



## Child Abuse and Neglect

Approximately 1,500 children die of abuse or neglect each year. The Department of Health and Human Services (HHS) estimates that more than three million reports of possible child abuse or neglect were made to child protective agencies in 2005. While 900,000 of those reports were substantiated, almost 40 percent of the victims received no services following the substantiation. These data reveal a public health crisis warranting concerted national attention.

### Characteristics of Child Abuse and Neglect

- Most often children know their abuser. Children are most often physically abused by a parent or other caretaker. Victims of sexual abuse are most often abused by an adult they know.
- Common characteristics of abusive and neglectful parents include high stress levels, inadequate parenting skills and limited knowledge of child development.
- Approximately half of the families referred to Child Protective Services are receiving welfare at the time, and more than half have received assistance in the past. In addition, research suggests that as the education levels of parents rise, child abuse incidence declines.
- Research has shown that most perpetrators of sexual abuse are men and that many of them were sexually abused as children. However, only a small minority of children who are sexually abused become abusers themselves.
- Studies have shown that between one-third and two-thirds of child maltreatment cases involve substance abuse.

### Consequences of Child Abuse and Neglect

- Child abuse and neglect may result in significant short- and long-term physical, psychological and behavioral health problems.
- Mental health problems often resulting from child abuse and neglect include depression, anxiety and dissociative disorders, post-traumatic stress disorder, substance abuse, and suicidal ideation.
- Child abuse and neglect may adversely impact a child's physical, cognitive, emotional, and social development. Timely identification and appropriate intervention with individualized assessment and tailored supports are required to minimize negative consequences.
- Research indicates that children who are hospitalized for a medical condition and have been identified as abused or neglected require longer hospital stays, have more severe injuries, worse medical outcomes, and are more likely to die during the current hospitalization compared with other hospitalized children.



# Child Abuse Prevention and Treatment Act (CAPTA)

**CAPTA is the key federal legislation addressing child abuse and neglect.** Originally enacted in 1974, CAPTA was most recently amended and reauthorized on June 25, 2003, by the Keeping Children and Families Safe Act of 2003 (P.L. 108-36). Appropriations for CAPTA are made in three key areas. These include:

- **Title I: Basic State Grants** help strengthen child protection agencies by providing funds to improve the workforce challenges of the child protection including high turnover rates, insufficient training, low salaries, insufficient supervision, unmanageable caseloads, poor communication, and unsafe working conditions.
- **Title II: Community-Based Prevention Grants** help establish and maintain prevention focused programs and activities, such as parenting education classes, home visiting services, mutual support groups for parents, respite care for families with disabled children, as well as family resource centers.
- **Discretionary and Research Activities** support program development, research, training, technical assistance, and the collection and dissemination of data to advance the prevention and treatment of child abuse and neglect. These funds also support the National Child Abuse and Neglect Data System, the only federal data collection effort to determine the scope of child abuse and neglect. Other national initiatives supported include the National Incidence Study of Child Abuse and Neglect, the National Resource Center on Child Maltreatment, and the National Clearinghouse on Child Abuse and Neglect.

## CAPTA Funding History

- The positive impact of CAPTA has been well demonstrated. However, an overwhelming number of children continue to suffer due to a lack of resources.
- Prior to 2005, it had been ten years since CAPTA funding was last increased, leaving the nation's child welfare system stretched beyond capacity as it attempted to tackle the growing problems surrounding child abuse and neglect.
- An additional \$10 million was appropriated under CAPTA discretionary activities for Fiscal Year 2008. This funding was allocated specifically for important home visitation programs. While this is a much needed allocation of funds, additional funding in other vital areas remains critical.
- CAPTA continues to be underfunded and the President's Fiscal Year 2009 budget proposes an additional \$1 million cut to Title I programs.

CAPTA	FY06	FY07	FY08	FY09 (proposed)
Basic state grants	\$27 million	\$27 million	\$27 million	\$26 million
Prevention grants	\$42 million	\$42 million	\$42 million	\$42 million
Discretionary & Research grants	\$26 million	\$26 million	\$37 million*	\$37 million*

*\*An additional \$10 million was appropriated under CAPTA discretionary activities for Fiscal Year 2008 specifically for home visitation programs. While this is a much needed allocation of funds, the need for funding in other vital areas remains critical.*

## APA Recommendations

**The American Psychological Association strongly urges Congress to support funding for CAPTA at its fully authorized level in Fiscal Year 2009.** This would include increasing funding to \$84 million for Title I (Basic state grants), \$80 million for Title II (Community-based prevention grants), and maintaining funding for discretionary activities at the Fiscal Year 2008 level of \$37 million. This funding request would enable states and communities to maintain and expand efforts to help improve the lives of numerous children who are victims of child abuse and neglect every year, and to prevent the occurrence of still preventable cases of abuse and neglect.