

UPDATED TRENDS IN CHILD MALTREATMENT, 2013

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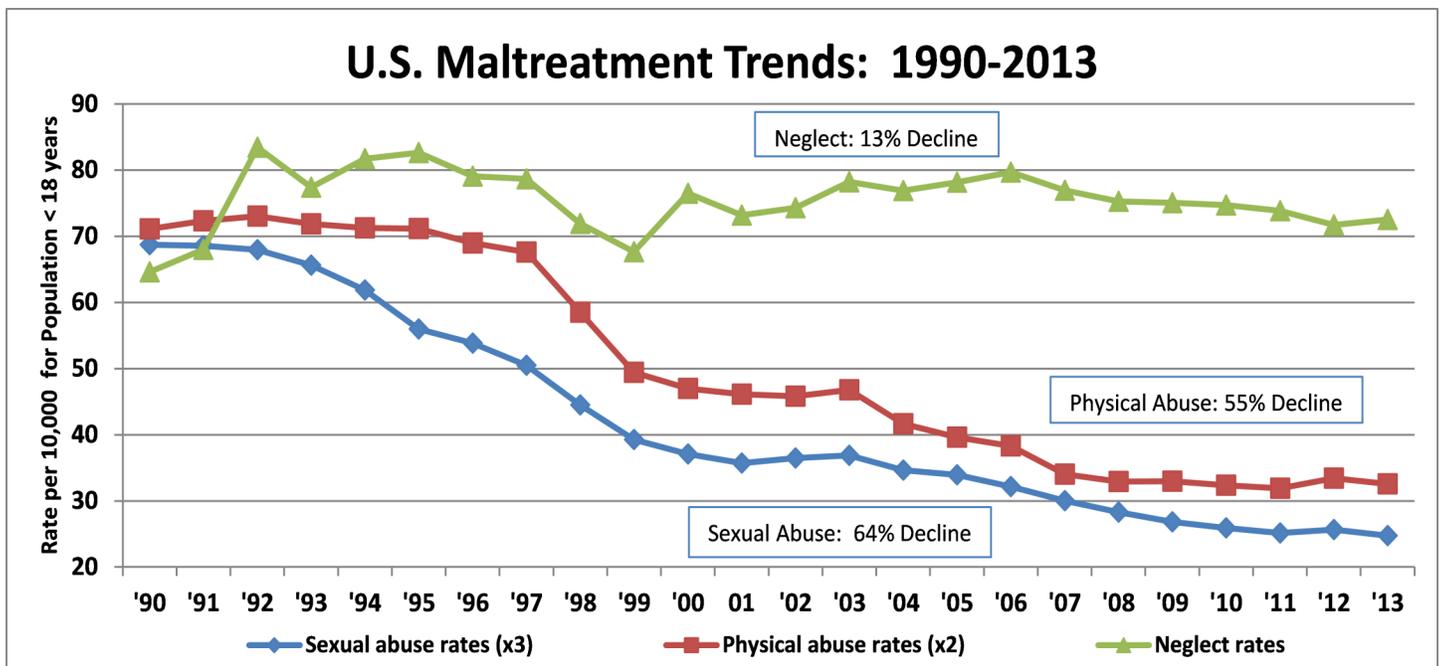
New national data for 2013 show continued declines in child maltreatment, after a one year discontinuity (2012) in which some rates briefly increased. But from 2012 to 2013, sexual abuse declined 4%, physical abuse declined 3%, child maltreatment fatalities declined 7% and overall substantiated child maltreatment declined 1%. Neglect by contrast rose 1%.

The published NCANDS report shows that overall substantiated child maltreatment dropped slightly from 9.2 to 9.1 per 1000 children, or about 679,000 children. This rate is low by historical standards and 3.8% below the level of 2009.

The data in the tables and graphs included below are derived from the National Child Abuse and Neglect Data System (NCANDS), which aggregates and publishes statistics from state child protection agencies. The most recent data from NCANDS were released in December, 2014, and concern cases of child maltreatment investigated in 2013 (USDHHS, 2015).

Breaking out cases by type of abuse, the data show that sexual abuse declined 4% from 2011 to 2012 to a nationally estimated 62,700 cases. Physical abuse declined 3% to an estimated 119,800 cases. Neglect rose 1% to an estimated 533,600 (see Figure 1).

<http://www.acf.hhs.gov/programs/cb/resource/child-maltreatment-2013>



Note: Trend estimates represent total change from 1992 to 2011. Annual rates for physical abuse and sexual abuse have been multiplied by 2

¹ The statistics in Table 1 and Figure 1 concern substantiated cases of sexual abuse, physical abuse and neglect. A substantiated case means a case that has been reported to a child protection agency, investigated and deemed to have occurred according to a “preponderance of evidence.” The child maltreatment cases referred and investigated by state child protection agencies primarily involve abuse by caregivers. The cases do not include many involving stranger abusers, unless some element of caregiver neglect was involved.

Table 1: State Trends in Child Maltreatment: 2012-2013 and 1992-2013*

US States	Recent Trends: % change in rate 2012-2013			Long-term Trends: % change in rate 1992-2013		
	Sexual Abuse	Physical Abuse	Neglect	Sexual Abuse	Physical Abuse	Neglect
Alabama	-13%	-5%	-6%	-63%	-43%	-73%
Alaska	-28%	-15%	-19%	-91%	-85%	-27%
Arizona	24%	32%	33%	-91%	-60%	21%
Arkansas	-3%	-6%	-13%	4%	-34%	30%
California	-6%	-3%	3%	-87%	-87%	-15%
Colorado	1%	-7%	-3%	-61%	-68%	27%
Connecticut	-8%	-4%	-8%	-62%	-88%	-44%
Delaware	9%	-1%	-11%	-30%	-32%	-24%
District of Columbia (DC)	-14%	17%	6%	58%	-9%	-51%
Florida	-7%	-10%	-14%	-79%	-73%	-55%
Georgia	-13%	-13%	0%	-89%	-79%	-69%
Hawaii	-16%	-21%	-2%	-78%	-83%	-71%
Idaho	missing	missing	missing	-93%	-85%	-71%
Illinois	8%	14%	21%	-1%	68%	-14%
Indiana	1%	8%	10%	-61%	-71%	11%
Iowa	-7%	1%	6%	-65%	-52%	150%
Kansas	7%	14%	10%	-28%	-41%	-43%
Kentucky	29%	33%	20%	-68%	-72%	25%
Louisiana	-8%	-20%	29%	-43%	-47%	-6%
Maine	-1%	13%	1%	-54%	-4%	110%
Maryland	-1%	-13%	-4%	-26%	-56%	-16%
Massachusetts	1%	-4%	8%	-67%	-59%	9%
Michigan	10%	6%	0%	-41%	73%	202%
Minnesota	-12%	10%	-4%	-48%	-81%	-60%
Mississippi	-9%	0%	-2%	-46%	-51%	-3%
Missouri	-53%	-50%	-55%	-82%	-80%	-88%
Montana	-5%	-19%	10%	-92%	-93%	-59%
Nebraska	3%	7%	-1%	-59%	-69%	6%
Nevada	8%	5%	0%	-64%	-34%	-59%
New Hampshire	13%	0%	-11%	-72%	-75%	69%
New Jersey	-10%	19%	7%	-51%	-82%	-16%
New Mexico	-7%	4%	21%	-78%	-57%	35%
New York	-1%	-6%	-5%	-66%	-66%	85%
North Carolina	-13%	-9%	-17%	-18%	18%	-54%
North Dakota	1%	-11%	5%	-69%	-84%	-35%
Ohio	-5%	-3%	-6%	-51%	-15%	-52%
Oklahoma	4%	-24%	49%	-51%	22%	26%
Oregon	13%	55%	9%	-75%	-47%	36%
Pennsylvania	-2%	-10%	4%	-47%	-72%	-70%
Rhode Island	-15%	2%	-1%	-75%	-71%	16%
South Carolina	-1%	-4%	-10%	-69%	67%	-12%
South Dakota	-4%	3%	-24%	-91%	-75%	-50%
Tennessee	-12%	-7%	11%	-23%	-61%	23%
Texas	0%	-2%	3%	-60%	-58%	13%
Utah	-2%	-3%	-2%	-42%	18%	-14%
Vermont	26%	12%	31%	-26%	-12%	-92%
Virginia	2%	-2%	1%	-68%	-63%	-66%
Washington	18%	7%	10%	-83%	-77%	-74%
West Virginia	-1%	2%	3%	-65%	-15%	-15%
Wisconsin	-16%	-9%	6%	-85%	-84%	-57%
Wyoming	19%	64%	-2%	-78%	-95%	-62%

*Note that in states with smaller populations and lower rates of reported maltreatment, small changes can result in large percentage changes

Note: Negative percentages: % decline; Positive percentages: % increase. Due to missing data, long-term trends in SA, PA, and neglect calculated for: CA, 1993-2013; MD, 2001-2013; WA, 1995-2013; WV, 1998-2013.

The declines continue trends that for some types of abuse date over 20 years. Sexual abuse has declined 64% overall from 1992 to 2013 (Figure 1). Similarly the long term trend for physical abuse is also down markedly, decreasing 55% since 1992. Neglect is also down compared to 2006 and down 13% since a peak in 1992.

It is not possible to directly compare state maltreatment rates with each other because states differ in how statutes define abuse and how abuse is investigated and processed. However, looking at within-state trends, most individual states experienced substantial declines in sexual and physical abuse during the period since the early 1990s (see Table 1). The data do not show any obvious patterns to the decline by region.

In its data on child maltreatment fatalities, the latest NCANDS shows a decrease in deaths of 7% from an estimated national total (including Puerto Rico) of 1598 in 2012 to 1484 in 2013. Most of this decline can be accounted for by large drops in two states, Texas and Florida.

Because NCANDS reports only those cases known to and confirmed by state authorities, questions are always relevant about the extent to which trends reflect changes in investigatory effort, reporting practices, definitional standards, and administrative or statistical procedures, not real changes in underlying abuse. These factors can clearly play a role. They may be particularly concerning during times of state budget cut backs or recoveries. However, the most recent Fourth National Incidence Study of Child Abuse and Neglect (NIS-4) confirmed that the declines documented in the NCANDS data in the period of 1993 to 2008 were probably not statistical or reporting artifacts.

The NIS studies use consistent and standardized definitions of child maltreatment and gather reports directly from community professionals in schools, hospitals, day care and settings, avoiding problems created when state agencies change their standards, practices or their data systems. The comparison of rates from 1993 to 2008 in NIS-3 and NIS-4 largely tracked the patterns shown in the NCCANDS data over the same period.

http://www.acf.hhs.gov/programs/opre/abuse_neglect/natl_incid/index.html

Another study also cast doubt on the idea that changes in practices such as worker caseload (an effect of cutbacks, for example) were related to declines (Almeida, Cohen, Subramanian & Molnar, 2008). In addition, victim self-report surveys show declines in sexual offenses and physical assaults against children over the same period, also confirming a decline in true underlying incidence. (For a summary of some of these supporting surveys, see Finkelhor & Jones, 2012.

http://www.unh.edu/ccrc/pdf/CV267_Have%20SA%20%20PA%20Decline_FACT%20SHEET_11-7-12.pdf

The worrisome increases that showed up in the last report (between 2011-2012) in physical abuse, sexual abuse and maltreatment fatalities highlight that single year trends are not very reliable indicators, and observers generally need to look over a longer period of time to get a sense of patterns that merit concern.

Other information on child homicide trends are available at this link: <http://www.unh.edu/ccrc/pdf/Child%20Homicide%20and%20Maltreatment%20Fatality%20Rates%2012-11.pdf>

There is currently no consensus in the child maltreatment field about why sexual abuse and physical abuse substantiations in particular have declined so considerably over the longer term, although a recent article and book suggest some possible factors (Finkelhor & Jones, 2006; Finkelhor, 2008). The period when sexual and physical abuse started the dramatic downward trend was marked by sustained economic improvement, increases in the numbers of law enforcement and child protection personnel, more aggressive prosecution and incarceration policies, growing public awareness about the problems, and the dissemination of new treatment options for family and mental health problems, including new psychiatric medication. While some have suggested community notification laws as a possible explanatory factor, the passage and implementation of these laws actually occurred well after the sexual abuse decline was underway.

Table 2: Child Maltreatment Fatality Trends: 2012-2013

US States	Child Maltreatment Fatalities		
	Count 2012	Count 2013	% Change 2012-2013
Alabama	21	32	52%
Alaska	4	1	-75%
Arizona	30	54	80%
Arkansas	33	29	-12%
California	128	121	-5%
Colorado	39	21	-46%
Connecticut	6	5	-17%
Delaware	3	6	100%
District of Columbia (DC)	2	3	50%
Florida	179	121	-32%
Georgia	71	90	27%
Hawaii	3	5	67%
Idaho	6	5	-17%
Illinois	108	96	-11%
Indiana	23	28	22%
Iowa	7	5	-29%
Kansas	8	7	-13%
Kentucky	26	23	-12%
Louisiana	42	43	2%
Maine	missing	missing	missing
Maryland	26	27	4%
Massachusetts	missing	missing	missing
Michigan	63	59	-6%
Minnesota	10	18	80%
Mississippi	7	12	71%
Missouri	20	19	-5%
Montana	2	1	0%
Nebraska	6	6	0%
Nevada	18	11	-39%
New Hampshire	1	3	200%
New Jersey	16	18	13%
New Mexico	16	7	-56%
New York	100	107	7%
North Carolina	24	29	21%
North Dakota	1	1	0%
Ohio	70	48	-31%
Oklahoma	25	43	72%
Oregon	17	10	-41%
Pennsylvania	38	34	-11%
Rhode Island	1	1	0%
South Carolina	23	25	9%
South Dakota	6	5	-17%
Tennessee	31	40	29%
Texas	215	150	-30%
Utah	12	7	-42%
Vermont	0	0	0%
Virginia	33	33	0%
Washington	21	27	29%
West Virginia	5	17	240%
Wisconsin	31	21	-32%
Wyoming	2	0	-100%
Total (50 States + DC)	1579	1474	-7%
Total with Puerto Rico	1598	1484	-7%

There is no obvious reason why neglect trends have differed so sharply from those of sexual and physical abuse (Jones, Finkelhor & Halter, 2006). One possibility is that neglect has not declined as much because it has not been the subject of the same level of policy attention and public awareness as sexual and physical abuse.

Another possibility is that increased education and recent state and professional initiatives about neglect, including the identification of new forms of neglect like drug-affected newborns, has masked a decline in other conventional types of neglect.

The fact that overall maltreatment rates did not worsen in the face of economic deterioration starting in 2008 is a surprise to many observers.

It is unfortunate that information about the trends in child maltreatment are not better publicized and more widely known. The long-term decline in sexual and physical abuse may have important implications for public policy. These trends deserve more discussion, analysis and research.

Additional information about trends in child abuse and neglect is available at: <http://www.unh.edu/ccrc/Trends/index.html>.

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