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Title

Risk of Postneonatal Infant Mortality Associated With Prior Founded Allegations of Child Abuse

Priority 1 (Research Category)

Child and adolescent health

Presenters

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Abstract

Context: There are ~7500 postneonatal deaths (28 days to under 1 year) in the US annually, of which a majority are preventable. Previous studies have reported a child's prior encounter with child protective services (CPS) as a risk factor for preventable death but few studies have evaluated this in relation to subsequent postneonatal deaths.

Objective: To measure the association between prior reports of child abuse and subsequent postneonatal death.

Study Design/Analysis: Secondary data analysis from the case-control Chicago Infant Mortality Study (CIMS). Conditional logistic regression modeling determined the odds of postneonatal death when there was a founded prior allegation.

Setting and Population Studied: CIMS included all sudden, unexplained infant deaths up to 1 year in Chicago (November 1993-April 1996) (n=469), and matched living controls (n=472). Information on prior child abuse reports and outcomes was obtained through the Illinois Department of Children and Family Services (DCFS) State Central Registry for each case and control.

Instrument: Cause of death was determined by Cook County Medical Examiners based on autopsy, death scene investigation and review of the medical history. DCFS database was searched on infant's name, mother's name, screening number and other identifiers. Only "founded" allegations that occurred prior to the date of death (cases) and date of interview (controls) were included

Outcome measures: Founded allegations for cases by cause of death. Odds of death by prior allegations and other socio-demographic factors.

Results: DCFS founded allegations were identified in 119 cases (25%) and/or their families and in 35 controls (7%; OR = 4.25, 95% CI, 2.86, 6.35). There were no clear patterns when frequency of allegations was analyzed by cause of death. Families with founded allegations were almost 4 times more likely to experience a postneonatal death (aOR =3.79, 95% CI, 1.56, 9.10). Lower maternal education, age,

inadequate prenatal care and infant-parent bedsharing were also associated with higher odds of postneonatal death.

Conclusions: Child protective services involvement is an opportunity for education to help reduce the incidence of potentially preventable infant deaths. Families should have access to appropriate acute and preventive care and receive ongoing education about child abuse prevention, infant safety, reducing the risk of preventable deaths such as SIDS, and when to seek medical attention.