



# Prevention and Management of Child Maltreatment

## Position Statement

National  
Association of  
School Nurses

### NASN POSITION

It is the position of the National Association of School Nurses (NASN) that prevention, early identification, intervention, and care of child maltreatment are critical to the physical/emotional well-being and academic success of students. As professionals who bridge education and health, registered professional school nurses (hereinafter referred to as school nurses) are vital team members in collaborating to prevent and manage child maltreatment.

### BACKGROUND AND RATIONALE

Child maltreatment, also known as child abuse or neglect involving infants, children, or adolescents up to age 18, is defined by the U.S. Government under the Child Abuse Protection and Treatment act (CAPTA) as, at a minimum:

“Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act, which presents an imminent risk of serious harm” (U.S. Department of Health & Human Services [HHS], 2022, p. ix).

Recent additions to classifications of child maltreatment include child sex trafficking and addiction at birth (Child Welfare Information Gateway, 2019). Failure to act, also referred to as neglect, is the most commonly reported type of child maltreatment in the U.S. (HHS, 2022).

Each state defines child maltreatment in its own statutes and policies, based on Federal legislation. Specific state statutes can be found at <https://www.childwelfare.gov/topics/systemwide/laws-policies/state/>. All parts of the U.S. and its jurisdictions have mandatory child maltreatment reporting laws that require professionals who have contact with children to report suspected maltreatment to a Child Protective Services agency. In nearly all states, educational professionals, including school nurses, are legally designated as mandatory reporters when there is suspicion of abuse or neglect (Brous, 2019; Gordon & Selekman, 2019). It is best practice for members of interprofessional teams that address child maltreatment to include school nurses, other school personnel, community stakeholders, and healthcare professionals, to work together in a timely manner to protect and promote the safety of each student (Bednarz, 2017). Collaboration is necessary to harness the expertise needed to effectively address risk factors and to determine appropriate actions (Roygardner et al., 2020; CDC, 2019a).

Maltreatment events occur mostly in homes, with household stress as a significant predictor, but these events can also take place in settings such as schools or childcare facilities (Rothstein & Olympia, 2020). In addition to the immediate harm of child maltreatment, the long-term negative consequences can cause damaging effects on physical and mental health that can also impact academic functioning (Robles et al., 2019). These effects, classified as adverse childhood experiences (ACEs), call for the implementation of trauma-informed care (CDC, 2019b; Gordon & Selekman, 2019; Bartlett & Steber, 2019).

School nurses practice within the National Association of School Nurses (NASN) *Framework for 21<sup>st</sup> Century School Nurse Practice™* and have the expertise to recognize early signs of child maltreatment and to assess, identify, intervene, report, refer, and follow-up on children in need (NASN, 2016; NASN, 2020). The presence of a school nurse in every school all day, every day allows opportunities for the nurse to know the students and for the students to form trusting relationships with the nurse. This is particularly important for students who may experience maltreatment (Haas, 2021).

To avert the conditions that lead to the causes of child maltreatment, interprofessional collaboration on prevention and education efforts should include public health upstream efforts and policies that support families and communities (Roygardner et al., 2020; Stratford et al., 2020; Temkin et al., 2020). Evidence-based prevention programs, practices, and policies that focus on promoting strengths, resiliency, and protective factors can be effective (Child Welfare Information Gateway, 2020; Prevent Child Abuse America, 2022).

As a society, everyone has a share of responsibility in protecting the well-being of children and supporting families in providing safe, stable, nurturing relationships and environments (CDC, 2019a). While acknowledging that family and community stressors of all kinds exist, a cultural shift is needed to elevate and prioritize the social norm that holds that violence towards children (and violence, in general) is unacceptable and that children's needs for protection are paramount (CDC, 2019b). It is imperative to recognize that child maltreatment is "linked to other forms of violence through shared risk and protective factors. Addressing and preventing one form of violence may have an impact on preventing other forms of violence" (CDC, 2022, para 9).

Every child needs a safe, stable family in which to live and grow, and prevention and management of child maltreatment are critical to the physical and emotional development of all youth. School nurses are key contributors to supporting the health, well-being, and academic achievement of students by striving to keep them healthy, safe, and able to learn. Team efforts to prevent, address, and reduce child maltreatment and to provide proactive support for families to assure secure, nurturing relationships and environments have important implications for all children and families, and for a healthy society (CDC, 2022).

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