

ABSTRACT

Role of GPs in Suspected Child Abuse

The Malaysian Child Act 2001 defines “child abuse” as when the child has been or is at substantial risk of being physically or emotionally injured or sexually abused or neglected in terms of adequate care, food, shelter, clothing, medical attention, supervision and safety, or abandonment or others.

There are many contributing factor to child abuse, including individual, familial, community and societal. The most risk factors are parental and the child herself/himself.

History of parents being abused or neglected as a child, alcoholism/ substance abuse, mental illness and domestic violence in the parental relationship are major risk factors.

Young children (age < 3 years), product of unplanned/unwanted pregnancy, born with congenital anomalies, and/or having a chronic illness are at higher risk of being physically and emotionally abused.

General practitioners (GPs) are key figures in health care organisations. GPs generally under-identify and under-report child abuse due to uncertainty about the diagnosis, a fear of harming the relationship with parents, lack of knowledge about risk factors and pressure of time.

It is crucial for GPs to have high index of suspicion especially the common diagnostic red flags (both physical and nonphysical clues) in children. A comprehensive history, including the parental or caretakers’ psychosocial history is also important.

One must be aware of the common mimics of physical injuries including knowledge on Child Act 2001 and the process of referrals including reporting to a Child Protector is essential.

GPs should maintain good networking with their paediatricians in the locality for assistance to make the referral process seamless.

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