



Implications and Prevention of Child maltreatment

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Introduction

- Child abuse and maltreatment creates profoundly adverse consequences during the early stages of development, can be experienced in many forms i.e. neglect, verbal, physical and sexual,
- All forms equally have profound and devastating influences on the child's physical and mental health.
- While child maltreatment and abuse is tragic , it offers mental health professions insight and an opportunity to better integrate health and human services to support families and further protect children.

Barth, R. P., Putnam-Hornstein, E., Shaw, T. V., & Dickinson, N. S. (2016). Safe children: reducing severe and fatal maltreatment. *Grand challenges for social work, 2016*, e17-e17.



Background

- Child abuse prevention efforts have grown over the past 30 years.
- This expansion includes new public policies and expanded services such as parent education classes, support groups, home visitation programs and safety education for children.
- Research documenting the number of child maltreatment cases observed by professions suggests prevention efforts are having an impact.
- However, protecting children is challenging..

Scope of the problem

- While prevention practices and agencies strive to protect children by implementing policy programs and addressing risk factors associated with child abuse, challenges continue to persist.
- Agencies such as the US Department of Health and Human Services (2014) reported “the number and rate of victims of maltreatment have fluctuated during the past 5 years, comparing the national estimate of victims from 2010 (698,000) to 2014 (702,000) show an increase of less than 1 percent.
- Three-quarters (75.0%) of victims were neglected, 17.0 percent were physically abused, and 8.3 percent were sexually abused. For 2014, a nationally estimated 1,580 children died of abuse and neglect at a rate of 2.13 per 100,000 children in the national population”
- The literature has indicated progress has plateaued in the U.S., high rates of child fatalities and near fatalities continue to persist. For instance, research indicated by the U.S Department of Health and Human Services estimated that 1,640 children died from abuse and neglect in 2012

Cited from : Child Welfare Information Gateway, Children's Bureau/ACYF, & United States of America. (2011). Child Maltreatment Prevention: Past, Present, and Future. US Department of Health and Human Services, A. O. C., & US Department of Health and Human Services. (2000). Child maltreatment 1998: Reports from the states to the national child abuse and neglect data system. Washington, DC: US Government Printing Office, 1-3.



Scope of the problem continued / Findings and stats.

- The number of child fatalities reported by states in the Child File and Agency File has fluctuated for the past 5 years. Of the children who died, 72.3 percent suffered neglect and 41.3 percent suffered physical abuse either exclusively or in combination with another maltreatment type. (National Incidence Studies of Child Abuse and Neglect, 2014).

There has also been significant drops in sexual abuse, physical abuse, and emotional abuse between 1993 and 2006.

- Between 1990 and 2009 the number of physical abuse dropped 55% and sexual abuse declined 61%(Child Welfare Information Gateway, Children's Bureau/ACYF,2011)

- While these are promising trends, child maltreatment continues to be a significant threat to healthy growth and development.



Risk factors associated with child abuse and maltreatment

- Children living in disadvantaged communities, extreme poverty, caretakers who are unwilling or unable to care for their child due to mental illness, substance abuse or domestic violence.
- Child abuse and maltreatment associated with dangerous and inadequate housing, domestic violence in the home, depressed single mothers, economic struggles and sanctions due to Welfare.
- Child maltreatment has been linked to adult stress and can have adverse impacts on physical health over 30 years after the maltreatment.



Consequences of child abuse and maltreatment

- Violent parenting creates toxic stress – resulting in adverse changes to brain, increase cortisol levels, and dysfunctions in behavioral and emotional health.
- childhood trauma is a risk factor for borderline personality disorder, depression, anxiety, delinquent behavior, substance abuse, poor school performance, smoking.
- Children who have experienced abuse are 9 times more likely to become involved in criminal activities.
- According to Child Welfare Information Gateway (2011) the lifetime cost of child maltreatment and related fatalities in 1 year totals \$124 billion dollars, indirect costs are also associated with increased use of the healthcare system, juvenile and adult criminal activity, substance abuse, mental illness and domestic violence should also be considered.

Adapted from: American Humane Association, National Center on Child Abuse, Neglect, National Study on Child Neglect, Abuse Reporting (US), Denver Research Institute. Social Systems Research, & Evaluation Division. (1980). *National analysis of official child neglect and abuse reporting*. US Dept. of Health and Human Services, Office of Human Development Services, Administration for Children, Youth, and Families, Children's Bureau, National Center on Child Abuse and Neglect



Implications

- Challenge to protect children persists due to poor practice, policy, and research. Factors such as failure to properly assess the well being of children in the home and to recognize danger, failure to complete safety and risk assessments correctly, failure to address and respond to parents mental and health needs.
- Mothers whose parental rights to another child which has been previously terminated
- Policies that fail to follow up with mothers who demonstrate dangerous parenting, overload of cases.
- Not all families are equally served by these intervention strategies, identifying, training, and retaining competent service providers is struggle.



Policy Recommendation

Child maltreatment and abuse can be greatly reduced by policy makers and mental health professionals improving their understanding of ways to reduce harms.

Strengthening and improving child safety programs which provide proper preparation for new parents and for the parents of developing toddlers (ex improved access to PURPLE Crying Style programs that aim to prevent violence via baby shaking).

Improving and implementing parenting classes that are assessable which focus on knowledge of common feeding difficulties,, strategies for soothing difficult children must become more universally known (Hurley et al.,2003).

Reducing severe and fatal child maltreatment requires coordination of vital records, child welfare data. This in turn would help trigger services for parents of newborns if the parents have prior histories of child welfare involvement so early interventions to strengthen families and protect children can be effectively targeted.



Policy recommendation

- Integrating information that is now largely uncoordinated with child welfare services providers and planners could improve proper responses to reports of child maltreatment (ex, police reports, sub abuse treatment programs, hospital emergency departments.
- Implement birth match programs in order to identify and reach out to very high risk families within days of new birth.
- Re orient home visiting programs so they are more effective and target families who are at most risk.
- Many state and local health dept. do not include child prevention services as a priority, not usually mentioned
- All states should invest in singnage, marketing, and social media communications to promote awareness of safe haven opportunities



Policy Recommendation / Conclusion Continued.

- State and local policies should aim to increase facilitating information sharing about child abuse risk, giving priority and increasing funding to these programs which identify and educate families on risk factors, and aid and assist parents in acquire positive parent child interaction skills.
- Increase access and awareness of parent education and support groups which can provide psychoeducation surrounding the benefits and impacts of healthy parent child interactions.
- Programs may include : weekly discussions 8 to 14 weeks with parents around topics such as discipline, cognitive develop and parent child communication.
- Group based sessions parents and children discuss issues and share feelings
- Parents can model parenting skills thy are learning under the guidance and supervision of mental health professional.
- Providing parents opportunities to demonstrate and practice these skills while observed by service provider.



Conclusion

- Implementation and improvement of these services and resources can reduce health care costs , and decrease the frequency of arrest and incarceration of adults who might not have committed such violence if they had appropriate supports and access to other options.
- Increasing public awareness of child maltreatment and its long term consequences in addition to readily access to parenting programs would also decrease the traumatic experience and likelihood of children being removed from the home and placed in foster care.

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