

NURSE VISITS

FAIL TO PREVENT

FURTHER CHILD ABUSE

by Philip Fine

Is it possible to stop child maltreatment from revisiting those previously subjected to it? A recent study shows that nurse visiting programs are not as effective as anticipated in preventing the recurrence of abuse.

The study, which involved a network of public health nurses who regularly visited families with a history of abuse, showed that those who received the visits were just as likely to strike their children or abdicate their duties as families that did not receive the tailored intervention.

Harriet MacMillan, lead author of the study, says these results mean that, for children remaining in a home that is deemed high risk for recurrence of physical abuse and neglect, there is currently no intervention proven to reduce that risk.

"This is a study that highlights how complex recurrence of physical abuse and neglect is," said the pediatrician and child psychiatrist at McMaster University, where the study was conducted. *"This was a very intensive program with a theoretical basis and it was not effective."*

Indeed, the study, which involved 163 families and was published last year in *The Lancet*, had years of planning behind it, with a program that saw public health nurses visiting approximately half of those families with at least one child who had suffered physical abuse or neglect. Each family in the intervention group received two years of regular visits from the practitioners, who provided them with family support, education on child development and connections to social services.

According to Susan Jack, professor in the School of Nursing at McMaster University, who is currently analyzing interviews from the study's mothers and public health

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nurses, the visits had seemed to be doing wonders. Mothers, by and large, appreciated the support from the nurses, who posed less of a threat than child protection workers, who had the power to take their children away. *"What mothers loved was that there was someone to listen to them. Nurses also advocated for the mothers, helping them with such things as finding housing and filling in forms for subsidized child care."* Nevertheless, the point of the study was to see whether children who had been abused were being subjected to further abuse after this intervention. According to child protection and hospital records, the intervention did not protect children from recurrence.

But the study did show something promising. Among the subgroup of families with less than three months of involvement

with the child protection agency, there was less recurrence of physical abuse for those receiving home visits compared to the control group. This was not the case for neglect.

The study shows a clear demarcation between preventing families from ever physically abusing or neglecting a child, and the greater challenge of trying to stop maltreatment that has already taken place from happening again. MacMillan and Professor Helen Thomas from the School of Nursing, had tried to take David Olds's theory of prevention further by seeing if the visits could also prevent recurrence. But entrenched abuse proves to be challenging, says MacMillan, who emphasizes the early-prevention maxim for at-risk parents: *"The earlier you get to them, the more potential there is to help families."* 🐾

Ref.: MacMillan HL, Thomas BH, Jamieson E, Walsh CA, Boyle MH, Shannon HS, Gafni A. Effectiveness of home visitation by public-health nurses in prevention of the recurrence of child physical abuse and neglect: A randomised controlled trial. *Lancet* 2005;365(9473):1786-1793.