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Interprofessional Collaboration: Nurses Improving Child Abuse Outcomes

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Abstract

This collection of research underscores the vital role of *Interprofessional Education* (IPE) and Multidisciplinary Teams (MDTs) in tackling child maltreatment. Studies highlight how collaborative training among diverse healthcare and social service professionals improves recognition, assessment, and reporting of abuse. Forensic nurses are key, providing expert assessment and evidence collection within these teams. Furthermore, effective education enhances professionals' knowledge and confidence in reporting, addressing barriers like insufficient training. The collective evidence affirms that integrated team interventions lead to better case coordination, thorough investigations, and improved protective outcomes for vulnerable children and families.

Keywords

Child abuse prevention; Child maltreatment reporting; Interprofessional Education (IPE); Multidisciplinary Teams (MDT); Forensic Nursing; Healthcare Professionals; Child Protection; Collaborative Care; Nurse Education; Reporting Barriers

Introduction

Child maltreatment remains a significant global public health concern, demanding comprehensive and collaborative strategies for its prevention, identification, and response. Addressing this complex issue effectively necessitates a synergistic approach involving diverse professionals across healthcare, social services, and legal systems. Here's the thing: recent research strongly advocates for the implementation and continuous improvement of interprofessional education (IPE) and multidisciplinary team (MDT) interventions as cornerstones for strengthening child protection frameworks.

The critical importance of IPE in bolstering child abuse prevention strategies and enhancing reporting mechanisms is well-

established [1].

This collaborative training among diverse professionals markedly improves their ability to recognize, assess, and report child maltreatment, ultimately leading to a more coordinated and effective response [1]. Building on this, the impact of IPE on child maltreatment reporting has been systematically explored, with evidence demonstrating that IPE programs can significantly improve healthcare professionals' knowledge, attitudes, and confidence in identifying and reporting child abuse, leading to more timely and effective interventions for vulnerable children [4].

Nurses play an absolutely essential role within these multidisciplinary teams addressing child maltreatment [2].

Their key contributions span identification, assessment, intervention, and advocacy, underscoring their unique position in facilitating coordinated care and improving outcomes for affected children and families [2]. More specifically, forensic nurses contribute significantly within interdisciplinary child protection teams [3]. Their specialized roles include expert assessment, meticulous evidence collection, and crucial collaboration with other profession-

als, which collectively enhance the overall effectiveness of child abuse response and investigation [3]. This integral role of forensic nurses is further detailed by examining their indispensable contributions to interdisciplinary child abuse response teams, including medical forensic examinations, evidence collection, and critical participation in team meetings. This highlights how their expertise is pivotal for accurate assessment and effective collaboration in complex child maltreatment cases [6].

Developing sustainable pediatric forensic nursing programs within tertiary care centers, emphasizing a multidisciplinary approach, has been described as a crucial step in enhancing care and support for child maltreatment victims [8].

These programs outline the essential steps, challenges, and successes involved in their establishment, showcasing how specialized forensic nursing services, when integrated with other disciplines, provide invaluable support [8].

Despite the clear benefits of these collaborative frameworks, various factors influence child maltreatment reporting by health professionals. A systematic review and meta-analysis identified common barriers such as insufficient knowledge, fear of consequences, and ambiguous reporting protocols. Crucially, this research also highlighted facilitators like comprehensive training and supportive organizational policies, all essential for improving reporting rates [5].

This highlights an ongoing need for robust educational interventions.

Indeed, studies examining nursing students' knowledge, attitudes, and self-efficacy concerning child maltreatment identification and reporting reveal existing gaps in their preparedness [9].

This underscores the importance of integrating comprehensive education on child abuse into nursing curricula to equip future nurses with the necessary skills and confidence for effective reporting and intervention [9]. This is paramount for ensuring a prepared and competent workforce.

Looking at the broader impact, multidisciplinary team (MDT) interventions in child abuse cases have proven effective [7].

Integrated teams, involving professionals from various sectors, demonstrably improve case coordination, information sharing, and service delivery, leading to more comprehensive assessments and better protective outcomes for children [7]. The positive impact of a multidisciplinary team (MDT) approach on outcomes in child maltreatment cases has been further assessed, identifying improved investigative thoroughness, enhanced coordination of services, and

better long-term protective measures for children as key benefits [10].

This affirms the effectiveness of collaborative models in addressing complex child abuse situations [10].

Ultimately, the collective evidence makes it clear: a truly effective response to child maltreatment hinges on robust interprofessional education and well-coordinated multidisciplinary teams. These elements are fundamental for fostering environments where professionals are equipped, confident, and collaboratively aligned to protect vulnerable children.

Description

Effectively addressing child maltreatment requires a multifaceted approach, with interprofessional education (IPE) serving as a critical foundation. Research highlights how IPE significantly bolsters child abuse prevention strategies and enhances reporting mechanisms [1]. This collaborative training across diverse healthcare and social service professionals fundamentally improves their capacity to recognize, assess, and report child maltreatment, fostering a more coordinated and effective response [1]. Furthermore, a systematic review specifically on IPE for child maltreatment reporting showcases its tangible impact, demonstrating how these programs enhance healthcare professionals' knowledge, attitudes, and confidence in identifying and reporting child abuse. This directly translates into more timely and effective interventions for vulnerable children [4]. What this really means is that investing in joint training prepares professionals to act decisively and intelligently when it matters most.

Nurses are consistently identified as pivotal members within multidisciplinary teams dedicated to addressing child maltreatment [2]. Their contributions are comprehensive, encompassing critical roles in identification, assessment, intervention, and advocacy. This emphasizes their unique position in facilitating coordinated care and improving outcomes for affected children and families [2]. The specialized field of forensic nursing further refines this contribution. Forensic nurses play a distinct and vital role within interdisciplinary child protection teams [3]. Their expertise involves specialized assessment techniques, meticulous evidence collection, and essential collaboration with other professionals, all of which substantially enhance the overall effectiveness of child abuse response and investigation [3]. In fact, their indispensable role in interdisciplinary child abuse response teams extends to medical forensic examinations and crucial participation in team meetings, confirming their expertise is pivotal for accurate assessment and effective collaboration in complex cases [6].

The establishment of sustainable pediatric forensic nursing programs within tertiary care centers, built upon a multidisciplinary framework, illustrates a progressive step in enhancing care and support for child maltreatment victims [8]. Such initiatives require outlining crucial steps, navigating challenges, and celebrating successes, ultimately showcasing how specialized forensic nursing services, when integrated seamlessly with other disciplines, provide invaluable support [8]. This shows a practical commitment to embedding specialized nursing care into broader protective systems.

Here's the thing: while the benefits of collaborative models are evident, the path to universal effective reporting is not without obstacles. Factors influencing child maltreatment reporting by health professionals have been thoroughly investigated. A systematic review and meta-analysis identified common barriers, including insufficient knowledge, fear of professional consequences, and ambiguous reporting protocols [5]. Conversely, the study also pinpointed key facilitators, such as comprehensive training and supportive organizational policies, as essential for improving reporting rates [5]. This underscores the pressing need for targeted educational interventions and clearer institutional guidelines. This is particularly relevant given findings that nursing students often exhibit existing gaps in their knowledge, attitudes, and self-efficacy regarding child maltreatment identification and reporting [9]. Therefore, integrating comprehensive child abuse education into nursing curricula is crucial to equip future nurses with the necessary skills and confidence for effective reporting and intervention [9].

Ultimately, the evidence robustly supports the efficacy of multidisciplinary team (MDT) interventions in child abuse cases. These integrated teams, bringing together professionals from various sectors, demonstrably improve case coordination, information sharing, and service delivery, leading to more comprehensive assessments and better protective outcomes for children [7]. A systematic review assessing the impact of MDT approaches on outcomes in child maltreatment cases further solidifies these findings, identifying improved investigative thoroughness, enhanced coordination of services, and better long-term protective measures for children as key benefits [10]. This collective body of research strongly affirms the effectiveness of collaborative models in addressing complex child abuse situations, making it clear that a coordinated, skilled, and well-supported workforce is paramount for protecting our most vulnerable.

Conclusion

The body of research consistently emphasizes the crucial role of collaborative approaches, specifically Interprofessional Education (IPE) and Multidisciplinary Teams (MDTs), in significantly enhancing child abuse prevention, reporting, and response systems. IPE is shown to bolster healthcare professionals' ability to recognize, assess, and report child maltreatment, fostering a more coordinated and effective overall response. This educational approach improves knowledge, attitudes, and confidence, directly leading to more timely and impactful interventions for vulnerable children.

Nurses, particularly forensic nurses, emerge as indispensable members of these interdisciplinary teams. Their essential contributions include identification, expert assessment, evidence collection, intervention, and advocacy. These specialized skills are pivotal for accurate assessment and effective collaboration in complex child maltreatment cases, enhancing the overall effectiveness of child abuse investigation and protection. The development of sustainable pediatric forensic nursing programs, integrated within tertiary care centers, exemplifies this multidisciplinary commitment.

However, challenges exist. Factors influencing reporting by health professionals include barriers like insufficient knowledge, fear of consequences, and ambiguous protocols. Conversely, comprehensive training and supportive organizational policies act as key facilitators, suggesting a clear path for improving reporting rates. Overall, studies affirm that MDT interventions improve case coordination, information sharing, service delivery, and investigative thoroughness. This leads to more comprehensive assessments, enhanced long-term protective measures, and ultimately, better outcomes for children affected by maltreatment. The need for robust child abuse education within nursing curricula, addressing existing gaps in student preparedness, is also highlighted to equip future professionals with necessary skills and confidence.

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