Family structure, particularly when unstable, is associated with increased child maltreatment risk. Single parenthood more than doubles the risk of Child Protective Services (CPS) involvement, and one study found it to be the second largest predictor of child maltreatment, only after income. Single parenthood contributes to financial stress, social isolation, and lack of social support, all increasing the likelihood of child maltreatment. Similarly, paternity status is associated with child maltreatment risk, and the presence of non-biological father figures, especially when multiple and transient, increases the risk of sexual abuse. Other significant family predictors of child maltreatment include reordered families, family conflict and cohesion, and marital satisfaction. Further, poverty, unemployment, and the number of dependents in the household place additional strain on families and increase child abuse risk. Greater numbers of children in the home increase the likelihood of child neglect and contact with CPS. Unstable family structures and problematic family situations predict both child maltreatment and domestic violence.

Domestic violence exposure increases children’s risk of experiencing abuse and neglect. Physical and verbal aggression in partner conflicts predicts child physical abuse. Many of the same factors are correlated with both domestic violence and child maltreatment, including low socioeconomic status, poverty, and unemployment; young maternal age and low education; and maternal depression, substance abuse, and history of childhood abuse.

Social isolation and resource deprivation predict child physical abuse. Mothers with poor social networks face twice the risk of maltreating their children. Abusive parents generally have fewer peer relationships, limited contact with the community, and strained relationships with relatives. Lack of involvement in a community, such as a religious organization, increases the risk of child maltreatment, especially when paired with domestic violence in the family. Conversely, higher levels of community involvement, and more positive perceptions of the community, are associated with lower levels of psychological aggression and physical assault. Similarly important, parent satisfaction with social supports and the community predicts child abuse potential. The resources available in a community also predict child maltreatment risk because resources influence the environment and indicate broader community scarcities. Social isolation is intertwined with parent substance abuse, mental illness, and history of domestic violence or childhood abuse, further exacerbating the relationship between these factors and child maltreatment risk.

Negative parent-child interactions and perceptions are associated with child maltreatment risk. Parents who report negative, or few positive, attributes of their babies are at an increased risk of child abuse and CPS involvement. In pregnant women, negative attributions predict later harsh parenting and maltreatment. When interacting with their children, mothers at risk of child abuse demonstrate lower empathy, more over-reactivity, higher compliance expectations, and greater approval of parent-child aggression than do non-abusive mothers. These reactions indicate poor mood regulation, limited ability to manage emotions, and greater frustration, all of which escalate the risk of child abuse. Other risk factors for child maltreatment include child separation from parent, maternal alienation, low parental warmth, and difficult child behavior.
include child separation from parent, maternal alienation, low parental warmth, and difficult child temperament. Particularly among fathers, poor parent-child relationships also predict child maltreatment and domestic violence.

**Low income and poverty** have been linked to child physical abuse and neglect. One study found that incremental increases in income correlated to reductions in both child neglect and CPS involvement, especially among low-income, single mothers.21 Another study found that the highest risks of child maltreatment were associated with indicators of deprivation, including poverty, employment, and social supports.32,33

**Parental substance abuse** more than doubles the risk that a child is exposed to physical or sexual abuse. Parent drug abuse has been found to increase minor acts of violence by 20% and major acts of violence by 46%. Maternal drug use directly predicts whether a family will later have a CPS report.36 The relationship between parental substance abuse/dependence and child maltreatment persists even when controlling for referral patterns, social class, and community.37

**Parent history of childhood abuse** significantly increases the risk that a parent will abuse his or her own child. Witnessing violence between parents and having been abused in childhood predict committing acts of violence in adulthood. Parents with a history of child abuse are more likely to be investigated for child maltreatment or become involved with CPS. Further, mothers with a history of childhood abuse exhibit lower levels of self-control, which in turn predicts child abuse potential. Children of parents who experienced childhood abuse have a 35% risk of experiencing abuse, compared to just 4% among the population at large.

**Parent mental health** is another important predictor of child maltreatment. In fact, many professionals believe that psychiatric factors more strongly predict child maltreatment than do social factors. Depression, particularly maternal depression, is significantly linked to child abuse potential and child neglect. Maternal depressive symptoms influence maternal mood and behavior, and incite mothers to behave more aggressively toward their children and pay less attention to their children’s needs. Similarly, symptoms of psychopathology predict parent-child aggression. In particular, antisocial personality traits strongly predict child maltreatment, as these traits tend to provoke social isolation and substance abuse, both of which independently correlate with child maltreatment. Substance use disorders have been cited to mediate the violence associated with psychiatric disorders, and psychiatric disorders have been cited to mediate the relationship between substance abuse and child maltreatment.

**Maternal characteristics, including age and education**, predict child maltreatment risk. Young parents are three times as likely to maltreat their children, and parents with low educational achievement are at five times the risk. Young maternal age and low education predict CPS involvement, increasing both the likelihood of investigation and of child placement on the child protection registry. Without adequate education, mothers lack access to coping resources, protection from abusive relationships, or opportunities to learn and develop parenting skills, all of which increase the risk for child maltreatment. Similarly, young age limits a mother’s ability to adequately and competently protect her children or access resources to help her provide for them. Other indicators of child maltreatment include whether the mother smoked during pregnancy, received prenatal care (and for how long), or was a Medicaid beneficiary at the time of birth.
THE EVIDENCE BASE: CHILD MALTREATMENT RISK FACTORS


3. Ibid.


12. Cox, “A Longitudinal Study.”


15. Cox, “A Longitudinal Study.”


17. Sidebotham, “Child maltreatment.”


19. Cox, “A Longitudinal Study.”

20. Kim, “Community interaction.”

21. Schaeffer, “Predictors.”

22. Kim, “Community interaction.”


THE EVIDENCE BASE: CHILD MALTREATMENT RISK FACTORS

26. Ibid.
27. Ibid.
29. Cox, “A Longitudinal Study.”
32. Sidebotham, “Child maltreatment.”
33. Cox, “A Longitudinal Study.”
35. Ibid.
37. Kelleher, “Alcohol and Drug Disorders.”
40. Henschel, “Self-Control”
41. Sidebotham, “Child maltreatment.”
42. Henschel, “Self-Control.”
43. Ibid.
44. Jakupčević, “Risk factors.”
46. Schaeffer, “Predictors.”
47. Dubowitz, “Identifying children.”
48. Ibid.
52. Kelleher, “Alcohol and Drug Disorders.”
54. Sidebotham, “Child maltreatment.”
55. Ibid.
56. Cox, “A Longitudinal Study.”
57. Dubowitz, “Identifying children.”