WASHINGTON, D.C. – November 27, 2018 – The U.S. Preventive Services Task Force (Task Force) today posted a final recommendation statement and evidence summary on interventions to prevent child maltreatment. The Task Force determined there is not enough evidence to assess the balance of benefits and harms of interventions to prevent child maltreatment before it occurs and is calling for more research. This is an I statement (insufficient evidence) and not a recommendation for or against these interventions.

Grade in this recommendation:  
I: The balance of benefits and harms cannot be determined.

More research is needed on how to prevent child maltreatment before it occurs.

Child maltreatment, which includes abuse and neglect, affects too many children in the United States. Approximately 676,000 children experienced some kind of maltreatment in 2016, and every year, many cases go unreported. The Task Force reviewed evidence on primary care interventions to prevent maltreatment in children with no signs of abuse or neglect. These interventions include parental education, psychotherapy, and referral to community resources, as well as home visitation programs. The Task Force also looked at the evidence on how to identify children who may be in greatest need of interventions to prevent maltreatment from occurring.

“Child maltreatment is a serious problem, and no child should suffer from abuse or neglect,” says Task Force member Alex R. Kemper, M.D., M.P.H., M.S. “Unfortunately, we still do not have the evidence we need about what primary care clinicians can do to help prevent child maltreatment before it happens.”

Maltreatment can have immediate devastating effects, such as injury and death, and it can also lead to long-term negative physical and emotional consequences, such as disability, substance abuse, and depression. Protecting children from all forms of maltreatment is critical, and primary care clinicians are in a unique position to help monitor children for signs of abuse and neglect. Importantly, all clinicians must remain vigilant for signs of maltreatment and be aware of local, state, and federal laws related to reporting suspected child maltreatment to the appropriate authorities.

“More research is needed on ways to prevent maltreatment before it occurs so that we can better protect all children,” says Task Force member John Epling, M.D., M.S.Ed. “Future research should look at the benefits and harms of such interventions as well as how best to identify children at greatest risk.”

This recommendation statement has been published online in the Journal of the American Medical Association, as well as on the Task Force Web site at: http://www.uspreventiveservicestaskforce.org. A draft version of the recommendation statement was available for public comment from May 22, 2018 to June 18, 2018.

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

www.uspreventiveservicestaskforce.org
Dr. Kemper is a board-certified pediatrician and chief of the Division of Ambulatory Pediatrics at Nationwide Children’s Hospital. He is also the deputy editor of *Pediatrics*.

Dr. Epling is a professor of family and community medicine at the Virginia Tech Carilion School of Medicine in Roanoke, VA. He is the medical director of research for family and community medicine, is the medical director of employee health and wellness for the Carilion Clinic, and maintains an active clinical primary care practice.

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