

Putting Prevention into Practice

An Evidence-Based Approach

Primary Care Interventions to Prevent Child Maltreatment

TINA FAN, MD, MPH, *Medical Officer, U.S. Preventive Services Task Force Program, Agency for Healthcare Research and Quality*

ANH PHAM, MD, *General Preventive Medicine Residency, Uniformed Services University of the Health Sciences*

► See related U.S. Preventive Services Task Force Recommendation Statement at <http://www.aafp.org/afp/2014/0815/od1.html>.

CME This clinical content conforms to AAFP criteria for continuing medical education (CME). See CME Quiz Questions on page 226.

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The case study and answers to the following questions are based on the recommendations of the U.S. Preventive Services Task Force (USPSTF), an independent panel of experts in primary care and prevention that systematically reviews the evidence of effectiveness and develops recommendations for clinical preventive services. More detailed information on this subject is available in the USPSTF Recommendation Statement and the evidence report on the USPSTF website (<http://www.uspreventiveservicestaskforce.org>). The practice recommendations in this activity are available at <http://www.uspreventiveservicestaskforce.org/uspstf/uspstfamv.htm>.

A collection of Putting Prevention into Practice quizzes published in *AFP* is available at <http://www.aafp.org/afp/ppip>.

Case Study

A young couple comes to your clinic with their adopted four-year-old daughter for her annual well-child visit. On physical examination, the patient appears to be well developed and well nourished, and measures in the 75th percentile for her height and weight.

Case Study Questions

1. According to the U.S. Preventive Services Task Force (USPSTF), which of the following risk factors are associated with child maltreatment?

- A. Older parents.
- B. Nonbiologic parents.
- C. Parental stress and distress.
- D. Family dysfunction or violence.

2. Which one of the following statements about child maltreatment is correct?

- A. Most child maltreatment is in the form of neglect.
- B. Most child maltreatment is in the form of sexual abuse.
- C. Most child maltreatment is in the form of physical abuse.
- D. Most deaths from child maltreatment occur in children older than four years.
- E. The USPSTF recommends interventions to prevent child maltreatment for all children 0 to 18 years of age.

3. Based on the USPSTF's findings, which one of the following statements is most appropriate for this patient and her family?

- A. Home visitation is required because the child is adopted and at high risk of maltreatment.
- B. Primary care interventions to prevent child maltreatment should be provided because the benefits exceed the harms in children who do not have signs or symptoms of maltreatment.
- C. Primary care interventions to prevent child maltreatment should not be provided because the harms exceed the benefits in children who do not have signs or symptoms of maltreatment.
- D. There is insufficient evidence to recommend specific preventive interventions in a clinical setting to prevent child maltreatment in children who do not have signs or symptoms of maltreatment.

Answers appear on the following page.

Answers

1. The correct answers are B, C, and D. The USPSTF found the following risk factors for child maltreatment in its review of the evidence: parental lack of understanding of children's needs, child development, and parenting; parental history of maltreatment in the family of origin; substance abuse in the family; young, single, or nonbiologic parents; parental thoughts and emotions that support maltreatment behaviors; and parental stress and distress, including depression or other mental health disorders. Family risk factors include social isolation, poverty and other socioeconomic disadvantages, intimate partner violence, and poor parent-child relationships and negative interactions. Child-specific risk factors include age younger than four years; having physical or intellectual disabilities; and being born at medical risk, such as being preterm, born with addiction, or hospitalized in the neonatal intensive care unit.

2. The correct answer is A. The Centers for Disease Control and Prevention defines child maltreatment as any act or series of acts of commission or omission by a parent or other caregiver that result in harm, potential for harm, or threat of harm to a child. Child abuse (acts of commission) includes physical, sexual, and psychological abuse. Child neglect (acts of omission) includes the failure to provide for a child's basic physical, emotional, health care, or educational needs or to protect a child from harm or potential harm. Approximately 78% of child maltreatment is in the form of neglect, 18% in the form of physical abuse, and 9% in the form of sexual

abuse; 80% of deaths occur in children younger than four years. The USPSTF found insufficient evidence to recommend specific preventive interventions in a clinical setting.

3. The correct answer is D. According to the USPSTF, there is insufficient evidence to assess the balance of benefits and harms of primary care interventions to prevent child maltreatment in children (newborn to 18 years of age) who do not have signs or symptoms of maltreatment. Although the evidence is insufficient to recommend specific preventive interventions, most programs for prevention of child maltreatment that were reviewed focused on home visitation. Home visitation programs, generally considered to be a community-based service, usually comprise a combination of services provided by a nurse or paraprofessional in a family's home on a regularly scheduled basis. All states have home visiting programs to support families with young children, but the services provided in these programs and the eligibility criteria vary by state. All states and the District of Columbia have laws mandating that all professionals who have contact with children, including all health care workers, report suspected maltreatment to child protective services.

SOURCES

U.S. Preventive Services Task Force. Primary care interventions to prevent child maltreatment: U.S. Preventive Services Task Force recommendation statement. *Ann Intern Med.* 2013;159(4):289-295.

Selph SS, Bougatsos C, Blazina I, Nelson HD. Behavioral interventions and counseling to prevent child abuse and neglect: a systematic review to update the U.S. Preventive Services Task Force recommendation. *Ann Intern Med.* 2013;158(3):179-190. ■