

LETTERS

Health care providers must be alert for violence against children during the pandemic

We wish to commend Bradley and coauthors for their timely and insightful commentary on the critical issue of intimate partner violence in the context of the coronavirus disease 2019 pandemic, and practical ways for health care providers to identify and support victims.¹

In this discussion of intimate partner violence, it is imperative that we also consider the impact of the pandemic on violence against children in Canada and abroad. Child maltreatment, including abuse, neglect and exposure to family violence, affects one-third of Canadian children younger than 15 years and is among the leading causes of child mortality in young children.² Intimate partner violence and child maltreatment often occur together and share many risk factors.^{3,4} There is widespread concern that children are now at higher risk of violence because of intensified family stress, financial insecurity and lack of access to supports. At the same time, physical and social distancing have restricted the interface between children and the protective adults who most commonly identify and report cases of suspected child maltreatment. Together, these factors have led to a deeply troubling dichotomy — reports of child abuse are down and severity of cases is up.⁵

We as health care providers continue to see children and families despite the pandemic and are uniquely situated to identify child maltreatment. In some cases, we

may be the only contact a child has outside the home. We must make time to connect with and support families. Regardless of the specific area of medicine in which we practise, we must all be vigilant for the signs of abuse, and we all have a duty to report it when it is suspected. A child's life could depend on it.

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