Table 1: Summary table of recommendations for the prevention of child maltreatment			
Manoeuvre	Effectiveness	Level of evidence*	Recommendation*
Screening			
Approaches used to identify families at high risk for child maltreatment	High false-positive rates; high risk of mislabelling people as potential child abusers	Cohort study ^{5,14} (II–2), cross-sectional survey ¹³ (III)	No additional evidence to alter recommendation (D) in 1993 update ¹
Prevention			
Programs aimed primarily at preventing physical abuse or neglect, or both			
Home visitation by nurses during perinatal period through infancy for first-time mothers of low socioeconomic status, single parents or teenaged parents	Decreased number of reports of child abuse and neglect and of health care encounters for injuries and ingestions in intervention group	RCTs ¹⁹⁻²¹ (I)	Good evidence to include referral in the periodic health examination for home visitation by nurses (A)
Comprehensive health care program†	Increased number of reports of neglect in intervention group; no effect on number of reports of child physical abuse	RCT ⁵	Insufficient evidence to include referral in the periodic health examination for prevention of child maltreatment (C)
Parent education and support program†	Decreased number of reports of child abuse and neglect in intervention group	Controlled trial ²⁵	Insufficient evidence to include referral in the periodic health examination for prevention of child maltreatment (C)
Combination of home-based services, including case management, education and psychotherapy†	Decreased number of visits to emergency department in intervention group	Controlled trial ²⁶	Insufficient evidence to include referral in the periodic health examination for prevention of child maltreatment (C)
Programs aimed primarily at preventing sexual abuse			
Programs for children aimed at preventing sexual abuse and abduction	Improved knowledge of sexual abuse and enhanced awareness of safety skills; no studies have determined effectiveness of programs in reducing incidence of sexual abuse or abduction	RCTs ²⁹⁻³⁵ (I)	No additional evidence to alter recommendation (C) in 1993 update ¹

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Note: RCT = randomized controlled trial.

*See Appendix 1 for definitions of the levels of evidence and grades of recommendations.

†This report examined use of the manoeuvre in relation to the prevention of child maltreatment and associated outcomes. There may be other health conditions for which this intervention is effective, or other reasons for recommending its use.