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# Overview of The Ethical Concerns Regarding Mandatory Reporting of Child Abuse

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# Introduction



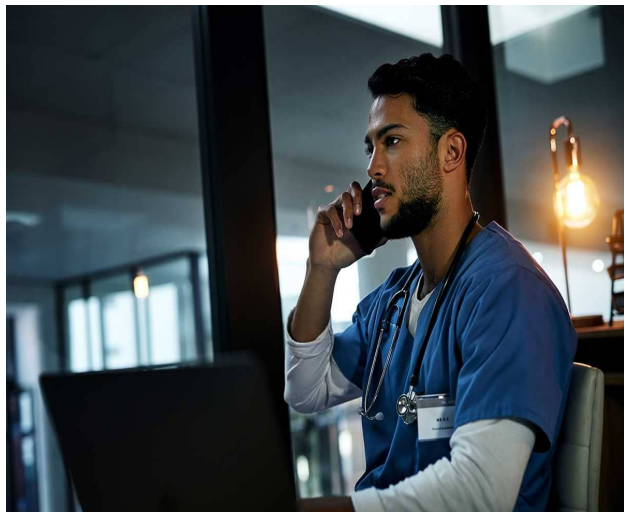
- Medicine → Difficult decisions and situations must be made.
- **Child abuse and maltreatment** → Unfortunate reality.
- Refers to any form of **harmful action, neglect, or mistreatment** that causes physical, emotional, or psychological harm to a child.
- Presents challenging **ethical dilemmas** for healthcare providers.
- Balancing patient confidentiality and safeguarding the well-being of vulnerable children.

## Types of Child Abuse:

- Physical abuse
  - Sexual abuse
  - Emotional abuse
  - Neglect
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# Mandatory Reporting Guidelines in New York State



- Registered PAs are recognized as **mandatory reporters** of child abuse or maltreatment.

## Reporting process:

- **Suspicion of abuse** - no need to notify parents/legal guardians.
- Contact 311 or NYS Central Register of Child Abuse and Maltreatment (SCR).
- Reporting is **not an accusation** but ensures patient well-being.

## Investigation and Interventions:

- Appropriate authorities determine if abuse occurred.
  - Actions taken to protect the child.
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# Ethical Dilemma and Considerations



## Ethical Dilemma:

- Balancing the duty to protect the child's well-being (**beneficence**) with **confidentiality** and respecting **autonomy** and family relationships.

## Key Considerations:

- **Best Interests of the Child:** Prioritizing the child's protection and welfare.
  - **Upholding Professional Responsibilities:** PAs have a legal and ethical duty to report suspected child abuse.
  - Next, we will delve deeper into the various types of child abuse, real-life examples, and strategies to improve reporting and prevention efforts in addressing this pressing issue.
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# The Importance of Mandatory Reporting: How can we protect vulnerable patients?

- Amongst 676K children in the US who experienced maltreatment → 75% experienced neglect, 18% experienced physical abuse, and 8% experienced sexual abuse (USPSTF, 2018).
  - Around 14% of these children experienced multiple forms of maltreatment, more than 1,700 of these children died as a result of their abuse (USPSTF, 2018).
  - Positive effects of reporting:
    - Removing child from physically harmful environment
    - Provide voice for child who might not be able to/understand how to remove themselves from a dangerous situation
    - Opportunity to prevent/mitigate long-term negative emotional side effects of abuse for vulnerable population
    - Provides route to prevent lifelong trauma of abuse from caregivers
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# The Importance of Mandatory Reporting: A double edged sword

- Protecting the patient and mitigating harm done by abuse from a caregiver is a top priority, but mandatory reporting requires serious consideration and care from the provider when evaluating the situation
  - A false report has the potential to:
    - Negatively impact and disrupt family function and dynamics
    - Wrongly remove child from family – providing obstacles for child to reunite with family
    - Ignite emotional distress from both family and child
    - Negatively impact both personal and professional lives of those involved due to the stigma of false allegations (USPSTF, 2018)
  - Though false allegations are rare, the potential harmful effects cannot be overlooked
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# The double edged sword - personified



- Socioeconomic statuses of families and their children play into how much reporting actually happens.
  - Clinical bias, unfortunately, plays a big role in reporting of suspected maltreatment of children.
  - As research suggests, there has been over-reporting of families with low socioeconomic or minority status, with underreporting of families of higher socioeconomic status and Caucasian families (Letson et al., 2023)
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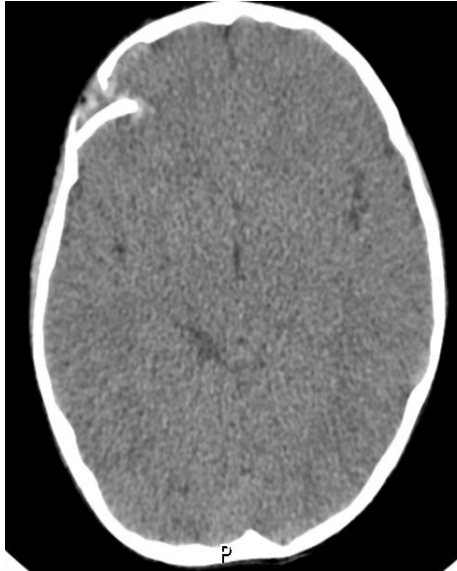
# Healthcare Bias and Mandatory Reporting

- A combination of individual, relational, community, and societal factors as well as caregivers who might have mental health issues, limited education, are young in age, substance users, or have low income all contribute to the risk of child abuse and neglect (Letson et al., 2023).
  - Clinicians must interpret all of these risk factors and apply them in practice in ways that do not perpetuate bias. Unfortunately, racial inequality does significantly impact the medical field, clearly illustrated by the fact that Black children are more likely than White children to be reported as victims of child abuse.
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# Healthcare Bias and Mandatory Reporting



- For example, research findings suggest that abusive head trauma is more commonly overlooked in young White infants when compared to minority infants.
  - The likelihood of overlooking abusive head trauma is higher in infants from "intact" families (where parents are living together) compared to families where the parents are not living together.
  - Underrepresented minority children are more prone to undergoing a skeletal survey and being reported for suspected abuse compared to White children.
  - Additionally, children without private insurance are more likely to undergo evaluations for suspected abuse and be reported than those with private insurance (Letson et al. in 2023).
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# Case Example



- MCA includes many different aspects including Munchausen by Proxy and Anorexia by Proxy.
- With MCA the **intention** of the caregiver **does not determine whether it is present or not**.

**Similar to physical abuse:** “a mother might violently physically assault her infant because she is fed up with the child crying, she is intoxicated or drugged, or she earnestly thinks that is the way to get the infant to behave and start eating, but it is still called physical child abuse”

- Once MCA is suspected, the people who are typically considered reliable sources can no longer be trusted.
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## Case Example (cont.)

**CRPS** is usually triggered by an injury to a

limb, however the pain lasts much longer and is much more severe than the initial injury warrants. Slight touch can trigger extreme pain in individuals with CRPS and quality of life is greatly

diminished.

Beata fit the profile of a typical MCA perpetrator as suggested by Yates and Bass. As they say, “Almost all perpetrators of MCA in the reviewed cases were women and the mother of the victim...A healthcare-related occupation was mentioned in nearly half of the cases.”



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## Case Example (cont.)

“One day I was in the ICU and my mom kissed me on the forehead and was like ‘I love you. I’ll see you tomorrow.’ I never saw her again. I was medically kidnapped”

- Maya Kowalski



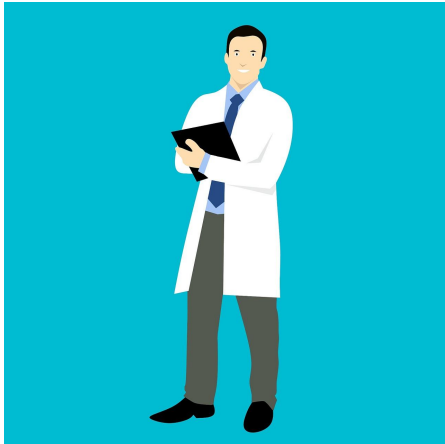
- This case clearly illustrates how false reporting of child abuse can wrongly **destroy** families
- What could have been done better?
  - Given respect to prior doctor’s assessment of Maya and her condition
  - Shown more compassion to the family throughout the process
- We **NEED** reform to prevent similar consequences due to under or false reporting of child abuse!

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# Findings & Recommendation



- Delicate matter and raises complex ethical concerns
  - From 1998 - 2021, increase in deaths per day due to child abuse and neglect (Statista Research Department, 2023)
  - Multiple barriers to reporting could lead to missed cases or over-reporting
  - Relationship between knowledge and confidence of child maltreatment recognition and reporting (Mandadi et al., 2021)
  - Reporting suspected child maltreatment is mandatory by law BUT child maltreatment rotation is not required in all states
  - Mandatory reporting should come with checks and balances to ensure there is proper and just reporting
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## Findings & Recommendation (Cont.)

- National survey to understand relationship between knowledge and confidence of child maltreatment recognition and reporting
  - Knowledge in child maltreatment recognition and reporting was significantly correlated with confidence in reporting and recognition with  $p < 0.001$ 
    - Higher knowledge -> more confident -> correct reports with better outcomes
  - Significant relationship between knowledge and confidence in respondents from states with training in child maltreatment recognition and reporting requirements as a condition of licensure and re-licensure with  $p < 0.01$ 
    - Training has a positive effect on clinician knowledge and confidence
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## Findings & Recommendation (Cont.)



- Inclusion of mandated child maltreatment rotation/program to the current PA curriculum during
    - Emergency Medicine Rotation
    - Pediatrics Rotation
    - Any applicable classes in didactic year
  - New PAs can confidently apply the tools learned to efficiently and correctly report child abuse/negligence while limiting negative impacts from over-reporting
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# Conclusion



- PAs already play critical role in bridging gaps in current healthcare system
  - PA profession and practice allows us to treat patient in holistic sense and includes a more comprehensive approach
  - This delivery of conscientious care is crucial due to complexity of sensitive dilemma
  - Proper utilization of training resources can optimize the roles of PAs as clinicians and mandatory reporters to limit future cases like Maya's
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