



Executive Summary

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Preventing child maltreatment

All children need safety, stability and nurturing in order to flourish. Yet many children experience maltreatment, including neglect, emotional abuse, exposure to intimate partner violence, physical abuse or sexual abuse. Knowing what puts children at risk is crucial in understanding how to prevent these experiences. For example, risk increases when families experience

socio-economic disadvantage, such as limited parental education and limited family social supports. In addition to addressing these social determinants, it is important to consider providing prevention programs.

We conducted a systematic review of randomized controlled trials evaluating child maltreatment prevention programs. We found two that were successful: Child FIRST and Nurse-Family Partnership. Both programs provided home visits to families who were struggling: 12 for Child FIRST and up to 50 for Nurse-Family Partnership. Previous Nurse-Family Partnership evaluations found many added benefits. For example, children receiving this program also had fewer behaviour problems, and mothers' life circumstances were improved.

Implications for practice and policy

- **Recognize that child maltreatment can be prevented.** Knowing there are programs that can help children by helping parents should inspire a sense of hope.
- **Invest in prevention.** Awareness of effective prevention programs should also inspire new practice and policy commitments. This means offering and funding not only “trauma informed” screening or treatment programs, or protection services after child maltreatment has occurred, but also *preventive* services early on, so fewer children experience maltreatment.
- **Address underlying socio-economic disadvantage.** Although child maltreatment can occur in any population, research suggests that socio-economic disadvantage is a risk factor. Thus addressing socio-economic disadvantage could greatly help children — by reducing the social disparities some families suffer. The goal is to help all children by ensuring that everyone has a fairer start in life.
- **Collaborate across disciplines and sectors to help children.** The two successful programs were delivered by different types of practitioners: mental health practitioners for Child FIRST, and nurses for Nurse-Family Partnership. The success of these programs suggests that collaboration is possible across the mental health, public health and child protection sectors. These findings also indicate that children's mental health practitioners can play a role in preventing maltreatment, for example, by providing effective programs or by collaborating and supporting others to provide effective programs. As well, these successes suggest that collaboration among those with complementary roles is an effective way to help prevent maltreatment.

As a society, we have a collective ethical responsibility to prevent childhood maltreatment. Given the research evidence on effective prevention programs, this is a duty we can fulfil. We owe it to children to invest in such programs.

Please see our [full issue](#) to learn more about preventing child maltreatment. 🖐️



About the Executive Summary

Here are the highlights from the most recent issue of the *Children's Mental Health Research Quarterly*, available for free at childhealthpolicy.ca. The *Quarterly* presents the best available research evidence on a variety of children's mental health topics. The BC Ministry of Children and Family Development funds the *Quarterly*.

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About the Children's Health Policy Centre

We are an interdisciplinary research group in the Faculty of Health Sciences at Simon Fraser University. We focus on improving social and emotional well-being for all children, and on the public policies needed to reach these goals.

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