

# CHILD MALTREATMENT FATALITIES: PERCEPTIONS AND EXPERIENCES OF CHILD WELFARE PROFESSIONALS

## FACT SHEET SERIES, ISSUE 1

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## CHILD WELFARE PROFESSIONALS' KNOWLEDGE OF RISK AND PRACTICE CONCERNS FOR FATAL MALTREATMENT

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### THE STUDY

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This fact sheet documents findings from the study *Child Maltreatment Fatalities: Perceptions and Experiences of Child Welfare Professionals*, conducted in September 2010 – January 2011; 426 child welfare professionals from 25 states participated; 123 (27.2%) had a maltreatment fatality on their caseload. Participants for this online study were recruited through advertisement on professional websites, social media sites targeting social workers, child maltreatment listservs, and direct appeals to child welfare agency administrators. The purpose of the study was to assess the knowledge, attitudes, practice concerns, and experiences with maltreatment fatalities – and implications for post-traumatic stress symptoms among U.S. child welfare professionals.

### WHAT IS A CHILD MALTREATMENT FATALITY?

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Child maltreatment fatality is: “death of a child as a result of abuse or neglect, because either: (a) an injury resulting from the abuse or neglect was the cause of death; or (b) abuse and/or neglect were contributing factors to the cause of death.”<sup>i</sup>. Child maltreatment fatalities occur annually and nationally. In 2009, there were 1,770 reported CMF cases. There is a wide range for cause of death in these cases. For the 1,770 cases in 2009: 36.7% died from a combination of abuse and neglect, 35.8% from neglect, 23.2% from physical abuse, and the rest were due to less prevalent types of maltreatment – medical, psychological or sexual abuse<sup>ii</sup>. Between 30-40% of reported child maltreatment fatalities result in cases known to state child welfare workers, no other professional group has a greater ability to intervene with at-risk children<sup>iii</sup>.

### WHY STUDY KNOWLEDGE OF RISK FACTORS?

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Most child maltreatment fatalities are preventable; risk factors are often present prior to the event of a child's death. Child welfare workers at state agencies are charged with identifying risk factors for children to reduce death caused by maltreatment. No other study has focused on child welfare worker preparedness for fatal maltreatment prevention and the field is unsure of potential training needs.

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<sup>1</sup> To contact the author of the study, email [Emily.Douglas@bridgew.edu](mailto:Emily.Douglas@bridgew.edu) or 508-531-2012. Please also visit the [study website](#).

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### AREAS ASSESSED

This study assessed the knowledge of risk factors for fatal child maltreatment. The risk factors that were assessed included parent, child, parent-child relationship, and household factors. Participants were presented with statements, some false and some accurate, and asked to indicate how much they agreed with each statement. The study also examined whether workers had received training about fatal maltreatment and if those workers had a higher level of knowledge than those who did not. Finally, the study assessed workers concerns and practice experiences with fatal maltreatment and their desire for increased training.

### HOW MUCH DO CHILD WELFARE PROFESSIONALS KNOW ABOUT RISK FOR FATAL MALTREATMENT AND DOES TRAINING PLAY A ROLE

Almost three-quarters (73%) of the child welfare workers had received training about fatal maltreatment. The results concerning child welfare professionals' knowledge of risk for maltreatment fatality are presented in Table 1. The results indicate that workers are more knowledgeable about child-level risk factors and the parent-child relationship. There are deficits in knowledge concerning parental and household risk factors for maltreatment. The receipt of training made almost no difference in worker knowledge.

TABLE 1: CHILD WELFARE WORKERS' KNOWLEDGE OF RISK FACTORS FOR FATAL MALTREATMENT

Statement <sup>1</sup>	Area of Risk	Accurate / False	% Agree/ Strongly Agree
Mothers are most likely to kill their children.	Parent	Accurate	20%
Parents who kill do not have mental health problems.	Parent	False	19%
Children usually killed by physical abuse.	Parent	False	58%
Children are mostly killed by a non-family member.	Parent	False	62%
Younger children are more at-risk for fatality.	Child	Accurate	94%
Parents who kill -- inappropriate age expectations of child.	Parent-Child Relationship	Accurate	86%
Parents who kill prob. saw child as "difficult"/ ill behaved.	Parent-Child Relationship	Accurate	71%
Children more at risk -- non-family members live in home.	Household	Accurate	61%
Families move a lot more at risk for fatality.	Household	Accurate	47%

<sup>1</sup>Statements truncated for purposes of display. Contact author for full statements used in study instrument.

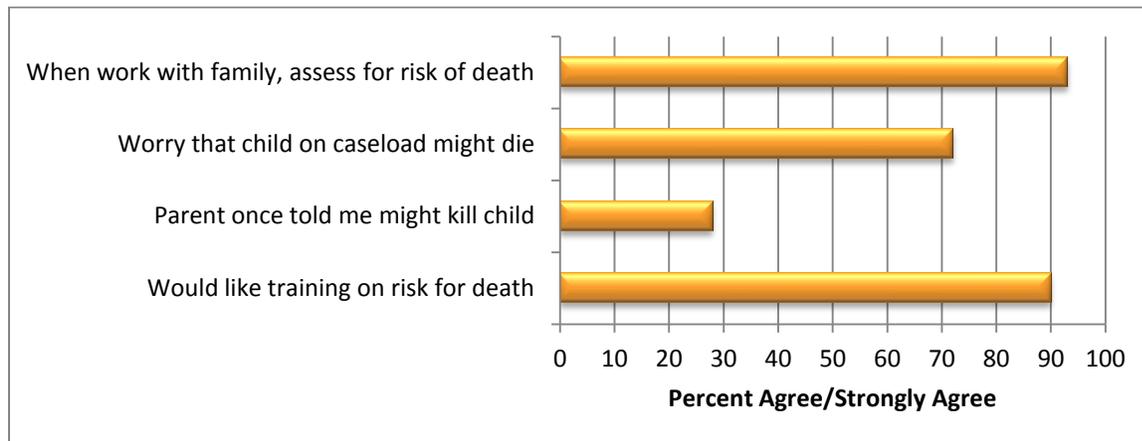
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### WORKERS' PRACTICE CONCERNS AND EXPERIENCES

Workers also reported on their own concerns and experiences with maltreatment fatalities. The majority of workers report that they assess for risk for fatalities and almost three-quarters (72%) worry that a child on their caseload will die. Over a quarter (28%) had a parent tell them that s/he might kill his/her child. The vast majority (93%) also report wanting additional training about risk factors for fatal child maltreatment.

FIGURE 1: PRACTICE CONCERNS REGARDING FATAL CHILD MALTREATMENT



### CONCLUSION

This study confirms that child welfare workers are concerned about maltreatment fatalities on their caseloads, but there are deficits in their knowledge about risk, especially with regard to parent and household risk factors. Further, receipt of training did not make a difference in their receipt of knowledge. Nevertheless, the vast majority of workers report wanting training on this topic. Thus, the results of this study point to the need for additional training for child welfare workers on fatal maltreatment and on the need for systematic evaluation to ensure that training needs are met and that retention of knowledge is secure.

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<sup>i</sup> National Child Abuse and Neglect Data Systems . (2000, March). *Glossary*. Retrieved October 22, 2011, from <http://www.acf.hhs.gov/programs/cb/systems/ncands/ncands98/glossary/glossary.htm>

<sup>ii</sup> U.S. Department of Health & Human Services. (2010). *Child maltreatment 2009: Reports from the States to the National Child Abuse and Neglect Data Systems - National statistics on child abuse and neglect*. Washington, D.C.: Administration for Children & Families, U.S. Department of Health & Human Services.

<sup>iii</sup> Anderson, R., Ambrosino, R., Valentine, D., & Lauderdale, M. (1983). Child deaths attributed to abuse and neglect: An empirical study. *Children and Youth Services Review*, 5(1), 75-89.