

Preventative Programs for At-Risk Families of Child Maltreatment: Using Home Visiting and Intergenerational Relationships

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Abstract : One in three children in the United States is a victim of a maltreatment investigation, and about one in nine children has a substantiated investigation. Home visiting is one of several preventative strategies rooted in an early childhood approach that fosters maternal, infant, and early childhood health, protection, and growth. In the United States, 88% of states report administering home visiting programs or state-designed models. The purpose of this study was to conduct a systematic review on home visiting programs in the United States focused on the prevention of child abuse and neglect. This systematic review included 17 articles which found that most of the studies reported optimistic results. Common across studies was program content related to (1) typical child development, (2) parenting education, and (3) child physical health. Although several factors common to home visiting and parenting interventions have been identified, no research has examined the common components of manualized home visiting programs to prevent child maltreatment. Child maltreatment can be addressed with home visiting programs with evidence-based components and cultural adaptations that increase prevention by assisting families in tackling the risk factors they face. An innovative approach to child maltreatment prevention is bringing together at-risk families with the aging community. This innovative approach was prompted due to existing home visitation programs only focusing on improving skillsets and providing temporary relationships. This innovative approach can provide the opportunity for families to build a relationship with an aging individual who can share their wisdom, skills, compassion, love, and guidance, to support families in their well-being and decrease child maltreatment occurrence. Families would be identified if they experience any of the risk factors, including parental substance abuse, parental mental illness, domestic violence, and poverty. Families would also be identified as at risk if they lack supportive relationships such as grandparents or relatives. Families would be referred by local agencies such as medical clinics, hospitals, schools, etc., that have interactions with families regularly. The aging community would be recruited at local housing communities and community centers. An aging individual would be identified by the elderly community when there is a need or interest in a relationship by or for the individual. Cultural considerations would be made when assessing for compatibility between the families and aging individuals. The pilot program will consist of a small group of participants to allow manageable results to evaluate the efficacy of the program. The pilot will include pre-and post-surveys to evaluate the impact of the program. From the results, data would be created to determine the efficacy as well as the sufficiency of the details of the pilot. The pilot would also be evaluated on whether families were referred to Child Protective Services during the pilot as it relates to the goal of decreasing child maltreatment. The ideal findings will display a decrease in child maltreatment and an increase in family well-being for participants.

Keywords : child maltreatment, home visiting, neglect, preventative, abuse

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