

## Child Maltreatment Reports during the COVID-19 Pandemic: A Scoping Review

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### Abstract

The COVID-19 pandemic caused a threat to the safety of children and families. This scoping review synthesized the findings about the prevalence of child maltreatment (CM) during the COVID-19 pandemic. The PRISMA guidelines were followed in the current study. According to most of the studies (85,7%) involving units where CM reports are received, the reporting rates of CM have decreased. However, the rate of traumatic injury or hospitalization due to physical abuse has increased. Community-based studies involving parents and survey studies show an increase in CM rates excluding sexual abuse. The decrease in CM rates ranged from 8% to 55,3%, while the increase rates ranged from 1,12% to 33,3%. As another finding, parental/ socioeconomic characteristics (e.g., unemployment, parenting stress) increased the risk of CM. Hence, mental health and social work professionals who work with children have a critical responsibility to identify children at risk and to reveal the full extent of CM.

*Key Words:* Child abuse, Child neglect, Children at risk, Systematic review

### Covid-19 Pandemisinde Çocuk İstismarı Bildirimleri: Bir Derleme Çalışması

#### Öz

COVID-19 salgını, çocukların ve ailelerin sağlığına yönelik bir tehdit oluşturmuştur. Bu derleme çalışmasının amacı COVID-19 pandemisi sırasında çocuk istismarının yaygınlığı hakkındaki bulguları sentezlemektir. Bu çalışmada PRISMA yönergeleri izlenmiştir. Derleme sonuçlarına göre, çocuk istismarı bildirimlerinin alındığı birimleri içeren çalışmaların çoğuna (%85,7) göre çocuk istismarı bildirim oranları düşüş göstermektedir. Bununla birlikte, fiziksel istismara bağlı travmatik yaralanma veya hastaneye yatış oranı artmıştır. Ebeveynleri içeren toplum temelli çalışmalar ve anket çalışmaları, cinsel istismar hariç çocuk istismarı oranlarında bir artış olduğunu göstermektedir. Çocuk istismarı oranlarındaki düşüş %8 ile %55,3 arasında değişirken, artış oranları %1,12 ile %33,3 arasında değişmiştir. Diğer bir bulgu olarak, ebeveyn/sosyoekonomik özellikler (ör., işsizlik, ebeveynlik stresi) çocuk istismarı riskini artırmaktadır. Bu nedenle, çocuklarla çalışan ruh sağlığı ve sosyal hizmet uzmanlarının risk altındaki çocukları belirleme ve istismarın tüm kapsamını ortaya çıkarma konusunda önemli bir sorumluluğu bulunmaktadır.

*Anahtar Kelimeler:* Çocuk istismarı, Çocuk ihmali, Risk altındaki çocuklar, Sistematiik derleme

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## Introduction

The COVID-19 pandemic has been recognized not only as a health crisis but also as a catalyst for significant socioeconomic and psychological risks, particularly for younger populations (Martinkevich et al., 2020). Despite initial reports indicating a decrease in child maltreatment (CM) reporting during this period (Campbell, 2020), the reality is that children have faced heightened risks of CM due to several compounding factors, including school closures, financial instability, social isolation measures, and limited access to essential health, social, and legal services (Chung et al., 2020; Garstang et al., 2020; Lawson et al., 2020; Rapoport et al., 2021). These factors have been affecting children directly as well as indirectly through their parents. The WHO (2020b) has underscored the increased likelihood of CM, especially among families experiencing economic instability and stress resulting from COVID-19-related economic downturns.

In conjunction with the lockdowns that began in March 2020 around the world, an accompanying increase in domestic violence was presumed, further endangering vulnerable children (Kofman & Garfin, 2020). CM is defined as any harm inflicted upon a child as a result of human activity that is proscribed, proximate, and preventable (Finkelhor & Korbin, 1988). It carries enduring repercussions on children's health and development (Sesar et al., 2010) and can occur across all socioeconomic levels (Viola et al., 2016), although a higher prevalence of CM is expected in underdeveloped and developing countries due to challenging life circumstances (Stoltenborgh et al., 2013). It is estimated that over one billion children aged between 2 and 17 years will experience physical, sexual, or emotional abuse each year worldwide (Hillis et al., 2016).

The COVID-19 pandemic has further exacerbated the conditions that predispose children to CM. Division of Violence Prevention of the US National Center for Injury Prevention and Control (2020) identified several risk factors associated with the pandemic, including social isolation, heightened parenting stress, shifting economic burdens, and reduced social connectivity. As is known, together with risk factors, protective or promotive factors are also important for the prevalence rates of CM (Belsky, 1980). However, the pandemic has not only increased risk factors; it has also diminished these protective factors by depriving children of vital resources such as schools, peer support, teacher support, and child protection services (Barboza et al., 2021; Rosenthal & Thompson, 2020). Many educational institutions and child welfare agencies, which play critical roles in detecting and preventing the abuse of children have faced closures due to the pandemic, disrupting essential support mechanisms (Rosenthal & Thompson, 2020).

From an ecological perspective, CM arises from the interplay between the characteristics of the caregiver and children, as well as various environmental factors (Belsky, 1980; Bronfenbrenner, 1979). In other words, CM has a multifactorial etiology; the occurrence of CM is influenced by various systems within which the individual exists and their interactions with each other. According to this theory, the pandemic must also be considered as an external factor that can influence the occurrence and reporting of CM. One review article has been identified examining the prevalence of CM during the COVID-19 pandemic. This review was conducted by Cappa and Jijon (2021) and focused exclusively on studies published in 2020. Given the initial shock of the pandemic has subsided and the volume of relevant studies from around the world has likely increased, a comprehensive scoping review study addressing a wider scope of literature could be invaluable for researchers and practitioners working with CM. The objective of this review is to map the existing literature concerning the prevalence of CM during COVID-19. Additionally, the review aims to identify crucial concepts and research gaps, providing insights for practitioners, policymakers, and researchers. The answer to the following question was sought in this process: "What are the findings regarding the prevalence of CM during one year of the pandemic period?"

## Method

### Design

The current study uses a scoping review to map the literature on CM rates during the pandemic. Scoping reviews are commonly employed to investigate a broad spectrum of literature aimed at answering a particular research question (Levac et al., 2010) is widely used in CM research. PRISMA (Preferred Reporting and Identification for Systematic Reviews and Meta-Analyses) guidelines (Moher et al., 2009) were employed for study selection. The PRISMA flow diagram illustrates how information moves through the various stages of a review. It details the number of records that were identified, included, and

excluded, along with the reasons for the exclusions and finally the included number of studies. The methodology for this review adhered to the following steps as described below.

### Eligibility Criteria

The inclusion criteria were that studies (a) be published between March 2020 and March 2021; (b) be journal articles; (c) be written in English; (d) be published in scholarly peer-reviewed journals and (e) be conducted as international, cross-cultural, or country-based studies. Publications were excluded from the review if they were (a) editorials, letters, or reviews; (b) unpublished thesis or dissertation studies; (c) not published in a peer-reviewed journal; or (d) not directly addressing CM (e.g., publications addressing intimate partner violence).

### Data Collection Procedure

A literature search included MEDLINE, Web of Science, ScienceDirect, ProQuest, and ERIC databases. Searches in these electronic databases were conducted in July 2021 using the following search terms: (COVID-19 OR coronavirus) and (child abuse OR child maltreatment). The names of the manuscripts were noted, and the title and abstract were screened. Irrelevant studies were excluded from the review relevant studies were evaluated further for eligibility. PRISMA flow diagram is presented in Figure 1.

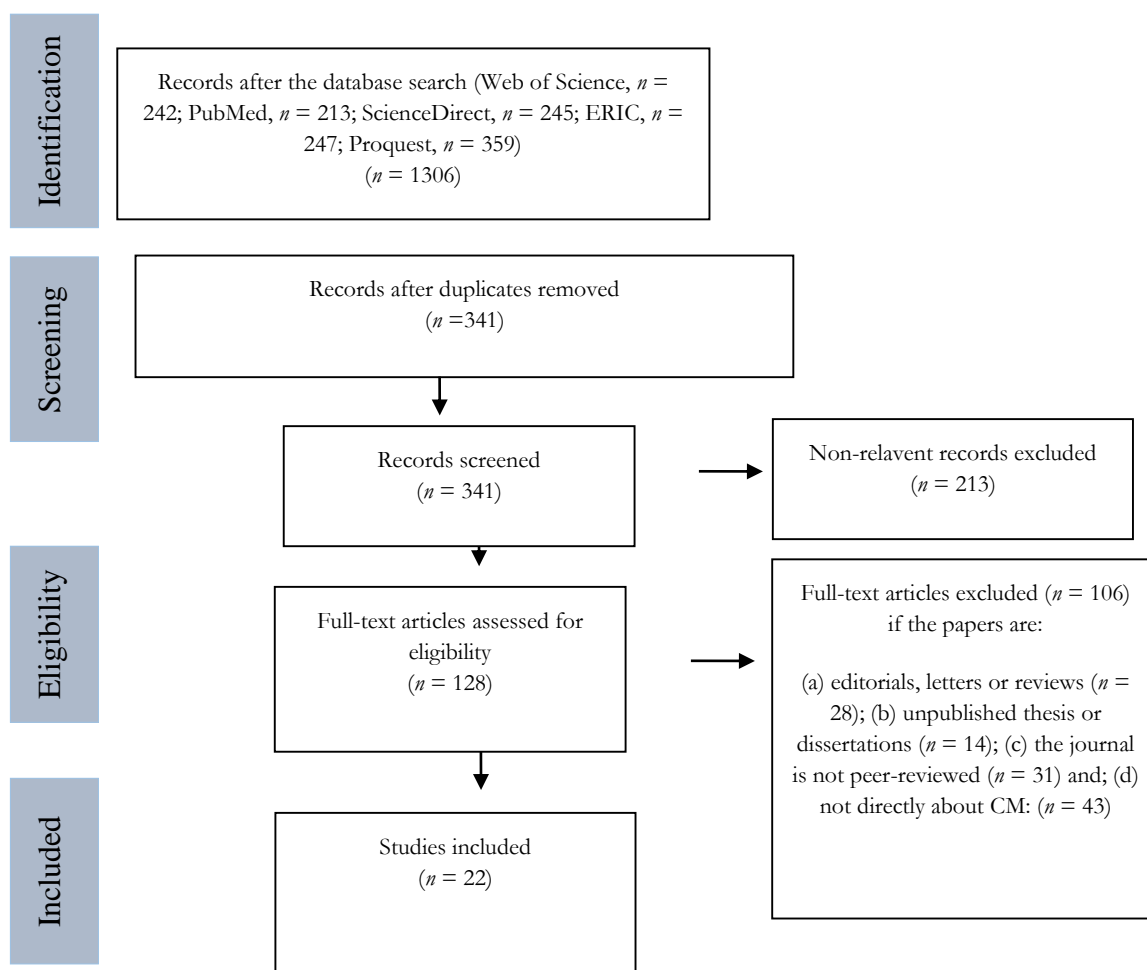


Figure 1. PRISMA Flow Diagram

### Results

The countries, aims, study groups, and main results of the included studies are presented in Table 1. Accordingly, the United States produced the most research on CM during the considered time ( $n = 13$ , 59,1%; Barboza et al., 2021; Baron, Goldstein, & Wallace, 2020; Cabrera-Hernández & Padilla-Romo, 2020; Kaiser et al., 2021; Kovler et al., 2021; Lawson et al., 2020; Lee, Ward, Lee, & Rodriguez, 2021; Musser, Riopelle, & Latham, 2021; Rapoport et al., 2021; Rodriguez, Lee, Ward, & Pu, 2021; Sharma et al.,

2021; Swedo et al., 2020; Whelan et al., 2021). Other studies were from the United Kingdom ( $n = 1$ , 4,5%; Garstang et al., 2020), Brazil ( $n = 1$ , 4,5%; Platt et al., 2021), Singapore ( $n = 1$ , 4,5%; Chung et al., 2020), Norway ( $n = 1$ , 4,5%; Augusti, Sætren, & Hafstad., 2021), Hong Kong ( $n = 1$ , 4,5%; Wong et al., 2021), Germany ( $n = 1$ , 4,5%; Calvano et al., 2021), and Denmark ( $n = 1$ , 4,5%; Martinkevich et al., 2020). Two other studies were conducted based on international non-official retrospective data ( $n = 2$ , 9,1%; Babvey, Capela, Cappa, Lipizzi, & Petrowski, 2021; Petrowski, Cappa, Pereira, Mason, & Daban, 2021). In the majority of the studies, the individual and familial characteristics of the participants were not defined ( $n = 15$ , 68,18 %). The reviewed studies contain data about numbers of reports regarding CM ( $n = 9$ ; 40,9%), proportion of maltreated children ( $n = 4$ ; 18,2%), court filings on CM ( $n = 1$ ; 4,5%), online questionnaires completed by either parents ( $n = 6$ ; 27,3%) or children ( $n = 1$ ; 4,5%), and abusive content generated on social media during the COVID-19 pandemic ( $n = 1$ ; 4,5%). Among the total of 6457 specified participants, 2912 were parents ( $n = 6$ ; 27,3%), and 3545 were children ( $n = 1$ ; 4,5%).

Most studies adopted a cross-sectional design ( $n = 21$ ; 95,5%). Two studies were qualitative (Martinkevich et al., 2020; Babvey et al., 2021), the others were quantitative ( $n = 20$ , 90,9%; Augusti et al., 2021; Barboza et al., 2021; Baron et al., 2020; Cabrera-Hernández & Padilla-Romo, 2020; Calvano et al., 2021; Chung et al., 2020; Garstang et al., 2020; Kaiser et al., 2021; Kovler et al., 2021; Lawson et al., 2020; Lee et al., 2021; Musser et al., 2021; Petrowski et al., 2021; Platt et al., 2021; Rapoport et al., 2021; Rodriguez et al., 2021; Sharma et al., 2021; Swedo et al., 2020; Whelan et al., 2021; Wong et al., 2021). Thirteen studies analyzed numbers of encounters, referrals, and allegations obtained from helplines, child welfare information systems, and health centers during the pandemic (59,1%; Barboza et al., 2021; Baron et al., 2020; Cabrera-Hernández & Padilla-Romo, 2020; Garstang et al., 2020; Kaiser et al., 2021; Kovler et al., 2021; Lawson et al., 2020; Musser et al., 2021; Petrowski et al., 2021; Platt et al., 2021; Rapoport et al., 2021; Sharma et al., 2021; Swedo et al., 2020). Meanwhile, seven studies evaluated online questionnaires completed by parents ( $n = 6$ , 27,3%; Calvano et al., 2021; Chung et al., 2020; Lawson et al., 2020; Lee et al., 2021; Rodriguez et al., 2021; Wong et al., 2021) or children ( $n = 1$ , 4,5%; Augusti et al., 2021). Finally, one study examined increases in abusive or hateful content via Twitter conversations and Reddit testimonials (4,5%; Babvey et al., 2021), and one study used publicly available court files of CM (4,5%; Whelan et al., 2021). These results showed that the prevalence of CM is addressed with reporting rates in more than half of the studies ( $n = 15$ , 68,2%), while 18,2% of the studies ( $n = 4$ ; Chung et al., 2020; Lawson et al., 2020; Lee et al., 2021; Wong et al., 2021) explored CM as a consequence of specific risk factors (e.g., parental stress, job loss, income instability, perceived parental social isolation). Three studies were designed as survey research based on self-reports of parents and children to demonstrate the current picture of perceived or actual CM (13,6%; Augusti et al., 2021; Calvano et al., 2021; Rodriguez et al., 2021).

Among the reviewed studies, in most studies ( $n = 12$ , 85,7%) considering units where CM reports are received or where CM victims are seen, the numbers of CM encounters and allegations were found to decrease during COVID-19 lockdowns. On the other hand, two studies with clinical samples provided evidence of an increase in the percentages of exposure, referrals, and placements related to violence toward children during COVID-19 lockdowns (14,3%; Kovler et al., 2021; Sharma et al., 2021). These studies showed that despite the total number of encounters related to CM beginning to decrease, the number of hospitalizations and placements in foster care due to CM did not decline. In addition, there was an increase in CM rates in seven of the eight studies conducted outside of clinical samples (87,5%; Chung et al., 2020; Lee et al., 2021; Rodriguez et al., 2021; Wong et al., 2021; Calvano et al., 2020; Lawson et al., 2020; Babvey et al., 2021). In other words, while clinical studies showed a decrease in CM admissions but an increase in CM severity, community-based studies indicated an increase in CM rates excluding sexual abuse. The decrease in CM rates ranged from 8% (Barboza et al., 2021) to 55,3% (Platt et al., 2021), while increase rates ranged from 1,12% (Sharma et al., 2021) to 33,3% (Rodriguez et al., 2021). Furthermore, 18% of the studies showed a relationship between maltreatment and some risk factors, asserting that as risk factors such as parental stress and job loss increase, the rates of CM rise ( $n = 4$ ; Chung et al., 2020; Lawson et al., 2020; Lee et al., 2021; Wong et al., 2021).

**Table 1.** Summary of the Studies About Child Maltreatment Rates During the Pandemic

Study	Country	Source and Date of Data/ Participants/ Child's age group	Methods	Changes in CM Reports	Main Findings
Garstang et al. (2020)	UK	Child Protection Medical Examination (CPME) data from late February to late June 2020.	Quantitative, retrospective	Fewer medical examination referrals in 2020 compared to previous years.	A drop of 39% in CPME referrals for CM during 2020 compared with previous years (with 78 referrals in 2018, 75 in 2019 and 47 in 2020).
Rapoport et al. (2021)	USA	New York City's Administration for Children's Services data from January 2015 to May 2020.	Quantitative, retrospective	Decreases in CM reporting	Fewer allegations of CM were reported than expected in March (-28,8%), April (-51,5%), and May 2020 (-46,0%).
Sharma et al. (2021)	USA	Pediatric ED trauma center data from March through July of 2017 through 2020.	Quantitative, retrospective	Increase or decrease (increase in the incidence of CM in May and June of 2020)	Increase in the proportion of EA (2,52% vs. 7%), non-medical neglect (31,5% vs. 40%) and medical neglect (3,06% vs. 4,19%). The rate of PA (30,8% vs. 28,4%) and SA (21,0% vs 19,5%) decreased.
Kaiser et al. (2021)	USA	Pediatric Health Information System data, from January 1 to August 31, 2020. Age group: 5 years	Quantitative, retrospective	Sharp decline in all cause, the overall volume of ED and inpatient encounters.	When trends in the volume of PA encounters in 2020 are compared to that of the same time frame in previous years (2017–2019), a significant decline at week 10 of 2020 was found (263,4 cases).
Rodriguez et al. (2021)	USA	Following First Families Study. First study: 405 parents (279 mothers, 126 fathers), Second study: 106 mothers. Age group: 0-12 and 5-6.5.	Quantitative, cross-sectional and longitudinal	Both studies indicated increases in CM.	First study: Increased use of discipline (20,3% of parents): 5,3% spanked or hit more; 24,9% yelled/screamed more; 30,7% experienced more conflicts; 4,9% left their children alone more; 12,6% used harsh words more; and 26,7% used EN more. Second study: 3% hit and 33,3% yelled more often; 34,9% reported more conflict, and 11,9% spanked more harshly.
Musser et al. (2021)	USA	Florida Foster Care System (FFCS) data for youth from January 1, 2001, through June 30, 2020.	Quantitative, retrospective	Rates of placement into FFCS decreased for the first half of 2020 but it has increased overall compared to previous year.	Although there was a reduction in the number of youths placed in foster care during the Safer-at-Home Order (24% fewer youths in 2020 compared to 2019), there was an increase of 3,34% in the proportion of placements related to CM
Swedo et al. (2021)	USA	National Syndromic Surveillance Program, from January 2019 to September 2020. Age group: 0-4, 5-11, and 12-17 years.	Quantitative, retrospective	ED visits related to CM decreased but hospitalization did not decline.	CM-related ED visits ending in hospitalization increased among children younger than 18, from 2,1% in 2019 to 3,2% in 2020 (for 0–4 years: 3,5% in 2019 vs 5,3% in 2020; for 5–11 years: 0,7% in 2019 vs 1,3% in 2020; for 12–17 years: 1,6% in 2019 vs. 2,2% in 2020).

... Table 1.

<i>Study</i>	<i>Country</i>	<i>Source and Date of Data/ Participants/ Child's age group</i>	<i>Methods</i>	<i>Changes in CM Reports</i>	<i>Main Findings</i>
Whelan et al. (2021)	USA	Publicly available CM court filings from January 1, 2010, to June 30, 2020.	Quantitative, retrospective	Declining trend in CM charges.	Cases between February and June 2020, had an overall 25,7% lower average. All individual months had progressively lower cases than forecasted except for March.
Augusti et al. (2021)	Norway	Adolescents ( $n = 3545$ ) in June 2020. Age group: 13-16 years.	Quantitative, cross-sectional (online survey)	Increase or decrease not specified.	CM during lockdown was (2,4% PA and 1,4% SA). Online SA rate was 5,6%. Perceived family affluence and family risk factors were associated with PA (Odds Ratio = 11,01; Odds Ratio = 5,36), but also other types of abuse.
Cabrera-Hernández et al. (2020)	USA	Mexico City Attorney General's Office, from January 2019 to June 2020.	Quantitative, retrospective	CM reports decreased	An average reduction in CM reports of 29% and 30%, respectively, with larger reductions among females and in higher-poverty municipalities.
Lee et al. (2021)	USA	Parents ( $n = 283$ ). Age group: 0-12 years	Quantitative, cross-sectional (online survey)	Increase in CM	Parental perceived social isolation showed association with a 103% increase in the odds of shouting, yelling, or screaming (Odds Ratio = 2,03). Employment status change 275% increase the odds of spanking or slapping (Odds Ratio = 3,75).
Wong et al. (2021)	Hong Kong	Parents ( $n = 600$ ), from May 29 to June 16, 2020. Age group: >10 years.	Quantitative, cross-sectional (online survey)	Income instability amplified the risk of severe and very severe PA.	Job loss or large income reduction was associated with severe (Odds Ratio = 3,68) and very severe PA (Odds Ratio = 4,05). Income reduction was associated with severe (Odds Ratio = 3,29) and very severe PA (Odds Ratio = 7,69).
Calvano et al. (2021)	Germany	Parents ( $n = 1024$ ), August 2020. Age group: >18 years.	Quantitative, cross-sectional (telephone and online survey)	Increase in witnessing DV and EA	1/3 of the participants reported CM. In this group, 29,1% reported an increase in witnessing DV, and 42,2% reported an increase in EA.
Baron et al. (2020)	USA	Florida Child Abuse Hotline	Quantitative, retrospective	Sudden decline in the numbers of CM allegations in March and April 2020.	Allegations were 27 percent lower than expected in current year.
Chung et al. (2020)	Singapore	Parents ( $n = 258$ ), data from Facebook and community organizations.	Quantitative, cross-sectional (online survey)	Increase in the use of harsh parenting	Parents who faced higher level of impact by pandemic demonstrated more parenting stress. Increased parenting stress associated with harsh parenting practices.
Barboza et al. (2021)	USA	Los Angeles Police Department, CM reports	Quantitative, retrospective	Decline in CM reports	A 7,95% decrease in the number of CM reports compared to the same time immediately preceding it.

... Table 1.

Study	Country	Source and Date of Data/ Participants/ Child's age group	Methods	Changes in CM Reports	Main Findings
Martinkevič et al. (2020)	Denmark	Danish national authorities and experts	Qualitative, retrospective	Decrease in PA reports	Suspected abuse reports decreased by 42% during the lockdown.
Lawson et al. (2020)	USA	Parents ( $n = 342$ , 62% mothers). Age group: 4-10 years.	Quantitative, cross-sectional (online survey)	Parents who lost their jobs have a higher possibility of EA.	Parental job loss resulted in a 4,86-fold increase in the odds of experiencing EA. Additionally, parental depression and pre-pandemic PA emerged as significant predictors influencing whether parents resorted to PA during the pandemic.
Platt et al. (2021)	Brazil	Information System for Notifiable Diseases, reports of health professionals. Age group: > 19 years.	Quantitative cross-sectional (online survey)	Decrease in the total number of reports since the social isolation.	55,3% of decrease was observed in CM reports in the isolation period.
Petrowski et al. (2021)	International	Child helplines from 45 countries ( $n = 48$ )	Quantitative, retrospective	The number of CM related contacts decreased	CM related contacts decreased by 17% between any quarter of 2019 and the second quarter of 2020.
Kovler et al. (2021)	USA	Pediatric trauma center for PA injuries	Quantitative retrospective	Increase in the proportion of traumatic injuries caused by PA.	Eight patients with PA injuries were treated during the pandemic, compared to four in 2019 and three in 2018.
Babvey et al. (2021)	International	Social media conversations during social isolation (Twitter and Reddit)	Qualitative, content analysis, retrospective	Increase in abusive content	Abusive content on Twitter increased more than 30% in Indonesia, the Philippines, Portugal, and Brazil compared to 2019. A 106% growth in posts related to PA, a 94% increase for CM, an 88% increase for IPV, and a 62% increase for SA on Reddit.

**Note.** ED = emergency department; CM= child maltreatment; PA = physical abuse; SA = sexual abuse, EA = emotional abuse, EN = emotional neglect, IPV = intimate partner abuse, DV = domestic violence

### Discussion, Conclusion, and Suggestions

A total of 22 studies were included in this scoping review to identify the prevalence of CM worldwide during the COVID-19 crisis. As a result of the scoping review, many important and striking results were obtained. First, studies have reported both increases and decreases in CM rates. These findings differ according to the place of study, study method, and participant characteristics. When those variables are not considered, comparisons of the findings lead to contradictory results. In most of the studies (85,7%) evaluating units where CM reports are received or where CM victims are seen, the reporting rates of CM are shown to have decreased. According to most studies conducted in health centers, on the other hand, while the number of referrals decreased, there was an increase in rates of traumatic injury or hospitalization due to physical abuse, except for one study (Sharma et al., 2021). Furthermore, community-based studies involving parents and survey studies show an increase in CM rates excluding sexual abuse (e.g., Chung et al., 2020; Lee et al., 2021; Rodriguez et al., 2021). In some studies, the decrease in CM rates ranged from 8% (Barboza et al., 2021) to 55,3% (Platt et al., 2021), while in others, the increase in rates ranged from 1,12% (Sharma et al., 2021) to 33,3% (Rodriguez et al., 2021). It was concluded in these studies that parental characteristics such as unemployment, parenting stress, depression, or the presence of physical abuse before the pandemic increased the risk of CM. Finally, there is a greater abundance of studies

focused on child abuse during the pandemic, using administrative records from the police, child protection services and/or helplines, hospitals, or law firms, compared to studies relying on alternative samples (63,6% vs. 36,4%). For example, among all studies reviewed, only one included the perspectives of children affected by CM (Augusti et al., 2021). In that study, adolescents aged 13 to 16 years were surveyed. In other words, no study was identified that directly collected data from children aged 0-12.

One of the findings of this study was the decrease in CM reports in most studies. Findings that showed a decline in outreach to child helplines are not surprising given the fact that links between reporters and victims of CM were severed due to stay-at-home orders (i.e., school closures) during COVID-19 (Baron et al., 2020). As teachers, school counselors, and other school personnel are mandated to report any suspected cases of CM, a reduction in the total number of allegations can be explained by declines in the number of initial allegations, which are most likely to be made by school personnel. This is consistent with research highlighting the fact that referrals from other sources did not increase during times of restrictions (Benson, Fitzpatrick, & Bondurant, ., 2020), which shows the importance of school personnel in reporting CM. On the other hand, the low number of abuse reports does not necessarily reflect the absence of abuse. It may also be explained by children's lack of awareness that the actions they experience are defined as abuse, the absence of a social support person or system to report to, or the inability to report to the system if a system exists (Koçtürk & Bilginer, 2020). Confirming this, other studies based on hospital records reporting an increase in child abuse also reported that children were seriously injured and hospitalizations due to abuse increased (Kovler et al., 2021; Sharma et al., 2021). This decline in the number of children calling child helplines may indicate access difficulties since children are not able to reach out to child protection services safely. As they are confined to the home, they are unable to escape perpetrators of violence and abuse (Peterman, O'Donnell, & Palermo, 2020). This indicates a need to seek new solutions to facilitate children's ability to reach protective social services under difficult circumstances.

Another noteworthy finding is a significant increase in cases of physical child abuse (e.g., Kovler et al., 2021). Due to COVID-19 restrictions, access to childcare services and pediatricians, who normally make the majority of referrals, has been interrupted, which may increase the risk of physical abuse. In a recent study conducted in France, Loiseau et al. (2021) found a notable increase in the relative frequency of young children being hospitalized for physical abuse. The rates changed from 0,053% in 2017 to 0,073% in 2020. According to that study, when compared with the 2017-2019 period, the number of children who were physically abused during the first lockdown was 40% higher than what would normally be expected. Considering the decrease in the number of reports but the increase in the number of severe cases seen in this review, it can be said that physical abuse cases failed to come to light rather than decreasing in frequency. However, to reach a definite opinion on this issue, large-sample studies with children are needed.

This review has also highlighted that CM is more likely to occur when a family is under economic hardship due to COVID-19. Job loss in the household was found to be related to parental depression and these households hold an increased likelihood of psychological abuse (Barboza et al., 2021; Lawson et al., 2020; Wong et al., 2021). In addition to findings of progressive drops in child abuse reports the COVID-19 pandemic has hurt parenting by increasing conflicts with children accompanied by the use of harsh parental behaviors such as yelling, spanking, or hitting (Chung et al., 2020; Lee et al., 2021; Rodriguez et al., 2021). This is consistent with research indicating that lockdowns are associated with increased risks of family violence (Campbell, 2020; Peterman et al., 2020; Piquero, Jennings, Jemison, Kaukinen, & Knaul, 2021). When the COVID-19 crisis is considered from an ecological point of view, it is seen to have impacted families financially, physically, and mentally, leading to high levels of parental stress (Chung et al., 2020; Lawson et al., 2020). Stressful events such as social isolation or unemployment related to COVID-19 create distress for the parent, and parental distress may subsequently result in conflicts in the home environment, leading to abuse of the child. According to the family stress model, financial instability in the case of events such as job loss puts considerable stress on family relationships. As financial stress accumulates, negative child outcomes via family processes also increase (Barnett et al., 2008; Warren & Font, 2015). In the related literature, parental job loss was identified as a risk factor contributing to future physical and psychological abuse (Conrad-Hiebner & Byram, 2020), while unemployment was associated with future involvement with child welfare services during elementary school years (Baldwin, Biehal, Allgar, Cusworth, & Pickett, 2020). When all this information is evaluated together, it can be concluded that children whose parents have high-stress levels are at risk for CM.



Another finding of this study is that most studies reported findings from the Americas, with low- and middle-income countries (LMICs) and different regions of the world such as Africa, the Middle East, or Asia being largely neglected in this body of English-language literature. LMICs, however, have high rates of CM together with social, economic, and/ or systematic challenges and a lack of prevention or intervention strategies against CM (Ward, Sanders, Gardner, Mikton, & Dawes, 2016). These countries are also known to be affected more heavily by the COVID-19 pandemic in comparison to high-income countries (International Labour Organization, 2021). Consequently, uncovering the CM rates in LMICs during the COVID-19 pandemic may enable us to gain a more comprehensive view of the issue and take further measures to prevent CM or help children who are being maltreated.

In conclusion, in this scoping review, it is estimated that CM may have decreased by half at best and increased by approximately one-third (33%) at worst during the pandemic period. This review has also indicated that most CM reports have shown a decline during the pandemic, but researchers and practitioners simultaneously express concerns about the reliability of such report numbers (e.g., Caron et al., 2020; Herrenkohl, Scott, Higgins, Klika, & Lonne, 2020). Therefore, it is assumed by the researchers that the actual number of child abuse cases is higher than the reported number since child abuse becomes less visible during the pandemic. In this context, this review supports the view that many types of abuse are concentrated, but CM may go unnoticed without access to social networks, based on the findings of serious cases of CM in some studies (e.g., Chung et al., 2020; Swedo et al., 2021). Indeed, prolonged school absenteeism and social distancing measures decreased the quality of contact that children have with reporters of abuse, such as teachers, school counselors, peers, and neighbors. Therefore, it is important that child protection units are accessible to children during the pandemic and that their authorities take measures against CM. It would also be beneficial for child protection units to make use of people such as teachers and family physicians during the pandemic, as they have contact with children. They may be more open to experts, they know than experts who are strangers.

This study demonstrates that the relationship between the COVID-19 crisis and CM should be considered within a broader socioecological framework, as suggested by Bronfenbrenner (1977). While children are generally not considered a high-risk group for severe COVID-19 health outcomes (Jordan, Adab, & Cheng, 2020), existing evidence highlights the significant direct and/or indirect effects of the pandemic on children's familial, societal, economic, and psychological well-being. According to these findings, it can be said that CM rates did not decrease, and the types of CM changed according to studies conducted with population-based samples, but there was a decrease in the number of referrals compared to studies based on clinical samples. In the literature, it is emphasized that prevalence rates are higher in self-report studies than in informative studies, and self-reported prevalence rates will be closer to the actual rates in the population (Stoltenborgh et al., 2011). As methodological variations between articles have an impact on the prevalence of CM (e.g., identifying higher rates in qualitative studies and self-report studies), more data is needed on the prevalence, frequency, and severity of CM, especially based on reports from children. In addition, considering the reported findings on increased rates of traumatic injury or hospitalization due to physical abuse, it can be said that the probability of the emergence of physical abuse cases specifically increases in the event of serious physical injuries.

More qualitative and quantitative studies should be implemented to understand the changes in the patterns of exposure to CM during the COVID-19 pandemic. As schools are currently opened around the world, researchers can collect more direct data from children who had experienced abuse during lockdowns and school counselors, teachers, school nurses, and social workers can become important sources of reporting once again. More resources can be allocated by governments and child protection services to identify abused children and protect them and set new policies to be implemented in times of pandemic. For example, child protection agencies can provide telehealth services and online counseling sessions to a wide range of potential victims. In addition, children with familial and individual risk factors for CM can be followed up with home visits by the Ministry of Family and Social Services and/or child protection units for reasons such as economic aid or health checks. Health personnel can also be warned administratively to be more attentive to symptoms of CM during the pandemic period.

Another significance of this study is that some findings obtained in this review show that both economic and psychological issues of parents during COVID-19 may be damaging to children's safety because of increasing the risk of psychological and physical abuse. As these are risk factors for potential cases of child abuse, efforts to support families' financial and psychological needs by providing jobs and mental health services during times of crisis are essential. Particularly for families known to be at risk in

terms of socioeconomic status and for children with prior histories of maltreatment, it is important to alleviate financial difficulties and protect the children from victimization. Therefore, social and economic policies need to be designed to reduce the challenges of the pandemic. Psychological support and psychoeducational interventions designed for both parents and children should be provided to tackle the long-term effects of this pandemic on families.

There are some limitations to be noted in the current study. Firstly, as most of the studies reviewed here were from the United States and other Western countries, the results largely represent conditions in more individualistic and developed countries. This systematic review has primarily covered high-income countries, most likely due to the search strategies and inclusion criteria (e.g., language). Data from LMICs and collectivist cultures need to be determined to draw more comprehensive conclusions about the global prevalence of CM. Secondly, this study is limited by the small number of participants included in the reviewed studies. Therefore, for more concrete implications, studies should be conducted with larger groups. Both governmental institutions and stakeholders involved in child protection should collaborate with researchers. Thirdly, as methodological differences between studies have an impact on the reported prevalence of CM (Stoltenborgh et al., 2011), the effects of the pandemic need to be investigated according to different CM types in further studies in the future. Finally, due to the lack of studies conducted with children aged 0-12 during the pandemic, it can be said that there is a need for studies, especially with preschool and primary school children.

### Ethical Statement

During the writing process of the study “*Child Maltreatment Reports during the COVID-19 Pandemic: A Scoping Review*” scientific rules, ethical and citation rules were followed. No falsification was made on the collected data and this study was not sent to any other academic publication medium for evaluation.

### Statement of Contribution Rate of Researchers

The contribution rates of the authors in the study are equal.

### Declaration of Conflict

There is no potential conflict of interest in the study.

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## TÜRKÇE GENİŞ ÖZET

COVID-19 döneminde yapılan çalışmalar, çocuk istismarı bildirim oranlarının düştüğünü gösterse de (Campbell, 2020), okulların uzun süre kapalı kalması, ekonomik zorluklar, sosyal izolasyon önlemleri ve sağlık, sosyal ve yasal hizmetlere erişimde yaşanan zorluklar (Chung vd., 2020; Garstang vd., 2020; Lawson vd., 2020; Rapoport vd., 2021) gibi pandemiyi bir araya getirdiği olumsuz koşullar çocuklar için istismarla karşılaşma riskini daha da artırmıştır. Ekolojik bakış açısıyla ele alındığında (Belsky, 1980), COVID-19 pandemisi de çocuk istismarını etkileyebilecek çevresel bir faktör olarak düşünülebilir. Bu nedenle pandemiyi çocuk istismarı olgusunu nasıl etkilediğini öğrenmek için COVID-19 döneminde çocuk istismarının yaygınlığının değerlendirilmesi önemlidir. COVID-19 pandemisi sırasında çocuk istismarı yaygınlığını inceleyen bugüne kadar yalnızca bir derleme makalesi tespit edilmiştir (Cappa ve Jijon, 2021). Pandemiyi çocuk istismarı üzerindeki ilk etkilerini ele alan yeni bir derleme çalışmasının çocuklarla çalışan araştırmacı ve uygulayıcılara katkı sağlayacağı düşünülmektedir. Bu nedenle, bu çalışmanın amacı COVID-19 pandemisinin çocuk istismarı üzerindeki etkilerine ilişkin bir literatür taraması yaparak, “Pandemi döneminin ilk bir yılında çocuk istismarının yaygınlığına ilişkin bulgular nelerdir?” sorusunu cevaplamaktır. Seçilen çalışmaların bulgularını ve sonuçlarını incelemek için PRISMA yönergeleri (Moher vd., 2009) kullanılmıştır. Derlemeye dâhil edilme kriterleri, çalışmaların (a) Mart 2020 - Mart 2021 tarihleri arasında yayınlanması; (b) araştırma makalesi olması; (c) İngilizce yazılması; (d) bilimsel hakemli dergilerde yayınlanması; ve (e) uluslararası, kültürler arası veya ülke-temelli çalışmalar olarak yürütülmesidir. Dışlama kriterleri ise, çalışmaların (a) başyazı, mektup veya inceleme olması; (b) yayınlanmamış tez çalışması olması; (c) hakemli bir dergide yayınlanmamış olması veya (d) doğrudan çocuk istismarını ele almıyor olmasıdır (ör. yakın eş şiddetini ele alan yayınlar). Literatür taraması, 2021’in Temmuz ayında MEDLINE, Web of Science, Science Direct, ProQuest ve ERIC veritabanları aracılığıyla (COVID-19 veya coronavirus) ve (child abuse veya child maltreatment) arama terimleri kullanılarak yapılmıştır. Pandemiyi ilk bir yılı boyunca çocuk istismarı ile ilgili en fazla araştırma yapılan ülke Amerika Birleşik Devletleriyken ( $n = 13$ ); İngiltere ( $n = 1$ ), Brezilya ( $n = 1$ ), Singapur ( $n = 1$ ), Norveç ( $n = 1$ ), Hong Kong ( $n = 1$ ), Almanya ( $n = 1$ ) ve Danimarka ( $n = 1$ ) bu konuda araştırma yapılan diğer ülkelerdir. Belirtilen çalışmalara katılan katılımcıların 2912’si ebeveynlerken (% 27,3) ve 3545’i çocuklardır (% 4,5). Çalışmaların temel metodolojik özellikleri ile ilgili olarak, çalışmaların çoğu kesitsel desen kullanmıştır ( $n = 21$ ; % 95,5). İki çalışma hariç (Babvey vd., 2021; Martinkevich vd., 2020), diğerleri nicel çalışmalardır ( $n = 20$ ). Bu çalışmalar, pandemi döneminde çocuk istismarı ile ilgili bildirim sayısının azalmaya başlamasına rağmen, çocuk istismarına bağlı sağlık kurumuna yatış ve sosyal koruma yerleşimlerinin sayısının azalmadığını göstermektedir. Ayrıca, klinik örneklem dışında yapılan sekiz çalışmanın yedisinde çocuk istismarı oranlarında artış olduğu görülmüştür (% 87,5; Babvey vd., 2021; Calvano vd., 2020; Chung vd., 2020; Lawson vd., 2020; Lee vd., 2021; Rodriguez vd., 2021; Wong vd., 2021). Başka bir deyişle, klinik çalışmalar çocuk istismarı bildirimlerinde bir azalma, ancak çocuk istismarı şiddetinde bir artış gösterirken, toplum temelli çalışmalar cinsel istismar hariç çocuk istismarı oranlarında bir artış olduğunu göstermektedir. Çocuk istismarı oranlarındaki düşüş % 8 (Barboza vd., 2021) ile % 55,3 (Platt vd., 2021) arasında değişirken, artış oranları ise % 1,12 (Sharma vd., 2021) ile % 33,3 (Rodriguez vd., 2021) arasında değişmektedir. Ayrıca, çalışmaların % 18’i ( $n = 4$ ) çocuk istismarı ile ebeveyn stresi ve iş kaybı gibi risk faktörleri arasında ilişki bularak, bu risk faktörleri arttıkça çocuk istismarı oranlarının arttığını ileri sürmüştür. Bu derleme çalışmasına toplam 22 çalışma dahil edilmiştir. Çalışmanın sonuçları çocuk istismarı oranlarında hem artış hem de düşüş olduğunu bildirmiştir. Çocuk istismarı bildirimlerinin veya çocuk istismarı mağdurlarının görüldüğü birimlere başvuruların değerlendirildiği çalışmaların çoğunda (%85,7) çocuk istismarı bildirim oranlarının azaldığı görülmektedir. Diğer yandan, sağlık merkezlerinde yapılan çalışmaların çoğuna göre, merkezlere yapılan başvuru sayısı azalırken, bir çalışma dışında fiziksel istismara bağlı travmatik yaralanma veya hastaneye yatış oranlarında artış görülmüştür (Sharma vd., 2021). Yapılan çalışmalarda ayrıca işsizlik, ebeveynlik stresi, depresyon veya pandemiden önce fiziksel istismarın varlığı gibi ebeveyn özelliklerinin çocuk istismarı riskini arttırdığı sonucuna varılmıştır. COVID-19 pandemisi sırasında okulların kapanması

nedeniyle istismar mağdurları ile istismar vakalarını bildirenler arasındaki baęlantıların kopması göz önüne alındığında, çocuk yardım hatlarına başvurularda düşüş olduğunu gösteren bulgular şaşırtıcı değildir (Baron vd., 2020). Toplam bildirim sayısındaki azalma, şüpheli herhangi bir çocuk istismarı vakasını bildirmekle yükümlü öğretmenler, okul psikolojik danışmanları ve diğer okul personeli tarafından yapılması muhtemel olan bildirim sayısındaki düşüşlerle açıklanabilir. Öte yandan, istismar bildirimlerinin düşük olması istismarın yaşanmadığı anlamına gelmemektedir. Çocukların maruz kaldıkları eylemlerin istismar olarak tanımlandığının farkında olmamaları ve çocukların çocuk koruma hizmetlerine güvenli bir şekilde ulaşmakta güçlük yaşamaları bu düşüşlerin sebeplerine işaret edebilir. Bu nedenle, çocukların zor şartlar altında dahi koruyucu hizmetlere ulaşmalarını kolaylařtırmak için yeni çözümler geliştirilmesine ihtiyaç vardır. Bu derlemenin sonuçlarından biri de COVID-19 nedeniyle ailelerin yaşadığı ekonomik zorlukların çocuk istismarının ortaya çıkma olasılığını arttırdığını vurgulamasıdır. Çalışmalarda pandeminin ilk yılında işlerini kaybeden ebeveynlerin daha depresif oldukları ve bunun psikolojik istismar için risk faktörü olduğu ortaya konmuştur (Barboza vd., 2021; Lawson vd., 2020; Wong vd., 2021). Bu sonuçlar, pandemi döneminde uygulanan eve-kapanmaların artan aile içi şiddet riskleriyle ilişkili olduğunu gösteren arařtırmalarla tutarlıdır (Campbell, 2020; Peterman vd., 2020; Piquero vd., 2021). Çalışmadan elde edilen bulgular değerlendirildiğinde popülasyona dayalı örneklerle yapılan çalışmalara göre çocuk istismarı oranlarının düşmediği ve istismar tiplerinin değiştiği, ancak klinik örneklere dayalı çalışmalarla karşılaştırıldığında başvuru sayısında azalma olduğu söylenebilir. Bu derleme çalışması aynı zamanda pandemi sırasında çocuk istismarına dair yapılan bildirimlerde genel bir düşüş olduğunu göstermektedir. Ancak arařtırmacılar ve uygulayıcılar bu bildirim sayılarının güvenilirliği konusunda endişelerini dile getirmektedirler (örn., Caron vd., 2020; Herrenkohl vd., 2020). Bu nedenle, COVID-19 pandemisi sırasında çocuk istismarı yaygınlığını ve istismar şekillerini anlamak için daha fazla nitel ve nicel çalışma yapılmasına ihtiyaç vardır. Son olarak, işsizlik ve ebeveynlik stresi gibi potansiyel risk faktörlerinin çocuk istismarı ile ilişkisi düşünüldüğünde, COVID-19 pandemisi gibi kriz dönemlerinde istihdam ve ruh saęlığı hizmetleri sunarak ailelerin finansal ve psikolojik ihtiyaçlarını desteklemek önem arz etmektedir. Bu çalışmanın olası katkıları kadar sınırlılıkları da bulunmaktadır. İlk olarak, çalışmanın sonuçları incelenen çalışmalara dâhil edilen katılımcılar ile sınırlıdır. Çalışmalar arasındaki metodolojik farklılıkların bildirilen çocuk istismarı yaygınlık oranları üzerinde bir etkisi olduğu düşünüldüğünde (Stoltenborgh vd., 2011), gelecekte yapılacak çalışmalarda COVID-19 pandemisinin etkilerinin farklı istismar ve ihmal türlerine göre arařtırılması önerilebilir.