

Identification of Child Abuse in The Dental Office

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Abstract

Through the bibliographical research and thanks to the survey carried out in this article, we determined the knowledge, procedures and attitudes of the dentists of the Universidad Regional Autónoma de los Andes "Uniandes" towards physically, psychologically and sexually abused children in the dental office. A descriptive study was carried out with a sample of 44 dentists from the Universidad Regional Autónoma de los Andes. It was found that the dentists who work as teachers in the UNIANDES and in turn work in both private and public consultations, accelerated that the public sector has a greater knowledge of the visual signs that could determine the physical, psychological and sexual abuse of the child. attended in the consultation and at the same time more than half of the professionals have knowledge of the legislation of the duty to report, but are unaware of the same sanctions by not filing the formal complaint. A relevant finding is that dentists were not interested in looking for extraoral marks that prove child abuse, but upon identifying them they would be willing to report it.

Keywords: Mistreatment, Abuse, Complaint.

1. Introduction

Historically, child abuse has been constant and has happened around the time. Even different cultures regulate the growth of people, such as sacrifices to the gods, infanticide of girls or boys, these infants are going to have many health problems, physical and mental defects because they are seen as weak. In the years of 1922- 1984 C. Henry (child maltreatment syndrome), whose theme refers to any form of violence, physical or mental harm or abuse, neglect or negligent treatment, while the child is under the care of his parents, a guardian or any other person based on his physical or intellectual superiority. (TOWER, 2021)

The identification of child abuse is a critical issue that requires the attention of professionals across multiple disciplines. In particular, dental offices can serve as a setting where signs of child abuse are first identified. The utilization of Neutrosophy, as seen in various research studies, could provide a unique and effective approach to analyzing and addressing this issue.

For example, Sánchez Santacruz et al. (2022) utilized Neutrosophic IADOV in the analysis of child labor and its causes. Neutrosophic IADOV is a technique that combines intuitionistic fuzzy sets, analytic

hierarchy process, and decision-making trial and evaluation laboratory. This approach allowed for a comprehensive evaluation of the complex factors that contribute to child labor, including economic, social, and cultural factors. Similarly, Cadena Posso et al. (2019) utilized Neutrosophy to analyze problems related to joint custody of children and adolescents after marriage dissolution. This approach allowed for a nuanced understanding of the factors contributing to these issues.

In addition, the analysis of sentiment, as demonstrated by Vázquez et al. (2021), could be a useful tool in identifying cases of child abuse. By analyzing qualitative data, such as social media posts or comments, sentiment analysis could identify individuals expressing distress or concerning behavior related to child abuse. Furthermore, Ricardo et al. (2022) highlight the impact of legal research in addressing social issues post-pandemic. The use of legal research and analysis could also play a crucial role in identifying and addressing cases of child abuse.

Moreover, the application of Neutrosophy could be extended to the prevention of domestic accidents in infants, as seen in the work of Suárez et al. (2022). The utilization of Neutrosophic analysis in proposing strategies for prevention could provide a

comprehensive approach that considers the complex interplay of factors contributing to domestic accidents. Lastly, the analysis of factors limiting the application of the principle of the best interest of the child, as demonstrated by Chugá Quemac et al. (2022), highlights the need for a comprehensive approach to address issues related to child welfare. The identification of child abuse in dental offices requires a multidisciplinary approach that considers the complex interplay of economic, social, and cultural factors. The utilization of Neutrosophy, sentiment analysis, legal research, and analysis could provide effective tools in identifying and addressing cases of child abuse. Furthermore, the application of Neutrosophy in the prevention of domestic accidents in infants and the analysis of factors limiting the application of the principle of the best interest of the child further emphasizes the importance of a comprehensive approach to child welfare.

The definition of child abuse mainly explains physical violent behavior with a fact or circumstance of clinical medical criteria and the labor and occupational use of children.

Sexual abuse is defined as the involvement of minor infants and adolescents in sexual practices carried out by an adult, seeking their own satisfactions and the power of control over children who at their age are practiced under pressure, manipulation and violence; This can be verbal or physical. The performance of these practices is inappropriate to their age and level of psychosexual development. Finally, child abuse is clearly denied in modern times, perhaps due to the existence of various child protection organizations and laws.

The role of the dentist worldwide is closely related to the detection and prevention of abuse of infants, fulfilling with responsibility that there is a high rate of sexual abuse in children who present signs of visible abuse in mouth, face and head. In 2017, the revision of the "Guide oral and dental aspects of child maltreatment abuse" concludes that sexual abuse causes injuries both in soft tissues for which the role of the dentist in dental consultations is essential to have knowledge of when and how to suspect this type of aggression; also obtaining complementary tests, photographic evidence and the assessment of a general practitioner. At the same time, the clinical pictures of the manifestations of child sexual abuse are mentioned. (Chile & UNICEF, 2011)

In undergraduate and graduate schools in Latin America, the education and knowledge to identify the signs of abuse is insufficient. Even pediatric dentists and orthodontists who are the professionals who work most with children and adolescents do not know how to act in situations of identification of cases of abuse in the dental office.

The dentist plays an important role in discovery and diagnosis. It is known that the aggressor parents or the abuser avoids visits to the dentist avoiding being discovered, however, when receiving such attention, the patient presents a very passive behavior. If the professional when performing extraoral and intraoral

clinical examinations must capture the findings within the clinical history, so that in this way the respective investigation can be complemented and after this diagnosis in the medical history without having to expose the child.

The actions of dentists in the face of suspicions of child abuse are oriented towards legal complicity, professional ethical duty to report this type of cases and legally they can be legally implicated as a natural citizen in ignorance of their duties when evidencing these cases.

2. Organic Health Law

Art 31 The state recognizes violence as a public health problem.

It is the responsibility of the national health authority, health services, sectional bodies, other competent bodies and society as a whole, to contribute to the reduction of all types of violence, including gender, intra-family, sexual violence and its impact on health. (ORGANIC HEALTH LAW, Art.31, 2015)

Cona: Code of Childhood and Delescence

Art 72. Persons obliged to report.- Persons who, due to their profession or trade, have knowledge of an act that presents characteristics of mistreatment, sexual abuse and exploitation, trafficking or loss that a child or adolescent has been a victim of must report it within 24 hours of such knowledge to any of the competent prosecutors, judicial or administrative authorities, including the Office of the Ombudsman as a guarantor of fundamental rights. (NATIONAL, CODE OF CHILDHOOD AND ADOLESCENCE, Art.72, 2017)

Coip: Comprehensive Organic Criminal Code

Art. 422. Duty to report. Those who are obliged to do so by express mandate of law must denounce in particular:

1. The public servant who, in the exercise of his or her functions, knows of the commission of an alleged crime against the efficiency of the public administration.
2. The health professional or health professionals of public or private establishments of the commission of an alleged crime
3. Directors, educators or other persons responsible for educational institutions, for alleged crimes committed in such centers. (COIP, Art. 422 Duty to report, 2018)

Art. 277.- Omission of denunciation.

The person who, as a public servant and depending on his position, knows of any fact that may constitute an infraction and does not immediately inform the authority, will be punished with imprisonment of fifteen to thirty days. (COIP, Omission of denunciation, 2018)

3. Materials and Methods

Population

The study was conducted in dentists who have been

practicing the profession for at least one year, in the public or private sector.

Instruments applied:

- Survey conducted through the FROMS OFFICE platform.

Inclusion and exclusion criteria:

Inclusion criteria

Dentists who have been practicing the profession for

at least one year either in the public or private service.

Exclusion criteria

Dentists who have been practicing the profession for less than a year.

4. Results

Survey Analysis: Child Maltreatment

	QUESTION	POTIOIN	R
1	Select your age	22 -25 YEARS	6
		25 – 30 YEARS	15
		30 – 35 YEARS	6
		35 – 40 YEARS	2
		40 – 45 YEARS	2
		45 – Hereinafter	13
2	Select your gender	Male	27
		Female	17
3	How many years have you been practicing your profession?	1 – 5 years	17
		6 – 10 years	8
		More than 10 years	19
4	Do you practice your profession in private or public service?	PRIVATE	33
		PUBLIC	11
5	As a dentist you know what are the clinical signs that indicate that there is some type of abuse whether psychological, sexual or physical?	YES	29
		NO	15
6	Did you know that in Ecuador there is legislation that obliges us as professionals to look for signs of child abuse in the consultation and report it?	YES	25
		NO	19
7	When you see a child, do you look for any marks of abuse in the extraoral exam?	YES	21
		NO	23
8	What would you do if you found marks of abuse on a child who comes to your office?	COMPLAINT	35
		IGNORES	9
9	Do you consider that neglect of children's oral health is considered child abuse?	YES	39
		NO	5
10	Did you know that failure to report child abuse will be punishable by imprisonment of fifteen to thirty days?	YES	19
		NO	25

Fountain. Survey of dentists

Survey Analysis.

The survey was aimed at a total of 44 dentists who practice their profession, of which 15 have an age range between 25 and 30 years, being the most representative age; followed by 13 dentists aged 45 and over. Of the total number of dentists surveyed, 27 are male and 17 are female. 19 of them have been practicing their profession for more than 10 years, we also have a group of 17 dentists who have been practicing the profession between 1 and 5 years, and only 8 of the respondents have been performing their profession for between 6 and 10 years. Of the 44 dentists surveyed, 33 of them practice their profession in the private service, and only 11 of them work in the public service. In private practice it is not required to know the clinical signs that indicate psychological, sexual and physical abuse, and in turn that in the public service if they know of them. However, most of them know about the legislation that requires us to look for signs of child abuse in the consultation and in response to know about the legislation most dentists would make a complaint to

these facts.

5. Discussion

In this research article there is an intimate and clear relationship between child abuse, whether physical, psychological or sexual. These can be evidenced with ailments at the level of the head and neck. (Desireé, 2018). Currently, several epidemiological studies are evidenced that there is a percentage of between 50 and 77 percent of the physical ailments of abused children are shown in the orofacial region: that is, in the mouth, face and head. As (Crespo, 2011) in a study mentioned that the regions of the body affected with greater relevance and frequency in physical abuse are the skull, neck and orofacial region, in fact, about 50% of injuries resulting from child abuse occur in the orofacial region. In some investigations themselves mention other authors and agree that the orofacial indicators, signs and symptoms in the oral cavity are the presence of red dots or better known as petechiae on the palate, detachment in the labial and lingual frenulum, some psychological problems such as mental retardation

and this makes it difficult to undertake any type of treatment, caries in abundant number, repeated abscesses, granulomas, absence of teeth, periodontal diseases. In the same way from Lima adds traces that he has suffered a human bite, and the dental inability at the time of reacting by observing these evidences, thus being an important indicator for the pediatric dentist, in many or several cases it is difficult to report as child abuse, because usually the guardians do not accept that they are with a serious problem since obstacles such as financial are presented, intellectual and social. (Iron T, 2020) Likewise, as some authors have already indicated to us, it is essential that the professional teams that are facing the evaluation of these issues that are actually a great problem worldwide, it is essential that adequate training is obtained and also an adequate and appropriate experience so that it allows them to correctly differentiate an aggression of the various types already mentioned above. (Medrano G, 2019)

6. Conclusions

The cases of child abuse identified in the consultation by the professionals of the dentistry career of the Regional Autonomous University of the Andes "Uniandes" is high.

The knowledge of the dentists and teachers of UNIANDES was adequate when proceeding in their dental consultation if there was a case of child abuse. There were some inconsistencies with the reported practices; For this reason it is necessary to reinforce both medical and legal knowledge on the subject, this will help us provide greater security to the professional at the time of identifying and reporting possible cases of child abuse from dental practice.

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