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Hearing on Child Deaths due to Maltreatment

I am one of 180 board-certified child abuse pediatricians in the United States. I have been part of the Child Protection Team at Children's Hospital of Pittsburgh of UPMC for more than 10 years and have evaluated well over a thousand children with suspected child abuse and neglect. I have been part of my state's Child Abuse and Neglect Work Group for more than seven years and have spent considerable time involved in public policy issues related to detection, evaluation and assessment of child abuse. This past month, I wrote an opinion piece in the Pittsburgh Post-Gazette, which focused on the importance of proper ascertainment of child abuse cases (available at: <http://www.post-gazette.com/pg/11163/1152807-109-0.stm>). I am also one of only a handful of child abuse physicians whose career has focused on child abuse-related clinical research. I spoke with the GAO during the preparation of their report related to child deaths due to maltreatment.

As our medical system does a better and better job of developing new vaccines, finding cures for childhood cancer and caring for children with chronic diseases, the leading cause of death and disability in children has shifted from disease to injury. Child abuse and neglect account for a significant proportion of injuries in childhood. Correct ascertainment of the number of cases of fatal child abuse is critically important for numerous reasons, which have been explained by other witnesses. It is also important to recognize that due to advances in medicine, cases of child abuse, which may have been fatal five years ago, are now survivable, but often result in significant morbidity. Being able to correctly ascertain the number of deaths from child maltreatment is only a first step. To understand the true burden of child abuse on our society, we need to count all cases, not just the fatal ones.

There are several barriers to proper ascertainment of the number of fatal (and non-fatal) cases of abuse. The most important barrier, I believe, is that the official child abuse data in this country are based on the results of child protective services (CPS) investigation. The ability of CPS to indicate (e.g. count) a case of maltreatment, fatal or not, is dependent on state law. We can never overestimate the importance of this. As you know, every state has its own definition of child maltreatment; what counts as child abuse in one state may not count in another. For example, in the state of Pennsylvania, the law requires the perpetrator of abuse to be known before a case can be counted as abuse. As a result, a child can die from unequivocal child abuse, but if it cannot be determined who injured the child, the case is not indicated and would not appear in the national statistics. However, if that same child lived in neighboring Ohio, the case would be counted. Why? Ohio does not require a perpetrator to be identified. The tremendous state-to-state variability in assessment of neglect is even more problematic; again, state definitions are critically important. In Pennsylvania, most forms of neglect are not included in the state definition of abuse. As a result, in a state with 4 million children, there were just nine deaths due to neglect in 2010.

To properly count the number of cases of fatal (and non-fatal) child abuse, I believe we need to recognize there are data sources other than CPS data. For example, medical data from publically available datasets can be used to identify cases of medically diagnosed physical abuse. It's important to note that the medical diagnosis of abuse is independent of state definition. Multiple published studies have used these datasets to study the epidemiology of different types of child abuse. Not surprisingly, data from several of these studies seem to contradict data from official CPS data sources.

To overcome the marked differences in state laws, I believe we need to adopt federal standards by which we, as a society, define child abuse and neglect. Cases of abuse and neglect that meet these standards would be counted as abuse on a federal level. Even if we can only agree on the most egregious cases - the fatal ones - this at least will allow us to begin the process of counting deaths from child maltreatment.

A second, but still important barrier to proper ascertainment of the number of cases of fatal abuse relates to the assumption that all cases are 'unequivocally abuse' or 'not abuse.' There needs to be a way in which our system can recognize that while death is certain, the cause of death is not always so clear. While some deaths are unequivocally due to abuse, there are some which are not - either because the proper investigation was not carried out (an unfortunate, but far too common situation) or because there is legitimate debate about the level of certainty with which experts can state that the death was due to abuse. The level of certainty, which is necessary for CPS to indicate a case as abuse or neglect, for example, is often different from the level of certainty required in a criminal court. An ideal system of ascertainment would allow for classification of fatalities as 'unequivocal' or 'probable' child maltreatment. Since all unexpected childhood deaths should undergo evaluation as part of county-specific death review teams, it would not be difficult to classify the likelihood of abuse in each case.

A related, but important, barrier to identifying child maltreatment deaths is the lack of adequate investigation and/or consideration of abuse. If we do not look for maltreatment, we will not find maltreatment and if we do not consider neglect, we will not identify neglect. There needs to be a standard evaluation performed on all infants and young children who die unexpectedly. Without a complete scene investigation and proper medical evaluation (e.g. a post-mortem skeletal survey, a complete autopsy), cases of child abuse and neglect will certainly be missed.

A final, but important barrier is our own discomfort, as a society, with the concept of child maltreatment. It's not easy to accept that thousands of children in this country die each year due to the actions, or inactions, of their caregivers. By not 'counting' certain deaths as maltreatment because of technicalities in the law; by not evaluating maltreatment when we assess injuries and or deaths; and/or by calling what should be labeled neglect as 'terrible accidents,' we are able, as a society, to believe that deaths due to abuse and neglect are rare. I believe this committee has the ability to start addressing this barrier simply by acknowledging the problem and searching for a solution.

Nelson Mandela said, "There can be no keener revelation of a society's soul than the way in which it treats its children." Whenever a child dies of child maltreatment, we have failed as a society to protect that child. It is therefore incumbent upon us to try to make something positive come from that child's death. Ensuring that that child's death is counted is the first and perhaps most critical step in doing this.