

Trends and Issues paper:

Child deaths – fatal assault and neglect

Number 2
January 2012

Fatal assault and neglect

Introduction

This paper examines the issue of fatal assault and neglect in children and young people in Queensland.

The death of a child from assault or neglect is a tragic event which goes to highlight the critical issues of safeguarding children and developing effective social policy. The requirement to protect children from threats to life posed by abuse and neglect is internationally enshrined in the United Nations Convention on the Rights of the Child and within commonwealth and state legislation.

Previous research has suggested that the number of children who die in circumstances concerning maltreatment is considerably higher than official statistics suggest.¹ The Commission is currently conducting research into the nature and extent of the fatal assault and neglect of children in Queensland. The aim of this research is to better understand the role that familial maltreatment, in particular, plays in the deaths of children and young people, and to build a solid evidence base to assist in reducing the number of maltreatment-related fatalities in the state.

Categories of fatal assault and neglect

The Commission's initial research in this area has led to the development of a revised categorisation system for deaths from assault and neglect. The previous system was based

around the typology of fatal assault developed by Lawrence (2004).²

The Commission's revised categorisation system organises assault and neglect deaths into 8 event categories: neonaticide; fatal child abuse; fatal neglect; domestic homicide; peer homicide; intimate partner homicide; acquaintance homicide; and stranger homicide.

The categories are based primarily upon the different developmental stages in the lives of children and young people aged 0 to 17 years: from infancy and early childhood, where children are entirely dependent upon others for their survival, through to adolescence where young people develop a range of new social networks.

The categories of neonaticide, fatal child abuse, fatal neglect and domestic homicide are, by definition, familial; the categories of peer homicide, intimate partner homicide, acquaintance homicide and stranger homicide are essentially non-familial.³

Neonaticide

Neonaticide is defined as the killing of an infant within 24 hours of birth. The Commission's definition of neonaticide is expanded to include relevant acts or omissions by persons other than the mother, including deaths shortly following birth which are the result of an assault upon the pregnant mother.

Fatal child abuse

The category of fatal child abuse describes deaths from physical abuse perpetrated by a caregiver against a child who is reliant upon

¹ For example, see: Alder, C & Polk, K 2001, *Child Victims of Homicide*, Cambridge University Press; Herman-Giddens M, Brown G, Verbeist, S et al. 1999, Underascertainment of child abuse mortality in the United States, *Journal of the American Medical Association*, 282, 463-467; Palusci V, Wirtz, S & Covington T 2010, Using capture-recapture methods to better ascertain the incidence of fatal child maltreatment, *Child Abuse & Neglect*, 34, 396-402.

² Lawrence, R 2004, Understanding fatal assault of children: a typology and explanatory theory, *Children & Youth Services Review*, 26, 837-852.

³ A more detailed outline of these categories can be found in the Commission's *Annual Report: Deaths of children and young people Queensland 2010-11*, 102-103.

them for care and protection. Victims of fatal child abuse are predominantly infants, toddlers or preschool-aged children.

Fatal neglect

Fatal neglect involves deaths arising from extraordinarily irresponsible or reckless acts or omissions by persons responsible for the care and protection of a child. The category is most likely to involve those younger children who are wholly reliant upon their primary caregivers for the necessities of life.

Domestic homicide

In domestic homicide, there is a clear intent to kill on the part of the perpetrator. Such events are typically characterised by evidence of a recent breakdown in the parental relationship/family structure and/or an acute mental illness in one or both parents. It is common in cases of domestic homicide for the perpetrator to suicide subsequent to their killing one or more family members.

Peer homicide

The category of peer homicide accounts for lethal peer-to-peer confrontations that most commonly occur amongst older children in public places.

Intimate partner homicide

Some young people are killed by their intimate partners. The body of evidence gathered by the Commission since 2004 shows that in intimate partner homicide, the victim is often a female in the 15-17 year age group and the perpetrator an older, adult male.

Acquaintance homicide

In some cases children are killed by an adult known to – but not intimately connected with – either the victim or their family. Perpetrators may include neighbours, family friends, on-line contacts or adults who associate with a young person on a short-term basis.

The Commission has devised the category of acquaintance homicide to differentiate from domestic homicide, where there is an unambiguous familial association, and stranger homicide, where there is no prior association between perpetrator and victim.

Stranger homicide

Stranger homicide involves those deaths that occur at the hands of an adult person who is unknown to them.

Categorisation of fatal assault and neglect cases in Queensland, 2004-11

Between January 2004 and September 2011, the Commission recorded a total of 60 deaths of children and young people due to assault and neglect. Table 1 details these deaths by year and victim gender.⁴

Table 1

Year	Gender		Total
	Female	Male	
2004	5	5	10
2005	3	4	7
2006	4	7	11
2007	4	7	11
2008	4	1	5
2009	3	3	6
2010	2	4	6
2011	2	2	4
Total	27	33	60

Source: Queensland Child Death Register, 2004-11

Since 2004, there has been an average of approximately 8 assault and neglect fatalities of children and young people identified in Queensland annually.

⁴ All fatalities occurred between 1 January 2004 and 30 September 2011. The criteria for inclusion is deaths where: a perpetrator has been charged by police; a perpetrator has killed a child and then suicided, or; at the time of reporting, the available police/coronial evidence has been deemed sufficient to establish that assault or neglect caused the death.

Table 2

Category	Under 1 year	1–4 years	5–9 years	10–14 years	15–17 years	Total
	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>
Neonaticide	3	n/a	n/a	n/a	n/a	3
Fatal child abuse	10	9	1	-	-	20
Fatal neglect	-	4	-	-	-	4
Domestic homicide	4	4	2	4	2	16
Peer homicide	n/a	n/a	-	1	6	7
Intimate partner homicide	n/a	n/a	n/a	n/a	4	4
Acquaintance homicide	-	1	-	1	2	4
Stranger homicide	-	-	1	-	1	2
Total	17	18	4	6	15	60

Source: Queensland Child Death Register, 2004–11

Note: Certain categories are by definition not applicable to some age groups.

Table 2 details the deaths by category of event and victim age.

Fatal child abuse has been the most common category of death (33.3%), followed by domestic homicide (26.7%). Fatal child abuse accounted for the majority of deaths in the under 1 year and 1–4 year categories. Peer homicides accounted for the majority of deaths in the 15–17 year category. Stranger homicide was the least common category of death, with 2 fatalities recorded.

In 9 of the deaths categorised as domestic homicide (7 cases) the perpetrator subsequently suicided.⁵ In one case of fatal child abuse, the perpetrator also suicided proximate to the child's death.

Over half of all child deaths from fatal assault and neglect (58.3%) involved children under 5 years of age

Overall, deaths from assault and neglect in Queensland between 2004 and 2011 have followed internationally recognised patterns in that the majority of fatalities occur in the youngest age groups, followed by a significant decrease in the middle school years and a subsequent increase in the 15–17 year age bracket.⁶

Of the 60 children and young people who died from fatal assault and neglect, 37 (61.7%) were known to the child protection system due to the complex interplay of risk factors present in their lives.⁷

⁵ In 2 cases the perpetrator killed more than one child.

⁶ Alder & Polk 2001, 118.

⁷ A child is deemed to have been known to the child protection system if, within 3 years prior to their death, the Department of Communities, Child Safety Services became aware of child protection concerns, alleged harm or alleged risk of harm to the child, or took action under the *Child Protection Act 1999* in relation to the child.

Directions for future research

Research into deaths involving violence and maltreatment has a twofold purpose:

1. to develop proposals and strategies to reduce child maltreatment and to address problems before they lead to serious harm, and
2. to improve systems of response post-event so as to appropriately recognise and respond to deaths due to assault and neglect.

To help develop a better understanding of the true extent of fatal assault and neglect in Queensland, the Commission has set two further research priorities.

First, a classification model will be established for use in identifying all deaths of children and young people which involve, or are highly concerning of, assault and neglect.

Second, the Commission will closely analyse a cohort of cases from the Child Death Register, to examine how assault and neglect may have played a part in deaths that have to date not been classified as maltreatment-related.



commission for
children and young people
and child guardian

Contact details:

Commission for Children and Young People and Child Guardian
Level 17, 53 Albert Street
Brisbane Queensland 4000

Telephone: 07 3211 6700

Email: info@ccypcg.qld.gov.au