

Child Maltreatment Prevention

Child maltreatment prevention efforts include activities, strategies, or programs to reduce risk factors and increase protective factors identified in the research literature as associated with child maltreatment. These efforts are designed to increase the capacity of parents, caretakers, and communities to protect, nurture, and promote the healthy development of children. Prevention efforts operate at the individual, family, community, or societal levels in order to decrease the likelihood of child maltreatment.

Child maltreatment prevention activities vary tremendously and may take the form of public policy initiatives, public awareness campaigns, screening, and assessment activities by professionals or agencies serving families, informal parent support groups, or intensive, multi-faceted home visitation programs. Child abuse prevention programs can be universal programs, selective programs, or indicated programs. Table 3.1 offers a detailed discussion of types of child maltreatment prevention strategies.

Table 3.1 Types of Child Maltreatment Prevention Strategies

Universal Strategies target activities to the general population with the goal of preventing child abuse and neglect from ever occurring. Universal strategies are available to everyone, rather than targeting populations based on risk factors or specific characteristics. Examples include broad-based public awareness campaigns on positive discipline, developmental screenings for children in primary healthcare settings, and postpartum home visits for all parents of newborns.

Selective Strategies target activities to a group with specific risk factors with the goal of preventing child abuse and neglect from occurring in that group. Programs may target services to individuals, families, or communities based on risk factors such as parent age, poverty, substance abuse, domestic violence, or maternal depression. Examples of programs include: intensive home visitation programs for first time, low-income mothers; parent training for adolescent mothers; respite care for parents of children with special needs; and parent support groups for single parents.

Indicated Strategies target activities to a group that has experienced abuse or neglect with the goal of preventing child abuse and neglect from reoccurring in that group. Examples include parent training for department of social services substantiated parents; and parent support groups for non-offender parents of children who have been sexually abused.

Over the past forty years, local communities have developed and sustained a wide array of child maltreatment prevention programs based on local needs, resources, and expertise, but have done so with limited federal and state guidance, and without the benefit of a significant body of research literature identifying effective strategies.

An effective, statewide child maltreatment prevention initiative should provide an array of universal, selective, and indicated child maltreatment prevention programs. Historically, the state has focused its prevention efforts on indicated strategies, targeting individuals or families that have experienced abuse or neglect with the goal of preventing it from reoccurring. The state has focused less on universal or selective strategies that aim to prevent maltreatment before it occurs. The primary goal of this Task Force on Child Abuse Prevention was to promote greater attention to primary prevention efforts, trying to prevent child maltreatment from occurring in the first place. The Task Force on Child Abuse Prevention determined that an effective child maltreatment prevention initiative should incorporate a number of approaches including legislative changes, media campaigns, community mobilization, implementation of evidence-based child abuse prevention programs, and the infusion of child abuse prevention approaches in systems already serving children and families.

Child Maltreatment Prevention Efforts in the United States

Public attention on child abuse began to rise during the 1960s after the publication of Henry Kempe's article "The Battered Child Syndrome" in the *Journal of the American Medical Association*.⁶⁴ Passage of the Child Abuse Prevention and Treatment Act in 1974 brought both public and policy recognition of child maltreatment as a major social issue in the United States.⁶⁵ Early prevention efforts focused on increasing public awareness and understanding of the problem.⁶⁶ These efforts were incredibly successful. The number of child maltreatment reports in the United States rose from fewer than 100,000 in 1976 to more than one million by the early 1980s.⁶⁷

During the 1980s there was dramatic growth in child abuse prevention services and grassroots efforts to enhance community engagement and response. Numerous prevention programs targeting different segments of the population were developed in local communities. Thousands of parent education programs, parent support groups, school-based programs for children, home visiting programs, and other family support activities began to spring up in communities across the country. Without clear empirical guidance of the most effective approach to preventing child maltreatment, each child abuse prevention program was seen as important.⁶⁸

While significant gains were made in creating a diverse array of support services for families and many families benefited from these services, they still had not touched a great number of families. In particular, many families experiencing domestic violence, substance abuse, and mental health issues were not receiving services despite the fact that those individual and environmental risk factors put them most at risk for child maltreatment. Unfortunately, the current service array may not successfully assist many families who most need assistance.⁶⁹

As a result of this recognition, the past decade has seen an emerging re-conceptualization of what constitutes an effective, community-based child abuse prevention system. This new conceptualization is discussed in detail later in this chapter, but first it is important to review North Carolina's response to child maltreatment.

Child Maltreatment Prevention in North Carolina

Historically, North Carolina's efforts to address child maltreatment have mirrored those across the nation. The focus has been on responding to the problem, not preventing it from happening in the first place. As a result, most of North Carolina's policy initiatives and reform efforts addressing child maltreatment have targeted the child welfare system. For example, since Governor Martin's administration (1985-1993) there have been numerous commissions and task forces looking at the child welfare system, several studies of the child protection system, and several child welfare reform efforts,

such as Families for Kids and the Multiple Response System. However, little state-level attention has been directed toward the prevention of maltreatment.

In addition to the lack of attention on prevention efforts, several other barriers have hampered the state's child maltreatment prevention efforts. These include the lack of state-level leadership focused on prevention, an inability to adequately monitor the impact of the state's prevention efforts, little information at the state or national level about program effectiveness, and insufficient funding. There are multiple state agencies involved in programs consistent with child maltreatment prevention activities, including public health, mental health, public instruction, juvenile justice and delinquency prevention, and early childhood education. However, there is no single agency coordinating activities across agencies and being ultimately held accountable for prevention outcomes. Determining the success of prevention efforts is difficult because of shortcomings in the state's child maltreatment monitoring system. Further, historically there has been an absence of research about the effectiveness of prevention efforts. While this situation is changing, and more research is being focused on programmatic effectiveness, the past lack of outcomes data has led to a number of diverse, but not necessarily scientifically-based programs across communities. Another hurdle is the lack of stable, dedicated funding for child maltreatment prevention. While the costs attributable to child maltreatment in North Carolina are estimated at \$3 billion, only \$650,000 in state funding from the NC Children's Trust Fund, is dedicated to maltreatment prevention. Some other federal and state funds do support programs that are consistent with child abuse prevention efforts, but they need to be integrated into a coordinated system that focuses attention on child maltreatment prevention as a main goal. As a result of these problems, one cannot speak of a specific child abuse prevention system in North Carolina.

A principal goal of the Task Force on Child Abuse Prevention was to address the weaknesses identified above, particularly at the state level. Although much of child maltreatment prevention actually occurs at the local level in neighborhoods, homes, pediatrician's offices, schools, and community-based agencies, state agencies still have significant influence on prevention because they establish funding availability and priorities and the programmatic direction for state-sponsored or state-funded family support and child maltreatment prevention activities. In other words, weaknesses at the state level, such as lack of leadership, unclear programmatic priorities for effective practice, and insufficient funding, diminish the capacity of local communities to do quality, effective child maltreatment prevention. Aligning state systems is the first step in creating an environment in which the state and local communities can increase attention, resources, and energy to implementing what is known to work in preventing maltreatment.

Vision of a Child Abuse Prevention System in NC: Critical Elements

In the past, the array of prevention services offered were all considered equal in importance and impact. However, that system has had limited success in preventing child maltreatment on a wide-scale basis. Rather, North Carolina should build a more intentional set of services for families beginning with a strong foundation of support for every parent and child that is available when a child is born or a woman is pregnant.⁷⁰ Services should then be added to this universal base of support - through programs such as parent education, home visiting, or parent support groups - in response to the developmental needs of the child or the evolving parent-child relationship.⁷¹ The system should target families for support during periods in which child maltreatment is more likely to arise, such as the postnatal attachment period, family structure changes (loss of a parent, divorce, etc.), and the development of conflict/violence between parents. The system should also provide support in a way that influences parenting behavior before abusive/neglectful patterns become established.⁷² Help-seeking behavior then becomes "normative," that is, parents can routinely ask for help and it is seen by the community and professionals as acceptable, rather than being stigmatizing. Table 3.2 on the following page outlines the Task Force on Child Abuse Prevention's vision for North Carolina's prevention efforts.

While child abuse prevention constitutes a critical goal of such a system, maltreatment prevention is placed within the larger context of positive child development and healthy parent/child relationships.⁷³ The establishment of this type of comprehensive prevention system will require the support and active participation of multiple agencies and disciplines, including early childhood development and education, public health, social services, and public instruction. Other integral partners with overlapping outcomes and intervention strategies for promoting healthy child development include the Early Childhood Comprehensive System Initiative, spearheaded through the NC Division of Public Health and focusing on the integration of multiple services and agencies to create a comprehensive system supporting early childhood development, and the Assuring Better Child Development Project, part of Community Care of North Carolina and promoting developmental screening and referrals of all children during regular pediatric visits.

Table 3.2

Vision for Children, Families, and Communities

We envision that ...

- > Children are nurtured, supported, and protected within a safe and stable home and community environment.
- > Families recognize the rewards and responsibilities of raising children and have access to support within their own communities to help them meet those responsibilities.
- > Families are able to ask for and receive timely assistance without fear of being punished or blamed.
- > Communities are supported in their efforts to meet the diverse needs of families raising their children.

Key Principles of North Carolina's Child Maltreatment Prevention System

The following key principles should guide the development of a comprehensive child abuse prevention system for North Carolina.⁷⁴

North Carolina's child maltreatment prevention efforts will...

- > **Promote the healthy development of the parent/child relationship through community and institutional support of parenting.** The goal of child abuse prevention should not be just the avoidance of “harmful parenting,” but the creation of a community wide system in which all parents are provided the support they need to nurture their children and foster their cognitive and social/emotional development.
- > **Consist of normative, universal efforts to promote healthy parenting among all North Carolina families, as well as more targeted efforts directed towards higher risk families.** Child abuse prevention efforts must be linked to universal family and parenting support initiatives that make parental help-seeking behavior normative. All families - regardless of socioeconomic status, family structure, or other environmental challenges - need support in raising children. Parenting is a very difficult job that poses many demands and challenges. Nevertheless, few parents feel comfortable admitting that they need help. North Carolina will be successful in reducing maltreatment when the larger community recognizes that good parents are made, not born, and that all parents want to be good parents. Child abuse prevention efforts must also include intensive strategies for families experiencing multiple risk factors and needing additional support.
- > **Target the developmental stages of pregnancy and the first years of a child's life as the foundation of our commitment to prevention.** Research on parenting indicates that the best opportunities to encourage nurturing, healthy parental behavior are during pregnancy and the first years of a child's life.⁷⁵ During this time, parents express interest and willingness to learn new information and change behaviors that might be harmful to

their children. Early intervention and support have great promise in helping parents develop nurturing behaviors and positive parenting skills for dealing with stressful parent/child interactions.

- > **Add services at different developmental stages to support the healthy formation of the parent/child relationship.** As children grow and challenges emerge during different developmental stages, different preventive services should be available for families to access without stigma. Again, the more North Carolina is able to provide parents and families with services that are seen as normative (e.g. childbirth classes during pregnancy, immunizations during well-child visits), the more successful the state will be in preventing abusive behavior early on in a child's life.
- > **Match family needs with an appropriate level of support.** Not all families need the same level of support to provide healthy, nurturing environments for their children. Families that have financial resources, support from an extended network of family and friends, and psychological resources, such as emotional maturity and problem-solving skills, may not need extensive support. Families who do not have these assets and who are struggling with issues such as intimate partner violence, mental health issues, substance abuse, or childhood histories of violence and maltreatment, may need intensive services to help them overcome these challenges as parents. An effective child abuse prevention system will include equally strong universal, selective, and indicated prevention services and will have the capacity to link those services so that families requiring intensive services can access them as needed.

To be effective, prevention efforts will need to...

- > **Integrate prevention and support services across public and private agencies.** Child abuse prevention is a function of multiple agencies and organizations at the state and local levels serving families and children. Strong and effective partnerships among state and community agencies are needed so families and prevention programs are able to access a wide range of resources and support. Strong and effective partnerships mean coordinated planning for high-risk families across agencies, joint funding initiatives, shared training resources, and the provision of empirically-based services that target multiple risk factors at the individual, family, and community levels.
- > **Enhance the role of community institutions and informal supports in helping families raise children.** All segments of a community have a role to play in preventing maltreatment. Community institutions, civic groups, and neighborhood supports have important roles in developing support systems for families and children. Support can include respite care, neighborhood centers, babysitting cooperatives, mentoring relationships, sources of support for new parents (e.g. making dinners, babysitting children, helping with transportation), recreational opportunities, and organized, safe events where parents can have fun with their children and with other families. Effective prevention requires that all segments of a community - professionals and parents, public agencies, nonprofits, businesses, and informal community groups - participate in planning, developing, and implementing activities to support nurturing parenting and healthy families.
- > **Use family support principles in program planning, implementation, and governance.** Prevention programs should emphasize a strengths-based approach to working with families and children to increase the likelihood of positive outcomes. Family support principles can help guide staff in emphasizing family strengths, focusing on developing informal supports and resources, and partnering with community resources. Family Support America leads our nation's effort to infuse family support principles into systems and programs serving families and children, and has published *Guidelines for Family Support Practice*.⁷⁶
- > **Be linguistically and culturally accessible and responsive.** Programs, services, and messages must be tailored to the families and communities they intend to serve. In order to ensure that families take advantage of these programs, they must be linguistically and culturally accessible and responsive.
- > **Incorporate strong theory-based and empirically-based strategies into program planning and implementation.** Scientific research has demonstrated the effectiveness and/or promise of several prevention programs, such as the Nurse Family Partnership, Parent-Child Interaction Therapy, Nurturing Program, and Chicago Child-Parent Centers, and confirmed the effectiveness of several treatment programs for children who have been physically or sexually abused. When strong empirical evidence is not available, programs should be developed using research-based risk and protective factors, and should be guided by a theoretical understanding of how those risk and protective factors can be influenced.

Table 3.3

Principles of Family Support Practice

- > Staff and families work together in relationships based on equality and respect.
- > Staff enhances the family's capacity to support the growth and development of all family members - adults and children.
- > Families are resources to their own members, to other families, and to communities.
- > Programs affirm and strengthen the family's cultural, racial, and linguistic identities while enhancing their ability to function in a multicultural society.
- > Programs are embedded in communities and contribute to the community building process.
- > Programs advocate for families for services and systems that are fair, responsible, and accountable to families served.
- > Practitioners work with families to mobilize formal and informal resources to support family development.
- > Programs are flexible and continually responsive to emerging family and community issues.
- > Principles of family support are modeled in all program activities including planning, governance, and administration.

- > **Evaluate programmatic efforts and ensure that training, quality assurance, and technical assistance resources are available.** While federal agencies and academic institutions have the resources and research expertise to identify model child abuse prevention programs, state and local agencies must ensure that they are implementing these models according to their original intent and achieving measurable outcomes for the families involved. Measuring change at the parent-family level should be required of child abuse prevention programming to the greatest extent possible.
- > **Ensure that sufficient resources are available to successfully implement prevention strategies and programs.** Adequate resources are integral to ensuring the success of child maltreatment prevention programs. Staff must be trained and supervised, workloads and caseloads must be reasonable, and programs must have stability in order to adequately serve children and families.

Conclusion

Child maltreatment prevention efforts increase the capacity of parents, caretakers and communities to nurture and promote the healthy development of children. Prevention strategies are diverse and include public awareness initiatives, policy advocacy, family support and family strengthening programs, and community mobilization. North Carolina, like the rest of the nation, has historically focused the vast majority of its resources and energy on responding to child maltreatment after it has occurred. With a growing recognition that child protection strategies are critically important, but insufficient, in the struggle to prevent maltreatment, members of the Task Force on Child Abuse Prevention have defined a new vision for the state's child maltreatment prevention efforts. This new vision is strengths-based, family-centered, and developmentally-focused. It recognizes that good parents are made, not born, and that normative, universal efforts to promote healthy parenting among all North Carolina families are vitally important in reducing child maltreatment. North Carolina's first step in translating this vision to practice is to align state systems with the principles articulated in this chapter so that local communities, who receive direction and resources from state-level agencies and funders, can begin to shift their focus and energy to creating a universal, comprehensive, and normative system of support for all parents raising children in our state.