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Ginnie Graham: Can the battered child be saved before reaching retirement?

Ginnie Graham

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Pinwheels were placed at the Parent Child Center of Tulsa on April 1 for the 2,685 cases of child abuse and neglect World file

MIKE SIMONS

Ginnie Graham

The battered child turns 57 this year.

Before **a landmark article was published** in 1962 by five physicians, no one was tracking or even talking about abuses done to children.

Battered children have been around since time began, but no legal or medical systems existed for identification and treatment. Historically, kids were treated like property or extensions of family.

Things started changing in the 20th century, but abuse and neglect were still considered rarities.

When the Journal of the American Medical Association featured the article, “The Battered Child Syndrome,” it launched an entire field of study, altering medical care, social work and laws.

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“The battered child syndrome is a term used by us to categorize a clinical condition in young children who have received serious physical abuse, generally a parent or foster parent,” the paper began.

“The condition has also been described as ‘unrecognized trauma’ by radiologists, orthopedists, pediatricians and social service workers. It is a significant cause of childhood disability and death. Unfortunately, it is frequently not recognized or, if diagnosed, is inadequately handled by the physician because of hesitation to bring the case to the attention of the proper authorities.”

The physicians — from different specialties — documented how the battering of children was a trend, not an anomaly.

The report continues to fascinate for its continued relevance; authors warn against stereotyping parents and call for full investigations on suspicions and more research into effective prevention and recovery treatments.

A two-day conference (Haruv USA, Second International Conference on Child Maltreatment) held last week at the University of Oklahoma-Tulsa examined more closely how far we've come and where we need to go.

Setting the tone as the opening speaker was **Dr. Richard Krugman**, considered a leading U.S. authority on child abuse and neglect with more than 50 years of experience.

“It doesn't appear to me we have made as much progress in the field of child abuse and neglect over that 57 years as we have in lots of other areas,” Krugman said. “The real question is, can we actually eliminate it — abuse and neglect — before the battered child retires?”

Looking at available statistics, he's right.

Since 2007, the number of confirmed abused and neglected children has risen 21% in Oklahoma. In Tulsa County, it has jumped a staggering 78%.

This stands in contrast to other improvements in public health since 1962.

Smoking is banned in most areas and is socially unacceptable. Cancer survival rates have gone up. Vaccinations have made deadly disease outbreaks rare.

Drivers routinely click seatbelts in place, and kids wear bike helmets. We even floss our teeth.

So what is it about child abuse and neglect that hasn't led to solutions?

Krugman said he believes the answer lies in the phenomena of looking the other way, what he calls “gaze aversion.” He defines it as an avoidance of seeing abuse when present, either deliberately or inadvertently. Professions and professional organizations aren't immune from the syndrome — systemic gaze aversion.

And it's not new.

He said the authors of “The Battered Child Syndrome” presented at an American Association of Pediatrics symposium about a multidisciplinary approach.

“At the end of that, a thousand pediatricians walked out silently, never asking a single question. They didn’t want to hear it.”

But a Chicago Tribune reporter was sitting on the front row.

“The next day ... there was a headline that said, ‘Battered Children in America,’ and the field started to take off. So we couldn’t necessarily leave it to the professionals to do this.”

Krugman became a protégé of **Dr. C. Henry Kempe**, one of the paper’s authors who founded a national center dedicated to preventing child abuse and neglect.

“(Dr. Kempe) was always reminding us that abusive parents love their children very much but not very well, and our job was to really help them do that better.”

Within three years of the paper’s publication, all states had passed laws mandating reporting of suspected child abuse and neglect. In the ’70s, sexual abuse was discovered to be a hidden problem.

The ’90s ushered in children’s rights advocacy, particularly in areas of foster care and child safety. This included class-action lawsuits to force improved state child welfare systems. Oklahoma settled its class-action suit in 2012 with the **Pinnacle Plan**, whose implementation is still in progress.

Many coalitions have issued reports on the subject in the past decades. Today, many forms of abuse are recognized: physical, emotional, neglectful, sexual, educational, medical care neglect.

Another landmark research initiative — **Adverse Childhood Experiences (ACEs)** — links child trauma to other risky and unhealthy behaviors as adults, from high blood pressure to incarceration. This includes all types of trauma, such as divorce.

Yet, Krugman said none of these provide statistical outcomes specific for child abuse and neglect.

“There are no published data anywhere. The reason for that I believe is, at its core, gaze aversion.”

Less than 1% of the National Institutes of Health grants last year went to projects with the words “child abuse” in the name, Krugman said.

“Research is nonexistent on child abuse to rates of suicide, eating disorders, alcohol use, depression, opioid use — all the areas everyone is focused on as health issues,” he said.

There is another part of this aversion.

Child abuse and neglect systems are still handled in secret.

Family court decisions are closed. Foster parents are told by some social workers to not share photos with kids or even introduce them as foster children.

The hush-hush approach, sometimes bordering on paranoia, is done in the name of protecting children.

It also protects the systems meant to keep them safe and creates a stigma around foster children and those going through the child welfare system. It keeps the problem at a whisper.

Krugman said hospitals used to be closed to discussing avoidable deaths until a movement about 20 years ago. Now, medical institutions are more open to such discussions for improvements.

“I haven’t yet seen that in child welfare, law enforcement, juvenile courts, criminal courts or in district attorneys’ offices,” he said.

“If we can’t acknowledge our mistakes when working on clinical problems with children and families, we will never make progress.”

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