

Did Child Abuse Actually Go Down During Covid?

Many observers expected child abuse to increase during covid because it would be hidden from mandated reporters, giving abusers free rein.

However this [JAMA Pediatrics](#) article asserts that child maltreatment decreased during covid, as measured by child-abuse related Emergency Department (ED) visits.

Conversely, this [AAP News](#) article demonstrates that while visits were indeed fewer, they were more serious, with 50% more requiring hospitalization.

Which interpretation is true? The JAMA article draws broad conclusions from limited data, but the *AAP News* report doesn't explain the decrease in ED visits.

More information is needed to decide. For example, did fewer parents bring their children to hospitals because they feared getting covid? Or, perhaps increased income from the child allowance and stimulus checks actually did reduce maltreatment.

Pending better data, conclusions based on a few data points should be considered hypotheses, not facts.

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Narrative for podcast

Both the JAMA article, which is Journal of the American Medical Association, and the AAP story, which is American Academy of Pediatrics, were based in large part on the grimly entitled [Morbidity and Mortality Weekly Report \(MMWR\) article of December 11, 2020](#) by Elizabeth Swedo et. al. It is by the way cited as "Trends in U.S. Emergency Department Visits Related to Suspected or Confirmed Child Abuse and Neglect Among Children and Adolescents Aged <18 Years Before and During the COVID-19 Pandemic — United States, January 2019–September 2020". There is a link to this in the written script or narrative for this podcast, which is on our website at safepassageforchildren.org.

The JAMA article starts out asserting that the "rates of child abuse appear to have fallen in 2020". The conventional wisdom all along has been that the *reports* of child abuse have decreased, as mentioned correctly in the article from 20% to 70% depending on the state, but that actual abuse may be unchanged or have actually increased. The authors dismiss the usual explanation for this, which is that teachers are not seeing children and therefore not reporting abuse, because they point out, accurately, that only 21% of child maltreatment reports are made by teachers. On the other hand in most years 70% plus of maltreatment reports are made by mandated reporters, which include teachers but also other professionals such as childcare workers, coaches, and medical personnel. So the idea that child abuse reports have dropped because mandated reporters are not seeing children is still a credible hypothesis, which the JAMA article too quickly in our estimation dismissed.

Another issue is that the CDC data is more than a year old and we would want conclusions to be based on more current data. The authors do cite some more recent studies around protective factors, mainly measuring that parents felt closer to their children as a result of covid. But looking at the 2019-2020 data on ED visits, while both articles agree that the absolute number of ED visits went down, the CDC chart illustrates that *percentage* of the ED visits related to child abuse/neglect that required hospitalization spiked from 2.1% to 3.2%. That's a 50% increase. That happened most markedly in the few weeks immediately after the President declared a national emergency when there was a rather dramatic looking spike in the chart showing the percentage of ED visits requiring hospitalizations. So in other words, fewer visits overall but a higher percentage of them being serious enough to require hospitalization. In terms of less overall abuse, it seems unlikely that parents would stop harming their children immediately because a politician declared a pandemic, with their raised fist as it were stopping in mid-air as they were about to strike a child, because they saw the President on a newscast. More likely is that they avoided going to the ED unless they thought the child might actually die. This hypothesis would better explain the number of visits going in one direction and the seriousness of the injuries in the other.

While the kind of "proclamation" or grand announcement flavor of the JAMA article makes me uncomfortable, by which I mean they seem very confident of their conclusions even though there are still a lot of gaps of the data, we should say in their favor that medical personnel in the Twin Cities have been echoing some of the themes of the JAMA authors from the beginning of the pandemic. Here in Minnesota they have also noticed a drop in ED visits, although recently as we have come out of the pandemic there have been one or two rebounds where there has been an increase in particularly serious cases. On the other hand, if you look at the charts in the CDC weekly report, even during 2020 the number of ED visits for child abuse seemed to be catching up again with 2019 data, while both the number and the percentage of ED visits resulting in hospitalization was higher. So if we could get a look at 2021 and 2022 data we might see, if the trend continued, that there is no longer a drop in ED visits.

On another theme, the JAMA article emphasizes protective factors, for example that proportionately more women tend to be unemployed and therefore home with the children, and women statistically are less likely to physically abuse or sexually assault the children. In addition, while the secrecy afforded abusers by covid works in one direction, the fact that in some cases more people are in the household may also be a protective factor, basically because it's harder to sexually assault a child and there may be some inhibitions about losing it with them when there are other adults present.

The JAMA article also reported on a survey of parents that they did with the American Academy of Pediatrics, Prevent Child Abuse America, and the Centers for Disease Control and Prevention. Among other findings they suggest that despite loss of employment, the federal supports really help families get through the crisis.

There is also some evidence presented in the JAMA article, citing the Institute for Family Studies national survey of youth, that historically when people go through a trauma together, it makes them closer.

Taken together, this information suggests that children in some families fared better during the pandemic and in other families fared worse. Again, I emphasize the words “suggests” and “hypotheses”. As in so many other areas of child protection in foster care these days, as well as in many other aspects of our common life, we may be too quick to accept as fact a theory simply because it has been oft-repeated. The people who were skeptics from the start that the drop in child maltreatment reports masked a steady rate or increase in actual maltreatment turn out to have some data in support of their position. On the other hand it's far too early to declare that fewer children were actually abused because covid brought children and their parents closer together, and that the impact of federal economic supports substantially offset other losses in income.

Before we start making conclusions about what happened during covid let's let some time go by. In terms of broad public policy, we will want to know if covid strengthens the case for more economic supports, such as a childcare allowance or rental supports or a universal minimum wage. Regarding child maltreatment specifically, down the road will we discover more injuries that occurred during this period that are diagnostic of abuse, but were never reported at the time? Is there yet to come a post-covid catchup phase where child abuse that was not identified begins to surface once children get back to school and child care? Are we going to see, more long-term, indicators of severe trauma in terms of children's mental health and, much longer term, what children self-report 30 or 40 years from now as adults? There are many chapters yet to be written in this story, so as we said in the beginning we should treat any research that comes out as helping fill in part of the puzzle, rather than drawing a complete picture of the pandemic that we can tie a bow on and put in the history books.

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