

June 2010
Dee Wilson

The Sounding Board

The Decline in Child Maltreatment

The information that substantiated cases of physical abuse and sexual abuse declined by more than 50% between the early 1990s and 2007 (Finkelhor, et al, 2010) tends to elicit skepticism among child welfare policymakers, practitioners, advocates and other professionals who work with abused and neglected children and their families. When I first read articles by David Finkelhor and Lisa Jones regarding the decline in child maltreatment a few years ago, my first reaction was that public child welfare agencies had likely altered their criteria around substantiation, or were less prone to substantiate marginal cases, rather than believing that a large decline in child maltreatment had actually occurred. I was a manager in the Children's Administration in Washington State in the 1990s when the implementation of CAPTA reviews (administrative review hearings regarding substantiation decisions) led to an almost 50% reduction in the agency's substantiation rate within a year or two. It seemed plausible to me that similar events might have occurred in other states, or that CPS caseworkers had altered their attitude to substantiation for a variety of reasons, e.g., perhaps because substantiation interfered with engaging parents in services.

However, as I reflected on the decline in substantiated cases of maltreatment from 1993 -2004, I had to acknowledge that I had no explanation for the large decline in physical abuse and sexual abuse in 38-41 states during this period (1993 -2004); and that I lacked a plausible explanation for why changes in public agency behavior around substantiating cases would not have affected neglect cases as much or more than physical abuse or sexual abuse determinations.

Finkelhor, Jones, et al (2010) have also pointed out that a Minnesota survey of sixth, ninth and 12th grade students administered during this same period (1992 -07) found a 28% decline in sexual abuse by a family member and a 30% decline in abuse by non – family members and that, in addition, the National Crime Victimization Survey "reported that among 12 -17 year old adolescents, rates of aggravated assault, robbery, and sexual assault dropped 69%, 62%, and 52%, respectively, from 1992 -2005." These authors add that "other closely related child welfare indicators – such as suicide, running away, juvenile delinquency, and teenage pregnancy – have also improved during the same period, a convergence suggesting that this trend is valid."

The Fourth National Incidence Study of Child Abuse and Neglect (NIS -4) released earlier this year provides incidence rates for various types of child maltreatment based on data provided by 10,791 "sentinels" (i.e., community professionals in law enforcement agencies, schools, hospitals, mental health centers, social service agencies, etc.) located in 122 counties around the country for a 3 month reference period in late 2005 or early 2006; and compares these incidence rates to (fortuitously) rates from NIS -3 (1993) and NIS -2 (1986). The NIS studies utilize two definitional standards in parallel: a stringent harm standard requiring that an act result in

demonstrable harm in order to be classified as abuse or neglect and an endangerment standard that includes children “who were not yet harmed by abuse or neglect if the sentinel thought that the maltreatment endangered the children or if a CPS investigation substantiated or indicated their maltreatment.” (p.3)

Some of the main NIS -4 findings are as follows:

- The rate of sexual abuse under the Harm Standard declined 44% since 1993, a statistically significant difference from NIS -3.
- The rate of physical abuse under the Harm Standard declined 23% since 1993, a statistically marginal ($>.05$, $<$ than $.10$) difference from NIS -3.
- The rate of emotional abuse under the Harm Standard declined 33% since 1993, a statistically significant difference from NIS -3.
- There were large statistically significant declines in rates of sexual abuse (47%), physical abuse (29%) and emotional abuse (48%) under the Endangerment Standard in NIS -4 vs. NIS -3.
- There were no statistically significant differences in rates of neglect as a whole or in specific types of neglect in NIS -4 with the exception of the rate of emotional neglect under the Endangerment Standard (ES) which increased 83% between 1993 -2006.
- The number of abuse / neglect related child fatalities increased from 1600 in 1993 to 2400 in 2006, but the change in the rate of child fatalities from 0.02 per 1000 children in 1993 to 0.03 per 1000 children in 2006 was not statistically significant.

Despite these large declines in sexual abuse, physical abuse and emotional abuse between NIS -3 (1993) and NIS -4 (2006), there were no statistically significant differences in rates of abuse as a whole or specific types of abuse in NIS -4 compared to NIS -2 in 1986; “Thus (to quote the authors of NIS -4) the NIS – 4 decrease eradicated the increase seen in the NIS -3. The incidence of Harm Standard (HS) abuse has returned to a level that is indistinguishable from what it was in 1986.” The rate of ES physical abuse and emotional abuse remained 33% and 37% higher in 2006 compared to 1986 while the ES sexual abuse rate in NIS -4 returned to the NIS -2 1986 rate. The Harm Standard and Endangerment Standard rates of physical neglect remained well above NIS -2 1986 rates (e.g. 16.2 for ES physical neglect in 2006 vs. 8.1 in 1986; 4.0 vs. 2.7 for HS neglect).

The three NIS studies conducted between 1986 -2006 begin to suggest a conceptual framework for understanding the decline in child maltreatment: the decline in the abuse categories since the early 1990s has been large, in part, because the increase in child maltreatment between 1986 and 1993 was large. A likely formula for achieving a dramatic reduction in the rate of a social problem is to begin with a rate inflated by the extraordinary changes in the social milieu between 1985 and 1993. In child welfare, these changes were dominated by the widespread availability in low income neighborhoods of crack cocaine and (later) methamphetamine, and the increase in out – of- home care resulting from substance abuse and the lack of effective in – home interventions for neglecting parents of very young children.

However, given the large increase in HS physical neglect and even larger increase in ES neglect from 1986 -93, as indicated by NIS -3, why wasn't there a statistically significant

reduction in physical neglect in NIS -4, and what caused the huge increase in ES emotional neglect between 1993 -2006? Reversion to a statistical mean is not a causal explanation for social trends; there are likely to be large changes in social values and attitudes, policy and practice in public agencies, resources and/ or incentives and consequences for behavior that explain large changes in the incidence of social phenomena. Arguably, sexual abuse and physical abuse rates declined dramatically while there was a much smaller changes in the incidence of neglect because of (a) clear and unequivocal social disapproval of sexual abuse and severe physical abuse combined with effective interventions, including law enforcement investigations and criminal sanctions and (b) uncertain and ambivalent social attitudes toward neglect, including a tolerance within public agencies and courts for neglect in its extreme forms except when babies and toddlers are involved and (c) the lack of effective interventions for neglect associated with substance abuse and/ or mental health disorders.

The timing of the declines in different types of child maltreatment is highly instructive. Substantiated cases of sexual abuse began to decline in 1990, and continued to decline at an increased rate from 1993- 2001; the rate of substantiated sexual abuse was relatively stable (slightly greater than 10 per 1000) from 2001- 4, a 49% decline since 1990. Most of the 43% decline in substantiated physical abuse cases between 1992 -2004 occurred from 1997 -2004; in other words, physical abuse began to decline 4-5 years after the decline in substantiated sexual abuse cases. The rate of substantiated neglect cases, on the other hand, declined modestly from 1994- 98, and then increased by about the same percentage (15%) from 1999 -2004, with a 6% decline for the entire period 1992 -2004.

A plausible hypothesis for explaining these staggered and highly varying declines in sexual abuse, physical abuse, and neglect is that the largest and earliest declines in substantiated cases occurred for types of maltreatment, i.e., sexual abuse and physical abuse, least influenced by substance abuse. Is this hypothesis consistent with a modest early decline in neglect (1994-98) followed by another large increase (1999-2004) in the rate of substantiated neglect cases? If, in fact, the impact of substance abuse on child welfare occurred in successive waves (1986 -93; 1999- 2004) resulting from the widespread availability of two different cheap illegal drugs (e.g., crack cocaine, methamphetamine), these data make sense. Possibly, public child welfare agencies had just begun to come to grips with the first phase of increased substance abuse in low income populations when a second phase began.

My view is that sexual abuse and physical abuse have declined because of profound changes in social attitudes over several decades, zero tolerance policies “on the ground” that make highly recurrent cases of these forms of abuse much less likely than they were a generation ago, and social interventions that combine criminal sanctions, mental health interventions and child welfare interventions oriented around the protection of child victims. Child neglect, even in its extreme forms, is often tolerated, because children may not be at risk of imminent physical harm, and because agencies lack effective interventions for a type of maltreatment enmeshed with poverty, substance abuse, mood disorders and family violence. A zero tolerance policy regarding chronic neglect is not possible in these circumstances without returning to the desperate overwhelmed conditions prevalent in child welfare between 1986 -2000, and that still exist today in many child welfare agencies that have been unable to reduce their foster care populations.

The rate of ES emotional neglect doubled from 1993 -2006 in the NIS studies; and the 2006 rate (15.9 per 1000) is an astonishing five- fold increase over the rate found in the 1986 NIS -2 (3.2 per 1000). What factors might account for an increase of this magnitude, especially given the modest (but not statistically significant) reductions in other forms of neglect in NIS -4? The increase in ES emotional neglect was far larger for children, 0-5, than for older children (259% for children 0-2 vs. 10% for 6-8 year olds) The NIS studies code eleven parental behaviors or family conditions as emotional neglect; two of these behaviors / conditions, Inadequate nurturance/ affection and Other inattention to developmental / emotional needs, appear to characterize parental deficiencies in regard to pre- school children while others such as Domestic Violence, Exposure to maladaptive behaviors and environments and Inadequate structure may apply equally to all age groups of children. The huge increase in ES emotional neglect over two decades appears to reflect a sea change in professionals' understanding of the emotional and developmental needs of very young children, and of the potentially negative impacts of domestic violence on children's development. In this instance, a large change for the worse in an incidence rate probably reflects a dramatic improvement in knowledge and understanding regarding the effects of maltreatment among mandated reporters since NIS -2.

Finkelhor, et al, have recently published the findings of a study comparing child victimization rates from two similar national surveys conducted in 2003 and 2008. The Developmental Victimization Survey (2003) and National Survey of Children's Exposure to Violence (2008) found a recent increase in physical abuse (4.2% in 08 vs. 3.4% in 03) and neglect (1.6% in 08 vs. 1.4% in 03); these changes in maltreatment rates were not statistically significant. However, there was a large statistically significant reduction in psychological/ emotional abuse (7.1% in 08 vs. 10.3% in 03) in this survey data.

National Child Abuse and Neglect Data Systems (NCANDS) data continued to show a decline in substantiated cases from 2005 -08:

- Substantiated cases of physical abuse and sexual abuse declined 17-18%.
- Substantiated cases of neglect declined 4.5%.
- The rate of first time victims per 1000 remained relatively stable from 2004 to 2008 (7.2 - 7.4 per 1000).

Epidemiologists tend to give more weight to rates of first time victimization than to subsequent reports on the grounds that rates of first time victimization are less contaminated by the behavior of public agencies in response to various pressures that have nothing to do with incidence of maltreatment. For example, public child welfare agencies are under steady pressure from the federal government to reduce their rate of maltreatment recurrence; it's possible that the reduction in substantiated cases of child abuse and neglect reflects the willingness to "game" the Children and Family Service Review (CFSR) recurrence measure. This is a plausible motivation; but if agency behavior around substantiation accounts for the recent reduction in maltreatment rates (rather than a decline in incidence) why hasn't the decline in neglect come close to matching the declines in physical abuse and sexual abuse?

Given the stability in the rate of first time victims between 2005 -08, the much larger difference

in the decline of substantiated abuse vs. neglect strongly suggests that public child welfare agencies have far more effective interventions for physical abuse and sexual abuse than for neglect and, as a result, abuse cases are far less likely to be substantiated multiple times than when agencies intervene in response to a wide range of neglect concerns.

In summary, there are good reasons to believe that the greater than 50% reduction in substantiated sexual abuse and physical abuse cases since the early 1990s reflects a real decline in incidence, but the surprising size of the reduction is partly due to the inflation in maltreatment rates between 1986 -93. Rates of sexual abuse and severe physical abuse have declined to their 1986 levels, while ES standard physical abuse and neglect (both HS and ES) remain well above their rates in NIS -2 (1986).

There has been nothing automatic or law- like in the reversion of abuse rates to a statistical mean. Arguably, reductions in child maltreatment have occurred only after social attitudes toward specific types of child maltreatment have crystallized, i.e., hardened, leading to highly motivated behavior on the part of social actors (i.e., child welfare agencies, law enforcement agencies, courts, etc.) to develop and implement effective interventions. In the case of neglect and less serious physical abuse, social tolerance and/ or confused uncertain social attitudes regarding what should be done on behalf of children in these situations has resulted in limited half hearted efforts to develop more effective interventions, and a willingness to respond repeatedly and ineffectually to double digit (10, 20, 30, 40, even 50 in Washington State) referrals over a period of years.

There are some important lessons for prevention advocates in these trends. Programmatic investments at the community level, state level or national level depend on underlying social beliefs and attitudes. The five- fold increase in ES emotional neglect since 1986 probably reflects an encouraging change for the better in professionals' understanding of the emotional and developmental needs of babies and other young children. Advocacy efforts should capitalize on this positive change – and others like it -- rather than attempting to generate greater public concern regarding neglect per se, a nebulous umbrella concept that applies to a wide range of parenting omissions.

One important lesson suggested by the decline in child maltreatment is that prevention programs need not be the be all and end all of prevention initiatives. Sexual abuse prevention programs may have played a modest role in the decline in sexual abuse (Finkelhor, 2009), but the combination of CPS interventions and law enforcement investigations almost certainly had a far greater impact. Effective interventions can have a long term preventive effect.

It is far from clear what combinations of media campaigns, prevention programs, public agency interventions, evidence based mental health interventions, poverty related services, family centered practices and (possibly) sanctions will prove most effective in preventing neglect, especially the chronic pervasive neglect that has devastating effects on child development. It remains uncertain whether programs that narrowly target neglectful parenting will prove as effective preventive agents as programs that engage parents in early childhood education programs or in promoting the positive development of babies and toddlers. What is certain is that the answers to these questions must come from persistent experimentation with and rigorous

testing of new combinations of programs, services and resources; and that the social tolerance for chronic pervasive neglect has to become a thing of the past as more effective interventions are developed.

References

Child Maltreatment 2005, U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Children's Bureau, 2007.

Child Maltreatment 2008, U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Children's Bureau, 2010.

Finkelhor, David, "The Prevention of Childhood Sexual Abuse," *The Future of Children*, Volume 19, No. 2, Fall, 2009.

Finkelhor, David & Jones, Lisa, "Why Have Child Maltreatment and Child Victimization Declined?," *Journal of Social Issues*, Volume 62, No. 4, 2006.

Finkelhor, David, Turner, Heather, Ormrod, Richard, Hamby, Sherry L., "Trends in Childhood Violence and Abuse Exposure," *Archives of Pediatric and Adolescent Medicine*, Volume 164, No. 3, March, 2010.

Sedlak, Andrea, Mettenburg, Jane, Basena, Monica, Petta, Ian, McPherson, Karla, Greene, Angela, Li, Spenser, Fourth National Incidence Study of Child Abuse and Neglect (NIS -4) , U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research, and Evaluation and the Children's Bureau, 2010.