

Preventing Child Physical Abuse

Child physical abuse brutalizes, traumatizes, and intimidates children, and can lead to physical injury, violent behavior, mental and medical health problems, long-term physical and mental disability, brain injury, and in some instances death.

We, as a nation and as individuals, have the collective responsibility to promote strong and healthy families, thereby preventing child physical abuse. To accomplish this, we must strengthen services that prevent child abuse and neglect and support children and families. We must enact legislation to protect children from child physical abuse. And we must promote research, training, and public education to address the risk factors that can lead to child physical abuse and to foster the factors that protect against it.

Prevent Child Abuse America Advocates for:

● **Increasing funding for effective family support services such as home visiting, parent support groups, and parent education classes.** Physical abuse often occurs because the stressors of raising a family compound with one another, leading to anger and loss of control. Services such as home visiting, family support services, crisis nurseries, and parent education classes provide emotional support, parenting tools, increased knowledge of how children develop, and respite from the daily struggles of parenting. Currently, however, such programs do not reach all families who need them. It is therefore critical that funding sources for such programs are increased so that such programs can be made available in every community.

● **Allocating increased resources to initiatives that address the co-occurrence of child abuse and domestic violence.** Child physical abuse is highly correlated with domestic violence against women. Studies indicate a 30-60 percent overlap between violence against women and violence against children.¹ Child physical abuse is fifteen times more likely to occur in families where domestic violence is present.²

Therefore, initiatives such as multidisciplinary family violence response teams should be implemented in all communities. Such teams pool the expertise of victim advocates, child protection workers, law enforcement, and attorneys, thereby enhancing the investigation and prosecution of domestic violence and child abuse cases and ensuring the safety of women and children.

In addition, professionals from the domestic violence and child abuse prevention fields should cross train with each other. Such cross training would enhance coordination and understanding between the two related disciplines, thereby increasing the capacity of both to effectively address child physical abuse and domestic violence.

● **Increasing research to enhance the effectiveness of existing prevention programs.** Evaluation would clarify essential ingredients needed for an effective prevention program. Areas that require further investigation include the impact of prevention on family functioning; the effectiveness of prevention on target symptoms to both general child adjustment and risk for abuse; the comparative effectiveness of various forms of prevention services offered; and the aspects³ of a program that are most essential for achieving positive outcomes.

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Background

Definition of Child Physical Abuse

Child physical abuse is commonly defined as the non-accidental infliction of any type of physical harm or injury onto a child by a parent or caretaker.⁴ However, legal definitions of physical abuse vary from state to state. State laws also differ in how they define perpetrators of abuse (i.e. parents, guardians, relatives) and in how they determine exemptions from such definitions; religion, cultural practices, and physical punishment are among the most prevalent exemptions.⁵

The most common forms of physical abuse include hitting, kicking, punching, biting, whipping, and burning. Physical abuse can be identified by physical indicators such as welts, human bite marks, bald spots, burns, skeletal and head injuries, lacerations, abrasions, discoloration of skin, and unexplained bruise marks in various stages of healing.⁶

Scope of Child Physical Abuse

In the year 2001, approximately 168,278 children (18.6 percent of all substantiated cases of child maltreatment) were officially counted as victims of child physical abuse.⁷ In 2001, child physical abuse alone was responsible for 342 fatalities (26.3 percent of all CA/N fatalities), while a combination of physical abuse and child neglect accounted for an additional 285 fatalities (21.9 percent of all CA/N fatalities).⁸

Physical abuse goes beyond physical injury; a child also suffers long-term effects from emotional trauma. Ultimately, child physical abuse is detrimental to the physical and emotional development of a child and to the functioning of our society.

Nature of Child Physical Abuse

Physical abuse can occur in all families. Parents do not usually plan to abuse their children. Parents who physically abuse are often reacting to serious stress in their own lives. Research has shown that families that suffer from economic stresses, a history of drug or alcohol abuse, a lack of social supports such as relatives and friends, and/or domestic violence may be at higher risk.⁹

Consequences of Child Physical Abuse

Children who are physically abused are more likely to have suicidal thoughts, learning impairments, conduct disorder, a poor self-image, abuse drugs or alcohol, sexually act out, and/or show signs of depression.¹⁰

Adults who were physically abused as children have problems establishing intimate personal relationships. They are at higher risk for anxiety, depression, substance abuse, medical abuse, medical illness, and problems with school or work.¹¹ Furthermore, adults abused as children tend to continue the cycle of abuse by abusing their own children.¹²

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Additional Resources

- ¹ Dykstra, C.H. & Alsop, R.J. (1996). *Domestic violence and child abuse*. Englewood, CO: American Humane Association. Available online at: <http://www.calib.com/nccanch/pubs/otherpubs/harmsway.cfm>.
- ² Ibid.
- ³ Meyers, J.E.B., Berliner, L., Briere, J., Hendrix, C.T., Reid, T., & Jenny, C. (Eds.) (1996). *The APSAC Handbook on Child Maltreatment*. London: International Educational and Professional Publisher..
- ⁴ American Academy of Child and Adolescent Psychology. (2001). Glossary. Available online at <http://www.aacap.org/about/glossary/physical.htm>.
- ⁵ National Clearinghouse on Child Abuse and Neglect Information. (2002). *Statutes at a Glance 2002*. U.S. Department of Health and Human Services, Administration of Children and Families.
- ⁶ Prevent Child Abuse North Carolina. (2002). *Recognizing and reporting child abuse*. Available online at <http://www.childabusenc.org/report-abuse.htm>.
- ⁷ U.S. Department of Health and Human Services. (2003). *Child Maltreatment 2001*. Available online at <http://www.acf.hhs.gov/programs/cb/publications/cm01/outcover.htm>.
- ⁸ Ibid.
- ⁹ Straus, M. & Gelles, R. (1990). *Physical Violence in American Families: Risk Factors and Adaptations to Violence in Families*. New Brunswick, NJ: Transaction Publication.
- ¹⁰ Kolko, D.J. (2001). *Child Physical Abuse*. University of Pennsylvania: School of Medicine.
- ¹¹ Straus, M. (1994). Corporal punishment of children and depression and suicide in adulthood. In J. McCord (Ed.), *Coercion and Punishment in Long-Term Perspective*. New York: Cambridge University Press.
- ¹² Cappell, C. & Heiner, R.B. (1990). *The intergenerational transmission of family aggression*. *Journal of Family Violence*, 5: 135-152.
- ¹³ Widom, C.S. & Maxfield, M.G. (2001). An update on the "Cycle of Violence". *National Institute of Justice*
- ¹⁴ Ibid.

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