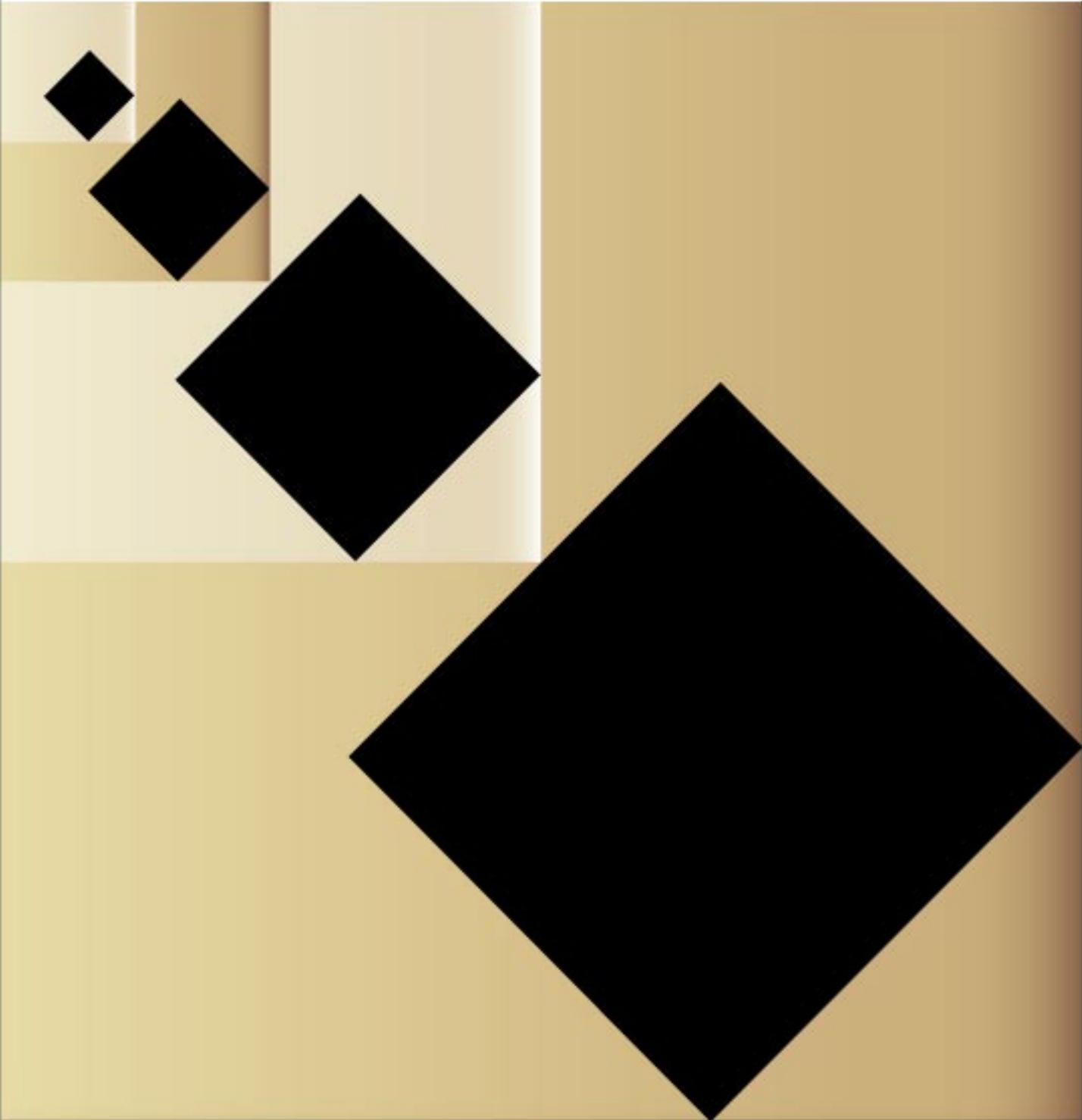


# Summary

## CHILD ABUSE

Leiden Attachment Research Program

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# Summary

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## **Why conduct a Netherlands' prevalence study on maltreatment of youth?**

How often does child abuse and neglect (CAN) occur in the Netherlands? For more than three decades the prevalence and prevention of CAN have been among the most hotly debated problems in Dutch politics and public opinion. Nevertheless, the prevalence of CAN was an unknown parameter in these discussions. The widely accepted but rather rough estimate of 50,000 ~ 80,000 cases of child maltreatment per year were based on American studies (in particular the National Incidence Studies, or NIS). The current Netherlands' Prevalence study of Maltreatment of youth (NPM-2005) is the first systematic and nation-wide effort to examine the prevalence of CAN in our country.

## **The design of the study**

The NPM-2005 used more than 1,100 carefully selected informants ('sentinels') across all major regions of the Netherlands. The informants were professionals working with children, and recruited from various health care, child care and educational institutions in society. The informants were instructed in the use of a uniform registration system for CAN, based on detailed definitions and descriptions of the various forms of maltreatment. The overall definition of CAN was derived from Dutch law, and specific descriptions were taken from coding forms used in the American NIS. In addition, the formal registrations of all Dutch Child Protection Services ('Advies- en Meldpunten Kindermishandeling', AMK) during 2005 were included in the final estimates of the prevalence rates.

## **The prevalence of child abuse and neglect**

In the current NPM-2005 study the prevalence of CAN is estimated to be 107,200 cases in the year 2005. This is a prevalence of 30 cases of maltreatment per 1,000 children in the age range of 0-17. The majority of the maltreated children suffered from neglect, in particular physical, emotional, or educational forms of neglect. About 4,700 children were victims of sexual abuse which is 1.3 cases per 1,000 children. Physical maltreatment occurred in more than 19,000 cases. Almost a quarter of the child abuse or neglect victims suffered from sexual and/or physical abuse.

The estimates for prevalence are based on maltreatment cases observed in 2005. Children who were maltreated in the years before 2005 but not in 2005 itself, were not counted. The 'life-time' prevalence of CAN across the childhood and adolescent years, therefore, must be larger than the prevalence across one year established in the NPM-2005. Because cases observed to be maltreated in 2005 were possibly abused in the preceding years as well, we cannot claim to have computed incidence figures. The number of children who have been maltreated should be considered a point estimate with a confidence interval. This interval is about 5,000 cases more or 5,000 cases less than we actually found. The prevalence of 30 maltreatment cases per 1,000 children is rather high compared to similar figures in other countries. In the United States of America the prevalence of CAN established with a comparable method has been estimated to be 23 cases per 1,000 children. Prevalence studies using retrospective questionnaires to ask children about their maltreatment experiences produced on average almost 200 CAN cases per 1,000 children. It is argued that self-reported CAN is less valid than observations by well-instructed professionals.



### **Risk factors**

In families with very low educated parents the risk for child abuse and neglect increases almost 7-fold. When both parents are jobless the risk is more than 5 times larger. In families with parents from ethnic minorities the risk for child abuse and neglect is about 3.5 times larger, but when their lower educational level is taken into account the risk becomes much smaller. A larger family (three or more children) and single parenthood double the risk for CAN. These risk factors are neither new nor surprising but belong to the 'usual suspects'. The influence of the various risk factors can now be compared, and the potential effectiveness of (preventive) interventions dealing with the different risks can be evaluated.

### **Prevention of child maltreatment and neglect**

Parents without a job and with minimal education are at risk for maltreating their children. Of course, causal relations cannot be established and specific interventions have not yet been evaluated. Nevertheless, it is argued that because of the high risks involved in lack of education and work, adequate socio-economic and educational policies to create more jobs and to stop school drop-out are of crucial importance, also for the prevention of child abuse and neglect. Family constellation is also related to CAN. In families with single parents and in larger families, relatively high risks for child abuse and neglect have been found. Parenting support might provide some relief here, and may constitute an effective preventive intervention. Well-baby clinics may have a unique role as provider of such support as they reach nearly all parents with infants and young children. Further research into the effectiveness of parent training, based on video-feedback and focusing on sensitive discipline, should be stimulated.

### **Repeated prevalence studies to monitor CAN**

Repeated assessments of the prevalence of child abuse and neglect in the Netherlands is necessary, on the basis of the NPM approach that was implemented in the current study. Periodic assessments may provide sufficient information to evaluate the influence of policy changes, changes in the composition of the Dutch population, or changes in the child rearing attitudes of parents. For several decades the US government finances the expensive National Incidence Studies (NIS) through the United States Department of Health and Human Services. Clearly, the US government considers it to be her task to monitor the development of CAN carefully. Why has this not been the case in the Netherlands (or in other European countries for that matter)? The reason can not be the low prevalence of child abuse and neglect in the Netherlands, as is documented in the current study. With a prevalence rate of 30 per 1,000 children the Netherlands surpasses the USA. What is needed is a European initiative to implement CAN prevalence studies in the various countries in order to facilitate the comparison of country-specific policies to curb child maltreatment.