

# Is Child Sexual abuse being considered during Child Protection Medical Assessment?

## Background

Child sexual abuse (CSA) affects 11.3% UK children, more commonly those who have suffered other forms of abuse. Health care professionals must be proactive to detect it. Children suffering from physical abuse or neglect in the UK routinely undergo a Child Protection Medical Assessment (CPMA). This must be performed rigorously to detect co-existent CSA.

## Methods

Data were collected from doctors performing CPMAs during a four week period in nine healthcare trusts in the West Midlands, UK. Data collected included location of assessment, job role of the examiner and whether features that were specifically useful in detecting CSA had been present. Data were analysed using multivariable logistic regression to establish which factors made it more likely that features specifically useful in the detection of CSA were present in the CPMA.

## Results

In 91 CPMAs, anal or genital symptoms were specifically asked about in 25% (23/91), constipation was asked about in 42% (38/91) and UTIs in 18% (16/91). A change in behaviour or mood was asked in 44% (40/91) of CPMAs, and specific abnormal behaviours in 26% (24/91). Persistent genital and anal symptoms were more likely to be enquired about if the medical was undertaken in a community setting (OR 6.59, 95% CI 2.05-21.1). A history of bowel and urinary problems were also more likely to be asked in community based medicals. Forty three percent of verbal children were spoken to alone.

## Conclusions

Clinicians performing CPMAs are not consistently considering CSA in the children they are assessing. Given the frequent co-existence of different forms of abuse, we risk failing the children that we are aiming to protect using this approach.