

Pediatric mistreated child care paths: criteria for hospital care

Or... Do abused children have a place in a hospital setting?

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Introduction

There are clinical situations relating to child mistreatment which require a medico-psycho-social assessment in the hospital **BUT** the hospital is not a place for a child to live!

It is therefore essential to establish strict criteria for these pluridisciplinary evaluations of abused children et their family.

Hospitalization criteria

- Failure of a **prior outpatient** assessment
- The physical and / or psychological **danger to which the child is exposed at home**, thus preventing any possible outpatient work.
- The need for the child to be supported in a multidisciplinary manner in **a neutral environment** in order to free and respect his word without any contamination or possible influence.
- The need for intensive care both individually and in terms of **family dynamics** for which the **various hospital specialties** are required.
- The need for a strict framework allowing effective **parental collaboration**.
- **The lack of a reception structure currently available** from which care could be taken.

Results

The Cellule Maltraitance pediatric unit of the CHU Liège pediatric service, provides this type of care. An assessment can be initiated according to three different care paths identified as follows:

- The request for a hospital assessment by the SAJ or the Justice Department.
- The arrival of the child via the emergency room.
- Screening for a situation of child abuse diagnosis in the pediatric ward

Around 50 to 60 assessments are carried out per year within the Cellule Maltraitance service. On average, we observe:

- - 53% physical abuse
- - 14% sexual abuse
- - 11.5% serious neglect –
- 21.5% psychological abuse, parental conflicts. The required hospital stay is rarely exceeded (less than 5%).
- On average, the orientation given is 70% return to the family and 30% long-term placement orientation

conclusion

Child abuse is a pediatric pathology in its won right which must be able to be taken care of in its entirety, by specialized teams taking into account hospitalization criteria but also the notion of child protection.