

**TITLE 26 – FAMILY  
CHAPTER 5 - CHILD ABUSE AND NEGLECT**



Republic of the Marshall Islands  
*Jepilpilin Ke Ejukaan*

**CHILD ABUSE AND NEGLECT ACT**

**Arrangement of Sections**

Section	Page
§501. Short Title .....	3
§502. Interpretation .....	3
§503. Reports .....	5
§504. Training.....	6
§505. Any person may report .....	6
§506. Confidentiality.....	6
§507. Central Registry.....	6
§508. Immunity from Liability.....	7
§509. Admissibility of evidence.....	7
§510. Education.....	7
§511. Regulations.....	8
§512. Violations.....	8



**TITLE 26 – FAMILY**  
**CHAPTER 5 - CHILD ABUSE AND NEGLECT**



Republic of the Marshall Islands  
*Jepilpilin Ke Ejukaan*

**CHILD ABUSE AND NEGLECT ACT**

**AN ACT** to provide for the prevention of child abuse and neglect.

*Commencement:*

*October 1, 1991*

*Source:*

*P.L. 1991-130*

**§501. Short Title.**

This Chapter may be cited as the Child Abuse and Neglect Act.

**§502. Interpretation.**

As used in this Chapter, unless the context specifically indicates otherwise:

- (1) **“Child”** means a person under eighteen (18) years of age.
- (2) **“Child abuse or neglect”** means the acts or omissions of any person that have resulted in the physical or psychological health or welfare of a child to be harmed, or to be subject to any reasonably foreseeable, substantial risk of being harmed. The acts or omissions are indicated for the purposes of reports by circumstances that include but are not limited to the following:
  - (a) when the child exhibits evidence of:
    - (i) substantial or multiple skin bruising or any other internal bleeding;
    - (ii) any injury to skin causing substantial bleeding;
    - (iii) malnutrition;
    - (iv) failure to thrive;

- (v) burn or bums;
  - (vi) poisoning;
  - (vii) fracture of any bone;
  - (viii) sub-dural hematoma;
  - (ix) soft tissue swelling;
  - (x) extreme pain;
  - (xi) extreme mental distress;
  - (xii) gross degradation;
  - (xiii) death; and such injury is not justifiably explained, or when the history given concerning such condition or death is at variance with the degree or type of such condition or death, or circumstances indicate that such condition or death may not be the product of accidental occurrence; or
- (b) when the child has been the victim of sexual contact or conduct, including, but not limited to, sex crimes as provided in Part XXV of the Criminal Code (31 MIRC 1) or other forms of sexual exploitation;
  - (c) where there exists injury to the psychological capacity of the child as is evidenced by an observable and substantial impairment in the child's ability to function: or
  - (d) when the child is not provided in a timely manner with adequate food, clothing, shelter, psychological care, physical care, medical care, or supervision; or
  - (e) when the child is provided with narcotic drugs, as that term is defined in the *Narcotic Drugs (Prohibition and Control) Act 1987* (7 MIRC 9).
- (3) **"Report"** means the oral or written statement concerning the facts and circumstances which cause a person to have reason to believe that child abuse or neglect has occurred or that there exists a substantial risk that child abuse or neglect may occur in the reasonably foreseeable future.
  - (4) **"Secretary"** means the Secretary of Health. [P.L. 1991-130, §2(57).][the subparagraphs under (2)(a) above re-numbered to conform to code-format [Rev2003]

**§503. Reports.**

- (1) Notwithstanding any other law concerning confidentiality to the contrary, the following persons who, in their professional or official capacity, have reason to believe that child abuse or neglect has occurred or that there exists a substantial risk that child abuse or neglect may occur in the reasonably foreseeable future, shall immediately report the matter orally to the Chief of Police or to the Secretary of Health:
  - (a) any licensed or registered professional of the healing arts and any health related occupation who examines, attends, treats, or provides other professional or specialized services, including but not limited to physicians, psychologists, nurses, dentists and other health-related professionals;
  - (b) employees or officers of any public or private school;
  - (c) employees or officers of any public or private agency or institution, or other individuals providing social, medical, hospital or mental health services;
  - (d) employees or officers of any law enforcement agency, including but not limited to the courts, police departments, correctional institutions, and parole or probation officers;
  - (e) individual providers of child care, or employees or officers of any child care or similar facility;
  - (f) medical examiners or coroners; and
  - (g) employees of any public or private agency providing recreational or sports activities.
- (2) Whenever a person designated in Subsection (1) of this Section is a member of the staff of any public or private school, agency, or institution, that staff member shall immediately notify the person in charge, or a designated delegate, who shall immediately report, or cause reports to be made, in accordance with this Chapter.
- (3) The initial oral report shall be followed as soon thereafter as possible by a report in writing, which shall contain the name and address of the child and child's parents or other persons responsible for the child's care, if known, the child's age, the nature and extent of the child's injuries, any other information that the reporter believes might

be helpful or relevant to the investigation of the child abuse or neglect.

- (4) Any person subject to Subsection (1) of this Section shall, upon demand of the Chief of Police or the Secretary of Health, provide all information related to the alleged incident of child abuse or neglect, including, but not limited to, medical records and medical reports, which was not included in the written report submitted pursuant to Subsection (3) of this Section. [P.L. 1991-130, §2(58).]

**§504. Training.**

To improve the identification of child abuse and neglect, the Ministry of Health shall offer periodic orientation and training to those responsible for making child abuse and neglect reports pursuant to Section 503(1) of this Chapter. [P.L. 1991-130, §2(59).]

**§505. Any person may report.**

Any person, not otherwise required to report pursuant to Section 503 of this Chapter, who becomes aware of facts or circumstances which cause that person to have reason to believe that child abuse or neglect has occurred or that there exists a substantial risk that child abuse or neglect may occur in the reasonably foreseeable future, may immediately report the matter orally to the Chief of Police or to the Secretary of Health. [P.L. 1991-130, §2(60).]

**§506. Confidentiality.**

All reports to the Chief of Police or to the Secretary of Health concerning child abuse or neglect made pursuant to this Chapter, as well as all records of such reports, are confidential. Every reasonable good faith effort shall be made by the Chief of Police and the Secretary of Health, and their respective departments, to maintain the confidentiality of such reports. [P.L. 1991-130, §2(61).]

**§507. Central Registry.**

The Secretary of Health shall maintain a central registry of reported child abuse or neglect cases and may expunge such reports as it deems appropriate. [P.L. 1991-130, §2(62).]

**§508. Immunity from Liability.**

Anyone participating in good faith in the making of a report pursuant to this Chapter shall have immunity from any liability, whether civil or criminal, that might be otherwise incurred or imposed by or as a result of the making of such report. Any such participant shall have the same immunity with respect to participation in any judicial proceeding resulting from such report. [P.L. 1991-130, §2(63).]

**§509. Admissibility of evidence.**

Neither the physician-patient privilege, the psychotherapist-patient privilege, nor the spousal privilege shall be ground for excluding evidence in any judicial proceeding resulting from a report of child abuse or neglect pursuant to this Chapter. [P.L. 1991-130, §2(64).]

**§510. Education.**

- (1) The Ministry of Health, in cooperation with the Ministries of Education and Social Services, shall develop public education programs to parents and others responsible for child care aimed at preventing child abuse and neglect.
- (2) The programs developed in accordance with Subsection (1) of this Section shall devote a substantial portion of time to the prevention and control of malnutrition.
- (3) Persons who are found to have committed child abuse or neglect shall, in addition to any other provision or penalty, be required to attend the public education programs developed in accordance with Subsection of this Section, and shall receive mandatory counseling and other treatment, including treatment for alcohol or drug abuse as necessary and appropriate, to prevent further abuse or neglect. Where the person who is found to have committed child abuse or neglect is the parent of an abused or neglected child, that parent shall receive counseling services, and the other parent may also receive counseling, for the purpose of resolving family conflicts in a constructive manner and preventing future child abuse or neglect. [P.L. 1991-130, §2(65).]

**§511. Regulations.**

The Minister of Health, or the Minister's designee, may adopt regulations as necessary:

- (a) to further define or clarify the specific forms of child abuse or neglect enumerated in Section 502 for use in implementing this Chapter, provided that such regulations adopted shall be limited to such further or clarifying definitions:
- (b) to provide for the confidentiality of reports and records and for the authorized disclosure of reports and records; and
- (c) to provide for the efficient implementation of this Chapter. [P.L. 1991-130, §2(66).]

**§512. Violations.**

- (1) Any person subject to Section 503 of this Chapter who knowingly fails to provide information as required by that Section, or who knowingly prevents another person from reporting, shall, upon conviction, be liable to a fine not exceeding \$500.
- (2) Any person who intentionally makes an unauthorized disclosure of a confidential report or record made to the Chief of Police or to the Secretary of Health in violation of this Chapter or regulations adopted under this Chapter shall, upon conviction, be liable to a fine not exceeding, \$500. [P.L. 1991-130, §2(67).][subsection (3) deleted by P.L.2011-59].