Child protection in the medical field – problems and necessities

Prof. Jörg M. Fegert
ESCAP, Vienna, 02.07.2019
1) Prevalence of Child Maltreatment in Germany

2) Dealing with Child Maltreatment in the Medical and Therapeutic Field

3) Protection concepts for prevention and intervention

4) Summary
Conflicts of Interest

In the last 5 years the author received

• **Research funding** from EU, DFG, BMG, BMBF, BMFSFJ, Ländersozialministerien, Landesstiftung BaWü, Päpstliche University Gregoriana, Caritas, CJD

• **Travel grants and sponsoring** from DFG, AACAP, NIMH/NIH, EU, Goethe Institut, Pro Helvetia, Adenauer-, Böll- und Ebert- Stiftung, Shire, professional associations, Universities and Ministries

• **No presentations sponsored by industry**, „speakers bureau“

• **Clinical trials and consultancy work** for Servier, BMBF, Lundbeck

• **Annual declaration of conflicts of interest** for DGKJP and AACAP

• **No shares, no involvement in pharmaceutical companies**
External fund

Funding in the last five years: percentages

- 58% federal funds
- 17% foundations, other
- 15% state ministries
- 7% EU
- 1% DFG/SFB
- 2% companies, other
Projects in the field of child protection

Past five years

- 55% Projects in the field of child protection
- 45% Projects in other fields
Prevalence of Child Maltreatment in Germany
Forms of Child Maltreatment

Acts of Omission (Neglect)
- Failure to Provide
  - Educational neglect
  - Dental/medical neglect
  - Emotional neglect
    - Ignoring
  - Physical neglect
    - Nutrition
    - Hygiene
    - Shelter
    - Clothing

Acts of Commission (Child Abuse)
- Failure to Supervise
  - Inadequate Supervision
  - Exposure to violent Environments
- Sexual Abuse
  - Noncontact sexual abuse
  - Abusive sexual contact
  - Sexual acts
- Physical Abuse
  - Intentional use of physical force against a child that results in, or has the potential to result in, physical injury
- Emotional Abuse
  - Terrorizing
  - Isolating

(Leeb et al., 2008)
Child maltreatment in Germany: prevalence rates in the general population

Andreas Witt, Rebecca C. Brown, Paul L. Plener, Elmar Brähler, and Jörg M. Fegert

Abstract
Background: Child maltreatment and its consequences are considered a major public health problem. So far, there is only one study from Germany reporting prevalence rates on different types of maltreatment.

Methods: A representative sample of the German general population was examined for experiences of child maltreatment. A total of 2,510 participants, comprising random samples of age groups ranging from 6 to 79 years, were interviewed using computer-assisted personal interviews. Emotional maltreatment was the most frequent type of maltreatment (16.6%), followed by neglect (5.3%) and physical violence (3.3%).

Results: Prevalence rates for child maltreatment were determined using logistic regression analyses. The highest rates were found in participants aged over 70 years, with the largest difference between age groups reported for physical neglect. Participants who reported childhood maltreatment were more likely to be unemployed or have lower educational outcomes. The most common combination of maltreatment types was physical and emotional neglect, all five types of maltreatment combined and physical and emotional neglect and physical abuse combined.

Open Access: www.capmhh.com
Prevalence of Child maltreatment in Germany

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Abuse</td>
<td>10.4%</td>
<td>18.6%</td>
</tr>
<tr>
<td></td>
<td>3.0%</td>
<td>15.0%</td>
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<tr>
<td></td>
<td>1.6%</td>
<td>4.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2016</th>
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</thead>
<tbody>
<tr>
<td>Physical Abuse</td>
<td>12.1%</td>
<td>6.5%</td>
</tr>
<tr>
<td></td>
<td>6.5%</td>
<td>6.3%</td>
</tr>
<tr>
<td></td>
<td>2.8%</td>
<td>2.6%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2010</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Abuse</td>
<td>12.6%</td>
<td>6.3%</td>
</tr>
<tr>
<td></td>
<td>4.4%</td>
<td>5.3%</td>
</tr>
<tr>
<td></td>
<td>1.9%</td>
<td>2.3%</td>
</tr>
</tbody>
</table>

N=2,510

Legend:
- **severe-extrem**
- **moderate-severe**
- **low-moderate**
Prevalence of Child maltreatment in Germany

![Graph showing prevalence of child maltreatment in Germany]

- Emotional Neglect:
  - 2010: 35.6% (low-moderate: 14.0%, moderate-severe: 7.1%, severe-extrem: 6.6%)
  - 2016: 27.2% (low-moderate: 13.3%, moderate-severe: 6.2%, severe-extrem: 7.4%)

- Physical Neglect:
  - 2010: 19.7% (low-moderate: 28.8%, moderate-severe: 18.0%, severe-extrem: 13.5%)
  - 2016: 19.3% (low-moderate: 22.6%, moderate-severe: 13.5%, severe-extrem: 9.1%)

N=2,510
Prevalence of Child maltreatment in Germany

• About 31% of the population has experienced at least one type of maltreatment with at least moderate severity.

• 47% of those who reported any type of maltreatment, reported multiple maltreatment.
WHO: European report on preventing child maltreatment

In Europe:

- 18 million children affected by sexual abuse
- 44 million children affected by physical abuse
- 55 million children affected by emotional abuse

➤ WHO assumes that 90% of all cases of abuse are not perceived by the institutions

- Adverse childhood experiences have serious, far-reaching (sometimes lifelong) consequences.
- Experienced child abuse has an influence on educational and career prospects.
Consequences of Maltreatment

Maltreatment and Developmental Diagnostic Domains

PTSD Symptoms

Infancy
- Attachment Disorders
  - Internalizing Disorders:
    - Separation-Anxiety Disorder
    - Dysthymia
    - Chronic PTSD
    - Major Depression
  - Externalizing Disorders:
    - ADHD
    - Oppositional Defiant Disorder
    - Suicide Attempts

Increased Risk to Maltreat One’s Children

Cognitive & Learning Disorders
- Pervasive Developmental Disorder Symptoms
- Poor School Performance

Conduct Disorder
- Alcohol & Drug Abuse

Personality Disorders

DeBellis, 2001
Economic Burden of Maltreatment

USA
- 56 Billion $/year
- 217 $/person/year
(Fang et al., 2012)

Germany:
- 11 – 30 Billion € / year
- 135 – 360€ / person / year
- 0,44% - 1,2% of the GDP
(Habetha et al. 2012)
Child Maltreatment: an important issue in the medical and therapeutic field

• Consistently high prevalence of child abuse

• High probability that professionals in the medical and therapeutic field will meet affected children and adolescents in their working context

• Health professionals are privileged first contact persons for affected children and adolescents

➢ Child protection is an important issue for the medical and therapeutic field
Child Maltreatment: an important issue in the medical and therapeutic field

- Hospitals and other medical facilities can also be scenes of (child) abuse.
- Therefore, it is necessary to develop concepts for safety and security (of children) in institutions.
Child maltreatment by nursing staff and caregivers in German institutions: A population-representative analysis

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## Child maltreatment by nursing staff

### Institutions:
- hospitals, rehabilitation centers, facilities for the disabled

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Abuse</td>
<td>• Beating, rough handling during care measures or the like&lt;br&gt;• Coercive measures</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>• Humiliated, insulted, threatened or intimidated&lt;br&gt;• Passing on information &quot;behind the back&quot; that had been said in confidence</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>• Without penetration&lt;br&gt;• With penetration</td>
</tr>
<tr>
<td>Neglect</td>
<td>• Not interested in how I was doing&lt;br&gt;• Did not take sufficient care&lt;br&gt;• Did not take good care</td>
</tr>
</tbody>
</table>
Child maltreatment by nursing staff

Child maltreatment during inpatient stay in hospitals, rehabilitation centers or facilities for the disabled by a nurse/nurses (f/m)

<table>
<thead>
<tr>
<th>Type of Abuse</th>
<th>Female (%)</th>
<th>Male (%)</th>
<th>Total (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>9.3</td>
<td>11.9</td>
<td>10.4</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>10.3</td>
<td>10.2</td>
<td>10.3</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>0.3</td>
<td>1.4</td>
<td>0.8</td>
</tr>
<tr>
<td>Neglect</td>
<td>10.9</td>
<td>14.3</td>
<td>12.3</td>
</tr>
</tbody>
</table>

N=544
Numbers of experienced maltreatment forms

- 1: 7.5% female, 11.2% male, 11.2% total
- 2: 5.2% female, 6.5% male, 5.2% total
- 3: 4.2% female, 3.3% male, 3.8% total
- 4: 0.0% female, 0.4% male, 0.0% total

N=504
Dealing with Child Maltreatment in the Medical and Therapeutic Field
Who reports?

- Police, law: 22.1%
- School, Day Care: 12.9%
- Neighbours, etc.: 11.9%
- Anonymous: 10.4%
- Medical field: 6.6%

Source: [http://www.krimq.de/drupal/node/516](http://www.krimq.de/drupal/node/516)
Legal situation

• In contrast to many anglo-saxon countries Germany does not have mandatory reporting

• Professionals are authorized to share information with child protection agencies, but are not obliged to do so

➢ Bundeskinderschutzgesetz (federal child protection law)
Legal Situation – stepped approach and right on external consultation

In case of suspected Child Maltreatment

Step 1
Considering own means and resources in risk assessment and risk prevention

Step 2
Working towards a utilization of services of the caregivers

Step 3
Authorization to break confidentiality and inform CPS, if:
- action is urgently required
- caregivers are not willing or incapable to participate in risk assessment and risk prevention

Right to anonymously consult child protection professional

If action by Child protection Services is needed for risk prevention
Challenges in dealing with child abuse

• Often uncertainties in the specific case
  • conversational skills
  • further course of action
  • cooperation with other actors in child protection

➤ Assistance in form of specific counselling and qualification is necessary

• Politicians have attempted to encounter these uncertainties with a statutory right to counselling by specialists placed in youth welfare services.

• An evaluation of this law has shown that there is hardly any use of it and many health professionals are unaware of their right for advice.
Evaluation of the Federal Child Protection Law

Need for a better cooperation between Child Protection Services and health sector

- Different „languages“
- Barriers in communication

Insecurities due to:

- Little experience in cases of child maltreatment
- Little knowledge about the legal situation (§ 4 KKG)
- Role of the child protection professional is not known
Qualification and counselling

Qualification:

➢ Online-course “Child protection in the medical field – a basic course for all health professionals”

(https://grundkurs.elearning-kinderschutz.de)

Counselling:

➢ Medical Child Protection Hotline
(24/7 telephone counselling service)
Feedback Loop

- Cases that have been advised are processed as learning materials for the online course.

Box 12. Child protection hotline for health professionals in Germany [Medizinische Kinderschutzhotline]

A national child protection telephone hotline for health professionals, "Medizinische Kinderschutzhotline" (139), was established in Germany in 2017 to improve communication and data-sharing between health professionals and children’s services. It is funded by the Federal Ministry for Families, the Elderly, Women and Youth and is staffed by trained physicians and other professionals all day, every day.

Staff provide advice on interpretation of injuries or behavioural problems, documentation of injuries, the legal framework regarding breach of patient confidentiality and information on how to discuss concerns with parents, and link health professionals to local support services. Cases are discussed anonymously and responsibility for the suspected case remains with the health professional making the call. Evaluation of the intervention found that the support offered by the hotline and its interdisciplinary professional composition is valued by service users. Demand for the hotline is particularly high for professionals working in emergency medicine.

The hotline team has developed an e-learning course, funded by the Federal Ministry of Health, to increase training of health professionals in child protection. A feedback loop ensures difficult cases are discussed regularly by the hotline team and incorporated into the course, in addition to articles targeting health professionals.

Key elements of the hotline’s success include high accessibility, wide publicity about availability and details of the service, and its targeting of the broad range of health professionals who have regular contact with children to raise awareness of child protection issues.
Protection concepts for prevention and intervention
Protection concepts for prevention and intervention

• Discourses on prevention and development of such concepts since the 1990`s (Conen 1995; Enders 1995)

• 2002: Handbook Sexual Abuse by Professionals in Institutions (Fegert & Wolff)
„Missbrauchsskandal 2010“ – a turning point in the debate

Round table “Child sexual abuse”

Independent Commissioner
Abuse in medical and therapeutic settings

Four groups:

• Abuse as a child (one time)
• Abuse in various settings, including medical-therapeutic setting
• Abuse as a child/young person, as an adult abuse in the context of a therapy to process the abuse in the childhood/youth
• Abuse as an adult in the context of therapy for the first time
Protection concepts for prevention and intervention

- Every institution holds potential risk factors for violence and sexual assaults.
- In medical institutions clients are in a particularly vulnerable situation.

A “Protection concepts for prevention and intervention” ...

- ...is a system of specific measures that provide better protection for girls and boys (against sexual abuse and violence) in an institution.

- In its final report, the Round Table “Child sexual abuse” defined components for such an approach, which must be, however, further developed and adapted specifically by each institution itself to its own context.
Summary
Summary

• High prevalence of child maltreatment in Germany

• High probability that professionals in the medical and therapeutic field will meet affected children and adolescents in their working context

• Many uncertainties in dealing with such cases

• Hospitals and other medical facilities can also be scenes of (child) abuse

Therefore are necessary:

⇒ Specific qualification and counselling

⇒ Development of Protection concepts for prevention and intervention
Thank you for your attention!