

Course: Dental Hygiene Theory II

Topic: Domestic Violence, Abuse, & Neglect

Audience: First-Year, Second Semester Dental Hygiene Students

Time: 1 hour and 20 minutes

Materials: Computer, PowerPoint

Instructional Objectives:

Upon completion of the lecture, the student should be able to:

1. Define abuse, neglect, and dental neglect.
2. Describe extraoral and intraoral signs of child abuse and neglect.
3. Explain the attitudes and behaviors of abusers.
4. Discuss the role of the dental hygienist in reporting suspected abuse.
5. Advocate the need for dental hygienists to be trained in determining suspected abuse and neglect.

References:

Boyd, L. D., & Mallonee, L. F. (2023). Chapter 14/Family violence. In *Wilkins' Clinical Practice of the Dental Hygienist* (14th ed., pp. 225–238). essay, Jones & Bartlett Learning.

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Hylton, P. (2024). Domestic abuse awareness in dentistry: Shaping a safer tomorrow. *College of General Dentistry*. <https://cgdent.uk/2024/05/28/domestic-abuse-awareness-in-dentistry-shaping-a-safer-tomorrow/>

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Tripathy, S., Kumar, D., Mehta, V., Neyazi, A., Satapathy, P., Rustagi, S., Momtaz, S., & Padhi, B. K. (2023). Bearing the marks: Understanding how domestic violence affects oral health. *International Journal of Surgery: Global Health*, 7(1), 1–2. <https://doi.org/10.1097/gh9.0000000000000392>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
8 minutes	<p>I. Anticipatory Set</p> <p>A. <u>Introduction</u></p> <p>“Dental professionals play a crucial role in detecting signs of domestic violence by closely examining the head and neck region and the oral cavity during routine examinations. The significance of approaching patients suspected of experiencing domestic violence with sensitivity and empathy is of utmost importance.”</p> <ul style="list-style-type: none"> - Levin & Bhatti, 2023 <p>Human abuse and neglect is a public health issue that is affecting people from different parts of society daily. Abuse and neglect can severely and negatively impact a person’s life. Dental hygienists can interact with victims in different environments and hold a professional responsibility to acknowledge signs of potential abuse and neglect.</p> <p>B. <u>Gain Attention/Motivate</u></p> <p>How does Gabriel’s story make you feel? What could have been done to help prevent this?</p> <p>C. <u>Activate Prior Knowledge</u></p> <p>By a raise of hands, do any of you know how to report suspected abuse on a patient you may see? By a raise of hands, do any of you know how to document suspected abuse findings as a dental hygienist?</p> <p>D. <u>Establish Rationale</u></p> <p>By attending today’s lecture, you are showing a great interest in learning about domestic violence, abuse, and neglect, which will give you the knowledge to identify potential abuse in a clinical setting and possibly help save someone’s life.</p> <p>E. <u>Present Instructional Objectives</u></p> <p>After today’s lecture, you should be able to:</p> <ol style="list-style-type: none"> 1. Define abuse, neglect, and dental neglect. 2. Describe extraoral and intraoral signs of child abuse and neglect. 3. Explain the attitudes and behaviors of abusers. 4. Discuss the role of the dental hygienist in reporting suspected abuse. 	<p>Slide #1: Domestic Violence, Abuse, & Neglect Title</p> <p>Note: Quotation derived from Levin & Bhatti, 2023</p> <p>Q: What are your initial thoughts about a dental professional’s role in domestic violence detection?</p> <p>A: Answers may vary.</p> <p>Note: Information pulled from Pieren & Gadbury-Amyot, 2024</p> <p>Slide #2: Gabriel Fernandez story</p> <p>Slide #3: Objectives</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
	<p>5. Advocate the need for dental hygienists to be trained in determining suspected abuse and neglect.</p>	

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
4 minutes	I. Abuse, Neglect, and Dental Neglect A. Definitions: <ol style="list-style-type: none"> 1. Abuse: Non accidental, physical, emotional, or sexual acts. 2. Neglect: Intentional or unintentional failure to provide for a child. 3. Dental Neglect: Parent or guardian not following through with necessary treatment to ensure adequate function and freedom from pain and infection 	Slide #4: Abuse, neglect, and dental neglect definitions Note: Definitions from Boyd & Mallonee, 2023 Q: What could be a form of dental neglect for a child? A: Answers may vary, not receiving fillings for caries, not bringing the child in for recall appointments Note: Declining x-rays or fluoride is not abuse. It has to be necessary to prevent pain and infection.
4 minutes	II. Child Abuse and Neglect Factors A. Physical indicators of child abuse and common sites <ol style="list-style-type: none"> 1. Bruises 2. Welts 3. Burns 4. Bite marks 5. Lacerations or abrasions (typically on the face, back, bottom, genital, or arms) 6. Malnutrition/underweight 	Slide #5: Physical indicators of child abuse Note: Picture of bruising on a child's face Slide #6: Image of common sites of deliberate or accidental injuries on children Note: Discuss how common injuries could occur if an individual falls down- common areas that would be affected are shown in green (elbows, forehead, knees, and shins)
2 minutes	B. Behavior indicators of child abuse <ol style="list-style-type: none"> 1. Apprehensive of adults 2. Aggressive or withdrawn 3. Afraid to go home; extended stays at school 4. Unwilling to open mouth 5. Reports injury by parents 6. Frightened of parents or caregiver 	Slide #7: Behavior indicators of child abuse
3 minutes	C. Extra oral signs of child abuse <ol style="list-style-type: none"> 1. Abrasions and lacerations 2. Varying degrees of healing 3. Skull injuries 4. Bald spots 5. Bruising or burns 6. Bite marks 	Slide #8: Extra oral signs of abuse Note: Images of bruising on children

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
5 minutes	<p>7. Sexually – difficulty sitting or walking</p> <p>D. Intra oral signs of child abuse</p> <ol style="list-style-type: none"> 1. Lacerations of tongue or palate 2. Frenal tears 3. Fractured teeth or non-vital teeth 4. Sexually - Bruising or petechiae on the palate (could indicate forced oral sex), sexually transmitted lesions found intraorally 	<p>Slide #9: Intra oral signs of abuse</p> <p>Note: Images of intra oral bruising and sexual abuse signs</p> <p>Slide #10: Image of intra oral abuse laceration</p> <p>Q: How would you document this in your report?</p> <p>A: Upper lip superior to tooth #8 & #9, irregular, red, mm x mm dimension, crusted patch; frenal tear superior to #8 & #9</p> <p>Note: Remind students to use a probe to measure the dimensions of a finding</p>
3 minutes	<p>E. Photographic technique for bite marks and bruises</p> <ol style="list-style-type: none"> 1. Correct - perpendicular with less than 15 degrees of angulation 2. Incorrect - not perpendicular with greater than 15 degrees of angulation 3. Must use object with a recognized standard size 4. American Board of Forensic Odontology (ABFO) #2 scale 	<p>Slide #11: Photographic technique for bite marks and bruises</p> <p>Note: Images of correct and incorrect technique pulled from Evans et al., 2014</p> <p>Slide #12: Photographic technique for bite marks and bruises</p> <p>Note: Images of using recognized standard size objects as a reference</p>
1 minute	<p>F. Actions by the abuser</p> <ol style="list-style-type: none"> 1. Missed or infrequent appointments 2. Agitated or trying to hurry the dental team 3. Wants to go back with the child and stay in the room 4. Overly strict guardian 	<p>Slide #13: Actions by the abuser</p>
3 minutes	<p>III. Reporting Abuse and/or Neglect</p> <p>A. Definition:</p> <ol style="list-style-type: none"> 1. Mandated reporter: A person who, because of his or her profession, is legally required to report any suspicion of child 	<p>Slide #14: Mandated reporter definition</p> <p>Note: Definition from Boyd & Mallonee, 2023</p> <p>Q: Do you think dental hygienists are mandated reporters?</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
4 minutes	<p>abuse or neglect to the relevant authorities</p> <p>B. Dental hygienists as mandated reporters</p> <ol style="list-style-type: none"> 1. Dental hygienists are mandated reporters 2. Failure to make a report in can begin with a \$500 fine (depending on the State) 3. Depending on the severity of the case, the penalty can vary 4. If the reporter is making false claims of abuse, the person's identity will be turned over to the police 5. Failure to report may require additional education or training on being a mandated reporter 	<p>A: Students should answer, yes, and try to give an explanation as to why.</p> <p>Slide #15: Dental hygienists as mandated reporters</p>
1 minute	<p>C. Clinically mandated reporter</p> <ol style="list-style-type: none"> 1. 12 hours to make an oral report 2. Record all reports 3. Make report as soon as possible for accuracy and details 	<p>Slide #16: Mandated reporter information as a clinician</p>
2 minutes	<p>D. Reporting child abuse information</p> <ol style="list-style-type: none"> 1. Child's name, date of birth, gender, address, and parents' or guardians' names. 2. Reason for the call 3. Approximate date abuse occurred 4. Suspect of committing abuse 5. Locations of abuse on the child's body if any 6. Child's general demeanor 	<p>Slide #17: What a mandated reporter must know when making a reporting call</p>
5 minutes	<p>E. Prevent Abuse Neglect Dental Awareness (PANDA)</p> <ol style="list-style-type: none"> 1. Created by Delta Dental of Missouri 2. Prevent abuse and neglect through dental awareness 3. Educate dental professionals in identifying warning signs 	<p>Slide #18: Introduction to PANDA</p> <p>Note: PANDA YouTube video</p> <p>Q: What did you think about the video?</p> <p>A: Answers may vary</p>
3 minutes	<p>F. Steps when suspecting child abuse</p> <ol style="list-style-type: none"> 1. Document <ol style="list-style-type: none"> a. photos b. notes c. x-rays 	<p>Slide #19: Prevent Abuse Neglect Dental Awareness background information</p> <p>Slide #20: Information on what a dental hygienist should do when suspecting</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
5 minutes	<p>d. patient behavior</p> <ol style="list-style-type: none"> 2. Witness <ol style="list-style-type: none"> a. have a doctor do an exam and co sign records 3. Report <ol style="list-style-type: none"> a. call protective services or police 4. Provide <ol style="list-style-type: none"> a. name and address of child and caregiver b. name of siblings c. child's age d. other helpful information on cause <p>IV. Elder Abuse and Neglect</p> <p>A. Signs and symptoms</p> <ol style="list-style-type: none"> 1. Bruising 2. Lacerations 3. Extreme hair loss 4. Malnutrition 5. Lack of medicine 6. Being overly medicated 7. Fear of speaking or feeling embarrassed 	<p>abuse</p> <p>Q: Why do you think documenting photos, notes, x-rays, and patient behavior for a report matter?</p> <p>A: Answers may vary, to provide evidence when reporting suspected abuse</p> <p>Slide #21: Elder abuse and neglect introduction</p> <p>Slide #22: Signs and symptoms of elder abuse</p> <p>Slide #23: Images of elder abuse bruising and question</p> <p>Q: What type of questions or concerns may come to mind when seeing a patient like this?</p> <p>A: Answers may vary, most likely dealing with the suspicion of elder abuse</p> <p>Slide #24: Elder abuse and overmedicating question</p> <p>Q: Why would someone want to overmedicate an elderly person?</p> <p>A: Answers may vary, financial exploitation, make him or her sleep, do not have to take care of him or her</p>
1 minute	<p>B. Division of Adult Protective Services</p> <ol style="list-style-type: none"> 1. Receives and investigates report of abuse, neglect, and exploitation 2. Elderly adults 60 and over in Virginia 3. 24 hour hotline 	<p>Slide #25: Division of adult protective services information</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
1 minute	<p>4. Reporter training can be found on the website</p> <p>V. Domestic Violence</p> <p>A. Definition: Intentional physical, emotional, or sexual acts amongst a spouse or partner</p>	<p>Slide #26: Domestic violence definition</p> <p>Note: Definition from Boyd & Mallonee, 2023</p>
2 minutes	<p>B. Intimate Partner Violence</p> <ol style="list-style-type: none"> 1. Signs and attitudes of IPV <ol style="list-style-type: none"> a. abuse is frequently seen on face and neck b. abused will deny abuse and defend abuser c. battered partner will be hesitant to admit abuse d. long sleeves, pants, heavy makeup 2. Characteristics of abuser <ol style="list-style-type: none"> a. does not want to leave partner's side b. needs power and control c. does not let partner go places alone or talk to other people d. can be physical, sexual, psychological, or financial 	<p>Slide #27: Signs and attitudes of IPV</p> <p>Q: What could make someone hesitant to admit he or she is being abused?</p> <p>A: Answers may vary, individual could be scared, thinks there is no way out, could be in denial of the situation</p> <p>Slide #28: Characteristics of an abuser</p>
2 minutes	<p>C. Dynamics of abuse</p> <ol style="list-style-type: none"> 1. Power and control <ol style="list-style-type: none"> a. violence and instilling fear 2. Using children <ol style="list-style-type: none"> a. threatening to take children away b. using them to relay messages c. using visitation to harass the victim 3. Economic abuse <ol style="list-style-type: none"> a. preventing the victim from getting a job b. making him or her ask for money c. eliminating access to family income d. taking away his or her money 4. Coercion and threat <ol style="list-style-type: none"> a. making threats to leave, commit suicide, or hurt the victim 5. Emotional abuse 	<p>Slide #29: Dynamics of abuse</p> <p>Note: Image/chart about tools of domestic abuse</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
3 minutes	<ul style="list-style-type: none"> a. making the victim think he or she is crazy b. making him or her feel guilty c. humiliating the victim <p>D. Steps of the hygienist during abuse suspicion</p> <ul style="list-style-type: none"> 1. Support <ul style="list-style-type: none"> a. allow open communication 2. Discuss <ul style="list-style-type: none"> a. talk about clinical finding in a nonjudgemental way 3. Respect <ul style="list-style-type: none"> a. respect privacy and provide resources 4. Ask <ul style="list-style-type: none"> a. talk about plan for safety 5. Plan <ul style="list-style-type: none"> a. report findings to authorities 6. Document <ul style="list-style-type: none"> a. document findings 	<p>Slide #30: What the hygienist does when discussing suspected abuse with a patient</p> <p>Q: What could be some potential helpful approaches to asking a patient about suspected abuse?</p> <p>A: Answers may vary, "Is there anything you'd like to talk about?", "I am concerned about your bruising, is everything okay?"</p>
2 minutes	<p>E. AVDR approach</p> <ul style="list-style-type: none"> 1. Ask <ul style="list-style-type: none"> a. ask patient about abuse 2. Validate <ul style="list-style-type: none"> a. validate messages b. acknowledge that the abuse is wrong 3. Document <ul style="list-style-type: none"> a. signs b. symptoms c. disclosure 4. Refer <ul style="list-style-type: none"> a. refer victim to specialist 	<p>Slide #31: Using the AVDR approach</p> <p>Note: Image of AVDR table</p> <p>Slide #32: Steps in AVDR approach</p>
1 minute	<p>F. Domestic violence reporting resources</p> <ul style="list-style-type: none"> 1. National Domestic Violence Hotline <ul style="list-style-type: none"> a. 800-799-7233 2. Child Protective Service <ul style="list-style-type: none"> a. 800-552-7096 3. Adult Protective Service <ul style="list-style-type: none"> a. 1-888-832-3858 4. Emergency <ul style="list-style-type: none"> a. 911 5. Virginia Department of Social Services 	<p>Slide #33: Resources for reporting domestic violence</p> <p>Note: These resources are for Virginia, so it is important for individuals to follow up with their state's protocol/offices.</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
4 minutes	<p data-bbox="656 247 1063 310">a. https://www.dss.virginia.gov/localagency/index.cgi</p> <p data-bbox="367 352 505 380">SUMMARY</p> <p data-bbox="367 390 1057 915">After listening and engaging in this lecture, I hope you have gained more knowledge on domestic violence, abuse, and neglect. I hope this lecture provided detailed and comprehensive material to enhance your understanding of these topics. It is important to be able to have this information and use it when seeing patients. This topic presented today is very serious, so do not hesitate to ask your dental office about their policy and utilize your local resources. It is imperative to be aware of the oral health characteristics and signs that are associated with domestic violence, abuse, and neglect. Understand you play a vital role and have a duty to your community to help. Ultimately, I hope you consider the information shared today about domestic violence and utilize it when applicable.</p>	<p data-bbox="1084 352 1325 380">Slide #34: Summary</p> <p data-bbox="1084 422 1385 527">Note: Thank the learners for their attention and participation</p> <p data-bbox="1084 537 1393 663">Q: After listening to all of the information provided, what seemed most important to you?</p> <p data-bbox="1084 674 1357 768">A: Answers will vary. If there is any confusion, provide clarifications.</p>

TIME 8 minutes	LESSON CONTENT CRITICAL THINKING ACTIVITY:	NOTES - MEDIA - Q/A
	<p>Case Study: An 85-year-old woman presented at the dental office for an overdue periodontal maintenance appointment in a wheelchair. Her caregiver explained to the front desk receptionist that there had been a lot going on and there was no time to bring her in. The front desk receptionist asked the caregiver to update the patient's medical history, explaining why she needed a wheelchair since she did not before, but he refused and said, "Everything should already be in there." While the caregiver was talking to the front desk receptionist, the elderly woman was sitting in the waiting room and seemed a little drowsy and dazed. Once the 85-year-old went back to the hygienist's room, she still seemed a little drowsy. The caregiver came into the hygienist's room asking, "How long is this going to take?" The hygienist answered, reviewed the patient's medical and dental history as well as the medication list on file, and asked why the patient was now in a wheelchair, which made the caregiver extremely agitated. The hygienist also asked the caregiver if he wanted to wait in the waiting room but he insisted on staying in the exam room. The hygienist began the extraoral and intraoral examination and noticed the elderly woman was in pain while she was palpating her facial anatomy. She also noticed bruises on the elderly woman's neck. The hygienist began to observe and palpate intraorally when she noticed a laceration to the gingival tissue. The hygienist asked about the bruising- if anything traumatic had happened lately. The caregiver immediately responded, saying that the elderly woman is always falling, which is leaving the bruises.</p> <ol style="list-style-type: none"> 1. What are your first thoughts after reading this scenario? Answer: The elderly woman is being abused and neglected due to lacerated gingival tissue and bruising on the neck. Her caregiver could be overly medicating her causing the drowsiness. 2. What are some questions you may ask the elderly woman? Answer: Have you fallen recently causing you to bruise? Who is keeping track of your medication dosage? How did you hurt your gums? 	<p>Slide #35: Critical thinking activity introduction Slide #36: Case study paragraph</p> <p>Note: Give the class about 3 minutes to read the case before questioning.</p> <p>Slide #37-#41: Case study questions</p>

<u>TIME</u>	<u>LESSON CONTENT</u>	<u>NOTES - MEDIA - Q/A</u>
3 minutes	<p>3. How can you speak to the elderly woman alone? Answer: You could ask the front desk receptionist to call the caregiver up to the front desk to get her scheduled for another appointment or to fill out a form to get him away from the exam room. Tell the caregiver you need to take x-rays. Ask receptionist to tell caregiver they have an insurance question</p> <p>4. During the appointment, what should you document? Answer: You should document all findings, such as lacerated gingival tissue and bruising on the neck using photos and in the chart note. The caregiver's and patient's behaviors should also be noted.</p> <p>5. After the appointment, what should you do? Answer: You should report to the Division of Adult Protective Service with all documented findings in place.</p>	<p>Slide #42: Student questions</p>

Test Items

Objective #1: Define abuse, neglect, and dental neglect.

Test Item #1: All of the following are associated with either abuse, neglect, or dental neglect **EXCEPT** one. Which one is the **EXCEPTION**?

- A. Intentional failure to provide for a child
- B. Non accidental physical acts
- C. A parent or guardian not following through with necessary treatment for a child
- D. A parent or guardian bringing the child to the dental office for a recall 6-month child prophylaxis.

Objective #2: Describe extraoral and intraoral signs of child abuse and neglect.

Test Item #2: All of the following are extraoral and intraoral signs of child abuse and neglect **EXCEPT** one. Which is the **EXCEPTION**?

- A. Bruises
- B. Palatal torus
- C. Bitemarks
- D. Frenal tears

Objective #3: Explain the attitudes and behaviors of abusers.

Test Item #3: Which of the following is an attitude or behavior of abusers?

- A. Partners are not always together.
- B. One partner is not being controlled or overpowered by another.
- C. Partner is not allowed to talk to other people.
- D. Partner is supportive emotionally.

Objective #4: Discuss the role of the dental hygienist in reporting suspected abuse.

Test Item #4: In 3-4 sentences, summarize the role of the dental hygienist in reporting suspected abuse.

Objective #5: Advocate the need for dental hygienists to be trained in determining suspected abuse and neglect.

Test Item #5: In 3-4 sentences, explain the need for dental hygienists to be trained in determining suspected abuse and neglect.

Correct Answer Key

1. D
2. B
3. C

4. The role of the dental hygienist in reporting suspected abuse is critical because he or she can encounter a victim firsthand. A dental hygienist should perform an extraoral and intraoral examination as well as ask the patient follow-up questions to determine findings of suspected abuse. The findings should be documented using photos and chart notes. The documented findings should then be used to report to the associated authorities the suspected abuse.

5. Dental hygienists should be trained in determining suspected abuse and neglect because they are clinically mandated reporters. It is vital for dental hygienists to know the signs and symptoms of abuse and neglect to help their patients. It is almost equally important for dental hygienists to know the resources set in place for specific incidents. Ultimately, dental hygienists should be trained in what to look for when it comes to abuse and neglect to keep patients safe.