Child Abuse

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* (The material and graphics presented here have come from Child Information Gateway, the U.S
Department of Health and Human services, The National Children’s Advocacy Center, ITT Technical
Institute, and others)
What Groups of Children Are Most Vulnerable?

![Pie chart showing Child Abuse and Neglect Fatalities Victims by Age, 2004. The 12-17 years group has the highest percentage at 45.0%, followed by 4 to 7 years at 36.0%, and the younger than 1 year group at 11.5%.]

- Younger than 1 year: 4.1%
- 1 to 3 years: 3.4%
- 4 to 7 years: 11.5%
- 8 to 11 years: 36.0%
- 12-17 years: 45.0%
Victims for 1000 children across the States
Definition of Child Abuse

The Federal Child Abuse Prevention and Treatment Act (CAPTA) as amended by the Keeping Children and Families Safe Act of 2003 defines it as:

- Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation;

  or

- An act or failure to act which presents an imminent risk of serious harm

- Within the above minimum standards set by CAPTA each

- State is responsible for providing their own specific definition of child abuse and neglect
Types of Child Abuse and Neglect

1. **NEGLECT** (failure to provide the child with basic needs):

   a) *Physical*: Not providing adequate food or shelter, lack of supervision, poor hygiene, + all kinds of actual violence and abuse against child, etc

   b) *Medical*: Not providing the necessary medical or psychological treatment when required

   c) *Educational*: Failing to educate or attend to the child educational needs

   d) *Emotional*: Failure to provide psychological care, attend to the child emotional needs, or allowing use of alcohol, drugs
2. PHYSICAL ABUSE:

Ranges from minor bruises to severe physical injuries, bone fractures and even death which may result from hitting (with hands or any other objects such as belts, sticks, etc). There is as well punching, pushing, kicking, shaking, shoving, choking, burns (by cigarettes or immersion), lacerations, etc. In short, any action that may physically hurt a child whether intended or not
How to recognize the signs of physical abuse

- Watch for bruises, hematomas and other lesions in various stages of resolution, broken bones (x rays may detect other earlier fractures), burns, cigarettes markings, pressure marks.

- Multiple visits to hospitals for various not well defined reasons (accidents, falls etc). These parents may visit different hospitals in an attempt to hide the true nature of the lesions.
How to recognize the signs of physical abuse

- Watch the nature of relationship to the child, anger, hostility, irritability, fearful child etc

- Emergency room doctors, pediatricians, orthopedic surgeons, psychiatrists, child psychiatrists etc, need more training in these areas both at medical school and residents level
3. **SEXUAL ABUSE:**

Any action by parents, caretakers or others such as fondling the child’s genitals, fellatio, masturbation, penetration, rape, sodomy, indecent exposure, exploitation through prostitution, indecent photos, pornographic material.* Sexually abused children may have difficulty walking or sitting, or have bruises or bleeding in genital area, or stained and bloody underclothing, may be pregnant or show signs of venereal disease, or exhibit inappropriate sexual knowledge, and or provocative sex play. Abused adolescents may attempt suicide, run away, etc. Such activities include persuasion, inducement, enticement, coercion, force, etc, on the part of the abuser**
Types of Child Abuse and Neglect

The Munchausen Syndrome by Proxy: When parents or caregivers inflict or fabricate pediatric illness or injury, resulting in unnecessary tests, medications, injury or death

The American Academy of Pediatrics (in May 7, 2007) “urged pediatricians to ask 3 questions when faced with unexplainable symptoms and/or treatment failures: are the history signs and symptoms of disease credible? Is the child receiving unnecessary and harmful or potentially harmful medical care? If so, who is instigating the evaluations and treatment?
DOMESTIC VIOLENCE AND CHILD ABUSE

- Though domestic violence refers mostly to spouse/partner abuse, there are many other serious and problematic forms of domestic abuse such as child, elderly and male abuse.

- Child abuse not uncommonly takes place in the course of domestic violence and can become an integral part of it.

- There are as well (though in very small numbers) instances were females abuse their male partners. Males are of course, embarrassed to say that their wives beat them up.

- In the USA child abuse has epidemic proportions with more than 2.5 millions of cases per year and hundreds of deaths resulting from it.

- Like with spouse abuse, child abuse cuts across all segments of society, socioeconomic groups, cultural, ethnic or religious boundaries.
Types of Child Abuse and Neglect

- Boys growing up in one parent home are twice as likely to report sexual abuse as boys from two parents families*

- About 29% living with one parent had been sexually abused compared with 16% living with two parents

- Men from one parent families were more likely to have been abused by females non relatives

- Female baby sitters were cited as the perpetrators in some cases •
A still from a sheriff’s department video shows a 33-year-old woman under arrest for offering her 7-year-old daughter for sex and pornography. (4/03/2007)
4. **EMOTIONAL ABUSE:**

Including constant and inappropriate criticisms, name calling, humiliation, isolation, withholding guidance, love and support, or threats, rejection etc. In short anything done consistently that undermines the child feelings of well being and self worth
Who are the perpetrators?
Parents constitute 78.5% of the perpetrators
Age and sex of the perpetrators
Duty to Report

- All States, the District of Columbia, the Common-wealth of Puerto Rico, and the U.S. territories of American Samoa, Guam, the Northern Mariana Islands, and the Virgin Islands have statutes identifying mandatory reporters of child maltreatment.

- A mandatory reporter is a person who is required by law to make a report of child maltreatment under specific circumstances.

- Approximately 48 States, the District of Columbia, Puerto Rico, and the territories have designated individuals, typically by professional group, who are mandated by law to report child maltreatment. Individuals typically designated as mandatory reporters have frequent contact with children.
Duty to Report (continued)

Individuals required to report may include:

- Social workers
- School personnel
- Health care workers
- Mental health professionals
- Childcare providers
- Medical examiners or coroners
Duty to Report (continued)

- Some other professions frequently mandated across the States include *commercial film or photograph processors* (in 11 States and 2 territories), *substance abuse counselors* (in 13 States), and *probation or parole officers* (in 13 States). *

- Six States (Alaska, Arizona, Arkansas, Connecticut, Illinois, and South Dakota) include *domestic violence workers* on the list of mandated reporters.

- **Members of the clergy** now are required to report in 25 States. **

*Film processors are only mandated to report in some States only*

**Alabama, Arizona, Arkansas, California, Colorado, Connecticut, Illinois, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Mexico, North Dakota, Oregon, Pennsylvania, South Carolina, Vermont, West Virginia, and Wisconsin**
Duty to Report (continued)

- All jurisdictions have provisions in statute to maintain the confidentiality of abuse and neglect records. The identity of the reporter is specifically protected from disclosure to the alleged perpetrator in 39 States, the District of Columbia, Puerto Rico, and the territories of American Samoa, Guam, and the Northern Mariana Islands. This protection is maintained even when other information from the report is being disclosed.

- In the U.S. child abuse causes expenses of 258 millions a day, $1461.66 per U.S. family and an estimated 94 billion per year
Main Sources of Reports on Child Abuse

Figure S–2 Report Sources, 2004
General Information from Child Protective Services

- In the U.S. an estimated 3.5 million children were investigated by CPS in 2004 and an estimated 872,000 were found to be victims.

- The rate of victimization is inversely related to the age of the child. Children under one year account for 10.3% of all victims. Similar stats apply in the United Kingdom.

- In 2004, 48.3% of child victims were boys, 51.7% were girls.

- African-American, Pacific Islanders, and American Indian, or Alaskan native children had the highest rates of victimization at 19.9, 17.6, and 15.5% / 1000 children of same race or ethnicity.
General Information from Child Protective Services (continued)

- White children and Hispanics rates were 10.7 and 10.4% respectively per 1000 children of same ethnicity

- Asian children had the lowest rate at 2.9% per 1000

- One half of all victims were White (53.8%), one quarter (25.2%) were African-American and 17% were Hispanics

- In 2004, 62.4% of victims experienced neglect, 17.5% were physically abused, 9.7% were sexually abused, 7% were emotionally abused and 2.1% experience medical neglect
About 84% of victims were abused by a parent acting alone or with another person.

Another category is called “Other” accounting for another 14.5% of the total. It includes whatever does not fit in the main four types described earlier (such things as abandonment, congenital drug addiction etc).

The above numbers add to more than 100% because each different form of abuse for each case is counted.

Children with disability accounted for 7.3% of all victims in the 36 States reporting about this data.
Number of children removed from home by States
General Information from Child Protective Services (continued)

- Notice that two fifths (38.8%) of victims were mistreated by their mothers acting alone

- 18.3% were mistreated by their fathers acting alone

- Unmarried partners of a parent, legal guardians or foster parents accounted for another 10.1% of the abuse

- Reporting of the abuse was done by educational personnel (24.1%), law enforcement officers (21.8%) and 11% by medical personnel
Despite the child protection system, child maltreatment fatalities remain a serious problem. The untimely deaths of children due to illness and accidents have been closely monitored, but deaths that result from physical assault, or severe neglect, can be more difficult to track because the perpetrators, usually parents, are less likely to be forthcoming about the circumstances.

The National Child Abuse and Neglect Data System (NCANDS) reported an estimated 1,490 child fatalities in 2004. This translates to a rate of 2.03 children per 100,000 children in the general population. NCANDS defines "child fatality" as the death of a child caused by an injury resulting from abuse or neglect, or where abuse or neglect was a contributing factor.
It is consequently believed, that child fatalities due to abuse and neglect, are significantly underreported. Studies in Colorado and North Carolina, have estimated that as many as 50 to 60 percent of child deaths resulting from abuse or neglect are not recorded as such*

Inaccurate determination of the manner and cause of death results in miscoding of death certificates; this includes deaths labeled as accidents, Sudden Infant Death Syndrome (SIDS), or "manner undetermined" that would have been attributed to abuse or neglect if more comprehensive investigations were conducted


Fatalities by age groups

Figure S–4 Age of Fatalities, 2004

- <1 year: 45.0%
- 1 year: 14.6%
- 2 years: 13.2%
- 3 years: 8.2%
- 4–7 years: 11.5%
- 8–11 years: 4.1%
- 12–17 years: 3.4%
As you saw in the previous chart and based on data from 32 States, more than four-fifths (81.0%) of children who were killed were younger than 3 years of age, 11.5 percent were 4-7 years of age, 4.1 percent were 8-11 years of age, and 3.4 percent were 12-17 years of age.

The youngest children experienced the highest rates of fatalities. Infant boys (younger than 1 year) had a fatality rate of 18 deaths per 100,000 boys of the same age. Infant girls (younger than 1 year) had a fatality rate of 17 deaths per 100,000 girls of the same age. In general, fatality rates for both boys and girls decreased with the age of the children.
Recent brain research has established a foundation for many of the physical, cognitive, social, and emotional difficulties exhibited by children who experienced maltreatment in their early years. This increased research attention involves the effects of abuse and neglect on the developing brain during infancy and early childhood.

Much of it is provides biological explanations for what practitioners have been describing in psychological, emotional, and behavioral terms. We are beginning to see the scientific "evidence" of altered brain functioning as a result of early abuse and neglect.
Magnitude of the problem worldwide

- There is clear evidence that this is an International problem but more severe in some countries than others.

- Some cultural characteristics and customs account for much child abuse in some countries. Thus between 100 and 140 million girls and women in the world have undergone some form of genital mutilation/cutting.

- In sub-Saharan Africa, Egypt, and the Sudan, 3 million girls are subjected to genital mutilation/cutting every year.

- Nearly 53,000 thousand children died worldwide as the result of homicide.
Magnitude of the problem worldwide (cont)

- 150 million girls and 73 million boys under 18 experienced forced sexual intercourse or other form of sexual violence in 2002

- During 2004, 218 million children across the world were involved in child labor of which 126 million were in hazardous work

- It follows from all the above, that professionals in contact with children, need to be alert to these problems

- Estimates from 2000 suggest that 1.8 million children were forced into prostitution and pornography, and 1.2 million were victims of trafficking
Magnitude of the problem worldwide (cont)

- In Brazil (Rio de Janeiro) there are innumerable abandoned children, that in order to survive steal food and other goods from stores. It is said, that store owners pay some corrupted policemen to kill these children, as their way of solving the problem!

- At present in Africa, children are used as soldiers in their civil wars, killing and carrying weapons, like adults. Further, over 300,000 child soldiers, some as young as eight, are exploited in armed conflicts, in more than 30 countries around the world.
Magnitude of the problem worldwide (cont)

- Add to all this, millions of children around the world who are without primary caregivers in institutions, including boarding schools, hospitals, orphanages, psychiatric units, prisons and detention centers.

- And hundreds of millions more across the globe who are victims of exploitation, abuse and violence each year or who are abducted from their homes and schools and recruited into the army (Africa).

- Or who are trafficked into prostitution rings.

- Or who are forced into debt bondage or other forms of slavery.
The role of parental psych. disorders & subst. abuse

- Results of an Ontario study looking at the relationship between child abuse and parental psychiatric disorders showed a three fold increase if the parents suffered from a history of depression, mania or schizophrenia*

- Research in England has shown, that parental psychiatric disorders and substance abuse, affect parental behavior and that a substantial number of child abuse related fatalities were related to the above**

* The relationship between parental psychiatric disorder and child physical and sexual abuse: Findings from the Ontario Health Supplement (January 2002)

** Child Abuse and Parental Mental Health, Chapter in Book, pp.166-179, August 2000
Maltreatment Types of Fatalities

Figure S-5 Maltreatment Types of Fatalities, 2004
The consequences of child abuse

- Child abuse in any of its forms can be extraordinarily damaging and its consequences may last a lifetime

- Compared with non abused children, maltreated children are often found to have psychological, behavioral, cognitive, and academic impairments (Kendall-Tackett and Eckenrode 1996; Kendal-Tackett et al. 1993; Oddone et al. 2001).

- Yet certain types of abuse may contribute to particular psychological, cognitive, and behavioral outcomes with greater frequency (Kendall-Tackett et al. 1993; Malinosky-Rummell and Hansen 1994)
The consequences of child abuse (cont)

- Physically abused children often display less empathy, a proclivity for substance abuse, greater academic and legal difficulties too (Eckenrode, Laird and Doris 1993).
- They tend to become abusers as adults
- Sexual abuse fosters fear, post-traumatic stress disorders, depression, anxiety, poor self esteem and poor feelings of self worth (Brown and Finkelhorf 1986; Oddone et al. 2001)
The consequences of child abuse (cont)

- These effects do not always fit into discreet categories

- Just as there is overlap between the various types of abuse, there is overlap among the effects of abuse (Cicchett and Toth 1995; Oddone et al 2001).

- Remember that violence against children occurs in all parts of the world, rich and poor alike, – from homes and schools to detention centers and places of work-, from mild corporal punishment to various forms of torture.
What should be done?

- Increase the awareness of these problems on a national/international scale
- Increase resources in every community to help such cases, including availability of shelters, counseling services, etc
- Develop legal aid programs to help with obtaining restraining orders, divorces, custody issues etc
- Stronger and more effective laws are needed in relation to this type of crime
- The police, physicians and other authorities, need better training in this regard so that more effective and secure interventions are provided
Solutions

- They will require extensive and comprehensive training (now lacking) of all professionals involved in the care of children (see list given earlier) as well as dissemination of information to the communities at large.

- Medical schools need to include courses in the various types of abuse, not only in children but in domestic violence, elderly abuse and the like.

- Pediatric, geriatric and emergency residences in general, including as well the psychiatric specialties need to extensively train physicians in these abuses. So too, with the medical examiners and coroners.

- Same applies to teachers, social workers, psychologists etc.
Visit these web pages for further information

http://www.childwelfare.gov/
http://www.acf.hhs.gov/programs/cb/pubs/cm04/index.htm
http://www.childwelfare.gov/can/defining/

Prevention Initiative website at http://www.childwelfare.gov/preventing/
http://www.acf.hhs.gov/programs/cb/pubs/cm04/chapterfour.htm#age
http://www.childwelfare.gov/pubs/focus/earlybrain/earlybraina.cfm

Child abuse reporting numbers for Florida:
Toll-free (800) 96-ABUSE or 800-962-2873
For any other State go to:
http://www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-1172