

No clear evidence of a decrease in child maltreatment across 6 countries despite decades of policies

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A Review of child maltreatment trends and policies across six countries/states (England, USA, Sweden, New Zealand, Western Australia [Australia], and Manitoba [Canada]) shows that there is no clear evidence of a decrease in child maltreatment across these nations, despite decades of policies designed to achieve such a reduction. The Review is written by Professor Ruth Gilbert, UK Medical Research Council (MRC) Centre of Epidemiology for Child Health, UCL Institute of Child Health, London, UK, and colleagues across these six nations.

The authors found that, after the mid-1990s, the rates of violent deaths and maltreatment-related injuries remained stable in most settings. Only in Sweden and Manitoba did decreases in violent deaths coincide with decreases in admissions to hospital related to injury related to maltreatment. Officially-recognised [physical abuse](#) or neglect mostly remained stable across the six nations, but other indicators of agency notification, investigation, or placement in out-of-home care increased, particularly in infants.

Lower levels of maltreatment indices in Sweden than in the USA are, say the authors, consistent with lower rates of [child poverty](#), parental [risk factors](#), and policies providing higher levels of universal support for parenting in Sweden. A snapshot of the maltreatment-related data from 2004-6 showed that [violent deaths](#) in the USA were more than five times higher in the USA than in Australia or Sweden, which had the lowest

rates. However the authors noted little variation between countries in the rate of maltreatment-related injury admissions and officially-recognised physical abuse. Child protection investigations were much more common in the USA (1 in every 20 children) and New Zealand (1 in 25) children than in Western Australia (1 in 170). Placement in out-of-home care was also ten times higher in Manitoba than in Sweden or Manitoba, with 3% of infants placed outside of their homes each year. Rates for infants in England (0.7%), New Zealand (0.6%), and the USA (0.6%), were around twice as high as in Western Australia (0.3%) or Sweden (0.3%). While these analyses represented a small and not statistically significant increase in England, subsequent data from the UK Department of Education show a 9% increase between 2009 and 2010 in rates of placement of infants outside of their homes. The Review found clear evidence of rises in rates of out-of-home placement in Western Australia (2% per year since the mid-1990s for children aged over 1 year), Sweden (rising 3% per year for infants), and the USA (4% per year for children over 1 year).

The authors say: "We argue for improved research to underpin these very expensive policies that profoundly affect the lives of a substantial minority of children in our countries. Most urgent, in view of increases in out-of-home care, is the need for high-quality, randomised controlled trials to assess the effectiveness of this intervention."

Professor Gilbert says*: "We would urge caution in the interpretation of these results, as there could be a number of explanations for this. Small changes may be occurring but could not be detected by the study."

She adds*: "For too long, policy has been driven by high profile deaths of individual children. We need to invest in population-based studies to inform policy. We also need to be able to link health and social care data to understand which professionals are seeing these [children](#) in order to improve coordination of services. Such linkage is done in Western

Australia and Manitoba, where it is proving to be an important tool for [child health](#) policy."

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