

Impending Danger Threat: Foreseeable state of danger in which family behaviors, attitudes, motives, emotions and/or situations pose a threat which may not be currently active, but can be anticipated to have severe effects on a child at any time in the near future and requires Safety Intervention

Impending Danger Threats - Definitions and Examples (From Safety Intervention Standards Appendix 6)

1. No adult in the home will perform parental duties and responsibilities.

This refers only to adults (not children) in a caretaking role. Duties and responsibilities related to the provision of food, clothing, shelter, and supervision are considered at a basic level.

- Parent's/caregiver's physical or mental disability/incapacitation renders the person unable to provide basic care for the child.
- Parent/caregiver is or has been absent from the home for lengthy periods of time and no other adults are available to care for the child.
- Parent/caregiver has abandoned the child.
- Parents arranged care by an adult, but their whereabouts are unknown or they have not returned according to plan and the current caregiver is asking for relief.
- A substance abuse problem renders the parent/primary caregiver incapable of routinely/consistently attending to the child's basic needs.
- Parent/caregiver is or will be incarcerated thereby leaving the child without a responsible adult to provide care.
- Parent/caregiver allows the child to wander in and out of the home or through the neighborhood without the necessary supervision.
- Parent/caregiver allows other adults to improperly influence (drugs, alcohol, abusive behavior) the child and the parent/caregiver is present or approves.

2. One or both parents are violent.

Domestic Violence:

- Parent/caregiver physically and/or verbally assaults an intimate partner in the presence of the child; the child witnesses the activity, and is fearful for self/others.
- Parent/caregiver threatens attacks or injures both intimate partner and child.
- Parent/caregiver threatens, attacks or injures intimate partner and child attempts/may attempt to intervene.
- Parent/caregiver threatens, attacks or injures intimate partner and the child is harmed even though the child may not be the actual target of the violence.
- Parent/caregiver consciously uses force, aggression, control or violence to threaten, punish or intimidate.

General violence:

- Parent/caregiver whose behavior outside of the home (e.g. drugs, violence, aggressiveness, hostility) creates an environment within the home that threatens child safety (e.g. drug parties, gangs, drive-by shootings).
- Parent/caregiver who is impulsive, explosive or out of control, having temper outbursts which result in violent physical actions (e.g. throwing things).

3. One or both parents cannot control behavior.

This threat includes behaviors other than aggression or emotions that affect child safety as illustrated in the following examples.

- Parent/caregiver is seriously depressed and unable to control emotions or behaviors.
- Parent/caregiver is chemically dependent and unable to control the effects of the dependency.
- Parent/caregiver makes impulsive decisions and plans that leave the child in precarious situations (e.g. unsupervised, supervised by an unreliable person).
- Parent/caregiver spends money impulsively resulting in a lack of basic necessities.
- Parent/caregiver is emotionally immobilized (chronically or situationally) and cannot control behavior.

- Parent/caregiver has addictive patterns or behaviors (e.g. addiction to substances, gambling, computers, sex) that are uncontrolled and leave the child in unsafe situations (e.g. failure to supervise or provide basic care)
- Parent/caregiver is delusional or experiencing hallucinations.
- Parent/caregiver is seriously depressed and functionally unable to meet the child's basic needs.

4. Child is perceived in extremely negative terms by one or both parents/caregivers.

“Extremely” is meant to suggest a perception which is so negative that, when present, it creates a child safety concerns. In order for this condition to apply, these types of perceptions must be present and the perceptions must be inaccurate.

- Child is perceived to be the devil, demon-possessed, evil, or deformed, ugly, deficient, or embarrassing.
- Child has taken on the same identity that the parent/caregiver hates and is fearful or hostile towards and the parent/caregiver transfers feeling of the person to the child.
- Child is considered to be punishing or torturing the parent/caregiver.
- One parent/caregiver is jealous of the child and believes the child is a detriment or threat to the parents'/caregivers' relationship.
- Parent/ caregiver sees the child as an undesirable extension of self and views the child with some sense of purging or punishing.

5. Family does not have resources to meet basic needs.

“Basic needs” means shelter, food, and clothing. This includes both the lack of such resources and the lack of capacity to use such resources if they were available.

- Family has no money.
- Family has no food, clothing, or shelter.
- Family finances are insufficient to support needs (e.g. medical care) that, if unmet, could result in a threat to child safety.
- Parent/caregiver lacks life management skills to properly use resources when they are available which impacts child safety.
- Family is routinely using their resources for things (e.g. drugs) other than for basic care and support thereby leaving them without their basic needs being adequately met.
- Child's basic needs exceed normal expectations because of unusual conditions (e.g. disability) and the family is unable to adequately address the needs.

6. One or both parents/caregivers fear they will maltreat child and/or request placement.

The safety decision-making elements of immediacy, severity, and vulnerability must be considered when evaluating this threat.

- Parent/caregiver state they will maltreat.
- Parent/caregiver describes conditions and situations that stimulate them to think about maltreating the child.
- Parent/caregiver talks about being worried about, fearful of, or preoccupied with maltreating the child.
- Parent/caregiver identifies things that the child does that aggravate or annoy them in ways that makes them want to attack the child.
- Parent/caregiver describes disciplinary incidents that have become out-of-control.
- Parent/caregiver is distressed or "at the end of their rope" and are asking for relief in either specific ("take the child") or general ("please help me before something awful happens") terms.
- One parent/caregiver is expressing concerns about what the other parent/caregiver is capable of or may be doing.

7. One or both parents/caregivers intend(ed) to hurt child.

“Intended” suggests that before or during the time the child was harmed, the parents'/caregivers, conscious purpose was to hurt the child. This should be distinguished from an instance in which the parent/caregiver meant to discipline or punish the child and the child was inadvertently hurt.

- The incident was planned or had an element of premeditation and there is no remorse.
- The nature of the incident or use of an instrument can be reasonably assumed to heighten the level of pain or injury (e.g. cigarette burns) and there is no remorse.
- Parent's/caregiver's motivation is to teach or discipline seems secondary to inflicting pain or injury and there is no remorse.
- Parent/caregiver can reasonably be assumed to have had some awareness of what the result would be prior to the incident and there is no remorse.
- Parent's/caregiver's actions were not impulsive, there was sufficient time and deliberation to assure that the actions hurt the child, and there was no remorse.
- Parent/caregiver does not acknowledge any guilt or wrongdoing and there was intent to hurt the child.
- Parent/caregiver intended to hurt the child and shows no empathy for the pain or trauma the child has experienced.
- Parent/caregiver may feel justified, may express that the child deserved the mistreatment, and they intended to hurt the child.

8. One or both parents/caregivers lack parenting knowledge, skills, or motivation which affects child safety.

The safety decision-making elements of immediacy, severity, and vulnerability apply here as well as basic parenting qualities. The judgment is based on the parents/ caregivers: 1) lacking the basic knowledge or skills which prevent them from meeting the child's basic needs, or 2) lacking motivation resulting in abdicating their role to meet basic needs, or 3) failing to adequately perform the parental role to meet the child's basic needs. This inability and/or unwillingness to meet basic needs creates child safety concerns.

- Parent's/caregiver's intellectual capacities affect judgment and/or knowledge in ways that prevent the provision of adequate basic care.
- Young or intellectually limited parents/primary caregivers have little or no knowledge of a child's needs and capacity.
- Parent's/caregiver's expectations of the child far exceed the child's capacity thereby placing the child in unsafe situations.
- Parent/caregiver does not know what basic care is or how to provide it (e.g., how to feed or diaper; how to protect or supervise according to the child's age).
- Parents'/caregivers' parenting skills are exceeded by a child's special needs and demands in ways that affect safety.
- Parent's/caregiver's knowledge and skills are adequate for some children's ages and development, but not for others (e.g., able to care for an infant, but cannot control a toddler).
- Parent/caregiver does not want to be a parent and does not perform the role, particularly in terms of basic needs.
- Parent/caregiver is averse to parenting and does not provide basic needs.
- Parent/caregiver avoids parenting and basic care responsibilities.
- Parent/caregiver allows others to parent or provide care to the child without concern for the other person's ability or capacity (whether known or unknown).
- Parent/caregiver does not know or does not apply basic safety measures (e.g., keeping medications, sharp objects, or household cleaners out of reach of small children).
- Parents/caregivers place their own needs above the children's needs thereby affecting the children's safety.
- Parents/caregivers do not believe the children's disclosure of abuse/neglect even when there is a preponderance of evidence and this affects the children's safety.

9. There is some indication that the parents/caregivers will flee.

This threat is selected if the facts suggest that the family will hide the child by changing residences, leaving the jurisdiction, or refusing access to the child, and the consequences for the child may be severe and immediate.

- Family is highly transient.
- Family has little tangible attachments (e.g., job, home, property, extended family).
- Parent/caregiver is evasive, manipulative, suspicious.
- There is precedence for avoidance and flight.
- There are or will be civil or criminal complications that the family wants to avoid.

- There are other circumstances prompting flight (e.g., warrants, false identities uncovered, criminal convictions, financial indebtedness).

10. Child has exceptional needs which the parents'/caregivers' cannot or will not meet.

“Exceptional” refers to specific child conditions (e.g., retardation, blindness, physical disability) which are either organic or naturally induced as opposed to parentally induced. The key here is that the parents, by not addressing the child’s exceptional needs, will not or cannot meet the child’s basic needs.

- Child has a physical or mental condition that, if untreated, is a safety threat.
- Parent/caregiver does not recognize the condition.
- Parent/caregiver views the condition as less serious than it is.
- Parent/caregiver refuses to address the condition for religious or other reasons.
- Parent/caregiver lacks the capacity to fully understand the condition or the safety threat.
- Parent’s/caregiver’s expectations of the child are totally unrealistic in view of the child’s condition.
- Parent/caregiver allows the child to live or be placed in situations in which harm is increased by virtue of the child’s condition.

11. Living arrangements seriously endanger a child’s physical health.

This threat refers to conditions in the home which are immediately life-threatening or seriously endangering a child’s physical health (e.g., people discharging firearms without regard to who might be harmed; the lack of hygiene is so dramatic as to cause or potentially cause serious illness).

- Housing is unsanitary, filthy, infested, a health hazard.
- The house’s physical structure is decaying, falling down.
- Wiring and plumbing in the house are substandard, exposed.
- Furnishings or appliances are hazardous.
- Heating, fireplaces, stoves, are hazardous and accessible.
- There are natural or man-made hazards located close to the home.
- The home has easily accessible open windows or balconies in upper stories.
- Occupants in the home, activity within the home, or traffic in and out of the home present a specific threat to a child’s safety.

12. Child shows serious emotional effects of maltreatment and a lack of behavioral control.

Key words are “serious” and “lack of behavioral control.” “Serious” suggests that the child’s condition has immediate implications for intervention (e.g., extreme emotional vulnerability, suicide prevention). “Lack of behavioral control” describes the provocative child who stimulates reactions in others. The safety decision-making elements of immediacy, severity, and vulnerability apply.

- Child threatens suicide, attempts suicide or appears to be having suicidal thoughts.
- Child will run away.
- Child’s emotional state is such that immediate mental health/medical care is needed.
- Child is capable of and likely to self-mutilate.
- Child is a physical danger to others.
- Child abuses substances and may overdose.
- Child is so withdrawn that basic needs are not being met.

13. Child shows serious physical effects of maltreatment.

The key word is “serious,” and suggests that the child’s condition has immediate implications for intervention (e.g., need for medical attention, extreme physical vulnerability).

- Child has severe injuries.
- Child has physical symptoms from maltreatment which require immediate medical treatment (e.g., failure to thrive).
- Child has physical symptoms from maltreatment which require continual medical treatment.

14. Child is fearful of the home situation.

“The home situation” includes specific family members and/or other conditions in the living situation (e.g., frequent presence of known drug users in the household).

- Child demonstrates emotional and/or physical responses indicating fear of the living situation or of people within the home (e.g., crying, inability to focus, nervousness, withdrawal).
- Child expresses fear and describes people and circumstances which are reasonably threatening.
- Child recounts previous experiences which form the basis for fear.
- Child’s fearful response escalates at the mention of home, people or circumstances associated with reported incidents.
- Child describes personal threats which seem reasonable and believable.

15. Child is seen by either parent/caregiver as being responsible for the parents’/primary caregivers’ problems.

This threat involves situations where a child is blamed for the parents’/caregivers’ problems and this attitude will likely result in a safety concern for the child.

- Child is blamed and held accountable for CPS involvement.
- Parents/caregivers directly associate their problems (e.g., difficulties in their lives, limitations to their freedom, financial or other burdens) to the child.
- Conflicts that parents/primary caregivers experience with others (e.g., family members, neighbors, friends, school, police, CPS) are considered to be the child’s fault.
- Losses the parent/caregiver experiences (e.g., job, relationships) are attributed to the child.

16. The maltreating parent/caregiver exhibits no remorse or guilt.

This threat is considered in the context of maltreatment to a child for which parents/primary caregivers do not take responsibility for and/or admit to but present cold, detached, uncaring emotions indicating little to no concern for the physical or emotional distress the child has or is experiencing.

- Parent’s/caregiver’s expressions of regret or sorrow are unbelievable and self-serving.
- Parent’s/caregiver’s regrets are more associated with getting caught than what was done.
- Parent/caregiver indicates a belief that the child deserved what he or she got.
- Parent/caregiver shows no recognition of wrong or inappropriateness.
- Parent/caregiver does not express any empathy toward the child’s condition or injuries.
- Parent/caregiver demonstrates a self-righteous attitude and believes actions were justified.
- Parent/caregiver rationalizes the maltreating behavior as discipline, training or in the child’s best interest.
- Parent/caregiver views the maltreating behavior as a parental right.

17. One or both parents/caregivers have failed to benefit from previous professional help.

“Previous professional help” suggests that a record exists and is known. This applies to the parents’/primary caregivers’ adult lives and should relate to current problems that are pertinent to child safety and risk of maltreatment.

- CPS has intervened before in respect to similar or exactly the same parental behavior that is currently threatening safety, yet there is no indication of change.
- Parents/caregivers have received professional help prior to this incident, and that help was concerned with similar or exactly the same behavior in question. The parent’s/caregiver’s current behavior suggests no change or relapse.
- The parent’s/caregiver’s assertion that they have received help before for these conditions and are rehabilitated does not fit with the current findings.