

## State Team Report Reviews All Child Deaths in 2007, Including Analysis of Homicides of Children

Iowa's multidisciplinary Child Death Review Team (CDRT) has issued its report reviewing all child deaths in 2007. The annual report reviews the circumstances and causes of deaths of 412 children and recommends how officials might reduce child deaths in the future.

The CDRT (see Inset 1) has now analyzed more than 5,300 child deaths, beginning with a review of deaths in the year 1995. In his foreword to the latest report, issued in December 2008, chair Dr. Gerald Loos notes the consistency of this year's data and recommendations with that in the previous twelve reviews of child deaths and declares, "Somehow the message is not being received by the right party. Who will champion the cause? So far, the plan has not been effective. Now is the time for change. We need to protect Iowa's most important resources – its children."

The team has five classifications for child deaths: *natural*, *accidental*, *homicide*, *undetermined*, and *suicide* (page 18). The vast majority of deaths (59 percent in 2007) are categorized as *natural*, which the report defines as "the result of some natural processes, such as disease, prematurity/immaturity or congenital defect." The team classified another 24 percent of the 2007 deaths as *accidental* – meaning "the death resulted from some unintentional act."

Prevent Child Abuse Iowa has reviewed the December 2008 report and the preceding twelve to see what they reveal about child deaths that are the result of *homicide* – defined as a death that "was caused at the hands of another individual but not necessarily with the intent to kill." PCA Iowa's review of CDRT reports for 1995 through 2007 examines the number of young child homicide victims, the disproportionate number of victims who are very young, the most common causes and perpetrators of these homicides, and CDRT recommendations to prevent future homicides.

### Inset 1

#### Review Team Responsibilities and Membership

The primary goal of the Child Death Review Team is to reduce the number of child deaths by making recommendations on prevention strategies for government officials, professionals, and the general public. For the years 1995 through 1999, the team reviewed all deaths of children who were less than seven years old. As the result of legislation, the CDRT began reviewing the deaths of all children in 2000.

Iowa law designates that the team have fourteen members from a wide range of professions and medical specialties, including the state medical examiner, a county attorney, an emergency room nurse, and insurance industry, and experts in perinatology, pediatrics, law enforcement, social work, mental health, substance abuse, domestic violence, family practice, and Sudden Infant Death Syndrome (SIDS). The team also includes seven state government liaisons.

The team's responsibilities include:

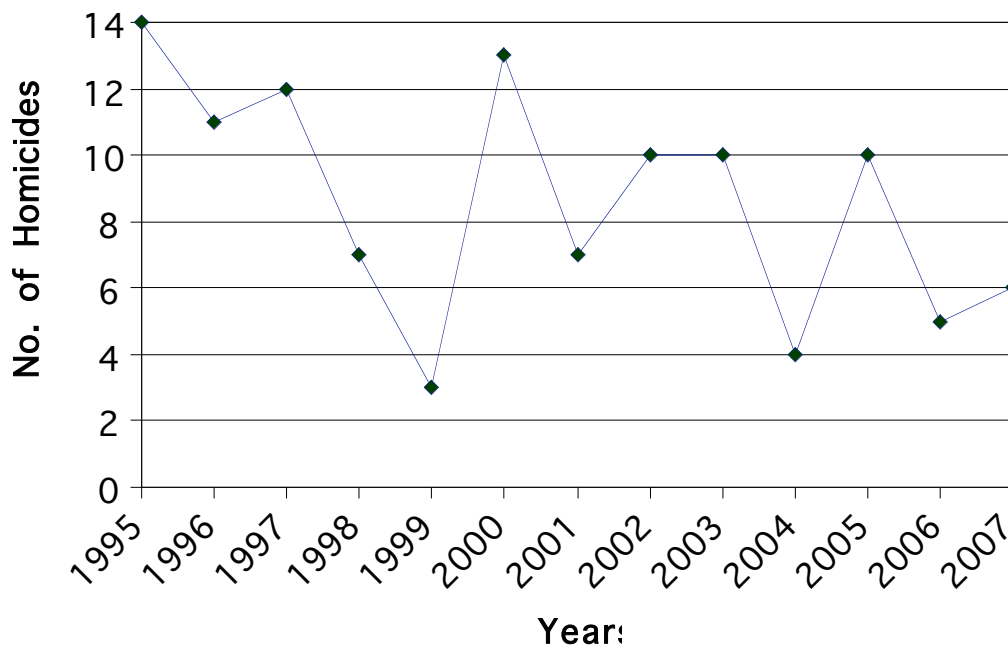
- Collecting, reviewing, and analyzing records pertaining to child deaths
- Preparing an annual report on its findings
- Recommending to the governor and legislature interventions to prevent future child deaths
- Recommending how state agencies can improve child services to prevent future child deaths
- Maintaining the confidentiality of all records it reviews
- Developing protocols and establishing a child abuse-related death committee

## Number of Homicides of Young Children

The CDRT report lists nine children as victims of homicide in year 2007, with six of the victims being less than seven years old. Since the team reviews started in 1995, 112 Iowa children under the age of seven have been homicide victims – an annual average of between eight and children a year.

As Chart 1 shows, the number of deaths has varied widely from year-to-year, though with a small average annual decrease since 2000. The highest number of young child homicide victims was in 14 in the year 1995; the year 2000 had the second highest figure (13). The year 1999 had the lowest number of young child homicides (3), with the 4 child homicides in 2004 the next lowest.

**CHART 1**  
**Homicides of Young Children in Iowa, 1995-2007**



## The Disproportionate Number of Victims Who Are Very Young

Very young children are disproportionately the victims of homicide, according to the CDRT reports. Over the last eight years on which the CDRT has reported (2000 to 2007), 28 of the 109 child and youth homicide victims were one year old or younger – a victimization rate that is six times higher than the rate for children age one through seventeen years old.

National figures from the United States Administration on Children and Families compare the rates, by child's age, of fatal maltreatment – a similar, though different, measure than the CDRT homicide category. According to the Administration's most recent report on child abuse, *Child Maltreatment 2006*, 44.2 percent of the reported victims of fatal child maltreatment in 2006 were less than one year old – a victimization rate that is thirteen times their proportion in the population compared to that for children age one through seventeen years.

## The Causes and Perpetrators of Young Child Homicides

The CDRT determines and reports the cause of each homicide. According to team reports, from 1995 through 2007, 49 of the young child victims died from being shaken/slammed, including two children in 2007. This represents 44.5 percent of the determined causes of all young child homicides for those thirteen years. The number of shaking/slamming deaths has ranged from highs of nine in 1997 and eight in 2000 to a low of one each in 1999 and 2002. Thirty-two of these 49 shaken/slammed deaths involved children who were one year old or younger.

The other child homicide victims died from a wide range of identified causes, including blunt trauma to the abdomen or head (10), being beaten/battered (8), drowning (7), gunshot wound (7), and abandonment or exposure (4) (see Table 1). The causes of two of the homicides were undetermined.

**TABLE 1**  
**Causes of Young Child Homicides, 1995-2007**

Causes of death	No.
Shaken-slammed	49
Blunt trauma	10
Beaten/battered	8
Drowning	7
Gunshot	7
Abandoned/exposure	4
Housefire/smoke inhalation	3
Strangulation	3
Suffocation/asphyxiation	3
Carbon monoxide	2
Hyperthermia	2
Multiple stab wounds	2
Motor vehicle	2
Starvation/dehydration	2
Neglect	2
Drug administration error	1
Sexual abuse	1

The CDRT reports the relationship of the perpetrators of homicides to their child victims. Table 2 (next page) summarizes its findings for 1995 through 2007. Biological fathers were the perpetrators of 37 young child homicides, followed by male paramours, who committed 26 homicides. The next most common perpetrators were biological mothers (24 homicides) and sitters or child care providers (10 homicides). The perpetrators of five of the young child homicides have not been determined.

**TABLE 2**  
**Perpetrators of Young Child Homicides, 1995-2007**

<b>Perpetrators</b>	<b>No. of Victims</b>
Father	37
Mother's male paramour	26
Mother	24
Sitter/child care provider	10
Other relative	3
Friend	2
Stepfather	2
Stranger	2
Adoptive mother	1
Foster father	1
Stepmother	1
Father's paramour	1
Foster sibling	1

### **Recommendations to Reduce Homicides of Young Children**

Each CDRT report recommends how to reduce child deaths from all causes. The team recommendations regarding homicide prevention have been similar in recent years. The 2007 report does contain one major new recommendation: that the legislature pass a statewide shaken baby syndrome prevention program. In support of this recommendation, the team declares:

Shaken baby syndrome deserves special attention due to its devastating effects. The abuse causes the deaths of children every year. Survivors require intensive and expensive care, instead of the healthy lives they should have led. The prevention program is an intervention aimed at parents and caregivers of newborns (page 10).

Both the Iowa House and Senate considered legislation in 2008 (SF 349 and HF 2058) that would have established such a statewide shaken baby syndrome prevention program. Neither of these bills passed. Passage of similar legislation in 2009 is one of Prevent Child Abuse Iowa’s advocacy agenda items.

These are some of the other strategies that the CDRT recommends for reducing child homicides:

1. *Helping parents cope with the stresses of caring for very young children.* The CDRT observes that the homicides of very young children are “often the result of beating or shaking the baby” (page 24). The team report further states that:

Childcare is stressful, and when these stresses escalate, caregivers need someone to call or some other outlet. Information about these resources should be given to all new parents before or after the baby’s birth to help prevent future child homicides. Early intervention could save lives (page 24).

To help parents, the report also recommends that, “Inexperienced parents should be linked with a mentor to whom they can turn when they have questions or are stressed” (page 24). The report further calls for increased public service announcements about the importance of parents or other caretakers taking a “time out” when childcare stresses become overwhelming. According to the CDRT, “After the birth of every new infant, parents should be given a list of respite care resources/options and emergency numbers at the time of hospital discharge. These resources should also be discussed at prenatal visits” (page 25).

2. *Showing care in the selection of caretakers.* CDRT reports usually address the particular risk to children from male paramours or other unrelated caretakers. In this regard, the December 2008 report recommends that: “Mothers should be cautioned about careful selection of individuals who care for their children, most especially paramours” (page 24). To assist in this selection, the report notes that local police departments have criminal history reports. Iowa criminal records are also available online at [www.iowacourtsonline.org](http://www.iowacourtsonline.org).