**Child maltreatment shows no signs of significant decrease**

New research published in The Lancet (9 December 2011) shows no consistent decrease in the maltreatment of children across several countries over the last two decades.

Despite years of policy initiatives designed to achieve it, research revealed by a collaboration between Warwick Medical School and University College London Institute of Child Health (ICH) concludes that despite numerous government policy initiatives designed to achieve a reduction in child maltreatment, none has proved successful.

The study used three types of child maltreatment indicators; violent deaths in children, injuries related to maltreatment, and involvement with child protection agencies.

The indicators were gathered from health and child protection agencies, and compared trends in children under 11 across six states and countries, England, Sweden, New Zealand, Western Australia, Manitoba (Canada) and the USA.

The study found large variations between the countries and states in the frequency of involvement with child protection agencies, but little difference between the rates of maltreatment-related injury

These broad findings however mask individual variations within and between countries. Previous research from the University of Warwick has demonstrated a decrease in violent deaths of infants and children in the UK over a similar time period.

Dr Peter Sidebotham, from Warwick Medical School and co-author of the paper, explained:  “Currently, in the UK, at least 50 children and young people die each year as a result of child maltreatment and many more suffer ongoing abuse or neglect within their homes.

While a lot has been done and continues to be done to protect the most vulnerable members of our community, there is no cause for complacency.

“This current research emphasises the need for governments to invest in early intervention to tackle the root causes of maltreatment, and for professionals, statutory and voluntary organisations to work in partnership with families to support parents and to intervene where necessary to prevent children suffering.”

Professor Ruth Gilbert, professor of clinical epidemiology, ICH said: “Our results suggest the need to focus on preventing factors that contribute to child maltreatment, in order to substantially reduce rates of child maltreatment in the future.

“For too long, policy has been driven by high profile deaths of individual children. We need to invest in population-based data to inform policy and to monitor trends.

We also need to be able to link health and social care data to understand which professionals are seeing these children. Such linkage is done in Western Australia and Manitoba, where it is proving to be an important tool in the formulation of child health policy.”

The funding for the study was provided by organisations including the Department of Health for England and the Manitoba Centre for Health Policy.

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