

An Executive Summary of the Adverse Effects of Child Abuse and Neglect



A recent study (2018) by the CDC and Kaiser Permanente reaffirmed that child abuse and neglect affect children's health and development, and the cost to our community is significant. Neglect, physical abuse, and sexual abuse lead to poor physical and mental health. The physical, psychological, behavioral, and economic consequences of child maltreatment are evident.

Prevalence: 1 in 4 children suffer abuse.

- An estimated 702,000 children were confirmed by child protective services as being victims of abuse and neglect in 2014.¹
- At least one in four children have experienced child neglect or abuse (including physical, emotional, and sexual) at some point in their lives, and one in seven children experienced abuse or neglect in the last year.²

Child Abuse and Neglect Affect Children and Our Community . . .

Physical Consequences . . .

- In 2014, approximately 1,580 children died from abuse and neglect across the country—a rate of 2.13 deaths per 100,000 children.¹
- Abuse and neglect during infancy or early childhood can cause regions of the brain to form and function improperly with long-term consequences on cognitive and language abilities, socioemotional development, and mental health.³
- Children may experience severe or fatal head trauma because of abuse. Nonfatal consequences of abusive head trauma include varying degrees of visual impairment, motor impairment and cognitive impairments.⁶
- Children who experience abuse and neglect are also at increased risk for adverse health effects and certain chronic diseases as adults, including heart disease, cancer, chronic lung disease, liver disease, and elevated levels of C-reactive protein.^{7,8,9}

Psychological Consequences . . .

- 80% of young adults who had been abused met the diagnostic criteria for at least one psychiatric disorder at age 21. These young adults exhibited many problems, including depression, anxiety, eating disorders, and suicide attempts.¹⁰
- The stress of chronic abuse results in high levels of anxiety and often makes victims more vulnerable to problems, such as post-traumatic stress disorder, conduct disorder, and learning, attention, and memory difficulties.^{4,5}

Behavioral Consequences . . .

- Children who experience abuse and neglect are at increased risk for smoking, alcoholism, and drug abuse as adults, as well as engaging in high-risk sexual behaviors.^{7,11}
- Those with a history of child abuse and neglect are 1.5 times more likely to use illicit drugs, especially marijuana, in middle adulthood.¹²
- Abused and neglected children are at least 25% more likely to experience problems such as delinquency, teen pregnancy, and low academic achievement.¹³ Similarly, a longitudinal study found that physically abused children were at greater risk of being arrested as juveniles, being a teen parent, and less likely to graduate high school.¹⁴
- Being abused or neglected as a child increases the likelihood of arrest as a juvenile by 59%. Abuse and neglect also increased the likelihood of adult criminal behavior by 28% and violent crime by 30%.¹⁵
- Child abuse and neglect can have a negative effect on the ability of both men and women to establish and maintain healthy intimate relationships in adulthood.¹⁶

Economic Consequences . . .

- The total lifetime economic burden resulting from new cases of fatal and nonfatal child abuse and neglect in the United States in 2015 is approximately \$124 billion¹⁷.
- The estimated average lifetime cost per child surviving abuse and neglect is \$210,012 (in 2015 dollars), including
 - Childhood health care costs
 - Adult medical costs
 - Productivity losses
 - Child welfare costs
 - Criminal justice costs
 - Special education costs

References

1. U.S. Department of Health and Human Services. Administration on Children, Youth and Families, Children's Bureau. (2016). Child maltreatment 2014 [online] Available from: <http://www.acf.hhs.gov/sites/default/files/cb/cm2014.pdf>.
2. Finkelhor D, Turner HA, Shattuck A, Hamby SL. Prevalence of childhood exposure to violence, crime, and abuse: Results from the National Survey of Children's Exposure to Violence. *JAMA Pediatr.* 2015;169(8), 746-754.
3. U.S. Department of Health and Human Services, Administration on Children, Youth, and Families. Understanding the effects of maltreatment on early brain development. Washington (DC): Government Printing Office; 2001. Available from: <http://www.childwelfare.gov/pubs/focus/earlybrain/earlybrain.pdf>.
4. Dallam SJ. The long-term medical consequences of childhood maltreatment. In: Franey K, Geffner R, Falconer R, editors. The cost of child maltreatment: Who pays? We all do. 2001. San Diego (CA): Family Violence & Sexual Assault Institute.
5. Perry BD. The neurodevelopmental impact of violence in childhood. In: Schetky D, Benedek E, editors. Textbook of child and adolescent forensic psychiatry. Washington (DC): American Psychiatric Press; 2001. p. 221–238.
6. National Center on Shaken Baby Syndrome. [online] 2009 [cited 2009 Apr 07]. Available from: <http://www.dontshake.com>.
7. Felitti V, Anda R, Nordenberg D, Williamson DF, Spitz AM, Edwards V, Koss MP, Marks JS. Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. *Am J Prev Med.* 1998; 14(4):245–258.
8. Danese A, Moffitt TE, Harrington H, Milne BJ, Polanczyk G, Pariante CM, et al. (2009). Adverse childhood experiences and adult risk factors for age-related disease. *Arch Pediatr Adolesc Med.* 1998;163(12):1135–1143.
9. Gilbert LK, Breiding MJ, Merrick MT, et al. Childhood adversity and adult chronic disease: an update from ten states and the District of Columbia, 2010. *Am J Prev Med.* Mar 2015;48(3):345-349.
10. Silverman AB, Reinherz HZ, Giaconia RM. The long-term sequelae of child and adolescent abuse: a longitudinal community study. *Child Abuse Negl.* 1996;20(8):709–723.
11. Runyan D, Wattam C, Ikeda R, Hassan F, Ramiro L. Child abuse and neglect by parents and other caregivers. In: Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, editors. World report on violence and health. Geneva, Switzerland: World Health Organization; 2002. p. 59–86. Available from: http://www.who.int/violence_injury_prevention/violence/global_campaign/en/chap3.pdf.
12. Widom C, Marmorstein N, White H. Childhood victimization and illicit drug use in middle adulthood. *Psychol Addict Behav.* 2006; 20(4):394–403.
13. Kelley BT, Thornberry TP, Smith CA. In the wake of childhood maltreatment. 1997. Washington (DC): National Institute of Justice.

14. Langsford JE, Miller-Johnson S, Berlin LJ, Dodge KA, Bates JE, Pettit GS. Early physical abuse and later violent delinquency: a prospective longitudinal study. *Child Maltreat*. 2007;12(3):233–245.
15. Widom C S, Maxfield MG. An update on the “cycle of violence.” Washington (DC): National Institute of Justice; 2001. Available from: <http://www.ncjrs.gov/pdffiles1/nij/184894.pdf>.
16. Colman R, Widom C. (). Childhood abuse and neglect and adult intimate relationships: A prospective study. *Child Abuse Negl*. 2004; 28(11):1133–1151.
17. Fang X, Brown DS, Florence CS, Mercy JA. The economic burden of child maltreatment in the United States and implications for prevention. *Child Abuse Negl*. 2012;36(2), 156–165.