

MALTREATMENT (CHILD)

Child Maltreatment and its Impact on Psychosocial Child Development: Epidemiology

Nico Trocmé, PhD

McGill Centre for Research on Children and Families, Canada

May 2020, 2e éd. rév.

Introduction

Child maltreatment is a significant threat to the healthy development of children. Understanding the scope and severity of maltreatment is critical in developing clinical interventions and social policies to protect children at risk and to treat children who have already been victimized. The following article describes the incidence, prevalence and severity of child maltreatment and provides a brief discussion of implications for policy and practice.

Definitions

Child maltreatment is the broad term used to describe abusive and neglectful acts perpetrated by adults or older youth against children. These fall into four broad categories: physical abuse, sexual abuse, neglect and emotional maltreatment. Physical abuse ranges from severe assaults against children that can permanently injure or kill children to abusive physical punishment to shaking infants. Sexual abuse includes intercourse, fondling, acts of exposure, sexual soliciting and sexual harassment. Neglect refers to a failure to supervise or protect a child or to meet a

child's physical needs. Neglect often occurs in a context of extreme poverty where parents may not have the resources or supports needed to meet a child's needs. Emotional maltreatment includes extreme or habitual verbal abuse (threatening, belittling, etc.), and systematic lack of nurturance or attention required for a child's healthy development. Children's exposure to intimate partner violence (IPV) is increasingly being recognized as either a form of emotional maltreatment or a separate category of exposure.

Annual Incidence

Child maltreatment incidence statistics are tracked in Canada through the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS), a periodical survey of cases investigated by provincial and territorial child-protection authorities.¹ The 2008 cycle of the study found that an estimated 235,497 maltreatment related investigations involving children under 16 years of age were conducted in Canada in 2008, and that child maltreatment had been substantiated for 85,440 of these children, a rate of 14.19 victims per 1,000 children.^a

Over a third of these children (31,506), were under six years of age.¹ Rates of victimization were highest for younger children (17.10 per 1,000 children under one year of age compared to 14.57 for those under five), but there was no clear pattern by sex (see bar charts).

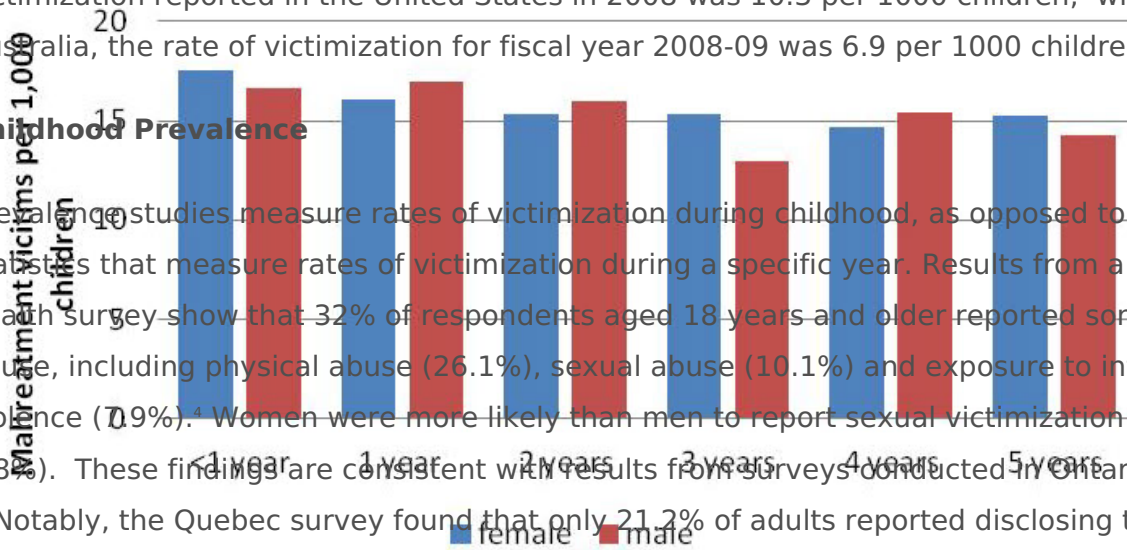
It is difficult to make direct comparisons between incidence rates in Canada and in other countries because of differences in reporting and investigation procedures. The rate of victimization reported in the United States in 2008 was 10.3 per 1000 children,² whereas in Australia, the rate of victimization for fiscal year 2008-09 was 6.9 per 1000 children.³

Childhood Prevalence

Prevalence studies measure rates of victimization during childhood, as opposed to incidence statistics that measure rates of victimization during a specific year. Results from a Canada-wide health survey show that 32% of respondents aged 18 years and older reported some type of child abuse, including physical abuse (26.1%), sexual abuse (10.1%) and exposure to intimate partner violence (7.9%).⁴ Women were more likely than men to report sexual victimization (14.4% v. 5.8%). These findings are consistent with results from surveys conducted in Ontario⁵ and Quebec.⁶

Notably, the Quebec survey found that only 21.2% of adults reported disclosing their victimization within a month of the first abusive event.

Rates of substantiated maltreatment for children under 6 by age and sex, Canada, 2008 (CIS 2008)



Injury and Death

Physical injuries due to maltreatment are relatively rare. The 2008 CIS found that physical injuries were noted in 8% of the 26,339 cases of substantiated maltreatment involving newborns to five-year-olds. In most instances these were bruises and scrapes that did not require medical attention. Injuries requiring medical attention were noted in 4% of cases involving children one to five years of age. Injuries were generally more serious for children under one year of age: 8% required medical attention and head trauma was noted in 3% of cases.

Severe abuse leading to injuries is of particular concern in situations involving young children because of the elevated risk of permanent harm or death during the first four years of life. Children under five are at highest risk of being killed by a parent: 50% of children from birth to 17 who are killed by a family member are under four years old.⁷ Rates of child and youth homicides perpetrated by family members have been declining: the rate of family-related homicide against children and youth decreased by 18%, from 3.4 in 2007 to 2.8 per 1 million population in 2017.⁸

Emotional Harm

Most cases of maltreatment reported to child welfare services involve situations where children have already suffered some sort of emotional harm or are at significant risk of experiencing emotional harm. Young children are particularly vulnerable to a range of long-lasting negative cognitive, psychosocial, and behavioural outcomes, including learning problems, problems relating to peers, depression, anxiety or aggression.⁹ Maltreatment of young children changes the way they interpret interpersonal interactions, which in turn affects the nature of relationships with family and peers.¹⁰ Of particular concern is the growing evidence of neurobiological effects of maltreatment, especially emotional maltreatment and neglect, during early childhood.¹¹

Trends

Child maltreatment is increasingly recognized as a public health problem of growing concern. The rate of maltreatment has increased by over 50% from 9.21 substantiated investigations per 1,000 documented in 1998, to 14.19 in 2008.¹ This increase appears to be primarily driven by broadening mandates and greater recognition of child maltreatment amongst professionals working with children, in particular with respect to the rate of neglect which has almost doubled, and the rate of exposure to IPV which has more than tripled.^{12,13} In contrast, the rate of

substantiated sexual abuse has decreased by over 50% between 1998 and 2008. The increase in cases of exposure to IPV has primarily been driven by a dramatic shift in the response of the police, health professionals and school personnel, who account for nearly 90% of all domestic violence reports. The decrease in reports of child sexual abuse is more difficult to interpret. While the decrease in reports could be attributed to a decrease in rates of victimization in the population, there also is evidence that the decline reflects changes in reporting patterns and investigation procedures.¹⁴

Implications for Policy and Practice

Child maltreatment is a major health problem, affecting over 85,000 children a year across Canada. Abused and neglected children are at very high risk of developing long-term social, emotional and cognitive problems. The response to these children has, however, been fragmented. Beyond the universal introduction of mandatory reporting laws across Canada, few treatment and prevention programs have been systematically developed to meet the needs of these children. An examination of rates of victimization reveals a diverse population, ranging from cases of severe physical abuse requiring urgent response to complex cases of neglect and exposure to domestic violence, where the role of child protection authorities may need to be reconceptualized. Under the continued pressure of increasing caseloads, child welfare service-providers are seeking more effective models for collaborating with other service-providers.^{12,13}

References

1. Trocmé N, Fallon B, MacLaurin B, Sinha V, Black T, Fast E, Holroyd J. Canadian Incidence Study of Reported Child Abuse and Neglect 2008 (CIS-2008): Major Findings. Ottawa, ON: Public Health Agency of Canada; 2010: 122.
2. U.S. Department of Health & Human Services. Child Maltreatment 2009. Washington, DC: Administration on Children, Youth and Families, Children's Bureau. 2010.
3. AIHW. Child protection Australia 2008-09. Cat. no. CWS 35. Canberra: AIHW. 2010.
4. Afifi T, MacMillan H, Boyle M, Taillieu T, Cheung K, Sareen J. Child abuse and mental disorders in Canada. *Canadian Medical Association Journal* 2014; 186(9):324-336.
5. MacMillan HL, Tanaka M, Duku E, Vaillancourt T, Boyle MH: Child physical and sexual abuse in a community sample of young adults: Results from the Ontario Child Health Survey. *Child Abuse & Neglect* 2013;37:14-21.
6. Hébert M, Tourigny M, Cyr M McDuff P, Joly J. Prevalence of childhood sexual abuse and timing of disclosure in a representative sample of adults from the province of Quebec. *Canadian Journal of Psychiatry* 2009;54:631-636.
7. Burczycka M, Conroy S. Family violence in Canada: A statistical profile, 2015. Statistics Canada. Catalogue no. 85-002-X. 2017.
8. Burczycka M, Conroy S, Savage L. Family violence in Canada: A statistical profile, 2017. Statistics Canada. Catalogue no.

85-002-X. 2018.

9. Institute of Medicine and National Research Council. New directions in child abuse and neglect research. Washington, DC: The National Academies Press; 2014.
10. Luke N, Banerjee R. Differentiated associations between childhood maltreatment experiences and social understanding: A meta-analysis and systematic review. *Developmental Review* 2013;33(1):1-28.
11. Teicher M, Samson J. Annual Research Review: Enduring neurobiological effects of childhood abuse and neglect. *Journal of Child Psychology and Psychiatry* 2016;57(3):241-266.
12. Trocmé N, Fallon B, MacLaurin B, Chamberland C, Chabot M, Esposito T. Shifting definitions of emotional maltreatment: An analysis child welfare investigation laws and practices in Canada. *Child Abuse & Neglect* 2011; 35(10):831-840.
13. Trocmé N, Fallon B, Sinha V, VanWert M, Kozlowski A, MacLaurin B. Differentiating between child protection and family support in the Canadian child welfare system's response to intimate partner violence, corporal punishment, and child neglect. *International Journal of Psychology* 2013;48(2):128-140.
14. Collin-Vezina D, Helie S, Trocmé N. Is child sexual abuse declining in Canada? An analysis of child welfare data. *Child abuse & Neglect* 2010;34(11):807-812.

Note:

^a In another 17,918 cases, maltreatment could not be substantiated, but remained suspected. In 71,053 cases, maltreatment was unsubstantiated, and 61,431 investigations were for future risk of maltreatment where no specific allegations of past incidents of maltreatment had been made.