Why Have Child Maltreatment and Child Victimization Declined?

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Various forms of child maltreatment and child victimization declined as much as 40–70% from 1993 until 2004, including sexual abuse, physical abuse, sexual assault, homicide, aggravated assault, robbery, and larceny. Other child welfare indicators also improved during the same period, including teen pregnancy, teen suicide, and children living in poverty. This article reviews a wide variety of possible explanations for these changes: demography, fertility and abortion legalization, economic prosperity, increased incarceration of offenders, increased agents of social intervention, changing social norms and practices, the dissipation of the social changes from the 1960s, and psychiatric pharmacology. Multiple factors probably contributed. In particular, economic prosperity, increasing agents of social intervention, and psychiatric pharmacology have advantages over some of the other explanations in accounting for the breadth and timing of the improvements.

The worrisome stories about crimes against children that regularly fill the media have unfortunately obscured some more positive news from the statistical reports on these same offenses. Child victimization of various types has been declining since the early 1990s, in some cases declining dramatically.

Facts about the Decline

Here is some of the trend information pointing to improvements (for information on sources, see the Appendix):

• Sexual abuse started to decline in the early 1990s, after at least 15 years of steady increases. From 1990 through 2004, sexual abuse substantiations were down 49% (Figure 1).

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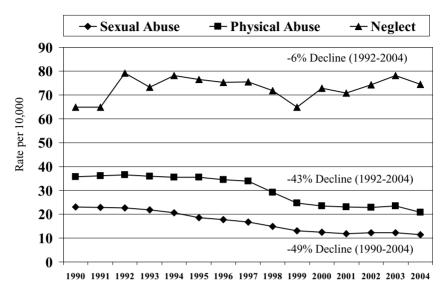


Fig. 1. U.S. maltreatment trends.

Source: NCANDS

- Physical abuse substantiations joined the downward trend starting in the mid-1990s, in a decline that was most dramatic between 1997 and 2000. From 1992 through 2004, physical abuse substantiations have declined 43% (Figure 1).
- Sexual assaults of teenagers have dropped, according to the National Crime Victimization Survey (NCVS). From 1993 through 2004, overall sexual assaults decreased 67% (Figure 2). The subgroup of sexual assaults by known persons was down even more.
- Other crimes against teens 12–17 were also down dramatically as measured by the NCVS (Figure 2). Aggravated assault was down 74%, simple assault down 63%, robbery down 72%, and larceny down 55%. This has been in the context of a crime decline for victims of all ages.
- Juvenile victim homicides have declined 50% from 1993 to 2004, a drop that has been larger than the 42% drop in homicide for victims 18 and older. The drop has been more dramatic for the youth 14–17 (down 62%) than for younger children (down 36%) (Figure 3).
- Domestic violence has also been declining, according to the NCVS (Rennison & Welchans, 2000), down 49% from 1993 to 2001, meaning that children were probably being exposed to fewer violent parents.

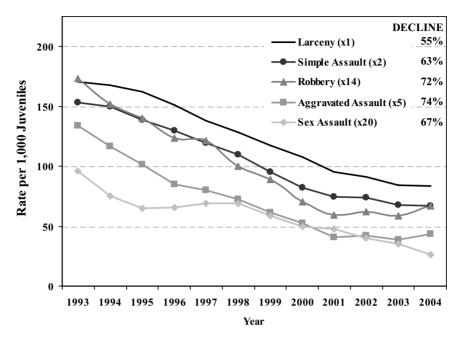


Fig. 2. Juvenile victimization trends, 1993–2004 (NCVS). Age 12–17 years; 3 year averages.

In the review that follows, we will try to understand why the declines have been occurring. First we will consider the question of whether they are real trends or only statistical or administrative artifacts. Then we will try to characterize the declines in terms of their dimensions and commonalities and formulate some core features that need to be explained. Then we will review a variety of explanations that have been forwarded for the declines, many of them from the field of criminology, evaluating the extent to which they account for some of the core features. Finally, we suggest some implications of the declines for public policy, practice and research.

Is the Improvement Real?

Some of the statistics showing declines have provoked skepticism (Jones, Finkelhor, & Kopiec, 2001), particularly the drop in sexual abuse. Because the sexual abuse (and other child maltreatment) figures are based on reported cases known to and substantiated by state child protection agencies, observers have speculated that the decline might not be real. The drop might simply reflect changed standards for investigation, decreased reporting to agencies, reduced funding, staff

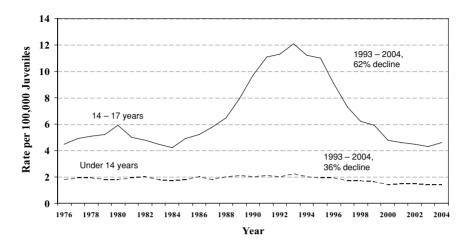


Fig. 3. Juvenile homicide trends, 1976–2004.

Source: James Alan Fox and Marianne W. Zawitz, Homicide trends in the United States. U.S. Dept. of Justice, Office of Justice Programs, Bureau of Justice Statistics; webpage, www.ojp.usdoj.gov/bjs/homicide/homtrnd.htm, Sep. 13, 2006.

and interest, or statistical or other artifacts (Finkelhor & Jones, 2004; Jones et al., 2001).

But after considerable efforts to study the CPS data in context, we have concluded that they probably reflect at least in part a real decline in sexual abuse. The following are among the most important findings that suggest that the sexual abuse declines are real (Finkelhor & Jones, 2004):

- The decline in agency statistics is paralleled by declines in victim self-reports from at least two other sources, the NCVS (data on sexual assault to teens by known persons) and a statewide survey of students in Minnesota (Minnesota Department of Children - Families & Learning and Minnesota Department of Human Services, 2001).
- 2. The patterns in the CPS data do not bear the hallmarks of declines due to decreased reporting, changed standards or other artifactual explanations. For example, declines are strong for all categories of reporting source, and for all types of sexual abuse. Cases with more equivocal or problematic evidence have not declined more than other cases (for more details, see the analyses in Finkelhor & Jones, 2004; Jones, Finkelhor, & Halter, 2006).
- 3. There have been declines in the most clear-cut, unambiguous and uncontroversial cases of sexual abuse, like those that involve offender confessions and sexually transmitted diseases (Finkelhor & Jones, 2004).

4. Other closely related child welfare indicators have also declined over the same period. For example, in addition to other forms of juvenile and adult crime victimization, there have also been declines in teen suicide, running away, juvenile delinquency, and teen pregnancy (Hammer, Finkelhor, & Sedlak, 2002; Moore et al., 2001). These other problems are generally thought to be outcomes of or connected to sexual abuse. These related declines, from independent data sources, give plausibility to the sexual abuse decline.

Much of the same argument applies to the decline in physical child abuse. The agency data probably reflect a real decline because there are confirmatory victim surveys, broad declines across categories, and no indications of data artifacts.

The downward trend shown for juvenile victims (and adult victims) in the NCVS data has prompted less skepticism. The NCVS is a large national survey conducted for many years under rigorous conditions by the Census Bureau for the U.S. Department of Justice. Questions have been posed about whether some methodological factors might have lowered NCVS incidence (Steffensmeier & Harer, 1999). But the dramatic drops uncovered by the NCVS have been backed up by parallel changes noted in police statistics from the Uniform Crime Reporting system (Lynch, 2002; Steffensmeier & Harer, 1999). Almost all criminologists accept the NCVS evidence for a major crime decline (Blumstein & Wallman, 2000; Conklin, 2003; Rosenfeld, 2004), and there is little reason to believe the juvenile victim trend is any less valid than the overall pattern.

Breadth and Variety of Declines

Thus the evidence for major declines is fairly strong, and well accepted among criminologists. Some of the details of the declines, however, are more complex and less widely acknowledged. These details, if they show variable patterns in what declined and among whom, could provide clues about what was behind the trend.

However, most of the declines have not occurred in patterns that would give strong clues. For example, the declines have been very pervasive in regional and demographic terms. For example, the sexual abuse declines have occurred in 41 states and the physical abuse declines in 38 states with no apparent regional pattern (Jones et al., 2006). The NCVS declines have also shown little regional variation. There is little evidence that the declines were confined to certain races or ethnic groups (Baum, 2005).

The declines have also occurred across a broad range of victimization types. They include victimizations that are rare, serious, regionally variable, and indicative of more pathological circumstances like homicide, but they also include victimizations that are fairly common like simple assaults. This is important because some of the factors that affect homicide trends like gun availability and the

quality of medical care, are not likely to be factors in explaining trends for simple assaults among youth.

The declines have also occurred across victimizations that involve very different motives and contributory factors. For example, victimizations that occur primarily at the hands of adult caregivers, such as physical abuse, have declined, but so have victimizations that occur primarily at the hands of other youth like many of the peer assaults against teenagers. Offenses that have their etiology in frustrated and incompetent parenting have declined, but also those that have their etiology in sexual deviation. Some of these offenses are probably very sensitive to short-term and situational stresses (e.g., child abuse may increase when child care is no longer available or unaffordable). But other child victimizations may involve more long-developing etiological factors (like sexual deviations).

Our analysis of the sexual abuse decline, for example, found that both extrafamilial and intrafamilial offenses were down (Jones et al., 2001). This may mean that pedophiles, persons with enduring disturbance of sexual orientation, and who are much more numerous in the extrafamilial offender population, have been as affected as incestuous abusers, who are typically considered "situational offenders" (Lanning, 2001).

One large exception to the overall decline pattern, however, concerns child neglect. Whereas declines occurred first in sexual and then a few years later in physical abuse, child neglect, one of the other major categories of child maltreatment, has not declined. By 2003, substantiated neglect cases were 14% above the level in 1990 although down 7% from a peak in 1992 (Figure 1), making neglect one of the few forms of child victimization that did not show a marked decline for the decade. The trend for neglect may be misleading, however. One analysis suggests that a true, underlying decline in neglect has been masked in recent years by an expansion of definitions and identification efforts (Jones et al., 2006). There have been recent child welfare mobilizations about the children of drug abusers or the children of domestic abusers, which are often categorized as cases of neglect after investigation. Canadian researchers have explained a dramatic rise in neglect in that country on such sensitization factors (Trocme et al., 2005). An analysis of state data in the United States found at least some evidence consistent with this hypothesis, as well (Jones et al., 2006). But if, contrary to these findings, neglect did have a different trend than other forms of child victimization, then this is an important exception that theories of the decline need to explain.

Another exception to the pattern has been the data on child maltreatment fatalities. While homicide in general and child homicide in particular have declined overall, the level of child maltreatment fatalities have not shown such a trend. The rates calculated from state reports by the National Child Abuse and Neglect Data System went from 1.68 per hundred thousand in 1995 to 2.03 per hundred thousand in 2004 (U.S. Department of Health and Human Services - Administration

on Children Youth and Families, 2006), but the rise is probably due to data system changes. (The system began augmenting fatalities known only to child protection agencies with fatalities from other sources (U.S. Department of Health and Human Services - Administration on Children Youth and Families, 2002)). Child maltreatment fatalities differ from homicide in that they are heavily concentrated among very young children and include many cases, particularly involving neglect that would not be charged by law enforcement officials as homicides. It is likely in our view that the development, implementation and growing use of Child Fatality Review Boards (Durfee, Tilton Durfee, & West, 2002), and other intensive forensic efforts, have masked a decline in child maltreatment fatalities, by identifying child maltreatment as a feature of a considerable number of child deaths that might not have been previously so identified.

The Context for Declines

As already suggested, juvenile victimization has been declining in parallel with a number of other closely related social improvements. On the one hand, crime victimization for adults has been declining in almost equal measure to the decline for juveniles. Looking in another direction, a variety of other child welfare indicators have also registered improvements during the period that juvenile victimization was declining. Teen suicide fell 41% from 1994 to 2003 (Centers for Disease Control and Prevention - National Centers for Injury Prevention and Control, 2005). Births to teens fell 40% from 1994 to 2003 (Romano-Papillo et al., 2002; Ventura, Mathews, & Hamilton, 2001). The number of children living in poverty declined 24% starting in 1994, until 1999 when it leveled off (Federal Interagency Forum on Child and Family Statistics, 2000, 2005; U.S. Bureau of the Census, 2003). Running away declined, both in police statistics and in reports from children and families (Hammer et al., 2002). The decade of the 1990s also saw an improvement in child behavior problem and competence scores on the Child Behavior Checklist, reversing an earlier period of significant deterioration in this widely used child assessment measure (Achenbach, Deumenci, & Rescorla, 2003).

One other indicator, however, not synchronized with the general trend was juvenile drug usage. The use of illegal drugs continued to rise in the 1990s (after a drop in the previous decades), and it only started to decline in the late 1990s. For example, illegal drug use among eighth graders declined 27% from 1998 to 2004 (Johnston, O'Malley, Bachman, & Schulenberg, 2005).

Taken together, though a large number of child welfare indicators were showing improvement, mostly starting in 1993 or 1994. These improvements may be independent or connected, but their conjunction is thought-provoking when it comes to formulating explanations.

The Timing of the Declines

The data suggest that the child victimization declines of the 1990s were something new, and not simply the extension of trend lines from the past. For example, available data on child abuse show strong increases in all forms of maltreatment from the mid-1970s into the 1990s (Peddle & Wang, 2001; Sedlak, 1991; Sedlak & Broadhurst, 1996). After a short plateau, the sexual abuse decline seemed to start in 1992, and the physical abuse decline gained momentum after 1996. Many analysts did not interpret the earlier rise as necessarily indicative of a real increase in child maltreatment, but rather the result of a new public and professional mobilization to identify and report cases. But some data suggested real increases in the 1980s (Sedlak & Broadhurst, 1996). Nonetheless the decreases of the 1990s meant that something had changed that needs to be explained.

Similarly, the declines in the 1990s in the NCVS crime victimization rates are also not simple extensions. NCVS trends show fluctuations prior to the 1990s with violent crime up from 1973 to 1981, then down during the mid-1980s, and then up again from the mid-1980s until 1993. Homicide data also show a big rise in youth victim homicide in the late 1980s prior to the drop in the 1990s. So youth crime victimization also went up in the 1980s before declining more recently.

In another similar pattern, Land and his colleagues (Land, Lamb, & Kahler Mustillo, 2001) analyzed some three dozen indicators of child well-being and concluded that there had indeed been a deterioration of the overall social environment for children from the mid-1970s until the 1990s. But then a variety of indicators appeared to turn positive after 1993. So a number of independent sources suggest that the improvements of the 1990s were a departure from what had been happening just before.

Explanations for the Declines

In the social scientific discussions about social trends in the 1990s, most of the attention has been given to the general decline in crime (Blumstein & Wallman, 2000; Conklin, 2003; Levitt, 2004; Rosenfeld, 2004). In fact, much of that discussion has been confined even more specifically to homicide or other serious crime like robbery. But homicides are relatively rare events subject to effects from relatively local conditions (e.g., gang outbreaks). Things relevant to homicide may have little to do with trends for something much more general like simple assaults against juveniles. In addition, none of the discussion about the crime decline has factored in the information about child maltreatment or some of the other improving child well-being indicators, which may well be related and direct the attention to a broader range of factors than do discussions of homicide and other serious crime.

So the following discussion will start by reviewing some of the major factors that have been mentioned in regard to the crime decline, but it will bring in considerations that have not been widely discussed in that literature. In general, little empirical evidence is currently available to evaluate any of these factors and their explanatory power. So the discussion will of necessity be very speculative. The main goal is to see which of these factors have the power to account broadly for or at least be consistent with the features of the declines that we have outlined. Among the key features are: the simultaneous declines in multiple victimization and child welfare indicators, the breadth of the declines across demographics and crime characteristics, and the convergent onset in the mid-1990s. Some of the factors seem to have more explanatory breadth than others.

Factors Used to Explain Declines in Crime Rates

Several factors come up frequently when sociologists and criminologists discuss the declines in crime that occurred during the 1990s and are an obvious place to start in considering explanations for the declines in child victimization. We first discuss two factors that do *not* seem relevant to the juvenile victimization picture: demographic changes and capital punishment policies. We then discuss two other factors that are probably only relevant to juvenile homicide trends and possibly robbery, but not broader changes: gun control policies and the crack cocaine epidemic. Finally, we discuss a number of other factors whose contribution is plausible to a broader variety of juvenile victimizations. They include four hypotheses from the crime decline debate that have been frequently discussed: the impact of abortion legalization, improvement in the economy, growth in imprisonment and other serious legal sanctions, and the hiring of more police and agents of social intervention.

Demography. Demography is a powerful social change factor, and criminologists have often invoked it to try to explain changes in crime, but they have also often been wrong, as they were when they anticipated a crime boom for the 1990s (DiIulio, 1996; Fox, 1996). Some of the obvious demographic suspects were simply not present to predict a drop in juvenile victimization, which is why almost no one anticipated it. There had not been dramatic drops in the size of the youth population during or leading up to the decline (Child Trends - Demographics, 2005b). The number of children in the prime juvenile victim pool over age 6 has actually been increasing modestly, while the decline in victimization has been occurring. Many of the changes in the family structure during this period have been on the negative side, for example, increasing numbers of children living in single parent families (Child Trends - Demographics, 2005a). Risk models have generally shown that children who are not living with both biological parents are at greater risk for victimization (Turner, Finkelhor, & Ormrod, in press). So changed family structure cannot account for the decline.

There was a modest reversal of the divorce trend, or at least a leveling off of the rate of increase, during the 1990s. It is possible that this has had some ameliorative effect, although it has not been dramatic or long-term enough to be responsible for the large changes of the 1990s (Conklin, 2003). The other strong and obvious demographic development in the United States has been the growth in the percentage of the youth population that are from minority backgrounds, particularly Hispanic and to some degree Asian backgrounds, and the decline in the percentage from white European backgrounds (Child Trends - Demographics, 2005c). Here again, for the most part the growth in the proportion of minority children would have led observers to predict an increase, not decline, in child welfare related problems and child victimization. Victimization rates have generally been found to be higher among minority children, for reasons that are thought to pertain primarily to economic conditions and social stress (Finkelhor, Ormrod, Turner, & Hamby, 2005). So demographic changes do not provide much leverage in understanding why child victimization may have declined.

Capital punishment. The 1990s witnessed a dramatic increase in the number of prisoners put to death in United States, up from 117 executions in the decade of the 1980s to almost 500 in the 1990s. Some researchers have presented arguments in favor of the deterrent effects of capital punishment, while others have disputed such effects (Cameron, 1994; Dezhbakhsh, Rubin, & Shepherd, 2002; Ehrlich, 1975, 1977; Mocan & Gittings, 2003). Whereas it is possible to hypothesize that capital punishment could deter capital crimes such as homicide, it is hard to construct plausible explanations of how capital punishment would curb the huge volume of relatively less serious offenses committed against youth, especially by other youth, most of which is not reported to police or prosecuted, let alone sanctioned by capital punishment.

Drug epidemic trends. In the crime decline discussion, a great deal of attention has been paid to the role that the crack cocaine epidemic played. Crack cocaine became a very popular drug in the late 1980s because it produced an intense high and could be purchased at relatively low cost. It was marketed by youth gangs who competed intensely with weapons and violence for shares of this lucrative market, and appears to have been responsible for a steep increase in homicides of young people in the late 1980s (Blumstein & Wallman, 2000). The crack cocaine epidemic then subsided in the 1990s and the markets became more stable and the related violence abated. Although this factor could well have been responsible for the rise and fall of homicide, gang violence and drug-related robberies particularly in certain localities, it seems not that well-suited to explain the broader declines in child victimization and improvement in child welfare that occurred in the 1990s. The fact that child victimizations declined over such broad demographic areas, including rural areas and rural states, for whites and minorities, and that it

included declines in simple assault for younger youth and sexual abuse, all suggest something beyond the crack cocaine epidemic abatement.

In recent years, there have been alarms expressed about a new drug epidemic—this one involving methamphetamine—and its possible impact on child maltreatment and crime (Shirk, 2005, October). With the exception of homicide in some selected urban areas, few of the indicators of crime and child maltreatment showed any sign of an increase in the most recent years available up to 2004.

Gun policy. A variety of gun control laws have been enacted in attempts to reduce crime, such as the Brady Handgun Violence Prevention Act of 1993, and other laws increasing penalties. A crackdown on guns in the hands of juveniles was widely touted as the cause of a dramatic decline in youth homicides in Boston in the 1990s (Braga, Kennedy, Waring, & Morrison Piehl, 2001). While some criminologists have contemplated the impact of these laws on the most serious of violent crimes, like homicide, it seems unlikely that they had much impact on the broader spectrum of juvenile victimizations we have been describing, including child abuse. The vast majority of offenses against juveniles do not involve guns. This is especially true of physical and sexual abuse. Such laws would also be very unlikely to help explain the improvement in other child welfare indicators.

The previous four factors probably had little to do with the broad decline in general child victimizations or in the other improving child welfare indicators, with the exception of homicide that may have been affected by changes in the drug market and gun availability. The next four factors to be considered, however, could have had much broader effects, especially if considered in somewhat broader terms than has been the case in some of the criminology discussions.

Wanted children, fertility factors, and the legalization of abortion. In the popular book *Freakonomics*, economist Steven Levitt and a colleague have given great visibility to the hypothesis that crime declined in the 1990s as a ripple effect from abortion legalization in the 1970s (Donohue & Levitt, 2001; Donohue & Levitt, 2004; Fryer, Heaton, Levitt, & Murphy, 2005). Five states legalized abortion in 1970 and then Roe v. Wade legalized abortion for the rest of the country in 1973. According to this theory, the ensuing decline in fertility affected crime because it created a reduction in what would have been otherwise unwanted children at greater risk to commit crimes. As one might expect from a theory touching the abortion controversy, this has been a hotly debated idea (Foote & Goetz, 2005; Lott & Whitley, 2001; Theodore, 2004).

The argument might have generated considerably less controversy if it had simply been presented as the notion that crime might decline, not so much as an effect of abortion, but rather as women and families have made a variety of fertility and contraception decisions that allowed fewer unwanted children to be born and more children to grow up in environments in which there were adequate financial,

supervisory, and emotional resources to care for them. This is a trend that has been facilitated not only by the availability of abortion, but perhaps even more considerably by the availability of contraception. The changing role of women and changes in the desired number of children have also contributed to declining birthrates, decreased family size, and increased spacing between child births (Hernandez, 1993). Unfortunately, the focus on abortion alone has resulted from two factors: continuing controversy about abortion and the fact that the effect of abortion legalization on fertility was a dramatic statistical event occurring in a short time-frame that has made its effects easier to analyze than other effects on fertility.

Reduction in unwanted children is a fertility change that could indeed have some of the broad impacts we might be looking for in the way of an explanation. It could have had a positive impact on many different kinds of child victimization, as well as helping out other child welfare indicators. Presumably, wanted children would experience less child maltreatment. They would grow up with better supervision and parental instruction, perhaps leading to less victimization. They might have fewer adversities and disadvantages that would lead to risk-taking and aggressive behavior.

Is there any evidence for such effects outside the general crime trend data? Indeed, an analysis by Sorenson, Wiebe, and Berke (2002) finds that the legalization of abortion may have been associated with a subsequent decrease in the homicides of children ages 1 to 4. The researchers did not find a significant effect, however, on the homicide of children under 1 year of age, an important omission, since many homicides of young children seem to be motivated specifically by a desire to dispose of an unwanted child (Finkelhor & Ormrod, 2001a). Nonetheless, the failure to find effects for the very young children may have been due to the fact that not long after Roe, dramatic efforts were undertaken across the country by child welfare and law enforcement to investigate and identify homicides of young children and distinguish them from accidental fatalities, a movement epitomized by the development of child fatality review teams all across the country (Durfee et al., 2002). This effort may have been most successful in identifying homicides of infants, whose deaths have always been among the most difficult to investigate. Such differential increases in the rate may have masked the effects due to abortion legalization.

Other researchers have concluded that increased abortion availability reduced the likelihood of children to die in infancy, to be born into a single parent family, and to live in poverty or to receive welfare by 40–60% (Gruber, Levine, & Staiger, 1999).

Although an increase in the proportion of wanted children in the cohort, boosted by abortion legalization, might be an important piece of the puzzle, several results that one might expect from such a scenario are not immediately apparent and at least need further investigation. If abortion legalization resulted in

a marked increase in the percentage of wanted children in a new cohort of children, then the effect of this change should be visible as a ripple of improvement moving forward as the cohort got older. Thus, long before one saw a reduction in the amount of homicide committed by that cohort's young men, presumably one would have seen a reduction in the amount of child maltreatment committed against that cohort as young children. What is curious about the improved indicators in crime, child maltreatment, and other child welfare factors is that they seem to have had a simultaneous onset in the mid-1990s. Why were not the homicide declines of the 1990s preceded by dramatic child maltreatment declines in the 1970s and 1980's, during the formative years of the Roe v. Wade cohort?

As indicated earlier, the data generally show big increases in reports of child physical and sexual abuse throughout the 1970s, 1980s and no drop until the mid-1990s. Of course, it may be that increased reporting efforts in the earlier period masked underlying reductions that actually had been occurring. But the NCVS-based crime victimization increases of the 1980s are harder to dismiss. Moreover, Land's trend data for child well-being indicators mostly show a deterioration in the 1970s and 1980s (Land et al., 2001). In other words, there are limited indications of what demographers call a "cohort effect," a change limited to the experience only of people born at or after a specific time. The declines, with their changes to groups both young and old around the early 1990s, have more the signature of a "period effect" than a cohort effect.

Another puzzle not easily explained by the Roe explanation is why sexual abuse might have been the leading edge of the child maltreatment decline. Sexual abusers have an age profile considerably older than other violent criminals and also other child abusers (Bureau of Justice Statistics, 2006). They tend to be men in their 30s and older who victimize preadolescent or adolescent children. This contrasts with physical abusers and neglecters who more frequently target younger children and are themselves younger parents (Milner, 1993). In the early and mid 1990s when the sexual abuse decline got started, the members of this prime sexual abuser recruitment pool age 25 and older were born well prior to the Roe decision. The offenses of younger men and younger parents (e.g., physical abuse and neglect) should have been the leading edge of a decline related to a ripple from fertility changes started in 1973.

These anomalies do not rule out a role for a wanted child effect. The wanted child effect may have been operating in conjunction with other factors that explain some of the anomalies we have highlighted.

Moreover, the detailed quantitative analyses conducted on this issue illustrate the level of empirical inquiry that might be undertaken for many of the hypotheses discussed in this article. Nonetheless, the doubts about this hypothesis make it somewhat questionable as a sufficient explanation for the phenomena we are trying to explain.

Economic prosperity. The 1990s were a time of increasing prosperity in the United States. There was considerable job growth, hourly wages rose, and considerable social and occupational mobility occurred (Farley, 1998). Notably, the percentage of children living in poverty declined, and maybe most importantly many people who had been chronically unemployed or underemployed were able to work or work more. The graph of the unemployment rate has a drop that looks very similar in the 1990s to the trend for sexual abuse substantiations. Criminologists have endorsed prosperity as a likely candidate in the crime decline (Conklin, 2003; Steffensmeier & Harer, 1999) and Land cites it as a probable factor in the broad improvement of child trends (Land et al., 2001).

One appeal of an explanation linked to the prosperity in the 1990s is that the effects might have been broad and fairly simultaneous on large groups of people. If economic prospects are looking up, everyone may be feeling more positive. Increasing opportunities create a greater stake in conformity (Hirschi, 1969) and more costs to deviance, since rule-breakers may miss out on the rising tide. Large segments of the population including the young and the old may have had more to do. A wide variety of stresses may decline and interpersonal relationships improve, both inside and outside family. Prosperity might have been responsible for reductions in crime committed by adults and by children, crime in rural and urban areas, crime within the family is well as outside the family. One might expect those who are newly employed, like young adults, to be those most dissuaded from crime and maltreatment, but it is easy to imagine that these positive prospects might have also affected young people not in the labor market at nearly the same time through increased optimism.

At least one observer, though, has discounted the prosperity of the 1990s as a factor in the overall crime decline (Levitt, 2004), arguing that historical studies generally show a small relationship between unemployment and crime, and that whatever effect occurs is almost exclusively on property crime and not violent crime. It is our sense, however, that the topic has not been sufficiently studied to draw a firm conclusion, and that the impact of different boom times may be different and may have differential effects on different kinds of crime and social problems.

One puzzle in regard to the prosperity explanation, of course, is the salience of the declines in sexual assault and sexual abuse. Sexual abuse has conventionally been one of the child welfare problems that we have believed to be least associated with social class and economic deprivation. Studies have not shown systematically higher rates of sexual abuse in deprived families or systematically higher perpetration rates among disadvantaged adults, at least not to the same extent that one finds deprivation associated with problems like teen pregnancy, domestic violence and violent crime. In fact, one paradox is why, if prosperity is the main explanation, the rates of neglect did not decline while sexual abuse stayed the same rather than vice versa.

But nonetheless it may be true that prosperity and particularly the prosperity of the 1990s may have been a factor in the decline of sexual abuse. The prosperity of the 1990s may have strongly benefited the marginal middle class, and in particular underemployed men or employed men unhappy with their jobs. As employment problems are a risk factor for offending (Hanson & Morton-Bourgon, 2005; Uggen, 2000), some of the men in this category at risk to molest may have gotten work or busier with their work during this time, had much less free time on their hands to hang out around children, and had exciting possibilities in their work and professional lives that they had not had before. Maybe young people themselves had more to do that took them out of risky environments. Maybe some of the prosperity of the 1990s acted in ways that were more specifically associated with the occurrence of sexual abuse.

Obviously if the prosperity of the 1990s was a key factor in the decline of child victimization and crime, one test of that hypothesis may be to note what happened when the prosperity slowed in the early 2000s. We should presumably have seen a concomitant plateau or rise in incidence of crime and victimization. Interestingly, the newest data from the early 2000s show some moderations, but mostly continued declines. These were at a time when the unemployment rate was going up again. That is at least one hopeful sign that the declines may not be easily reversed by deteriorating economic fortunes. But they do not lend reinforcement to the role that prosperity played in producing the declines.

Incarceration and incapacitation. In analyzing the crime decline of the 1990s, almost all the analysts are in agreement that the dramatically increased number of incarcerated offenders was a major factor (Conklin, 2003; Levitt, 2004; Rosenfeld, 2004). It was an indicator that started to change as it should have in advance of the drop. It is also a factor that has stood up to statistical analyses. Some detailed quantitative studies have suggested that one-third to one-half of the general crime decline was due to growth in the prison population (Spelman, 2000).

However, one problem with the incarceration hypothesis in regard to child victimization is that many of the offenses children suffer from are not typically punished by incarceration. The youth who beat up and steal from other youth do not often end up incarcerated, even in youth facilities. Physically abusive parents only rarely end up in prison. So these offender populations, unlike the general criminal offender population, were not thinned due to increased imprisonment.

One type of youth victimization, though, that may have been affected by increased incarceration is sexual abuse. According to Bureau of Justice Statistics data, there was a tripling in the number of child sex offenders incarcerated in state prisons between 1986 and 1997, up from 19,000 to over 63,000 (Finkelhor & Ormrod, 2001b) and it was almost certainly quite a bit higher by 2005. High frequency offenders are more likely to get incarcerated, so potentially small increases in incarceration of high-volume offenders can have large effects on the

overall offense rate. Large increases in incarceration could possibly have very dramatic effects. But even with sexual abuse, a problem with the incarceration theory is that some classes of child molesters, like incestuous abusers, are much less likely to be incarcerated than others. Curiously, from available data, it would appear that intrafamily abuse has declined as much as other child molesting if not more (Finkelhor & Jones, 2004). Adolescent perpetrators are also a group who comprise as much as a third of all sexual abusers, but they also are less likely than adults to be incarcerated, even though such incarcerations have also increased (Snyder & Sickmund, 2006), Offenses by adolescent sexual abusers appear to have declined in CPS data as much as offenses by adults (Finkelhor & Jones, 2004). Increased incarceration may have possibly resulted in a general deterrent effect on all offenders. But then the effects of incarceration become difficult to distinguish from some of the other theories, which also posit mechanisms that would generally deter offending. In any case, if incarceration is a key mechanism, it should have its biggest effect on the classes of individuals most likely to be incarcerated. So even in the case of sexual abuse, other factors must be at work, and incarceration does not explain why the declines have been so across-the-board.

Agents of social intervention, police, and others. In analyzing the general crime decline, another factor that has been widely debated is the role of increased policing. Funds were made available in the 1990s through various mechanisms, but in particular the Omnibus Crime Bill of 1994 to hire tens of thousands of additional police. The stated goal was 100,000 new officers, but UCR data suggest the increase for the decade was 50,000–60,000 or roughly a 14% increase (Levitt, 2004). Politicians eager to take credit for the crime decline have pointed to the putative success of this and related measures. But some observers have dismissed the policing hypothesis, arguing that the decline began well before the federal money for new officers began to flow into local governments coffers.

It also might superficially seem as though increased policing is not a very potent explanation for something like the decline in physical abuse. While more police patrolling the streets might deter gangs and property crime, do they really keep men from sexually abusing their daughters or mothers from scalding their babies?

But if the increased policing hypothesis is thought of as an increase in more generalized agents and mechanisms of social intervention, then a broad range of juvenile victimizations might indeed have been affected by this build up. For example, along with increases in the number of police, there were also increases in the number of social workers, child protection workers, and increases in the number of people engaged in various child safety and child abuse prevention activity (U.S. Census Bureau, 1982–2006). The new police activities in place by the early 1990s included not just community patrols, but also specialized domestic violence units with a mandate to intervene aggressively in violent families (Sherman,

Schmidt, & Rogan, 1992), specialized sexual assault officers to work in the investigation and prosecution of sexual abuse inside and outside of families (Glasscock et al., 2002; Martin & Besharov, 1991), and specialized school resource officers trained to reduce the quantity of youth-on-youth victimization (U.S. Department of Justice, 1999). This diversification of police activity was accompanied by a diversification of prosecutorial activity as well, as district attorneys took on domestic violence, sexual abuse and even in some cases juvenile crime. The mental health profession also increased the number of its professionals who were working more consciously in social control activities like facilities for delinquent youth, offender treatment programs in prisons and the community, and who were involved in anticrime activities through work with victims (Marans, Berkowitz, & Cohen, 1998).

The presence of these new agents of social control could well have curbed child victimization through a number of mechanisms. These agents were increasingly visible, both in media and in the community, and this presence may have deterred many offenders or would be offenders. Aggressive youth might be less likely to bully others knowing a police officer was just down the hall. Reading about arrests of child molesters in the news, other molesters may have become less confident that they could get away with a sexual encounter with a child. The new agents also undoubtedly had many cautionary encounters with offenders that may have terminated or reduced offending patterns. The batterer may have been chastened by the police visit to the household. Some of these new agents worked directly with victims, such as victim advocates. Some provided education and valuable prevention information to school children and parents. This education may have protected children considerably. Some of these agents simply empowered victims due to their presence and activism. These agents may have helped victims themselves become more resistant to victimization. In one of the few studies relevant to this explanation, researchers found that domestic homicide rates fell more rapidly in cities with the greatest growth in legal advocacy and other services for victims of domestic abuse (Dugan, Nagin, & Rosenfeld, 2003). Domestic violence and child victimization are closely related and similar effects from services and advocacy may apply.

Thus, if we think of the 1980s and early 1990s as a time when agents of social intervention, not just police, increased in number, diversity and in their approach to a variety of offenses, this makes a plausible explanation of why there might have been declines in not just conventional crime, but also forms of child abuse, child molesting and youth-on-youth offenses.

One important question about the agents of intervention explanation is how it accounts for a decline that only got started in the early 1990s. Some of the expansion of agents of social intervention dates far back to the 1970s and 1980s, when, for example, many new child protection workers were hired, and many new domestic violence units were established. It may have been that the first effect of

these new agents was to inflate statistics. In fact, some believe that a growth of these agents was what accounts for the big increases in substantiated child maltreatment in the 1970s and 1980s and also a big spike in police identified juvenile crime in the 1980s. More juvenile crime was reported, for example, because officials were available to crack down on it, and various kinds of domestic assaults (like adolescents threatening their parents) got defined as criminal under new domestic violence policies (Snyder & Sickmund, 1999).

The agents of social intervention explanation may also account for why sexual abuse fell earlier and faster than physical abuse, and why both fell when neglect did not. Although effort is hard to allocate, most observers believe that more intensive prevention and intervention activities were directed at sexual abuse, which typically mobilized members of both the law enforcement as well as child welfare profession (Finkelhor, Cross, & Cantor, 2005). Observers generally agree that despite the large number of cases identified, few law enforcement personnel are involved in neglect intervention or prevention (Cross, Finkelhor, & Ormrod, 2005). Nonetheless, the agents of social intervention explanation do not really account exactly for why it was in the early 1990s that awareness efforts stopped being the main driver in the child abuse statistics and a real underlying decline either became evident or gained momentum. But it is an explanation that is plausible to the many professionals now working in various fields to prevent and respond to child victimization.

Other Possible Reasons for Juvenile Victimization Declines

The declines in juvenile victimization, and the numerous improvements in child well-being during the same time period, provide an opportunity to consider explanations that go beyond those typically discussed in relation to crime trends. Below, we discuss three hypotheses that have not received much attention: arguments that values have shifted or that a generational change occurred, or that the dissemination of psychiatric medication has had a broad ameliorative impact.

Changing norms and practices. It is hard to know to what extent the increasing numbers of social intervention agents were the cause of or simply the reflection of changes of social norms and public awareness that were occurring in the population. But to explain the broad changes that have been occurring, it would probably be a mistake to attribute it all to the activities of the agents without taking the broader normative shifts into account. Some of this shift needs to be attributed to a broad range of opinion leaders, activists and volunteers in the fields of education, politics, mental health, social science, journalism and elsewhere drawing attention to juvenile victimization issues. At the same time, the population was becoming more educated in general and more exposed to the points of view of activists and professionals. All this may have contributed to changing norms and attitudes

about what is acceptable behavior and what kinds of child safety standards adults need to maintain, norms affecting both potential abusers and those who provide supervision as well.

As a result of this process, the public has in the last two decades become aware of various types of child victimization that they were less aware of a generation ago. Sexual abuse, of course, is perhaps the most dramatic example of changed awareness—a problem that was rarely discussed has become one that is frequently the topic of news and educational programs, not to mention major Hollywood films (e.g., *Mystic River*) and best-seller books (e.g., *Bastard Out of Carolina*). But physical abuse, domestic violence, school bullying, and sexual harassment, to name a few, have also received considerable exposure. It is plausible that this greater awareness has resulted in more protective action by families and others who work with children.

Parents may now be more cautious about whom they allow to be with their children and under which circumstances. It may have affected the kind of choices that women with young children make when they look for new husbands or boyfriends or decide on forming a family. Aware people including aware children may be quicker to short-circuit and report victimizations (Wolak, Mitchell, & Finkelhor, 2006).

The awareness has changed norms. Behaviors that were once tolerated, ignored or treated as minor, for example, bullying or parents hitting children, have come to be seen as more serious and damaging (Straus & Mathur, 1996). This may deter potential offenders from engaging in these behaviors, and may make observers more likely to act to stop them when they occur.

The awareness may have also affected the socialization process of children, leading to less offending behavior. For example, there is generally believed to be some level of intergenerational transmission for aggressive and sexually abusive behavior. As access to mental health services has increased (Kessler et al., 2005; Mechanic & Bilder, 2004), many childhood victims from previous generations have now gotten some professional help that may have helped forestall the repetition of such behaviors in the subsequent generation. But beyond professional help, many survivors of childhood victimization have probably gotten cultural help. Physical and sexual abuse and bullying are topics about which one can learn a considerable amount from the media, friends and other members of one's social network in the course of growing up. To the extent that victims of physical abuse and sexual abuse do not grow up in a climate of silence or embarrassment about these problems, such experiences may not induce quite the same feelings of shame, guilt or stigma. The corrosive effects of such experiences may well have been diminished by this more open social environment, leading to less intergenerational transmission. So it is plausible that cultural, educational, and normative factors may have played a role in the declines.

A pattern that one might expect from the changing norms and practices explanation is that measures of real victimization (and other problems) might be going down at the same time that official reports of victimization might actually be going up due to the new awareness and concern. Some observers believed this was the case when parent surveys showed declining support for corporal punishment and less violence toward children, during the time that the official child abuse reports were rising (Straus & Gelles, 1986; Straus & Mathur, 1996). Patterns of the early and later 1990s, however, showed both self-report and official data on some victimization, like conventional crime, rising and then falling in tandem.

Dissipation of the side effects of the cultural revolution of 1960s. Another cultural change explanation for the decline, related or unrelated to what has just been discussed, contends that we are simply returning to a more historically normal level of social deviance after a period of unusual change (Lafree, 1999). It has been widely recognized that an enormous cultural revolution occurred starting in the 1960s. Aspects of this revolution have been referred to variously as the women's movement, the sexual revolution, the civil rights movement, the Vietnam War protest, and the counterculture. It was marked by an expansion of people's sense of what might be possible, a questioning of established norms, and a delegitimatizing of established institutions like governments, corporations, and the church.

Among many of the people it touched, the revolution did raise aspirations, undermined oppressive social arrangements, and inspired positive social changes. But it had possible side effects. For example, it may have created resentments among those who felt left out or unable to take advantage of its opportunities. It may have de-legitimatized institutions and social forces that had some stabilizing effects on some people, like traditional religious beliefs and police authority. It may have been particularly troublesome for people who needed to rely strongly on external authority and traditional norms to regulate and control their impulses, in contrast to people who had good internal gyroscopes and could experiment with developing new personal moralities and codes of conduct. Specifically, some people may have interpreted the sexual revolution to mean that all sexual prohibitions, including sex with children, were outdated. Some people may have understood the civil rights movement to mean that they were justified in obtaining extra-legal restitution for injustices and the counterculture to mean there was value to the expression of all impulses, including aggressive or sexual ones, whatever the circumstances (Lafree, 1998).

The side effects of the cultural revolution may have been behind an increase in criminal and sexually irresponsible behavior. Some of the crime increase in the 1970s, for example, may be a reflection of this phenomenon. But perhaps after 30 years the generation most affected by that revolution has largely aged out of the side effects, the influence of the attitudes that they spawned has dissipated, and the

culture has better integrated the changes. A trend supportive of this explanation comes from the Catholic clergy sexual abuse cases that show a big rise in the 1960s as this group of authority- and tradition-oriented men tried to cope with the changing culture. The number of cases takes a dramatic drop in the mid-1980s, as the clergy and the culture at large have perhaps better integrated the changes (John Jay College of Criminal Justice, 2003). This explanation could account for why a variety of other deviant behavior and social problems first deteriorated and then improved.

This hypothesis is reasonable for explaining why there was first a boom and then a bust in social problems. But it is an explanation that might have been expected to produce differing trends for differing cohorts. So, for example, one might have expected more continuing levels of deviance by older cohorts as younger cohorts, unaffected by the cultural revolution, emerged on the scene. But that is not what the pattern looks like. The deviance by both older and younger cohorts seemed to decline in roughly equal measures. Deviance does decline as people age, meaning that older cohorts have less deviance in all eras. But if a generational change is going on, the relative changes for different age groups should be different.

For this hypothesis to work then, it would have to argue that somewhat different mechanisms were at work at nearly the same time on different cohorts. That is, the 1960s generation aged out of their deviance at around the same time that the influence of the values of that era waned on the younger cohorts. Another problem is the dramatic character of the downturn. Behaviors and attitudes influenced by generational change tend to be slower to shift. So the dissipation of the cultural revolution explanation is not fully satisfying.

Psychopharmacology. Another interesting, but overlooked possible source of the declines is suggested by the particular timing of their onset in the early and mid-1990s. A technological revolution that was taking shape around and just prior to that time was the broad introduction and dissemination of several new classes of psychiatric medication. Prozac (fluoxetine hydrochloride) came to market in 1987 and within 5 years four-and-a-half million Americans had taken it, the fastest acceptance ever for a psychiatric drug (Olfson et al., 2002). Along with its descendents, it spurred a sea of change in the approach to depression, anxiety and other related mental health problems. Large segments of the population are now being treated pharmacologically by primary care doctors, patients who perhaps would have never previously sought psychiatric or mental health treatment, particularly men and the less well educated. Data show that the percentage of the population being treated for depression in a given year jumped from .7% in 1987 to 2.3% in 1997, and by the end of the period, much of that treatment involved drugs (Olfson et al., 2002; Zito et al., 2003).

At the same time, the percentage of youth being treated with psychiatric medication also increased dramatically (Jensen, Edelman, & Nemeroff, 2003; Olfson,

Marcus, Weissman, & Jensen, 2002). One epidemiological analysis suggested that by 1996 6% of young people under age 20 were using prescribed psychotropic medication during the last year, a 2–3-fold increase from the previous decade, with the growth concentrated particularly in the period since 1991 (Zito et al., 2003). Stimulants (like methylphenidate/Ritalin) were the most common drug in usage and antidepressants close behind. There was an estimated 292% increase between 1990 and 1995 in the rate of school aged children diagnosed with ADHD and prescribed stimulants with the rise particularly concentrated between 1992 and 1993 (Robison, Sclar, Skaer, & Galin, 1999). By 1998, over 2.3 million office visits per year were for such diagnosis and stimulant prescription purposes among children 5–18 (Robison, Skaer, Sclar, & Galin, 2002).

How would the psychopharmacology revolution have made an impact on child victimization, child welfare, and crime in general? There could have been several vectors of influence. First, it certainly seems plausible that when you alleviate chronic depression, discouragement, and despair among a large segment of the population, you might have fewer individuals acting out aggressively and sexually. Second, if you help youth control their impulsive behavior, as methylphenidate seems to, you may have less delinquency and less risk-taking behavior that puts young people in danger of victimization. As young people feel more in control of themselves, they may be less alienated and less drawn to delinquent subgroups and delinquent activities. The psychiatric medications may help to improve family life and reduce interpersonal stress, leading to more effective parenting, less child maltreatment and better supervision. Some of the antidepressant drugs even depress libido, which may be an important factor in the decline of sexual abuse and sexual assault. So psychiatric drugs could have had broad effects on a variety of crimes, both offending and victimization, as well as on other social problems, including running away, risky sexual behavior and suicidal behavior, for which at least one study suggests time trend benefits (Gibbons, 2005).

The psychopharmacology explanation is clearly among the most compelling to account for an onset in the early to mid-1990s. Something dramatically new happened just prior to the decline and affected at least some portion of the at risk population. It is even more plausible than the economic prosperity explanation, since much of the prosperity did not trickle-down to at-risk individuals until after the crime and victimization declines had already started (Conklin, 2003). Where the psychopharmacology explanation may have the most problem is in accounting for the demographic breadth and universality of the declines. Drugs almost certainly did not disseminate uniformly or simultaneously to all segments of society, but reached certain accessible groups and localities before others (Jensen et al., 2003). When data are available on geography and ethnicity, they do not show smaller declines in groups that one might expect to be lagging in access to pharmaceuticals. Another puzzle concerns why the drugs did not have an even greater ameliorative effect on child neglect, since much neglect is thought to be a

function of depressed parents. Another problem is why if more youth were getting helpful prescription drugs to deal with mood issues, the use of the illegal drugs would not have been declining as a result. Nonetheless, the medication explanation seems like a plausible candidate worthy of further empirical investigation.

Taking Stock

Where Does This Review Leave Matters?

Most importantly, we believe the evidence for the existence of a decline in youth victimization is extremely strong. It is a reality deserving of much more attention and discussion. Something positive is going on in the social environment. Not only is there encouragement to be drawn from this development, but also, there are important lessons to be learned. If something is working, it is incumbent on us to find out what, and to try to do more of it or expand its impact in some way. For these reasons, we should be highlighting the trends identified here, and encouraging as many interested people as possible to search for an understanding of exactly what has been and is going on.

Next, we need to formulate plans to investigate some of the most promising of the explanations, to gather confirmatory or dis-confirmatory empirical evidence about them. Based on the arguments and evidence we have reviewed, we think the explanations concerned with economic prosperity, increasing numbers of agents of social intervention and psychiatric pharmacology are ones that merit particular investigation. A wide variety of research strategies are warranted. Analyses can be done, for example, using smaller geographic units, such as counties, to see if such things as changes in economic conditions or prescription levels were associated with the timing and magnitude of changes in child maltreatment and crime victimization. Even prospective intervention designs can be undertaken to see if policies based on these factors actually make a difference: providing income enhancements to maltreating families, psychiatric medications to abusers or increasing the numbers of child welfare, and law enforcement specialists in some areas.

The search for additional explanations also needs to be prolonged. Those reviewed here are certainly not exhaustive. Suggestions have been made about the possible ameliorative effects of the reduction of environmental lead, increased access to higher education, and the development of the Internet. (Ouimet, 2005, November).

International comparisons are an important source of information for both the generating and confirming hypotheses about the declines. Canada, for example, also witnessed a decline in crime during the period when U.S. crime rates were dropping (Ouimet, 2005, November). But since Canada did not expand its prison population or its police force, Canadian analysts have been skeptical that these

two factors widely cited by U.S. analysts were actually that consequential. The Canadian National Incidence Study actually documented large increases in overall child maltreatment, physical abuse, neglect, and emotional maltreatment, but stable or declining sexual abuse rates, during the 1990s (Trocme et al., 2005), but some Canadian observers believe that most or all of this increase was due to an expansion of abuse categories to include children exposed to domestic violence and other family problems (N. Trocme, personal communication, May 17, 2006).

Ultimately, we think it very unlikely that one particular explanation will account for all of the declines. It is much more likely that the declines are the product of multiple ameliorative factors, and even that different particular kinds of child victimization have responded to different sets of factors. Thus, economic factors may be responsible for property crime victimization declines, while psychopharmacology may have had the biggest impact on sex offenses. Factors may have had interacting and mutually reinforcing effects: for example, the adoption of new values may be more rapid in an optimistic environment created by economic progress. There may have also been "tipping point" effects (Gladwell, 2002) as a certain number of cumulating positive changes occurred that resulted in a sudden, rapid cascade of improvement. The cascade may have occurred, for example, in the growth of people invested in the idea of protecting children from assaults and sexual abuse, certainly a noble and appealing idea. Or the cascade may have been in the idea that one could get in a lot more trouble or lose status acting in violent or abusive ways, especially toward a child. If the change resulted from interactions or self-propagating cascades, providing the evidence for the interaction of various mechanisms and various problems will certainly be a challenging research undertaking.

What are some of the policy implications of these hypotheses if evidence in their favor should become stronger? An obvious implication, not lost on child protection activists and professionals, is that social and technological developments beyond their own narrow sphere of effort, may act to leverage (or in theory impede) the objectives they seek with a power even greater than those that they can exert. This kind of influence has long been acknowledged with regard to economics, in so far as most child protection professionals have tended to promote poverty reduction as a component to child safety enhancement. But perhaps more attention should also be paid to other potentially transformative forces such as technology and its ramifications for drug treatment, behavioral management, genetic screening, contraception, family communications, and parenting education. While child protection professionals may not have expertise in these areas, they may have the ability to promote the dissemination and adapt the uses of technologies to have faster and more pervasive impacts on reducing child victimization. The fact that little or no research exists on child maltreatment among children or parents using psychiatric medication does suggest that child protection professionals have been slow to even envision such a connection. The child protection field may need mechanisms to better monitor and integrate information from a wide variety of other fields where social, organizational, and technological change may be occurring.

This analysis also suggests renewed attention to the possible connections between economic forces and child maltreatment. While child advocates are in wide agreement that prosperity and antipoverty measures help protect children, there really is not sufficient understanding about what specific economic forces and economic policies result in greater child safety. For example, based on knowledge at the time, child advocates had great qualms about the potential for the welfare reform legislation of the 1996 to increase child maltreatment, particularly neglect, because of its work requirements directed to poor mothers and other burdens (Aber, Brooks-Gunn, & Maynard, 1995; Allen, 1996; Knitzer & Bernard, 1997). But for the most part, analysts have been unable to identify any increase in child maltreatment or even broader deterioration of child well-being as a result of the 1990s welfare reform (Geen, Fender, Leos-Urbel, & Markowitz, 2001; Sengupta, 2000). This raises the question of whether there are specific kinds of employment opportunities, tax incentives, transfer payments, housing subsidies, or income streams that have more effect or specific effects on various kinds of child safety and child welfare outcomes (Winship & Jencks, 2004). If more of the specific mechanisms by which prosperity improves child safety can be discovered, then some targeted programs may be able to continue progress, or stave off deterioration, even in economic downturns of the future.

Another policy matter worthy of consideration is how the child welfare improvements detailed in this article should be handled in the public and political forum. Some advocates and practitioners have worried that drawing attention to the declines will prompt politicians and policymakers to cut funding and withdraw support, claiming that it is no longer needed. They point to the possibility of this feeding the trends of antigovernment political rhetoric and concerns about growing governmental fiscal exigencies. It is true that rising social problem rates have been effective in some places and some times in promoting and sustaining public and political attention (Best, 1990). But the opposite dynamic—idea that good news means bad news—does not have much precedent. The decline in crime, for example, has received considerable attention, but has not inspired calls for reductions in police or prison funding. Advocates in the teenage pregnancy field have actually been quite public in promoting the declines as arguments for continuing efforts. It can be argued that policymakers like to see a return on their investment, and often get discouraged when it appears that nothing works. The era of continually rising numbers of child maltreatment and crime victimization cases is probably over. In our view, child welfare advocates should draw attention to the declines in child maltreatment and other forms of child victimization as evidence of an encouraging trend whose momentum should be maintained and accelerated. By almost any standard, levels of child victimization, even after the declines, are still

disturbingly high. New issues, such as clergy abuse and the increased availability of child pornography images, have continued to surface. Media attention to child victims has a strong foundation in current journalistic practice and public interest and it is not going to disappear anytime soon. In the context of continuing education about the size and seriousness of the existing problems, it would seem to make sense to draw greater attention to the declines. We are actually quite baffled about why recent epidemiological reports on child maltreatment have given so little attention to the issue (U.S. Department of Health and Human Services - Administration on Children Youth and Families, 2006).

In short, we see the declines in child maltreatment and child victimization as an important issue for discussion by researchers, practitioners, and policymakers, who need to collaborate to understand what is going on and why and what are the policy and practice implications. If we can answer these questions, we may be much closer to extending or even accelerating these trends, and that is a prospect virtually everyone would celebrate.

References

- Aber, L. J., Brooks-Gunn, J., & Maynard, R. (1995). The effects of welfare reform on teenage parents and their children. *The Future of Children*, 5(2), 3–71.
- Achenbach, T. M., Deumenci, L., & Rescorla, L. A. (2003). Are American children's problems still getting worse? A 23-year comparison. *Journal of Abnormal Child Psychology*, 31(1), 1–11.
- Allen, M. (1996). The implications of the Welfare Act for Child Protection. Washington, DC: The Children's Defense Fund.
- Baum, K. (2005). *Juvenile victimization and offending, 1993-2003* (Bureau of Justice Statistics Special Report No. NCJ209468). Washington, DC: Office of Justice Programs, U.S. Department of Justice
- Best, J. (1990). Threatened children: Rhetoric and concern about child-victims. Chicago: The University of Chicago Press.
- Blumstein, A., & Wallman, J. (2000). *The crime drop in America*. New York: Cambridge University Press
- Braga, A. A., Kennedy, D. M., Waring, E. J., & Morrison Piehl, A. (2001). Problem-oriented policing, deterrence, and youth violence: An evaluation of Boston's operation ceasefire. *Journal of Research in Crime and Delinquency*, 38, 195–225.
- Bureau of Justice Statistics. (2006). *Criminal offender statistics*. Retrieved June 9, 2006, from http://www.ojp.usdoj.gov/bjs/crimoff.htm. BJS Statisticians.
- Cameron, S. (1994). A review of the econometric evidence on the effect of capital punishment. *Journal of Socio-Economics, Spring/Summer*, 23, 197–214.
- Centers for Disease Control and Prevention National Centers for Injury Prevention and Control. (2005). *Web-based Injury Statistics Query and Reporting System (WISQARS)*. Retrieved December 20, 2004, from http://webappa.cdc.gov/sasweb/ncipc/mortrate.html. Author.
- Child Trends Demographics. (2005a). Family Structure. Retrieved November 4, 2005, from http://www.childtrendsdatabank.org/tables/59_Table_1.htm. Child Trends Databank.
- Child Trends Demographics. (2005b). *Number of Children*. Retrieved November 4, 2005, from http://www.childtrendsdatabank.org/tables/53_Table_1.htm. Child Trends Databank.
- Child Trends Demographics. (2005c). Racial and Ethnic Composition of the Child Population. Retrieved November 4, 2005, from http://www.childtrendsdatabank.org/tables/60_Table_1.htm. Child Trends Databank.
- Conklin, J. E. (2003). Why crime rates fell. Boston: Allyn and Bacon.

- Cross, T., Finkelhor, D., & Ormrod, R. K. (2005). Police involvement in child protective services investigations. Child Maltreatment, 10 (3), 224–244.
- Dezhbakhsh, H., Rubin, P., & Shepherd, J. (2002). Does capital punishment have a deterrent effect? New evidence from port-moratorium panel data. Atlanta, GA: Emory University.
- DiIulio, J. (1996). Help wanted: Economists, crime, and public policy. *Journal of Economic Perspectives, Winter*, 10, 3–24.
- Donohue, J. J., & Levitt, S. D. (2001). The impact of legalized abortion on crime. *The Quarterly Journal of Economics*, 116, (2), 379–420.
- Donohue, J. J., & Levitt, S. D. (2004). Further evidence that legalized abortion lowered crime: A reply to Joyce. *The Journal of Human Resources*, XXXIX(1), 29–49.
- Dugan, L., Nagin, D., & Rosenfeld, R. (2003). Exposure reduction or retaliation? The effects of domestic violence resources on intimate partner homicide. Law & Society Review, 37 (1), 169– 198.
- Durfee, M., Tilton Durfee, D., & West, M. P. (2002). Child fatality review: An international movement. *Child Abuse & Neglect*, 26, 619–636.
- Ehrlich, I. (1975). The deterrent effect of capital punishment: A question of life and death. *American Economic Review*, 65 (3), 397–417.
- Ehrlich, I. (1977). Capital punishment and deterrence: Some further thoughts and evidence. *Journal of Political Economy*, 85 (7), 741–788.
- Farley, R. (1998). The new American reality: Who we are, how we got here, where we are going. New York: Russell Sage Foundation.
- Federal Interagency Forum on Child and Family Statistics. (2000). *America's children: Key national indicators of well-being*, 2000. Washington, DC: U.S. Government Printing Office.
- Federal Interagency Forum on Child and Family Statistics. (2005). *America's children: Key National indicators of well being 2004*. Washington, DC: U.S. Government Printing Office.
- Finkelhor, D., Cross, T. P., & Cantor, E. (2005). The justice system for juvenile victims: A comprehensive model of case flow. *Trauma Violence & Abuse*, 6 (2), 83–102.
- Finkelhor, D., & Jones, L. M. (2004). Explanations for the decline in child sexual abuse cases (Juvenile Justice Bulletin No. NC199298). Washington, DC: Office of Juvenile Justice and Delinquency Prevention.
- Finkelhor, D., & Ormrod, R. K. (2001a). *Homicides of children and youth* (Juvenile Justice Bulletin No. NCJ187239). Washington, DC: Office of Juvenile Justice & Delinquency Prevention.
- Finkelhor, D., & Ormrod, R. K. (2001b). Offenders incarcerated for crimes against juveniles (Juvenile Justice Bulletin No. NCJ191028). Washington, DC: United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention.
- Finkelhor, D., Ormrod, R. K., Turner, H. A., & Hamby, S. L. (2005). The victimization of children and youth: A comprehensive, national survey. *Child Maltreatment*, 10 (1), 5–25.
- Foote, C. L., & Goetz, C. F. (2005). Testing economic hypotheses with state-level data: A comment on Donohue and Levitt (2001) (Working paper No. 05-15). Boston: Federal Reserve Bank of Boston.
- Fox, J. A. (1996). Trends in juvenile violence: A report to the United States Attorney General on current and future rates of juvenile offending. Washington, DC: Bureau of Justice Statistics.
- Fryer, R. G., Heaton, P. S., Levitt, S. D., & Murphy, K. M. (2005). Measuring the impact of crack cocaine. (NBER Working Papers No. 11318). Cambridge, MA: National Bureau of Economic Research, Inc.
- Geen, R., Fender, L., Leos-Urbel, J., & Markowitz, T. (2001). Welfare reform's effect on child welfare caseloads. Washington, DC: The Urban Institute.
- Gibbons, R. D. (2005). The relationships between antidepressant medication use and rate of suicide. *Archives of General Psychiatry*, 62 (2), 165–172.
- Gladwell, M. (2002). The tipping point: How little things can make a big difference. New York: Little, Brown & Company.
- Glasscock, B., Bilchik, S., Chandler, N., Rosenblatt, D., Cromartie, G., & Needle, J. (2002). Building partnerships that protect our children: Recommendations from the 2001 Child Protection Summit. Washington, DC: International Association of Chiefs of Police, Child Welfare League of America, Office of Juvenile Justice & Delinquency Prevention, & National Children's Alliance.

Gruber, J., Levine, P., & Staiger, D. (1999). Abortion legalization and child living circumstances: Who is the "Marginal Child"? *The Quarterly Journal of Economics*, 114 (1), 263–291.

- Hammer, H., Finkelhor, D., & Sedlak, A. J. (2002). *Runaway/thrownaway children: National estimates and characteristics* (Juvenile Justice Bulletin No. NCJ196469). Washington, DC: Office of Juvenile Justice & Delinquency Prevention.
- Hanson, R. K., & Morton-Bourgon, K. E. (2005). The characteristics of persistent sexual offenders: A meta-analysis of recidivism studies. *Journal of Consulting and Clinical Psychology*, 73, 1154–1163.
- Hernandez, D. J. (1993). *America's children: Resources from family, government, and the economy.*New York: Russell Sage Foundation.
- Hirschi, T. (1969). Causes of delinquency. Los Angeles: University of California Press.
- Jensen, P. S., Edelman, A., & Nemeroff, R. (2003). Pediatric psychopharmacoepidemiology: Who is prescribing, for whom, and why? In A. Martin, L. Scahill, D. Charney & J. Leckman (Eds.), *Textbook of child adolescent psychopharmacology*. New York: Oxford University Press.
- John Jay College of Criminal Justice. (2003). *The nature and scope of the problem of sexual abuse of minors by Catholic priests and deacons in the United States*. Retrieved December 7, 2005, from http://www.usccb.org/nrb/johnjaystudy/index.htm. United States Conference of Catholic Bishops (USCCB).
- Johnston, L. D., O'Malley, P. M., Bachman, J. G., & Schulenberg, J. E. (2005). Monitoring the Future National Survey results on drug use, 1975-2004: Volume 1, Secondary school students (No. 05-5727). Bethesda, MD: National Institute on Drug Use.
- Jones, L. M., Finkelhor, D., & Halter, S. (2006). Child maltreatment trends in the 1990's: Why does neglect differ from sexual and physical abuse. *Child Maltreatment*, 11 (2), 107–120.
- Jones, L. M., Finkelhor, D., & Kopiec, K. (2001). Why is sexual abuse declining? A survey of state child protection administration. *Child Abuse & Neglect*, 25 (9), 1139–1158.
- Kessler, R. C., Demler, O., Frank, R. G., Olfson, M., Pincus, H. A., Walters, E. E., Wang, P., Wells, K.
 B., & Zaslavsky, A. M. (2005). Prevalence and treatment of mental disorders, 1990 to 2003.
 The New England Journal of Medicine, 352 (24), 2515–2523.
- Knitzer, J., & Bernard, S. (1997). The new welfare law and vulnerable families: Implications for child welfare/child protection systems. *Children and Welfare Reform, Issue Brief 3*. New York: Columbia University Press.
- Lafree, G. (1998). Losing legitimacy: Street crime and the decline of social institutions in America. Boulder, CO: Westview Press.
- Lafree, G. (1999). Declining violent crime rates in the 1990's: Predicting crime booms and busts. Annual Review of Sociology, 25 (1), 145–169.
- Land, K. C., Lamb, V. L., & Kahler Mustillo, S. (2001). Child and youth well-being in the United States, 1975-1998: Some findings from a new index. Social Indicators Research, 56, 241–320.
- Lanning, K. V. (2001). Child molesters: A behavioral analysis (Bulletin No. 2-86-005-4). Alexandria, VA: National Center for Missing & Exploited Children.
- Levitt, S. D. (2004). Understanding why crime fell in the 1990s: Four factors that explain the decline and six that do not. *Journal of Economic Perspectives*, 18 (1), 163–190.
- Lott, J. R., & Whitley, J. E. (2001). Abortion and crime: Unwanted children and out-of-wedlock births. Yale Law & Economics Research Paper No. 254. (http://ssrn.com/abstract=270126).
- Lynch, J. P. (2002). *Trends in juvenile violent offending: An analysis of victim survey data* (No. NCJ 191052). Washington, DC: U.S. Department of Justice.
- Marans, S., Berkowitz, S. J., & Cohen, D. J. (1998). Police and mental health professionals. Collaborative responses to the impact of violence on children and families. *Child & Adolescent Psychiatric Clinics of North America*, 7 (3), 635–651.
- Martin, S. E., & Besharov, D. J. (1991). Police and child abuse: New policies for expanded responsibilities. Washington, DC: National Institute of Justice.
- Mechanic, D., & Bilder, S. (2004). Treatment of people with mental illness: A decade-long perspective. *Health Affairs*, 23 (4), 84–95.
- Milner, J. S. (1993). Individual and family characteristics associated with intrafamilial child physical and sexual abuse. In P. K. Trickett & C. J. Schellenbach (Eds.), *Violence against children in the* family and community (pp. 141–170). Washington, DC: American Psychological Association.

- Minnesota Department of Children Families & Learning and Minnesota Department of Human Services. (2001). Minnesota Student Survey: Key Trends through 2001. Roseville, MN: Author.
- Mocan, H. N., & Gittings, R. K. (2003). Getting off death row: Commuted sentences and the deterrent effect of capital punishment. *Journal of Law and Economics*, 46, 453–478.
- Moore, K. A., Manlove, J., Terry-Humen, E., Williams, S., Papillo, A. R., & Scarpa, J. (2001). CTS facts at a glance. Washington, DC: Child Trends.
- Olfson, M., Marcus, S. C., Druss, B., Elinson, L., Tanielian, T., & Pincus, H. A. (2002). National trends in the outpatient treatment of depression. *The Journal of American Medical Association*, 287 (2), 203–209.
- Olfson, M., Marcus, S. C., Weissman, M. M., & Jensen, P. S. (2002). National trends in the use of psychotropic medications by children. *Journal of the American Academy of Child and Adolescent Psychiatry*, 41 (5), 514–521.
- Ouimet, M. (2005, November). Oh Canada! The crime decline north of the border. Paper presented at the American Society of Criminology Conference, Toronto, Ontario, Canada.
- Peddle, N., & Wang, C.-T. (2001). Current trends in child abuse prevention, reporting, and fatalities: The 1999 Fifty State Survey (Working paper #808). Chicago: Prevent Child Abuse America.
- Rennison, C. M., & Welchans, S. (2000). *Intimate partner violence* (BJS Special Report No. NCJ 178247). Washington, DC: U.S. Department of Justice Bureau of Justice Statistics.
- Robison, L. M., Sclar, D. A., Skaer, T. L., & Galin, R. S. (1999). National trends in the prevalence of attention-deficit/ hyperactivity disorder and the prescribing of methyphenidate among schoolage children: 1990-1995. Clinical Pediatrics, 38 (4), 209–217.
- Robison, L. M., Skaer, T. L., Sclar, D. A., & Galin, R. S. (2002). Is attention deficit hyperactivity disorder increasing among girls in the US? *CNS Drugs*, *16* (2), 129–137.
- Romano-Papillo, A., Franzetta, K., Manlove, J., Anderson Moore, K., Terry-Humen, E., & Ryan, S. (2002). *Teen Birth Rates* (Facts at a Glance). Washington, DC: Child Trends.
- Rosenfeld, R. (2004). The case of the unsolved crime decline. Scientific American, 290 (2), 82-89.
- Sedlak, A. J. (1991). National Incidence and Prevalence of Child Abuse and Neglect: 1988 Revised Report. Rockville, MD: Westat, Inc.
- Sedlak, A. J., & Broadhurst, D. D. (1996). *Third national incidence study of child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services.
- Sengupta, S. (2000, August 10). No Rise in Child Abuse Seen in Welfare Shift. New York Times, p. 1.
 Sherman, L. W., Schmidt, J. D., & Rogan, D. P. (1992). Policing domestic violence: Experiments and dilemmas. New York: Free Press.
- Shirk, M. (2005, October). The Meth Epidemic: Hype vs. Reality. Youth Today, pp. Front, 42–43, 45.Snyder, H. N., & Sickmund, M. (1999). Juvenile offenders and victims: 1999 National Report. Washington, DC: United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention
- Snyder, H. N., & Sickmund, M. (2006). Juvenile offenders and victims: 2006 National Report. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- Sorenson, S. B., Wiebe, D. J., & Berk, R. A. (2002). Legalized abortion and the homicide of young children: An empirical investigation. *Analyses of Social Issues and Public Policy*, 2 (1), 239– 256.
- Spelman, W. (2000). The limited importance of prison expansion. In A. Blumstein & J. Wallman (Eds.), The crime drop in America (pp. 97–129). Cambridge, UK: Cambridge University Press.
- Steffensmeier, D., & Harer, M. D. (1999). Making sense of recent US crime trends, 1980 to 1996/1998: Age composition effects and other explanations. *Journal of Research in Crime and Delinquency*, 36 (3), 235–274.
- Straus, M. A., & Gelles, R. J. (1986). Societal changes and change in family violence from 1975 to 1985 as revealed by two national surveys. *Journal of Marriage and the Family, 48*, 465–480.
- Straus, M. A., & Mathur, A. (1996). Social change and the trends in approval of corporal punishment by parents from 1968 to 1994. In D. Frehsee, W. Horn & K. D. Bussman (Eds.), *Family violence against children: A challenge for society* (pp. 91–105). New York: Walter deGruyter.
- Theodore, J. (2004). Did legalized abortion lower crime? Journal of Human Resources, 39 (1), 1–28.

Trocme, N., Fallon, B., MacLaurin, B., Daciuk, J., Felstiner, C., Black, T., Tonmyr, L., Blackstock, C., Barter, K., Turcotte, D., & Cloutier, R. (2005). *Canadian Incidence Study of Reported Child Abuse and Neglect – 2003: Major Findings*. Canada: Minister of Public Works and Government Services.

- Turner, H. A., Finkelhor, D., & Ormrod, R. K. (in press). Family structure variations in patterns and predictors of child victimization. *American Journal of Orthopsychiatry*.
- U.S. Bureau of the Census. (2003). State estimates for people under age 18 in poverty for US: 2000 (Current Population Survey - Annual Social and Economic Supplement). Washington, DC: Housing and Household Economic Statistics Division, Small Area Estimates Branch.
- U.S. Census Bureau. (1982–2006). Employed civilians by occupation, sex, race, and Hispanic origin. Retrieved June 5, 2006, from http://www.census.gov/prod/www/statistical-abstract.html. Author.
- U.S. Department of Health and Human Services Administration on Children Youth and Families. (2002). Child Maltreatment 2000: Reports from the states to the National Child Abuse & Neglect Data System. Washington, DC: U.S. Government Printing Office.
- U.S. Department of Health and Human Services Administration on Children Youth and Families. (2006). *Child Maltreatment 2004*. Washington, DC: U.S. Government Printing Office.
- U.S. Department of Justice. (1999). A national assessment of school resource officer programs (Solicitation No. SL 000394). Washington, DC: National Institute of Justice.
- Uggen, C. (2000). Work as a turning point in the life course of criminals: A duration model of age, employment, and recidivism. *American Sociological Review, 67*, 529–546.
- Ventura, S. J., Mathews, T. J., & Hamilton, B. E. (2001). Births to teenagers in the United States, 1940-2000. CDC - National Vital Statistics Reports, 49 (10), 1–24.
- Winship, S., & Jencks, C. (2004). How did the social policy changes of the 1990s affect material hardship among single mothers? Evidence from the CPS Food Security Supplement (KSG Faculty Research Working paper Series No. RW04-027). Cambridge, MA: Kennedy School of Government (KSG) Harvard University.
- Wolak, J., Mitchell, K. J., & Finkelhor, D. (in press). Unwanted and wanted exposure to online pornography in a national sample of youth Internet users. *Pediatrics*.
- Zito, J. M., Safer, D. J., dosReis, S., Garner, J. F., Magder, L., Soeken, K., Boles, M., Lynch, F., & Riddle, M. A. (2003). Psychotropic practice patterns for youth: A 10-year perspective. Archives of Pediatrics & Adolescent Medicine, 157, 17–25.

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APPENDIX:

Description of Data Sources for Trends in Child Victimization

National Child Abuse and Neglect Data System (NCANDS) Data on trends in sexual and physical abuse were drawn from NCANDS. NCANDS is overseen by the U.S. Department of Health and Human Services (USDHHS) and collects annual data on abused and neglected children known to state child welfare agencies. State agencies submit data to NCANDS on child abuse investigations, victims, and perpetrators. The number of participating states has increased since the program was initiated in 1990 with all but a few states submitting data since the mid-1990s. For most years of data collection, states have submitted statistics to NCANDS in aggregate but an increasing number are submitting case-level data. Data on victims, perpetrators, and type of victimization (sexual abuse, physical abuse, neglect etc.) are only available for cases where abuse was verified (substantiated or indicated) following a child protection investigation.

National Crime Victimization Survey (NCVS)

Trend data on sexual assaults and other crimes against teenagers 12–17 and trends in domestic violence were drawn from the NCVS. The NCVS is a self-report survey conducted annually by the U.S. Department of Commerce's Bureau of the Census on behalf of the U.S. Department of Justice's Bureau of Justice Statistics. Approximately 55,000 U.S. households with a total of 100,000 individuals ages 12 and older are surveyed each year. The survey collects information about the characteristics of victimizations, including victim and perpetrator demographics, the incident location, and a description of the incident.

Minnesota Student Survey Additional self-report information about sexual and physical abuse victimization trends is available through the Minnesota Student Survey. This survey is a voluntary, anonymous, self-administered questionnaire that asks students about a range of experiences including substance use, sexual behavior, and school climate. Two survey questions ask about sexual abuse victimization and one asks about familial physical abuse. The survey has been administered to 6th, 9th, and 12th grade students in Minnesota five times: in 1989, 1992, 1995, 1998, and 2001. Approximately 90–99% of Minnesota's school districts have participated in the survey each year, involving more than 100,000 students. For trend analyses, data are limited to the approximately 69% of Minnesota's school districts that participated in the survey in all 5 years. A weighting procedure was used to adjust for differences in student participation rates across districts. For more information about the Minnesota Student Survey's methodology, see Harrison, Fulkerson, and Beebe (1997), or Minnesota Department of Children, Families & Learning (2001).

APPENDIX (Continued)

Supplementary Homicide Reports (SHR) Data on homicides against children and infants was drawn from the FBI's Supplementary Homicide Reports (SHR), which is a part of the Uniform Crime Reporting (UCR) program. Under the UCR program, law enforcement agencies submit information to the FBI monthly on criminal offense, arrest, and law enforcement personnel statistics. The UCR program collects only those data that come to the attention of law enforcement through victim reports or observation. Supplemental data about homicide incidents are submitted through the SHR monthly with detail on location, victim, and offender characteristics. These reports include information on the age, race, and sex of victims and offenders, and on the victim/offender relationship, weapon use, and circumstance of the crime.