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The **Keenest Revelation**: Child Fatalities in the United States

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Review of: Child Maltreatment Fatalities in the United States: Four Decades of Policy, Program, and Professional Responses

By: Emily M. Douglas, Dordrecht, The Netherlands: Springer, 2017. 169 pp. ISBN 978-94-017-7581-6. \$99.99

Typically, a child dying at the hands of their parents isn't something we want to think about. The general public probably has no idea that every year over 1,000 children are confirmed to have died due to abuse or neglect (with about 80% of cases due to neglect). And those are the cases that are substantiated. Many other mysterious deaths take place that are ruled accidents or as causes unknown. This problem remains particularly insidious for child welfare professionals because the majority of victims are under the age of four, many under the age of one. Knowing that infants are the most likely victims of physical abuse, and that they often die from head injuries, leaves researchers and policymakers at a loss for what could possibly be done to prevent these deaths. Infants are almost always behind the walls of their own homes, spending all of their time with their caregivers. What is being done? What should be done?

In nine chapters, Emily Douglas attempts to address these dilemmas in her book *Child Maltreatment Fatalities in the United States: Four Decades of Policy, Program, and Professional Responses*, a comprehensive analysis of all that is known about child maltreatment fatalities. She includes the results of her own study in which she interviewed 400 child welfare workers, many of whom were woefully undereducated about the research on this topic. The workers were also over-worked and suffered from vicarious trauma, having internalized the constant stress their caseload families experience. They reported not feeling there was anything they could have done to prevent a child fatality. This book is probably most appropriate, then, for such child welfare professionals who may not read scientific literature, as the prose is easy to follow and summarizes the state of the field. The main limitation is that many of the same points and lines of research are included in different chapters so it can feel repetitive. Reducing the text by 20 pages would have solved this problem. Nevertheless, it is still a valuable resource.

Therapists and other professionals who work with families with open child welfare or domestic violence cases can learn about the risk factors for future child fatalities, such as the fact that many deaths occur in families already known to social service agencies. Graduate students, law students, or post docs in the fields of prevention science, family law, social policy, or family studies would also benefit from learning about the multidisciplinary work done in this field. What has been done about the problem? What strategies have social service and welfare agencies, law enforcement, and interventionists used to reduce the rates of child deaths? Nelson Mandela argued that "there can be no keener **revelation** of a society's soul than the way in which it treats its children." This book certainly reveals the soul of America, the nation with the highest rates of child poverty and child maltreatment in the western world.

The author covers risk factors from every part of the bioecological system, from child characteristics, to relationship, home, environment, and societal variables that put children at higher risk of dying. Douglas

provides ample case studies from news reports and child welfare files in each chapter, lest the reader forget that every statistic represents an actual human who died at the hands of his or her caregiver. If the reader is not already immersed in the field and familiar with this topic, the book may feel pretty heavy and fairly dark. But for those in the field, who are used to this type of material, the book provides an excellent overview of the current state of the literature, and each chapter ends with a “bottom line,” illustrating the gaps in the research, policy failures, and suggestions for future work.

The author begins the book by illustrating how difficult it is to decide whether a child’s death is actually due to maltreatment, thereby making accurate statistics regarding prevalence educated guesses at best. With every state having its own definition and within every state, each medical examiner following idiosyncratic protocols, child maltreatment fatalities become even murkier. Is a child who dies from nursing on a mother addicted to drugs counted as a child maltreatment fatality or an accident? Should that mother be prosecuted or helped? These and other thorny issues are addressed throughout the book. The best chapters are those that address common beliefs many people have that are not supported by evidence. For example, every state is required to have a Child Fatality Review Team, yet there is no evidence that these teams either work well or prevent future child deaths. Most readers probably assume that the work of these teams is considered “best practices.” Likewise, Douglas devotes a chapter to the myth that having “safe haven” laws prevents newborn deaths. Surprisingly, there are no state or national databases tracking how many infants are dropped off at safe havens and no research comparing child fatalities in areas with and without such drop-off points. Another myth includes the social movement towards using a “strengths-based approach” when working with children and families. Most of us have been taught to look for strengths and focus on those, not on people’s deficits. Douglas lays out a very interesting argument against this approach if our goal is to prevent child fatalities.

The book ends with a review of the effectiveness of various prevention and intervention programs and policies. This last chapter could have used a more thorough review of the existing literature. For example, Douglas refers to Triple P as one of the most effective parenting programs for reducing child maltreatment. However, there have been several exposes revealing serious flaws in the Triple P program evaluations (e.g., Coyne & Kwakkenbos, 2013). Also, one of the most effective programs ever conducted was a randomized trial in Durham, North Carolina, yet this program was not mentioned. The Durham Family Initiative randomized communities to receive a comprehensive intervention and found a 50% reduction in child abuse rates in the treatment communities (Daro, 2009). The Duke University team has also collected more evidence in favor of home visiting programs, which Douglas gifts short shrift in her review (Daro, 2009). Other than these oversights, the author does a fine job of integrating decades of literature across multiple disciplines. This book is highly recommended if one has the internal fortitude to dive in so deeply to this disturbing topic.

References

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