

U.S. Preventive Services Task Force Issues Final Recommendation Statement on Primary Care Interventions to Prevent Child Maltreatment

Task Force determines that more research is needed on primary care interventions to prevent child maltreatment and urgently calls for more research

WASHINGTON, D.C. – March 19, 2024 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement on primary care interventions to prevent child maltreatment. The Task Force determined there is not enough evidence to assess the balance of benefits and harms of interventions in the primary care setting to prevent child maltreatment before it occurs.

This is an I statement. Importantly, this is a call for more research, not a recommendation for or against these interventions. This recommendation is only for children and teens under 18 years of age who do not have any known history, signs, or symptoms of maltreatment. Any child showing signs or symptoms of maltreatment should be immediately evaluated and connected to the care they need.

Grade in this recommendation:

I: The balance of benefits and harms cannot be determined.

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Child maltreatment, which includes abuse and neglect, is a serious problem that affects too many kids and teens across the United States. In 2021, more than 600,000 children experienced some form of maltreatment, and many more cases do not get reported. Primary care interventions considered for this recommendation focus on preventing maltreatment before it occurs. These interventions aim to identify youth at increased risk of maltreatment, encourage positive parental discipline strategies and coping skills, and strengthen the parent-child relationship. Interventions can include parental education, psychotherapy, and referral to community resources. In reviewing the currently available evidence, the Task Force found that more evidence is needed on the effectiveness of primary care interventions to prevent maltreatment before it occurs in youth who do not have any known history, signs, or symptoms.

“Protecting children from all forms of maltreatment is critically important, and primary care clinicians are in a unique position to help identify signs and symptoms of abuse and neglect,” says Task Force member James Stevermer, M.D., M.S.P.H. “Unfortunately, when we looked at the research on how to prevent child abuse and neglect in those who do not show any signs or symptoms, there is still not enough evidence on what can be done in primary care to prevent maltreatment before it occurs. The Task Force continues to urgently call for more research in this area.”

Maltreatment can lead to devastating effects, such as injury and death, and can also lead to long-term physical and emotional consequences, such as disability, substance abuse, and depression. Healthcare professionals should always remain vigilant for signs of abuse and neglect. Any young person who is showing signs or symptoms of maltreatment should be immediately evaluated, have their situation reported to the appropriate authorities, and get connected to the care they need to stay safe. For children who do not have any signs of abuse or neglect, primary care clinicians should use their clinical judgment when deciding whether and when to provide interventions to help prevent maltreatment before it occurs.

“Child abuse and neglect is a serious problem that affects far too many children,” says Task Force member Tumaini Coker, M.D., M.B.A. “It’s important that future research on this topic assess tools that can accurately identify children at increased risk for maltreatment. More research is also needed on the most effective ways to prevent child abuse and neglect, including interventions that address social and health-related factors that can negatively impact families and increase vulnerability to maltreatment.”

The Task Force’s final recommendation statement and corresponding evidence summary have been published online in the *Journal of the American Medical Association*, as well as on the Task Force website at <https://www.uspreventiveservicestaskforce.org>. A draft version of the recommendation statement and evidence review were available for public comment from August 29, 2023, to September 25, 2023.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Stevermer is vice chair and Paul Revare, MD, professor of family and community medicine at the University of Missouri (MU). He also practices and teaches rural primary care at MU Health Care Family Medicine–Callaway Physicians. His scholarly activities focus on dissemination and evidence-based medicine.

Dr. Coker is division head of General Pediatrics and professor of pediatrics at the University of Washington School of Medicine and Seattle Children’s. She serves as the co-director of the University of Washington’s Child Health Equity Research Fellowship, which is funded by the National Institutes of Health. She teaches primary care pediatrics at Seattle Children’s Odessa Brown Children’s Clinic, and her research focuses on improving preventive care services during early childhood.

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