

## New horizons for the journal; familiar landscapes in child protection

This issue opens with a farewell from us as we step down from our roles as Co-Editors of *Child Abuse Review*. We have both thoroughly enjoyed being co-editors of the journal – Jane since 2007 and Peter since 2011. This has been a significant time for the journal, particularly seeing *Child Abuse Review* through receiving and increasing its impact factor, transitioning to ScholarOne, a brand and style change, a move to more open-access publishing and online access, and steadily increasing downloads and citations of papers. It has been exciting to be part of a great team that has steered the journal through all this, with an expanding team of national and international associate editors, the introduction of the CPD section, and the recent appointment of a social media editor. In all of this we have been immensely grateful to our Editorial Manager Diane Heath (and Julia Walsh before her) for their incredible support and hard work, and to the whole team at Wiley and the Association of Child Protection Professionals. The door now opens to a new team and we are delighted to welcome and handover to the new Co-Editors Dr Kish Bhatti-Sinclair, Reader in Social Policy and Social Work at the University of Chichester and Dr Lisa Bunting, Senior Lecturer in Social Work at Queen’s University of Belfast. We wish them well in the next chapter of *Child Abuse Review* and we look forward to seeing how the journal develops in their capable hands.

As we look ahead, we are aware of some particularly exciting opportunities for the new editorial team, for the journal, and for the Association as they strive to support practitioners and researchers in the ever-changing but somehow familiar landscape of child protection. Our final issue for 2021 will be a special issue on the use of assessment tools in child protection, while our special issue for 2022 will focus on child protection during the perinatal period – both really important and practical issues. For the present, there are ongoing challenges for professionals as they seek to support children and families within the context of the ongoing Covid-19 pandemic and the gradual easing of restrictions globally; familiar issues such as abusive head trauma and sexual abuse and exploitation continue to present dilemmas for practitioners in all agencies; while the need to be both child- and family-focused in our interventions present both opportunities and challenges. These are all issues which are addressed in the reviews and research papers in this current issue of the journal.

## Preventing Abusive Head Trauma

Our first paper in this issue is a structured review of the literature on prevention of abusive head trauma (AHT) by Kelli Hughes and Debangshu Roygardner (2021). AHT remains one of the most challenging issues in child protection. It continues to be one of the most common forms of child maltreatment fatality, causes ongoing disability for many children, stress for families, and dilemmas for practitioners around diagnosis and appropriate management (Otterman & Palusci, 2020). Over the past two decades much has been achieved in understanding the complexities of presentation and management, and in developing programmes for prevention. Unfortunately, as Hughes and Roygardner point out, in spite of developments in prevention science, ‘only a small amount of child abuse prevention research to date has been performed with more sophisticated designs, and even less addresses AHT specifically’ (p. XX).

Hughes and Roygardner carried out a structured search of the literature for published research on prevention of AHT, critically appraising the identified studies and synthesising the results within a framework that explored ‘(1) strategies which teach parents how to respond to newborn crying and the dangers of shaking babies, (2) community and public health factors, and (3) professional education and practice’ (p. XX). Their findings provide interesting and important insights into the responsibilities of parents, professionals and communities and mixed evidence of the effectiveness of different programmes.

The commonest prevention strategies to have been evaluated are parent education programmes, accounting for 30 of the 53 papers included in the review. The most commonly studied was the Period of Purple Crying (PPC) programme (Barr, Barr, et al., 2009; Barr, Rivara, et al., 2009; Groisberg, Hashmi, & Girardet, 2020). The results for PPC and other parent education programmes were mixed, with some evidence of effectiveness, particularly in improving parental understanding and behaviours, but only limited evidence – which was not replicated in all studies – that such programmes actually reduce incidence of AHT. As with much of the evidence with which we are working in child protection, it is important to recognise that limited evidence of effectiveness of a programme is not the same as evidence that the programme is not effective. Definitive evidence of effectiveness through well-designed randomised controlled trials is difficult to achieve in low-incidence conditions such as AHT. In the UK at present, there is a lot of interest in the ICON (Infant crying is normal; Comforting methods can help; It’s OK to walk away; Never, ever shake a baby) programme (<https://iconcope.org/>). While we are not aware of any published research to date on its effectiveness, this programme, along with the PPC and other parent education programmes may carry benefits beyond the primary outcome of preventing AHT. The content and methods of different programmes, how, when and where they are delivered may all have an impact on how they

are received by parents, while a range of other contextual factors may also influence the extent to which parents and other carers are able to receive and act on the advice given. There is an ongoing need for robust quantitative and qualitative studies of the effectiveness of these programmes.

In a similar vein, community-wide awareness and education programmes had mixed evidence of effectiveness, and none of the studies in this category measured the impact on AHT incidence. One interesting finding though was two studies which examined the effect of providing families with financial benefits (Klevens, Luo, Xu, Peterson, & Latzman, 2016; Klevens et al., 2017). These studies showed a reduction – at a state level – in AHT incidence following the introduction of paid family leave and earned income tax credit respectively. Addressing the immediate socio-economic and community stressors facing families may have more of an impact in reducing the incidence of child abuse than programmes of parental or community education.

The final group of studies in the Hughes and Roygardner (2021) review was programmes targeted at professionals. These studies demonstrated some improvements in professionals' awareness and management of AHT. Whether this leads in turn to reductions in AHT is unclear. The authors conclude that further research is needed in all three areas of AHT prevention, with a need for more sophisticated study designs. That, however, should not stop us using our current knowledge to continue to develop and offer prevention strategies to families, communities and professionals.

### Family-focussed practice.

Our second review paper in this issue is a systematic narrative review of family-focussed practice (FFP) with families who have parents with mental health problems by Susan Lagdon and colleagues (2021) from Northern Ireland. Family-focussed practice is an approach to support and intervention that centres on the whole family and is an effective approach for those with mental health difficulties. The review set out to “develop a working definition of family-focused practice (FFP)” as previous studies had identified the lack of an agreed definition of the term. The work also sought to “identify the types of outcomes that are measured with a focus on service user experiences; and explore how well interventions in the included studies fit with previously established components of FFP” (Lagdon et al, 2021, p.XXX). Following a comprehensive search of 16 databases and grey literature to identify FFP research studies published between 1998 and 2016, 40 studies were included in the review and appraised using criteria adapted from the Critical Appraisal Skills Programme (CASP, 2019).

The studies incorporated a range of different designs, with 30 of the study interventions being focussed on parents and children, 4 delivered to parents only and 6 interventions to children whose parents suffered with substance misuse, or children or young people whose parent/s had a mental illness. The core components of FFP were analysed and presented by the authors using a structure developed by Marston et al (2016) including: “Psychoeducation; Direct support and treatment for mental health and/ or problematic substance use; Parenting behaviour; Child risk and resilience; Family communication; Family Support and functioning” (Lagdon et al, 2021, p.XXX). The review also identified an additional component in some of the interventions which was about efforts to enhance access to and engagement with services and support networks in the community. In terms of research outcome measures, the research studies focused on symptoms and deficits, with the most common measures being around family functioning, parental mental health or parental substance misuse. The review team concluded that “there should be a greater focus on identifying what outcomes are important to families, and on measuring outcomes in a more consistent way that would facilitate comparison across studies and interventions, and open the possibility for more explicit and supported discussions with parents, and children, about their needs and professional responsibilities.” Interestingly none of the studies incorporated an economic evaluation and many lacked explicit links to a relevant/appropriate theory base.

### Sexual abuse and exploitation

Our first two research papers in this issue both address child sexual abuse and exploitation. First, Kira Nyhus-Runtz and colleagues (2021) report on an online survey of healthcare providers in the Canadian province of Saskatchewan. This survey was prompted by a recognition that, while many victims of sexual exploitation access healthcare, there are many barriers to identifying them as victims or responding appropriately. From an analysis of 125 completed surveys from physicians, nurses and psychologists, the authors found that while knowledge of the potential risk factors and presenting complaints was generally strong, healthcare providers ‘lacked confidence in identifying and managing sexually exploited children’ (p. XX). Probing a bit deeper, it would appear that knowledge of more general risk factors, signs and symptoms was good, while knowledge of those more specific to sexual exploitation – including signs of potential grooming – was less good. Furthermore, in spite of a recognition of their legally mandated responsibility to report suspected cases, many healthcare professionals were not able to identify the correct reporting authority. The authors conclude that there is a need for specific professional education on child sexual exploitation in their province.

Our next paper, from Tara O'Neill, Aaron Maguire and Mark Shevlin (2021) explores the potential mediating role of dissociation in the association between sexual trauma and psychotic symptoms. Two hundred and sixty-nine female survivors of sexual trauma from the UK, USA and Australia completed an online survey exploring their age at experiencing sexual trauma (237 in childhood and 32 in adult life) and experiences of dissociative symptoms and psychotic like episodes. Both groups experienced a high proportion of both psychotic and dissociative symptoms, with those experiencing sexual trauma in childhood scoring higher than those in adulthood for both groups of symptoms. Mediation analysis showed that dissociative symptoms, particularly depersonalisation (for example, looking in a mirror and not recognising yourself), play 'a significant mediating role in the reporting of psychotic symptomatology among survivors of sexual trauma' (p. XX). The authors point out that a better understanding of the relationship between sexual trauma, dissociative symptoms and psychotic symptoms can help in responding to the victims of sexual trauma. However, this can be challenging, not least because some of the dissociative symptoms may be adaptive responses to the trauma experienced. Translating this knowledge into helpful clinical practice remains a significant challenge.

### Child Protection Practices

Our next three research papers focus on child protection practices. The first by Vicky Sharley (2021) from the University of Bristol reports on a case file analysis study of school staff's involvement in child protection cases when there are concerns about neglect. School staff are recognised as having a very important role to play in intervening early in cases of neglect and schools play a key role in the safeguarding system. However this study sought to explore "the role of school staff as a combined professional group" in order to provide new evidence about this "group's involvement in the statutory provision of support to children living with neglect" (Sharley, 2021, p.xx). The study involved an analysis of 119 children's social work files from 3 local authorities in Wales, where the following sampling criteria were met "(i) the school had referred the child to child protection services; (ii) the child was school age; and (iii) the child was on the child protection register under the category of neglect at the initial child protection conference (ICPC) (Sharley, 20221, p.xx).

The study found that 50 schools (42%) in the sample provided a range of support services to children who they were concerned were living with neglect. Although "variation emerged in the types of neglect identified by members of school staff in the different local authorities" with physical neglect and other forms of abuse (e.g. physical, sexual or emotional abuse) being the two most common categories reported in the sample. If a child protection conference had been convened, a member of staff from the school attended in 89% of cases and in virtually all cases (97%) school staff had provided

a report to the ICPC (Sharley, 2021, p.xx). While attendance dropped by 10% at the child protection review conference 3 months later, in over three-quarters of cases schools took responsibility for some of the actions on the child's child protection plan developed during the initial ICPC (Sharley, 2021, p.xxx). It was also apparent from the study findings that social workers regularly draw on information gathered from school staff "to inform statutory assessments" (Sharley 2021; p.xx). In an interesting discussion the study also acknowledges some of the challenges encountered during the research in terms of data collection using case file analysis, for example "large amounts of missing data on children's files and the restrictions this created for statistical measurements" and the omission of school records in this study, alongside the "complexity of social work processes" and differences in understanding of neglect in regional contexts (Sharley 2021; p.xx).

Our next paper in this issue by Helen Richardson-Foster and colleagues (2021) from the University of Central Lancashire and University of Sheffield sought to examine how child-focussed are child protection conferences (CPCs). The rationale for this study was that despite recent research on children's participation in these statutory multi-agency meetings, there is little evidence about how practitioners consider individual children's needs in such meetings. This interesting qualitative study drew on audio recordings and documentary evidence from 14 CPCs (3 initial and 11 review conferences), alongside interviews with 26 conference staff (including conference chairs, their managers and meeting minute takers) and six focus groups with 35 professionals from different agencies. Data analysis for the study drew on a four—part conceptualisation of child-focused practice developed specifically for the study, which included the extent to which "assessment was informed by the child's daily lived experience", the child's experience of abuse/neglect and aspects of parenting, whether the conference enabled children's participation and their voices to be heard and views taken seriously and "whether outcome measures used for interventions and actions were rooted in the individual child's experience and based on detailed understanding of the child's circumstances established by the preceding three elements" (Richardson-Foster et al, 2021, p.xxx).

The findings showed that that professionals' pre-conference reports often contained a lack of information and detail about the individual child's lived experience or "were vague about the implications of family circumstances for the child" (Richardson-Foster et al, 2021, p.xxx). Focus group data suggested this was likely to be due to the significant time pressures staff face when undertaking assessments pre-conference. As part of the study Richardson-Foster et al (2021) analysed the CPC discussions, considering content and time spent on agenda items and meeting content. They noted "children's health, education and relationships were always discussed, and information was often presented in a factual way without consideration of how any difficulties or deficiencies were impacting on the child's welfare. Thus, a comparatively large amount of meeting time was taken up in discussing

these general issues” (Richardson-Foster et al, 2021, p.xxx). While most CPCs did not address in detail the child’s daily lived experience, this was particularly the case with babies or in situations where prior to the conference there had been little engagement by parents with professionals. As other studies have also found, children’s and young people’s participation in the CPCs in this study was low with “child-focussed decision-making and planning rarely achieved” (Richardson-Foster et al, 2021, p.xxx), so practitioners and families may be “unclear about what is required to change” as previous research has described (Appleton, Terlektsi, & Coombes, 2015; NSPCC & SCIE, 2016). The research findings emphasised the important role of conference chairs in summarising discussions and keeping the focus on the concerns and welfare of the individual child.

Our next paper, a Short Report by XXXX Ranjbar and colleagues (2019) from XXX, Iran reports on the impact of an educational programme on child abuse recognition and reporting for a sample of Iranian nurses. Participants were working paediatric and emergency care wards in public and private hospitals throughout Tehran and the intervention was an in-service education programme on child abuse. Data were collected pre-intervention and 6 weeks following training using the Child Abuse Report Intention Scale (CARIS) (Feng and Levine, 2005). This quasi-experimental study found low levels of knowledge in both groups (intervention and control) pre-intervention and an increase in knowledge levels for the control group post-programme. The study team conclude that the educational intervention is potentially effective in improving nurses’ knowledge about child abuse, their attitudes towards child rearing and discipline, perceived behavioural control and their intention to report child abuse.

### [Covid-19 and its impact on families](#)

Our final paper in this issue continues our personal practice series reflecting on the impact of the Covid-19 pandemic on children and families (Appleton & Sidebotham, 2020; Donagh, 2020; Jacob, 2020; Øverlien, 2020; Roberts, 2020). In a short case study from Germany, Tobias Heimann and colleagues (2021) report on three consultations from the Medical Child Protection Hotline, ‘a nationwide hotline for medical professionals in cases of suspected or substantiated child abuse and neglect’ (p. XX). In the three months from March 15<sup>th</sup> to May 20<sup>th</sup> 2020, the hotline received 116 consultations, of which 16 were specifically related to the effects of the pandemic or lockdown. The three cases presented here include a seven year old boy who disclosed physical punishment during home schooling and whose parents were reporting increased stresses due to the pandemic; a 16 year old girl with allegations of escalating emotional and physical abuse during the lockdown; and a mother of a young infant with breathing difficulties who was refusing to seek medical advice due to fears of Covid.

The authors highlight these cases as illustrating the influence of the pandemic and lockdown measures on families – including those in whom there had not previously been concerns. They point out that the stresses on families may lead to an exacerbation of violence in the home and stress the need for easily accessible support during any lockdown.

In December last year, the Child Safeguarding Practice Review Panel in England published its report on supporting vulnerable children and families during Covid-19 (Child Safeguarding Practice Review Panel, 2020). This report identified that 'Covid-19 presents a situational risk for vulnerable children and families, with the potential to exacerbate pre-existing safeguarding risks, and bring about new ones' (p. 1). In particular, they identified that parental and family stressors, such as changing family dynamics, disrupted routines, overcrowding and a lack of contact with extended family members could lead to increases in domestic violence and mental health concerns. For some families, these stresses could lead to physical or emotional harm to children. There were additional impacts on the mental health and wellbeing of young people from the effects of school closures and the lack of their usual support structures. In addition to this, practitioners and service managers faced pressures as they adapted to Covid-safe working arrangements.

As governments across the world gradually release some of the more stringent measures to control the Covid-19 pandemic and children return to school and other activities, we must keep alert to the potential ongoing impact of the pandemic and its social and economic effects on children and families, and we must reflect on how governments and child welfare services have responded to the pandemic so that we can learn lessons for the future.

### [Keeping up to date](#)

We end this issue with a training update and a book review. First, Hannah Gaffney (2021) reviews the Anti-Bullying Alliance's free online training on Developing Effective Anti-Bullying Practice. This learning programme is geared towards reducing bullying, particularly of children and young people with additional needs. Gaffney found particular strengths of the training in its distinction between relational conflict and bullying behaviour and its acknowledgement of the ever-changing landscape of bullying. The content was clear and evidence-based, and provides 'an excellent resource for anyone working with children with disabilities' (p. xX).

This issue concludes with a review by David Clarke, a Lecturer in Social Work at Glasgow Caledonian, of Deborah Fry and colleagues 2017 book *Child Protection and Disability: Practical Challenges for*

*Research.* Clarke's (2021) review is very positive about the book which draws upon global research to highlight the prevalence of violence experienced by children with disabilities. Clarke's emphasises that the book is geared towards researchers undertaking research studies with children with disabilities, rather than practical support for professionals. He highlights that the book helpfully addresses some of the challenges faced when undertaking research with this group of children, and notes that the book offers useful practical guidance on ethical issues, sampling and informed consent, with one chapter drawing on real-life examples to explore methodological challenges.

With that breadth of content in the issue, we hope that you will find something to engage with, to inspire, challenge or support you in your practice. As the outgoing editors, we are extremely grateful to you, our readers, for all your support and engagement with the journal, and to all our authors, peer reviewers and the editorial team. We continue to be impressed by the amazing work going on every day to support vulnerable children and families, here in the UK and around the world, and it has been a privilege to see so much of that reflected in the pages of *Child Abuse Review*. We leave you in committed and capable hands!

Jane and Peter.

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