

G16 The Incorporation of Both Community and Forensic Dentistry in the Child Abuse and Neglect Clinic in Turin, Italy

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Learning Overview: After attending this presentation, attendees will possess a deeper understanding of how a dentist with experience in pediatric dentistry and a knowledge of forensic odontology can become a valuable resource in child abuse and dental neglect diagnoses and the promotion of oral health.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by highlighting the added value offered by including odontologists in the multidisciplinary teams involved in investigating child abuse and in the recognition and reporting of neglect, helping to close the circle relating to child protection.

In 2002, Dr. Fulvia Negro, a pediatric physician at the "Regina Margherita" pediatric hospital in Turin, Italy, created a specific hospital clinic called "Bambi." This clinic was initially composed of pediatricians, psychologists, and social workers with the purpose of assessing and monitoring children coming from the emergency unit with a diagnosis of physical or sexual abuse. In 2013, medical examiners with a forensic background were incorporated into this unit to enhance the medicolegal evaluation and also in consideration of the judicial aspects related to the involvement with the Juvenile Court in Turin.

In 2019, a forensic odontologist with experience in community dentistry and humanitarian work was also incorporated into the "Bambi" clinic, thereby creating a full multidisciplinary approach, and introduced oral health promotion and *pro bono* dental treatments.

A specific dental form was developed to record a dental history as well as tooth and soft tissue conditions, together with any signs of physical abuse on the head and neck. Thanks to the presence of a dentist, it was possible to assess the parent's or guardian's knowledge of oral hygiene and identify any eating habits that could be harmful to the correct growth of the child. This also allowed for a dental examination to assess any potential dental neglect, which was followed by specific prescription and treatment plans, when appropriate.

Since 2002, more than 2,100 children have been seen in this unit, with physical abuse as the most distributed finding. The incorporation of a forensic odontologist was generally accepted by all the families. This allowed for a greater recognition of dental neglect cases and also enhanced the forensic evidence collection of physical signs of abuse on the mouth, face, and neck.

A specific oral health promotion program was also implemented, as the odontologist involved acted as a volunteer in community dentistry services with other volunteers.

A dentist with a forensic background and humanitarian pediatric dentistry experience can represent an additional resource in the recognition, assessment, and collection of forensic evidence in child abuse and child neglect cases. This also offers the contextual benefit of safeguarding children's oral health and well being.

Child Abuse, Forensic Odontology, Community Dentistry

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