Academic Newsletter
Child Advocacy and Assessment Program (CAAP)

The Child Advocacy and Assessment Program (CAAP) has been in existence at McMaster Children’s Hospital since January 1993. This specialized service is focused on reducing the burden of suffering associated with child maltreatment through the provision of clinical services, education and research. The interdisciplinary team was first established as a result of the dedication and insight of Dr. Harriet MacMillan. CAAP has grown over 20 years. In addition to pediatricians and a child psychiatrist, the team currently includes two child life specialists, a pediatric nurse, a social worker, two psychologists, a research scientist and two administrative assistants. Since 2011, CAAP has expanded its services to meet the needs of children requiring urgent assessments for suspected child maltreatment, but doing so outside the emergency department whenever possible. CAAP has been able to achieve this goal with the support of Drs. Burke Baird, Elisabeth Canisius, Kristen Hallett, Nura Hawisa, Harriet MacMillan, Anne Niec, Sandi Seigel, Frank O’Toole, Shobha Wahi and most recently, Lucy Giglia. These pediatricians provide easy and quick access and expert opinion to address the needs of this population.

Child maltreatment is a major public health issue that should be of relevance to all pediatric clinicians. Through assessment, consultation, community liaison, and court work, CAAP provides a model of care to address the multiple and complex issues associated with exposure to maltreatment. Referrals to CAAP are received from in-patient areas, outpatient areas and community clinicians. CAAP’s primary goal is to advocate on behalf of children focusing on their best interests first and foremost.

Clinical Coverage
1. Child maltreatment assessments
2. Impact of child maltreatment
3. Parenting capacity assessment
4. Intervention services
5. Sexual abuse/assault services
6. Pediatric medical care clinic

Three Things that you may not know about Child Maltreatment

1. Adolescent violence victimization is linked with mental health problems, and is substantially elevated among those who are involved with Child Protective Services (Tanaka, Wekerle et al., Child Abuse & Neglect: The International Journal, 2011). The Maltreatment and Adolescent Pathways (MAP) Longitudinal Study (C. Wekerle, Principal Investigator; H. MacMillan, M. Boyle, Co-investigators) targeted the adolescent years of transitioning out of Ontario Children’s Aid Society services to either a return to caregivers or independent living. Physical, sexual, and mental health, as well as violence experiences and resilience factors were assessed on randomly selected teens from an urban centre (N=561). Bullying victimization in high school was attributable to maltreatment history in both boys and girls. While maltreatment was historical for these child-welfare involved adolescents, youth reported elevated trauma symptoms as early adolescents and these, in turn, accounted for substance abuse and dating violence involvement. Teens with high self-compassion scores also reported more resilience, better mental and perceived physical health, and less substance use. A positive school climate acts as a moderator of maltreatment in predicting youth positive health. Later adolescents showed a higher prevalence of safe, stable housing issues, highlighting the need to support youths across young adulthood in their transitioning from the child welfare resources, caseworker support, and financial allowance in an effort to optimize health, education, and financial well-being across adulthood.


2. Neglect is associated with some of the worst outcomes for children in terms of physical and emotional health, even in comparison
with other forms of abuse. (Dubowitz & Poole, Encyclopedia on Early Child Development, 2012). For example, upon release from care, neglected children are likelier than physically abused children to be returned to care. Moreover, in comparison with physically abused children, neglected children's language skills and academic functioning are more severely compromised (Child Neglect: A Guide for Prevention, Assessment, and Intervention, 2006. Office on Child Abuse and Neglect, Children's Bureau.)

3. The Nurse Family Partnership program is one of the few interventions that has been shown effective in preventing child maltreatment (MacMillan et al., Lancet 2009 http://www.ncbi.nlm.nih.gov/pubmed/19056113). The NFP is available in Hamilton on a pilot basis and is about to be evaluated within the Canadian context in a province-wide trial in British Columbia. Of note, a program of nurse home visitation for families involved with child protection services evaluated in Canada was not effective in preventing recurrence of child physical abuse and neglect among families involved with the child welfare system; this negative trial and high recurrence rate emphasize the importance of early intervention (MacMillan et al., 2005 http://www.ncbi.nlm.nih.gov/pubmed/15910951).

Three highlights of academic activities

1. **PreVAil Research Network (Preventing Violence Across the Lifespan):** Dr. MacMillan is co-principal investigator (Dr. Wekerle, co-investigator) of a CIHR-funded international collaboration that has three main objectives: (1) to increase understanding and knowledge about the links between mental health impairment, gender and exposure to child maltreatment and intimate partner violence (IPV), both in Canada and internationally, (2) to develop interventions to prevent or reduce child maltreatment, IPV and subsequent mental health problems, and (3) to develop and promote an integrated research and knowledge translation agenda among a network of established, new and emerging investigators and key stakeholders. PreVAIL brings together investigators, policy makers and stakeholders at the national and international level including 16 partners such as the World Health Organization (WHO) Violence Prevention Alliance (VPA), CDC, the Public Health Agency of Canada and the Mental Health Commission of Canada. This Centre represents the first of its kind globally and promises to change approaches to the prevention of family violence. To read more about this exciting Centre, the work they are doing and recent accomplishments please see www.prevailresearch.ca.

2. **Knowledge Translation Projects:** CAAP has an active role locally, provincially and at the national and international levels. We would like to recognize initiatives in resilience and maltreatment (funding from CIHR; Ontario Centre of Excellence in Child and Youth Mental Health, Ontario Ministry of Child and Youth Services; C. Wekerle, Principal Investigator; H. MacMillan, Co-investigator), with a new initiative partnering between CAAP and McMaster Museum of Art for education on maltreatment (Ontario Centre of Excellence in Child And Youth Mental Health – development grant (C. Wekerle); Royal College Grant, under review; C. Wekerle, Principal Investigator; A. Niec, J. Zazulak, Co-Investigators) that includes McMaster medical students in the investigator team. To date, 4 peer-reviewed conference posters have gone forward in collaboration with a team of McMaster medical undergraduates.

3. **Advocacy Activities:** CAAP members are involved with the AAP Committee on Child Abuse and Neglect (Dr. MacMillan); the Helfer Society (an international group of invested child abuse clinicians) (Drs. Baird, MacMillan and Niec), the Canadian National Group of Child Abuse Experts (Drs. Niec and Baird). Drs. Wekerle and MacMillan serve on the Editorial Board of *Child Abuse & Neglect: The International Journal*, where Dr. Wekerle also serves as Senior Associate Editor, and Editor, Practical Strategies. Additionally, Editorial Boards of other journals are noted (Dr. Wekerle – Child Abuse Review, Journal of Criminology, International Journal of Mental Health and Addiction; and Dr. MacMillan – Canadian Journal of Psychiatry). Dr. Wekerle is launching a new journal in September, the International Journal of Child and Adolescent Resilience, as well as a researcher supporting the Networks of Centre of Excellence in Children and Youth in Challenging Contexts, housed at Dalhousie University.