

Child Abuse and Neglect: A Survey on Primary School Teachers of Kanpur City

Ramesh G^{1*}, Kumar A¹, Raj A¹, Gupta B¹, Katiyar A¹, Nagarajappa R²

¹ Department of Oral and Maxillofacial Pathology, Rama Dental College Hospital and Research Centre, Kanpur, Uttar Pradesh, India

² Department of Public Health Dentistry, Institute of Dental Sciences, Bhubaneswar, Orissa, India

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ABSTRACT

Background: A major public concern in today's world is child abuse and neglect (CAN). Teachers are in unique position to detect possible cases due to their daily contact with children.

Methods: A descriptive cross-sectional survey was conducted among 220 primary school teachers in 19 randomly selected schools of Kanpur city, Uttar Pradesh, India. A structured close ended questionnaire prepared in two languages (English and National language Hindi) comprising of 19 questions was used.

Results: CAN was either never or rarely noticed among 47.3%. The criteria of recognizing the CAN was known by 57% and 90% felt comfortable considering an expert opinion in their schools and so can report confidently. Training to identify CAN was provided by school administration (36.4%) and was done on monthly basis (34.5%).

Conclusion: Findings highlight the need for enhancing teacher's education in CAN, as by reporting suspected CAN, teachers can make an important contribution to the early detection and prevention of child abuse.

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► *Implication for health policy/practice/research/medical education:* Child Abuse and Neglect

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1. Introduction:

Child abuse and neglect (CAN) is now recognized as a significant health and social problem (1, 2), with worldwide annual deaths from homicide estimated at 57,000 in children <15 years (1). Child abuse has many forms: physical, emotional, sexual, neglect,

and exploitation. Any of these, that are potentially or actually harmful to a child's health, survival, dignity and development are abuse (3). International data are not available for non-fatal CAN, but rates are believed to be considerably higher, since deaths are the tiny, tragic tip of a very large iceberg of abuse (2). The serious short- and long-term consequences for victims of CAN have been well documented (4-7). A well established empirical evidence shows a 'graded' relationship between the number of unfavorable childhood maltreatment exposures and the occurrence of depression, poor academic performance and even suicidal ideation among youth (8, 9). More

Corresponding author: Ramesh G, MD, Professor and Head of Department of Oral and Maxillofacial Pathology, Rama Dental College Hospital and Research Centre, Kanpur -208024, Uttar Pradesh, India.

E-mail: amug3r@yahoo.co.in

recently, it has been linked to adult health risks such as alcoholism, smoking, having multiple sexual partners and sexually transmitted infections; as well as non-communicable diseases such as cancer, heart and liver diseases and obesity (10, 11).

World Health Organization (WHO) estimates that 150 million girls and 73 million boys under 18 years have been subjected to forced sexual intercourse or other forms of sexual violence. In 2002 there were 53,000 reported cases of child homicide. A Global School-Based Student Health Survey found that 20% and 65% of school going children reported having been verbally and physically bullied in the last 30 days. International Labour Organization (ILO) estimates show there were 218 million child labourers in 2004, out of which 126 million were engaged in hazardous work. In sub-Saharan Africa, Egypt, and Sudan, UNICEF estimates that 3 million girls and women are subjected to female genital mutilation every year (3).

In 2007, the Ministry of Women and Child Development (MWCD), India, released a study report on child abuse, wherein out of 13 sampled states, two out of every three children were physically abused, 54.56% being boys and 88.6% physically abused by parents (12). The State of Andhra Pradesh, Assam, Bihar, and Delhi in India have almost consistently reported higher rates of physical and sexual abuse in all forms as compared to other states. There were 53.22% children reported having faced one or more forms of sexual abuse (21.9% facing severe forms of sexual abuse and 50.76% other forms of sexual abuse). 50% abusers are persons known to the child or in a position of trust and responsibility. Every second child and equal percentage of both girls and boys reported facing emotional abuse. In 83% of the cases parents were the abusers. The gravity of the situation demands that the issue of child abuse be placed on the national agenda. The government, civil society and communities need to complement each other and work towards creating a protective environment for children (12).

Adverse outcomes can be especially severe when maltreatment takes place over a

prolonged period of time. Early detection and the prevention of reoccurrence are essential. Teachers are in a unique position to detect possible cases of child abuse and neglect (CAN) due to their daily contact with children, their capacity to observe changes in children's behavior and appearance over time and their proximity to children who may make direct disclosures (13, 14).

Internationally, studies have found that teachers lack skills and confidence to accurately detect CAN due to lack of knowledge about child protection processes as a barrier to reporting (15-17). Hence a survey to assess the knowledge and awareness on recognizing and reporting child abuse and neglect among primary school teachers, in and around Kanpur city was undertaken.

2. Materials and Methods:

Study area and design

A descriptive cross-sectional survey was conducted among the primary school teachers (PST) of 19 randomly selected schools of Kanpur city, Uttar Pradesh, India, from January to February 2016. All the teachers who fulfilled the inclusion criteria of voluntary participation, aged above 20 years and employed for more than 1 year were included in the study.

Ethical clearance and consent

The study was reviewed and approved by the Ethical Committee of Rama Dental College and Hospital, Kanpur. Official permission to conduct the survey was obtained from the concerned authorities of respective schools selected. Written informed consent was obtained from the participants after explaining the nature and purpose of the research.

Sampling design

Before the instigation of the study, official list of all the primary schools in Kanpur city was obtained from the Education Department of Kanpur. A two-stage random sampling procedure was used to select the study sample. The first stage units were all primary schools in Kanpur city. Out of the total number (250) of schools, 19 schools having primary section class nursery to class

5th were randomly selected using lottery method. The second stage was the selection of teachers in each school. From a list encompassing all the teachers (350) enrolled in the 19 schools, a sample of 225 teachers were selected based on systematic random sampling procedure.

Data collection

A structured self-administered close-ended questionnaire prepared in two languages (English and Hindi) was used to assess the knowledge and awareness on recognizing and reporting CAN among primary school teachers. The 19-item questionnaire consisting of 11 items for knowledge and 8 items for reporting component was pre tested on ten subjects to assess its feasibility, validity and reliability which were found to be satisfactory. Test of reliability comprised two components: question-question reliability, which was assessed by the percentage of agreement (90%) and internal reliability for the responses to questions, which was assessed using Cronbach's alpha (0.88).

Face validity to identify whether the items appear to measure what they intend to measure, was assessed by asking 10 subjects to rate the questionnaire on a scale of very easy, somewhat easy, very difficult and somewhat difficult. Very easy and somewhat easy were taken in the category of easy and very difficult and somewhat difficult were taken in the category of difficult. Chi-square test was applied and it was observed that 94% of the participants found the questionnaire to be easy ($p < 0.05$). Content validity to identify whether the measure represents all the facets of a given construct, was assessed by a group of 10 panelists. Mean Content validity ratio (CVR) was calculated as 0.85.

On the pre decided days the investigator visited the schools and distributed the questionnaires to the subjects. The participants were requested to place a right mark beside the selected answer. The investigator was consistently present there in order to clear any query if arising in understanding of the questions.

Confidentiality and anonymity of the respondents were assured. Two hundred and twenty five subjects returned the completed questionnaires of which 5 were rejected because of missing responses and outlying data, leaving 220 questionnaires for tabulation and analysis.

Statistical analysis

The recorded data was compiled and entered in a spreadsheet computer program (Microsoft Excel 2007) and then exported to data editor of SPSS version 15.0 (SPSS Inc., Chicago, Illinois, USA). Descriptive statistics was used to summarize the responses for the questionnaires.

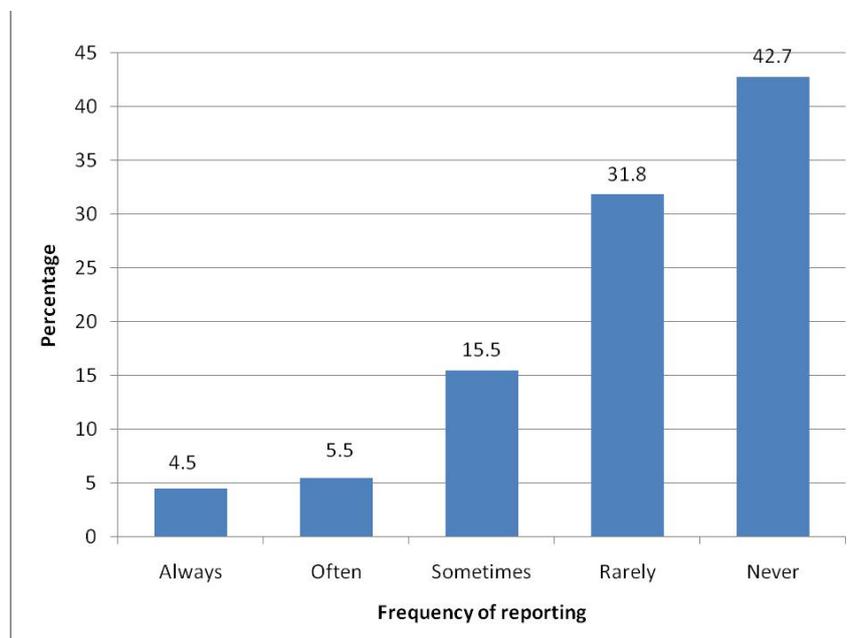
3. Results:

On questioning regarding the number of CAN cases being recognized, majority of the school teachers (42.7% and 31.8%) have never or rarely recognized any cases of CAN. Only a few subjects reported of recognizing CAN cases as always (4.5%) and often (5.5%) [Graph 1]. Majority (66.4%) of school teachers felt that any type of abuse (physical, emotional, neglect, sexual) can be defined as child abuse ,whereas 13.6% and 1.8% respondents still felt that only physical and sexual harassment as to be regarded as CAN [Graph 2].

On the opinion regarding hitting children, around half (47.3%) the school teachers felt the need in some cases for maintaining discipline. An appreciable amount (40.0%) still felt that it is wrong to hit children [Graph 3]. More than half (56.4%) had never identified any cases of CAN in their school. A small proportion (19.1%) had identified physical abuse cases and about 16.4% and 8.2% identified the neglect and physical abuse cases respectively. None of them had identified any sexual abuse case among their school children [Graph 4]. Regarding the frequency of CAN cases being reported the priority was given to major cases (39.1%), followed with few (30.0%) or none (23.6%). Only a minor proportion (7.3%) of respondents agreed to report all the cases [Graph 5].

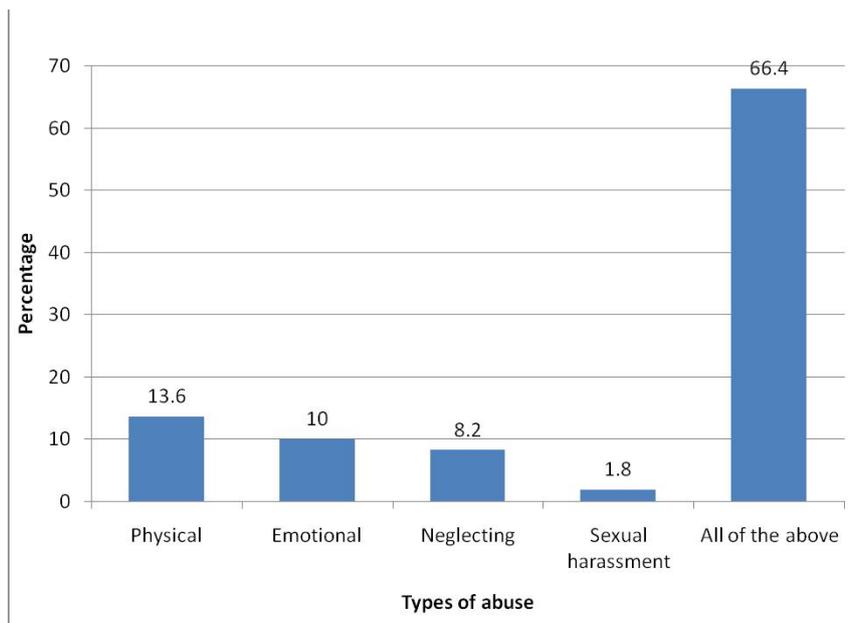
Table 1: Distribution of responses on awareness for recognizing and comfort level for reporting CAN

Criteria for recognizing and comfort level for reporting CAN	Yes N (%)	No N (%)	Can't say N (%)
Knowledge of criteria for recognizing CAN	126 (57.3)	48 (21.8)	46 (20.1)
Ever reported any case of child abuse	98 (44.5)	78 (35.5)	44 (20.9)
Is child abuse recognized enough as a serious issue in your school?	15 (68.2)	42 (19.1)	28 (12.7)
Comfortable reporting a suspected case of physical child abuse?	188 (85.5)	18 (8.2)	14 (6.4)
Comfortable reporting a suspected case of sexual child abuse?	148 (67.3)	24 (10.9)	42 (21.8)
Comfortable reporting a suspected case of neglect?	140 (63.6)	56 (25.5)	24 (10.9)
Comfortable of having any expert in your school with whose opinion you can report these cases confidently	198 (90)	10 (4.5)	12 (5.5)

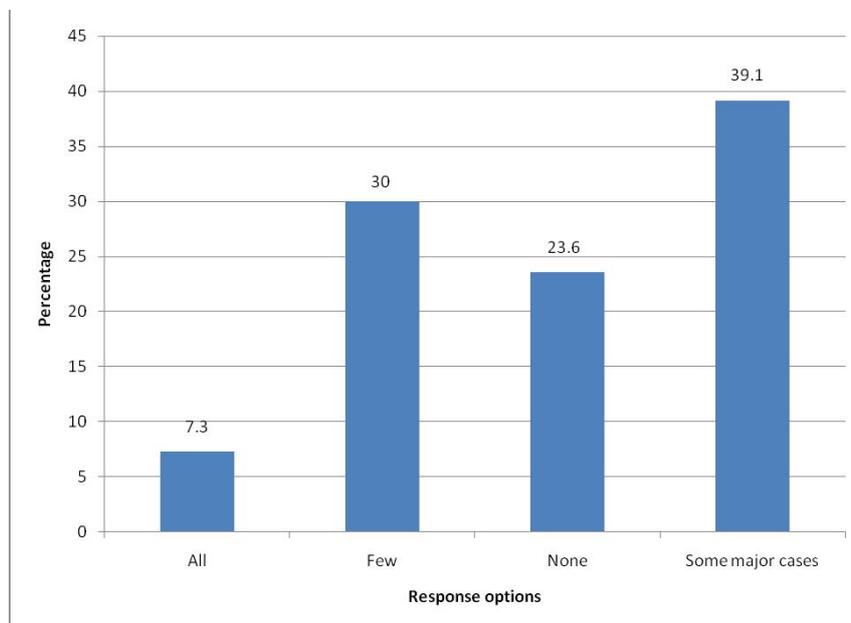
**Graph 1.** Distribution of responses of recognizing CAN by primary school teachers among school children.

Around 34.5% of the school teachers could not specify the actual reasons for CAN cases not being reported, and a further 20.9% felt the lack of knowledge regarding the process of reporting such cases [Graph 6]. The uncertainty, fear and their previous experiences also contributed to the same. Undoubtedly, principal/administration (89.1%) was the main persons to be reported to in such cases of CAN. A few were aware about the child abuse helpline (4.5%) and local child protective service (3%). Legal action would be sought through police among 1.8% respondents [Graph7].

Identifying an abused or neglected child for school teachers was neither easy nor difficult (34.5%) to difficult (29.1%) and very difficult (7.3%). Only one-third felt it was easy. [Graph 8]. To facilitate recognition and prevention of CAN, schools have encouraged and motivated the teachers to undergo training lead by school administrator (36.4%), followed by gaining knowledge through reading material (14.5%) and third party group training approach (11.8%). A staggering 27.3% of teachers did not have any exposure for the same [Graph 9]. The frequency of training was mostly on



Graph 2. Percentage distribution of opinion on difining a CAN.



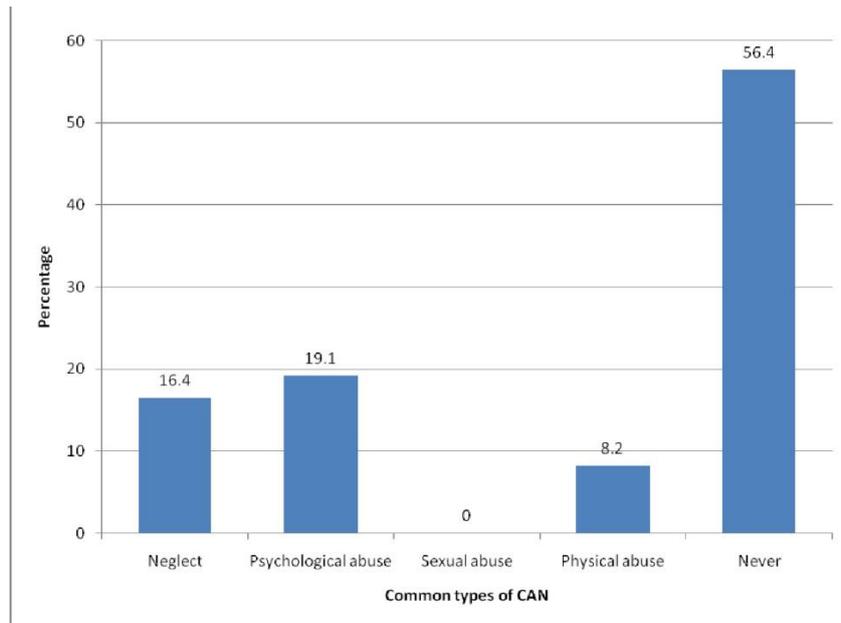
Graph 3. It shows percentage distribution of opinion on hitting children to maintain discipline.

a monthly basis (34.5%), though others have reported a weekly (18.2%), six monthly (17.3%) and a yearly (19.6%) program [Graph 10]. With regard to the present law system enforced against CAN in India, only 46.4% were satisfied [Graph 11]. More than half (57.3%) respondents reported that they have sufficient knowledge on recognizing CAN cases. Only 44.5% teachers have agreed upon to have reported any instance of child abuse and most of them felt comfortable reporting suspected cases of physical (85.5%), sexual (67.3%) and

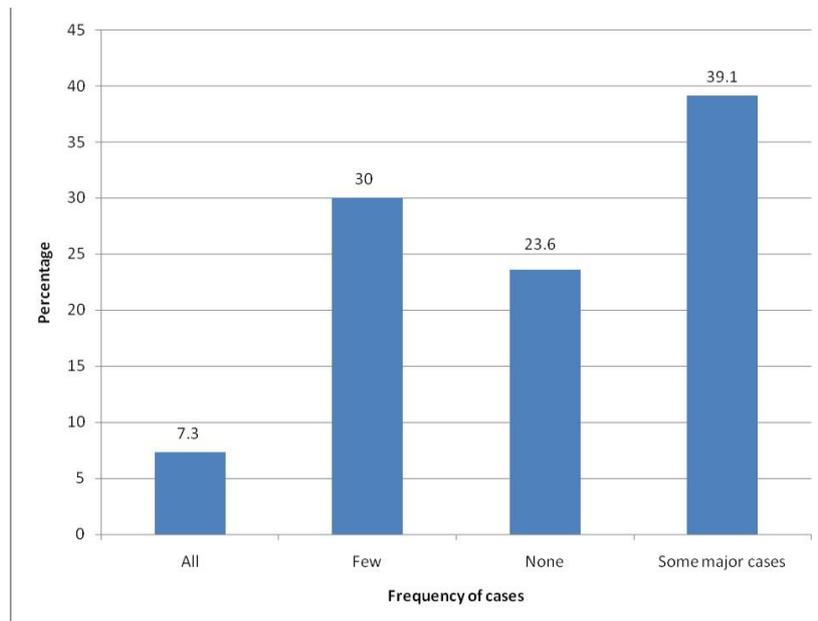
neglect (63.6%). It was viewed as a serious issue in their schools as reported by 67.3% of teachers. Further, 90% of the school teachers sensed the need of having an expert in their respective schools which may boost their confidence of identifying and reporting such cases (Table 1).

4. Discussion:

Child Abuse and Neglect (CAN) is a worldwide social and public health problem, which exerts a multitude of short and long term effects on children. ‘Child Abuse’ is as



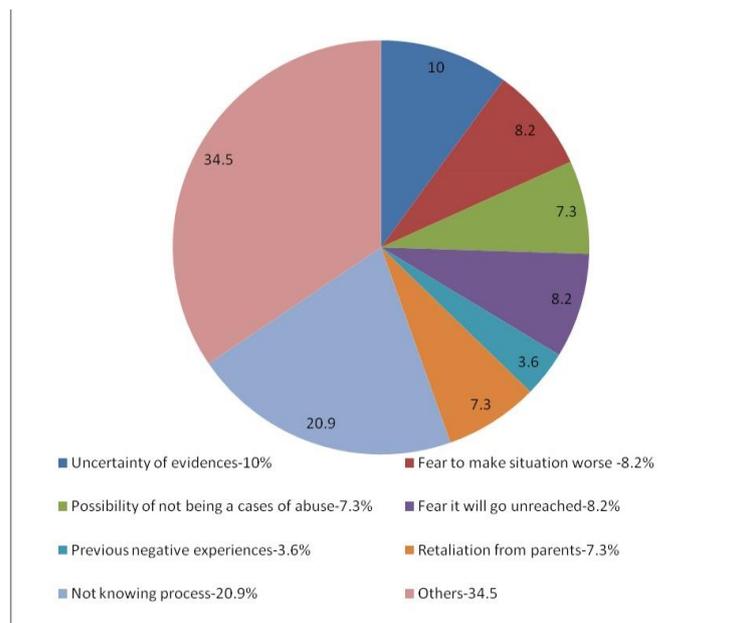
Graph 4. It shows percentage distribution of common types of CAN identified.



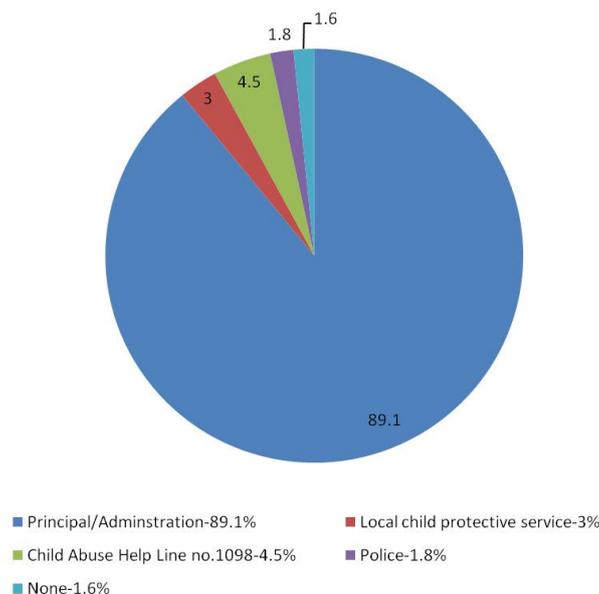
Graph 5. It shows percentage distribution of CAN cases being reported by teachers.

a violation of basic human rights of a child, constituting all forms of physical, emotional ill treatment, sexual harm, neglect or negligent treatment, commercial or other exploitation, resulting in actual harm or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power (WHO). ‘Child Neglect’ is stated to occur when there is failure of a parent/guardian to provide for the development of the child, when a parent/guardian is in a position to do so (where resources available to the family

or care giver; distinguished from poverty). ‘Child maltreatment’ sometimes referred to as child abuse and neglect, includes all forms of physical and emotional ill-treatment, sexual abuse, neglect, and exploitation that results in actual or potential harm to the child’s health, development or dignity. Several developed countries of the world have well-developed child protection systems, primarily focused on mandatory reporting, identification and investigations of affected children, and often taking coercive action. The problems of child abuse and



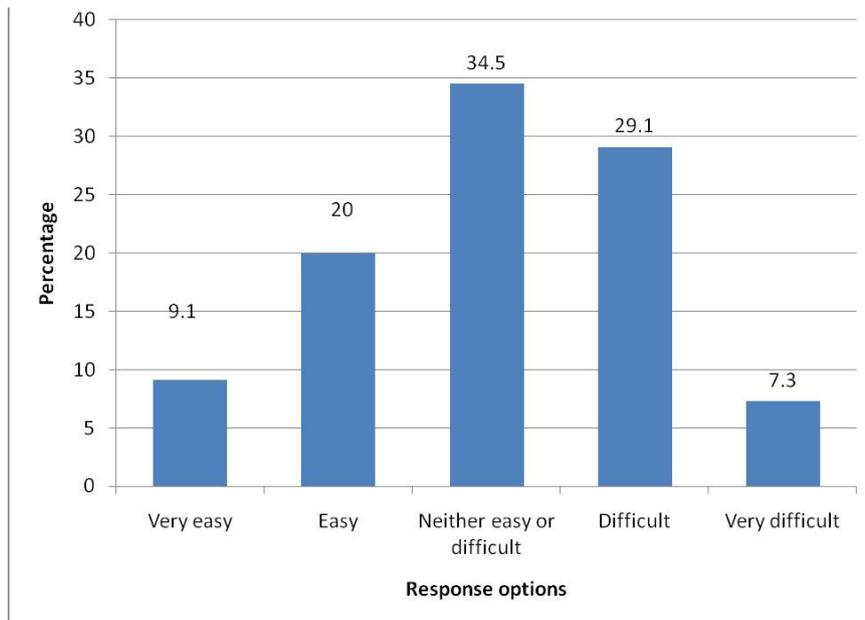
Graph 6. It shows reasons for not reporting CAN cases.



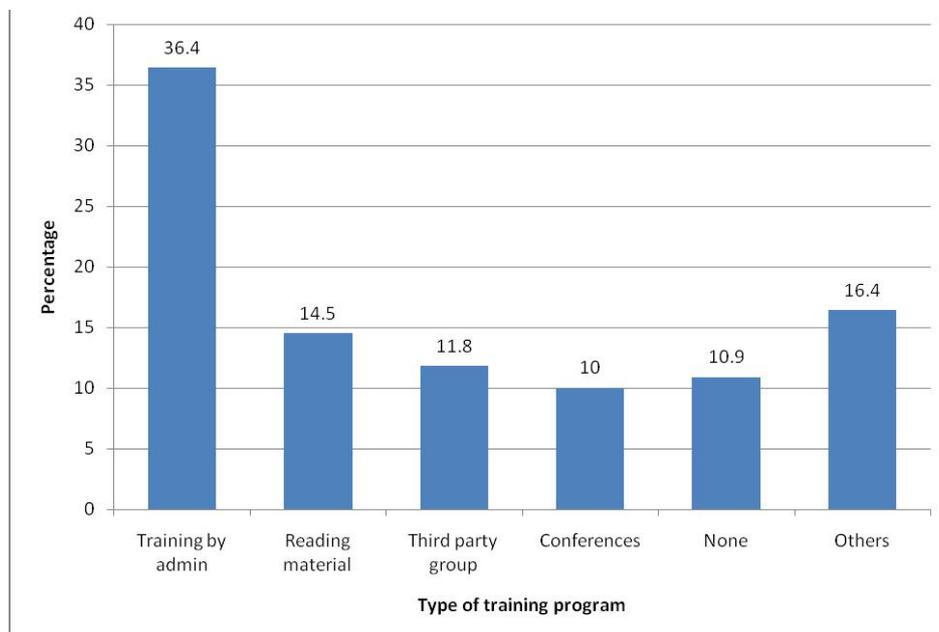
Graph 7. It shows percentage distribution of opinion on whom to report CAN cases.

neglect in India need serious and wider consideration, particularly among the underprivileged rural and urban communities, where child protection systems are not developed—or do not reach (18). Mathur et al (2009) conducted a cross-sectional survey to examine the prevalence, type and intensity of abuse in street children in Jaipur city, India. the authors observed that the larger numbers of street children (61.8%) scored in the “moderate” category of abuse while 36.6% children indicated abuse in “severe” and “very severe”

categories on the intensity of abuse. Highest mean scores were obtained on the “verbal” and “psychological” area of abuse. Boys were significantly more abused than girls. There were significant positive correlations of abuse with increasing “age” and “income” of street children; and the occurrence of “multi-type” maltreatment and neglect in street children was clearly present. Hence they concluded that the child abuse and neglect in India needs attention both by the researchers and the social workers to curb it (19).



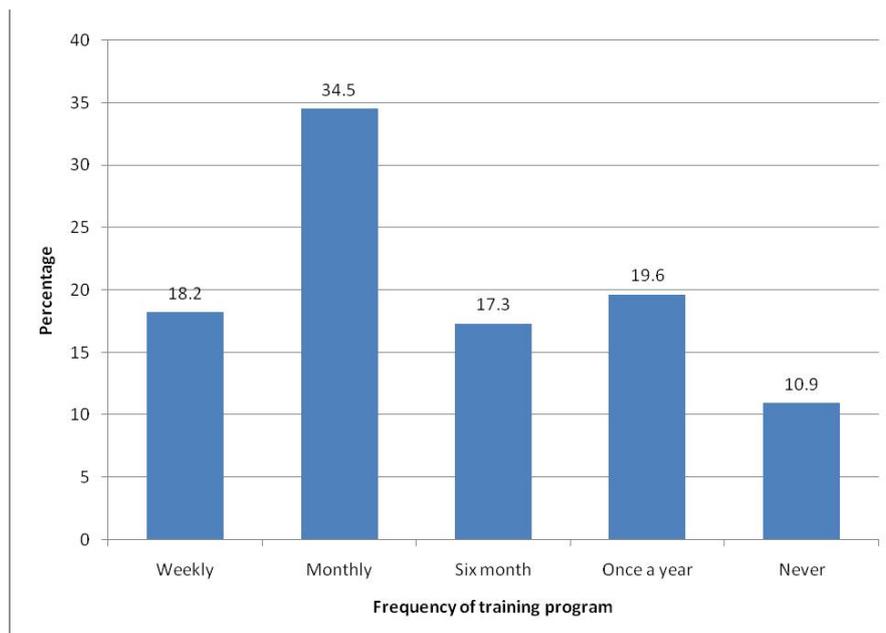
Graph 8. It shows percentage distribution of how easy or difficult is to identify CAN.



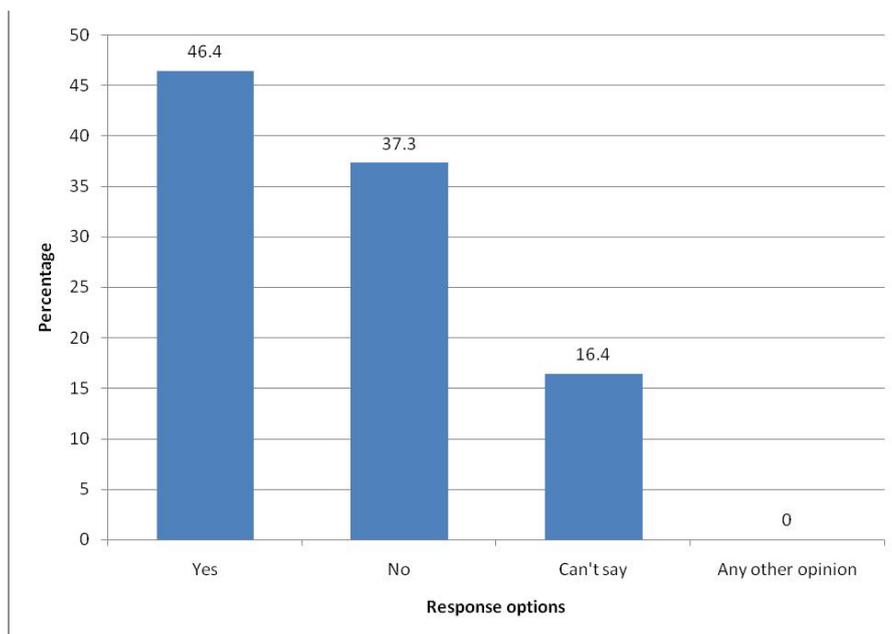
Graph 9. It shows percentage distribution on type of training programs conducted in schools to identify and prevent CAN.

In another study by van der Kooij *et al.* which aimed to provide a reliable estimate of the prevalence of all forms of child maltreatment in Suriname observed that out of 1,391 adolescents and young adults of different ethnicities who completed a questionnaire about child maltreatment 86.8% of adolescents and 95.8% of young adults reported having been exposed to at least one form of child maltreatment during their lives. Among the adolescents, 57.1% were exposed to child maltreatment in the past year. When the definition of the

National Incidence Study was applied, 58.2% of adolescents and 68.8% of young adults had been exposed to at least one form of maltreatment. Among adolescents, 36.8% reported having experienced at least one form of maltreatment in the past year (20). The teacher and school characteristics are known to influence teachers' predilection to detect and report child abuse and neglect. By reporting suspected child abuse and neglect, teachers can make an important contribution to the early detection and prevention of abuse. However, teachers are sometimes



Graph 10. It shows percentage distribution of frequency on training programs conducted.



Graph 11. It shows frequency distribution of opinion on present law against CAN in India .

reluctant to report their suspicions. The commonly reported abuse in our study were psychological (19.1%) followed by neglect (16.4%) and physical (8.2%). These findings are much lower than those reported in an Australian study; emotional abuse (41.6%), followed by neglect (30.2%), physical (21.9%) and sexual abuse (6.3%).²¹ Similar studies by Crenshaw et al (1995), Kenny (2001) and Tite (1994) have found that teachers were more likely to report cases of physical abuse than neglect (22-23). In

Queensland, 15% of substantiated cases of CAN are reported by teachers (21).

Three-quarters of Australian primary school teachers indicate that they have suspected a case of CAN at some stage in their careers (15) which corresponds with our study results. In the present study majority of the teachers agreed upon reporting the episode of CAN to principal of the school. However, teachers often fail to report suspected CAN to statutory authorities (24-27). In a recent Australian survey, only 49% of teachers who had detected a likely case of CAN indicated

that they had ever reported their suspicions (18), and in USA an estimated 84% of cases of suspected CAN in schools are not reported (26). Under-reporting occurs despite teachers' commitment to the prevention of CAN (28) and irrespective of whether teachers are legally mandated to report their suspicions or not (29). To facilitate teachers' reporting of suspected CAN, most Australian states and territories have legal reporting obligations for teachers (30) and provide training about CAN (31). Similarly, 90% of our school teachers felt the need of an expert assistance.

Previous research suggests that reporting behaviour may be influenced by teachers' attitudes, detection skills, knowledge and training, social influences, teachers' personal characteristics and features of the abuse. Attitudes that may promote reporting include beliefs that reporting is part of the teacher's professional responsibility and that it will prevent future harm (23, 32). A supportive social environment may also be influential. Attitudes that act as barriers include concerns that reporting will damage teacher-child or teacher-family relationships, fear of making an inaccurate report, fear that reporting may escalate the abuse and beliefs that inadequacies in the child protection system may harm the family or fail to help the child (17, 22, 24, 33). Zellman and Bell (1990) have found that when deciding whether to report, teachers take into consideration the quality of their relationship with the child's family, and their knowledge of relationship within the family (32).

While this may hamper reporting, research findings are not entirely clear in this respect. The data collected in this study indicate that under-reporting of suspected CAN remains a considerable problem with 23.6% of teachers indicating that they had ever failed to report suspected cases of CAN. While this proportion of under-reporting of suspected CAN is rather high when compared with similar studies (25, 27), it may still underestimate the true levels of under-reporting. The current study relied on teachers' retrospective recall of their reporting behaviour. Reporting a case of CAN is an event that teachers are arguably

unlikely to forget. It is therefore likely that any recall biases would arise from social desirability rather than poor memory, potentially leading to an underestimate of the 'undesirable' behaviour (in this case, the failure to act on suspicions).

More than half the teachers thought that it is right to hit children for maintaining discipline, but Supreme Court judgment in 2000 has prohibited corporal punishment in all its forms in India (34). A further notable finding from the current study suggests that the current child protection training methods are not effective in increasing teachers' detection of CAN or the consistency with which they report suspected cases and parallels the conclusions from previous research with Queensland primary school teachers (15). But previous researchers have found that, after training, teachers have gained knowledge that has helped them feel better equipped to deal with the changes of detecting and reporting CAN (31, 35).

There is a need for teachers to be accurately appraised of the extent and nature of their reporting responsibility and the need for training, materials to distinguish teachers' obligations under law and policy. As Zellman and Bell (1990) have emphasized, it is generally assumed that training is effective, at least to some degree, in promoting, detecting and reporting (32). In our study 90% of PST felt more comfortable of having an expert in their school with whose consultation they can report these cases confidently. Pediatric dentists and oral and maxillofacial surgeons, whose advanced education programs include a mandated child abuse curriculum, can provide valuable information and assistance to physicians about oral and dental aspects of child abuse and neglect. The Prevent Abuse and Neglect Through Dental Awareness coalition, which has trained thousands of physicians, nurses, teachers, child care providers, dentists, and dental auxiliaries, is another resource for physicians seeking information on this issue (34). Forensic odontologist can be one of the expert for these cases to identify and prevent (36).

Despite its limitations of cross-sectional data, this study has illustrated the importance

of recognizing and reporting of CAN among teachers. A weakness of the study was the potential for response bias. Longitudinal studies which track detection and reporting over time, employing large, representative samples, taking additional variables into account will further contribute to this field of research.

5. Conclusion:

By virtue of their long-term engagement with children, primary school teachers have, arguably, greatest opportunity of any professional to observe and act in response to CAN. Findings show that teachers lack skill and knowledge to identify such cases. So we as dentist can act as experts and provide training to school teachers and help each other's to prevent occurrences of such cases and do early intervention. In doing so, they provide crucial links to early intervention and prevention services with the capacity to improve quality of life for children at-risk of or experiencing CAN.

6. Acknowledgments:

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