

Child & Elder Maltreatment in King County, WA: March – September 2020

BACKGROUND

Community mitigation efforts to limit the spread of novel coronavirus disease 2019 (COVID-19) resulted in dramatic increases in the number of King County, Washington residents who are unemployed or furloughed, and/or need assistance affording food, utilities, housing, and accessing health care.¹ These stressors, added to social isolation and grief, are likely to affect the mental health and coping of many people.² These issues may be especially acute for people experiencing family violence, for whom being at home is not always a safe place. Prior research demonstrates that the social isolation and stress resulting from pandemics and natural disasters, combined with decreased access to external supports, can increase the occurrence of family violence.³ Understanding the patterns of family violence in King County during the pandemic and into the recovery period requires looking across several data sources to understand what communities are experiencing.

Two briefs describe family violence patterns; one covered domestic violence, and this brief examines child and elder maltreatment. The data sources reviewed are a partial look at response systems relating to child and elder maltreatment and thus likely underestimate the number of incidents. Most reports of maltreatment originate from people external to the situation. For example, 67.3% of child maltreatment reports nationwide come from professionals in contact with the child as part of their job (teachers, social service providers, medical professionals, etc).⁴ Social distancing may reduce people's access to children and elders subject to maltreatment, thus affecting the number and nature of incidents reported and referred for investigation. National, state, and county policies designed to mitigate the impacts of COVID-19 community spread are also being tracked.

KEY POINTS

- 1) The number of emergency department (ED) visits related to suspected child maltreatment and neglect declined at the beginning of the pandemic, as did all ED visits. Since May 2020, child maltreatment-related visits have returned to 2019 rates.
- 2) In the second quarter of 2020, investigations of suspected child maltreatment in King County by Child Protective Services declined by 45% compared to the same period of 2019. This decline likely reflects reduced interactions children had with adults outside the household who would otherwise recognize and report signs of abuse and neglect.
- 3) The number of King County investigations of elder maltreatment has remained mostly consistent over the pandemic months. Statewide, July and August 2020 had significantly fewer investigations than in 2019.
- 4) From May-July 2020, elder maltreatment investigations in King County were more likely to involve allegations of self-neglect and less likely to involve allegations of harm by someone else.
- 5) After social distancing orders were put into place, fewer vulnerable adult protection orders were filed in 2020 for King County residents.
- 6) Given the risks of poor COVID-19 outcomes, older adults may need to continue socially isolating, which could increase their risk of maltreatment.

¹ For unemployment, see <https://www.kingcounty.gov/depts/health/covid-19/data/impacts/unemployment.aspx>. For food insecurity, see <https://publichealthinsider.com/2020/06/17/with-food-insecurity-on-the-rise-public-health-highlights-critical-new-and-existing-resources/>. For insurance needs, see : <https://ofm.wa.gov/washington-data-research>.

² Lee S, Chan L, Chau A, Kwok K, Kleinman A. 2005. The experience of SARS-related stigma at Amoy Gardens. *Social Science & Medicine*. 2005; 61, 2038–46. doi: 10.1016/j.socscimed.2005.04.010. Sprang G, Silman M. 2013. Posttraumatic stress disorder in parents and youth after health-related disasters. *Disaster Medicine & Public Health Preparedness*. 2013; 7, 105–10. doi: 10.1017/dmp.2013.22.

³ Humphreys KL, Myint MT, Zeanah CH. Increased Risk for Family Violence During the COVID-19 Pandemic. *Pediatrics*. April 2020:e20200982. doi:10.1542/peds.2020-0982. Campbell AM. An increasing risk of family violence during the Covid-19 pandemic: Strengthening community collaborations to save lives. *Forensic Sci Int Reports*. 2020;2:100089. doi:10.1016/j.fsir.2020.100089. Kuehn BM. Surge in Child Abuse, Harm During COVID-19 Pandemic Reported. *JAMA*. 2020;324(7):621. doi:10.1001/jama.2020.14433

⁴ Children's Bureau. Child Maltreatment 2018: Summary of Key Findings. Retrieved on 10/15/20 from: <https://www.childwelfare.gov/pubPDFs/canstats.pdf>

CHILD MALTREATMENT

Child maltreatment includes any type of abuse and neglect of children under age 18 by a parent, caregiver or another person in a custodial role. Data measuring the occurrence of child maltreatment come from reports screened in for investigation by Child Protective Services (CPS) and medical providers' health care encounter notes from emergency department (ED) visits. Both data sources show a decrease in child maltreatment in 2020 to date compared to 2019. These sources reflect incidents reported to these responders. As mentioned previously, social distancing and remote learning implemented by schools likely reduced the contact people mandated and most likely to report suspected maltreatment had with children.

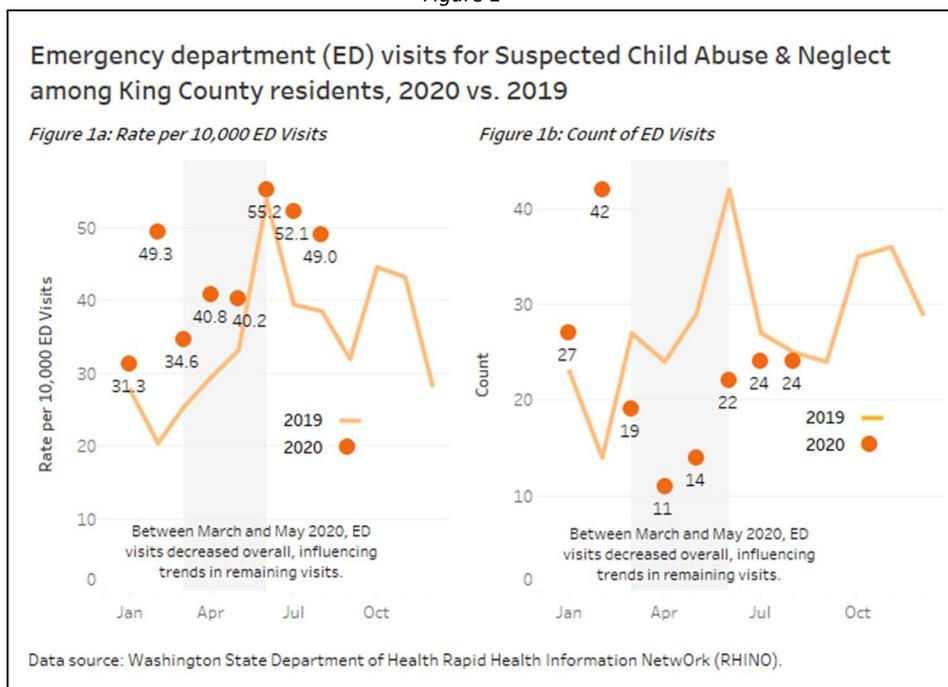
Investigations and Assessments of suspected child maltreatment in King County declined 45% during April, May and June

During the second quarter of 2020, the number of reports screened in for investigation or assessment of alleged child maltreatment conducted in King County by Child Protective Services was 45% lower than the number conducted in the second quarter of 2019 and 33% lower than that of 2020's first quarter (data not shown).⁵ Statewide, investigations during the same period were 31% lower compared to the same months of 2019 and 38% lower than in 2020's first three months.⁶ The Seattle Police Department also received fewer monthly calls, relative to 2019, for service related to child abandonment, abuse or neglect since the start of the pandemic.⁶ With social distancing and remote learning in place, people may be less likely to observe and report signs of family violence. Children may also be less able to safely share concerns with an adult outside the household.

Number of emergency department visits related to suspected child maltreatment decreased at the beginning of the pandemic

ED visits for suspected child abuse and neglect (CA/N) is a complementary data source that may capture additional suspected CA/N cases not reported to CPS. The measure is based on medical provider notes

Figure 1



⁵ Center for Social Sector Analytics & Technology (2020). [Graph representation of Washington state child welfare data 10/26/2020]. *Investigations & Assessments (Count)*. Retrieved from <http://www.vis.pocdata.org/graphs/ia-counts>

⁶ Seattle Police Department. *Calls for Service Dashboard*. Accessed on 10/23/2020 from <https://www.seattle.gov/police/information-and-data/calls-for-service-dashboard>

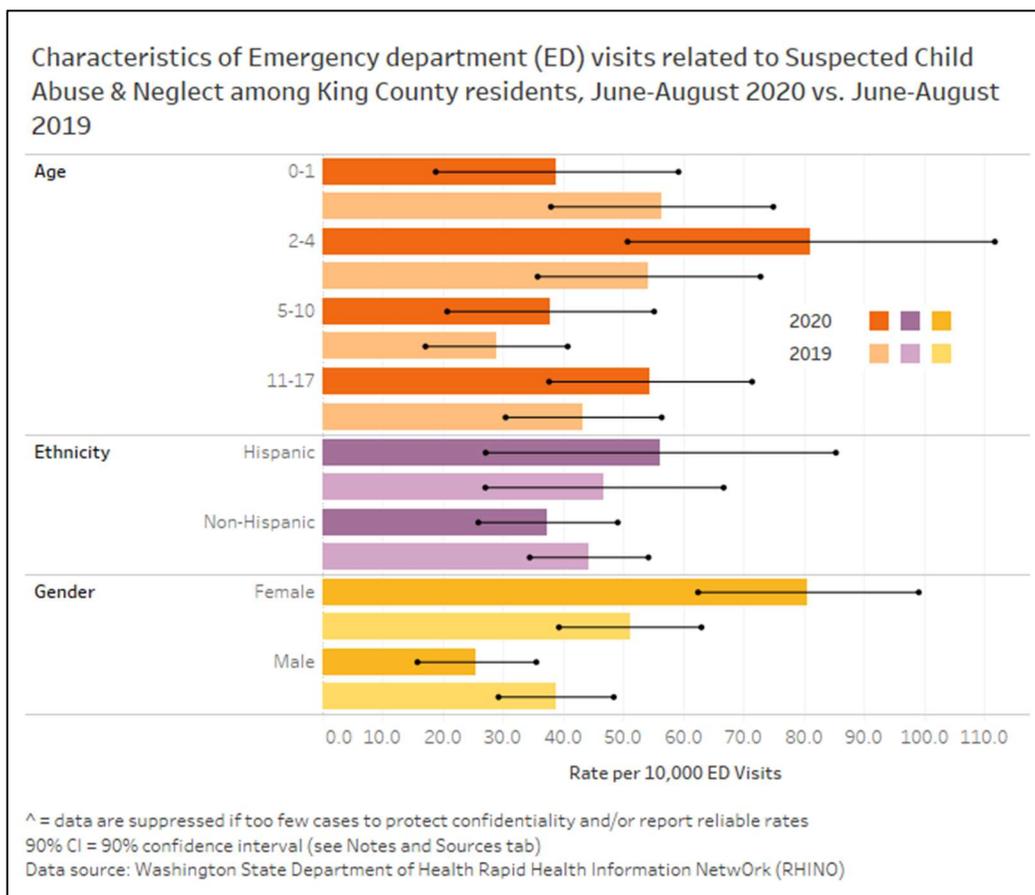
that mention suspected or confirmed physical, sexual, or emotional abuse; or physical or emotional neglect from a parent or caregiver.⁷ ED visits related to suspected CA/N are likely an underestimate due to missing or incomplete information and the sensitivity of the query definition being used to identify relevant records.

The 2020 monthly rates of ED visits related to suspected CA/N appear slightly elevated compared to corresponding months in 2019 (Figure 1a). Due to recommendations to limit ED visits to severe illnesses and an increased use of telemedicine, ED visits for all reasons declined drastically (data not shown). Thus the rate of 2020 ED visits related to suspected CA/N is not entirely comparable to prior years. The number of ED visits related to suspected CA/N during March and April 2020 declined compared to 2019 (Figure 1b). Between May and August 2020, estimated monthly counts of ED visits related to suspected child maltreatment were similar to 2019 data. Use of ED visits as an indicator of suspected CA/N can be influenced by differences in healthcare seeking patterns and access to care. Since not all CA/N injuries may require an ED visit, the elevated rates of suspected CA/N ED visits in more recent months, even with decreased overall ED use, indicate that this is an important metric to continue to monitor.

Continued monitoring needed to identify demographic differences in rates of ed visits involving suspected child maltreatment

As with the counts and rates of ED visits involving suspected CA/N, the overall decline in ED visits during the pandemic affect the rates observed when examining the demographics of these visits. When comparing ED visits involving suspected CA/N for the period June-August 2020 to the same time period in 2019, few significant changes occurred by demographic characteristics (Figure 2). This is related to the

Figure 2



⁷ For details on definition of CDC suspected child abuse and neglect v1 see: <https://knowledgerepository.syndromicsurveillance.org/cdc-suspected-child-abuse-and-neglect-v1>

low number of incidents observed. Rates of ED visits involving suspected CA/N between June and August 2020 appeared elevated in comparison to the same months in 2019 among children ages two to four and 11-17 years, and children of Hispanic ethnicity, though observed differences are not statistically significant. Information by race for June-August 2020 is suppressed for all racial groups except white people in order to ensure confidentiality (observed number of visits is under ten). Suspected CA/N was slightly more prevalent among females than males in 2020 compared to the same months in 2019, though this may change as ED visits continue to return to levels observed prior to the pandemic.

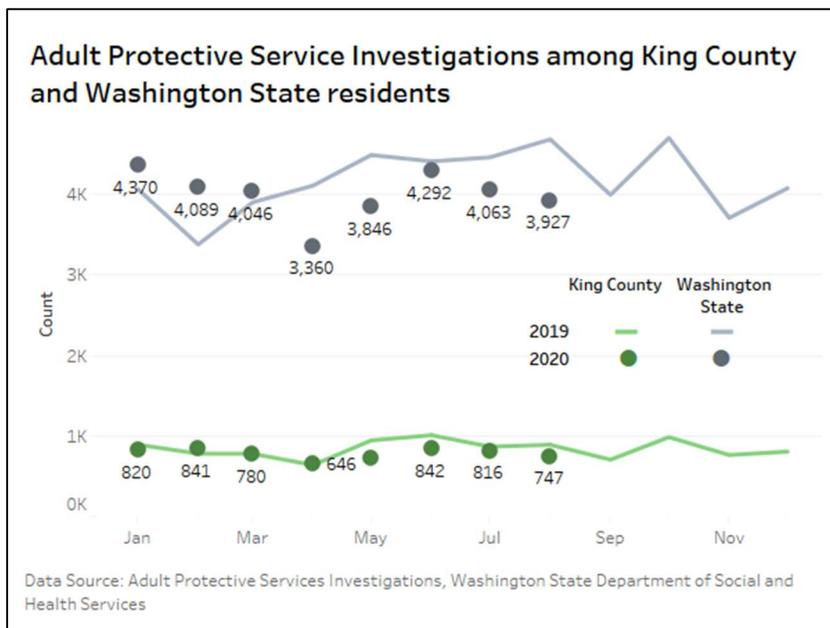
ELDER MALTREATMENT

Elder maltreatment involves risk of harm to an older adult (age 60 or older) from physical, sexual, emotional, or financial abuse as well as neglect to meet their basic needs.⁸ Prior to the pandemic, 1 in 10 people nationwide aged 60 or older who lived at home experienced elder abuse,⁹ which is likely an underestimate. Of the reported cases, 60% involved a family member allegedly perpetrating harm,¹⁰ one reason many worry about accurately identifying and tracking elder abuse during this period of social distancing.

King County elder maltreatment investigation numbers remained consistent in 2020 and 2019

The Washington State Department of Social and Health Services Adult Protective Services (APS)¹¹ investigates reports of abuse, abandonment, neglect, exploitation and self-neglect of vulnerable adults (those with a developmental disability or age 60 years or older with functional, mental or physical inability for self-care). In 2020, the number of APS investigations involving King County residents per month did not differ from the number in the same month of 2019 until May (Figure 3). In May and June 2020, the number of King County APS investigations was significantly lower than in the same months in

Figure 3



⁸ Centers for Disease Control and Prevention. Preventing Elder Abuse. Retrieved on 10/07/2020 from: <https://www.cdc.gov/violenceprevention/elderabuse/fastfact.html>. Allegations include self-neglect, a failure to meet one’s needs due to impairment or diminished capacity.

⁹ Acierno R, Hernandez MA, Amstadter AB, et al. Prevalence and correlates of emotional, physical, sexual, and financial abuse and potential neglect in the United States: the National Elder Mistreatment Study. *Am J Public Health*.2010;100(2):292-297.

¹⁰ Amstadter AB, Cisler JM, McCauley JL, Hernandez MA, Muzzy W, Acierno R. Do incident and perpetrator characteristics of elder mistreatment differ by gender of the victim? Results from the National Elder Mistreatment Study. *J Elder Abuse Negl*. 2011;23(1):43-57

¹¹ For more information, see <https://www.dshs.wa.gov/altsa/adult-protective-services>.

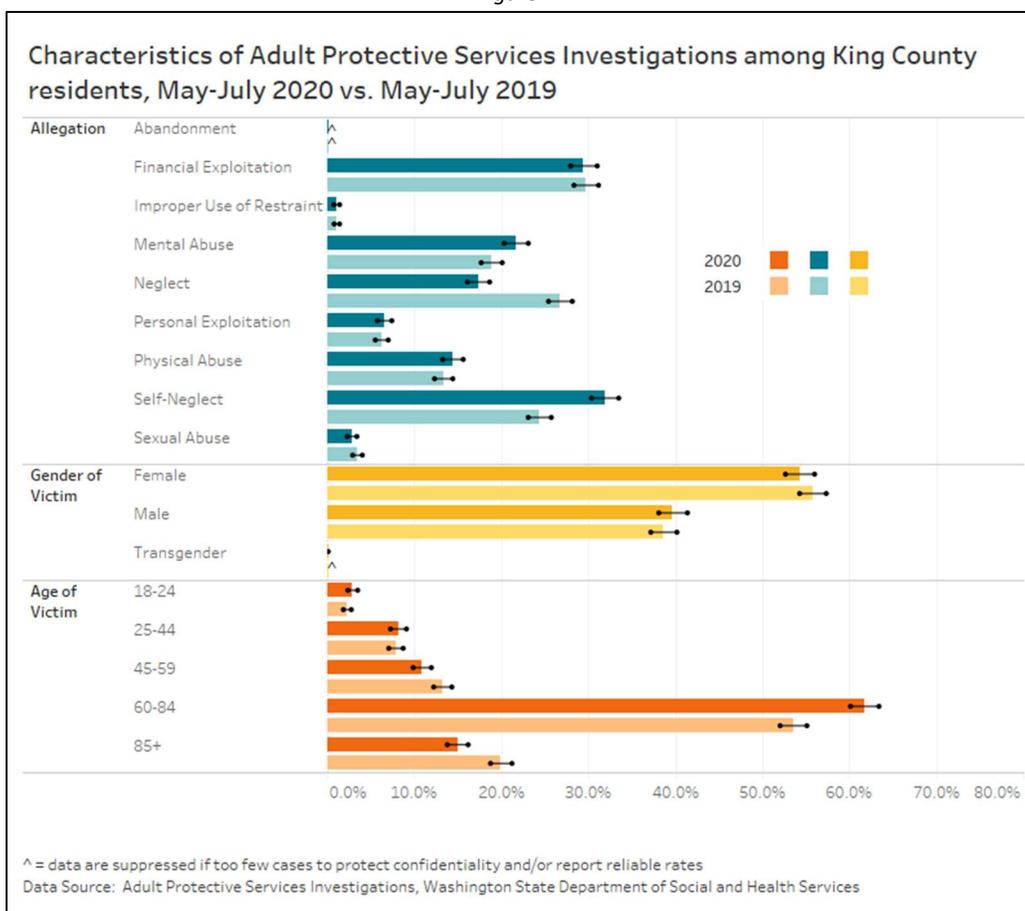
2019. Statewide, APS investigations were significantly lower in July-August 2020 compared to July-August 2019.

Between May-July 2020, elder maltreatment investigations were more likely to involve allegations of self-neglect than other allegation types

APS investigations for King County residents conducted between May and July 2020 were more likely to involve self-neglect than other allegation types compared to the corresponding months in 2019 (Figure 4). This increase in self-neglect may reflect the impact of social isolation among many elderly adults that can accompany social distancing. Social distancing may be especially prevalent for this population, given they are at higher risk of poorer COVID-19 outcomes.

The people APS investigated for potential maltreatment skewed slightly younger in 2020 compared to 2019; a higher percentage were between 60 and 84 years of age, and fewer were aged 85 or older. As in 2019, more investigations involved females than males.

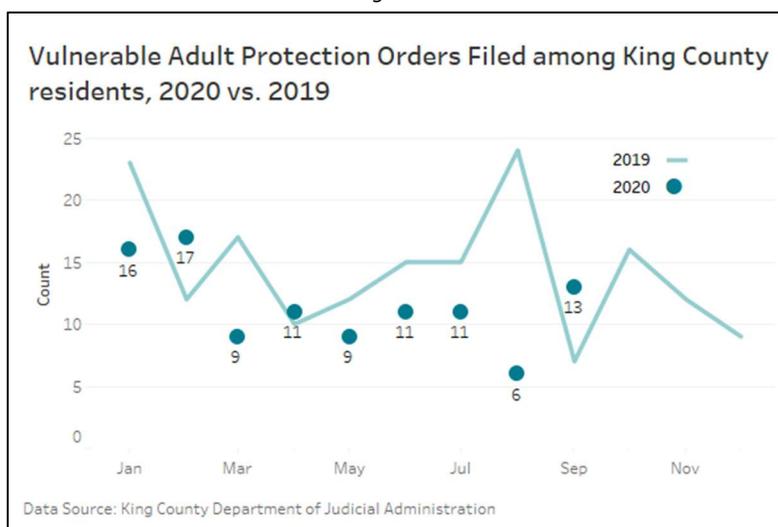
Figure 4



Fewer vulnerable adult protection orders filed in 2020 for King County residents following social distancing order

Vulnerable adult protection orders can be granted if an individual has been abandoned, abused, financially exploited, or neglected. Vulnerable adult protection orders are only processed by King County Superior Court. Courts were initially closed but began accepting filings of protection orders by email starting in April 2020. The number of vulnerable adult protection orders filed per month in 2020 did not differ from the same month in 2019, except for August 2020 which was significantly lower (Figure 5).

Figure 5



LIMITATIONS

The measures reported in this brief are limited in that they reflect crisis intervention responses, represent an incomplete view of the full response system, and do not provide a comprehensive view of the issues. Thus these numbers are likely underestimates. These data sources represent only reported incidents and reflect the rate or number of calls, filings, or visits rather than the number of individuals that come to the attention of the response system. Protection order data represent orders filed with rather than petitions granted by King County Superior Court. Additional research is needed to determine a) how well the data presented in this brief represent community experiences or b) differentiate whether observed changes in crisis service requests result from changes in reporting behaviors rather than community needs. A full analysis of suspected CA/N-related death is not included because data were not available at the time of analysis.

DISCUSSION

The information reviewed in this brief shows that the number and rate of responses to child and elder maltreatment in early months of the pandemic were similar or lower than reports received during 2019, but many are concerned that data sources do not reflect what some families are experiencing. Social distancing may be affecting people's access to vulnerable children and elders, thus lowering the likelihood they observe and report signs of abuse and neglect. As mentioned previously, mandated reporters most likely to witness signs of abuse or neglect, such as teachers, healthcare and social service professionals, are less likely to have contact with people during the pandemic.

Studies highlight protective factors for child maltreatment during the pandemic, including strong parenting supports and perceived control of circumstances by parents,¹² as well as strong coping mechanisms.¹³ Primary prevention efforts such as increases in income¹⁴ and income supports¹⁵ have also been associated with reduced child maltreatment rates.

¹² Brown SM, Doom JR, Lechuga-Peña S, Watamura SE, Koppels T. Stress and parenting during the global COVID-19 pandemic [published online ahead of print, 2020 Aug 20]. *Child Abuse Negl.* 2020;104699. doi:10.1016/j.chiabu.2020.104699

¹³ Lawson M, Piel MH, Simon M. Child Maltreatment during the COVID-19 Pandemic: Consequences of Parental Job Loss on Psychological and Physical Abuse Towards Children [published online ahead of print, 2020 Sep 4]. *Child Abuse Negl.* 2020;104709. doi:10.1016/j.chiabu.2020.104709

¹⁴ Raissian KM, Bullinger LR. Money matters: Does the minimum wage affect child maltreatment rates? *Children and Youth Services Review.* 2017; 72(C), 60-70. <https://doi.org/10.1016/j.childyouth.2016.09.033>

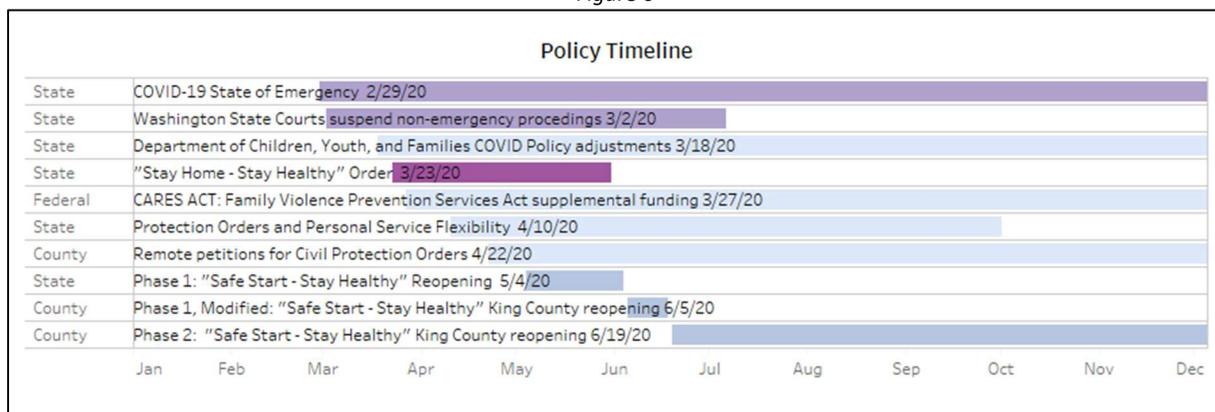
¹⁵ Cancian M, Yang M, Slack, K. The Effect of Additional Child Support Income on the Risk of Child Maltreatment. *Social Service Review.* 2013;87(3),417-437. doi:10.1086/671929

Data patterns observed to date highlight the need for comprehensive and timely information about the nature and extent of family violence in the community. A better understanding of maltreatment in communities requires better data quality and data sharing across municipalities. Systemic and timely monitoring is needed to determine how to best ensure people’s safety.

FEDERAL, STATE AND COUNTY POLICIES RELATED TO FAMILY VIOLENCE SERVICE NEEDS

Washington state declared a State of Emergency on February 29, 2020 and by early March, many businesses and schools began mandated work/learn from home policies (Figure 6). The subsequent “Stay Home, Stay Healthy” order issued by the Governor on March 23 also resulted in many people staying in or close to their home for extended periods of time.

Figure 6



Court systems made adjustments as well. Washington State Courts suspended all non-emergency proceedings March 2 through July 6, but enabled all emergency matters, including civil protection and restraining order processing, to occur via telephone, video, or other means that did not require in-person attendance. The Governor provided courts flexibility and relief by removing certain statutory hearing deadlines and service of process requirements relating to protection orders, including domestic violence, sexual assault, stalking, extreme risk, and other similar orders, to ensure victims access to justice. King County Courts began offering email submission of self-service civil protection orders by late April and beginning in October switched to virtually filing or in-person filing.

The Washington State Department of Children, Youth and Families (DCYF) also initiated operational changes that suspended some services, while keeping critical services in operation by offering virtual services. Abuse/neglect investigations remained an in-person service. In-person family support programs were suspended March 18 through June 30. In-person child welfare visitations continued although DCYF also allowed a combination of virtual and in-person visits. DCYF created an emergency waiver and exception process for foster care and decreased the time needed to process background checks. Juvenile rehabilitation services also moved to video-based visits.

At the Federal level, the CARES Act signed into law on March 27 provided \$45 million in supplemental funding for the Family Violence Prevention and Services Act Program and enhanced financial support for childcare providers. This funding provided flexibility in how agencies can prevent, prepare for, and respond to the COVID-19 public health emergency while addressing the evolving needs of family violence survivors and family violence programs within their communities.

Additional Resources

- Guidance related to COVID-19: <https://www.kingcounty.gov/depts/health/covid-19.aspx>
- More information about data: [kingcounty.gov/covid/impacts](https://www.kingcounty.gov/covid/impacts) or contact data.request@kingcounty.gov
- To report child maltreatment: 1-800-609-8764 (King County); 1-866-636-4276 (Statewide, available 24/7)
- To report adult maltreatment: Call 911 or 1-866-EndHarm (1-866-363-4276), or see <https://www.kingcounty.gov/depts/prosecutor/victim-community-support/elder-abuse.aspx>
- Protection Orders information: www.protectionorder.org
- Community support and well-being: <https://www.kingcounty.gov/depts/health/covid-19/support.aspx>

Technical Notes

Protection orders filed by King County Superior Court summary information was provided by King County Department of Judicial Administration. Data reflect unique incidents rather than unique individuals. The Adult Protective Services Division in the Aging and Long-Term Support Administration of Washington State's Department of Social and Health Services provided APS data. Investigations do not represent unique individuals and race/ethnicity data may be based on providers' observation rather than self-report.

ED data for this report represent visits by King County residents to healthcare facilities rather than unique individuals and are not restricted to King County facilities. Race/ethnicity data may be based on providers' observation rather than self-report. Data were obtained and analyzed through the National Syndromic Surveillance Program BioSense ESSENCE platform. Definition for ED visits involving suspected child abuse or neglect uses the chief complaint (reason for visit) and discharge diagnosis fields of the medical record to identify visits related to suspected or confirmed physical, sexual, or emotional abuse; or physical or emotional neglect as perpetrated by a parent or other caregiver. See "more information about data" link for more details. ED data are preliminary and subject to change as data are added, updated and validated over time.

Poisson confidence limits were calculated as a measure of variability for protection orders filed, APS investigations, and ED visits count data to conservatively rule out random variation as an explanation for the observed change and are available upon request. A binomial normal approximation formula was used to compute corresponding confidence intervals for variation in percent of Adult Protective Services demographic data and a Poisson normal approximation formula was used to compute corresponding confidence intervals for variation in rates of emergency department visits. Data by disability and LGBTQ+ status were not available and will be added to future briefs when possible.

Suggested citation

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