases where reasonable resources are available to the family or caregiver.

CHILD SEXUAL ABUSE

The exploitation of a child or adolescent for the sexual gratifications of another person.

All children who are suspected victim of child sexual abuse should be offered a medical evaluation. The timing and detail of the examination should be based on specific screening criteria developed by qualified medical provides.

FORENSIC EXAMINTION FOR VICTIM OF SEXUAL VIOLENCE

Consent

History

P/E (general, genito-anal)

Sample collection

Documentation and reporting

HISTORY

What signs to look for

What samples to take

How to interpret findings

Routine background

Medical

Gynecological

Sexual

What happened

^{*} The victim should not be asked to describe the assault repeatedly.

GENERAL EXAMINATION

General appearance

Upper arms, forearms and hands, face, ears, lip Scalp neck, breasts, abdomen, thighs and legs

hips and buttocks.

-Bruises and contusions (scalp, face, lips), lacerations(scalp, face), ligature marks (ankle, wrists and neck), pattern injuries (fingertip marks, scratch marks, bite marks, bite marks, factitious self inflicted injuries).

GENETO - ANAL EXAMINATION

Inspection (labial traction).

swabs

Speculum (anal +/- digital +/- proctoscope

FORENSIC SPECIMENS

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Vulval / vaginal / endocervical swabs

Buccal swabs- for DNA profiling other swabs ( anal , oral , breasts )

Fingernail (clipping / scraping )

Pubic hair

Clothing / debris

+/- toxicological samples ( blood , urine )
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Oral swab: up to 1 day (usually few hours)

Drugs and alcohol: blood up to 4 days (usually $\frac{1}{2}$ day)

Rectal swab: 3 days (usually 1day)

Vaginal swab: up to 7 days (usually < 72 hrs)

Skin swab: before washing

Dry material (panties): before washing