

# Common Elements of Child Torture

Consider child torture when several of the following elements are identified within a case:

<b>Section One: Deprivation of Basic Necessities (at least 1 element)</b>			
<input type="checkbox"/>	<p><b>Current or History of Allegations for Neglect</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Withholding Food  <input type="checkbox"/> Withholding Water  <input type="checkbox"/> Withholding Clothing  <input type="checkbox"/> Subjecting to Extremes of Heat or Cold  <input type="checkbox"/> Limiting Access to Others  <input type="checkbox"/> Limiting Access to Routine Medical Care  <input type="checkbox"/> Forcing Child to Stay Outside for Extended Periods or Sleep Outside                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Limiting Access to Toilet  <input type="checkbox"/> Limiting Access to Personal Hygiene/Bathing  <input type="checkbox"/> Inability to Move Free of Confinement  <input type="checkbox"/> Withholding Access to Schooling/Withdrawing to Home School  <input type="checkbox"/> Sleep Deprivation  <input type="checkbox"/> Low Body Mass Index  <input type="checkbox"/> Other:                 </td> </tr> </table> <p>Please explain (as needed):</p>	<input type="checkbox"/> Withholding Food <input type="checkbox"/> Withholding Water <input type="checkbox"/> Withholding Clothing <input type="checkbox"/> Subjecting to Extremes of Heat or Cold <input type="checkbox"/> Limiting Access to Others <input type="checkbox"/> Limiting Access to Routine Medical Care <input type="checkbox"/> Forcing Child to Stay Outside for Extended Periods or Sleep Outside	<input type="checkbox"/> Limiting Access to Toilet <input type="checkbox"/> Limiting Access to Personal Hygiene/Bathing <input type="checkbox"/> Inability to Move Free of Confinement <input type="checkbox"/> Withholding Access to Schooling/Withdrawing to Home School <input type="checkbox"/> Sleep Deprivation <input type="checkbox"/> Low Body Mass Index <input type="checkbox"/> Other:
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<b>Section Two: Physical Abuse (at least 2 physical assaults or 1 severe assault)</b>			
<input type="checkbox"/>	<p><b>Current or History of Allegations for Physical Abuse</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Bruising Shaped like Hands, Fingers, or Objects, or Black Eyes  <input type="checkbox"/> Fractures that are Unexplained and Unusual  <input type="checkbox"/> Ligature, Binding, and Compression Marks due to Restraints  <input type="checkbox"/> Contact or Scald Burns to the Skin or Genitalia                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Flexion of a Limb or Part of Limb beyond its Normal Range  <input type="checkbox"/> Human Bite Marks  <input type="checkbox"/> Force-Feeding  <input type="checkbox"/> Asphyxiation  <input type="checkbox"/> Other:                 </td> </tr> </table> <p>Please explain (as needed):</p>	<input type="checkbox"/> Bruising Shaped like Hands, Fingers, or Objects, or Black Eyes <input type="checkbox"/> Fractures that are Unexplained and Unusual <input type="checkbox"/> Ligature, Binding, and Compression Marks due to Restraints <input type="checkbox"/> Contact or Scald Burns to the Skin or Genitalia	<input type="checkbox"/> Flexion of a Limb or Part of Limb beyond its Normal Range <input type="checkbox"/> Human Bite Marks <input type="checkbox"/> Force-Feeding <input type="checkbox"/> Asphyxiation <input type="checkbox"/> Other:
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<b>Section Three: Psychological Maltreatment (2 or more elements, can be a single incident)</b>			
<input type="checkbox"/>	<p><b>Current or History of Allegations for Psychological Maltreatment</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Rejection by Caregiver  <input type="checkbox"/> Terrorizing  <input type="checkbox"/> Isolating  <input type="checkbox"/> Threats of Harm or Death to Child, Sibling(s) or Pets                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Exploiting/Corrupting  <input type="checkbox"/> Unresponsive to Child's Emotional Needs  <input type="checkbox"/> Shaming/Humiliation  <input type="checkbox"/> Other:                 </td> </tr> </table> <p>Please explain (as needed):</p>	<input type="checkbox"/> Rejection by Caregiver <input type="checkbox"/> Terrorizing <input type="checkbox"/> Isolating <input type="checkbox"/> Threats of Harm or Death to Child, Sibling(s) or Pets	<input type="checkbox"/> Exploiting/Corrupting <input type="checkbox"/> Unresponsive to Child's Emotional Needs <input type="checkbox"/> Shaming/Humiliation <input type="checkbox"/> Other:
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## Section Four: Supplemental Items

<input type="checkbox"/>	<b>Current or History of Allegations for Sexual Abuse</b>
<input type="checkbox"/>	Penile, Digital or Object Penetration of the Anus
<input type="checkbox"/>	Assault to the Genitals
<input type="checkbox"/>	Forcing Sexual Intercourse
<input type="checkbox"/>	Forcing to Remain Naked or Dance
<input type="checkbox"/>	Forcing to Witness or Participate in Sexual Violence against another person
<input type="checkbox"/>	Other:
<input type="checkbox"/>	<b>Forcing Excessive Exercise for Punishment</b>
<input type="checkbox"/>	<b>History of Prior Referrals and /or Investigations by the Division of Family Services (DFS)</b>
<input type="checkbox"/>	<b>One Child is Targeted</b>
<input type="checkbox"/>	<b>Sibling(s) Abused</b>
<input type="checkbox"/>	<b>Siblings Join in Blaming Victim and May Lack Empathy</b>
<input type="checkbox"/>	<b>Family System is Blended and Both Caregivers Participate in the Alleged Abuse and/or Neglect</b>
<input type="checkbox"/>	<b>One Caregiver Fails to Protect</b>
<input type="checkbox"/>	<b>No Disclosure is Made by Targeted Child or Siblings</b>
<input type="checkbox"/>	<b>Caregivers Provide Reasonable Explanations in Response to Allegations</b>
<input type="checkbox"/>	<b>Caregivers Allege Mental Health Issues for Targeted Child (e.g. self injury) and Report Repeated Attempts to Seek Help</b>
	Please explain (as needed):

Sources: Holler, Jim. "Child Torture – the American Trend." 30<sup>th</sup> National Symposium on Child Abuse (2014). Knox, Barbara L., et al. "Child Torture as a Form of Child Abuse." *Journal of Child & Adolescent Trauma* 7.1 (2014): 37-49.