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# Child Abuse: Threat or Menace?

## How common is it really?

By Douglas J. Besharov with Jacob W. Dembosky
*(1,121 words; posted Friday, Oct. 3; to be composted Friday, Oct. 10)*

With a new government-funded study in hand, Secretary of Health and Human Services Donna Shalala diagnosed a rising epidemic of child abuse last month. She reported that "child abuse and neglect nearly doubled in the United States between 1986 and 1993"--and that was only the beginning of the ugly news. The number of "serious" cases had quadrupled, and the percentage of cases being investigated by the authorities had actually *declined* by 36 percent, trends that she called "shameful and startling."

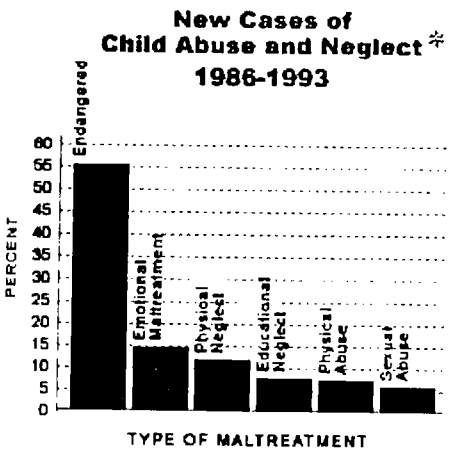
Is Shalala right? Is an unheeded child-abuse epidemic raging in America? Or, as I think is more likely, is the methodology behind the study and the interpretation of its numbers flawed? And if Shalala overstated the child-abuse peril, is she undermining public interest in the problem by making it appear too big and difficult to fix at a reasonable cost?

**A Look at the Numbers**

The secretary drew her statistics from the National Incidence Study of Child Abuse and Neglect, which was conducted by Westat Inc., a consulting firm that conducted similar studies in 1980 and 1986. In the new study, about 5,600 professionals, a representative sample, were asked by Westat whether the children they had served appeared to have suffered specified harms or to be living under specified conditions. Westat then

determined if the reported "harms" and "conditions" met the study's definitions of "abuse" and "neglect," and generated estimates of incidence.

The odd thing about Shalala's claim that the number of children abused and neglected doubled from 1.4 million in 1986 to 2.8 million in 1993 is that no other signs point to such a dramatic increase in child abuse and neglect. Fatalities arising from child abuse have held roughly steady, ranging from 1,014 in 1986 to 1,216 in 1993, according to the National Committee to Prevent Child Abuse.




Of the 1.4 million additional cases reported, almost 80 percent fall into three suspect categories. (Anywhere from 13 percent to 34 percent of the 2.8 million children suffered more than one type of abuse or neglect. Unfortunately, the study did not "unduplicate" these reports. Nevertheless, the proportions I describe below provide a general picture of what is happening.)

***Endangered children*** account for 55 percent of the increase. These are cases where the child was not actually harmed by parental abuse or neglect, but was "*in danger of being harmed* according to the views of community professionals or child-protective service agencies" [emphasis added]. (See Figure 1.)

***Emotional abuse*** and neglect account for another 15 percent of the increase. The great majority of emotional-abuse cases, according to the 1986 Westat study, involved "verbal assaults," and more than half of the emotional-neglect cases involved "the refusal or delay of psychological care."

***Educational neglect***--the chronic failure to send a child to school--added another 8 percent to the total of new cases.

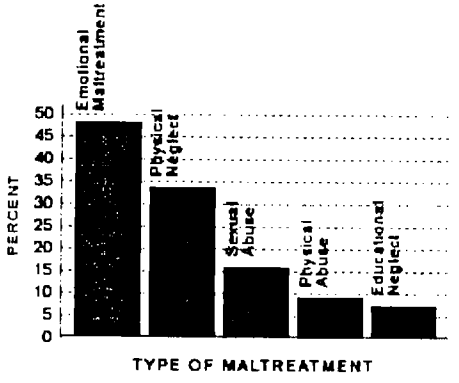
## "Definitional Creep"?

All these cases warrant attention, but the explosion of numbers may be caused by the growing reportorial sensitivity of professionals, that is, "definitional creep." Professionals who become more sensitive to possible abuse, or more adept at noticing it, would make more reports to Westat--even if the actual incidence had not risen. In endangerment cases, at least, the study seems to accept this explanation.

According to Shalala, the number of "serious" cases increased between 1986 and 1993 from "about 143,000 to nearly 570,000." Her comments left the impression that the cases involved

life-threatening assaults, but the study defines "serious" cases as any in which the child suffered "long-term impairment of physical, mental, or emotional capacities, or required professional treatment aimed at preventing such long-term impairment." Emotional maltreatment accounted for fully half of the increase in serious cases. (See Figure 2.)

**New Cases of "Serious" Abuse and Neglect† 1986-1993**



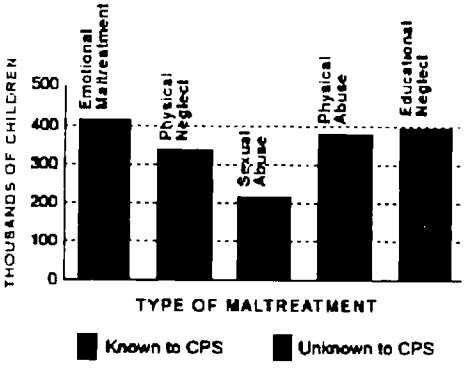

In cases labeled as serious physical abuse, the reported injury could be mental or emotional.

Even in these "serious" cases, the study seems affected by definitional creep. For example, in three categories (sexual abuse, physical neglect, and emotional neglect), the number of cases described as "moderate" declined even as the number of "serious" ones increased--strongly suggesting that cases once viewed as only moderately threatening have now been "upgraded" to the most dire category.

**Uninvestigated Cases?**

Shalala's assertion that investigations of child abuse and neglect cases have dropped by 36 percent deserves closer scrutiny. In producing the number of uninvestigated cases, the study compared the number of cases identified by professionals with those known to local agencies. Of the cases not investigated, 33 percent involved educational neglect. (See Figure 3.)

**Investigated Cases of Child Abuse and Neglect* 1993**




The main flaw here is that most educational-neglect cases are handled by the schools; reports are made to protective agencies only when all else fails.

Another 30 percent of uninvestigated cases involved emotional abuse and neglect. But child-protective agencies usually avoid these cases because they tend to involve subjective judgments, and there is little that a quasi-law-enforcement agency can do about them.

Definitional creep is clearly at play here, too. Professionals who are increasingly willing to identify situations as harmful aren't necessarily ready to equate them with the sort of abuse and neglect they are legally obliged to report. And even if they did report these instances, child-protective agencies would still be expected to screen them out.

**Does Shalala Believe Her Own Hype?**

Probably not. Radical action would be required if Shalala's figures were even roughly correct. But instead of proposing radical action when she released the report, she outlined modest steps that had long been planned and budgeted.

Having worked in the field for 30 years, I can testify firsthand that the problem of child abuse and neglect is real. But however well meant, exaggerating the severity of abuse endangers children. In the late '80s, for example, the nation was told that 375,000 drug-exposed babies were born each year; Washington policy-makers were immobilized by estimates that tens of billions of dollars were needed to protect these children. In fact, the true number was closer to 35,000, and a decade later, the government has yet to mount a meaningful program for the children of addicts.

Overstatement may also obscure genuinely worrisome findings. Some of the increases in sexual abuse, physical abuse, and physical neglect uncovered by Westat may well reflect a true deterioration of conditions in disorganized, poverty-stricken households. But Shalala paid scant attention to this possibility.

And to claim recklessly that too few cases are investigated is to play with fire. Child-protective agencies are already overwhelmed investigating about 2 million reports a year, two-thirds of which are dismissed as unfounded or inappropriate. For many in the field, the most pressing need is to discourage inappropriate reporting--not to blithely call for more.

## Links

The National Incidence Study is scheduled to be released this fall. For immediate resources on child abuse and neglect, see the National Committee to Prevent Child Abuse and the National Data Archive on Child Abuse and Neglect at Cornell University.

*Douglas J. Besharov is a visiting professor at the University of Maryland's School of Public Affairs, where Jacob W. Dembosky is a research assistant. Besharov was the first director of the U.S. National Center on Child Abuse and Neglect. His most recent book is* Recognizing Child Abuse: A Guide for the Concerned.

***Graphs:*** *Third National Incidence Study of Child Abuse and Neglect*

** Figures for specific types of maltreatment exclude endangerment cases. Percentages total more than 100 because some children counted under more than one type of abuse.*
*† Percentages total more than 100 because some children counted under more than one type of abuse.*
** These exclude cases of endangerment.*

The Current National Debt is: Slate «23»

*(posted Wednesday, Oct. 23)*

**Fact Abuse**

The "Hey, Wait a Minute" column by Douglas J. Besharov and Jacob W. Dembosky ("Child Abuse: Threat or Menace?") seriously misrepresents the methodology, findings, and conclusions of the recently released Third National Incidence Study of Child Abuse and Neglect (NIS-3). As the NIS-3 project director and the supervisor responsible for implementing the NIS-3 definitions, we want to set the record straight. We address only some of the misinformation here.

In light of Besharov's criticisms, it is noteworthy that he participated in the Conference of Experts convened in late 1991 by the National Center on Child Abuse and Neglect (the NIS-3 sponsor) specifically to refine the NIS-3 design. Together with the rest of the conferees, Besharov recommended no changes in the NIS methodology and definitions. Now, five years later, Besharov opines that the NIS methodology and definitions are flawed. The NIS-3 findings may run counter to his position, but it is important for Besharov and Dembosky, and for readers of SLATE, to get the facts straight.

First, when Besharov and Dembosky characterized the 1.4 million additional children who joined the ranks of the maltreated between 1986 and 1993, they summed up the NIS-3 estimates in inappropriate ways to draw their conclusions. In doing so, they *overstated* the percent of children who were harmed *only* by emotional or educational maltreatment (actually 9 percent, not the 23 percent they indicated) and they *understated* the percent of new children who were harmed by physical abuse, sexual abuse, or physical neglect (actually 37 percent, not the 22 percent they implied). Besharov and Dembosky also glossed over how these percentages translate into numbers of children. The 37 percent just mentioned refers to over one-half million *additional* children who were harmed by physical abuse, sexual abuse, or physical neglect in 1993--over and above the number who were harmed by these forms of mistreatment in 1986. An estimated 1,249,000 children were

harmed by these forms of maltreatment in 1993. Also, in discounting the rise in incidence found in the NIS-3, Besharov and Dembosky contend that "fatalities arising from child abuse have held roughly steady" between 1986 and 1993. But this is contradicted by the numbers they themselves cite, which show that fatalities have *risen by 20 percent* during this period, from 1,014 to 1,216.

Second, Besharov and Dembosky misrepresented the NIS methodology for classifying the severity of injury or harm. (We wish we could ascribe this to misunderstanding, but we clarified this issue for them before their article's publication and they published their misinformation anyway.) In fact, the classification of a child as seriously injured/harmed is relatively objective in that it does not rely on a blanket judgment by a respondent. The criteria for defining serious harm or injury are standardized; they are applied to the described injury itself, not to the respondent's judgment about that injury; and they have been consistent across the three incidence studies. So the recent quadrupling of the number of seriously injured children cannot be ascribed to some vague form of "definitional creep."

Third, Besharov and Dembosky's claim that increased sensitivity accounts for the rise in the number of seriously injured children does not make sense in the context of the patterns of NIS findings, which do provide evidence of progressively heightened sensitivity for more subtle maltreatment cues. Respondents' sensitivity to moderate injuries increased between the NIS-1 in 1980 and the NIS-2 in 1986, but did not change after that. Between the NIS-2 and the NIS-3, respondents showed increased awareness of endangerment (i.e., maltreatment events that did not yet cause harm). Note that the significant increases found in the NIS-3 were *discontinuous* across the outcome spectrum, occurring in only two categories: serious injury/harm and endangerment, both of which essentially quadrupled since the NIS-2 in 1986. If Besharov and Dembosky want to discount both increments by appealing to the same process (enhanced sensitivity) then they need to explain (1) why this process applied discontinuously in the NIS-3 and did not affect the intervening category of moderate injury or harm, and (2) how the NIS-2 respondents managed to overlook three-fourths of the children who had been seriously injured while at the same time evidencing greater sensitivity in identifying moderately injured children. Seriously injured victims of maltreatment are relatively unlikely to escape detection by the study methodology, so the rise in incidence in this category cannot be plausibly explained as due to heightened awareness. Considering all the evidence,

the most reasonable interpretation is that there has been a *real increase* in the incidence of seriously injured children. More than one-half million children were seriously injured by abuse or neglect in 1993.

Fourth, Besharov and Dembosky take issue with the documented drop of 36 percent in the rate of Child Protective Services investigations by pointing out that the set of uninvestigated cases includes educational neglect and emotional maltreatment. But a careful reading of their discussion reveals that they do not address the drop per se. Instead, their entire discussion emphasizes their "take" on the relative inappropriateness of CPS investigations for emotional and educational maltreatment. However, educational neglect and emotional maltreatment have always been included in the incidence studies, and eliminating them from the picture would not eradicate the significant drop in the overall rate of CPS investigations from the NIS-2 to the NIS-3. In fact, the percentages of children whose maltreatment was investigated decreased significantly in all categories *except* educational neglect--from 64 percent to 45 percent among physically abused children, from 75 percent to 44 percent among sexually abused children, from 57 percent to 35 percent among physically neglected children, and from 40 percent to 26 percent among children seriously injured by any maltreatment.

Finally, contrary to what Besharov and Dembosky convey, the NIS-3 report does not "blithely call for more" reporting. Nor did we "claim recklessly that too few cases are investigated." Instead, we concluded that the NIS-3 findings "emphasize the need for better targeting, whether by reporters in referring children to CPS, by CPS screening practices in connection with reports, or by both."

*--Andrea J. Sedlak, Ph.D.*
*associate director of the Human Services Research Area at Westat Inc.*
*--Diane D. Broadhurst, M.L.A.*
*senior researcher at Westat Inc.*

**Douglas J. Besharov Replies:**

It is difficult to respond to Sedlak and Broadhurst's letter. First, I have great respect for their past work, and appreciate the constraints they faced in this project--as government contractors in an underfunded study. Second, words like "misrepresented" and "misinformation" are, in the world of policy analysis, fighting words. Third, their study is complicated, and numbers can be thrown back and forth until the eyes of the average reader glaze over. Most important, my complaint is not so much with the study as with the

interpretation of its findings--and especially with the spin given to it by political appointees in the Department of Health and Human Services.

Hence, I will deal with the personal attacks in their letter and then go on to my larger policy--and ethical--concerns about their response.

In their letter, Sedlak and Broadhurst correctly point out that I participated in a 1991 Conference of Experts that discussed the study's methodology. In fact, as director of the National Center on Child Abuse and Neglect in the mid-1970s, I helped design the study in the first place--long before either Sedlak or Broadhurst were involved. So, I know well the strengths--and weaknesses--of the study's approach to the difficult task of counting illegal behaviors toward children that largely occur behind closed doors.

They claim that, after the 1991 meeting, I "recommended no changes in the [incidence study's] methodology and definitions." But they conveniently leave out two important facts. First, at that meeting, I pointed out that the methodological changes that were planned for the study *all would have the effect of raising the count of abused and neglected children.* In fact, Sedlak and her colleagues described (in a report to HHS) how they planned to "fine-tune" the study to "ensure that categories of key participants who were most likely to encounter suspected maltreatment cases in the [1986 incidence study] are given higher probability of being included in the [new study]." In other words, they proposed to change the study's methodology so that more reports would be made to Westat. Second, I did urge that the study's conclusions be modified--six months before it was released to the public. On Dec. 7, 1995, Secretary Shalala issued a press release stating that "the number of abused and neglected children rose sharply from 1.4 million in 1986 to 2.9 million in 1993." I tried to get a copy of the report, but was informed that no one outside the government would be given a copy until it was complete. In other words, Shalala issued her press release based on an uncompleted report.

Like others, I tried to get more information about the study from Westat, but was rebuffed. In fact, Sedlak sent me a memorandum stating that "the continued contacts from your office on the matter give the appearance of efforts to place me and my staff in a compromising position in relation to our client, NCCAN. Please ensure that your staff refrain from further contacts of this nature."

Concerned, I wrote to Secretary Shalala in March, stating: "The Westat findings may be extremely significant, but there is reason to doubt that they reflect an actual increase in abuse and neglect." I went on to explain what the problems

seemed to be, and to offer my assistance in interpreting the study's results.

In a bureaucratic nonresponse, a political appointee replied by enclosing a defense of the study prepared by Sedlak and stating, "I believe that the enclosed memo concerning the study adequately addresses your concerns."

I mention this history, rather than dueling with Sedlak and Broadhurst's statistics, because I think that it exemplifies their selective presentation of information.

The last time Sedlak conducted an incidence study, it had to be revised and reissued almost three years later because technical problems in the analysis inflated the estimated number of abused and neglected children by 11 percent.

This time around, the problem seems to be more severe. The plain fact is that no attempt was made to conduct the kind of second-level analysis that would have explored whether the increases were real. (The data that they cite in their letter to contradict us, by the way, were not presented in the original report and, in any event, are too incomplete for these purposes.) I realize that one reason this essential work was not performed was that the government was unwilling to pay for it. But that is no excuse for announcing that "child abuse and neglect nearly doubled" without also cautioning the reader about the study's limitations. I hope that, before three years pass, a revised report that does so will be issued.

Moreover, I doubt that the people at HHS seriously believe that child abuse doubled in seven years. If it had, America would be in the midst of a child-abuse crisis. Decisive and perhaps radical action would be required, not the puny list of previously planned and budgeted activities that Shalala described in her press release: A demonstration program in Illinois, $23 million in prevention grants, $2.5 million to maternal and child-health programs, past initiatives to fund family preservation programs and to oppose child-welfare block grants, and an "unprecedented" level of technical assistance to the states (again, though, not an increase).

But the real reason I write is because of the broader problem created by exaggerating social ills. Cynics might chalk up this latest report as yet another well-meaning effort to build support for child-abuse programs. After all, goes the thinking, if the American people believe that child maltreatment is a big problem, they might be willing to spend more money on treatment and prevention programs. Richard Gelles, a longtime leader in the field and author of *The Book of David: How Preserving Families Can Cost Children's Lives*, says that he used to "go along" with past

exaggerations, but has come to appreciate the harm that they have done.

Exaggerating the severity of cases is what columnist Charles Krauthammer has called "defining deviancy up." The more it seems that such serious maltreatment is common, the less likely are agencies to respond firmly. To put it bluntly, society can consider a tough response to 150,000 serious cases a year--but 560,000 is an entirely different matter, politically and programmatically.

I have worked in this field for almost 30 years--first as a young prosecutor in New York City, later as the director of the HHS National Center on Child Abuse and Neglect, and more recently as a trainer and consultant--and I know that child abuse and child neglect are profound national problems. But, time after time I have seen how such overstatements have made the problem seem too big to handle or have distorted policy-making. I am afraid that Shalala's remarks will do the same.

HUG ME. the road is calling. ANSWER IT. LEXUS Slate 24

# e mail to the editors

*(posted Wednesday, Nov. 6)*

**Abuse Redux**

I agree with the overarching point of Douglas J. Besharov and Jacob W. Dembosky's article, "Child Abuse: Threat or Menace?" I am sorry that they were not given more space to flesh out the details and evidence that support their position. I do believe that the administration has used the National Incidence Study of Child Abuse and Neglect (NIS-3) for purely political purposes--to demonize welfare reform and draw attention away from the fact that it (the administration) has no plan to rectify the crisis that afflicts the child-welfare system.

Community professionals now see more abuse and neglect because they are trained to see more. Clearly, child-welfare professionals want--and need--to point to bigger numbers in order to bid for what they perceive to be diminished resources. However, there are survey data (that Deborah Daro and I collect) and data on homicide that indicate strongly that it is very unlikely that there is any kind of major increase in the rate of child maltreatment in the country.

As to whether an effort should be mounted to get a better analysis of the report--well, the social scientist in me always wants more honest data analysis. On the other hand, many social scientists, myself included, find the NIS studies of such limited value that we rarely use the data or even reference the studies beyond a cursory mention that they have been conducted.

On balance, though, I think that as the administration is going to fall back on NIS-3 to support anything they plan to do--and to block programs they don't want--it is wise to push for a more honest accounting of the study.

*--Richard J. Gelles*
*director, University of Rhode Island Family Violence Research Program*
*Kingston, R.I.*

CDF, State of America's Children, 1994



88, 89, 90, 91, 93

## Children Reported Abused or Neglected, Distribution by Race and Ethnicity, 1991

| | Number reported | Total | White | Black | Latino | Native American | Asian/Pacific Islands | Other |
|---|---|---|---|---|---|---|---|---|
| Alabama | 43,969 | 100.0% | 61.5% | 38.0% | 0.2% | 0.0% | 0.2% | — |
| Alaska | 8,983 | 100.0 | 55.3 | 8.3 | 2.8 | 30.7 | 1.5 | 1.4% |
| Arizona | 44,844 | 100.0 | 57.9 | 7.9 | 25.3 | 3.9 | 0.4 | 4.6 |
| Arkansas | 39,687 | 100.0 | 69.7 | 29.5 | 0.4 | 0.3 | 0.1 | 0.1 |
| California | 416,757 | 100.0 | 53.2 | 12.1 | 29.3 | 0.6 | 3.3 | 1.5 |
| Colorado | 50,874 | 100.0 | 61.8 | 14.2 | 21.7 | 1.2 | 1.0 | — |
| Connecticut | 22,080 | 100.0 | 54.9 | 26.2 | 18.1 | 0.1 | 0.6 | — |
| Delaware | 7,941 | 100.0 | 51.5 | 42.9 | 4.2 | 0.0 | 0.1 | 1.3 |
| District of Columbia | 9,444 | 100.0 | 2.9 | 87.5 | 5.1 | — | — | 4.4 |
| Florida | 184,370 | 100.0 | 63.6 | 36.1 | — | 0.1 | 0.3 | — |
| Georgia | 68,057 | 100.0 | 51.6 | 45.1 | 1.2 | 0.1 | 0.3 | 1.8 |
| Hawaii | 5,017 | 100.0 | 17.7 | 3.9 | 0.4 | 0.9 | 50.0 | 27.1 |
| Idaho | 19,507 | 100.0 | 80.6 | 0.5 | 12.4 | 1.7 | 0.7 | 4.2 |
| Illinois | 117,912 | 100.0 | 45.7 | 46.4 | 6.3 | 0.1 | 0.3 | 1.2 |
| Indiana | 63,192 | 100.0 | 80.7 | 17.4 | 1.4 | 0.0 | 0.1 | 0.2 |
| Iowa | 27,553 | 100.0 | 86.7 | 9.4 | 1.7 | 1.3 | 0.5 | 0.4 |
| Kansas | 19,280 | — | — | — | — | — | — | — |
| Kentucky | 52,912 | 100.0 | 83.2 | 13.5 | 0.3 | 0.0 | 0.3 | 2.6 |
| Louisiana | 44,612 | 100.0 | 41.5 | 56.4 | — | — | 0.5 | 2.2 |
| Maine | 9,503 | — | — | — | — | — | — | — |
| Maryland | 46,806 | — | — | — | — | — | — | — |
| Massachusetts | 58,218 | 100.0 | 58.2 | 19.6 | 15.6 | 0.1 | 1.6 | 4.9 |
| Michigan | 113,932 | 100.0 | 64.1 | 33.0 | 2.1 | 0.6 | 0.2 | — |
| Minnesota | 26,663 | 100.0 | 68.4 | 17.0 | 3.8 | 8.6 | 2.1 | — |
| Mississippi | 20,138 | 100.0 | 44.1 | 55.4 | 0.1 | 0.1 | 0.2 | 0.1 |
| Missouri | 76,249 | — | — | — | — | — | — | — |
| Montana | 11,029 | — | — | — | — | — | — | — |
| Nebraska | 17,087 | 100.0 | 78.6 | 11.6 | 4.8 | 4.5 | 0.5 | — |
| Nevada | 20,573 | 100.0 | 70.1 | 17.3 | 8.1 | 1.4 | 1.4 | 1.7 |
| New Hampshire | 10,480 | — | — | — | — | — | — | — |
| New Jersey | 53,750 | 100.0 | 36.6 | 44.5 | 16.3 | 0.1 | 0.7 | 1.8 |
| New Mexico | 18,234 | 100.0 | 40.4 | 2.9 | 44.8 | 11.8 | 0.2 | — |
| New York | 212,420 | 100.0 | 44.8 | 34.0 | 16.8 | 0.2 | 0.5 | 3.7 |
| North Carolina | 71,427 | 100.0 | 52.0 | 43.4 | — | 2.2 | — | 2.3 |
| North Dakota | 6,435 | — | — | — | — | — | — | — |
| Ohio | 144,218 | 100.0 | 67.0 | 28.4 | 1.2 | 0.1 | 0.2 | 3.0 |
| Oklahoma | 21,328 | 100.0 | 70.5 | 14.3 | 1.8 | 12.4 | — | 1.0 |
| Oregon | 37,648 | 100.0 | 83.0 | 6.0 | 6.6 | 2.9 | 1.4 | — |
| Pennsylvania | 23,861 | — | — | — | — | — | — | — |
| Rhode Island | 13,820 | 100.0 | 71.2 | 15.2 | 10.0 | 0.4 | 1.2 | 1.9 |
| South Carolina | 30,978 | 100.0 | 44.9 | 53.6 | — | — | — | 1.4 |
| South Dakota | 11,205 | 100.0 | 46.3 | — | — | 51.6 | — | 2.1 |
| Tennessee | 29,715 | 100.0 | 69.5 | 29.4 | 0.2 | 0.1 | 0.1 | 0.7 |
| Texas | 153,753 | 100.0 | 42.2 | 25.2 | 31.0 | 0.1 | 0.5 | 0.8 |
| Utah | 23,254 | 100.0 | 83.6 | 1.9 | 6.4 | 5.3 | 1.5 | 1.3 |
| Vermont | 2,689 | 100.0 | 98.4 | 0.6 | 0.2 | 0.2 | 0.3 | 0.2 |
| Virginia | 50,732 | 100.0 | 55.3 | 37.4 | 2.9 | 0.0 | 0.4 | 4.0 |
| Washington | 59,311 | — | — | — | — | — | — | — |
| West Virginia | 22,221 | — | — | — | — | — | — | — |
| Wisconsin | 44,963 | 100.0 | 68.2 | 24.0 | 3.7 | 3.1 | 1.0 | — |
| Wyoming | 5,379 | 100.0 | 73.6 | 2.0 | 13.1 | 10.1 | — | 1.2 |
| United States | 2,695,010 | 100.0% | 58.2% | 27.9% | 10.0% | 1.4% | 0.8% | 1.7% |

Note: States cannot be compared or ranked because of differing definitions and reporting requirements. Furthermore, only some of the states report unduplicated counts, and not all states report data for all the racial and ethnic groups.

Source: U.S. Department of Health and Human Services, National Center on Child Abuse and Neglect, National Child Abuse and Neglect Data System, Working Paper 2, 1991 Summary Data Component. Calculations by Children's Defense Fund

## Children Younger Than 18 in Foster Care, FY 1990–FY 1992

| | Last day FY 1990 | Last day FY 1991 | Last day FY 1992 | Percent change FY 1990–1992 |
|---|---|---|---|---|
| Alabama | 4,420 | 4,383 | 4,133 | -6.5% |
| Alaska | 3,852 | 1,942 | 1,496 | -61.2 |
| Arizona | 3,379 | 3,618 | 3,909 | 15.7 |
| Arkansas | 1,351 | 1,326 | 1,981 | 46.6 |
| California | 79,482 | 80,880 | 83,849 | 5.5 |
| Colorado | 3,892 | 5,519 | 4,390 | 12.8 |
| Connecticut | 4,121 | 4,202 | 4,252 | 3.2 |
| Delaware | 663 | 655 | 638 | -3.8 |
| District of Columbia | 2,313 | — | 2,152 | -7.0 |
| Florida | 10,664 | 10,235 | 9,928 | -6.9 |
| Georgia | 15,179 | 15,500 | 16,999 | 12.0 |
| Hawaii | 1,659 | 1,600 | 1,214 | -26.8 |
| Idaho | 548 | 877 | 1,235 | 125.4 |
| Illinois | 20,753 | 23,776 | 29,542 | 42.4 |
| Indiana | 7,492 | 8,126 | 8,455 | 12.9 |
| Iowa | 3,425 | 4,609 | 3,606 | 5.3 |
| Kansas | 3,976 | 7,112 | 7,838 | 97.1 |
| Kentucky | 3,810 | 6,422 | 6,966 | 82.8 |
| Louisiana | 5,379 | 5,799 | 5,722 | 6.4 |
| Maine | 1,745 | 1,814 | 1,944 | 11.4 |
| Maryland | 6,473 | 4,859 | 5,816 | -10.1 |
| Massachusetts | 11,856 | 13,232 | 13,147 | 10.9 |
| Michigan | 9,000 | 11,282 | 11,121 | 23.6 |
| Minnesota | 7,310 | 7,898 | 7,895 | 8.0 |
| Mississippi | 2,832 | 2,830 | 3,169 | 11.9 |
| Missouri | 8,241 | 7,143 | 8,171 | -.8 |
| Montana | 1,224 | 1,494 | 1,691 | 38.2 |
| Nebraska | 2,543 | 2,660 | 2,985 | 17.4 |
| Nevada | 2,566 | 1,563 | 1,664 | -35.2 |
| New Hampshire | 1,505 | 2,095 | 2,630 | 74.8 |
| New Jersey | 8,879 | 8,451 | 8,024 | -9.6 |
| New Mexico | 2,042 | 2,304 | 2,118 | 3.7 |
| New York | 63,371 | 65,171 | 62,705 | -1.1 |
| North Carolina | 7,170 | 9,619 | 10,275 | 43.3 |
| North Dakota | 393 | 695 | 759 | 93.1 |
| Ohio | 18,062 | 17,298 | 17,099 | -5.3 |
| Oklahoma | 3,435 | 3,803 | 2,892 | -15.8 |
| Oregon | 4,261 | 3,996 | 4,031 | -5.4 |
| Pennsylvania | 16,665 | 17,508 | 18,491 | 11.0 |
| Rhode Island | 2,680 | 3,311 | 2,755 | 2.8 |
| South Carolina | 3,286 | 3,698 | 5,066 | 54.2 |
| South Dakota | 567 | 613 | 674 | 18.9 |
| Tennessee | 4,971 | 5,217 | 5,312 | 6.9 |
| Texas | 6,698 | 7,200 | 9,965 | 48.8 |
| Utah | 1,174 | 1,405 | 895 | -23.8 |
| Vermont | 1,063 | 1,088 | 1,162 | 9.3 |
| Virginia | 6,217 | 6,590 | 6,305 | 1.4 |
| Washington | 13,302 | 13,956 | 11,327 | -14.8 |
| West Virginia | 1,997 | 1,997 | 2,315 | 15.9 |
| Wisconsin | 6,037 | 6,403 | 6,812 | 12.8 |
| Wyoming | 484 | 605 | 907 | 87.4 |
| United States | 404,407 | 424,379 | 438,427 | 8.3% |

Note: States cannot be compared or ranked because of definitional variations.

Source: American Public Welfare Association, Voluntary Cooperative Information System. Calculations by Children's Defense Fund.

## Number of Children Living in Group Quarters Due to Own or Family Problems, by Race and Ethnicity, 1990

| | Total, all races | White | Black | Latino | Native American | Asian/Pacific Islander | Other Race |
|---|---|---|---|---|---|---|---|
| Alabama | 3,455 | 2,058 | 1,347 | 36 | 18 | 23 | 9 |
| Alaska | 598 | 301 | 44 | 25 | 238 | 10 | 5 |
| Arizona | 3,019 | 2,014 | 441 | 815 | 265 | 43 | 256 |
| Arkansas | 1,696 | 1,146 | 514 | 29 | 16 | 9 | 11 |
| California | 25,235 | 13,105 | 6,569 | 8,459 | 519 | 1,098 | 3,944 |
| Colorado | 2,457 | 1,894 | 304 | 560 | 90 | 22 | 147 |
| Connecticut | 3,572 | 1,768 | 1,446 | 701 | 35 | 25 | 298 |
| Delaware | 364 | 151 | 200 | 21 | 1 | 3 | 9 |
| District of Columbia | 1,704 | 258 | 1,404 | 51 | 5 | 15 | 22 |
| Florida | 8,876 | 4,824 | 3,739 | 813 | 73 | 58 | 182 |
| Georgia | 4,490 | 2,150 | 2,268 | 81 | 20 | 23 | 29 |
| Hawaii | 644 | 180 | 47 | 117 | 12 | 392 | 13 |
| Idaho | 881 | 755 | 8 | 119 | 37 | 11 | 70 |
| Illinois | 6,908 | 3,650 | 2,890 | 590 | 47 | 82 | 239 |
| Indiana | 4,596 | 3,400 | 1,076 | 141 | 28 | 17 | 75 |
| Iowa | 2,233 | 1,954 | 178 | 82 | 40 | 19 | 42 |
| Kansas | 2,148 | 1,525 | 392 | 196 | 58 | 59 | 114 |
| Kentucky | 2,160 | 1,706 | 409 | 23 | 18 | 4 | 23 |
| Louisiana | 3,942 | 1,910 | 1,976 | 75 | 21 | 17 | 18 |
| Maine | 606 | 575 | 9 | 7 | 12 | 8 | 2 |
| Maryland | 3,879 | 1,424 | 2,372 | 124 | 23 | 36 | 24 |
| Massachusetts | 4,620 | 2,985 | 1,126 | 841 | 33 | 76 | 400 |
| Michigan | 6,043 | 3,119 | 2,637 | 268 | 128 | 25 | 134 |
| Minnesota | 2,916 | 2,041 | 490 | 129 | 273 | 35 | 77 |
| Mississippi | 1,667 | 895 | 746 | 17 | 11 | 11 | 4 |
| Missouri | 4,231 | 2,714 | 1,413 | 84 | 40 | 21 | 43 |
| Montana | 573 | 408 | 18 | 28 | 121 | 8 | 18 |
| Nebraska | 1,561 | 1,132 | 259 | 124 | 87 | 15 | 68 |
| Nevada | 1,265 | 819 | 298 | 189 | 45 | 32 | 71 |
| New Hampshire | 601 | 561 | 25 | 18 | 1 | 5 | 9 |
| New Jersey | 4,998 | 1,465 | 3,132 | 707 | 27 | 36 | 338 |
| New Mexico | 1,238 | 726 | 74 | 488 | 235 | 7 | 196 |
| New York | 20,008 | 6,587 | 11,189 | 4,982 | 147 | 197 | 1,888 |
| North Carolina | 4,187 | 2,284 | 1,741 | 65 | 119 | 19 | 24 |
| North Dakota | 660 | 347 | 6 | 18 | 302 | 4 | 1 |
| Ohio | 7,539 | 4,473 | 2,891 | 180 | 40 | 26 | 109 |
| Oklahoma | 2,566 | 1,753 | 449 | 102 | 306 | 13 | 45 |
| Oregon | 2,122 | 1,707 | 131 | 188 | 146 | 40 | 98 |
| Pennsylvania | 9,494 | 4,782 | 4,263 | 664 | 51 | 50 | 348 |
| Rhode Island | 563 | 399 | 133 | 48 | 6 | 6 | 19 |
| South Carolina | 3,037 | 1,691 | 1,308 | 26 | 13 | 7 | 18 |
| South Dakota | 947 | 513 | 13 | 29 | 396 | 7 | 18 |
| Tennessee | 4,236 | 2,951 | 1,213 | 57 | 30 | 23 | 19 |
| Texas | 13,434 | 8,904 | 2,931 | 3,579 | 88 | 123 | 1,388 |
| Utah | 1,299 | 1,126 | 28 | 148 | 40 | 22 | 83 |
| Vermont | 177 | 171 | 2 | 4 | 3 | 0 | 1 |
| Virginia | 4,771 | 2,578 | 1,962 | 243 | 30 | 66 | 135 |
| Washington | 3,187 | 2,179 | 574 | 249 | 269 | 55 | 110 |
| West Virginia | 926 | 822 | 79 | 8 | 14 | 5 | 6 |
| Wisconsin | 3,191 | 1,936 | 1,056 | 167 | 107 | 20 | 72 |
| Wyoming | 501 | 432 | 8 | 66 | 22 | 2 | 37 |
| United States | 196,021 | 109,248 | 67,828 | 26,781 | 4,706 | 2,930 | 11,309 |

Note: Latino persons may be of any race.

Source: U.S. Department of Commerce, Bureau of the Census, 1990 Census of Population and Housing, special Group Quarters tabulation.

## Number of Children Living in Group Quarters Due to Own or Family Problems, by Reason, 1990

| | Homelessness | Mental/ emotional | Abuse or neglect | Drug or alcohol | Adult corrections | Juvenile delinquency | Physical/ medical |
|---|---|---|---|---|---|---|---|
| Alabama | 703 | 414 | 769 | 156 | 345 | 686 | 382 |
| Alaska | 134 | 93 | 86 | 93 | 1 | 172 | 19 |
| Arizona | 580 | 420 | 240 | 90 | 261 | 1,293 | 135 |
| Arkansas | 215 | 297 | 446 | 72 | 172 | 262 | 232 |
| California | 6,416 | 3,600 | 1,965 | 590 | 2,890 | 9,084 | 690 |
| Colorado | 476 | 738 | 183 | 69 | 81 | 801 | 109 |
| Connecticut | 1,531 | 763 | 298 | 108 | 270 | 428 | 174 |
| Delaware | 120 | 101 | 38 | 17 | 12 | 76 | 0 |
| District of Columbia | 1,118 | 87 | 65 | 16 | 213 | 54 | 151 |
| Florida | 1,648 | 1,475 | 888 | 465 | 2,267 | 1,544 | 589 |
| Georgia | 758 | 996 | 642 | 181 | 1,030 | 662 | 221 |
| Hawaii | 312 | 77 | 0 | 155 | 52 | 41 | 7 |
| Idaho | 185 | 153 | 60 | 86 | 44 | 280 | 73 |
| Illinois | 1,479 | 1,331 | 1,218 | 162 | 799 | 1,351 | 568 |
| Indiana | 679 | 828 | 1,316 | 116 | 357 | 1,109 | 191 |
| Iowa | 344 | 751 | 211 | 113 | 90 | 532 | 192 |
| Kansas | 383 | 719 | 325 | 28 | 323 | 269 | 101 |
| Kentucky | 422 | 528 | 263 | 101 | 178 | 515 | 153 |
| Louisiana | 413 | 979 | 272 | 207 | 680 | 1,113 | 278 |
| Maine | 106 | 12 | 96 | 63 | 21 | 283 | 25 |
| Maryland | 812 | 968 | 310 | 45 | 516 | 1,007 | 221 |
| Massachusetts | 1,693 | 1,244 | 625 | 107 | 136 | 453 | 362 |
| Michigan | 983 | 1,328 | 549 | 44 | 592 | 2,293 | 254 |
| Minnesota | 429 | 655 | 167 | 323 | 303 | 821 | 218 |
| Mississippi | 223 | 306 | 269 | 60 | 114 | 562 | 133 |
| Missouri | 725 | 1,000 | 1,000 | 166 | 344 | 735 | 261 |
| Montana | 106 | 85 | 48 | 22 | 11 | 285 | 16 |
| Nebraska | 117 | 275 | 653 | 63 | 94 | 280 | 79 |
| Nevada | 160 | 173 | 199 | 18 | 292 | 359 | 64 |
| New Hampshire | 84 | 62 | 86 | 111 | 2 | 183 | 73 |
| New Jersey | 2,529 | 636 | 187 | 166 | 319 | 990 | 171 |
| New Mexico | 184 | 135 | 279 | 94 | 114 | 267 | 165 |
| New York | 8,305 | 4,220 | 1,495 | 378 | 1,751 | 2,846 | 1,013 |
| North Carolina | 529 | 1,008 | 1,056 | 79 | 533 | 580 | 402 |
| North Dakota | 50 | 69 | 95 | 22 | 10 | 318 | 96 |
| Ohio | 1,100 | 1,240 | 1,168 | 135 | 176 | 3,402 | 318 |
| Oklahoma | 614 | 622 | 316 | 255 | 147 | 468 | 144 |
| Oregon | 610 | 384 | 182 | 118 | 60 | 718 | 50 |
| Pennsylvania | 2,305 | 1,879 | 1,212 | 320 | 281 | 3,161 | 336 |
| Rhode Island | 114 | 56 | 127 | 13 | 3 | 243 | 7 |
| South Carolina | 321 | 399 | 739 | 18 | 203 | 1,082 | 275 |
| South Dakota | 150 | 96 | 194 | 11 | 56 | 326 | 114 |
| Tennessee | 506 | 1,171 | 886 | 184 | 168 | 947 | 374 |
| Texas | 2,116 | 3,567 | 2,939 | 733 | 1,264 | 2,271 | 544 |
| Utah | 112 | 644 | 0 | 21 | 30 | 452 | 40 |
| Vermont | 32 | 29 | 95 | 1 | 3 | 14 | 3 |
| Virginia | 816 | 992 | 518 | 88 | 171 | 1,832 | 354 |
| Washington | 1,061 | 432 | 159 | 114 | 177 | 1,071 | 173 |
| West Virginia | 185 | 58 | 177 | 32 | 77 | 228 | 169 |
| Wisconsin | 488 | 1,034 | 243 | 135 | 109 | 1,085 | 97 |
| Wyoming | 95 | 101 | 53 | 20 | 22 | 210 | 0 |
| United States | 45,576 | 39,230 | 25,407 | 6,784 | 18,164 | 50,044 | 10,816 |

Source: U.S. Department of Commerce, Bureau of the Census, 1990 Census of Population and Housing, special Group Quarters tabulation.

## Maximum Number of Children Allowed per Caretaker and Maximum Group Size in Child Care Centers, by Age of Children

| | Children per caretaker | | | Group size | | |
|---|---|---|---|---|---|---|
| | 12 months | 2 years | 4 years | 12 months | 2 years | 4 years |
| Alabama | 6 | 8 | 20 | 6 | 8 | 20 |
| Alaska | 6 | 6 | 10 | — | — | — |
| Arizona | 5 | 10 | 15 | — | — | — |
| Arkansas | 6 | 9 | 15 | — | — | — |
| California | 4 | 12 | 12 | — | — | — |
| Colorado | 5 | 7 | 12 | 10 | 14 | — |
| Connecticut | 4 | 4 | 10 | 8 | 8 | 20 |
| Delaware | 7 | 10 | 15 | — | — | — |
| District of Columbia | 4 | 4 | 10 | 8 | 8 | 20 |
| Florida | 6 | 11 | 20 | — | — | — |
| Georgia | 8 | 10 | 18 | 12 | 16 | 36 |
| Hawaii | 5 | 8 | 16 | 12 | — | — |
| Idaho | 12 | 12 | 12 | — | — | — |
| Illinois | 4 | 8 | 10 | 12 | 16 | 20 |
| Indiana | 4 | 5 | 12 | 10 | 15 | — |
| Iowa | 4 | 6 | 12 | — | — | — |
| Kansas | 5 | 7 | 12 | 10 | 14 | 24 |
| Kentucky | 6 | 10 | 14 | 12 | 20 | 28 |
| Louisiana | 8 | 12 | 16 | — | — | — |
| Maine | 4 | 5 | 8 | 12 | 15 | 24 |
| Maryland | 3 | 6 | 10 | 6 | 12 | 20 |
| Massachusetts | 3 | 4 | 10 | 7 | 9 | 20 |
| Michigan | 4 | 4 | 12 | — | — | — |
| Minnesota | 4 | 7 | 10 | 8 | 14 | 20 |
| Mississippi | 9 | 12 | 16 | 10 | 14 | 20 |
| Missouri | 4 | 8 | 10 | 8 | 16 | — |
| Montana | 4 | 8 | 8 | — | — | — |
| Nebraska | 4 | 6 | 12 | — | — | — |
| Nevada | 6 | 8 | 13 | — | — | — |
| New Hampshire | 4 | 5 | 12 | 12 | 15 | 24 |
| New Jersey | 4 | 7 | 15 | — | — | — |
| New Mexico | 6 | 10 | 12 | — | — | — |
| New York | 4 | 5 | 8 | 8 | 10 | 16 |
| North Carolina | 7 | 12 | 20 | 14 | 24 | 25 |
| North Dakota | 4 | 5 | 10 | — | — | — |
| Ohio | 6 | 8 | 14 | 12 | 16 | 28 |
| Oklahoma | 6 | 8 | 15 | 12 | 16 | 30 |
| Oregon | 4 | 4 | 10 | 8 | 8 | 20 |
| Pennsylvania | 4 | 5 | 10 | 8 | 10 | 20 |
| Rhode Island | 4 | 6 | 10 | 8 | 12 | 20 |
| South Carolina | 7 | 7 | 14 | — | — | — |
| South Dakota | 5 | 5 | 10 | 20 | 20 | 20 |
| Tennessee | 7 | 8 | 15 | 14 | 16 | 20 |
| Texas | 6 | 13 | 20 | — | — | — |
| Utah | 4 | 7 | 15 | 8 | 8 | — |
| Vermont | 4 | 5 | 10 | 8 | 10 | 20 |
| Virginia | 4 | 10 | 12 | — | — | — |
| Washington | 7 | 7 | 10 | 14 | 14 | 20 |
| West Virginia | 4 | 8 | 12 | — | — | — |
| Wisconsin | 4 | 6 | 13 | 8 | 12 | 24 |
| Wyoming | 5 | 8 | 15 | — | — | — |
| Recommended | 5 | 6 | 10 | 12 | 12 | 20 |

— = Not regulated

Source: *Parenting Magazine*, November 1993

CDF, The State of Am's Children, 1994

73-77

# Children in the Nation

## National Trends

| Year | Number of Children Younger than 18 Who Are Poor | Child Poverty Rate | Number of Children[1] Younger than Six Who Are Poor | Poverty Rate for Children Younger than Six |
|---|---|---|---|---|
| 1959 | 17,552,000 | 27.3% | n/a | n/a |
| 1960 | 17,634,000 | 26.9 | n/a | n/a |
| 1961 | 16,909,000 | 25.6 | n/a | n/a |
| 1962 | 16,963,000 | 25.0 | n/a | n/a |
| 1963 | 16,005,000 | 23.1 | n/a | n/a |
| 1964 | 16,051,000 | 23.0 | n/a | n/a |
| 1965 | 14,676,000 | 21.0 | n/a | n/a |
| 1966 | 12,389,000 | 17.6 | n/a | n/a |
| 1967 | 11,656,000 | 16.6 | n/a | n/a |
| 1968 | 10,954,000 | 15.6 | n/a | n/a |
| 1969 | 9,691,000 | 14.0 | 3,298,000 | 15.3% |
| 1970 | 10,440,000 | 15.1 | 3,561,000 | 16.6 |
| 1971 | 10,551,000 | 15.3 | 3,499,000 | 16.9 |
| 1972 | 10,284,000 | 15.1 | 3,276,000 | 16.1 |
| 1973 | 9,642,000 | 14.4 | 3,097,000 | 15.7 |
| 1974 | 10,156,000 | 15.4 | 3,294,000 | 16.9 |
| 1975 | 11,104,000 | 17.1 | 3,460,000 | 18.2 |
| 1976 | 10,273,000 | 16.0 | 3,270,000 | 17.7 |
| 1977 | 10,288,000 | 16.2 | 3,326,000 | 18.1 |
| 1978 | 9,931,000 | 15.9 | 3,184,000 | 17.2 |
| 1979 | 10,377,000 | 16.4 | 3,415,000 | 17.8 |
| 1980 | 11,543,000 | 18.3 | 4,030,000 | 20.5 |
| 1981 | 12,505,000 | 20.0 | 4,422,000 | 22.0 |
| 1982 | 13,647,000 | 21.9 | 4,821,000 | 23.3 |
| 1983 | 13,911,000 | 22.3 | 5,122,000 | 24.6 |
| 1984 | 13,420,000 | 21.5 | 4,938,000 | 23.4 |
| 1985 | 13,010,000 | 20.7 | 4,832,000 | 22.6 |
| 1986 | 12,876,000 | 20.5 | 4,619,000 | 21.6 |
| 1987 | 12,843,000 | 20.3 | 4,852,000 | 22.4 |
| 1988 | 12,455,000 | 19.5 | 5,032,000 | 22.6 |
| 1989 | 12,590,000 | 19.6 | 5,071,000 | 22.5 |
| 1990 | 13,431,000 | 20.6 | 5,198,000 | 23.0 |
| 1991 | 14,341,000 | 21.8 | 5,483,000 | 24.0 |
| 1992 | 14,617,000 | 21.9 | 5,781,000 | 25.0 |
| Total percent change | | | | |
| 1969-1992 | 50.1% | 56.4% | 75.3% | 63.4% |
| 1980-1992 | 26.6 | 19.7 | 43.4 | 22.0 |
| Average annual percent change | | | | |
| 1969-1992 | 2.2 | 2.5 | 3.3 | 2.8 |
| 1980-1992 | 2.2 | 1.6 | 3.6 | 1.8 |

[1]Related children in families.

Source: U.S. Department of Commerce, Bureau of the Census. Calculations by Children's Defense Fund.

## National Trends (continued)

| Year | Infant Mortality Rates[1] Total | White | Black | Black-White Ratio | Low Birthweight Rate | Percent of Babies Born to Mothers Who Received Late or No Prenatal Care Total | White[2] | Black[2] |
|---|---|---|---|---|---|---|---|---|
| 1940 | 47.0 | 43.2 | 72.9 | 1.69 | n.a | n/a | n/a | n/a |
| 1950 | 29.2 | 26.8 | 43.9 | 1.64 | n.a | n/a | n/a | n/a |
| 1959 | 26.4 | 23.2 | 44.8 | 1.93 | n.a | n/a | n/a | n/a |
| 1960 | 26.0 | 22.9 | 44.3 | 1.93 | 7.7% | n/a | n/a | n/a |
| 1961 | 25.3 | 22.4 | 41.8 | 1.87 | 7.8 | n/a | n/a | n/a |
| 1962 | 25.3 | 22.3 | 42.6 | 1.91 | 8.0 | n/a | n/a | n/a |
| 1963 | 25.2 | 22.2 | 42.8 | 1.93 | 8.2 | n/a | n/a | n/a |
| 1964 | 24.8 | 21.6 | 42.3 | 1.96 | 8.2 | n/a | n/a | n/a |
| 1965 | 24.7 | 21.5 | 41.7 | 1.94 | 8.3 | n/a | n/a | n/a |
| 1966 | 23.7 | 20.6 | 40.2 | 1.95 | 8.3 | n/a | n/a | n/a |
| 1967 | 22.4 | 19.7 | 37.5 | 1.90 | 8.2 | n/a | n/a | n/a |
| 1968 | 21.8 | 19.2 | 36.2 | 1.89 | 8.2 | n/a | n/a | n/a |
| 1969 | 20.9 | 18.4 | 34.8 | 1.89 | 8.1 | 8.1% | 6.3% | 18.2% |
| 1970 | 20.0 | 17.8 | 32.6 | 1.83 | 7.9 | 7.9 | 6.2 | 16.6 |
| 1971 | 19.1 | 17.1 | 30.3 | 1.77 | 7.7 | 7.2 | 5.8 | 14.6 |
| 1972 | 18.5 | 16.4 | 29.6 | 1.80 | 7.7 | 7.0 | 5.5 | 13.2 |
| 1973 | 17.7 | 15.8 | 28.1 | 1.78 | 7.6 | 6.7 | 5.4 | 12.4 |
| 1974 | 16.7 | 14.8 | 26.8 | 1.81 | 7.4 | 6.2 | 5.0 | 11.4 |
| 1975 | 16.1 | 14.2 | 26.2 | 1.85 | 7.4 | 6.0 | 5.0 | 10.5 |
| 1976 | 15.2 | 13.3 | 25.5 | 1.92 | 7.3 | 5.7 | 4.8 | 9.9 |
| 1977 | 14.1 | 12.3 | 23.6 | 1.92 | 7.1 | 5.6 | 4.7 | 9.6 |
| 1978 | 13.8 | 12.0 | 23.1 | 1.93 | 7.1 | 5.4 | 4.5 | 9.3 |
| 1979 | 13.1 | 11.4 | 21.8 | 1.91 | 6.9 | 5.1 | 4.3 | 8.9 |
| 1980 | 12.6 | 11.0 | 21.4 | 1.95 | 6.8 | 5.1 | 4.3 | 8.8 |
| 1981 | 11.9 | 10.5 | 20.0 | 1.90 | 6.8 | 5.2 | 4.3 | 9.1 |
| 1982 | 11.5 | 10.1 | 19.6 | 1.94 | 6.8 | 5.5 | 4.5 | 9.6 |
| 1983 | 11.2 | 9.7 | 19.2 | 1.98 | 6.8 | 5.6 | 4.6 | 9.7 |
| 1984 | 10.8 | 9.4 | 18.4 | 1.96 | 6.7 | 5.6 | 4.7 | 9.6 |
| 1985 | 10.6 | 9.3 | 18.2 | 1.96 | 6.8 | 5.7 | 4.7 | 10.0 |
| 1986 | 10.4 | 8.9 | 18.0 | 2.02 | 6.8 | 6.0 | 5.0 | 10.6 |
| 1987 | 10.1 | 8.6 | 17.9 | 2.08 | 6.9 | 6.1 | 5.0 | 11.1 |
| 1988 | 10.0 | 8.5 | 17.6 | 2.07 | 6.9 | 6.1 | 5.0 | 10.9 |
| 1989 | 9.8 | 8.2 | 17.7 | 2.16 | 7.0 | 6.4 | 5.2 | 11.7 |
| 1990 | 9.2 | 7.7 | 17.0 | 2.21 | 7.0 | 6.1 | 4.9 | 11.1 |
| 1991 | 8.9 | 7.5 | 16.5 | 2.20 | 7.1 | 5.8 | 4.7 | 10.7 |
| Total percent change | | | | | | | | |
| 1969-1991 | -57.4% | -59.2% | -52.6% | — | -12.3% | -28.4% | -25.4% | -41.2% |
| 1980-1991 | -29.4 | -31.8 | -22.9 | — | 4.4 | 13.7 | 9.3 | 21.6 |
| Average annual percent change | | | | | | | | |
| 1969-1991 | -2.6 | -2.7 | -2.4 | — | -0.6 | -1.3 | -1.2 | -1.9 |
| 1980-1991 | -2.7 | -2.9 | -2.1 | — | 0.4 | 1.2 | 0.8 | 2.0 |

[1]Infant deaths per 1,000 live births.
[2]Race of child through 1990; race of mother thereafter.

Source: U.S. Department of Health and Human Services, National Center for Health Statistics. Calculations by Children's Defense Fund.

## National Trends (continued)

| Year | Total Birth Rate[1] | Total Unmarried Birth Rate[2] | Teen Birth Rate[3] | Teen Unmarried Birth Rate[4] |
|---|---|---|---|---|
| 1959 | 118.8 | 21.9 | 89.1 | 15.5 |
| 1960 | 118.0 | 21.6 | 89.1 | 15.3 |
| 1961 | 117.1 | 22.7 | 88.6 | 16.0 |
| 1962 | 112.0 | 21.9 | 81.4 | 14.8 |
| 1963 | 108.3 | 22.5 | 76.7 | 15.3 |
| 1964 | 104.7 | 23.0 | 73.1 | 15.9 |
| 1965 | 96.3 | 23.5 | 70.5 | 16.7 |
| 1966 | 90.8 | 23.4 | 70.3 | 17.5 |
| 1967 | 87.2 | 23.9 | 67.5 | 18.5 |
| 1968 | 85.2 | 24.4 | 65.6 | 19.7 |
| 1969 | 86.1 | 25.0 | 65.5 | 20.4 |
| 1970 | 87.9 | 26.4 | 68.3 | 22.4 |
| 1971 | 81.6 | 25.5 | 64.5 | 22.3 |
| 1972 | 73.1 | 24.8 | 61.7 | 22.8 |
| 1973 | 68.8 | 24.3 | 59.3 | 22.7 |
| 1974 | 67.8 | 23.9 | 57.5 | 23.0 |
| 1975 | 66.0 | 24.5 | 55.6 | 23.9 |
| 1976 | 65.0 | 24.3 | 52.8 | 23.7 |
| 1977 | 66.8 | 25.6 | 52.8 | 25.1 |
| 1978 | 65.5 | 25.7 | 51.5 | 24.9 |
| 1979 | 67.2 | 27.2 | 52.3 | 26.4 |
| 1980 | 68.4 | 29.4 | 53.0 | 27.6 |
| 1981 | 67.4 | 29.5 | 52.2 | 27.9 |
| 1982 | 67.3 | 30.0 | 52.4 | 28.7 |
| 1983 | 65.8 | 30.3 | 51.4 | 29.5 |
| 1984 | 65.4 | 31.0 | 50.6 | 30.0 |
| 1985 | 66.2 | 32.8 | 51.0 | 31.4 |
| 1986 | 65.4 | 34.2 | 50.2 | 32.3 |
| 1987 | 65.7 | 36.0 | 50.6 | 33.8 |
| 1988 | 67.2 | 38.5 | 53.0 | 36.4 |
| 1989 | 69.2 | 41.6 | 57.3 | 40.1 |
| 1990 | 70.9 | 43.8 | 59.9 | 42.5 |
| 1991 | 69.6 | 45.2 | 62.1 | 44.8 |
| Total percent change | | | | |
| 1969-1991 | -19.2% | 80.8% | -5.2% | 119.6% |
| 1980-1991 | 1.8 | 53.7 | 17.2 | 62.3 |
| Average annual percent change | | | | |
| 1969-1991 | -0.9 | 3.7 | -0.2 | 5.4 |
| 1980-1991 | 0.2 | 4.9 | 1.6 | 5.7 |

[1] Per 1,000 women ages 15-44; this rate also is called the fertility rate.
[2] Per 1,000 unmarried women ages 15-44.
[3] Per 1,000 women ages 15-19.
[4] Per 1,000 unmarried women ages 15-19.

## Maternal Labor Force Participation of Married Women With Children Younger Than Six

| Year | In the Labor Force | |
|---|---|---|
| | Number | Percent |
| 1948 | 1,226,000 | 10.8% |
| 1949 | 1,285,000 | 11.0 |
| 1950 | 1,399,000 | 11.9 |
| 1951 | 1,670,000 | 14.0 |
| 1952 | 1,688,000 | 13.9 |
| 1953 | 1,884,000 | 15.5 |
| 1954 | 1,808,000 | 14.9 |
| 1955 | 2,012,000 | 16.2 |
| 1956 | 2,048,000 | 15.9 |
| 1957 | 2,208,000 | 17.0 |
| 1958 | 2,399,000 | 18.2 |
| 1959 | 2,471,000 | 18.7 |
| 1960 | 2,474,000 | 18.6 |
| 1961 | 2,661,000 | 20.0 |
| 1962 | 2,884,000 | 21.3 |
| 1963 | 3,006,000 | 22.5 |
| 1964 | 3,050,000 | 22.7 |
| 1965 | 3,117,000 | 23.2 |
| 1966 | 3,186,000 | 24.2 |
| 1967 | 3,481,000 | 26.5 |
| 1968 | 3,564,000 | 27.6 |
| 1969 | 3,596,000 | 28.5 |
| 1970 | 3,914,000 | 30.3 |
| 1971 | 3,690,000 | 29.6 |
| 1972 | 3,778,000 | 30.1 |
| 1973 | 4,104,000 | 32.7 |
| 1974 | 4,274,000 | 34.4 |
| 1975 | 4,518,000 | 36.7 |
| 1976 | 4,520,000 | 37.5 |
| 1977 | 4,547,000 | 39.4 |
| 1978 | 4,768,000 | 41.7 |
| 1979 | 4,939,000 | 43.3 |
| 1980 | 5,227,000 | 45.1 |
| 1981 | 5,603,000 | 47.8 |
| 1982 | 5,690,000 | 48.7 |
| 1983 | 5,859,000 | 49.9 |
| 1984 | 6,219,000 | 51.8 |
| 1985 | 6,406,000 | 53.4 |
| 1986 | 6,573,000 | 53.8 |
| 1987 | 6,952,000 | 56.8 |
| 1988 | 6,956,000 | 57.1 |
| 1989 | n/a | n/a |
| 1990 | 7,247,000 | 58.9 |
| 1991 | 7,434,000 | 59.9 |
| 1992 | 7,333,000 | 59.9 |
| 1993 | 7,289,000 | 59.6 |
| Average annual change | | |
| 1950-60 | 107,500 | |
| 1960-70 | 144,000 | |
| 1970-80 | 131,300 | |
| 1980-93 | 158,600 | |

Source: U.S. Department of Labor, Bureau of Labor Statistics. Calculations by Children's Defense Fund.

## Youth Unemployment Rates, National Trends

| Year | Total Unemployment Rates: All Ages | Total Unemployment Rates: Age 16-19 | Total Unemployment Rates: Age 20-24 | Unemployment Rates, Youth Not Enrolled in School, Level of Education: Less than Four Years of High School | High School Graduate Only | Four Years or More of College |
|---|---|---|---|---|---|---|
| 1959 | 5.5% | 14.6% | 8.5% | n/a | n/a | n/a |
| 1960 | 5.5 | 14.7 | 8.7 | n/a | n/a | n/a |
| 1961 | 6.7 | 16.8 | 10.4 | n/a | n/a | n/a |
| 1962 | 5.5 | 14.7 | 9.0 | n/a | n/a | n/a |
| 1963 | 5.7 | 17.2 | 8.8 | n/a | n/a | n/a |
| 1964 | 5.2 | 16.2 | 8.3 | n/a | n/a | n/a |
| 1965 | 4.5 | 14.8 | 6.7 | n/a | n/a | n/a |
| 1966 | 3.8 | 12.8 | 5.3 | n/a | n/a | n/a |
| 1967 | 3.8 | 12.9 | 5.7 | n/a | n/a | n/a |
| 1968 | 3.6 | 12.7 | 5.8 | n/a | n/a | n/a |
| 1969 | 3.5 | 12.2 | 5.7 | n/a | n/a | n/a |
| 1970 | 4.9 | 15.3 | 8.2 | 17.2% | 9.9% | 6.5% |
| 1971 | 5.9 | 16.9 | 10.0 | 18.0 | 9.6 | 6.6 |
| 1972 | 5.6 | 16.2 | 9.3 | 16.8 | 9.5 | 7.2 |
| 1973 | 4.9 | 14.5 | 7.8 | 14.9 | 7.2 | 4.9 |
| 1974 | 5.6 | 16.0 | 9.1 | 19.2 | 9.8 | 5.0 |
| 1975 | 8.5 | 19.9 | 13.6 | 25.3 | 13.6 | 8.2 |
| 1976 | 7.7 | 19.0 | 12.0 | 24.7 | 12.1 | 7.1 |
| 1977 | 7.1 | 17.8 | 11.0 | 20.6 | 10.5 | 8.0 |
| 1978 | 6.1 | 16.4 | 9.6 | 18.8 | 8.8 | 6.3 |
| 1979 | 5.8 | 16.1 | 9.1 | 19.2 | 9.9 | 5.0 |
| 1980 | 7.1 | 17.8 | 11.5 | 25.3 | 12.5 | 5.9 |
| 1981 | 7.6 | 19.6 | 12.3 | 26.9 | 13.8 | 5.3 |
| 1982 | 9.7 | 23.2 | 14.9 | 31.8 | 17.3 | 9.2 |
| 1983 | 9.6 | 22.4 | 14.5 | 27.3 | 15.2 | 7.0 |
| 1984 | 7.5 | 18.9 | 11.5 | 25.8 | 11.8 | 5.9 |
| 1985 | 7.2 | 18.6 | 11.1 | 25.9 | 12.7 | 5.4 |
| 1986 | 7.0 | 18.3 | 10.7 | 24.3 | 11.5 | 4.8 |
| 1987 | 6.2 | 16.9 | 9.7 | 21.8 | 10.7 | 5.5 |
| 1988 | 5.5 | 15.3 | 8.7 | 20.0 | 10.1 | 4.8 |
| 1989 | 5.3 | 15.0 | 8.6 | 19.9 | 10.1 | 5.0 |
| 1990 | 5.5 | 15.5 | 8.8 | 20.0 | 10.4 | 5.2 |
| 1991 | 6.7 | 18.6 | 10.8 | 23.1 | 12.7 | 6.9 |
| 1992 | 7.4 | 20.0 | 11.3 | 24.9 | 13.9 | 6.5 |
| Total percent change | | | | | | |
| 1970-1992 | 51.0% | 30.7% | 37.8% | 44.8% | 40.4% | 0.0% |
| 1980-1992 | 4.2 | 12.4 | -1.7 | -1.6 | 11.2 | 10.2 |
| Average annual percent change | | | | | | |
| 1970-1992 | 2.3 | 1.4 | 1.7 | 2.0 | 1.8 | 0.0 |
| 1980-1992 | 0.4 | 1.0 | -0.1 | -0.1 | 0.9 | 0.9 |

Source: U.S. Department of Labor, Bureau of Labor Statistics. Calculations by Children's Defense Fund.

# FACSIMILE TRANSMISSION COVER SHEET

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**Cover +** 2 **pages**

**Message:**

# HHS FACT SHEET

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

December 7, 1995

Contact: Michael Kharfen
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***BACKGROUND:***
***Preliminary Findings Regarding Child Abuse and Neglect***

- HHS Secretary Donna E. Shalala cited new preliminary data today which add to the evidence of substantial increase in child abuse and neglect in the United States. Secretary Shalala's prepared remarks were presented in Chicago at a conference of the National Association of Family Based Services.

- The preliminary data are from the National Incidence Study of Child Abuse and Neglect, performed by Westat, a Maryland social science research corporation, for HHS' National Center on Child Abuse and Neglect. This is the third National Incidence Study -- the first was released in 1981, the second in 1988. The new study is to be released in final form early next year. The National Incidence Studies have been mandated by Congress.

- This study is designed to estimate the actual extent of child abuse and neglect in the United States, including cases not reported to child protective services. Instead of relying only on official reports of abuse and neglect, the estimates in the study are based on information from 5,700 community professionals who were likely to come into contact with maltreated children in a variety of community settings.

- The preliminary data indicate that the incidence of child abuse and neglect more than doubled over the seven year period, 1986-1993:

  -- The number of abused and neglected children rose sharply from 1.4 million in 1986 to 2.9 million in 1993, an increase of 105 percent, according to the study.

  -- The study also found that the number of children who were seriously injured nearly quadrupled over the same time period from about 143,000 to more than 572,000.

- These estimates of the actual incidence of abuse and neglect are higher than the number of cases reported, investigated and confirmed. From official data of reported cases investigated by Child Protective Services, we have known that over 1 million children were victims of abuse and neglect in 1993 and that the number of substantiated cases had grown by over 38 percent since 1986. The new estimates cited by Secretary Shalala suggest that many more children are being abused and neglected, and that the problem has been growing more rapidly than official reports indicate.

- In her remarks, Secretary Shalala said that the increased number of children in danger will place more stress on an already overburdened and under-supported child protection system:

> "All over this country, children are being hurt more often and more seriously -- and all of us must join hands to stop it, once and for all. We must maintain our national commitment to protect children's safety."
>
> "The Republican leadership in Congress claims that they are reforming welfare. But nothing could be further from the truth. They're slashing giant holes in funding for child care, school lunches, and aid to disabled children -- and that's not welfare reform."
>
> "So, when Congress tries to slash $4.6 billion dollars -- more than 20 percent -- from foster care, adoption assistance, and child abuse prevention programs -- placing hundreds of thousands of children at additional risk -- we must say No."

- In vetoing the Congressional reconciliation legislation Wednesday (Dec. 6), President Clinton also addressed the question of welfare reform:

> "Americans know we have to reform the broken welfare system, but cutting child care that helps mothers move from welfare to work, cutting help for abused and disabled children, cutting school lunch, that's not welfare reform. Real welfare reform should be tough on work and tough on responsibility, but not tough on children or tough on parents who are responsible and who want to work. We shouldn't lose this historic chance to end welfare as we know it by using the words 'welfare reform' as just another cover to violate our values."

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# Child Abuse Reporting

Douglas J. Besharov with Lisa A. Laumann

For 30 years, advocates, program administrators, and politicians have joined to encourage even more reports of suspected child abuse and neglect. Their efforts have been spectacularly successful, with about three million cases of suspected child abuse having been reported in 1993. Large numbers of endangered children still go unreported, but an equally serious problem has developed: Upon investigation, as many as 65 percent of the reports now being made are determined to be "unsubstantiated," raising serious civil liberties concerns and placing a heavy burden on already overwhelmed investigative staffs.

These two problems—nonreporting and inappropriate reporting—are linked and must be addressed together before further progress can be made in combating child abuse and neglect. To lessen both problems, there must be a shift in priorities—away from simply seeking more reports and toward encouraging better reports.

## Reporting Laws

Since the early 1960s, all states have passed laws that require designated professionals to report specified types of child maltreatment. Over the years, both the range of designated professionals and the scope of reportable conditions have been steadily expanded.

Initially, mandatory reporting laws applied only to physicians, who were required to report only "serious physical injuries" and "nonaccidental injuries." In the ensuing years, however, increased public and professional attention, sparked in part by the number of abused children revealed by these initial reporting laws, led many states to expand their reporting requirements. Now almost all states have laws that require the reporting of all forms of suspected child maltreatment, including physical abuse, physical neglect, emotional maltreatment, and, of course, sexual abuse and exploitation.

Under threat of civil and criminal penalties, these laws require most professionals who serve children to report suspected child abuse and neglect. About twenty states require all citizens to report, but in every state, any citizen is permitted to report.

These reporting laws, associated public awareness campaigns, and professional education programs have been strikingly successful. In 1993, there were about three million reports of children suspected of being abused or neglected. This is a twenty-fold increase since 1963, when about 150,000 cases were reported to the authorities. (As we will see, however, this figure is bloated by reports that later turn out to be unfounded.)

Many people ask whether this vast increase in reporting signals a rise in the incidence of child maltreatment. Recent increases in social problems such as out-of-wedlock births, inner-city poverty, and drug abuse have probably raised the underlying rates of child maltreatment, at least somewhat. Unfortunately, so many maltreated children previously went unreported that earlier reporting statistics do not provide a reliable baseline against which to make comparisons. One thing is clear, however: The great bulk of reports now received by child protective agencies would not be made

but for the passage of mandatory reporting laws and the media campaigns that accompanied them.

This increase in reporting was accompanied by a substantial expansion of prevention and treatment programs. Every community, for example, is now served by specialized child protective agencies that receive and investigate reports. Federal and state expenditures for child protective programs and associated foster care services now exceed $6 billion a year. (Federal expenditures for foster care, child welfare, and related services make up less than 50 percent of total state and federal expenditures for these services; in 1992, they amounted to a total of $2,773.7 million. In addition, states may use a portion of the $2.8 billion federal Social Services Block Grant for such services, though detailed data on these expenditures are not available. Beginning in 1994, additional federal appropriations funded family preservation and support services.)

As a result, many thousands of children have been saved from serious injury and even death. The best estimate is that over the past twenty years, child abuse and neglect deaths have fallen from over 3,000 a year—and perhaps as many as 5,000—to about 1,100 a year. In New York State, for example, within five years of the passage of a comprehensive reporting law, which also created specialized investigative staffs, there was a 50 percent reduction in child fatalities, from about two hundred a year to less than one hundred. (This is not meant to minimize the remaining problem. Even at this level, maltreatment is the sixth largest cause of death for children under fourteen.)

### Unreported Cases

Most experts agree that reports have increased over the past thirty years because professionals and laypersons have become more likely to report apparently abusive and neglectful situations. But the question remains: How many more cases still go unreported?

Two studies performed for the National Center on Child Abuse and Neglect by Westat, Inc., provide a partial answer. In 1980 and then again in 1986, Westat conducted national studies of the incidence of child abuse and neglect. (A third Westat incidence study is now underway.) Each study used essentially the same methodology: In a stratified sample of counties, a broadly representative sample of professionals who serve children was asked whether, during the study period, the children they had seen in their professional capacities appeared to have been abused or neglected. (Actually, the professionals were not asked the ultimate question of whether the children appeared to be "abused" or "neglected." Instead, they were asked to identify children with certain, specified harms or conditions, which were then decoded into a count of various types of child abuse and neglect.)

Because the information these selected professionals provided could be matched against pending cases in the local child protective agency, Westat was able to estimate rates of nonreporting among the surveyed professionals. It could not, of course, estimate the level of unintentional nonreporting, since there is no way to know of the situations in which professionals did not recognize signs of possible maltreatment. There is also no way to know how many children the professionals recognized as being maltreated but chose not to report to the study. Obviously, since the study methodology involved asking professionals about children they had seen in their professional capacities, it also did not allow Westat to estimate the number of children seen by nonprofessionals, let alone their nonreporting rate.

Westat found that professionals failed to report many of the children they saw who had observable signs of child abuse and neglect. Specifically, it found that in 1986, 56 percent of apparently abused or neglected children, or about 500,000 children, were not reported to the authorities. This figure, however, seems more alarming than it is: Basically, the more serious the case, the more likely the report. For example, the surveyed professionals reported over 85 percent of the fatal or serious physical abuse cases they saw, 72 percent of the sexual abuse cases, and 60 percent of the moderate physical abuse cases. In contrast, they only reported 15 percent of the educational neglect cases they saw, 24 percent of the emotional neglect cases, and 25 percent of the moderate physical neglect cases.

Nevertheless, there is no reason for complacency. Translating these raw percentages into actual cases means that in 1986, about 2,000 children with observable physical injuries severe enough to require hospitalization were not reported and that more than 100,000 children with moderate physical injuries went unreported, as did more than 30,000 apparently sexually abused children. And these are the rates of nonreporting among relatively well-trained professionals. One assumes that nonreporting is higher among less-well-trained professionals and higher still among laypersons.

Obtaining and maintaining a high level of reporting requires a continuation of the public education and professional training begun thirty years ago. But, now, such efforts must also address a problem as serious as nonreporting: inappropriate reporting.

At the same time that many seriously abused children go unreported, an equally serious problem further undercuts efforts to prevent child maltreatment: The nation's child protective agencies are being inundated by inappropriate reports. Although rules, procedures, and even terminology vary—some states use the phrase "unfounded," others "unsubstantiated" or "not indicated"—an "unfounded" report, in essence, is one that is dismissed after an investigation finds insufficient evidence upon which to proceed.

**Unsubstantiated Reports**

Nationwide, between 60 and 65 percent of all reports are closed after an initial investigation determines that they are "unfounded" or "unsubstantiated." This is in sharp contrast to 1974, when only about 45 percent of all reports were unfounded.

A few advocates, in a misguided effort to shield child protective programs from criticism, have sought to quarrel with estimates that I and others have made that the national unfounded rate is between 60 and 65 percent. They have grasped at various inconsistencies in the data collected by different organizations to claim either that the problem is not so bad or that it has always been this bad.

To help settle this dispute, the American Public Welfare Association (APWA) conducted a special survey of child welfare agencies in 1989. The APWA researchers found that between fiscal year 1986 and fiscal year 1988, the weighted average for the substantiation rates in thirty-one states declined 6.7 percent—from 41.8 percent in fiscal year 1986 to 39 percent in fiscal year 1988.

Most recently, the existence of this high unfounded rate was reconfirmed by the annual Fifty State Survey of the National Committee to Prevent Child Abuse (NCPCA), which found that in 1993 only about 34 percent of the reports received by child protective agencies were substantiated.

The experience of New York City indicates what these statistics mean in practice. Between 1989 and 1993, as the number of reports received by the city's child welfare agency increased by over 30 percent (from 40,217 to 52,472), the percentage of substantiated reports fell by about 47 percent (from 45 percent to 24 percent). In fact, the number of substantiated cases—a number of families were reported more than once—actually fell by about 41 percent, from 14,026 to 8,326. Thus, 12,255 additional families were investigated, while 5,700 fewer families received child protective help.

The determination that a report is unfounded can only be made after an unavoidably traumatic investigation that is inherently a breach of parental and family privacy. To determine whether a particular child is in danger, caseworkers must inquire into the most intimate personal and family matters. Often it is necessary to question friends, relatives, and neighbors, as well as school teachers, day-care personnel, doctors, clergy, and others who know the family.

Laws against child abuse are an implicit recognition that family privacy must give way to the need to protect helpless children. But in seeking to protect children, it is all too easy to ignore the legitimate rights of parents. Each year, about 700,000 families are put through investigations of unfounded reports. This is a massive and unjustified violation of parental rights.

Few unfounded reports are made maliciously. Studies of sexual abuse reports, for example, suggest that, at most, from 4 to 10 percent of these reports are knowingly false. Many involve situations in which the person reporting, in a well-intentioned effort to protect a child, overreacts to a vague and often misleading possibility that the child may be maltreated. Others involve situations of poor child care that, though of legitimate concern, simply do not amount to child abuse or neglect. In fact, a substantial proportion of unfounded cases are referred to other agencies for them to provide needed services for the family.

Moreover, an unfounded report does not necessarily mean that the child was not actually abused or neglected. Evidence of child maltreatment is hard to obtain and might not be uncovered when agencies lack the time and resources to complete a thorough investigation or when inaccurate information is given to the investigator. Other cases are labeled unfounded when no services are available to help the family. Some cases must be closed because the child or family cannot be located.

A certain proportion of unfounded reports, therefore, is an inherent—and legitimate—aspect of reporting *suspected* child maltreatment and is necessary to ensure adequate child protection. Hundreds of thousands of strangers report their suspicions; they cannot all be right. But unfounded rates of the current magnitude go beyond anything reasonably needed. Worse, they endanger children who are really abused.

The current flood of unfounded reports is overwhelming the limited resources of child protective agencies. For fear of missing even one abused child, workers perform extensive investigations of vague and apparently unsupported reports. Even when a home visit based on an anonymous report turns up no evidence of maltreatment, they usually interview neighbors, school teachers, and day-care personnel to make sure that the

child is not abused. And even repeated anonymous and unfounded reports do not prevent a further investigation. But all this takes time.

As a result, children in real danger are getting lost in the press of inappropriate cases. Forced to allocate a substantial portion of their limited resources to unfounded reports, child protective agencies are less able to respond promptly and effectively when children are in serious danger. Some reports are left uninvestigated for a week and even two weeks after they are received. Investigations often miss key facts, as workers rush to clear cases, and dangerous home situations receive inadequate supervision, as workers must ignore pending cases as they investigate the new reports that arrive daily on their desks. Decision making also suffers. With so many cases of unsubstantiated or unproven risk to children, caseworkers are desensitized to the obvious warning signals of immediate and serious danger.

These nationwide conditions help explain why from 25 to 50 percent of child abuse deaths involve children previously known to the authorities. In 1993, the NCPCA reported that of the 1,149 child maltreatment deaths, 42 percent had already been reported to the authorities. Tens of thousands of other children suffer serious injuries short of death while under child protective agency supervision.

In a 1992 New York City case, for example, five-month-old Jeffrey Harden died from burns caused by scalding water and three broken ribs while under the supervision of New York City's Child Welfare Administration. Jeffrey Harden's family had been known to the administration for more than a year and a half. Over this period, the case had been handled by four separate caseworkers, each conducting only partial investigations before resigning or being reassigned to new cases. It is unclear whether Jeffrey's death was caused by his mother or her boyfriend, but because of insufficient time and overburdened caseloads, all four workers failed to pay attention to a whole host of obvious warning signals: Jeffrey's mother had broken her parole for an earlier conviction of child sexual abuse, she had a past record of beating Jeffrey's older sister, and she had a history of crack addiction and past involvement with violent boyfriends.

Here is how two of the Hardens' caseworkers explained what happened: Their first caseworker could not find Ms. Harden at the address she had listed in her files. She commented, "It was an easy case. We couldn't find the mother so we closed it." Their second caseworker stated that he was unable to spend a sufficient amount of time investigating the case, let alone make the minimum monthly visits because he was tied down with an overabundance of cases and paperwork. He stated, "It's impossible to visit these people within a month. They're all over New York City." Just before Jeffrey's death every worker who had been on the case had left the department. Ironically, by weakening the system's ability to respond, unfounded reports actually discourage appropriate ones. The sad fact is that many responsible individuals are not reporting endangered children because they feel that the system's response will be so weak that reporting will do no good or may even make things worse. In 1984, a study of the impediments to reporting conducted by Jose Alfaro, coordinator of the New York City Mayor's Task Force on Child Abuse and Neglect, concluded that "professionals who emphasize their professional judgment, have experienced problems in dealing with the child protective agency, and are more likely to doubt the efficacy of protective service intervention, are more likely not to report in some situations, especially when they believe they can do a better job helping the family."

**Shifting Priorities**

The emotionally charged desire to "do something" about child abuse, fanned by repeated and often sensational media coverage, has led to an understandable but counterproductive overreaction on the part of the professionals and citizens who report suspected child abuse. For thirty years, advocates, program administrators, and politicians have all pushed for more reporting of suspected child abuse and neglect.

Potential reporters are frequently told to "take no chances" and to report any child for whom they have the slightest concern. There is a recent tendency to tell people to report children whose behavior suggests that they may have been abused—even in the absence of any other evidence of maltreatment. These "behavioral indicators" include, for example, children who are unusually withdrawn or shy as well as children who are unusually friendly to strangers. However, only a small minority of children who exhibit such behaviors have actually been maltreated.

Thirty years ago, even fifteen years ago, when many professionals were construing their reporting obligations narrowly to avoid taking action to protect endangered children, this approach may have been needed. Now, though, all it does is ensure that child abuse hotlines will be flooded with inappropriate and unfounded reports.

Few people fail to report because they do not care about an endangered child. Instead, they may be unaware of the danger the child faces or of the protective procedures that are available. A study of nonreporting among teachers, for example, blamed their "lack of

knowledge for detecting symptoms of child abuse and neglect." Likewise, few inappropriate or unfounded reports are deliberately false statements. Most involve an honest desire to protect children coupled with confusion about what conditions are reportable.

Confusion about reporting is largely caused by the vagueness of reporting laws and aggravated by the failure of child protective agencies to provide realistic guidance about deciding to report. In 1987, a national group of thirty-eight child protection professionals from nineteen states met for three days at Airlie House, Virginia, under the auspices of the American Bar Association's National Legal Resource Center for Child Advocacy and Protection in association with the American Public Welfare Association and the American Enterprise Institute. The "Airlie House group," as it has come to be called, developed policy guidelines for reporting and investigative decision making. (I was the rapporteur for the effort.) One of the group's major conclusions was that "better public and professional materials are needed to obtain more appropriate reporting." The group specifically recommended that "educational materials and programs should: (1) clarify the legal definitions of child abuse and neglect, (2) give general descriptions of reportable situations (including specific examples), and (3) explain what to expect when a report is made. Brochures and other materials for laypersons, including public service announcements, should give specific information about what to report—and what not to report."

Based on these recommendations, a relatively clear agenda for reform emerges; we must

1. clarify child abuse reporting laws,
2. provide continuing public education and professional training,
3. screen reports,
4. modify liability laws,
5. give feedback to persons who report, and
6. adopt an agency policy.

*Clarify child abuse reporting laws.* Existing laws are often vague and overbroad. They should be rewritten to provide real guidance about what conditions should and should not be reported. This can be accomplished without radically departing from present laws or practices. The key is to describe reportable conditions in terms of specific parental behaviors or conditions that are tied to severe and demonstrable harms (or potential harms) to children.

It would help, for example, to make a distinction between *direct evidence*, meaning firsthand accounts or observations of seriously harmful parental behavior, and *circumstantial evidence*, meaning concrete facts, such as the child's physical condition, that suggest that the child has been abused or neglected. Behavioral indicators, however, should not by themselves be considered a sufficient basis for a report.

Direct evidence includes eyewitness observations of a parent's abusive or neglectful behavior; the child's description of being abused or neglected, unless there is a specific reason for disbelief; the parent's own description of abusive or neglectful behavior, unless it is long past; accounts of child maltreatment from spouses or other family members; films, photographs, or other visual material depicting sexually explicit activity by a minor; newborns denied nutrition, life-sustaining care, or other medically indicated treatment; children in physically dangerous situations; young children left alone; apparently abandoned children; demonstrated parental disabilities (for example, mental illness or retardation or alcohol or drug abuse) severe enough to make child abuse or child neglect likely; and demonstrated parental inability to care for a newborn baby.

Circumstantial evidence includes "suspicious" injuries suggesting physical abuse; physical injuries or medical findings suggesting sexual abuse; for young children, signs of sexual activity; signs of severe physical deprivation on the child's body suggesting general child neglect; severe dirt and disorder in the home suggesting general child neglect; apparently untreated physical injuries, illnesses, or impairments suggesting medical neglect; "accidental" injuries suggesting gross inattention to the child's need for safety; apparent parental indifference to a child's severe psychological or developmental problems; apparent parental condonation of or indifference to a child's misbehavior suggesting improper ethical guidance; chronic and unexplained absences from school suggesting parental responsibility for the nonattendance; and newborns showing signs of fetal exposure to drugs or alcohol.

*Provide continuing public education and professional training.* Few people fail to report because they want children to suffer abuse and neglect. Likewise, few people make deliberately false reports. Most involve an honest desire to protect children coupled with confusion about what conditions are reportable. Thus, educational efforts should emphasize the conditions that do not justify a report, as well as those that do.

*Screen reports.* No matter how well professionals are trained and no matter how extensive public education efforts are, there will always be a tendency for persons to report cases that should not be investigated. Until recently, most states did not have formal policies and procedures for determining whether to accept a call for investigation. Such policies should be adopted

by all states and they should provide explicit guidance about the kinds of cases that should not be assigned for investigation.

Reports should be rejected when the allegations fall outside the agency's definitions of "child abuse" and "child neglect" as established by state law. Often, the family has a coping problem for which they would be more appropriately referred to another social service agency. (Prime examples include children beyond the specified age, alleged perpetrators falling outside the legal definition, and family problems not amounting to child maltreatment.) Reports should also be rejected when the caller can give no credible reason for suspecting that the child has been abused or neglected. (Although actual proof of the maltreatment is not required, some evidence is.) Reports whose unfounded or malicious nature is established by specific evidence, of course, should also be rejected. (Anonymous reports, reports from estranged spouses, and even previous unfounded reports from the same source should not be automatically rejected, but they need to be carefully evaluated.) And, finally, reports in which insufficient information is given to identify or locate the child should likewise be screened (although the information may be kept for later use if a subsequent report about the same child is made).

In questionable circumstances, the agency should recontact the caller before deciding to reject a report. When appropriate, rejected reports should be referred to other agencies that can provide services needed by the family.

*Modify liability laws.* Current laws provide immunity for anyone who makes a report in good faith but give no protection to those who, in a good-faith exercise of professional judgment, decide that a child has not been abused or neglected and hence should not be reported. This combination of immunities and penalties encourages the overreporting of questionable situations.

*Give feedback to persons who report.* If persons who report are not told what happened, they may conclude that the agency's response was ineffective or even harmful to the child, and the next time they suspect that a child is maltreated, they may decide not to report. In addition, finding out whether their suspicions were valid also refines their diagnostic skills and thus improves the quality and accuracy of their future reports. Reporters also need such information to interpret subsequent events and to monitor the child's condition.

*Adopt an agency policy.* Appropriate reporting of suspected child maltreatment requires a sophisticated knowledge of many legal, administrative, and diagnostic matters. To help ensure that their staffs respond properly, an increasing number of public and private agencies are adopting formal agency policies about reporting. Some state laws mandate them. The primary purpose of these policies, or agency protocols, is to inform staff members of their obligation to report and of the procedures to be followed. Such formal policies serve another important function: They are an implicit commitment by agency administrators to support frontline staff members who decide to report. Moreover, the very process of drafting a written document can clarify previously ambiguous or ill-conceived agency policies.

### Prospects for Change

The problem of inappropriate reporting was entirely foreseeable. In fact, as early as 1977, sociologist Saad Naji predicted that unfounded reports would increase as total reporting rose. In describing the effect of contemporary increases in the number of reports on confirmation rates, he wrote: "As the rates of reporting increased, the rates of confirmed maltreatment increased rapidly up to a certain point, after which the rate of increase tended to lessen considerably.... The relations between the rates of reporting and the estimated probability that maltreatment cases will be confirmed, however, exhibited the reverse pattern: the probability of confirming reports of suspected cases dropped sharply as the rates of reporting increased." As mentioned above, some level of inappropriate reporting is the inescapable result of a system that relies on reports from hundreds of thousands of friends, neighbors, and family members—as well as often poorly trained professionals.

What was thoroughly unpredictable was the great resistance to doing something about the problem. As described below, some efforts to reform the system have been made, but many advocates still deny that there is a problem (or at least try to minimize its importance).

Why has it proven so difficult to mount a concerted effort to reduce the number of inappropriate or unfounded reports? First and foremost has been the well-intentioned fear that any attempt to limit inappropriate reporting would inevitably reduce the number of real cases reported. The more careful people are about reporting and the more aggressive agencies are about screening, the more likely it is that a child in serious danger will escape notice. A formal legal opinion from Iowa's attorney general explained the rationale for this broader approach to reporting: "We will never know if a report of child abuse is valid or not until the appropriate investigation is made."

But this practical wisdom has been taken to unreasonable extremes. Too many advocates have ignored

the severe burden that so many inappropriate cases place on the system's resources. They seem unwilling to make—or even to recognize—the trade-off between gaining large numbers of additional reports and the system's ability to respond.

Second, there has been a certain expediency to well-publicized increases in reports. Ever rising numbers of reports have helped mobilize public and professional support for expanded funding. News stories about brutal cases of child abuse make our hearts go out to its innocent victims. We all want to do something to alleviate their pain and to prevent other children from suffering a similar fate. Thus, advocates and program administrators have had an incentive to remain quiet about the number of cases closed after an initial investigation.

Third, although many inappropriate reports do not amount to "child abuse" or "child neglect," they nevertheless involve families who need social service assistance. Thus, accepting and investigating unfounded reports is seen as a means of providing needed services to families in trouble. In effect, the child protective system is being used to fill gaps in what should be community-wide child welfare systems. Even if this strategy was more likely to succeed, it should be shunned. The child protective process is coercive—and often traumatic—and should be limited to situations in which the child is so endangered that social services must be forced upon unwilling parents.

Fourth, for many years, the child protective system was able to absorb the increase in reports by hiring more staff. Although money was never plentiful, the 1970s and much of the 1980s saw expansion in many states. But, of course, by the end of the 1980s, state budgets became progressively tighter—and programs were being cut rather than expanded.

Change is apparent, however. Most states, as well as most research studies, are now careful to distinguish between total reports and substantiated ones. And as mentioned above, the 1987 recommendations of the Airlie House group gave a legitimacy to those concerned about inappropriate reporting and provided the outlines for reform. In scattered communities across the nation, various elements of the recommendations listed above (as well as other ideas) are being adopted.

And there is reason to expect still more change. Recently, the flood of unfounded reports has involved more middle-class families than before. Unlike the poor, who have grown used to governmental intrusions, middle-class parents who feel that they have been wrongly accused and unnecessarily investigated fight back. Thousands have joined groups like Victims of Child Abuse Laws (VOCAL) to lobby for changes in state and federal laws as well as in agency procedures.

The continuing pressure of state budget cuts has added another group of players to the process. In many states, senior managers have, for the first time, focused their attention on the issue. They are eager, if not desperate, for any ideas that would enable them to do more with existing or pared down resources. If they could be convinced that a shift away from simply seeking more reports and toward encouraging better ones would save money without unreasonably endangering children, they would push for the change.

Hence, it seems that the coming years will see an acceleration of this shift. And, notwithstanding the opposition of advocates, I believe that reasonable efforts to reduce the number of unfounded reports would strengthen the overall child protective system as well as public support for it.

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*SUGGESTED FURTHER READING*

Douglas Besharov. *Recognizing Child Abuse: A Guide For the Concerned.* New York: Free Press, 1990.

Douglas Besharov, ed. *Protecting Children From Abuse and Neglect: Policy and Practice.* Springfield, Ill.: Charles C Thomas, 1988.

Saad Naji. *Child Maltreatment in the United States: A Challenge to Social Institutions.* New York: Columbia University Press, 1977.

Barbara Nelson. *Making an Issue of Child Abuse: Political Agenda Setting for Social Problems.* Chicago: University of Chicago Press, 1984.

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