



Child Maltreatment in Spain

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Abstract

Child maltreatment is a global problem with serious life-long consequences and data from many countries are still lacking. Child maltreatment is complex and difficult to study. Current estimates vary widely depending on the country and the method of research used.

Aims: The objective of this study is to describe and discuss the data on child abuse in Spain. The agency responsible for preparing these statistics is the Ministry of Health, Social Services and Equality. Newsletter No. 19 published in 2016 collects these data in the Unified Registry of Suspected Cases of Child Maltreatment (RUMI) database. The latest bulletin contains the data and the development of child protection measures executed in each of the Regional Administrations of Spain from 2012 to 2016. It is the first one to reflect the changes introduced by current legislation.

Methodology: The RUMI collects notifications from the different protection services through an online form (BOLETINF) that facilitates and improves the reliability of collection.

Results: The total number of notifications in Spain for 2016 was 14,569. The notifications mainly came from the police, education system, health departments and social services. The total number of notifications in Spain for 2016 was 14,569, with the highest number of notifications being in Catalonia (2,555), Andalusia (2,654), Madrid (1,477), Balearic Islands (1,452) and Canary Islands (1,293). Of the total, 6,627 were female and 7,942 male.

The notifications mainly came from the police, education system, health departments and social services.

Keywords: Child abuse; Child maltreatment; Legal medicine; Child injuries

Introduction

Child maltreatment is a problem around the world. Child abuse and neglect negatively impact on both neurological and psychological development and patterns of abuse are thought to be learned and repeated in families. Adverse childhood experiences are a risk factor for psychopathology later in life, including borderline personality disorder [1]. In Spain, data on child abuse have been collected for more than two decades and published in national statistical bulletins, and a number of measures to protect children have been implemented [2].

Aims

The objective of this study is to describe and discuss the data on child abuse in Spain. The agency responsible for preparing these statistics is the Ministry of Health, Social Services and Equality. Newsletter No. 19 published in 2016 collects these data in the Unified Registry of Suspected Cases of Child Maltreatment (RUMI) database.

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Methodology

The RUMI collects notifications from the different protection services through an online form (BOLETINF) that facilitates and improves the reliability of collection, based on the data and original administrative files from the public child protection organizations of the Spanish RAs.

Results

The total number of notifications in Spain for 2016 was 14,569, with the highest number of notifications being in Catalonia (2,555), Andalusia (2,654), Madrid (1,477), Balearic Islands (1,452)

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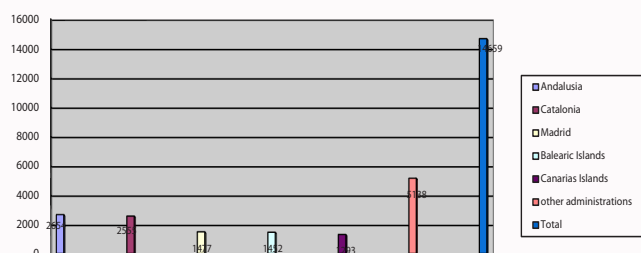
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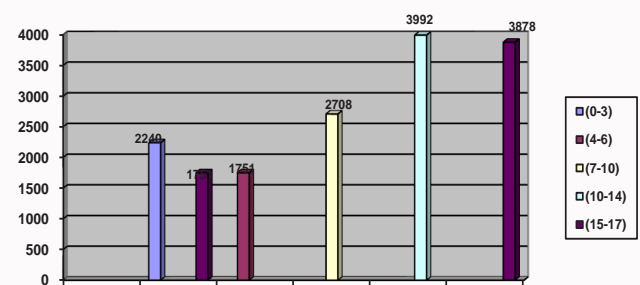
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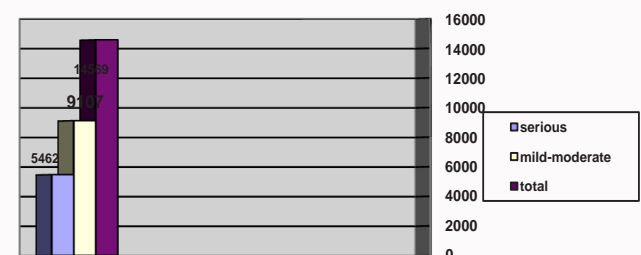
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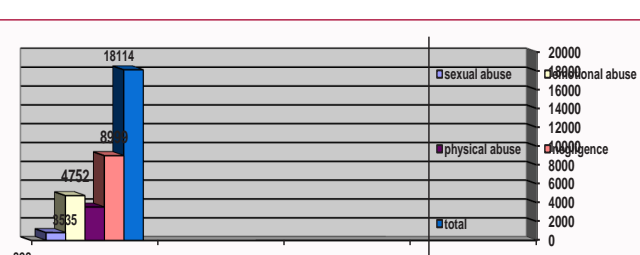
Graph I: Cases detected by RA (regional administration).



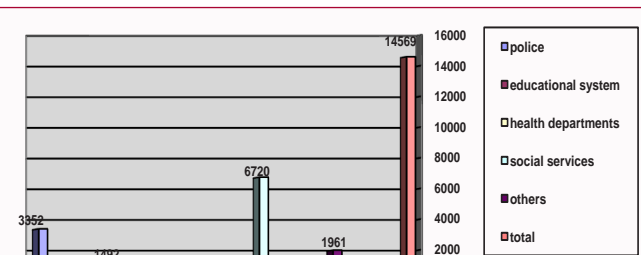
Graph IV: Cases detected by age group (years).



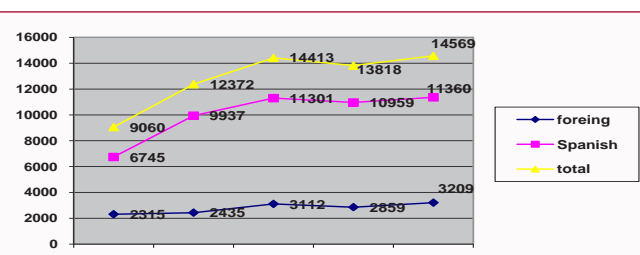
Graph II: Cases detected by level of injury.



Graph V: Cases by type of maltreatment.



Graph III: Sources of detection of child abuse.



Graph VI: Comparison of cases by nationality.

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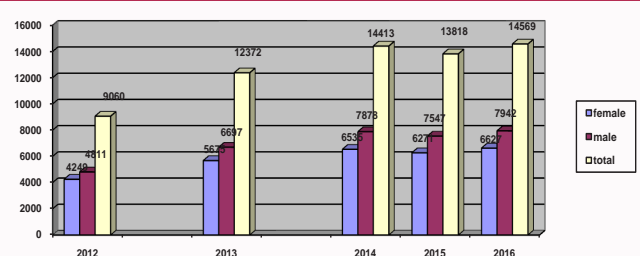
Graphs I, II, III, IV, V and VI show the results obtained in 2016 according to different variables.

Discussion

The majority of cases of child abuse in Spain involve males. A higher number of cases of Spanish nationality were detected. With regard to the level of severity of the injuries, notifications classified as 'mild to moderate' are clearly the most frequent, with a total of 9,107 (62.55%), compared to severe cases, which were 5,462 (37.23%).

With regard to the type of abuse, the most frequent is negligence, which represents almost 50% of total notifications. This was the case in almost all RAs, with the significant exception of the Balearic Islands.

It is worth assessing changes in data over time, comparing the years 2012-2016. There was a constant overall rise in the number of notifications (from 9,060 in 2012 to 14,569 in 2016) although the trend was broken in 2015 (a decrease of 3.2%), although this is not relevant as the number of cases was still much higher than at the beginning of statistical period. Before 2012, not all services used the RUMI database, so the information contained in the comparative

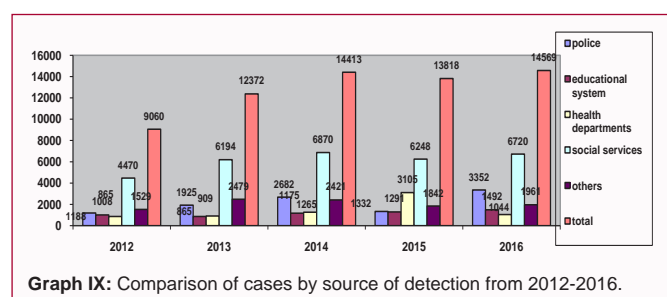
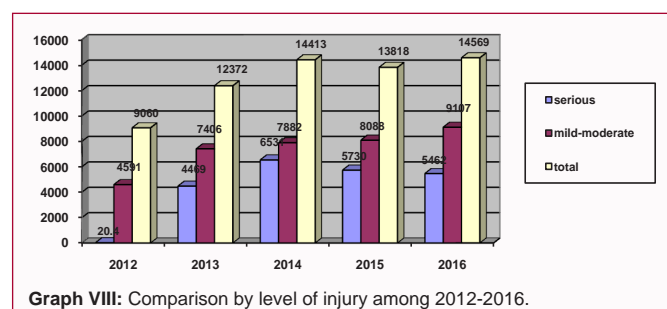


Graph VII: Comparison by sex from 2012-2016.

Comparing statistical data over time (2012-2016) using different variables also shows differences between years. Graphs VII, VIII and IX show data comparisons.

statistics for each year are not fully complete, as not all RA services registered all notifications until 2014. Thus, it is not possible to offer accurate conclusions about data when comparing variables, and less so when comparing RAs.

Adverse childhood experiences are a risk factor for psychopathology later in life, including borderline personality disorder (BPD). BPD is prevalent in clinical populations in the United States, but its prevalence has not been well-documented in most other parts of the world. Levey et al. [1] studied childhood maltreatment and the clinical presentation of abused children in a number of different countries: Liberia, El Salvador, India and a Congolese immigrant in France.



Child abuse affects the physical and mental development of those affected, as studied by national child health systems in a number of studies on a sample of 19,957 children aged 2-5 years [3].

Hospital researchers carried out a review of medical neglect at a tertiary children's hospital in Sydney over a 5 years period, from 2011 to 2016. A total of 61 cases of medical neglect were identified, constituting 4.1% of all referrals to the Child Protection Unit for physical abuse and neglect. Most cases were chronic medical conditions (87%), followed by complex multi-system disorders (37.7%) and endocrine disorders (18%). Caregivers were unwilling to follow medical advice (45.9%) or unable to provide necessary medical care (26.2%). All cases were managed by addressing communication difficulties (100%) and resource issues were addressed in 80% of cases. A report to statutory child protection agencies was made in 50% of cases [4].

Effects on memory were studied by Dodaj et al. [5]. A correlation between exposure to maltreatment in childhood (sexual, physical and psychological abuse, neglect and witnessing family violence) and working memory capacity in adulthood was assessed. Exposure to maltreatment in childhood was assessed retrospectively in a sample of 376 females (16 - 67 years) using the Child Maltreatment Questionnaire and the Working Memory Questionnaire to assess working memory capacity. The results suggest a significantly greater prevalence of physical abuse and witnessing family violence in comparison to other forms of maltreatment in childhood. Traumatic experiences during childhood, such as abuse, may trigger particular cognitive changes which may be reflected in adulthood.

Mulder et al. [6] provide a meta-analytical update of research on risk factors for child neglect. A total of 315 effect sizes were extracted from 36 primary studies. Most risks were found at the parental level, such as a history of antisocial behavior/criminal offending, a history of mental/psychiatric problems, current mental/physical problems and experiences of abuse in the parents' childhood. The study concluded that child neglect is determined by multiple risk domains.

A number of studies have also been conducted in Spain. Child protection service records are a source of information on child

abuse. Between 1991 and 1992, Saldaña et al. [7] included 32,483 case files in the study. Physical abuse, negligence, emotional abuse, sexual abuse, mendacity, corruption and underage and prenatal abuse were considered. A total of 8,565 children were found to have suffered abuse. The majority of cases involved negligence, at 79.1%, in line with previous results shown in the Spanish statistics. This was followed by emotional abuse, 42.5%, and physical abuse, 30.1%. All other categories affected less than 10%. The results match the study by Paul et al. [8]. Another epidemiological study on child abuse in Spain, in Gipuzcoa Province (data from 1989) found that out of a total of 189 cases analysed physical neglect was the most common (50%) and sexual abuse the least common.

Another survey [9] shows a diversity of approaches in design and methodology, although the data reported are similar, with neglect more common than any other type of abuse, followed by emotional and physical abuse. Circumstances associated with child abuse suggest that social and family conflict and difficulties, and lack of resources are important variables in child abuse.

Other Spanish authors Ramirez et al. [10] have considered predictive factors for potential physical child abuse among 70 male intimate partners who were also violent offenders and the risk of parental child aggression among 110 mothers to assess how cognitive and affective components contribute to a higher risk of parent-child aggression [11].

Collecting child maltreatment data is a complicated undertaking. At present there is an interest among child maltreatment researchers in developing methods for obtaining data sources. Schwab et al. [12] conducted a review to provide an overview of social media and internet-based methodologies for reporting results of assessments of methods [13-15]. The most common system involved recruiting participants or engaging existing participants using online methods. Several methods produce errors in estimates that are not yet understood, but social media and internet-based technologies may provide an promising approach to reducing some of the limitations to existing child maltreatment data.

Legal Aspects

The ratification by Spain of the Convention on the Rights of the Child and new legislation passed over recent years has modified the child and adolescent protection system.

Information provided on child maltreatment is adapted to the regulatory framework established by Organic Law 1/1996, of 15 January, on the Legal Protection of Minors, and subsequent Laws 26/2015, of July 28, on the modification of the system for the protection of childhood and adolescence and Organic Law 8/2015, of July 22, modifying the system for the protection of childhood and adolescence.

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