University of New Hampshire University of New Hampshire Scholars' Repository

Crimes Against Children Research Center

Research Institutes, Centers and Programs

1-2013

Updated trends in Child Maltreatment, 2012.

David Finkelhor

University of New Hampshire - Main Campus, David.Finkelhor@unh.edu

Lisa M. Jones

University of New Hampshire - Main Campus, lisa.jones@unh.edu

Anne M. Shattuck

University of New Hampshire, Anne.Shattuck@unh.edu

Kei Saito

University of New Hampshire - Main Campus

Follow this and additional works at: https://scholars.unh.edu/ccrc



Part of the Psychology Commons, and the Sociology Commons

Recommended Citation

Finkelhor, D., Jones, L., Shattuck, A., & Saito, K. (2013). Updated trends in Child Maltreatment, 2012. Durham, NH: Crimes against Children Research Center.

This Article is brought to you for free and open access by the Research Institutes, Centers and Programs at University of New Hampshire Scholars' Repository. It has been accepted for inclusion in Crimes Against Children Research Center by an authorized administrator of University of New Hampshire Scholars' Repository. For more information, please contact nicole.hentz@unh.edu.



UPDATED TRENDS IN CHILD MALTREATMENT, 2012

David Finkelhor, Lisa Jones, Anne Shattuck & Kei Saito

January 2013

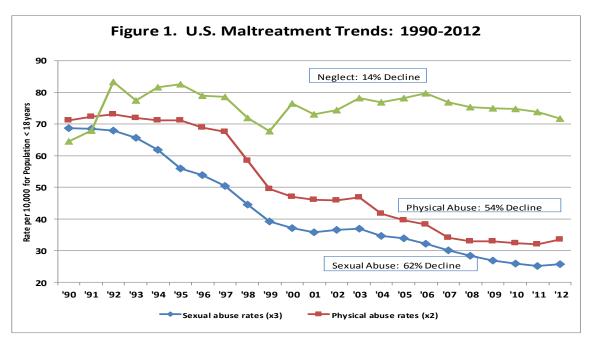
National statistics from 2012 showed *increases* in some forms of child maltreatment for the first time in many years. While overall substantiated child maltreatment was flat from 2011 to 2012, there was a 2% rise in sexual abuse and a 5% rise in physical abuse. Neglect declined 3%, but child maltreatment fatalities rose 4% from 1557 to 1620.

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, 2013, and concern cases of child maltreatment investigated in 2012 (USDHHS, 2013).

http://www.acf.hhs.gov/programs/cb/resource/child-maltreatment-2012

The published NCANDS report shows overall substantiated child maltreatment steady at 9.2 per 1000 children, or about 686,000 children. This rate is low by historical standards and 4.2% below the level of 2008.

Breaking out cases by type of abuse, the data show that sexual abuse rose 2% from 2011 to 2012 to a nationally estimated 62,700 cases. Physical abuse rose 5% to an estimated 122,600 cases. Neglect, by contrast was down 3% to an estimated 525,900. (see Figure 1).



Note: Trend estimates represent total change from 1992 to 2012. Annual rates for physical abuse and sexual abuse have been multiplied by 2 and 3 respectively in Figure 1 so that trend comparisons can be highlighted.

¹The 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: 2011-2012 and 1992-2012*

	D.o.	.cont Tron	de	Long	torm Tro	nde
	Recent Trends:			Long-term Trends:		
	% change in rate 2011-2012			% change in rate 1992-2012		
	Sexual	Physical		Sexual	Physical	
US States	Abuse	Abuse	Neglect	Abuse	Abuse	Neglect
Alabama	11%	11%	14%	-57%	-40%	-72%
Alaska	22%	17%	6%	-88%	-83%	-10%
Arizona	8%	-4%	19%	-92%	-69%	-9%
Arkansas	2%	2%	-12%	7%	-30%	50%
California	-13%	-13%	-2%	-87%	-87%	-18%
Colorado	-1%	-7%	-2%	-61%	-65%	32%
Connecticut	-4%	-16%	-20%	-59%	-88%	-40%
Delaware	-14%	-16%	-11%	-36%	-31%	-14%
District of Columbia (DC)	15%	-33%	-20%	83%	-22%	-54%
Florida	6%	5%	1%	-78%	-71%	-48%
Georgia	-1%	7%	-4%	-87%	-76%	-69%
Hawaii	-6%	7%	-14%	-73%	-79%	-70%
Idaho	missing	missing	missing	-94%	-89%	-74%
Illinois	17%	36%	-2%	-9%	48%	-29%
Indiana	2%	6%	10%	-61%	-73%	1%
Iowa	-5%	-7%	-3%	-63%	-53%	137%
Kansas	-9%	16%	4%	-32%	-49%	-48%
Kentucky	2%	4%	2%	-75%	-79%	4%
Louisiana	-15%	-11%	-12%	-38%	-34%	-27%
Maine	54%	43%	29%	-54%	-15%	108%
Maryland	-6%	-11%	-3%	-25%	-49%	-13%
Massachusetts	6%	-5%	-4%	-67%	-57%	2%
Michigan	7%	9%	-1%	-46%	64%	202%
Minnesota	7%	-13%	-3%	-41%	-83%	-58%
Mississippi	28%	9%	9%	-41%	-51%	-1%
Missouri	-19%	-19%	-24%	-62%	-60%	-74%
Montana	22%	44%	22%	-92%	-91%	-63%
Nebraska	25%	7%	-14%	-60%	-71%	8%
Nevada	-24%	-5%	2%	-66%	-38%	-59%
New Hampshire	31%	-18%	1%	-75%	-75%	90%
New Jersey	5%	-5%	10%	-46%	-84%	-21%
New Mexico	2%	7%	4%	-76%	-58%	12%
New York	-6%	-8%	-9%	-66%	-63%	95%
North Carolina	0%	-3%	-1%	-6%	30%	-45%
North Dakota	3%	-4%	3%	-70%	-82%	-38%
Ohio	2%	1%	-9%	-49%	-12%	-49%
Oklahoma	-4%	140%	-16%	-53%	62%	-15%
Oregon	missing	missing	missing	-78%	-66%	25%
Pennsylvania	6%	5%	-39%	-46%	-69%	-72%
Rhode Island	33%	-2%	-1%	-70%	-72%	16%
South Carolina	8%	6%	-4%	-68%	75%	-3%
South Dakota	-18%	-22%	-9%	-90%	-76%	-35%
Tennessee	15%	2%	5%	-12%	-58%	10%
Texas	-5%	-6%	-5%	-60%	-57%	10%
Utah	22%	153%	5%	-42%	21%	-12%
Vermont	16%	1%	-61%	-41%	-21%	-94%
Virginia	-3%	-6%	-1%	-69%	-62%	-66%
Washington	-12%	2%	1%	-86%	-78%	-76%
West Virginia	40%	14%	13%	-65%	-17%	-18%
Wisconsin	-9%	-4%	3%	-82%	-82%	-59%
Wyoming	4%	-47%	-3%	-81%	-97%	-61%
*Note that in states with sma						

^{*}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, 1993-2012; ID 1993-2012; MD, 2001-2012; WA, 1995-2012; WV, 1998-2012.

The rise in sexual abuse is the first rise since 2003, but is still considerably down over the long term. Sexual abuse has declined 62% from 1992 to 2012. Similarly the increase in physical abuse, relatively large by single year standards, is the first in several years. But the long term trend for physical abuse is also down markedly, decreasing 54% since 1992. The 2011-2012 decline in neglect continues a trend that has been consistently down since 2006 with a long-term drop of 14% since 1992.

It is not possible to directly compare state maltreatment rates 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 an increase in deaths of 4% from an estimated national total (excluding Puerto Rico) of 1557 in 2011 to 1620 in 2012.

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 recently released 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 used consistent and standardized definitions of child maltreatment and gathered 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 was unable to show that worker caseload (an effect of cutbacks, for example) was 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).

Questions will certainly be asked about whether the 2011-2012 increases in physical abuse, sexual abuse and fatalities were related to ongoing economic difficulties and high unemployment. It is interesting that violent crime reported to police also increased from 2011-2012 for the first time in many years.

http://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s/2012/crime-in-the-u.s.-2012/violent-crime/violent-crime. Unfortunately, it is unwise to draw inferences about abuse or crime trends based on a single year.

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 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: 2011-2012

Table 2. Ciliu Maitrea	tment Fatality Trends: 2011-2012				
	Child Maltreatment Fatalities				
116 64-4	Count	Count	% Change		
US States	2011	2012	2011-2012		
Alabama	3	4	91%		
Alaska		•	33%		
Arizona	34	30	-12%		
Arkansas	12	33	175%		
California	123	128	4%		
Colorado	31	40	29%		
Connecticut	8	6	-25%		
Delaware	1	3	200%		
District of Columbia (DC)	3	2	-33%		
Florida	133	179	35%		
Georgia	65	71	9%		
Hawaii	2	3	50%		
Idaho	3	missing	missing		
Illinois	82	108	32%		
Indiana	34	23	-32%		
Iowa	10	7	-30%		
Kansas	10	8	-20%		
Kentucky	32	26	-19%		
Louisiana	45	42	-7%		
Maine	1	missing	missing		
Maryland	10	26	160%		
, Massachusetts	missing	missing	missing		
Michigan	75	63	-16%		
Minnesota	15	10	-33%		
Mississippi	13	7	-46%		
Missouri	36	20	-44%		
Montana	0	2	0%		
Nebraska	7	6	-14%		
Nevada	19	18	-5%		
New Hampshire	2	10	-50%		
New Jersey					
New Jersey New Mexico	22	16	-27%		
	15	16	7%		
New York	83	100	20%		
North Carolina	19	24	26%		
North Dakota	1	1	0%		
Ohio	67	70	4%		
Oklahoma	38	25	-34%		
Oregon	19	17	-11%		
Pennsylvania	37	38	3%		
Rhode Island	3	1	-67%		
South Carolina	15	23	53%		
South Dakota	3	6	100%		
Tennessee	29	31	7%		
Texas	246	215	-13%		
Utah	11	12	9%		
Vermont	2	0	-100%		
Virginia	36	33	-8%		
Washington	20	21	5%		
West Virginia	16	5	-69%		
Wisconsin	24	31	29%		
Wyoming	1	2	100%		
Total	1527	1574	200,0		
National estimate	1557	1620	4%		
radional estimate	1331	1020	⊤/ 0		

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.

There is a great deal that can potentially be learned by searching for the sources of changes in the child maltreatment data. 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.

REFERENCES

- Almeida, J., Cohen, A. P., Subramanian S. V., Molnar, B. E. (2008). Are increased worker caseloads in state child protective service agencies a potential explanation for the decline in child sexual abuse?: Multilevel analysis. *Child Abuse and Neglect*, *32*(3), 367-375.
- Finkelhor, D. (2008). *Childhood victimization*. New York: Oxford University Press.
- Finkelhor, D., & Jones, L.M. (2012). Have sexual abuse and physical abuse declined since the 1990s? Durham, NH: Crimes against Children Research Center.
- Finkelhor, D., & Jones, L. M. (2006). Why have child maltreatment and child victimization declined? *Journal of Social Issues*, *62*, 685-716.
- Jones, L. M., Finkelhor, D., & Kopiec, K. (2001). Why is sexual abuse declining?: A survey of state child protection administrators. *Child Abuse and Neglect*, 25, 1139-1158.
- Jones, L. M., Finkelhor, D., & Halter, S. (2006). Child maltreatment trends in the 1990s: Why does neglect differ from sexual and physical abuse? *Child Maltreatment*, 11(2), 107-120.

U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2013). *Child Maltreatment 2012*. Washington, DC: U.S. Government Printing Office.



CRIMES AGAINST CHILDREN RESEARCH CENTER

126 Horton Social Science Center Durham, NH 03824

(603) 862-1888

(603) 862-1122 FAX

www.unh.edu/ccrc