

## The Ways & Means Committee Hearing on Child Deaths Due to Maltreatment

July 26, 2011

Dear Chairman Davis and Committee Members:

We are writing on behalf of our children and the many lives we have witnessed that have been harmed by this significant health, economic and societal problem. Our intention is to encourage this committee to focus on prevention. Our children deserve to feel safe especially in their homes, at school and in their communities.

Children dying and being abused at the hands of the adults who care for them is the most heinous of actions. Domestic abuse and violence has repercussions that impact health care, education, and our financial institutions for generations.

We have outlined 6 areas which we feel call for immediate attention and are places our current judicial systems allow children to fall through the cracks of bureaucracy and neglect.

1. Children need a national unified bill of rights.
2. Modification of the current legal bias, which views children as property of the father, needs national clarification. These biases put significantly more focus on the parent's rights over the child's right to be safe in their home.
3. Uniform and broad legal definitions of child maltreatment need to become a national standard.
4. Courts in all States must be accountable to following current judicial guidelines put forth by the directors of the National Council of Juvenile and Family Court Judges. These guidelines are very clearly defined in the book that has been adopted as the position of the Council: *A Judicial Guide to Child Safety in Custody Cases* By Dr. Margaret Drews. (2008)
5. Create Standards and benchmarks, which unify measure that ensure accurate fact finding, data intake, record keeping & record sharing between agencies nationwide.
6. Institute preventive measures including educational standards for all court professionals involved in child abuse cases. Education for parents who are trying to protect their children. Include best practices from research that shows effective strategies to stop the cycle of power, control, and violence towards are country's most vulnerable citizens.

### Background

Based on Center for disease development fact sheets,  
<http://www.cdc.gov/violenceprevention/pdf/CM-FactSheet-a.pdf> , What we do know is that:

- **1,740 children died in the United States in 2008 from abuse and neglect.**

- **772,000 children were found to be victims of maltreatment by child protective services in 2008.**

There are many not even in the records or discarded. Children are taken across State lines when actions are reported and the fear of retaliation by the abuser limits parents and lawyers in acting. Clear intent is difficult to establish an abuser will lie and deny the act. The patterns not individual actions are the correct way to come up with safe plans for the child. There are numerous cases that child care workers teachers therapists and concerned citizens report which go undocumented by systems that are underfunded, undereducated and misguided in their focus.

#### Definitions

Child maltreatment includes all types of abuse and neglect of a child under the age of 18 by a parent, caregiver, or another person in a custodial role.

There are four common types of abuse.

- Physical abuse is the use of physical force, such as hitting, kicking, shaking, burning or other show of force against a child.
- Sexual abuse involves engaging a child in sexual acts. It includes fondling, rape, and exposing a child to other sexual activities.
- Emotional abuse refers to behaviors that harm a child's self-worth or emotional well-being. Examples include name calling, shaming, rejection, withholding love, and threatening.
- Neglect is the failure to meet a child's basic needs. These needs include housing, food, clothing, education, and access to medical care.

Unfortunately current laws used in courts vary from State to State and many do not recognize abuse at all in their laws. This lack of uniformity compromises the safety and rights of a child as well as limits the protective parent or agent to get enforceable orders to intervene. There are cases when protective parent insists on protection , and courts rule against the protective parent to alter custody and expose the child to ultimate danger and their own devices.

#### Co-Morbidities

While Child maltreatment and intimate partner violence can be separate issues and should be handled separately in some cases, some cases are strongly linked. Edleson, J.(1997, April). The overlap between Child Maltreatment and Women Abuse , the article can be found at <http://www.vawnet.org> . Thus, intimate partner violence (IPV) is another serious problem in the United States and there is a growing body of credible research that significantly links domestic violence to high risk of future child maltreatment years after a couple has separated. Especially since it is common in such cases when the underlying maltreatment is minimized, ignored and undetected.

Based on Center for disease development fact sheets,  
<http://www.cdc.gov/violenceprevention/pdf/CM-FactSheet-a.pdf> , What we do know is that:

- **Each year, women experience about 4.8 million intimate partner related physical assaults and rapes. Men are the victims of about 2.9 million intimate partner related physical assaults.**
- **IPV resulted in 2,340 deaths in 2007. Of these deaths, 70% were females and 30% were males.<sup>2</sup>**
- **The medical care, mental health services, and lost productivity (e.g., time away from work) cost of IPV was an estimated \$5.8 billion in 1995. Updated to 2003 dollars, that's more than \$8.3 billion.**

IPV can affect health in many ways. The longer the violence goes on, the more serious the effects.

Many victims suffer physical injuries. Some are minor like cuts, scratches, bruises, and welts. Others are more serious and can cause death or disabilities. These include broken bones, internal bleeding, and head trauma. Not all injuries are physical. IPV can also cause emotional harm. Victims may have trauma symptoms including flashbacks, panic attacks, anxiety, PTSD and serious depressive disorders. Victims develop low self-esteem have a hard time with trust and relationships. Work and productivity are at risk.

## Costs

“Dollars and Lives: The Economics of Healthy Children, by - Dr. Phaedra S. Corso indicates that: “Healthy children lead to healthy adults. And healthy adults are more productive and drive a healthy economy. Because the nation cannot sustain its productivity potential if it has a large number of unhealthy adults, ensuring the physical and emotional well-being of our children through the prevention of child abuse and neglect must be one of this country’s top priorities. The immediate, short-term economic impacts of child maltreatment are clear. They include the cost of healthcare services for acute injuries, the utilization of social and protective services to investigate and treat abused children, and the money spent on the legal and criminal justice systems involved. Perhaps the greatest economic impact of child maltreatment on society, however, is the unhealthy adults that are produced as a consequence

The Cost to Society of Adults who were Childhood Victims of Abuse and Neglect Research has revealed the impact on society of unhealthy adults who were exposed to childhood abuse. First, adult survivors of child maltreatment are more likely to have decreased health-related quality of life<sup>(1)</sup> as shown by considerable evidence of higher levels of chronic and mental health diseases relative to non-abused adults<sup>(2)</sup>. There is evidence of a strong correlation between childhood exposure to abuse and adult obesity, cardiovascular disease, and adverse lifestyle behaviors such as alcohol and tobacco use. The economic implications of these and other adult chronic and mental health conditions being associated with abuse are very serious, resulting in excess utilization of our healthcare system. Research done by<sup>(3)</sup> **Dr. Amy Bonomi at Ohio State University**

reveals that the annual healthcare costs for adult women reporting physical abuse during childhood were 22% higher than costs for women reporting no abuse during childhood. If one considers this excess cost, which is about \$500, and multiplies it times the number of adult women in the US (about 110 million) and the prevalence of self-reported physical abuse from this study and others, ranging from 19 to 34 percent, then the excess healthcare costs associated with childhood physical abuse for women in the US is between \$10.4 and \$18.7 billion per year. Add to this the excess medical expenditures for men, which could be higher because their prevalence of self reported physical abuse is higher<sup>(4)</sup> and the excess medical expenditures for other types of abuse (sexual, emotional), and the economic impact on our healthcare system is even greater. When adult survivors have access to employer based health insurance, these excess expenditures are borne by the employer and the survivor in terms of out-of pocket expenditures and health insurance premiums. In cases where adult survivors do not have access to private health insurance, these excess expenditures are paid by society through tax dollars that support publicly-funded health insurance, primarily Medicaid and Medicare, or by cost shifting that results from uncompensated care delivered in hospital settings. In addition, there is a impact on the Labor Force: Higher levels of chronic and mental health conditions among adults who were victims of childhood abuse and neglect may also affect the labor supply through lower productivity. Good health, while vital for individual wellbeing, also plays a large role in employee productivity. When adult survivors of child abuse and neglect suffer from long-term effects of chronic and mental health conditions, the results are increased number of sick days and increased number of days at work marked by low productivity. **Some studies have noted that productivity losses for chronic diseases can be up to 4 times higher than the costs of the associated medical expenditures<sup>(5)</sup>. This means that in addition to the direct medical expenditures estimated above, female survivors of childhood physical abuse cost the economy an additional \$40 to \$75 billion in lost productivity each year.** Finally, childhood exposure to abuse and neglect has been linked, both anecdotally and scientifically, to a lifetime trajectory of violence perpetration and victimization,<sup>(6)</sup> non-violent criminal activity<sup>(7)</sup>, and increased utilization of social and welfare services. This means there is less money available for the criminal and legal justice systems, including police, prosecution, courts, probation, prison, and legal aid; and social welfare services, such as social security disability benefits. Beyond the economic impact associated with the actual survivor, it is also important to consider the influence on society and the family. For example, if child maltreatment has long-term impacts on the adult survivor's social functioning, coping skills, and relationship potentials, then one should also assume that there are negative spillover effects on the quality of life, physical and emotional well-being, and productivity potential for those in the survivor's sphere of influence. **While not easy to quantify, these spillover economic impacts of child abuse and neglect may be no less important than those specific to the individual victim. The costs to individuals and to society of childhood abuse and neglect are enormous. The savings through prevention in lives and dollars should be an important public policy objective.**

## **References**

(Corso p 1. aper; Edwards paper),

2. (Felitti, and other papers),
3. Bonomi et al. found that,
4. (Briere and Elliott, 2003),
5. (Loeppke et al., 2007).
6. (Fang papers),
7. (Widom, NIJ cites),
8. R Loeppke et al., "Health and Productivity as a Business Strategy," Journal of Occupational and Environmental

The Adverse Childhood Experiences (ACE) Study findings suggest that adverse childhood experiences are major risk factors for the leading causes of illness, disability and death as well as poor quality of life in the United States. Progress in preventing and recovering from the nation's worst health and social problems will benefit from the understanding that many of these problems arise as a consequence of adverse childhood experiences. There are more than 50 peer-reviewed publications from the ACE Study. A complete listing of the findings is

available by subject at: [www.cdc.gov/NCCDPHP/ACE](http://www.cdc.gov/NCCDPHP/ACE).

A video discussion of the ACE Study is available at:

<http://www.cavalcadeproductions.com/ace-study.html>

About the Author Dr. Robert Anda is a Senior Researcher in Preventive Medicine and Epidemiology and a consultant to the Centers for Disease Control and Prevention. He is the Principal Investigator with the Adverse Childhood Experience (ACE) Study which is the largest-scale study ever done of the health and social effects of adverse childhood experiences over the lifespan.

The Adverse Childhood Experiences Study: Child Abuse and Public Health,

<http://www.preventchildabuse.org/publications/cap/documents/AndaWHTPPR.pdf>

### **Some of the Other resources on financial impact:**

"Dollars and Lives: The Economics of Healthy Children" by- Dr. Phaedra Corso, Head of the Department of Health Policy and Management at the University of Georgia's College of Public Health.

"Prevention Programs and Strategies: State Legislative Experiences" by -Kelly Crane, policy specialist for the National Conference of State Legislatures, in their Children and Families Program.

"A Better Future for America. A Better Future for America's Children: Strengthening our Capacity to Prevent Child Abuse and Neglect", Lisbeth B. Schorr , a Senior Fellow at the Center for the Study of Social Policy, and Lecturer in Social Medicine at Harvard University.

"Prevention Creates the Future by Transforming Culture" by - Dr. Jeff Linkenbach, the Director of the Center for Health and Safety Culture a Montana State University.

"The Adverse Childhood Experiences Study: Child Abuse and Public Health", by - Dr. Robert Anda, a Senior Researcher in Preventive Medicine and Epidemiology and a consultant to the Centers for Disease Control and Prevention.

"Better Lives for Children Lead to a Better Climate for Business", -Michael E. Axelrod, is the Managing Member of Trinova Partners LLC, a business consulting firm in Atlanta,

### **Additional Resources Greenbook Initiative**

Professor Drew has published several articles, including "Recognizing Financial Control as Abuse" (86 Women Law. J. 9 2000-2001) and Lawyer Malpractice: Are We Re-Victimizing Our Domestic Violence Clients? in the 2005 spring volume of The Family Law Quarterly. In the 2006 winter volume of the University of Cincinnati Law Review, Professor Drew and her co-author, Sarah Buel, published "Do Ask and Do Tell: Rethinking the Lawyer's Duty to Warn in Domestic Violence Cases." The article was part of a symposium held on the 30th anniversary of the Tarasoff case. Her projects include a domestic violence discovery handbook.

Professor Drew was an editor and contributing author of the ABA 2005 publication, The Impact of Domestic Violence on Your Legal Practice, 1st and 2d ed. In 2007, she served on a steering committee and edited the ABA's Standards of Practice for Lawyers Representing Victims of Domestic Violence, Sexual Assault and Stalking in Civil Protection Order Cases. She also assisted the National Consumer Law Center in editing its publication: Massachusetts Guide On Consumer Credit for Victims of Domestic. November 2010, As Director of the Domestic Violence and Civil Protection Order Clinic, Margaret signed on to testimony submitted to Congress urging the passage of The Convention for the Elimination of all forms of Discrimination Against Women ("CEDAW"). testimony was organized by the Leadership Conference of Civil and Human Rights, a coalition of over one hundred and sixty organizations. Margaret drafted a portion of a briefing paper to be submitted to the United Nation's Special Rapporteur on Violence Against Women in conjunction with the Special Rapporteur's visit to the United States in 2011. Margaret's section of the paper addressed the financial difficulties abused women face when they engage the legal system for assistance in achieving safety for themselves and their children.

National Council of Juvenile and Family Court Judges, University of Nevada, " Executive Summary of Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guideline for policy and Practice, June 1999.

## Legal Disparities

Sample of different state laws on definition of child abuse and some times does not even have it. ALABAMA: STATUTE defines child abuse as harm or threatened harm of physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury against a child under the age of 18. Statute contains an exemption for religious reasons for a parent's failure to obtain medical help for the child.

ALASKA: Statute defines child abuse as harm or threatened harm of physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury of a child under the age of 18. Statute contains an exemption for religious reasons for a parent's failure to obtain medical help for the child.

ARIZONA: Statute defines child abuse as inflicting or allowing physical abuse, neglect, sexual abuse, sexual exploitation, emotional/mental injury, or ABANDONMENT of a child under the age of 18. Statute contains an exemption for Christian Scientists or unavailability of reasonable resources for a parent's failure to obtain medical help for the child.

ARKANSAS: Statute defines child abuse as intentionally, knowingly, or negligently without cause inflicting physical abuse, neglect, sexual abuse, sexual exploitation,

abandonment or emotional/mental injury of a child under the age of 18. Statute contains exemptions for poverty or corporal punishment.

CALIFORNIA: Statute defines child abuse as inflicting by non-accidental means physical abuse, neglect, sexual abuse, or sexual exploitation of a child under the age of 18. Statute contains exemptions for religion, reasonable force, and informed medical decision.

COLORADO: Statute prohibits threats to a child's health and welfare due to physical abuse, neglect, sexual abuse, sexual exploitation, emotional/mental injury, or abandonment. Statute contains exemptions for corporal punishment, reasonable force, religious practices, and cultural practices.

CONNECTICUT: Statute prohibits injuries inflicted by non-accidental means involving physical abuse, neglect, sexual abuse, sexual exploitation, emotional/mental injury, or abandonment. Statute contains exemption for Christian Scientists.

DELAWARE: Statute prohibits injuries inflicted by non-accidental means involving physical abuse, neglect, sexual abuse, sexual exploitation, emotional/mental injury, or abandonment. Statute contains exemption for religion.

DISTRICT OF COLUMBIA: Statute prohibits persons from inflicting and requires people to take reasonable care not to inflict injuries involving physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains exemption for poverty and religion.

FLORIDA: Statute prohibits willful or threatened act that harms or is likely to cause harm of physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains exemptions for religion, poverty, or corporal punishment.

GEORGIA: Statute prohibits injuries inflicted by non-accidental means involving physical abuse, neglect, sexual abuse, or sexual exploitation. Statute contains exemption for religion and corporal punishment.

HAWAII: Statute prohibits acts or omissions resulting in the child being harmed or subject to any reasonably foreseeable, substantial risk of being harmed with physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains no exemptions.

IDAHO: Statute prohibits conduct or omission resulting in physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains exemption for religion.

ILLINOIS: Statute prohibits persons from inflicting, causing to be inflicted, or allowing to be inflicted, or creating a substantial risk, or committing or allowing to be committed, physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains exemptions for religion, school attendance, and plan of care.

INDIANA: Statute prohibits act or omission resulting in physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains exemptions for religion, prescription drugs, or corporal punishment.

KENTUCKY: Statute prohibits harm or threat of harm, or infliction or allowance of infliction of physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains exemptions for religion.

MARYLAND: Statute prohibits harm or substantial risk of harm resulting in physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains no exemptions.

MICHIGAN: Statute prohibits harm or threatened harm of physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains exemptions for religion.

MISSISSIPPI: Statute prohibits persons from causing or allowing to be caused physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains exemption for religion and corporal punishment.

NEBRASKA: Statute prohibits knowingly, intentionally, or negligently causing or permitting physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains no exemptions.

NEW MEXICO: Statute prohibits knowingly, intentionally, or negligently causing or permitting physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains exemption for religion.

NORTH DAKOTA: Statute prohibits serious harm caused by non-accidental means resulting in physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains no exemptions.

OKLAHOMA: Statute prohibits harm or threat of harm resulting in physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains exemptions for religion or corporal punishment.

PENNSYLVANIA: Statute prohibits recent act or failure to act resulting in physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains exemptions for religion or poverty.

SOUTH DAKOTA: Statute prohibits threat with substantial harm resulting in physical abuse, neglect, sexual abuse, sexual exploitation, abandonment, or emotional/mental injury. Statute contains no exemptions.

TENNESSEE: Statute prohibits persons from committing or allowing to be committed physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains no exemptions.

UTAH: Statute prohibits harm or threat of harm resulting in physical abuse, neglect, sexual abuse, sexual exploitation, or emotional/mental injury. Statute contains no exemptions.

WASHINGTON: Statute prohibits harm of health, welfare, or safety resulting from physical abuse, neglect, sexual abuse, or sexual exploitation. Statute contains exemptions for Christian Scientists, corporal punishment, or physical DISABILITY.

We appreciate your committee's hearing our concerns. We hope that with continued education and enforcement this will improve.

Respectfully Submitted,

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