Primary Care Interventions to Prevent Child Maltreatment

The U.S. Preventive Services Task Force (Task Force) has issued a final recommendation statement on *Primary Care Interventions to Prevent Child Maltreatment*.

This final recommendation statement applies to children from birth to age 18 who do not have signs or symptoms of abuse or neglect.

The Task Force reviewed recent research studies on interventions (programs or other kinds of efforts) to prevent child abuse and neglect. The final recommendation statement summarizes what the Task Force learned about the potential benefits and harms of these interventions: (1) There is not enough evidence at this time to make a recommendation about the effectiveness of interventions in primary care settings that aim to prevent child abuse and neglect. (2) More research is urgently needed on how to prevent abuse and neglect in children who do not show signs or symptoms.

What is child maltreatment?

Child maltreatment describes harmful actions or the threat of such actions toward children. It includes four types of abuse or neglect:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect: This is the failure to provide for a child's basic physical, emotional, health, or educational needs, and the failure to protect a child from harm.

Facts About Child Abuse and Neglect

Child abuse and neglect affects hundreds of thousands of children every year. In 2011, about 680,000 children in the United States were abused or neglected, and over 1,500 of these children died. Children ages 5 and younger are at the highest risk for abuse and death from abuse. Many children suffer from more than one type of abuse or neglect.

Child abuse and neglect can have devastating short- and long-term effects. Children can develop mental health problems, such as personality disorders or substance abuse. Many experience physical health problems, such as pain, disabilities, and long-term health problems.

Various factors increase the risk that a child will be abused or neglected. Children who are cared for by families with limited knowledge about how to care for a child are at increased risk for abuse and neglect. Children in families with the following are also at increased risk: strained or bad relationships, drug abuse, and social isolation (not having friends or family around to help). Poverty, too, increases the chance that a child will be abused or neglected. Many children are abused or neglected by adults who were themselves abused as children.

All 50 States and the District of Columbia require health care professionals and others who work with children to report suspected child abuse and neglect to Child Protective Services or other legal groups, as appropriate.
Primary Care Interventions to Prevent Child Abuse and Neglect

Health care professionals are trained to identify and take action when they see children who show signs or symptoms of abuse or neglect or who talk about being abused. It is important that all health care professionals look closely for signs of abuse and neglect and are ready to respond if they identify problems. For this recommendation statement, however, the Task Force only looked at programs that might help health care professionals prevent future abuse or neglect in children who show no signs or symptoms. The Task Force focused on programs in primary care settings, such as clinics or offices where family physicians and pediatricians work.

Potential Benefits and Harms

The Task Force reviewed one study in pediatric clinics, which focused on assessing risk and taking actions to decrease the chances that abuse and neglect might happen. They also looked at ten other studies on programs in which health care professionals made home visits to families with young children.

The Task Force found little evidence about the benefits of these programs, and the evidence they did find was mixed and unclear. Potential benefits of the programs in preventing abuse and neglect could not be determined.

They also found little evidence on harms from the interventions.

More Research is Needed

The Task Force recognizes that child abuse and neglect is a very serious problem. More research is urgently needed on:

- ways primary care professionals can help families prevent abuse and neglect
- ways for health care professionals to identify children who are at risk of abuse of neglect
- ways to prevent abuse in older children
- whether efforts to identify and help children lead to unexpected harms for the children

The Final Recommendation Statement on Primary Care Interventions to Prevent Child Abuse and Neglect: What Does It Mean?

Here is the Task Force’s final recommendation statement on primary care interventions to prevent child abuse and neglect. The final recommendation statement has a letter grade. The grade is based on the quality and strength of the evidence about the potential benefits and harms of prevention interventions. It is also based on the size of the potential benefits and harms. The Task Force recommendation grades are explained in the box at the end of this fact sheet.

When there is not enough evidence to judge benefits and harms, the Task Force does not make a recommendation for or against—it issues an I Statement. The Notes next to the recommendation helps to explain key ideas.

Visit the Task Force Web site to read the full final recommendation statement. The statement explains the evidence the Task Force reviewed and how it decided on the grade. An evidence report provides more detail about the studies the Task Force reviewed.
The Task Force concludes that the current evidence is insufficient to assess the balance of benefits and harms of primary care interventions to prevent child maltreatment. This recommendation applies to children who do not have signs or symptoms of maltreatment. **I Statement**

**What is the U.S. Preventive Services Task Force?**

The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed. Recommendations only address services offered in the primary care setting or services referred by a primary care clinician.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the Task Force Web site.

**USPSTF Recommendation Grades**

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<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
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<tbody>
<tr>
<td>A</td>
<td>Recommended.</td>
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<tr>
<td>B</td>
<td>Recommended.</td>
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<tr>
<td>C</td>
<td>Recommendation depends on the patient’s situation.</td>
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<tr>
<td>D</td>
<td>Not recommended.</td>
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<tr>
<td>I statement</td>
<td>There is not enough evidence to make a recommendation.</td>
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Notes

1. **Evidence is insufficient**
   - The Task Force found few studies and the results were inconsistent and unclear.

   **Assess the balance...**
   - The Task Force was not able to determine whether the potential benefits would outweigh any potential harms.

   **Interventions to prevent...**
   - Things primary care professionals can do to help prevent children from being abused or neglected.

   **Children**
   - Children from birth to age 18.

Click Here to Learn More About Child Abuse and Neglect

- [Child Abuse and Neglect](healthfinder.gov)
- [Child Abuse](Medline Plus)
- [Child Maltreatment Prevention](Centers for Disease Control and Prevention)
- [Child Welfare Information Gateway](Children’s Bureau, Administration for Children and Families, U.S. Department of Health and Human Services)