



National Family Safety Registry (NFSR)



Annual Report 2010

Protecting our present... Securing our future...

Acknowledgments

The National Family Safety Registry (NFSR) Committee acknowledges and appreciates the illustrious role of Her Royal Highness Princess Adela Bint Abdullah, the Vice President of the National Family Safety Program (NFSP) and His Excellency Dr. Abdullah Al Rabeah, Minister of Health and Chairman of the National Health Services Council in supporting the establishment of the NFSR. The committee also thanks His Excellency Dr. Qasim Al Qasabi, Chief Executive Officer, King Faisal Specialist Hospital and Research Center (KFSH&RC), General Organization and his Excellency Dr. Bandar Al Knawy, Chief Executive Officer for the National Guard Health Affairs for their continuous support in provision of resources for this registry.

We would also like to extend our appreciation to Dr. Sultan Al Sudairy, Executive Director of Research Center at KFSH&RC and Dr. Futwan Al Muhanna, Deputy Executive Director of the Research Center at KFSH&RC.

Finally, great appreciation goes to the members of the Executive Committee of the Hospital-based Child Protection Centers, the NFSR Committee members, and all members of child protection teams in the Kingdom for their commitment in bringing success to this project and the completion of the first annual report.

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Message from the Chairman of the Registry

It gives me great pleasure to announce the release of the First Annual Report of the National Family Safety Registry (NFSR). As the Chairperson of the Child Advocacy Committee at KFSHRC, I have personally handled child abuse and/or neglect cases and witnessed how disheartening it is to see the suffering of children, often at the hands of their own family members. Thus, it is a dream come true to be able to accomplish this project for the sake of our children's safety.

This registry is an important step forward in our country's effort to protect those who cannot protect themselves. The aim of the NFSR is to provide a centralized database for child abuse cases all over the Kingdom. Such data will improve our ability to analyze child abuse cases, determine the magnitude of the problem, provide an accurate incidence of its occurrence, and determine the risk factors leading to abuse. The information provided from such data can help us to formulate prevention strategies to protect our children and minimize the incidence of their neglect and/ or abuse.

A total of 292 child abuse cases have been registered as of September 31, 2010, of whom (n=153; 52.4%) are males and (n=139; 47.6%) are females. Saudi nationality comprised the largest group of abused cases in both genders (n=280; 95.9%). The highest number of reported cases are from Riyadh Region (n= 185; 63.3%).

This annual report highlights the important information and recommendations that will be useful to the public health officials and other concerned governmental agencies in dealing with child abuse cases. We continually strive to improve our system to better serve our community. We encourage everyone to take part in this endeavour and bring meaningful difference to the lives of our children.

We are grateful to the leadership of this country who supported us in our mission to prevent child abuse and domestic violence in the Kingdom. Also, I would like to take this opportunity to thank all those who have contributed to make this registry a reality.

Sincerely,



Hoda Abdullah Kattan, MD, FRCPC

Chairman

National Family Safety Registry

Message from the Co-Chairman of the Registry

I am very pleased to be engaged in the establishment of the National Family Safety Registry (NFSR), which is truly a unique project not only in the Kingdom but in the entire region.

The NFSR is a vital instrument in collecting data, which is important to lead the implementation of evidence-based approaches to child maltreatment prevention. With the data we receive from the registry we will be able to determine the incidence, risk factors, epidemiological characteristics, and patterns of child abuse. This information shall assist policymakers and strategic planners in devising programs that will not only combat child maltreatment but prevent it. By this approach, we as professionals are adapting a proactive preventive measures rather than relaying on reactive ones.

Furthermore, the registry has become the bond that links the Kingdom's 38 hospital-based child protection centers through a web-based online registration system. These centers spread across all the provinces of the kingdom have been another great accomplishment. This would not have been possible to achieve without the enthusiasm and dedication of the professionals working for children.

We, at National Family Safety Program (NFSP) have been very lucky to have the support and guidance of the National Guard Health Affairs in developing and implementing many national projects including the NFSR, and for that I would like to extend my gratitude to His Excellency Dr. Bandar Al Knawy, Chief Executive Officer of the National Guard Health Affairs, as well as to everyone who has contributed towards the success of this project.

I look forward to witnessing more efforts aimed for protecting our children and securing their future.

Sincerely,



Maha Abdullah Almuneef, MD, FAAP

Co Chairman

National Family Safety Registry

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Executive Summary

This is the first annual report of the registered child abuse cases in National Family Safety Registry (NFSR).

The National Family Safety Program (NFSP) was established in 2005 with the intention to prevent child maltreatment and domestic violence in the Kingdom of Saudi Arabia (KSA). Since the inception of the NFSP and its implementation in 2007, the numbers of child protection centers (CPC) that provide NFSP services have increased from 4 to 38. All these centers were established under the directives of the National Health Services Council representing all health sectors in the country. The centers are distributed throughout the Kingdom; however, the majority are concentrated in major metropolitan areas. The NFSR was designed to serve a dual role of registry and a platform for research regarding child maltreatment and domestic violence in the Kingdom. The data is collected by the child protection centers and entered into the centralized registry. The registry data system is web-based, and was developed and maintained by the King Faisal Specialist Hospital and Research Centre (KFSH&RC) which maintains many of the health sector registries for the KSA.

A total of 292 child abuse cases have been registered as of September 31, 2010, of whom (n=153; 52.4%) are males and (n=139; 47.6%) are females. Saudi nationality comprised the largest group of abused cases in both genders (n=280; 95.9%). The highest number of reported cases are from Riyadh Region (n=185; 63.3%).

Looking at the age distribution of the abused cases, it has been noticed that (n=58; 20%) of the 292 cases are under the age of 1 year with the majority being first three months of age or less (n=25; 43%). In terms of the relation of the alleged perpetrator to the child, 77.4% of the cases are unknown. In the remaining 22.6% the majority i.e. 65.2% of the known perpetrator were the parents

As for the type of abuse; physical abuse comprises (n=183; 60%) cases, neglect (n=126; 41.3%), sexual abuse (n=47; 15.4%), Munchausen by proxy (n=8; 2.6%), and Shaken baby syndrome (n=14; 4.6%) cases. Some of the reported cases have more than one form of abuse. (N=13; 4%) cases had repeated events of abuse.

Of the total 292 cases, (n=162; 54%) were admitted and (n=139; 46%) were treated and released. (N=259; 85%) were released with appropriate disposition and follow-up plans. (N=113; 47%) were reported to the police authorities, (n=97; 40.4%) were reported to the Ministry of Social Affairs, and (n=28;

11.7%) were reported to other sources. (N=46; 15%) were discharged without an appropriate disposition. (N=6; 2%) of the 292 abused cases had a fatal outcome.

Introduction

Child abuse is a major health problem that has multiple views. It involves moral, social, educational problems, and attachment failure. Using multiple medical, social, and therapeutic approaches with special focus on prevention and specialized support programs, child abuse can be prevented. The initiation of the National Family Safety Registry (NFSR) will help the National Family Safety Program (NFSP) accomplish some of its main objectives, which are to determine the magnitude of the problem in our country, provide our population with an accurate incidence rate of its occurrence, and determine the risk factors encountered in our population in order to plan for a prevention strategy.

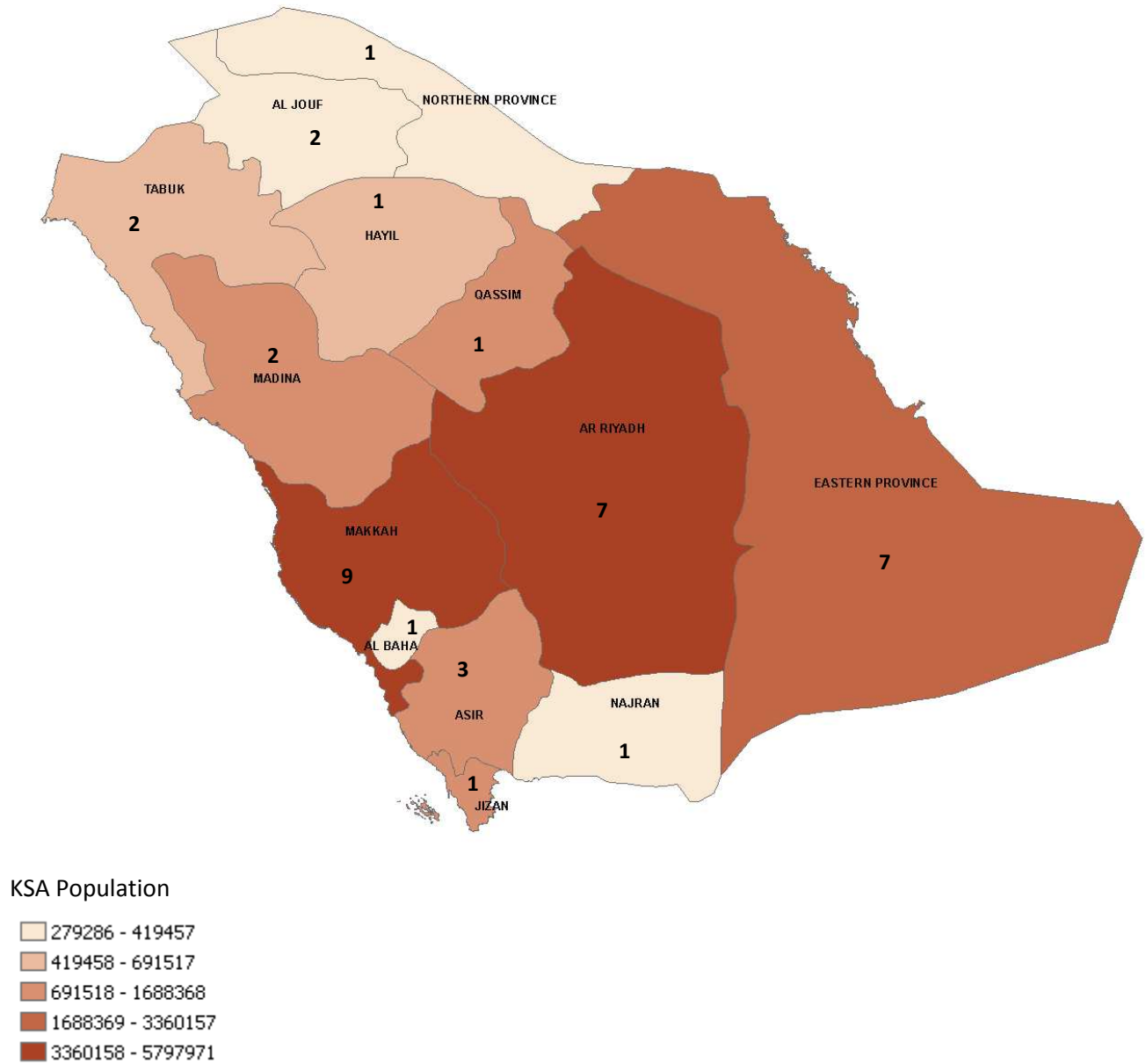
The NFSP was established by a Royal Decree No. 11471/MB with a vision to establish a foundation that will promote a safe community, defend individuals' rights, and help victims of domestic violence. The main objective is to end domestic violence and child abuse in our country. The strategies are to: 1) Strengthen the role of Saudi government in the humanitarian field by enforcing national regulations and policies; 2) Prepare future strategies and action plans based on scientific evidences obtained from social surveys and statistic studies conducted in all regions of the Kingdom, and from the NFSR; 3) Promote awareness among individuals and institutions on the damage caused by domestic violence and child abuse; 4) Promote partnership and solidarity with government sectors, and charitable organizations to jointly organize national action to overcome obstacles and duplication in the objectives and performance; 5) Implement prevention, intervention, and rehabilitation programs to assist victims and protect them with the help of specialized teams dealing with all aspects of the case (medical, psychological, social, and legal); and 6) Train staff members to deal appropriately and effectively with cases of domestic violence and child abuse.

Designed and maintained by King Faisal Specialist Hospital & Research Centre, the NFSR is a state-of-the-art registry for a prospective data acquisition and reporting. The NFSR is governed by a set of approved policies and procedures, and by agreements on registry By-Laws.

Objectives

- To obtain the incidence rate, prevalence rate and patterns of child abuse cases through mandatory reporting of cases in all health care facilities in the Kingdom.
- To identify the risk factors of child abuse and design strategies for prevention, intervention, and rehabilitation programs to assist these victims.
- To document the treatment procedures and treatment outcome in addition to short term services

Distribution of the Child Protection Centres (CPC) all over the Kingdom [Total: 38]



Background and Registry Functions

Case Definition

Any patient who is diagnosed or suspected to have any form of child abuse, receiving treatment, or seeking medical attention and is referred to any of the 38 hospital-based Child Protection Centers (CPC). Physical abuse includes cases of Munchausen's syndrome by proxy and Shaken Baby Syndrome, other forms including sexual abuse, neglect and emotional abuse.

Functionalities of the Registry

Case Ascertainment

The registry collects data from all CPC within the Kingdom.

Data Set

Data is collected on a three-part registration web-forms (Appendix III) approved by the Registry Committee. The registrar is responsible for the data collection, data entry and validation.

The details collected for the registry includes the basic demographic variables (age, sex, area of residence etc.), abuse details, etc.

Software Design

NFSR is a web-based online registration system with SQL 2005 database as a back end and internet-enable design as a front end. The Web Server used for the design of the National Family Safety Registry is the Microsoft Internet Information Server (IIS) with a DOT NET framework. Forms and software functionalities are designed using Visual Studio.NET application. The database including all the tables, indexes, rules, stored procedures, views and triggers is upgraded and maintained with Microsoft SQL Server 2005. In addition to several security checks, the system is designed as such that there are five major kind of users that can have access to the registry software with defined set of privileges.

These users can be categorized as:

- **National Registrar:** with administrative rights like creating new users, data validation, data deletion and modifying static table information in addition to full control on data entry and update modules.
- **Sector Registrar:** with access to individual sectors only.
- **Common Registrar:** with administrative privileges and access to individual centre's only.
- **Common users:** with limited data entry and data modification privileges.

- **Browse only users:** For browsing the general statistics only without any deletion or data export privileges.

Encryption techniques are used for password protection which ensures the secure access to the registry application and thereby protecting patient data and its confidentiality. The facility to change a password for users as well as a facility to recover a forgotten password is also provided within the application.

Validation

All data entry forms have validation checks and warning messages that restrict users from making any data entry mistakes.

Validation rules are designed as a quality check of data entered in the database. The diagnosis validation rules that are integrated are run routinely to confirm accuracy.

Privacy and Confidentiality Issues

Technology now allows personally identifiable health information to be easily collected, correlated and widely transmitted, renewing concerns over privacy and confidentiality. Since the registry is collecting personally identifiable health data, one of the major responsibilities of the registrar is to ensure attention to privacy as a fundamental consideration in collection and maintenance of the information obtained. It is also realized by the registry staff that mistakes in handling or protecting health data might result in revealing the intimate details of innocent people's lives. The Registries Core Facility ensures that only authorized individuals should handle the raw data and information managed by the registry database, and is accessible to the *right* people through assigned passwords. Registry data is released to the researcher after proper approval from the registry committee, which makes sure that privacy of individual's does not supersede other rights or societal goals while carrying out the research.

In addition to personal effort in safeguarding the privacy and confidentiality, the web-application is also equipped with functionalities to monitor the registry access through the log access report. Also, an "Oath of Confidentiality" is required to be signed by all users of the registry (Appendix IV) thereby, leaving each user responsible for data security while handling patient's information.

Section I: Demographic Data

This section includes statistics for basic demographic data. A total of 292 cases are registered in the NFSR database.

Figure 1.1: Distribution by Gender

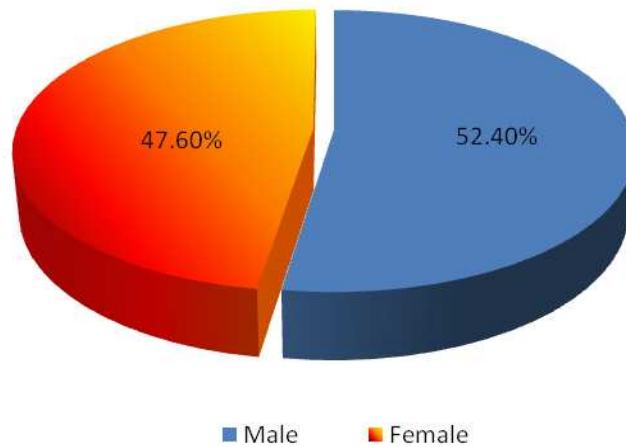


Table 1.1: Distribution by Nationality

| * Nationality | Male | Female | Total | % |
|---------------|------------|------------|------------|------------|
| Saudi | 144 | 136 | 280 | 95.9 |
| Egyptian | 3 | 1 | 4 | 1.4 |
| British | 1 | 1 | 2 | 0.7 |
| Indian | . | 1 | 1 | 0.3 |
| Kuwaiti | 1 | . | 1 | 0.3 |
| Yemen | 1 | . | 1 | 0.3 |
| Palestinian | 1 | . | 1 | 0.3 |
| Syrian | 1 | . | 1 | 0.3 |
| Jordanian | 1 | . | 1 | 0.3 |
| Total | 153 | 139 | 292 | 100 |

* Non-Saudi children are treated in private sectors which are not yet represented by the CPC. Majority of the abused cases by nationality are Saudis.

Table 1.2: Distribution by Age (in months) and Gender

| Age (in months) | Male | Female | Total | % |
|-----------------|-----------|-----------|-----------|------------|
| 0 | . | 1 | 1 | 1.7 |
| 1 | 3 | 4 | 7 | 12.1 |
| 2 | 6 | 5 | 11 | 19.0 |
| 3 | 3 | 3 | 6 | 10.3 |
| 4 | 1 | 1 | 2 | 3.4 |
| 5 | 4 | 3 | 7 | 12.1 |
| 6 | 3 | 2 | 5 | 8.6 |
| 7 | 3 | . | 3 | 5.2 |
| 8 | 4 | 3 | 7 | 12.1 |
| 9 | 3 | . | 3 | 5.2 |
| 10 | 2 | 1 | 3 | 5.2 |
| 11 | 2 | 1 | 3 | 5.2 |
| Total | 34 | 24 | 58 | 100 |

Figure 1.2: Distribution by Age (in years)

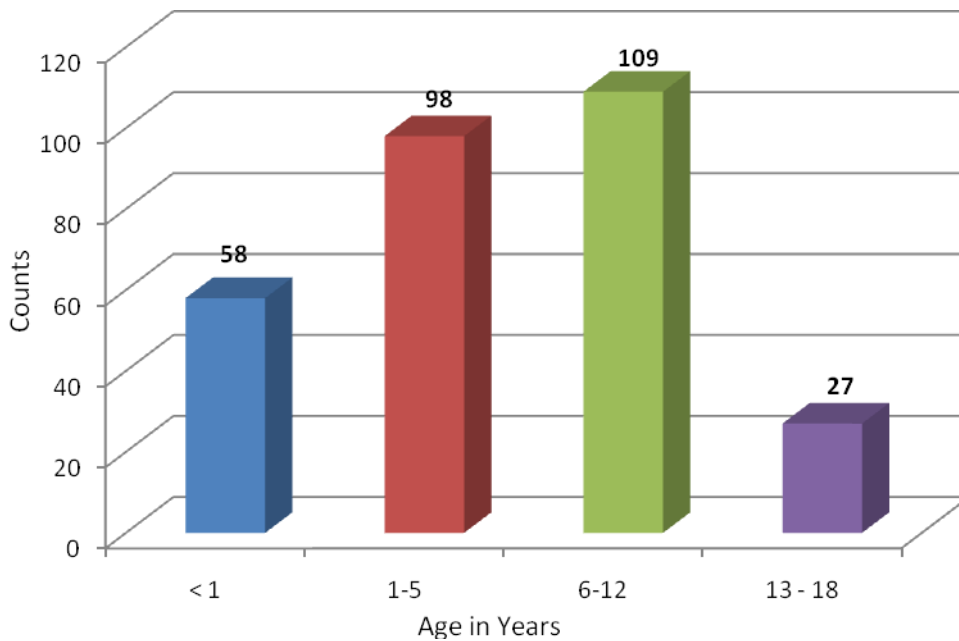


Table 1.3: Distribution by Relationship of the Reporting Person to the Child

| Relationship to the Child | Cases | | | |
|---------------------------|------------|------------|------------|------------|
| | Male | Female | Total | % |
| Parents | 45 | 42 | 87 | 30 |
| Relatives | 7 | 8 | 15 | 5 |
| Others | 101 | 89 | 190 | 65 |
| Total | 153 | 139 | 292 | 100 |

30% of the cases were reported by either of the parents. Other relationship encompasses teachers, friends, house maids, neighbours and health care professionals from CPC.

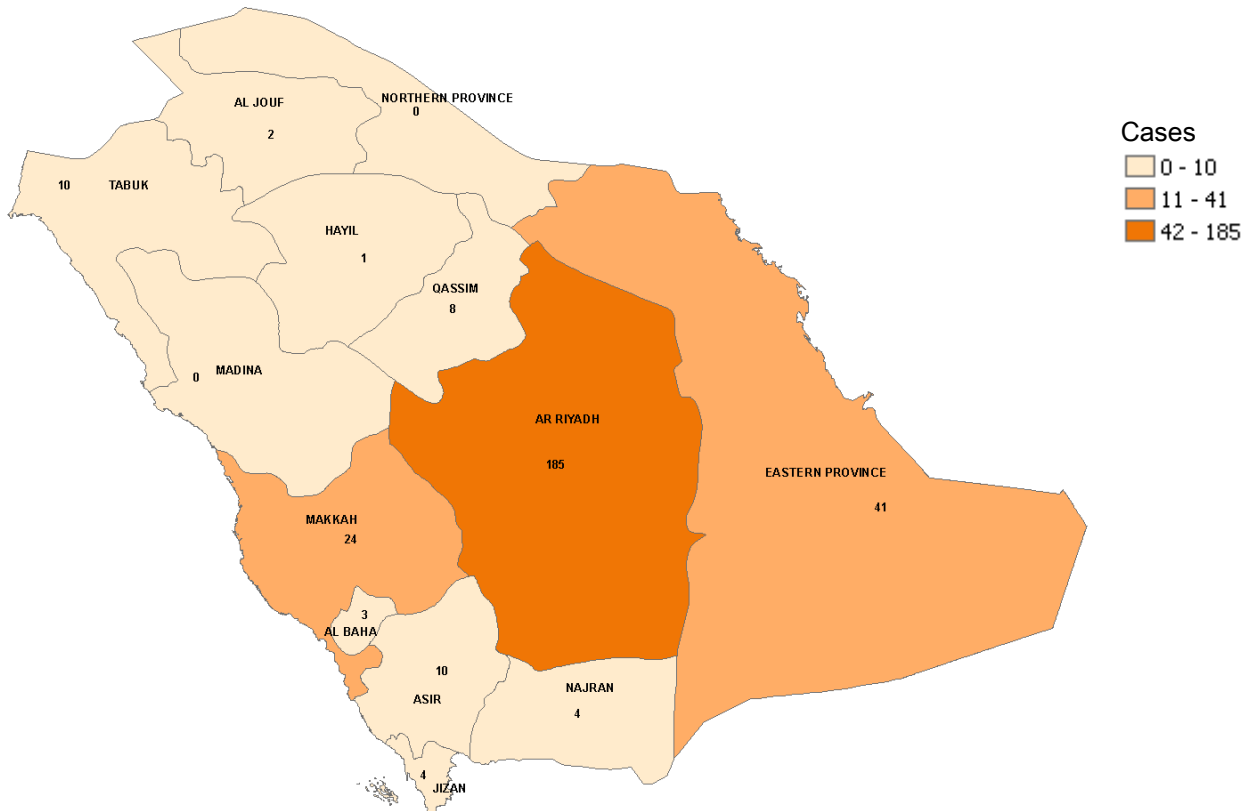
Table 1.4: Distribution of Abuse Cases by Region

| Region | Male | Female | Total | % |
|--------------|------------|------------|------------|------------|
| Riyadh | 95 | 90 | 185 | 63.4 |
| Eastern | 18 | 23 | 41 | 14.0 |
| Makkah | 15 | 9 | 24 | 8.2 |
| Asir | 5 | 5 | 10 | 3.4 |
| Tabuk | 6 | 4 | 10 | 3.4 |
| Qassim | 5 | 3 | 8 | 2.7 |
| Jizan | 2 | 2 | 4 | 1.4 |
| Najran | 3 | 1 | 4 | 1.4 |
| Al Baha | 1 | 2 | 3 | 1.0 |
| Northern | 1 | 1 | 2 | 0.7 |
| Hail | 1 | . | 1 | 0.3 |
| Total | 152 | 140 | 292 | 100 |

Distribution of cases subjected to abuse is shown on a Kingdom map in figure 1.3 (Page 10). The gradation is representative of the total counts of reported abuse cases on regional level. Ar-Riyadh region

has the highest reported cases (n=185; 63.4%), followed by Eastern Province (n=41; 14.0%) and then Makkah (n=24; 8.2%).

Figure 1.3: Regional Distribution of Abuse Cases



Some of the peripheral centers were recently established and case reporting in the centralized database system just started. Thereby, most of the cases are concentrated in the three main regions of Ar-Riyadh, Eastern and Makkah.

Table 1.5: Distribution by Reporting Institutions

| Institution | Cases | | | |
|---|-------|--------|-------|------|
| | Male | Female | Total | % |
| * Riyadh King Abdulaziz Medical City, National Guard Health Affairs | 78 | 62 | 140 | 47.9 |
| King Saud Medical Complex- Riyadh | 13 | 16 | 29 | 9.9 |
| Al Ahsa Hospital | 7 | 8 | 15 | 5.1 |
| Dammam Maternity & Children's Hospital | 5 | 8 | 13 | 4.5 |
| King Faisal Specialist Hospital and Research Centre - Riyadh | 5 | 7 | 12 | 4.1 |
| King Abdulaziz Specialist Hospital, Taif | 3 | 6 | 9 | 3.1 |
| North West Armed Forces Hospital | 5 | 4 | 9 | 3.1 |
| Maternity & Children's Hospital, Buraidah | 5 | 3 | 8 | 2.7 |
| Armed Forces Hospital Southern Region | 3 | 4 | 7 | 2.4 |
| King Fahd Armed Forces Hospital, Jeddah | 6 | 1 | 7 | 2.4 |
| King Fahd Military Medical Complex | 3 | 4 | 7 | 2.4 |
| King Abdulaziz Hospital- Al Ahasa | 3 | 2 | 5 | 1.7 |
| Al-Qunfudah General Hospital | 3 | 1 | 4 | 1.4 |
| Jizan Hospital | 2 | 2 | 4 | 1.4 |
| Najran Maternity & Children's Hospital | 3 | 1 | 4 | 1.4 |
| Maternity & Children's Hospital-Khamis Mushait | 2 | 1 | 3 | 1.0 |
| King Fahad Hospital- Al Baha | 1 | 2 | 3 | 1.0 |
| Riyadh King Saud University | . | 2 | 2 | 0.7 |
| Riyadh Military Hospital | . | 2 | 2 | 0.7 |
| Algrayat Hospital | 1 | 1 | 2 | 0.7 |

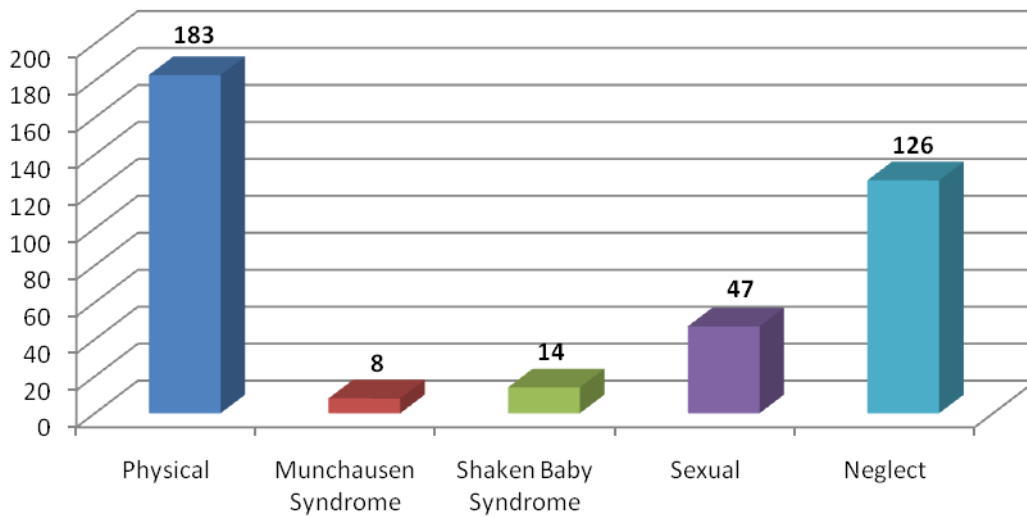
| | | | | |
|---|------------|------------|------------|--------------|
| Misaadiah hospital Jeddah | 1 | 1 | 2 | 0.7 |
| King Abdulaziz Medical City Jeddah | 2 | . | 2 | 0.7 |
| King Khalid Military City Hospital Hafar Al Batin | . | 1 | 1 | 0.3 |
| King Khaled Hospital Hail | 1 | . | 1 | 0.3 |
| King Khaled Civil Hospital Tabuk | 1 | . | 1 | 0.3 |
| Total | 153 | 139 | 292 | 100.0 |

* At King Abdulaziz Medical City, National Guard Health Affairs, the retrospective data collection along with prospective collection also took place, therefore showing higher counts of reported cases from this center in particular.

Section II: Abuse History

Multiple forms of abuse for registered patients; contribute to higher counts as shown in figure 2.1.

Figure 2.1: Distribution by Forms of Abuse



Forms of abuse are further illustrated as pie charts. Figure 2.2 illustrates sub-categories of physical abuse.

Figure 2.2: Nature of Physical Abuse

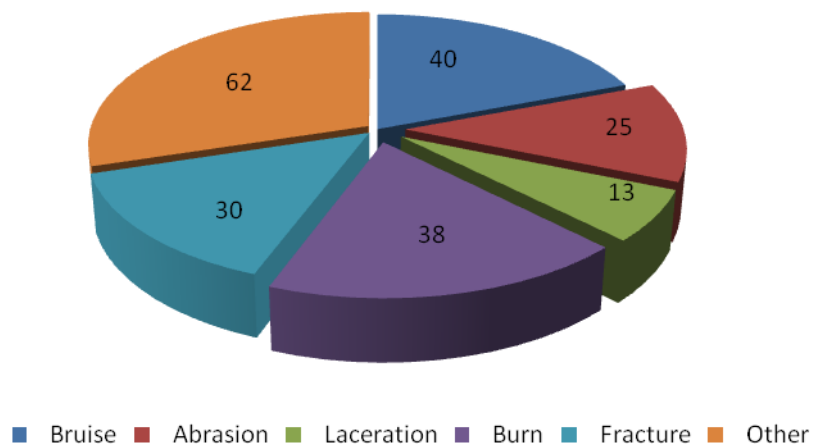


Figure 2.3: Nature of Sexual Abuse

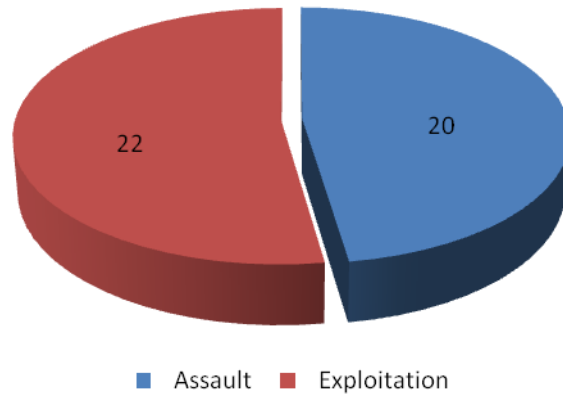
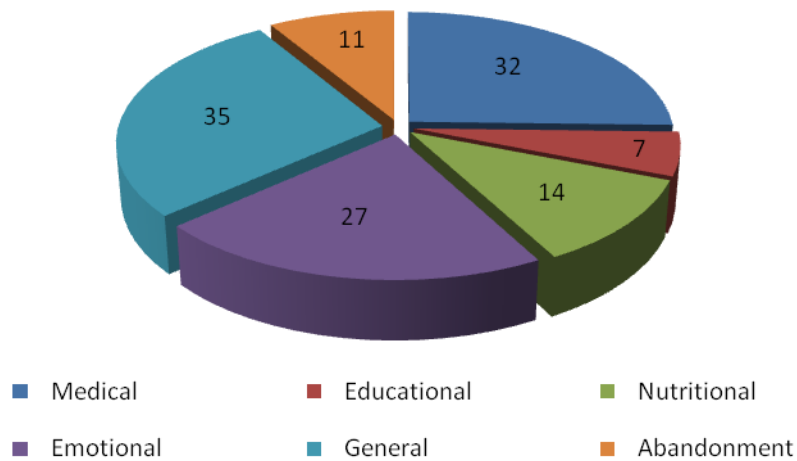
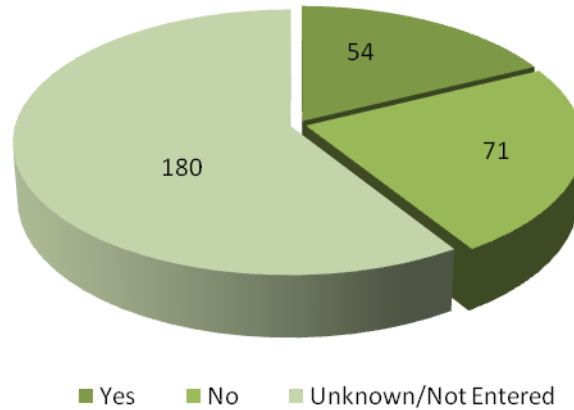


Figure 2.4: Type of Neglect



The above pie charts represent various forms of abuse within the major abuse category therefore; the total counts of the subcategories differ from the general category counts.

Figure 2.5: Previous Un-reported Abuse



Few cases are reported to have multiple incidents of abuse as tabulated from data shown in table 2.1. Majority were registered with one time abuse only.

Table 2.1 Distribution by Repeated Incidents of Abuse

| Repeated History of Abuse | Cases | | | |
|---------------------------|------------|------------|------------|------------|
| | Male | Female | Total | % |
| Not Repeated | 152 | 139 | 291 | 95.4 |
| Repeated Once | 7 | 4 | 11 | 3.6 |
| Repeated Twice | 1 | 2 | 3 | 1 |
| Total | 160 | 145 | 305 | 100 |

Table 2.2: Distribution by Relationship of Alleged Perpetrator

| Relationship of Alleged Perpetrator | Cases | | | |
|-------------------------------------|------------|------------|------------|------------|
| | Male | Female | Total | % |
| Parents | 28 | 17 | 45 | 14.8 |
| Relatives | 7 | 4 | 11 | 3.6 |
| Others | 5 | 8 | 13 | 4.3 |
| Unknown/Not Entered | 120 | 116 | 236 | 77.4 |
| Total | 160 | 145 | 305 | 100 |

Table 2.3: Photographs Taken in Abuse Cases

| Photograph | Male | Female | Total | % |
|---------------------|------------|------------|------------|------------|
| Yes | 12 | 14 | 26 | 8.5 |
| No | 108 | 89 | 197 | 64.6 |
| Unknown/Not Entered | 40 | 42 | 82 | 26.9 |
| Total | 160 | 145 | 305 | 100 |

Table 2.4: STD Swabs Taken in Alleged Sexual Abuse

| Sexually Transmitted Infection Swab | Male | Female | Total | % |
|-------------------------------------|------------|------------|------------|------------|
| Yes | 15 | 17 | 32 | 10.5 |
| No | 101 | 90 | 191 | 62.6 |
| Unknown/Not Entered | 44 | 38 | 82 | 26.9 |
| Total | 160 | 145 | 305 | 100 |

Table 2.5: Status of Radiological Studies

| Radiological Studies | Male | Female | Total | % |
|----------------------|------------|------------|------------|------------|
| Yes | 73 | 56 | 129 | 42.3 |
| No | 49 | 52 | 101 | 33.1 |
| Unknown/Not Entered | 38 | 37 | 75 | 24.6 |
| Total | 160 | 145 | 305 | 100 |

Table 2.6: Distribution by Coagulation Profile

| Coagulation Profile | Male | Female | Total | % |
|---------------------|------------|------------|------------|------------|
| Yes | 57 | 38 | 95 | 31.1 |
| No | 44 | 41 | 85 | 27.9 |
| Unknown/Not Entered | 59 | 66 | 125 | 41.0 |
| Total | 160 | 145 | 305 | 100 |

Table 2.7: Distribution by Type of Notification

| Type of Notification | Cases | | | |
|----------------------------|------------|------------|------------|------------|
| | Male | Female | Total | % |
| Local Police Station | 59 | 54 | 113 | 47.1 |
| Regional Principality | 1 | 1 | 2 | 0.8 |
| Ministry of Social Affairs | 49 | 48 | 97 | 40.4 |
| Others | 13 | 15 | 28 | 11.7 |
| Total | 122 | 118 | 240 | 100 |

Section III: Outcome

Figure 3.1: Admission to Hospital

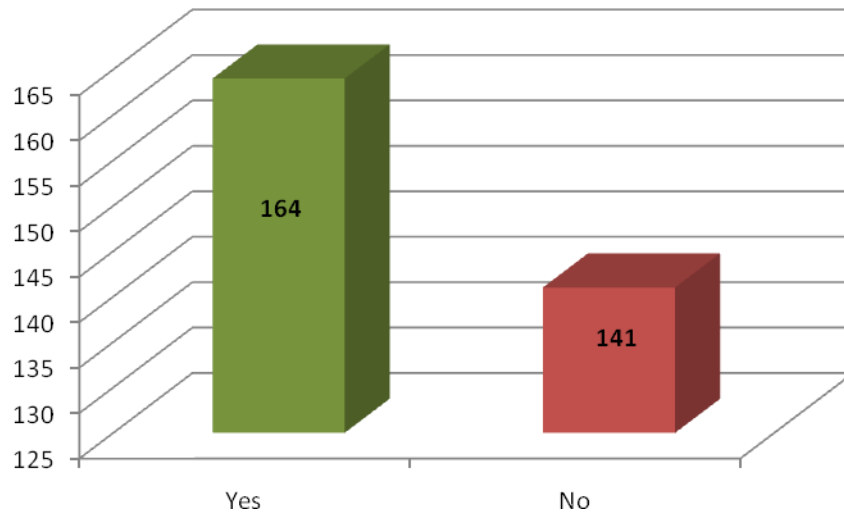


Figure 3.2: Site of Admission

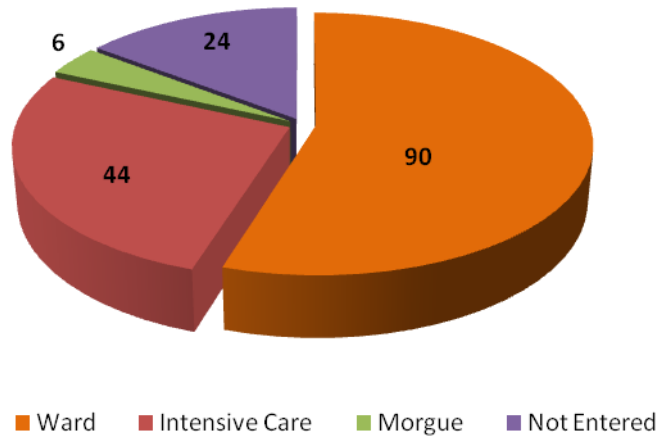


Figure 3.3: Distribution by Discharge Status

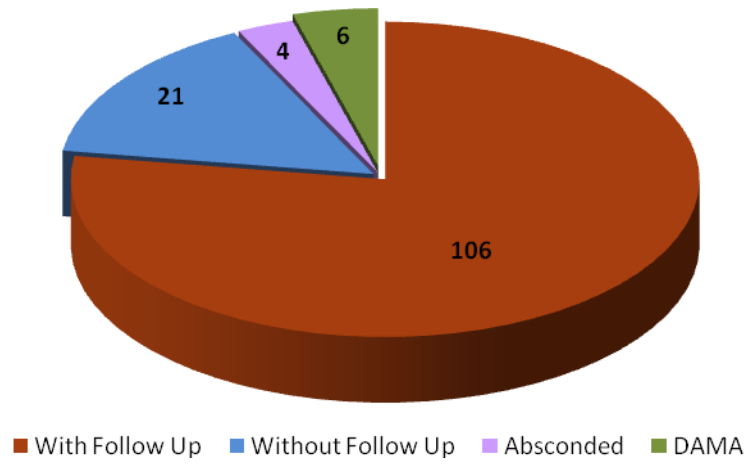
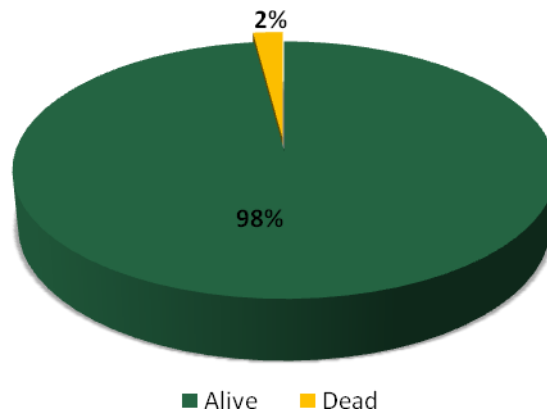


Figure 3.4: Distribution by Patient Status



Appendices

- Appendix I: Contact Information
- Appendix II: Contact Details of Child Protection Centers
- Appendix III: Case Report Web Forms
- Appendix IV: Oath of Confidentiality
- Appendix V: National Studies & Publications

Contact Information

National Family Safety Registry (NFSR) <http://www.nfspreg.org.sa>

King Faisal Specialist Hospital & Research Centre, Riyadh

Phone: +966 1 4647272 ext 31971

Fax: +966 1 442 7784

National Family Safety Program (NFSP) www.nfsp.org.sa

King Abdulaziz Medical City, Riyadh

Phone: +966 1 2520088 ext 40222, 40102

Fax: : +966 1 2520088 ext: 40103

Telephone Numbers

Contact numbers for various Child Protection Centers over the Kingdom of Saudi Arabia.

| Center Name | Center Name | Tel No |
|---|--|--------------|
| King Fahd Military Medical Complex | مستشفى القوات المسلحة مجمع الملك فهد الطبي بالظهران | 03 - 8440000 |
| Dammam hospital | وزارة الصحة مستشفى الولادة والأطفال بالدمام | 03 - 8426666 |
| Al Ahsa Hospital | وزارة الصحة مستشفى الولادة والأطفال بالأحساء | 03 - 5942500 |
| King Khalid Military City Hospital Hafar Al Batin | وزارة الصحة مستشفى الملك خالد العام بحفر الباطن | 03 - 7247777 |
| King Abdulaziz Hospital in Al Ahasa | مدينة الملك عبدالعزيز الطبية بالأحساء | 03 - 5910000 |
| Royal Commission Hospital Jubail | مستشفى الهيئة الملكية بالجبيل | 03 - 3464000 |
| Saudi Aramco Dharan Hospital | مستشفى أرامكو السعودية بالظهران | 03 - 8778413 |
| Al-Hada Armed Forces Hospital | مستشفى القوات المسلحة بالهدا | 02 - 7541610 |
| King Fahd Armed Forces Hospital Jeddah | مستشفى الملك فهد للقوات المسلحة بجدة | 02 - 6653000 |
| Al Noor Specialist Hospital | وزارة الصحة مستشفى النور التخصصي بالعاصمة المقدسة | 02 - 5665000 |
| king abdulAziz specialist Hospital taif | وزارة الصحة مستشفى الملك عبدالعزيز التخصصي بالطائف | 02 - 7310800 |
| Misaadiah hospital Jeddah | وزارة الصحة مستشفى الولادة والأطفال بالمساعدية في جدة | 02 - 6652600 |
| King Abdulaziz Medical City Jeddah | مدينة الملك عبدالعزيز الطبية بجدة | 02 - 6240000 |
| King Abdulaziz University Jeddah | مستشفى جامعة الملك عبدالعزيز بجدة | 02 - 6375555 |
| King Faisal Specialist Hospital and Research Centre - Jeddah | مستشفى الملك فيصل التخصصي بجدة | 02 - 6677777 |
| Al-Qunfudah General Hospital | مستشفى القنفذ العام | 07 - 7320206 |
| Riyadh Military Hospital | مستشفى القوات المسلحة | 01 - 4777714 |

| | | |
|---|--|--------------|
| Riyadh King Abdulaziz Medical City National Guard Health Affairs | مدينة الملك عبدالعزيز الطبية الشؤون الصحية للحرس الوطني | 01 - 2520088 |
| King Faisal Specialist Hospital and Research Centre - Riyadh | مستشفى الملك فيصل التخصصي | 01 - 4647272 |
| King Saud medical complex Riyadh | وزارة الصحة مجمع الملك سعود الطبي | 01 - 4355555 |
| Riyadh King Saud University | جامعة الملك سعود | 01 - 4672529 |
| Security Forces Hospital | مستشفى قوى الأمن | 01 - 4754444 |
| Wadi Dawasir Hospital | مستشفى وادي الدواسر العام | 01 - 7845555 |
| Armed Forces Hospital Southern Region | مستشفى القوات المسلحة بالمنطقة الجنوبية | 07 - 2500001 |
| Maternity & Children's Hospital khamis mushait | وزارة الصحة مستشفى خميس مشيط للولادة والأطفال | 07 - 2231793 |
| King Abdullah bin Abdulaziz Hospital Bishah | مستشفى الملك عبدالله بن عبد العزيز ببيشة | 07 - 6223333 |
| North West Armed Forces Hospital | مستشفى القوات المسلحة بالشمال الغربية | 04 - 4411088 |
| King Khaled Civil Hospital Tabuk | مستشفى الملك خالد المدني بتبوك | 04 - 4220100 |
| Arar Central Hospital | وزارة الصحة مستشفى عرعر المركزي | 04 - 6624004 |
| Algrayat Hospital | وزارة الصحة مستشفى القرىات العام | 04 - 6425542 |
| Madina Maternity & Children's Hospital | وزارة الصحة مستشفى النساء والولادة بالمدينة المنورة | 04 - 8499999 |
| | مستشفى الهيئة الملكية بيبنع | 04 - 3937700 |
| AL Jouf Maternity & Children's Hospital | وزارة الصحة مستشفى النساء والولادة والأطفال بالجوف | 04 - 6242224 |
| King Fahad Hospital al baha | مستشفى الملك فهد بالباحة | 07 - 7254000 |
| Najran Hospital | وزارة الصحة مستشفى الولادة والأطفال بنجران | 07 - 5294040 |
| King khaled hospital hail | وزارة الصحة مستشفى الملك خالد بحائل | 06 - 5430441 |
| Hospital Jizan | وزارة الصحة مستشفى الملك فهد المركزي بجيزان | 07 - 3250717 |
| Maternity & Children's Hospital Buraidah | وزارة الصحة مستشفى الولادة والأطفال ببريدة | 06 - 3818228 |

Case Report Web Forms

Demographic Form

| Serial Number: | |
|-------------------------|--|
| * Saudi ID Number | <input type="text"/> |
| *Institution | <input type="text"/> |
| Registry Number | <input type="text"/> |
| Registration Date | 1 / 1 / 2000 MM/DD/YYYY |
| *Patient First Name | <input type="text"/> |
| *Patient Last Name | <input type="text"/> |
| Date of Birth | 1 / 1 / 2000 MM/DD/YYYY |
| *Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| *Nationality | Saudi |
| Telephone Number (Home) | <input type="text"/> (Mobile) <input type="text"/> |
| Child Health Conditions | Chronic illness |
| Caregivers | <input type="checkbox"/> Both parents <input type="checkbox"/> One of parents <input type="checkbox"/> Other relatives <input type="checkbox"/> Other caregivers |
| | Specify <input type="text"/> |
| City/Town/Village | <input type="text"/> |
| Parents' Data | |
| Father Alive | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Father's ID | <input type="text"/> |
| Father's Employment | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Father's Disability | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Mother Alive | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Mother's ID | <input type="text"/> |
| Mother's Employment | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Mother's Disability | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |

Abuse History Form:

| | |
|--|--|
| Serial Number: | |
| ID Number: | |
| Institution | <input type="text"/> |
| Determination of allegation | <input type="checkbox"/> Proven <input type="checkbox"/> Suspected <input checked="" type="checkbox"/> Unknown |
| Referral date to the team | <input type="text" value="1"/> / <input type="text" value="1"/> / <input type="text" value="2000"/> MM/DD/YYYY |
| Final Status of Patient: | <input checked="" type="checkbox"/> Alive <input type="checkbox"/> Dead |
| | <input checked="" type="checkbox"/> Well <input type="checkbox"/> With Disability <input type="checkbox"/> Unknown |
| Nature of Abuse (you can tick more than one) | |
| <input checked="" type="checkbox"/> Physical | |
| <input type="checkbox"/> Bruise | <input type="checkbox"/> Abrasion |
| <input type="checkbox"/> Fracture | <input type="checkbox"/> Munchausen's Syndrome |
| | <input type="checkbox"/> Laceration |
| | <input checked="" type="checkbox"/> Shaken Baby Syndrome |
| | <input type="checkbox"/> Burn |
| | <input checked="" type="checkbox"/> Other |
| If Other, specify | <input type="text" value="testing other"/> |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> Known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |
| <input checked="" type="checkbox"/> Munchausen's Syndrome by Proxy | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |

| | |
|---|---|
| <input checked="" type="checkbox"/> Shaken Baby Syndrome | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> Known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |
| <input checked="" type="checkbox"/> Sexual | |
| <input type="checkbox"/> Assault <input type="checkbox"/> Exploitation | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |
| <input checked="" type="checkbox"/> Neglect | |
| <input type="checkbox"/> Medical <input type="checkbox"/> Educational <input type="checkbox"/> Nutritional <input type="checkbox"/> Emotional | |
| <input type="checkbox"/> General <input type="checkbox"/> Abandonment | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |

| | | |
|---|--|--------------------------------------|
| <input type="checkbox"/> Previous Abuse | <input type="checkbox"/> No <input type="checkbox"/> Yes | If yes, specify <input type="text"/> |
| Nature of Abuse | <input type="text"/> | |
| Documentation | | |
| Photographs | <input type="checkbox"/> No <input type="checkbox"/> Yes | |
| STDs swabs for cultures | <input type="checkbox"/> No <input type="checkbox"/> Yes | |
| | If yes, specify <input type="text"/> | |
| Diagnostic imaging | <input type="checkbox"/> Normal <input type="checkbox"/> Not Done <input type="checkbox"/> Abnormal If Abnormal, specify <input type="text"/> <input type="button" value="Add/View image"/> | |
| Diagnostic Lab Investigation | <input type="checkbox"/> Normal <input type="checkbox"/> Not Done <input type="checkbox"/> Abnormal If Abnormal, specify <input type="text"/> | |
| Risk Factors | | |
| Risk Factors | <input type="checkbox"/> Divorce parent <input type="checkbox"/> Drug abuse <input type="checkbox"/> Young mother/parent <input type="checkbox"/> Unemployment <input type="checkbox"/> Chronic illness/Disability of child <input type="checkbox"/> Large family <input type="checkbox"/> Chronic illness/Disability of parent <input type="checkbox"/> Other If Other specify <input type="text"/> | |
| Disposition | | |
| <input type="checkbox"/> Admission | <input type="checkbox"/> Ward <input type="checkbox"/> Intensive Care <input type="checkbox"/> Morgue | |
| <input type="checkbox"/> Discharge | <input type="checkbox"/> With follow up <input type="checkbox"/> Without follow up <input type="checkbox"/> Absconded <input type="checkbox"/> DAMA | |
| Notification | | |

| | | | | | | |
|---|--|---|--------------------------------|-----|------|------------|
| <input type="checkbox"/> Local Police Station | <input type="checkbox"/> Regional Principality | <input type="checkbox"/> Ministry of Social Affairs | <input type="checkbox"/> Other | | | |
| Region | Riyadh | | | | | |
| Team leader | | | | | | |
| Investigation Close Date | 1 | / | 1 | / | 2000 | MM/DD/YYYY |
| Reporter | | | | | | |
| Relation To Child | Law Enforcement/Legal | Name | | Add | | |
| No Reporter | | | | | | |

Follow up Form:

| | |
|---|--|
| Serial Number: | |
| ID Number: | |
| Institution | <input type="text"/> |
| Determination of allegation | <input type="checkbox"/> Proven <input type="checkbox"/> Suspected <input checked="" type="checkbox"/> Unknown |
| Referral date to the team | <input type="text" value="1"/> / <input type="text" value="1"/> / <input type="text" value="2000"/> MM/DD/YYYY |
| Final Status of Patient: | <input checked="" type="checkbox"/> Alive <input type="checkbox"/> Dead |
| | <input checked="" type="checkbox"/> Well <input type="checkbox"/> With Disability <input type="checkbox"/> Unknown |
| Nature of Abuse (you can tick more than one) | |
| <input type="checkbox"/> Physical | |
| <input type="checkbox"/> Bruise | <input type="checkbox"/> Abrasion |
| <input type="checkbox"/> Fracture | <input type="checkbox"/> Munchausen's Syndrome |
| | <input type="checkbox"/> Laceration |
| | <input type="checkbox"/> Shaken Baby Syndrome |
| | <input type="checkbox"/> Burn |
| | <input type="checkbox"/> Other |
| If Other, specify | <input type="text" value="testing other"/> |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> Known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |
| <input type="checkbox"/> Munchausen's Syndrome by Proxy | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |

| | |
|---|---|
| <input type="checkbox"/> Shaken Baby Syndrome | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> Known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |
| <input type="checkbox"/> Sexual | |
| <input type="checkbox"/> Assault <input type="checkbox"/> Exploitation | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |
| <input type="checkbox"/> Neglect | |
| <input type="checkbox"/> Medical <input type="checkbox"/> Educational <input type="checkbox"/> Nutritional <input type="checkbox"/> Emotional | |
| <input type="checkbox"/> General <input type="checkbox"/> Abandonment | |
| Alleged Perpetrator (only if disclosed by child, guardian or reporter) | <input type="checkbox"/> Unknown <input type="checkbox"/> known |
| | Name <input type="text"/> |
| | Relation to the child <input type="text" value="Select"/> |
| Alleged perpetrator has access to the child | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| Determination of allegation | <input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed |

| | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Previous Abuse | <input type="checkbox"/> No <input type="checkbox"/> Yes | If yes, specify <input type="text"/> |
| Nature of Abuse | <input type="text"/> | |
| Documentation | | |
| Photographs | <input type="checkbox"/> No <input type="checkbox"/> Yes | |
| STDs swabs for cultures | <input type="checkbox"/> No <input type="checkbox"/> Yes | |
| | If yes, specify <input type="text"/> | |
| Diagnostic imaging | <input type="checkbox"/> Normal <input type="checkbox"/> Not Done <input type="checkbox"/> Abnormal If Abnormal, specify <input type="text"/> | |
| | <input type="button" value="Add/View image"/> | |
| Diagnostic Lab Investigation | <input type="checkbox"/> Normal <input type="checkbox"/> Not Done <input type="checkbox"/> Abnormal If Abnormal, specify <input type="text"/> | |
| Risk Factors | | |
| Risk Factors | <input type="checkbox"/> Divorce parent | <input type="checkbox"/> Drug abuse |
| | <input type="checkbox"/> Young mother/parent | <input type="checkbox"/> Unemployment |
| | <input type="checkbox"/> Chronic illness/Disability of child | <input type="checkbox"/> Large family |
| | <input type="checkbox"/> Chronic illness/Disability of parent | <input type="checkbox"/> Other |
| | If Other specify <input type="text"/> | |
| Disposition | | |
| <input type="checkbox"/> Admission | <input type="checkbox"/> Ward <input type="checkbox"/> Intensive Care <input type="checkbox"/> Morgue | |
| <input type="checkbox"/> Discharge | <input type="checkbox"/> With follow up <input type="checkbox"/> Without follow up <input type="checkbox"/> Absconded <input type="checkbox"/> DAMA | |
| Notification | | |

| | | | | | | |
|---|--|---|--------------------------------|-----|------|------------|
| <input type="checkbox"/> Local Police Station | <input type="checkbox"/> Regional Principality | <input type="checkbox"/> Ministry of Social Affairs | <input type="checkbox"/> Other | | | |
| Region | Riyadh | | | | | |
| Team leader | | | | | | |
| Investigation Close Date | 1 | / | 1 | / | 2000 | MM/DD/YYYY |
| Reporter | | | | | | |
| Relation To Child | Law Enforcement/Legal | Name | | Add | | |
| No Reporter | | | | | | |

Oath of Confidentiality

National Family Safety Program

I _____ do solemnly swear to protect and uphold the confidentiality of all information that may come to my knowledge that is designated as 'confidential information' for which I may handle or process in the normal course of my duties. I swear to exercise reasonable care in the handling and processing of all such designated data and further that I will not reveal or otherwise divulge information from such data obtained. I understand that proven violation of this oath may result in my dismissal from the employment.

(Member Name)
ID Badge #

Dated: _____

(Regional Registrar)

Dated: _____

National Studies & Publications

- 1) Al Mugeiren, M., & Ganelin, R. S. (1990). A suspected case of Munchusen syndrome by proxy in a Saudi child. *Annals of Saudi Medicine*, 10, 662–665.
- 2) Al-Eissa, Y. (1991). The battered child syndrome: Does it exist in Saudi Arabia? *Saudi Medical Journal*, 12, 129–133.
- 3) Al Jumaah, S., Al Dowaiish, A., Tufenkeji, H., & Frayha, H. H. (1993). Munchusen syndrome by proxy in a Saudi child. *Annals of Saudi Medicine*, 13, 469–471.
- 4) Kattan H. Child abuse in Saudi Arabia: Report of ten cases. *Ann Saudi Med*. 1994 Mar; 14(2):129-33.
- 5) Kattan H, Sakati N, Abduljabbar J, Al-Eisa A, Nou-Nou L. Subcutaneous fat necrosis as an unusual presentation of child abuse. *Ann Saudi Med*. 1995 Mar; 15(2):162-4.
- 6) Al-Shlash S, Warnasuriya ND, Al Shareef Z, Filobbos P, Sarkans E, Al Dusari S. Eight year's experience of a regional burns unit in Saudi Arabia: clinical and epidemiological aspects. *Burns*. 1996 Aug; 22(5):376-80.
- 7) Kattan H. Child abuse and neglect: perspectives from King Faisal Specialist Hospital and Research Center. *Ann Saudi Med*. 1998 Mar-Apr; 18(2):107-8.
- 8) Al Ayed IH, Qureshi MI, Al Jarallah A, Al Saad S. The spectrum of child abuse presenting to a university hospital in Riyadh. *Ann Saudi Med*. 1998 Mar-Apr; 18(2):125-31.
- 9) Elkerdany AA, Al-Eid WM, Buhaliqa AA, Al-Momani AA. Fatal physical child abuse in two children of a family. *Ann Saudi Med*. 1999 Mar- Apr; 19(2):120-4.
- 10) Roy D, Al Saleem BM, Al Ibrahim A, Al Hazmi I. Rhabdomyolysis and acute renal failure in a case of child abuse. *Ann Saudi Med*. 1999 May-Jun; 19(3):248-50.

- 11) Al-Odaidan N, Amu OD, Fahmy M, Al-Khalifa H, Ghazal SS. An unusual case of impacted esophageal foreign body. *Saudi Med J.* 2000 Feb; 21(2):202-3.
- 12) Baeesa SS, Jan MM. The shaken baby syndrome. *Saudi Med J.* 2000 Sep; 21(9):815-20.
- 13) Karthikeyan G, Mohanty SK, Fouzi A. Child abuse: report of three cases from Khamis Mushayt. *Ann Saudi Med.* 2000 Sep-Nov; 20(5-6):430-2.
- 14) Al Eissa YA. Child abuse and neglect in Saudi Arabia: What are we doing and where do we stand? *Ann Saudi Med* 1998 Mar-Apr; 18(2):105-6.
- 15) Al Eissa MA, Almuneef MA. Child Abuse and Neglect in Saudi Arabia: Journey of recognition to implementation of national prevention strategies. *Child Abuse and Neglect* 2010 Jan; 34(1):28-33.
- 16) AlEissa M, Fluke J, Gerbaka B, et al. A commentary on national Child maltreatment surveillance systems: Examples of progress. *Child Abuse and Neglect* 2009 Nov; 33(1):809-814.
- 17) Al-Owain M, Al-Zaidan H, Al-Hashem A, Kattan H, Al-Dowaish A. Munchausen syndrome by proxy mimicking as Gaucher disease. *Eur J Pediatr.* 2010 Aug; 169(8):1029-32.
- 18) Raboei EH. Surgical aspects of child sexual abuse. *Eur J of Pediatr Surg.* 2009 Feb; 19(1):10-3.
- 19) Al-Quaiz AJ, Raheel HM. Correlates of sexual violence among adolescent females in Riyadh, Saudi Arabia. *Saudi Med J.* 2009 Jun;30(6):829-34.
- 20) AlJasser M, Al-Khenaizan S. Cutaneous mimickers of child abuse: a primer for pediatricians. *Eur J Pediatr.* 2008 Nov; 167(11):1221-30.
- 21) Al-Haidar FA. Munchausen syndrome by proxy and child's rights. *Saudi Med J.* 2008 Mar; 29(3):452-4.
- 22) Al-Mahroos FT. Child abuse and neglect in the Arab Peninsula. *Saudi Med J.* 2007 Feb; 28(2):241-8.
- 23) Al-Khenaizan S, Almuneef M, Kentab O. Lichen sclerosis mistaken for child sexual abuse. *Int J Dermatol.* 2005 Apr; 44(4):317-20.



Protecting our present... Securing our future...