|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unborn child** | **Baby and toddler** | **School aged child** | **Adolescent** | **Adult** | **Elder** |
| Poor growth and neural development | Unsettled baby, excessive crying, sleep disturbances, irritability | Psychosomatic symptoms – abdominal pain, sleep disorders, frequent illness  Physical Injury or chronic pain | Poor health care, poor management of chronic conditions, STDs  Substance abuse  Early pregnancy | Delayed pregnancy care, frequent presentations, intrusive partner, adverse birth outcome | Location and shape of injuries, delay seeking care, suspicious explanation, multiple injuries |
| Low birth weight | Feeding problems including failure to thrive | Regressive behaviours e.g. bed wetting, sucking thumb, biting  Complaining of pain when using the toilet | Physical injuries or chronic pain | Depression, anxiety, sleep disorder, suicidality, disconnected, numb or withdrawn | Fear of being touched, inappropriate modesty, inner thigh tenderness, unexplained STD including HIV |
| Pre term birth | Physical injury, unexplained or suspicious fractures, , presence of blood in nappy or underwear, | Poor adherence to management of chronic conditions e.g. asthma, diabetes | Violent or controlling partner | Unexplained chronic pain, traumatic injury headache, cognitive problems, hearing loss | Inadequate, dirty clothing, malnutrition, pressure sores, poor hygiene |
| Injuries sustained via assault to mother e.g. stomach being punched | Disorganised attachment e.g. avoidant gaze, easy startle response  Demonstrating fear, wariness or distrust of certain people | Emotional liability, withdrawn, aggressive or anxious behaviours (conduct disorder)  Overly sexual behaviour or lack of boundaries  Poor coping skills or lack of impulse control | Depression, anxiety and other mental health presentations  Eating disorders, self-harm or suicidality | Vaginal bleeding, STDs, frequent bladder or kidney infections, multiple unintended pregnancies and/or terminations, pelvic pain, sexual dysfunction | Failure to purchase medicines, home care or healthcare. Anxiety when asked about personal finances. Disparity between assets and general condition |
| Higher incidence of reproductive loss | Delayed developmental milestones e.g. language development or mobility | Poor concentration, deteriorating school performance, social isolation, delayed language/social skills development | Truancy and other risk taking behaviours | Homelessness, unemployment, financial debt, no friends or family support, isolation, parenting difficulties | Sleep and appetite disturbances, decreased social contact, loss of interest in self, apathy and suicidality |

**Additional signs of neglect of a child or young person**

* Being frequently hungry
* Being poorly nourished
* Having poor hygiene
* Wearing inappropriate clothing, for example, wearing summer clothes in winter
* Being unsupervised for long periods
* Not having their medical needs attended to
* Being abandoned by their parents
* Stealing food
* Staying at school outside school hours
* Often being tired and/or falling asleep in class
* Abusing alcohol or drugs
* Displaying aggressive behaviour
* Not getting on well with peers

**Possible demeanour/behaviour whilst presenting at a hospital or health service**

* Unconvincing explanations of any injuries
* Describe a partner as controlling or prone to anger
* Be accompanied by their partner, who does most of the talking
* Anxiety in the presence of a partner
* Recent separation or divorce
* Needing to be back home by a certain time and becoming stressed about this
* Reluctance to follow advice
* Fear of being touched or inappropriate modesty

**Important considerations**

* The impacts of family violence can look different at different ages and stages of life.
* You can see the wide range of impacts and presentations.
* These signs are not necessarily unique to family violence and may be seen for a variety of other reasons
* We need to be even more alert to the signs when our patients are people in high risk cohorts such as Aboriginal and Torres Strait Islander women, CALD women, women with disabilities and pregnant women.
* A common theme of all these presentations is the effect on the person’s mental health.

**For more comprehensive information see:** MARAM Practice Guides: Appendix 1: Observable Signs of Trauma