Strategies for Preventing Injuries and Fatalities Due to Child Maltreatment

Presentation for the A Road Map from Research to Practice: Upbring’s 2nd Annual Conference on Child Maltreatment (Dr. Peter J. Pecora, Austin, April 10, 2017)

Acknowledgements

- Special thanks to the speakers and participants in the Casey Family Programs child injury forums for sharing their wisdom.

- Dr. Pecora is Managing Director of Research Services, Casey Family Programs, and Professor, School of Social Work, University of Washington. E-mail: Ppecora@casey.org Phone: 206-270-4936
Abstract

While well-intentioned, current child welfare services may be failing to protect children from severe maltreatment due to constraints in policy, program design, practice and funding. Drawing from new advances in the injury control field and other areas, this document summarizes the community conditions, systems factors, evidence-based practices (EBPs), and promising practices that may prevent child fatalities and severe child injuries related to child maltreatment. It also outlines future directions for practice and research.

*Promising, **Supported by research evidence, ***Well-supported

Examples of Varied Approaches to Child Safety

- Geo Analysis to identify neighborhood differences
- Family supports: affordable housing and employment
- Workload management
- Mandated case consultation
- Case teaming
- Safety network development
- Eckerd Rapid Safety Feedback
- Predictive risk modeling & machine learning
- Telemedicine case consults
- Practice tools like the “The Three Houses”
- Supervision of young children
- Safe sleep practices
- Managing crying – Period of PURPLE
Community Conditions

• Geographic analysis to identify high risk neighborhoods.

• Promoting community norms that protect children. (Broad Triple P tier one strategies and ACEs prevention and mitigation initiatives.)

• Other public health-informed policies to increase community capacity to support families: “Family Action Councils” or “Neighborhood Action Groups”

Policy and System Strategies (Cont.)

• Income and housing supports to improve parental capacity to care for children

• Agency-wide “culture of safety”

• CPAC Guidelines for CAN Medical Response require the MDT to seek immediate medical evaluations for children, siblings and other children in the household when specific abuse fact patterns exist.

• Workload management: limits and adjustments for case complexity
Policy and System Design (Cont.)

- Mandated case consultation (LA Board policy: require nurse consultation for children under the age of 2 in CPS)
- Child under age 6 get medical exams when a sibling has signs of abuse
- Case teaming: assessment and decision-making
- Safety networks

Data and Technology

- Data analytics, risk modeling and machine learning
- Regular refreshment of state or county level prediction data regarding risk and protective factors (e.g., Alleghany county, Eckerd Rapid Safety feedback)
- Telemedicine and web-based consults
Practice: Promote Proactive Parenting to Prevent Child Fatalities

Infant Death Due to Co-Sleeping With Adults:

- Safe Sleep Campaign in Michigan*
- U.S. Consumer Product Safety Commission (CPSC) campaign.* (The CPSC warns parents not to place their infants to sleep in adult beds, stating that the practice puts babies at risk of suffocation and strangulation.)

Deaths Caused by Poor Supervision of the Child (E.g., Children Falling Out Of Windows, Being Left In an Over-Heated Car, Wandering Out Into a Street and Being Hit by a Car):

- Child safety campaigns. (These relate to multiple facets of life, including traffic safety, swimming, and sports.)*
Los Angeles Safe Sleeping Ad Using a More Positive Approach
http://safesleepforbaby.com/how-to-keep-your-baby.shtml

How to Keep Your Baby Safe

Parents and caregivers can reduce the risk of infant death from suffocation by being aware of and following these safe sleeping practices.

1. Share a room, not a bed.
2. Lay baby down to sleep in a crib or bassinet.
3. Place babies on their back every time - at night and for naps.
4. Give babies space to breathe - no pillows, bumpers, blankets or toys.

Promote Proactive Parenting to Prevent Child Fatalities

Physical Abuse-related Deaths:

- Nurse Family Partnership***

Sudden Infant Death Syndrome (SIDS) from using a non-supine infant sleeping position:

- Back to Sleep Campaign**
- Safe Sleep Campaign in Michigan*
Proactive Parenting to Prevent Child Severe Injury

Physical Abuse: Abusive Head Injuries Such as Shaken Baby Syndrome:

- Healthy Start Program, Enhanced Model**
- Hospital-based education programs.*
- Fussy Baby Network® Colorado*
- Kohl’s Shaken Baby Syndrome Prevention Campaign*
- The Period of PURPLE Crying® education campaigns*

http://www.kaleidahealth.org/services/pdfs/wchob/shakenbaby/Shaken_Baby_poster.pdf
Preventing Child Severe Injuries (Cont.)

Physical Abuse: Undifferentiated Abuse that Required Hospitalization:

• Durham Connects universal brief home visiting** (emergency medical care use for infant injuries)
• Nurse Family Partnership*** (emergency medical care use for childhood injuries)
• Triple P—Positive Parenting Program***

Preventing Child Severe Injuries (Cont.)

Child injuries caused by poor supervision of the child (children falling out of windows, being left in over-heated cars, children wandering out into the street):

• Child safety campaigns that relate to multiple facets of life, including traffic safety, swimming, and sports.*

Neglect: Severe child injury due to poor medical care or lack of proper health care:

• Enhanced Pediatric Care for Families at Risk*
Other Practice Strategies to Consider

- Safety mapping techniques and tools
- Practice tools like Three Houses

Other Prevention Strategies to Consider

- **Childhelp Speak Up Be Safe** (evolved from the Good-Touch Bad-Touch® intervention)
- **Child Welfare Birth Match**
- **Crisis Nurseries**
- **Enhanced pediatric care for families at risk**
- **SafeCare®**
- **Safe Environment for Every Kid (SEEK) Project**
- **Substance abuse treatment programs**

For more information