# **Knowing the Facts** *for Military Families*



# Child Maltreatment in Civilian & Military Families: Understanding the Research

# Risk and Protective Factors for Child Maltreatment

Child maltreatment can be experienced in families of all kinds, including military families. Understanding risk and protective factors for child maltreatment in both military and civilian populations is important for informing the planning, implementation, and evaluation of preventative intervention efforts to reduce child maltreatment.

- **Child factors:** Young children, especially those under five years of age, and children with physical or developmental disabilities are at increased risk for child maltreatment.
- Parent factors: Parents who are young, unemployed, unmarried, recipients of government assistance, and less highly educated are at an increased risk for perpetrating child maltreatment. High stress, poor mental health, and substance use can also put parents at increased risk.
- **Family factors:** Families experiencing economic hardship (e.g., lower household income, housing insecurity) and intimate partner violence are at greater risk, as are families with more children.
- Military-specific factors: Military families have access to supports and services (e.g., parenting programs, steady income and housing, health benefits) that may reduce the risk for child maltreatment. However, military-specific stressors (e.g., deployment, combat exposure), as well as related mental health concerns, may increase military families' risk for child maltreatment.

# Preventative Interventions for Child Maltreatment

Preventative interventions are programs that intervene to prevent child maltreatment or the negative long-term consequences. These programs can intervene prior to the occurrence of child maltreatment (i.e., proactive) or after child maltreatment occurs (i.e., reactive). Proactive programs aim to prevent child maltreatment in either whole populations (i.e., universal) or among at-risk families (i.e., targeted). Reactive programs aim to prevent reoccurrence or child impairment following child maltreatment.

Proactive Programs

Prevent Occurrence (Universal, Targeted)

Reactive Programs

Prevent Reoccurrence Programs

Prevent Impairment

# **Universal Preventative Interventions**

**Community-based programs:** encourage and enable families, community members, and community institutions to support families and share responsibility for child safety

**School-based programs:** primarily aim to prevent child sexual abuse specifically, typically via child education **Primary care programs:** offer services and provide education to a wide range of parents and families

### **Targeted Preventative Interventions**

**Home visiting programs:** professionals or paraprofessionals provide in-home education, services, and resources to at-risk families

**Early childhood care and education programs:** provide childcare services, parent and child education, and often home visits to at-risk families with young children

**Parent education programs:** focus on parent education as the primary goal of the program and seek to improve parenting in order to reduce maltreatment risk

### **Preventative Interventions for Reducing Reoccurrence**

**Parent psychotherapy program**: improve parent mental health and increase health-promoting behaviors in order to reduce risk for child maltreatment reoccurrence

**Home visiting programs:** professionals or paraprofessionals provide in-home education, services, and resources to families who have experienced maltreatment

**Parent training programs**: teaches parents positive parenting skills and behaviors and improves parent-child relationships in an intensive group or individual format

# **Preventative Interventions for Reducing Child Impairment**

**Child psychotherapy programs**: build child strengths, promote resilience, and reduce symptoms resulting from maltreatment to improve child outcomes

**Foster care and related programs:** place children in out-of-home care to remove them from risk of further maltreatment and ensure that foster care is high-quality and nurturing

### **Military-Specific Preventative Interventions**

**Post-Deployment Readjustment:** The majority of military-specific programs aim to promote healthy adjustment and family relationships post-deployment, such as the After Deployment: Adaptive Parenting Tools (ADAPT), Child Parent Relationship Therapy (CPRT), Families OverComing Under Stress (FOCUS), and Zero to Three-Babies on the Homefront programs.

**Child Maltreatment:** One program, the New Parent Support Program (NPSP) was developed for families at high risk for child maltreatment and has been shown to effectively reduce maltreatment rates among Army mothers.

Overall, several programs have been shown to positively impact risk factors for child maltreatment and some have shown reductions in child maltreatment rates; however, much more research is needed on the effectiveness of preventative interventions for child maltreatment. It is important to understand the current research regarding effectiveness of these programs, the factors that may influence effectiveness, and costs and benefits of different types of preventative interventions. While several programs exist to reduce child maltreatment and its associated

For more information, see the full report, *Child Maltreatment in the Military: Understanding the Research,* at https://reachmilitaryfamilies.umn.edu/research/document/13589

risk factors and negative consequences, few have been thoroughly evaluated. In particular, studies assessing the effectiveness of these programs on outcomes directly related to rates of child maltreatment (e.g., FAP or CPS reports, injuries related to child maltreatment) are necessary. Overall, a knowledge of the current preventative intervention research, including effective programs and factors that enhance program effectiveness, must inform future efforts to reduce military child maltreatment.





