Warning signs for child abuse and neglect
Recognizing

It is important to recognize high-risk situations and the signs and symptoms of child maltreatment. If you suspect a child is being harmed, report those suspicions. You may protect the child and get help for the family.

Reporting your concerns is not making an accusation. Rather, it is a request for an investigation and assessment to determine if help is needed. Any concerned person can report suspicions of child abuse or neglect.
How to Report

To report suspected child abuse or neglect, contact the S.C. DSS 24-hour, toll-free hotline at 1-888-CARE4US or 1-888-227-3487. This hotline is available 24 hours a day, 7 days a week. Intake staff will assist the person making the report and assess the information provided to determine if an investigation is necessary.

For non-emergency referrals, S.C. DSS also has a online referral system, which can be accessed at dss.sc.gov.

Contact 911 immediately if the situation is a life-threatening emergency. An emergency is a situation where a child appears to face an immediate risk of abuse or neglect that could result in death or serious harm.
Listening to children

If a child discloses that they have been hurt or are not receiving proper care by a parent or caregiver, please contact DSS. A trained case worker is the best resource to help.

Some professionals must report

South Carolina law requires that certain professionals report suspected cases of child abuse or neglect because they have the unique opportunities to see and interact with children. This includes doctors, nurses, teachers, clergy, law enforcement and more.

A complete list is available at dss.sc.gov.
Understanding what a child might be telling you

The following signs do not necessarily indicate that a child has been abused or neglect. Instead they are causes for an adult to seek help for a child and to report those concerns.

**Emotional signs**

- Attaches very quickly to strangers or new adults in their environment
- Delayed emotional development
- Comes to school or other activities early, stays late and does not want to go home
- Seems frightened of parents and other adults
- Reports nightmares
Physical signs

- Has unexplained injuries: burns, bites, bruises, broken bones or black eyes
- Has not received help for physical or medical problems brought to the parents’ attention
- Lacks appropriate clothing for the weather
- Is consistently dirty and has severe body odor
- Lacks adult supervision
- Abuses animals or pets
- Begs or steals food or money
- Lacks needed medical or dental care, immunizations or glasses
- Has difficulty walking or sitting
- Reports bedwetting
Unusual behaviors

- Is frequently absent from school
- Is always watchful, as though preparing for something bad to happen
- Demonstrates bizarre, sophisticated or unusual sexual knowledge or behavior
- Is either inappropriately adult (parenting other children, for example) or inappropriately infantile (frequently rocking or head-banging, for example)
- Abuses alcohol or other drugs
- Suddenly refuses to change for gym or to participate in physical activities
- Shows sudden changes in behavior, school performance or appetite
- Shows extremes in behavior, such as overly compliant or demanding behavior, extreme passivity or aggression
Parents can signal concerns

Physical actions toward the child

• Asks teachers or other caregivers to use harsh physical discipline if the child misbehaves
• Offers conflicting, unconvincing, or no explanation for the child’s injury, or provides an explanation that is not consistent with the injury
• Uses harsh physical discipline with the child
• Is unconcerned about the child and refuses offers of help for the child’s needs and problems
• Overtly rejects the child
Child interactions

• Denies the existence of – or blames the child for – the child’s problems in school or at home
• Sees the child as entirely bad, worthless or burdensome
• Demands a level of physical or academic performance the child cannot achieve
• Looks primarily to the child for care, attention, and satisfaction of the parent’s emotional needs
• Shows little concern for the child
• Describes the child as evil or in some other very negative way
• Appears to be indifferent to the child
• Is unduly protective of the child or severely limits the child’s contact with other children, especially of the opposite sex
• Constantly blames, belittles or berates the child
Personal history and actions

- Has a history of abuse as a child
- Has a history of abusing animals or pets
- Seems apathetic or depressed
- Behaves irrationally or in a bizarre manner
- Is abusing alcohol or other drugs
- Is secretive and isolated
- Is jealous or controlling with family members
Safe haven law

A special prevention law is in place to help ensure that an infant is safely surrendered into the hands of caring professionals and not abandoned to what could be a dangerous situation. This law is a last resort for new parents in crisis who have already explored other options such as kinship care, open adoption or temporary placement while the mother receives supportive services.

A person who leaves a newborn up to 60 days old cannot be prosecuted for abandonment if he or she takes the unharmed baby to staff or an employee of a safe haven.

Safe havens are defined as a hospital or hospital outpatient facility, law enforcement agencies, fire stations, emergency medical services (EMS) stations or a house of worship during the time the church or synagogue is staffed.
This law is also known as Daniel’s Law, named for a child abandoned and found alive in a landfill.
Children’s Trust of South Carolina is the statewide organization focused on the prevention of child abuse and neglect. We provide funding, resources and training to help local program partners build strong families and positive childhoods.