

Mental Health Correlates of Fatal Child Maltreatment: Findings from Florida Child Abuse Death Review Cases

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A System of Care for Children's Mental Health: Expanding the Research Base

Mental Health Correlates of Fatal Child Maltreatment: Findings from Florida Child Abuse Death Review Cases



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*A simple child
That lightly draws its breath,
And feels its life in every limb
What should it know of death?*

"We are Seven"
William Wordsworth (1770-1850)

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Florida State Child Abuse Death Review

- Established by statute in 1999 (Chapter 383.402 F.S.)
- Housed in the Department of Health
- Authorizes statewide and locally developed multi-disciplinary committees to conduct detailed reviews of the facts and circumstances surrounding child abuse and neglect deaths in which at least one prior report of abuse or neglect was accepted by the Florida Abuse Hotline within the Department of Children and Family Services.
- In 2004, the Florida Legislature expanded the role of the team to include the review of all verified child abuse and neglect deaths.

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Child Abuse Death Review – Perpetrator Risk Factor Study

- Funded by the Department of Children & Family Services, Task Force for Children's Justice Act
- Collaboration between the Florida Department of Health and Louis de la Parte Florida Mental Health Institute

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Child Abuse Death Review – Perpetrator Risk Factor Study

- Goal:
 - ◆ Identify common characteristics of child abuse perpetrators to determine what risk/protective characteristics are present in various situations.
- Objectives:
 - ◆ Clarify critical information needed when reviewing cases to determine appropriate interventions.
 - ◆ Devise effective prevention programs based on empirical findings.

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Child Abuse Death Review – Perpetrator Risk Factor Study

- Methods:
 - ◆ Record reviews of maltreatment cases in the State of Florida for a period of four years, 1999-2002.
 - Group A: Cases reviewed by the Child Abuse Death Review Team (CADR). These are cases of children who have died as a result of child abuse and neglect who also had at least one prior report of child abuse or neglect.
 - Group B: Nonfatal cases in which children were removed from their homes due to abuse or neglect, but subsequently reunited.
 - Group C: Nonfatal cases in which child abuse or neglect was verified, but the children were not removed from their homes.

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Case Record Data

- Triangulation of data
 - ◆ DCF records as well as other available documentation, such as the autopsy report, medical records, law enforcement report, social services history, and media coverage
 - ◆ Medicaid and Baker Act administrative datasets
 - ◆ Review of literature



Child Data

- Age
- Gender
- Race/Ethnicity
- Presence of MH disability, physical disability, or developmental delay
- Chronic medical needs
- Engagement with community social service agencies
- Enrollment in school/daycare



Incident Data

- Witnesses (adult, child)
- Other child victims
- Location (in home, out of home)
- Date/time of incident
- Potential catalyst
- Type of incident



Perpetrator Data

- Demographics
- Relationship to child
- Educational level
- History of Domestic Violence and Prior Acts of Child Abuse
- Employment Status
- History of Substance Abuse and MH illness
- Criminal history
- Childhood history



Household Data

- Prior reports of abuse
- History of service use
- Community visibility factors
- Family stress factors
- History of non-offending caregiver
- Family structure



Focus of Analysis


- Demographic characteristics of both perpetrators and victims
- Relationship of the perpetrators to the child victims
- Whether the perpetrator acted alone or with another person
- Circumstances of the maltreatment
- Geographic Information System (GIS) Analysis



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Analytic Approach

- This presentation will focus on the findings related to mental health correlates in the fatal child abuse cases.
- Bivariate descriptive analyses
- Event History Analysis:
 - Life Tables
 - Competing-risks survival analysis
- Logistic regression analysis




Sample Description

- 126 fatal child maltreatment cases were included in the analysis
- 61% of the victims were male
- The racial composition was:
 - 51% Caucasian
 - 37% African American
 - 10% Hispanic
 - 2% Other
- Average age of the children was 4 years (M = 3.81, SD = 4.24), ranging from birth through 17 years
- 12% of children had behavioral health problems
- 18% of the sample had medical or physical problems




Summary of Findings Based on Cases of Fatal Child Abuse in Florida

- Cases are nearly evenly divided between abuse related deaths and neglect related deaths.
- The majority of children in the sample (63%) were at home at the time of death.
- In 32% of cases either an adult or a child witness was present.
- In cases of fatal child abuse, female perpetrators are more often involved in cases attributed to neglect while male perpetrators are more likely to engage in physical abuse leading to the child's death. If the perpetrator is a male then a child is twice more likely to die as a result of abuse versus neglect.



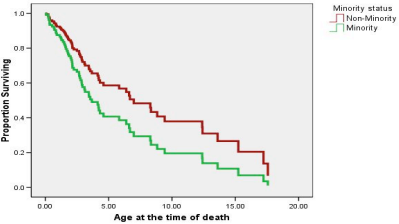
Life Tables Findings

- 15% of minority children died before the age of 1 compared to 9% of nonminority children
- 33% of children who had identified mental health problems died before the age of 5
- The median life expectancy for children without mental health problems was approximately two and a half years compared to 12 and a half years for children who had mental health problems
- The median life expectancy for children who had health problems was 4 years compared to 13 and a half years for those who did not have medical problems.




Competing-risks survival analysis Model 1: Death from Abuse

Death as a Result of Abuse by Minority Status

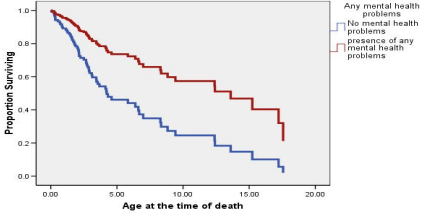


Minority children were almost 1.7 times more likely to die as a result of abuse than non-minority children (Odds Ratio = 1.68, $p < .05$).




Competing-risks survival analysis Model 1: Death from Abuse

Death as a Result of Abuse by Presence of Mental Health Problems



Children who had identified mental health problems were two and a half times less likely to die from abuse than children who did not have identified behavioral health concerns (Odds Ratio = 2.52, $p < .05$).



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