Child maltreatment practice at the interface of different systems

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CAN Movement Accomplishments

- Epidemiology
- Impact
- Trained professionals
- Empowered victims
- Reduced stigma and ignorance
- Where to next???
Future vision

- build and test effective programs
- multidisciplinary
- reasonable cost
- using technology
- *easily adopted by existing institutions, especially*
  - medical practices
  - schools systems.
The Framework Approaches

- Children’s Rights
- Neurobiology
- Adverse Childhood Experiences
- Econometric Impact
Where are we?

- People lack awareness that child maltreatment is a serious, widespread, expensive problem that causes harm [Old obstacle]

- People lack confidence that we know how to prevent and treat child maltreatment at a reasonable cost, in a way that integrates into our institutions [Current obstacle]
Where are we?

- Advocacy phase
  - vs
- Efficacy phase
Skill Sets for which we Need Programs (examples)

- Identify and treat parental depression
- Prevent/inhibit caregiver sexual abuse
- Prevent/inhibit parental aggression
- Prevent youth sexual experimentation on younger children
The Competitive Context

- Early childhood development
- Preschool education
- Nutrition education
- AIDs prevention
- Smoking prevention
- Drug and alcohol prevention
Landscape Analysis

• 1) what other social problem advocates are natural allies? How do our goals and programs mesh with theirs?
• 2) what else is succeeding in the social policy environment in these allied fields and how we can join?
Potential Allies

- Family planning
- Early childhood development
- Preschool education
- Depression screening and treatment
- AIDS
- Substance abuse prevention and treatment
- Dating violence and bullying
- Intimate partner violence
Health Care
8 million
+16%

Education
4 million
+8%

Law Enforcement
1.5 million
+5%

Child Protection
100 thousand
Priority Collaborators: Medical Practices and Schools

- Well-established infrastructure
- Universal
- International
- Trusted and credible
- Empirically oriented
- Proven success in related prevention
Specific Goals

- Build programs to fit schools and medical practices
- Respect time and resource constraints
- Coordinate with other advocates
- Envision integrated, comprehensive models
- Adopt developmental approach
- Modularize
- Influence training, especially early professional formation
Preventing Child Abuse: A Meta-Analysis of 23 Parent Training Programs

- Clear preventive effect ($d=.45-.60$)

- “inclusion of home visitors and conducting parent training in both a home and office setting significantly enhanced the effectiveness. In addition, inclusion of a behavioral component and delivering some of the parent training in an individual setting, as opposed to group only, enhanced outcomes significantly.”

The SEEK Model of Pediatric Primary Care: Can Child Maltreatment Be Prevented in a Low-Risk Population?

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ABSTRACT

OBJECTIVE: To examine the effectiveness of the Safe Environment for Every Kid (SEEK) model of enhanced pediatric primary care to help reduce child maltreatment in a relatively low-risk population.

METHODS: A total of 18 pediatric practices were assigned to intervention or control groups, and 1119 mothers of children ages 0 to 5 years were recruited to help evaluate SEEK by completing assessments initially and after 6 and 12 months. Children’s medical records and Child Protective Services data were reviewed. The SEEK model included training health professionals to address targeted risk factors (eg, maternal depression), the Parent Screening Questionnaire, parent handouts, and a social worker. Maltreatment was assessed 3 ways: 1) maternal self-report, 2) child-CI −0.24, −0.002, P = .047). Similarly, SEEK mothers reported fewer Minor Physical Assaults than controls (initial effect size = −0.16, 95% CI −0.29, −0.03, P = .019; 12-month effect size = −0.14, 95% CI −0.28, −0.005, P = .043). There were trends in the same positive direction at 6 months, albeit not statistically significant. There were few instances of maltreatment documented in the medical records and few Child Protective Services reports.

CONCLUSIONS: The SEEK model was associated with reduced maternal Psychological Aggression and Minor Physical Assaults. Although such experiences may not be reported to protective services, ample evidence indicates their potential harm. SEEK offers a promising and practical enhancement of

SEEK

• Social worker or pediatrician

• Multicomponent
  • Maternal depression
  • Substance abuse
  • Domestic violence
  • Food insecurity
  • Harsh parenting

• Handouts, electronic modules
Parenting Critical Periods

- Post-partum
- Oppositional, defiant
- Starting school
- Entering adolescence
School Programs: Socio-emotional and Interpersonal Skills

• 213 school based programs, meta-analysis

• increased prosocial behaviors and reduced conduct and internalizing problems

• 11-percentile gain in academic achievement

School Programs Reduce Abuse and Violence

- 44 high quality program evaluations, including 17 randomized experiments
- “On average, bullying decreased by 20% – 23% and victimization decreased by 17% – 20%.”

David P. Farrington, Maria M. Ttofi, School-Based Programs to Reduce Bullying and Victimization
Campbell Systematic Reviews 2009
FastTrack elementary school intervention program decreased use of spanking at age 25 when participants became parents.
Schools Recognize Most Child Maltreatment

Strategies for Healthy Youth Relationships

The Fourth R is a group of researchers and professionals dedicated to promoting healthy adolescent relationships and reducing risk behaviours. We develop and evaluate programs, resources and training materials for educators and other front-line professionals who work with youth. In particular, we work with schools to promote the neglected R (for relationships) and help build this Fourth R in school climates. Fourth R initiatives use best practice approaches to target multiple forms of violence, including bullying, dating violence, peer violence, and group violence. By building healthy school environments we provide opportunities to engage students in developing healthy relationships and decision-making to provide a solid foundation for their learning experience. Increasing youth relationship skills and targeting risk behaviour with a harm reduction approach empowers adolescents to make healthier decisions about relationships, substance use and sexual behaviour.

The Fourth R Reduces Dating Violence and Increases Condom Use 2.5 Years Later.

This study utilized a cluster randomized controlled trial (RCT) design with a 2.5 year follow up with 1,722 students aged 14 to 15 years. The intervention condition was the Fourth R Grade 9 Physical and Health Education program - a 21-lesson curriculum delivered during 28 hours by teachers with additional training in the dynamics of dating violence and healthy relationships. Control schools targeted similar objectives without the training or materials.

Leveraging Technology

• The coming potential of data management systems
• Opportunity to build collaborations
• Integrated health care data management systems will likely be the model and foundation for systems pertaining to child protection
Opportunities of Data Systems

• Share information among professionals
• Give knowledge and assessment tools to practitioners
• Allow for assessment of practice
• Avoid errors and client drop out
• Reduce duplication of service
• Systematize definitions
• Empower clients and families by giving them more information
Using Technology to Deliver Services

- In the home
- When help is most needed
- Reducing stigma
- Increasing engagement
Using Technology to Deliver Mental Health Services to Children and Youth: A Scoping Review

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Abstract

Objective: To conduct a scoping review on the use of technology to deliver mental health services to children and youth in order to identify the breadth of peer-reviewed literature, summarize findings and identify gaps. Method: A literature database search identified 126 original studies meeting criteria for review. Descriptive numerical summary and thematic analyses were conducted. Two reviewers independently extracted data. Results: Studies were characterized by diverse technologies including videoconferencing, telephone and mobile phone applications and Internet-based applications such as email, web sites and CD-ROMs. Conclusion: The use of technologies plays a major role in the delivery of mental health services and supports to children and youth in providing prevention, assessment, diagnosis, counseling and treatment programs. Strategies are growing exponentially on a global basis, thus it is critical to study the impact of these technologies on child and youth mental health service delivery. An in-depth review and synthesis of the quality of findings of studies on effectiveness of the use of technologies in service delivery are also warranted. A full systematic review would provide that opportunity.

Key Words: scoping review, technology, service delivery, children and young people, mental health

Résumé

Objectif: Mener une étude de portée sur l’utilisation de la technologie pour dispenser des services de santé mentale aux enfants et aux adolescents, afin de déterminer l’ampleur de la littérature révisée par des pairs, de résumer les résultats et d’identifier les lacunes. Méthode: Une base de données de recherche de la littérature a recensé 126 études originales satisfaisant aux critères de l’étude. Des analyses thématiques et des résumés numériques descriptifs ont été menés. Deux analystes ont extrait les données indépendamment. Résultats: Les études étaient caractérisées par diverses technologies dont la vidéoconférence, le téléphone et les applications de téléphone cellulaire ainsi que les applications sur Internet comme le courriel, les sites Web et les CD-ROM. Conclusion: L’utilisation de la technologie joue un rôle majeur dans la prestation de services et de soutien de santé mentale aux enfants et aux adolescents car elle intervient dans la prévention, l’évaluation, le diagnostic, la consultation et les programmes de traitement. Les stratégies connaissent un développement exponentiel. Il est donc essentiel d’étudier l’impact de ces technologies sur la prestation de services de santé mentale aux enfants et aux adolescents. Une revue approfondie et une synthèse de la qualité des résultats des études sur l’efficacité de l’utilisation des technologies dans la prestation de services sont également justifiées. Une revue systématique complète conviendrait à cet exercice.

Mots clés: étude de portée, technologie, prestation de services, enfants et adolescents, santé mentale

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Getting Our Act Together