Prevalence of violence in children and adolescents identified by clinical health professionals: systematic review and meta-analysis

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1 INTRODUCTION

Health professionals are in a favorable position to identify likely situations of violence, since victims often seek health services as a result of their symptoms.

2 OBJECTIVE

Analyze the prevalence of reporting and notification of violence in children and adolescents in the work of clinical health professionals.

3 METHODOLOGY

The search strategy was conducted in six electronic databases and in gray literature, for articles published until June 1, 2022. Two reviewers independently evaluated the potentially eligible studies according to the following criteria: cross-sectional studies conducted with health professionals who provided clinical care for children and adolescents and who encountered cases of violence. There were no language or publication time restrictions. Two reviewers extracted data on the included studies' characteristics, methods, and results. Risk of bias analysis was performed using the MASTARI instrument. Estimates of interest were calculated using random effects meta-analysis. The certainty of the evidence was assessed with the GRADE.
4 RESULTS

Fifty-two references were selected for the qualitative synthesis and forty-two for the quantitative synthesis. Regarding the risk of bias of the studies, nine were classified as low risk of bias, twenty-eight as moderate risk and fifteen as high risk. The meta-analysis was performed on 42 articles, which included data on the prevalence of reporting violence in children and adolescents in the clinical work of health professionals. The total combined prevalence of reporting violence was 41% (95%CI; 34% - 48%, I² = 97%), in the subgroups the prevalence was 32% (95%CI; 14% - 54%, I² = 97%) for speech pathologists, 27% (95%CI; 23% - 32%, I² = 97%) for dentists, 65% (95%CI; 52% - 78%, I² = 97%) for physicians. Meta-analysis of case reporting occurred with 39 articles and was 30% (95%CI; 21% - 38%, I² = 98%); in subgroups it was 2% (95%CI; 1% - 4%, I² = 98%) for speech pathologists, 21% (95%CI; 11% - 32%, I² = 98%) for dentists, 58% (95%CI; 44% - 72%, I² = 98%) for physicians, 31% (95%CI; 20% - 43%, I² = 98%). The level of certainty of evidence for both outcomes was judged to be very low. Factors that led to decreased certainty of evidence were related to the risk of bias and the high heterogeneity present in the analysis, not explained by subgroup analysis.

5 CONCLUSION

Approximately one in two health professionals encounter situations of violence against children and adolescents in their clinical practice (41%) and approximately one in three health professionals report the cases (30%).
REFERENCES

Artigos publicados em Revista Científica: