

Child, parent and contextual factors associated with child protection system involvement and child maltreatment in the family: A rapid evidence review

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Abstract

Child abuse and neglect in the home is a prevalent and significant issue in Australia. Recent findings from the Australian Child Maltreatment Study revealed that 62.2 per cent of participants had experienced at least one type of maltreatment during childhood, with most reporting multi-type maltreatment. This rapid evidence review was aimed at understanding factors associated with child abuse and neglect in the family context. Results from the included studies indicated that there is a complex interplay between various child-related factors, parent or family characteristics and contextual factors in understanding child maltreatment. Implications for a reliance on proxy measures of child maltreatment, including involvement with child protection systems, are also considered. A key finding across the included studies was that parent characteristics were consistently identified and should be a key target for prevention. Further research is needed to explore the role of parenting capacity and skills in the prevention of harm, the intersection between associated factors, how protective factors and strength-based approaches can inform prevention efforts and how policies and practices can be designed to appropriately address this issue.

KEYWORDS

child abuse and neglect, child maltreatment, family, prevention

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1 | INTRODUCTION

To date, there is no international consensus on the definition of child maltreatment (Rumble et al., 2018), or the appropriate use of terminology, which is partly affected by differing laws and legal frameworks across jurisdictions. The term “child maltreatment” has been generally accepted in the international literature as it encompasses all types of abuse and neglect, including both acts of commission and omission (Tran et al., 2018). We adopt here the definition used in the Australian Child Maltreatment Study (ACMS) (Mathews et al., 2020); “child maltreatment is an act of commission (doing something) or omission (failing to do something) by a parent or caregiver that has caused or has the potential to cause harm to a child or young person” (McCoy & Keen, 2013; Rivera et al., 2018).

In child maltreatment research, up to five broad types of abuse and neglect are typically addressed: sexual abuse, physical abuse, emotional abuse, neglect and exposure to domestic violence (Mathews et al., 2021). In the past, the impacts on children witnessing or being exposed to domestic violence were minimised (Richards, 2011). In child protection systems across Australia, exposure to domestic violence is typically not defined in legislation as its own harm type, but is typically included within the operational definitions of the harm type of emotional abuse (except in the case of New South Wales and Tasmania in which there is mention of exposure to domestic violence as a distinct category that warrants child protection; Child Family Community Australia, 2016). Exposure to domestic violence has more recently been identified as a distinct type of child maltreatment (AIFS, 2017, 2018).

Annual reports on the number of children coming to the attention of statutory child protection authorities from all state and territory child protection departments show that child sexual abuse substantiations have grown significantly (from 30,500 in 2001–2002 to 69,805 in 2019–2020); there is variability in state and territory definitions and thresholds for intervention, and co-occurrence of harm types are often invisible (AIHW, 2022). For example, in cases of child sexual abuse, it may be easier to document and substantiate another harm type (AIHW, 2022). Grounds for intervention by child protection authorities are subject to several factors but are often restricted to cases in which parents are unwilling or unable to protect, which excludes cases in which an adult perpetrator has left the child's home, cases of online sexual exploitation, cases of extra-familial sexual abuse and cases of children's harmful sexual behaviour in which parent(s) or caregiver(s) act protectively once they are aware of the abuse (Australia Government Department of Social Services, 2021). Many studies of child maltreatment rely on retrospectively interpreting results of administration data from child protection systems. This means that it is difficult to make conclusions about the rates of children's exposure to harm and factors associated with an increased likelihood of child maltreatment.

Child maltreatment also rarely occurs in isolation, with most children who have experienced maltreatment, having experienced more than one type (Higgins & McCabe, 2000; Price-Robertson, Higgins, & Vassallo, 2013; Price-Robertson, Rush, et al., 2013). In the research literature, this has commonly been referred to as multi-type maltreatment (Higgins & McCabe, 1998). Recent findings from the ACMS were a sobering picture of the prevalence of child maltreatment in Australia. The ACMS collected data from 8503 adults (aged 16 and over) on their experiences of maltreatment during childhood. Overall, 62.2 per cent reported having experienced at least one type of child maltreatment (Mathews et al., 2023). Concerningly, one in four experienced three, four or all five types of maltreatment during childhood in Australia (Higgins et al., 2023). To drive an agenda for preventing child abuse and neglect that is effective, the government and the community must base strategies on evidence of what factors may be associated with a greater likelihood of maltreatment occurring. Although there is considerable research about such factors associated with maltreatment, our understanding is still limited for several reasons. First, research into associated factors is typically focussed on just one type of maltreatment, ignoring the potential for identifying common areas for action across

different maltreatment types. Second, existing reviews of factors that focus on a particular type of maltreatment do not always distinguish between associated factors that relate to maltreatment occurring in the family and maltreatment that might occur in other community or organisational settings—in which the targets of intervention or strategies for prevention might look different. Third, when considering associated factors, summaries of findings across various studies do not typically differentiate whether the characteristic was increasing the likelihood of exposure to child maltreatment per se, or to involvement with a statutory child welfare authority. Finally, there is no review or synthesis that considers associated factors from an ecological view—categorising factors at the child, family and contextual level.

This review was aimed at understanding what is currently known about associated factors for child maltreatment in the family. Concepts of familial or intrafamilial child sexual abuse, harmful sexual behaviour in young people, filicide or other child maltreatment-related injury or death have also been considered. A rapid review of the evidence revealed that there are several complex factors that contribute to child maltreatment and/or involvement in child protection systems. Taking a biopsychosocial ecological framework approach, the key child factors, parent or family characteristics and contextual factors from these studies have been synthesised to demonstrate the complexity of this phenomenon.

2 | METHODS

The Cochrane Rapid Reviews Methods guidance was used to inform the process for this rapid review (Garritty et al., 2021). The research question that informed this review was as follows: What is known about the factors associated with child maltreatment that occurs in a familial context?

2.1 | Search strategy

A systematic search strategy was designed and involved identifying sets of terms for searches in academic databases: PsycINFO, Medline and SocINDEX. Both searches included terms relating to (1) children; (2) child maltreatment, abuse or violence; (3) prevalence, and drivers, or associated factors; and (4) family or home environment. Appendix 1 shows the first search was limited to studies conducted on Australian populations, whereas the second search was limited to systematic reviews and meta-analyses internationally. The focus in these search terms was important to ensure a manageable number of studies to review and that the results would be relevant to the Australian context, as well as including key findings from the international literature.

The academic databases, PsycINFO, Medline and SocINDEX, were selected based on the aim of collecting a broad range of evidence from both academic publications and grey literature. Each database was searched using the same strategy. PsycINFO and Medline were searched on 15 July 2022, while SocINDEX was searched on 19 July 2022. For PsycINFO, search 1 yielded 67 results, while search 2 yielded 53. In Medline, search 1 yielded 56 results, and search 2 yielded 52. In SocINDEX, search 1 yielded 40 results, while search 2 yielded 29 results.

2.2 | Study screening

After importing the database search results (total of 297) into Endnote, duplicates were removed leaving 181 papers. These papers were then exported into Rayyan, further detecting duplicates, leaving 129 papers to be screened. Papers were screened by one reviewer against

the eligibility criteria (Appendix 2). A second reviewer blind-screened 50 papers, with any disagreements being resolved in discussion. This process left a total of 88 papers to be full-text screened by one reviewer. After each paper was reviewed, we included 52 papers, comprising 50 peer-reviewed journal articles and two “grey literature” reports.

3 | RESULTS

The included studies varied in their measurements of child maltreatment and violence, with the majority having examined a range of maltreatment types. A smaller proportion examined only a specific maltreatment type such as filicide, child exploitation material and harmful sexual behaviours and violence in young people. Much of the research base is correlational and retrospective, finding associations between factors and the presence of child maltreatment or child protection system involvement (or both). We adopt the language of “associated factor” or “factor,” rather than the common use of the terminology “risk factor” in the literature base. This was done to make clear that the identified “factors” are not necessarily causative in nature. This is particularly important when referring to particular population groups, as the “risk” is not intrinsic or inherent within that group. The research was clear that there was no one factor for child maltreatment in the home, but rather it is a complex interplay between a variety of child, parent or family and contextual factors. These factors reflect a complex interplay of systemic issues that may contribute to an increased prevalence of child maltreatment including, intergenerational maltreatment, institutionalisation, disadvantage, racism and disproportionate attention from authorities (McKenzie et al., 2023; O'Donnell et al., 2019; Walter & Suina, 2019).

Appendices 3–6 provide a summary of key findings from the included studies relating to associated factors. With studies largely relying on retrospective analysis of administration data from child protection systems, we have noted whether studies examined these associated factors about the experience of child maltreatment per se, or about the involvement with a statutory child protection service.

3.1 | Child maltreatment vs statutory child protection involvement

This review is limited to the approaches taken by the available data in the included studies. We acknowledge that much of the research in this area has significant limitations and largely takes a deficit-based approach in framing this issue. It was beyond the scope of this review to examine the cultural appropriateness of all of the studies we reviewed. We acknowledge that to uphold the ethical principles for research relating to Indigenous peoples, as outlined in the National Health and Medical Research Council (NHMRC) guidelines and the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) Code of Ethics, those most affected by that research should be in control of that research.

Generally, research to date has not differentiated between factors that might contribute to child protection involvement as opposed to a direct measure of child maltreatment per se (as is the case with self-report prevalence studies). Although there are disparate bodies of research exploring factors associated with the experience of child maltreatment compared with studies exploring statutory child protection involvement, we found no discernible pattern of different factors in the research to date. Further research is needed and would particularly benefit from Indigenous-led research approaches that collaborate with community leaders and organisations (Chamberlain et al., 2019; Thurber et al., 2020). Currently, we can only assume that efforts to address associated factors would positively reduce the prevalence of child maltreatment across the population, as well as the likelihood that families would come to the attention of child protection authorities.

3.2 | Child-level factors

Children from minority groups were overrepresented as victims of child maltreatment or statutory child protection involvement across several of the included studies. In their Australian cohort study, Allard and Hurren (2018) found that Indigenous Australians were seven times more likely to come to the attention of statutory child protection services than non-Indigenous Australians. Similarly, Indigenous children had a 19- to 22-fold greater prevalence of exposure to violence, were more likely to be in care due to their parents being affected by domestic violence, parent illness and disability, sexual abuse and substance abuse and were less likely to be reunified with their family after being placed in care (Fernandez et al., 2019). Indigenous children were overrepresented in the Australian out-of-home care population (approximately 10 times the rate compared with non-Indigenous children; Commissioner for Children and Young People Western Australia, 2014). This issue has highlighted systemic issues in our child protection system, including the increased likelihood of repeating the atrocities of the past and the intergenerational transmission of factors associated with child maltreatment (Chamberlain et al., 2019).

Three studies also examined the experiences of child maltreatment of sexual minority or gender diverse youth (McGeough & Sterzing, 2018; Prior et al., 2021; Schneeberger et al., 2014), and all found that LGBTQIA+ populations had higher prevalence rates of emotional, sexual and physical abuse than their heterosexual peers (McGeough & Sterzing, 2018; Schneeberger et al., 2014). Disclosure of sexual orientation, younger age at first awareness of same-sex attraction and same-sex sexual contact were associated with higher rates of physical and emotional abuse. Children with higher levels of gender non-conformity were more likely to experience sexual and emotional abuse (McGeough & Sterzing, 2018). Transgender and gender-diverse groups were three times more likely to experience all maltreatment types (emotional abuse, physical abuse, sexual abuse, emotional and physical neglect) than their female peers and were over three times more likely to experience emotional abuse, sexual abuse and neglect than their male peers (Prior et al., 2021).

Both physical and intellectual disabilities in children have been shown to be associated with higher rates of child maltreatment, including re-victimisation and familicide in three studies (Fogarty et al., 2022; Kisely et al., 2021; White et al., 2015). One study on families in the child protection system in Australia found that children with mental health problems had a higher likelihood for neglect and physical abuse (Bor et al., 2013). Further research also indicated that low birthweight (below the 3rd percentile) and having two or more health problems before age three were also associated with a higher likelihood of child maltreatment (Doidge et al., 2017; Fogarty et al., 2022; Frederick et al., 2019; Langevin et al., 2021). Families with a child with a disability were also at greater likelihood of statutory child protection involvement as they were more likely to be re-referred (Kaltner, 2013).

Prior maltreatment experiences, such as neglect (White et al., 2015), exposure to family violence (Frederico et al., 2014) or having a history of foster care or group home placements (McKenzie & Scott, 2012; Sinha et al., 2013), were associated with a higher likelihood for further victimisation. Young children seemed to be at a greater chance for most maltreatment types, including traumatic brain injury due to child maltreatment (Ayton et al., 2021), filicide (Brown et al., 2014) and exposure to domestic violence (Dodaj, 2020) and were more likely to be placed in care due to neglect, domestic violence, financial and housing difficulties, parental substance abuse, parental physical illness or disability (Fernandez et al., 2019; Scott, 2015). Children under five were also less likely to be reunified with their birth family after entering care (Fernandez et al., 2019).

Female adolescents were at an overall higher likelihood for witnessing domestic violence, experiencing sexual abuse and being victimised through child exploitation material (Cale et al., 2021; Dodaj, 2020; Sawrikar & Katz, 2018). However, male children were more likely

to experience violent types of maltreatment such as filicide (killed at twice the rate of female children; Brown et al., 2014) and maltreatment resulting in traumatic brain injury (Ayton et al., 2021).

3.3 | Family/parent characteristics

In almost half of the included studies, researchers identified substance abuse as a factor strongly associated with all types of child maltreatment and statutory child protection involvement—including children entering care or being re-referred (Fernandez et al., 2019; Kaltner, 2013; Scott, 2015). De Bortoli et al. (2014) indicated that substance abuse likely influences other characteristics such as stress, attachment and parenting capacity. Having used hard substances in adolescence was strongly associated with inflicting child maltreatment for mothers who had also experienced child sexual abuse, but alcohol use in early adulthood was not (Langevin et al., 2021). Further research is needed to understand the intersection between substance abuse and other associated factors such as domestic violence, mental health, socioeconomic adversity, paternal drug use and polydrug use (De Bortoli et al., 2014).

Domestic violence or interpersonal violence in the home was well-documented as associated with a greater likelihood of other forms of child abuse or neglect, as well as substantiation of harm through child protection investigation, children entering care, child sexual exploitation material victimisation, traumatic brain injury, filicide and other child maltreatment-related deaths (Ayton et al., 2021; Brown et al., 2014; Cale et al., 2021; Fernandez et al., 2019; Frederico et al., 2014; Kim & Merlo, 2021; Sachmann & Harris Johnson, 2014). There was an increased likelihood of child maltreatment in families in which mothers had experienced interpersonal violence and fathers were psychologically abusive, coercive or violent (Ayers et al., 2019; Langevin et al., 2021; Orr et al., 2022). However, it was not always clear who had perpetrated the harm (Ayers et al., 2019).

Parents' own experiences of child sexual abuse (Cale et al., 2021) or family violence (Ayton et al., 2021; Cale et al., 2021; Kaltner, 2013; Meiksans et al., 2021; Montgomery et al., 2019; Sachmann & Harris Johnson, 2014; Sumner et al., 2015; White et al., 2015) were also associated with a higher likelihood of maltreatment for their children. Previous child protection contacts both for parents (“intergenerational” involvement) and for children (either earlier contacts for the same child, or for siblings) were associated with higher likelihoods of further harm (Fogarty et al., 2022; Lennings et al., 2014; McKenzie & Scott, 2012; Schneeberger et al., 2014).

There were mixed results in relation to mental illness as an associated factor, and there was a dearth of research on paternal mental health, with much of the focus being on mothers. One systematic review included paternal mental health and found that of the few studies that did examine fathers, all found an association between fathers' mental health and an increased likelihood of child maltreatment (Ayers et al., 2019). In relation to mothers' mental health, the majority found a significant relationship, with depression being the most common (Brown et al., 2014; Kisely et al., 2021; Langevin et al., 2021; O'Donnell et al., 2015). However, a few studies found no impact, with some studies having unclear results or insufficient data. Ayers et al. (2019) suggested that severe mental illness seems to be related to child maltreatment, but it is unclear the role that mild or managed mental health conditions may play. For example, in one study, once other factors were adjusted for, paternal depression remained a significant predictor for child maltreatment, but maternal depression did not (Ayers et al., 2019). Much of the research in this area has focussed on severe mental health cases, for example, mothers in psychiatric inpatient units, suggesting that further research is needed to understand the role of mental health, particularly in relation to other associated factors and in cases in which the mental health condition may be less severe or is being effectively managed. A few studies also noted physical (Kaltner, 2013) and intellectual disability (Ayton et al., 2021; Kaltner, 2013;

O'Donnell et al., 2015) in parents as an associated factor for inflicting child maltreatment and children entering care.

Parent criminality was also referenced in several of the included studies as being largely associated with child maltreatment and statutory child protection involvement (Allard & Hurren, 2018; Kim & Merlo, 2021; Langevin et al., 2021; McKenzie & Scott, 2012; Meiksans et al., 2021; Schneeberger et al., 2014; White et al., 2015). Austin's (2016) systematic review suggested that there was not sufficient evidence to determine whether parent criminality was an independent factor. However, Austin found that after adjusting for other associated factors, mothers were significantly more likely to neglect their children and be physically aggressive when the father of the children had been recently incarcerated. Parental criminal justice system involvement is likely to increase the likelihood for other factors such as socioeconomic disadvantage, changes in parent relationships, mental health and general adversity that may mediate the relationship between parent criminality and child maltreatment (Austin, 2016).

Female parents were more likely to be seen as responsible for neglect and were seen to be responsible for over half of all cases of child maltreatment (Allard & Hurren, 2018). However, it is important to acknowledge that female parents are commonly assumed to be the "default" parent and more commonly take much of the responsibility of parenting and other care-taking roles. The assumption that female parents are responsible for child rearing can be problematic when child protection systems then associate neglect or maltreatment as being inflicted by the female parent. Rather, it should be acknowledged that both parents or carers are responsible for caregiving, and failure to provide adequate care may reflect a larger issue in a lack of responsibility taken by the other parent or carer in the caregiving role.

Maternal age was identified in several of the included studies; however, there were mixed findings (Langevin et al., 2021). For example, after adjusting for other factors, young maternal age (typically defined as under 20–22) only predicted emotional abuse but was no longer associated with physical abuse and neglect (Doidge et al., 2017). However, Kisely et al. (2021) examined a longitudinal birth cohort of Australian siblings and found that maternal age (under 20 years) was the strongest and most consistent predictor of child maltreatment, with Indigenous status, experiences of poverty, parental relationship and maternal depression as having a smaller association with child maltreatment.

The research was clear that male parents and caregivers (as well as young males in the family) were more likely than women to perpetrate violent and sexual offences (Cale et al., 2021; Gilbert et al., 2022; Purcell et al., 2014; Seddighi et al., 2021), as well as emotional abuse (Austin, 2016). Fathers' lack of involvement, antisocial or aggressive attitudes and behaviours, and/or poor parenting were also associated with an increased likelihood for child abuse and neglect in the home (Ayers et al., 2019; Kim & Merlo, 2021). Indigenous parents and caregivers were consistently overrepresented as experiencing child maltreatment, inflicting harm and involvement with child protection authorities (Allard & Hurren, 2018; Fernandez et al., 2019; Gilbert et al., 2022; Malvaso et al., 2019).

The research consistently found that parents with poor parenting skills were at a greater likelihood for inflicting child maltreatment as well as contact with child protection services (Bor et al., 2013; Dodaj, 2020; Fogarty et al., 2022; Frederick et al., 2019; Langevin et al., 2021; Lennings et al., 2014; O'Connor et al., 2020; Purcell et al., 2014; White et al., 2015). This included parents with authoritarian attitudes or attitudes in support of violence (Langevin et al., 2021), those with harsh parenting practices (O'Connor et al., 2020), poor supervision and hazard exposure, insecure attachment and parents who failed to deal with their child's care needs, including in the case of illness (Frederick et al., 2019). Further research is needed to understand how other factors such as prior maltreatment, experiences of domestic violence, being a young parent, mental illness and disability, educational attainment and substance abuse may influence a parent's skills and capacity.

A small number of included studies examined young people engaging in harmful sexual behaviour (HSB) (McKibbin et al., 2016) and violence (Purcell et al., 2014; Thomas et al., 2019), including in the family context. Both found that most young people engaging in HSB were male, and a significant proportion had a history of child maltreatment (including child sexual abuse, exposure to domestic violence and family conflict) and other challenges (intellectual disability, mental illness, drug and alcohol use, and other behavioural issues; McKibbin et al., 2016; Purcell et al., 2014; Thomas et al., 2019). McKibbin et al. (2016) found that young people with intentional exposure to violent X-rated material and other atypical sexual interests were also at a higher likelihood of engaging in HSB, with an escalation in offending around the age of 12.

3.4 | Structural or environmental factors

Socioeconomic disadvantage and financial stress were referenced in several of the included studies in relation to an increased likelihood for child maltreatment and statutory child protection involvement. However, there were some inconsistent findings. In their systematic review, Conrad-Hiebner and Byram (2020) found that housing instability, income loss and multiple types or higher rates of hardship or disadvantage did reliably predict child maltreatment. However, Hunter and Flores (2021) found that the relationship between socioeconomic disadvantage and maltreatment differed by type of maltreatment. For example, neighbourhood poverty and financial problems were strongly related to neglect, but the association with sexual abuse was not as strong (Hunter & Flores, 2021). Similarly, research on alcohol-related harm to children showed that once parent drinking status and family type were adjusted for, income status was no longer associated with an increased likelihood for maltreatment. Some studies noted that poverty may be related to community norms and attitudes about domestic violence (Baheshmat et al., 2022). Further research is needed to understand this potential relationship.

Housing instability, including homelessness, was strongly associated with child maltreatment and increased the likelihood for child protection involvement (Chandler et al., 2022; Doidge et al., 2017). In a systematic review, Chandler et al. (2022) found that most studies observed a relationship between housing instability and an increased likelihood for child protection reporting as well as child and caregiver self-reports of child maltreatment. There were only two studies included in the systematic review, which found no association between housing instability and child maltreatment. However, these studies used residential mobility as a measure of housing instability, whereas the others used an aggregate measure of material hardship. The results were unclear whether housing affordability and housing stress were related to child maltreatment and/or child protection system involvement. There was considerable variance between studies on how housing instability (and most factors) was measured, suggesting the need for clarity and consistency in further research (Chandler et al., 2022).

There was an association found between single marital status or single-parent households and child maltreatment and child protection involvement (Ayton et al., 2021; Bor et al., 2013; Brown et al., 2014; Dodaj, 2020; Doidge et al., 2017; Kisely et al., 2021; Laslett, Ferris, et al., 2012; Laslett, Room, et al., 2012; Purcell et al., 2014; Timshel et al., 2017; White et al., 2015). Brown et al. (2014) found that over half of filicide cases in Victoria, Australia, involved parental separation and mental illness.

Social factors such as isolation (Ayers et al., 2019; Cale et al., 2021), lack of support for child-rearing, and poor access to services (Ayers et al., 2019; Frederick et al., 2019; Frederico et al., 2014; Seddighi et al., 2021), were related to child maltreatment and statutory child protection involvement. One study examined the impact the COVID-19 pandemic had on families already involved in the child protection system. This research found that the restrictions present during the pandemic may have exacerbated already present factors such as social isolation,

parenting skills, housing concerns, mental health, substance abuse, physical health problems and illness (Fogarty et al., 2022).

Lastly, there were a few studies included that examined countries impacted by natural disaster, conflict, war and violence. They consistently showed an increased likelihood for all types of child maltreatment as well as child protection involvement (Devakumar et al., 2021; Langevin et al., 2021; Loxton et al., 2021; Rubenstein et al., 2020; Seddighi et al., 2021; Sumner et al., 2015). All studies included in Montgomery et al.'s (2019) systematic review found that parents who were exposed to a traumatic event, such as war, conflict, natural disaster, or physical or sexual abuse, were significantly more likely to inflict child maltreatment. Natural disasters may be particularly relevant in the Australian context. Although not included in studies for data extraction, a study on women's experiences of violence following the 2009 bushfires in Victoria, Australia, found that women experienced higher rates of violence following this natural disaster, particularly when their income was also negatively affected (Molyneaux et al., 2019).

4 | DISCUSSION

The present review has consolidated evidence relating to associated factors for child maltreatment in the home. There is some promising research, but further work is needed to understand the complex interplay between various individual factors, parent and family characteristics and contextual factors. One of the most-cited limitations was inconsistency in how maltreatment and associated factors were measured, making it difficult to compare results between studies (Dodaj, 2020; Frederick et al., 2019; Hunter & Flores, 2021; Rubenstein et al., 2020; Schneeberger et al., 2014; White et al., 2015). Many studies also used aggregate categories for measuring child maltreatment, making comparison between associated factors and different types of maltreatment difficult (Hunter & Flores, 2021). Due to the nature of how these data were collected in most studies, understanding the temporal nature of the identified factors and child maltreatment is challenging (Allard & Hurren, 2018; Austin, 2016; Chandler et al., 2022; Hunter & Flores, 2021; Prior et al., 2021).

It is also difficult to make conclusions about the prevalence of child maltreatment and associated factors as studies often rely on small samples and families already involved in the child protection system—to make conclusions about factors associated with child maltreatment (Brown et al., 2014; Fernandez et al., 2019; Kaltner, 2013; Kim & Merlo, 2021; Langevin et al., 2021). Certain groups, including Indigenous Australians, families experiencing socioeconomic disadvantage, single-parent households and families experiencing mental illness or disability, are overrepresented in statutory child protection systems (Ayers et al., 2019; Bor et al., 2013; Chandler et al., 2022; Fernandez et al., 2019; Fogarty et al., 2022; Kaltner, 2013; Meiksans et al., 2021; Sinha et al., 2013). It is important to note that although there are significant associations between these factors and either child protection involvement or child maltreatment in the included studies, this does not mean that the “risk” for child abuse and neglect is inherent. Rather, it reflects a complex interplay between social and structural factors such as racism, ableism, disadvantage and violence that have disproportionately affected families from these groups (Walter & Suina, 2019).

As studies largely relied on retrospective correlational data and assessed factors are highly inter-related, it is difficult to draw conclusions about causal links between factors and child maltreatment in the home. It is likely that other confounding factors were not measured or accounted for that may help explain the association (Austin, 2016; Baheshmat et al., 2022; Chandler et al., 2022). For example, Conrad-Hiebner and Byram (2020) noted that in more than half of the studies included in their review, common factors for housing instability, such as income, substance abuse and mental health, were not measured. When interpreting study outcomes, it is important to consider how certain groups may experience more surveillance

from child protection systems and therefore are more likely to have substantiated cases of harm. For example, Aboriginal and Torres Strait Islanders have been disproportionately affected by systemic racism, intergenerational institutionalisation and maltreatment, and are overrepresented in Australia's child protection systems, likely contributing to some of the findings in the included studies.

Underreporting of child maltreatment to authorities is also a well-documented concern in the literature (Devakumar et al., 2021; Fogarty et al., 2022; Laslett, Ferris, et al., 2012; Laslett, Room, et al., 2012; Loxton et al., 2019; Meiksans et al., 2021; O'Donnell et al., 2015; Schneeberger et al., 2014). Several studies relied on self-report data, including replying on parents to describe their own engagement in abusive or neglectful behaviour. This likely leads to underreporting on all types of child maltreatment. However, this review has shown that our understanding of factors associated with child maltreatment in the home versus child protection system involvement revealed similar factors. One exception was gender—in which there were no studies showing gender as a factor associated with child protection systems involvement, but a number of studies on prevalence showing a greater likelihood of victimisation for girls. Boys were at greater risk than girls of filicide, unintentional injury and brain injury in the context of family violence, but girls were at greater risk than boys of child sexual abuse, child exploitation material and witnessing domestic violence. In the ACMS, girls were at greater risk than boys of both emotional abuse and sexual abuse, but not of other child maltreatment types (Mathews et al., 2023).

A key finding of the present review was that parent characteristics such as parenting capacity and skills, substance abuse and domestic violence were consistently referenced across the included studies (Langevin et al., 2021; Scott, 2015). Several studies identified factors such as substance abuse, domestic and family violence, mental illness, disability, parental age, family characteristics (for example, single-parent households) and educational attainment, which are likely to negatively impact parenting capacity and skills. These findings are in line with two major studies released in 2022 and 2023. First, they are consistent with a New South Wales birth cohort study, in which young maternal age (≤ 21 years), maternal mental health, maternal smoking during pregnancy, parent criminality and parent mental illness were associated with child maltreatment (Green et al., 2022). Second, our results are also consistent with early analysis of the ACMS, showing that four family-related adversities in childhood each more than doubled the likelihood of experiencing multi-type maltreatment in childhood: (a) parental separation/divorce; (b) living with someone who was mentally ill, suicidal or severely depressed; (c) living with someone who had a problem with alcohol or drugs; and (d) family economic hardship (Higgins et al., 2023).

It is important to understand the interplay between domestic or inter-partner violence and the association with other forms of child maltreatment. The research demonstrated that families in which mothers had experienced inter-partner violence and fathers were psychologically abusive, coercive or violent were at an increased likelihood of child maltreatment (Ayers et al., 2019; Langevin et al., 2021; Orr et al., 2022). However, it is not always clear from the research who inflicted the child maltreatment (Ayers et al., 2019). Measurement of the maltreatment types—particularly exposure to domestic violence—is also applied inconsistently.

Further research is needed to understand the interplay of key factors and how they relate to child maltreatment in the family and the role that protective factors play in reducing the likelihood of harm. Debowska et al. (2017) noted:

There is a need for studies profiling various CAN [child abuse and neglect] types by perpetrator and victimization setting. This would enable more efficient identification of offenders, who could then be targeted for a more focused prevention/intervention.

4.1 | Parenting—A key factor

Given the key role of parent characteristics, an important implication of this review is to build the capability of parents across the population through the delivery of evidence-based parenting support (Doyle et al., 2022). A critical gap is the understanding of the role parenting capacity and skills play in the prevention of harm to children. Parents are key to building the capacity of the next generation to grow up free from violence and reduce the likelihood that they will engage in violent and abusive behaviour. Yet, the concept of “parents” and parenting strategies are absent from the existing national strategies and frameworks.

Research focussed on factors that are protective against child maltreatment in the home is limited. While not a focus of the present review, a few of the included studies did also consider protective factors, identifying the protective role of things like access to services and support (Brown et al., 2014; Fogarty et al., 2022), participation in therapy (Langevin et al., 2021), economic development and financial support (Baheshmat et al., 2022) and middle and high income, as well as parental education attainment (Conrad-Hiebner & Byram, 2020; Doidge et al., 2017; Langevin et al., 2021; Laslett et al., 2017; Laslett, Ferris, et al., 2012; Laslett, Room, et al., 2012; White et al., 2015), having the support of two parents (Fernandez et al., 2019), positive family relationships and positive parental coping strategies. Factors that were protective against continuing the cycle of child maltreatment included maternal warmth, secure attachments, safe, stable and nurturing family relationships (Langevin et al., 2021; McGeough & Sterzing, 2018; Sumner et al., 2015; Timshel et al., 2017), older age of mother at first child's birth (Langevin et al., 2021) and mothers who had experienced a supportive relationship with an adult during their childhood (Langevin et al., 2021). This research highlights areas that could be targeted in further research, intervention, policy and frameworks. Further research should explore strengths in communities and how these can be enhanced or targeted for prevention efforts. Indigenous-led research would centre First Nations' voices in ongoing discussions relating to policy and prevention and would allow for research to inform strategies for self-determination and Indigenous-led solutions to child maltreatment prevention (Thurber et al., 2020; Walter & Suina, 2019). Ensuring culturally safe practices is an important issue in Australia as our Indigenous population and other ethnic minority groups disproportionately experience involvement from child protection authorities (Kaur, 2012; Sawriker, 2016, 2020).

4.2 | Public health approaches to child maltreatment prevention

There is a complex interplay between different factors at different levels, and policymakers often take a narrow view of which “factor” they will address, and which government “levers” can be pulled to influence these. Taking a public health approach to prevention can enhance efforts to reduce child maltreatment, by focussing on factors amenable to change. The factors we identified here are generally ones that exist on a continuum, across the population, are amenable to change (through supports and direct interventions from government policy and using existing intervention platforms such as schools and health services) and have evidence-based programmes and activities that can address them at scale—as outlined by Higgins et al. (2022).

In the past, child protection interventions have largely focussed on individual-based approaches, which have neglected to address broader contextual factors that contribute to child maltreatment. On the contextual level, providing communities with the resources to address systemic issues such as poverty and socioeconomic disadvantage, community violence, social isolation and marginalisation, and poor accessibility to services, will create conditions of safety for families (Higgins et al., 2022).

Early and tailored intervention is key, as it was shown that an unacceptable proportion of children continue to experience maltreatment even after involvement with child protection

services (Fogarty et al., 2022; Lennings et al., 2014; McKenzie & Scott, 2012; Meiksans et al., 2021). This was also apparent in families experiencing intergenerational child abuse and neglect (Ayton et al., 2021; Cale et al., 2021; Kaltner, 2013; Meiksans et al., 2021; Montgomery et al., 2019; Sachmann & Harris Johnson, 2014; Sumner et al., 2015; White et al., 2015).

Services in which children and families are already engaging such as schools, general practitioners and other health services can be targeted to provide evidence-based parenting and family support (Higgins et al., 2022). Key strategies are needed to address the factors associated with child maltreatment in the home that are modifiable with appropriate intervention—across the whole population, such as parenting education and support. As well as wide-scale deployment, more intensive and tailored support is needed to support families, such as those parenting in the context of substance abuse, domestic and family violence, mental illness and disability. Different points of access and levels of support may be needed for particular populations identified in this review, such as young mothers, those with severe mental health issues, first-time and single parents, those with experiences of domestic violence or childhood abuse and neglect, those living in poverty, experiencing colonisation, racism and disadvantage and those already involved in other services such as substance use and men's behaviour change programmes. Ridings et al. (2017) called for an empirically supported approach to integrate across associated factors for interventions for families experiencing vulnerability, such as home-based parenting programmes. Their literature review identified social support and family resources as two “pivotal protective factors in buffering against child maltreatment potential, while addressing core risk factors” (p. 179).

5 | CONCLUSION

Our review has shed new light on the common factors for child maltreatment in the home. Supports are needed for parents to address their capacity and skills, and deal with the challenges in their lives—including substance abuse, domestic and family violence, mental illness, disability, being young parents or going through separation/divorce. The evidence suggests that to reduce the rates of child maltreatment, we must address environmental conditions including housing instability, income loss and hardship or disadvantage. Public health research shows that the best way to address these issues—including access to services and support; financial supports; older age of mother at first child's birth; parent–child attachment; and positive family relationships (including intergenerationally)—is to deliver evidence-based supports for parents across the population in non-stigmatising ways and to have a focus on building strengths in communities.

Further research is needed to understand the drivers and reinforcing factors underpinning child maltreatment and the interplay between these varying elements. Policymakers and service providers need to know more about what influences the development of parenting capacity and skills and what factors might negatively impact this (for example, key contextual and structural factors such as socioeconomic disadvantage, housing instability, social isolation, lack of service provision, natural disaster and community violence). Parenting skill-development interventions need to be translated to meet the needs of specific cohorts and that can be taken to scale. Finally, further research and primary prevention strategy development must consider the gendered nature of some forms of violence (particularly inter-partner violence) and structural forms of discrimination and gendered social norms that focus our attention in particular ways (e.g., the intersection between the unequal parenting and carer roles that women occupy within a family context and the level of child neglect attributed to them). Given that the most consistently identified factors across the available research related to parent characteristics, we must focus attention on parenting, parents' support and structural factors affecting the capacity of parents if we are

to be successful in implementing strategies for the primary prevention of child maltreatment in the home.

AUTHOR CONTRIBUTIONS

Gabrielle R. Hunt: Methodology; writing – original draft; writing – review and editing; data curation; project administration. **Daryl J. Higgins:** Conceptualization; funding acquisition; writing – review and editing; supervision; writing – original draft; project administration.

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CONFLICT OF INTEREST STATEMENT

Daryl J. Higgins is one of the chief investigators on the Australian Child Maltreatment Study, which is referred to in this paper.

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Gabrielle R. Hunt is a registered Psychologist and is undertaking a Doctor of Philosophy at Australian Catholic University. Gabrielle's research focus is on the prevalence and prevention of child sexual abuse and harmful sexual behaviours in faith-based settings. Her research and ongoing work are informed by her experience as a psychologist working with survivors of child sexual abuse as well as young people who had engaged in harmful sexual behaviours.

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APPENDIX 1

Search terms.

Keywords	Concept 1 Children	AND	Concept 2 Violence/Child Maltreatment	AND	Concept 3 Drivers	AND	Concept 4 Setting	AND	Concept 5 Location or Study Type
	Child* OR "young person" OR adolescent* OR teenage* OR infant OR newborn OR preteen OR baby OR babies OR juvenile	AND	"Child abuse" OR "physical violence" OR maltreat* OR "domestic violence" OR "family violence" OR "sexual violence" OR "sexual abuse" OR "sexual assault" OR exploit* OR rape OR "sex offen*" OR "emotional abuse" OR "psychological abuse" OR "incest" OR neglect OR "spiritual abuse" OR "cultural abuse"	AND	Driver* OR "reinforcing factor*" OR Cause* OR prevalence OR "Risk factor*" OR predictor*	AND	Famil* OR "Home environment" OR Intrafamilial	AND	Australia* OR "Systematic review" OR "Meta*analysis"

APPENDIX 2

Eligibility criteria.

Aspect	Included	Excluded
Population	Harm inflicted by adults or another child or young person against children of any gender (0–18 years).	Harm inflicted against adults.
Exposure	Not restricted by presence or type of exposure.	N/A
Comparison	Not restricted by presence or type of comparator.	N/A
Outcomes	Qualitative or quantitative information on: <ul style="list-style-type: none"> • Nature of violence/child maltreatment being inflicted (e.g. physical, sexual, emotional, neglect) • Prevalence of violence • Perpetrators of violence • Gender of victims • Main drivers of violence perpetration • Reinforcing factors that influence violence perpetration 	Violence or maltreatment that children experience at the hands of the state or other institution.
Setting	Qualitative and quantitative studies conducted on Australian populations, and international systematic reviews and meta-analysis.	International studies that are not systematic reviews or meta-analyses.
Study design	Published in English and from 2012. Peer reviewed original research, reviews of previous research, grey literature (e.g. reports, existing frameworks).	Studies that do not report on or synthesise original research (e.g. letters, commentaries, protocols, editorials). Theses or dissertations.

APPENDIX 3

Child-level factors identified in the included studies.

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Age	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Children under 12 months were six times more likely to suffer inflicted traumatic brain injury compared to children aged 1-5 years.	Child maltreatment
	Brown et al. (2014)	Cross-sectional review of filicide cases in Victoria, Australia.	Children under 1 year were the most vulnerable, with just over 1/3 of the total number of children killed being under 4.	Child maltreatment
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Younger children at an overall higher likelihood for witnessing domestic violence.	Child maltreatment
	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Young children (under 5 years) were less likely to be reunified with their family after entering care.	CPS involvement
	White et al. (2015)	Systematic review of studies examining associated factors for the recurrence of child maltreatment.	Younger children were consistently found to have the highest likelihood for child maltreatment recurrence.	Child maltreatment
Complex behaviour problems	Bor et al. (2013)	Cohort study of 23 families that participated in a child protection based mental health service.	Most of the children (76.2%) had clinically significant behaviour problems as measured by the Child Behaviour Checklist (CBCL).	CPS involvement
	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Retrospective reports of behavioural and cognitive problems were significantly correlated with most types of maltreatment.	Child maltreatment

(Continues)

APPENDIX 3 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Female children	Cale et al. (2021)	Systematic review of studies examining cases of child exploitation material.	Most of the victims were female adolescents.	Child maltreatment
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Females at an overall higher likelihood for witnessing domestic violence.	Child maltreatment
	Malvaso et al. (2019)	Retrospective cohort study of 2045 young people in detention in South Australia between 1995 and 2012.	Females had a higher prevalence of individual adverse childhood experiences (ACEs) as well as cumulative ACEs.	Child maltreatment
	McKenzie and Scott (2012)	Retrospective hospital medical record review. 433 children identified in the maltreatment group and 462 children in the unintentional injury group.	Female children made up 64% of the sample with a maltreatment code.	Child maltreatment
	Sawrikar and Katz (2018)	Systematic review of studies examining prevention efforts for child sexual abuse in ethnic minority groups.	Female children are more likely to experience sexual abuse (there were some inconsistent results between countries).	Child maltreatment
Health, developmental concerns, or disability	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Low birthweight (below the 3rd percentile) and requiring professional help for more than two health problems before age 3 were associated with an increased likelihood for maltreatment.	Child maltreatment
	Frederick et al. (2019)	Systematic review of homicides and maltreatment-related deaths of disabled children.	55% of the filicide-suicide child victims were diagnosed with autism.	Child maltreatment
	Kaltner (2013)	Longitudinal cohort study of 6,669 cases of child abuse and neglect in Australia.	Having a disabled child(ren) in the family was significantly correlated with re-referral to child protection.	CPS involvement
	McKenzie and Scott (2012)	Retrospective hospital medical record review. 433 children identified in the maltreatment group and 462 children in the unintentional injury group.	Mental health history for the child or family was a commonly documented factor for children in the maltreatment group (40%).	Child maltreatment

APPENDIX 3 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Indigenous children	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Indigenous children were less likely to be reunified with their family after being placed in care compared to non-Indigenous children.	CPS involvement
	O'Connor et al. (2020)	Birth cohort study of 5,107 children in Australia.	When combined with socioeconomic disadvantage, ethnically diverse and Indigenous children had 4–8 times the likelihood of exposure to 2 or more adversities.	Child maltreatment
	O'Donnell (2015)	Retrospective cohort study of 404,022 children born between 1990 and 2005 in Australia.	32.2% of children with an allegation of maltreatment and a mother with a mental health contact were Indigenous.	Child maltreatment
	Orr et al. (2022)	Retrospective cohort study of police and health records for mothers.	Indigenous children were 19–22 times more likely to be exposed to violence.	Child maltreatment
	Sinha et al. (2013)	Stratified random sample in Canada.	Canadian First Nations children were investigated by child welfare agencies at 4.2 times the rate of non-Aboriginal children.	CPS involvement
Male children	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Male children were more likely to suffer inflicted traumatic brain injury than female children.	Child maltreatment
	Brown et al. (2014)	Cross-sectional review of filicide cases in Victoria, Australia.	Male children were killed at almost twice the rate of female children.	Child maltreatment
	McKenzie and Scott (2012)	Retrospective hospital medical record review. 433 children identified in the maltreatment group and 462 children in the unintentional injury group.	Male children were more likely to experience unintentional injury (66%).	Child maltreatment

(Continues)

APPENDIX 3 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Prior maltreatment	McKenzie and Scott (2012)	Retrospective hospital medical record review. 433 children identified in the maltreatment group and 462 children in the unintentional injury group.	The most frequently documented factor for children in the maltreatment group was a history of abuse (41%).	Child maltreatment
	White et al. (2015)	Systematic review of studies examining associated factors for the recurrence of child maltreatment.	Neglect was associated with the highest rate of future maltreatment, followed by physical abuse. Children who had experienced more than one type of abuse at baseline were also more likely to have higher rates of recurrence.	Child maltreatment
Sexual minority groups	McGeough & Sterzing (2018)	Systematic review of studies examining sexual minority youth and their experiences of child maltreatment and violence.	Sexual minority youth experienced higher rates of physical, sexual, and emotion abuse.	Child maltreatment
	Prior et al. (2021)	Cross-sectional study of 511 young people in Australia.	Transgender/gender diverse individuals were over 3 times more likely to experience all types of maltreatment than females and over 3 times more likely to experience emotional and sexual abuse and neglect than males.	Child maltreatment
	Schneeberger et al. (2014)	Systematic review of studies examining stressful childhood experiences and household dysfunction in sexual minority populations.	LGBTQIA+ populations had high prevalence of stressful childhood experiences. For example, the median rates for child sexual abuse for the heterosexual group was 17% and 35.5% for the sexual minority group.	Child maltreatment

APPENDIX 4

Parent-level factors identified in the included studies.

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Age	Allard and Hurren (2018)	Cohort study of 3,217 individuals with at least one contact with QLD child protection.	Average age of onset for those responsible for child maltreatment was 23.2 years	Both
	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Children born to mothers younger than 21 years of age had an increased likelihood of inflicted traumatic brain injury in one included study. Young mothers (<20 years) had a rate of inflicted TBI 20 times higher than mothers aged over 30.	Child maltreatment
	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Young parental age (<22 years at birth) was not associated with physical abuse or neglect, but was associated with sexual abuse, emotional abuse, and witnessing domestic violence.	Child maltreatment
	Kisely et al. (2021)	Longitudinal birth cohort study of 520 sibling pairs in Australia.	Young maternal age (<20) was the strongest and most consistent predictor of child maltreatment.	Both
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Most included studies found a relationship between young maternal age (<21) and child maltreatment.	Both
	O'Donnell et al. (2015)	Retrospective cohort study of 404,022 children born between 1990 and 2005 in Australia.	15.7% of children with an allegation of maltreatment and a mother with a mental health contact were born to a teenage mother (4.3% for teenage fathers).	Child maltreatment

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APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Childhood history of maltreatment (intergenerational 'transmission')	Kaltner (2013)	Longitudinal cohort study of 6,669 cases of child abuse and neglect in Australia.	Parents who were abused as a child were significantly more likely to be referred to child protection.	CPS involvement
	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Children were significantly more likely to experience multiple incidents of abuse and/or neglect when the parent had experienced abuse as a child.	Both
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Intergenerational transmission or continuity of maltreatment was higher for mothers who experienced sexual abuse (prior to age 6 or during their adolescence) or had multiple experiences of maltreatment in childhood.	Both
	Sachmann and Harris Johnson (2014)	Review of two studies that examined 9 cases of familicide-suicide in Western Australia.	Childhood adversity was a common factor present in the perpetrators of familicide-suicide.	Child maltreatment
	Sumner et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	Parents' experiences of abuse as a child were associated with a significant increase in child maltreatment.	Child maltreatment
	Timshel et al. (2017)	Systematic review of studies examining factors for family violence in refugee families.	Parental childhood experiences of abuse were found to increase family violence in refugee families.	Child maltreatment
Criminality or antisocial personality	Austin (2016)	Systematic review of studies examining parents involved in the criminal justice system.	A substantial proportion of children involved in the child welfare system were found to have experienced prior parental criminal justice system involvement (CJI). There was also a high prevalence of child maltreatment among children of parents with prior CJI.	Both

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Parents with antisocial personality traits or behaviours had an overall higher likelihood for exposing children to domestic violence.	Child maltreatment
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Antisocial behaviours were found to be an associated factor for the intergenerational transmission or continuity of maltreatment.	Child maltreatment
	Malvaso et al. (2019)	Retrospective cohort study of 2045 young people in detention in South Australia between 1995 and 2012.	Aboriginal males and females in detention reported the highest rates of family criminality and substance use problems.	Child maltreatment
	Meiksans et al. (2021)	Mixed methods study of families reported to child protection prenatally in Australia.	34.4% of the families included cases of parental criminal activity such as drug-related offences and violent or sexual offences.	CPS involvement
Disability	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Parental disability and illness were common factors for children entering care.	CPS involvement
	Kaltner (2013)	Longitudinal cohort study of 6,669 cases of child abuse and neglect in Australia.	Parental physical or intellectual disability were significantly correlated with re-referral to child protection.	CPS involvement
Domestic violence	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Domestic violence was a common factor for children entering care.	CPS involvement
	Frederico et al. (2014)	Cross-sectional review of 16 child death cases in Victoria Australia.	All cases involved a mother who was a victim of domestic violence.	Child maltreatment
	Kaltner (2013)	Longitudinal cohort study of 6,669 cases of child abuse and neglect in Australia.	Parent's history of violence was significantly correlated with re-referral to child protection.	CPS involvement

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APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Domestic violence	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Children were significantly more likely to experience multiple incidents of abuse and/or neglect when a parent had experienced domestic violence.	Both
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Intergenerational transmission or continuity of maltreatment was higher for mothers who had experienced intimate partner violence.	Both
	Meiksans et al. (2021)	Mixed methods study of families reported to child protection prenataally in Australia.	69.5% of the families included cases of intimate partner violence.	CPS involvement
	Sachmann and Harris Johnson (2014)	Review of two studies that examined nine cases of familicide-suicide in Western Australia.	Domestic violence was a common factor present in the cases of familicide-suicide.	Child maltreatment
	Scott (2015)	Literature review	Domestic violence was a common factor of parents of children entering state care (65%)	CPS involvement
Female parents	Allard and Hurren (2018)	Cohort study of 3,217 individuals with at least one contact with QLD child protection.	Females had more substantiations (Indigenous $M = 5.1$, non-Indigenous $M = 3.7$) than males (Indigenous $M = 3.2$, non-Indigenous $M = 2.7$). Most frequent harm type involving a female maltreater was neglect (46.7%).	CPS involvement
	Austin (2016)	Systematic review of studies examining parents involved in the criminal justice system.	After adjustment for parental factors and demographics, one included study found that mothers who shared a child with a recently incarcerated father were more likely to engage in neglect and physical aggression.	Both

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Health	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Individuals who had sustained a traumatic brain injury (TBI) were more likely to be perpetrators of family violence and inflict a TBI on the victim.	Child maltreatment
Indigenous	Allard and Hurren (2018)	Cohort study of 3,217 individuals with at least one contact with QLD child protection.	22.8% of those responsible for child maltreatment were Indigenous Australians.	CPS involvement
	Gilbert et al. (2022)	Longitudinal population based of cases of men who had been a respondent of a DVO and/or had a substantiated child maltreatment case.	Indigenous men were over-represented in all systems. 12.2% of the dual-system population (DVO and substantiated child maltreatment case) were Indigenous, compared to 1.2% of the total male population.	Both
	Kisely et al. (2021)	Longitudinal birth cohort study of 520 sibling pairs in Australia.	Indigenous parents had higher rates of child maltreatment cases.	Both
Male parents	Allard and Hurren (2018)	Cohort study of 3,217 individuals with at least one contact with QLD child protection.	Most frequent harm type involving a male maltreater was emotional abuse (42.3%).	CPS involvement
	Ayers et al. (2019)	Systematic review and meta-analysis of studies (cross-sectional, longitudinal, and cohort) examining parental mental health and child maltreatment.	All included studies that examined fathers' mental health found a relationship between fathers' mental health (e.g. depression) and child maltreatment.	Both
	Brown et al. (2014)	Cross-sectional review of filicide cases in Victoria, Australia.	While mothers and fathers were equally represented as perpetrators of filicide, there were twice as many male perpetrators (i.e. other male family members such as step-fathers) of filicide compared to females.	Child maltreatment

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APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Male parents	Kim and Merlo (2021)	Systematic review of studies examining intimate partner homicide, child homicide, and filicide.	The overwhelming majority of filicide perpetrators were men.	Child maltreatment
Mental illness	Ayers et al. (2019)	Systematic review and meta-analysis of studies examining parental mental health and child maltreatment.	The effect of perinatal mental health on child maltreatment had an average odds ratio of 3.04. Most of the included studies found a relationship between parental perinatal mental health and child maltreatment and child protection contact.	Both
	Bor et al. (2013)	Cohort study of 23 families that participated in a child protection based mental health service.	65.2% of the parents were experiencing significant psychological distress	CPS involvement
	Brown et al. (2014)	Cross-sectional review of filicide cases in Victoria, Australia.	Almost 75% of cases of filicide included a perpetrator who had been diagnosed with a mental illness.	Child maltreatment
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Depressed parents had an overall higher likelihood of exposing children to domestic violence.	Child maltreatment
	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Parental mental illness strongly predicted the presence of child maltreatment.	Child maltreatment
	Frederick et al. (2019)	Systematic review of homicides and maltreatment-related deaths of disabled children.	38% of offenders (mothers, fathers, grandfathers) were reported as having a mental illness (e.g. depression, bipolar disorder, psychosis). Children who were medically or mentally unwell were at a greater likelihood of homicide when their mother had a mental illness.	Child maltreatment

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Frederico et al. (2014)	Cross-sectional review of 16 child death cases in Victoria Australia.	87.5% of cases included a mother with mental illness (56.5% for fathers).	Child maltreatment
	Kisely et al. (2021)	Longitudinal birth cohort study of 520 sibling pairs in Australia.	Maternal depression at birth of first child was significantly associated with child maltreatment.	Both
	Kim & Merlo (2021)	Systematic review of studies examining intimate partner homicide, child homicide, and familicide.	Mental health problems were identified in a number of familicide cases.	Child maltreatment
	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Children were significantly more likely to experience multiple incidents of abuse and/or neglect when a parent was experiencing mental ill-health.	Both
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Most included studies found a relationship between maternal mental health (PTSD, depression, anxiety) and child maltreatment.	Both
	McKenzie and Scott (2012)	Retrospective hospital medical record review. 433 children identified in the maltreatment group and 462 children in the unintentional injury group.	Mental health history for the child or family was a commonly documented factor for children in the maltreatment group (40%).	Child maltreatment
	Meiksans et al. (2021)	Mixed methods study of families reported to child protection prenatally in Australia.	58% of the families included cases of parental mental health issues ranging from suicidal ideation or suicide attempts, self-harm, diagnosed mental disorders, or hospitalisation.	CPS involvement

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APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Montgomery et al. (2019)	Systematic review of studies examining parents who had experienced trauma and their children.	Parents diagnosed with PTSD had a greater likelihood of inflicting violence against their children than parents without this diagnosis. This association appeared to be independent of the type of traumatic event.	Child maltreatment
	O'Donnell et al. (2015)	Retrospective cohort study of 404,022 children born between 1990 and 2005 in Australia.	Nearly 1 in 10 children of mothers with a prior mental health contact had a maltreatment allegation.	Child maltreatment
	Rubenstein et al. (2020)	Systematic review of studies examining factors for household violence in humanitarian settings.	Mental health was identified as predictor of violence against women and violence against children.	Child maltreatment
	Sachmann and Harris Johnson (2014)	Review of two studies that examined 9 cases of familicide-suicide in Western Australia.	Mental illness and personality disorders were a common factor present in the perpetrators of familicide-suicide.	Child maltreatment
	Scott (2015)	Literature review	Parental mental illness was a common factor of parents of children entering state care (63%)	CPS involvement
	Timshel et al. (2017)	Systematic review of studies examining factors for family violence in refugee families.	Parental mental illness (including PTSD and depression) was found to increase likelihood for family violence in refugee families.	Child maltreatment
	White et al. (2015)	Systematic review of studies examining factors for the recurrence of child maltreatment.	There were some inconsistent results across studies relating to parental mental health and child maltreatment.	Child maltreatment
Parenting skills and attitudes	Bor et al. (2013)	Cohort study of 23 families that participated in a child protection based mental health service.	Most of the parents (87%) scored as having dysfunctional parenting practices including over-reliance on overly long reprimands and talking (Parenting Scale).	CPS involvement

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Parenting skills and attitudes	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Insecure attachment styles between parents and children and inadequate parenting skills were associated with children being exposed to domestic violence.	Child maltreatment
	Frederick et al. (2019)	Systematic review of homicides and maltreatment-related deaths of disabled children.	Parental neglect of disabled children's health needs was found to be a potential cause of child death cases.	Child maltreatment
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Maternal prenatal authoritarian attitudes, parental attitudes in favour of violence, and poor parenting were found to be associated factors for the intergenerational transmission or continuity of maltreatment.	Child maltreatment
	Lennings et al. (2014)	Cross-sectional design of 179 parents involved in the New South Wales Children's Court.	The number of child abuse notifications was associated with parents' poor interpersonal skills and poor stress management.	Both
	Sumner et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	A poor parent-child relationship was associated with a significant increase in child maltreatment.	Child maltreatment
	White et al. (2015)	Systematic review of studies examining factors for the recurrence of child maltreatment.	Poor parenting skills and poor parent-child relationship was found to be associated with an increase in child maltreatment. There were some inconsistent results, however White et al. (2015) note the quality of studies in interpreting the findings.	Child maltreatment

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Previous child protection contacts	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Children with siblings who had been previously removed were more likely to also be removed.	CPS involvement
	McKenzie & Scott (2012)	Retrospective hospital medical record review. 433 children identified in the maltreatment group and 462 children in the unintentional injury group.	Most children in the maltreatment group (more than 93%) linked to a child protection record.	Both
	Meiksans et al. (2021)	Mixed methods study of families reported to child protection prenationally in Australia.	38.9% of the families included a parent of an unborn child having experienced abuse and neglect as a child.	CPS involvement
	White et al. (2015)	Systematic review of studies examining factors for the recurrence of child maltreatment.	One included study found that parent/caregiver cooperation with child protection did not impact on the likelihood for future maltreatment.	Child maltreatment
Substance abuse	Baheshmat et al. (2022)	Systematic review and meta-analysis of studies examining spouse and child abuse associated with illicit drug use.	Odds ratios for child maltreatment (lifetime psychological abuse (2.11), lifetime physical abuse (2.21), lifetime neglect (3.13), and current physical abuse (3.88)) for children with parents who use illicit substances was higher than for parents who did not use illicit substances.	Child maltreatment
	De Bortoli et al. (2014)	Literature review of studies examining illicit substance misuse during pregnancy and child abuse.	Parental substance misuse, including during pregnancy, associated with child protection involvement and child maltreatment.	Both
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Parents who misused alcohol had an overall higher likelihood for exposing children to domestic violence.	Child maltreatment

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Children of parents who smoked or were an adolescent when their parent described themselves as an "ex-drinker" or a "heavy drinker" were at an increased likelihood of child maltreatment.	Child maltreatment
	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Parental substance abuse was a common factor for children entering care.	CPS involvement
	Frederico et al. (2014)	Cross-sectional review of 16 child death cases in Victoria Australia.	The majority of parents (93.7% of mothers and 81.2% of fathers) used alcohol or other drugs.	Child maltreatment
	Kaltner (2013)	Longitudinal cohort study of 6,669 cases of child abuse and neglect in Australia.	Parental substance abuse was significantly correlated with referral to child protection.	CPS involvement
	Laslett, Ferris, et al. (2012)	Random sample 2,649 Australians, including 1,142 parents.	Most reported consequences by parents for children affected by another's drinking were verbal abuse (9%), being left unsupervised or in unsafe situations (3%), witnessing domestic violence (3%), or children being physically hurt (1%).	Child maltreatment
	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Children were significantly more likely to experience multiple incidents of abuse and/or neglect when carer alcohol abuse was identified.	Both
	Laslett et al. (2017)	Random sample of 7,848 carers in eight countries.	The presence of a heavy drinker in the household increased the likelihood of alcohol-related harms to children by nearly 3 times (although the heavy drinker was not always responsible for the harm).	Child maltreatment

(Continues)

APPENDIX 4 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Most included studies found a relationship between substance abuse and child maltreatment.	Both
	Malvaso et al. (2019)	Retrospective cohort study of 2045 young people in detention in South Australia between 1995 and 2012.	Aboriginal males and females in detention reported the highest rates of family criminality and substance use problems.	Child maltreatment
	Meiksans et al. (2021)	Mixed methods study of families reported to child protection prenatally in Australia.	62.6% of the families included cases of parental alcohol or other drug use.	CPS involvement
	Rubenstein et al. (2020)	Systematic review of studies examining factors for household violence in humanitarian settings.	Alcohol and drug use was identified as predictor of violence against women and violence against children.	Child maltreatment
	Scott (2015)	Literature review	Parental substance abuse was a common parent characteristic of children entering state care (69%)	CPS involvement
	Sumner et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	Parental alcohol or drug abuse was associated with a significant increase in child maltreatment.	Child maltreatment
	Timshel et al. (2017)	Systematic review of studies examining factors for family violence in refugee families.	Parental substance abuse was found to increase the likelihood of family violence in refugee families.	Child maltreatment
	White et al. (2015)	Systematic review of studies examining factors for the recurrence of child maltreatment.	Parental substance abuse was consistently found to be associated with maltreatment recurrence.	Child maltreatment

APPENDIX 5

Contextual-level factors identified in the included studies.

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Conflict, War, Natural Disaster, Community Violence	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Increased incidence of inflicted traumatic brain injury recorded in the 6 months post disaster (hurricane) and during the U.S. recession (2007-2009).	Child maltreatment
	Devakumar et al. (2021)	Systematic review of studies examining mental health and family violence in conflict settings.	8 qualitative studies showed men's experiences of conflict contributes to the likelihood of family violence perpetration.	Both
	Montgomery et al. (2019)	Systematic review of studies examining parents who had experienced trauma and their children.	The prevalence of child abuse was found to be consistently higher in populations exposed to traumatic events (ranged from 36% to 97%). Parents exposed to a traumatic event (such as war, genocide, tsunami/flood, refugee status, political violence, sexual or physical abuse) were more likely to abuse their children in all studies.	Child maltreatment
	Rubenstein et al. (2020)	Systematic review of studies examining factors for household violence in humanitarian settings.	Conflict exposure (combatant status, conflict/potential violence, migration, refugee status) was identified as predictor of violence against women and violence against children.	Child maltreatment

(Continues)

APPENDIX 5 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Sedighi et al. (2021)	Systematic review of studies examining families who have experienced natural disasters and conflicts.	Families experiencing natural disaster or conflict that are more vulnerable to loss of food and shelter were found to commit violence against children more frequently. Poverty, history of exposure to violence, child labour, and parental substance abuse increased the likelihood of violence in emergency settings.	Child maltreatment
	Summer et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	Exposure to neighbourhood violence and society level income inequality and poverty were associated with a significant increase in child maltreatment.	Child maltreatment
Housing Instability	Chandler et al. (2022)	Systematic review of studies examining housing stress and child maltreatment.	Associations found across included studies on measures of housing stress and CPS involvement, children being removed from the home, and cases of child maltreatment.	Both
	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Housing mobility was not significantly related until at least 10 moves during childhood was reported.	Child maltreatment
Immigration/cultural dislocation	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Children of parents who had immigrated from non-English speaking countries had significantly higher rates of maltreatment.	Child maltreatment
Single Marital Status/Single Parent Households	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Higher proportion of perpetrators were found in single marital status homes, and those that lacked social supports.	Child maltreatment

APPENDIX 5 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Bor et al. (2013)	Cohort study of 23 families that participated in a child protection based mental health service.	Single-parent families were over-represented in the sample (61%)	CPS involvement
	Brown et al. (2014)	Cross-sectional review of filicide cases in Victoria, Australia.	Just over half of the filicide cases had parental separation or divorce in their background.	Child maltreatment
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Single parents had an overall higher likelihood for exposing children to domestic violence.	Child maltreatment
	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Single parent households (particularly mother only households) made up 62.2% of the sample and had a lower likelihood of reunification.	CPS involvement
	Fogarty et al. (2022)	Mixed methods design. 11 families accessing support services during COVID-19 pandemic in Australia.	Approximately half of the families were single parent households.	CPS involvement
	Kisely et al. (2021)	Longitudinal birth cohort study of 520 sibling pairs in Australia.	Single parent status significantly predicted the likelihood for child maltreatment.	Both
	Kim and Merlo (2021)	Systematic review of studies examining intimate partner homicide, child homicide, and filicide.	Children were often killed as part of the ending of a relationship.	Child maltreatment
	Laslett, Ferris, et al. (2012)	Random sample 2,649 Australians, including 1,142 parents.	Single carer households were more than twice as likely to report alcohol related harms to children than households with two carers.	Child maltreatment
	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Children were significantly more likely to experience multiple incidents of abuse and/or neglect when they were the child of a sole parent.	Both

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APPENDIX 5 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Socio-Economic Disadvantage	Laslett et al. (2017)	Random sample of parents in Australia.	Single parent households were twice as likely to report alcohol-related harm to children.	Child maltreatment
	O'Donnell et al. (2015)	Retrospective cohort study of 404,022 children born between 1990 and 2005 in Australia.	33.6% of children with an allegation of maltreatment and a mother with a mental health contact were born to single mothers.	Child maltreatment
Socio-Economic Disadvantage	Ayton et al. (2021)	Systematic scoping review of studies examining acquired brain injury in the context of family violence.	Increased incidence of family violence reported with children and families experiencing socioeconomic disadvantage and housing and financial stress.	Child maltreatment
	Baheshmat et al. (2022)	Systematic review and meta-analysis of studies examining spouse and child abuse associated with illicit drug use.	Poverty can increase illicit drug use and violence – thus increasing the likelihood of family violence.	Child maltreatment
Socio-Economic Disadvantage	Conrad-Hiebner and Byram (2020)	Systematic review of studies examining economic insecurity and child maltreatment.	Income losses, cumulative material hardship, and housing hardship were the most reliable predictors of child maltreatment.	Both
	Dodaj (2020)	Systematic review of studies that examined children who have witnessed domestic violence.	Parents with lower-socioeconomic incomes had an overall higher likelihood for exposing children to domestic violence.	Child maltreatment
Socio-Economic Disadvantage	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Economic disadvantage strongly predicted child maltreatment. Having 2 or more reports of parental unemployment in the previous year increased likelihood for child maltreatment (this was not present for 1 report).	Child maltreatment
	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Financial and housing difficulties were common factors for children entering care.	CPS involvement
Socio-Economic Disadvantage	Hunter and Flores (2021)	Systematic review of social determinants of health and child maltreatment.	Poverty, housing instability, food insecurity, and insurance were associated child maltreatment.	Both

APPENDIX 5 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
	Kaltner (2013)	Longitudinal cohort study of 6,669 cases of child abuse and neglect in Australia.	Family financial difficulties was significantly correlated with re-referral to child protection.	CPS involvement
	Kim and Merlo (2021)	Systematic review of studies examining intimate partner homicide, child homicide, and familicide.	Financial problems were identified in a number of familicide cases.	Child maltreatment
	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Children were significantly more likely to experience multiple incidents of abuse and/or neglect when socio-economic disadvantage was identified.	Both
	O'Connor et al. (2020)	Birth cohort study of 5,107 children in Australia.	Children who experienced socio-economic disadvantage had a higher proportion of exposure to each type of adversity throughout childhood. This was particularly true for Indigenous and other ethnic minority children.	Child maltreatment
	O'Donnell et al. (2015)	Retrospective cohort study of 404,022 children born between 1990 and 2005 in Australia.	28.1% of children with an allegation of maltreatment and a mother with a mental health contact lived in the most disadvantaged areas.	Child maltreatment
	Rubenstein et al. (2020)	Systematic review of studies examining factors for household violence in humanitarian settings.	Income and economic status were identified as predictors of violence against women and violence against children.	Child maltreatment
	Sumner et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	Economic stress, poverty, and income inequality were associated with a significant increase in child maltreatment.	Child maltreatment

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APPENDIX 5 (Continued)

Factor	Study author(s)	Study design	Key findings	Involvement with a statutory child protection service (CPS) vs. child maltreatment
Social isolation or lack of support	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Social instability strongly predicted child maltreatment.	Child maltreatment
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Intergenerational transmission or continuity of maltreatment was higher for parents experiencing social isolation and/or lack of support.	Both
	Lennings et al. (2014)	Cross-sectional design of 179 parents involved in the New South Wales Children's Court.	The number of child abuse notifications was associated with a lack of social support.	Both

APPENDIX 6

Protective factors identified in the included studies.

Protective factor	Study author(s)	Study design	Key findings
Age	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Older age of mother at first birth was a protective factor.
Attachment	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Maternal warmth and positive parent-child relationships were identified as protective factors.
	McGeough & Sterzing (2018)	Systematic review of studies examining sexual minority youth and their experiences of child maltreatment and violence.	Parental attachment was a protective factor.
	Sumner et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	Safe, stable, and nurturing family relationships was a protective factor.
	Timshel et al. (2017)	Systematic review of studies examining factors for family violence in refugee families.	Positive parental coping strategies was a protective factor.
Education	Doidge et al. (2017)	Stratified random sample of local government sample that would be representative of Victorian state population (2,443 people enrolled at infancy).	Children of parents with tertiary education or professional or managerial occupations were at a lower likelihood of child maltreatment.
	Sawrikar & Katz (2018)	Systematic review of studies examining prevention efforts for child sexual abuse in ethnic minority groups.	Sex education was a protective factor against child sexual abuse.
	White et al. (2015)	Systematic review of studies examining factors for the recurrence of child maltreatment.	Parents who completed high school was a protective factor.
Socio-economic status	Baheshmat et al. (2022)	Systematic review and meta-analysis of studies examining spouse and child abuse associated with illicit drug use.	Community norms of domestic violence may be reduced by strategies targeting a reduction in poverty and economic development.
	Conrad-Hiebner and Byram (2020)	Systematic review of studies examining economic insecurity and child maltreatment.	Parent employment was suggested as a protective factor.
	Laslett, Room, et al. (2012)	Cross-sectional study of children's CPS records in Victoria Australia.	Middle- and high-income families was a protective factor.

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APPENDIX 6 (Continued)

Protective factor	Study author(s)	Study design	Key findings
	Laslett et al. (2017)	Random sample of 7,848 carers in eight countries.	High income was a protective factor (some variance between countries).
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Higher socio-economic status was a protective factor.
Support/service engagement	Brown et al. (2014)	Cross-sectional review of filicide cases in Victoria, Australia.	Family engagement in services was suggested as a protective factor.
	Fernandez et al. (2019)	Case control study of Australian children in care between Jan 2006 and Dec 2007.	Children with the support of two parents were at a decreased likelihood of being placed in care.
	Fogarty et al. (2022)	Mixed methods design. 11 families accessing support services during COVID-19 pandemic in Australia.	Access to services was a protective factor.
	Langevin et al. (2021)	Scoping review of studies examining psychosocial and protective factors for intergenerational maltreatment.	Participation in therapy and supportive relationships between parents or between mothers and their parents were protective factors.
	Sumner et al. (2015)	Review of health and law enforcement surveillance systems in the United States of America.	High levels of support and cohesion in communities were protective factors.