

Community Poverty and Child Abuse: Sadly a Potentially Lethal Combination

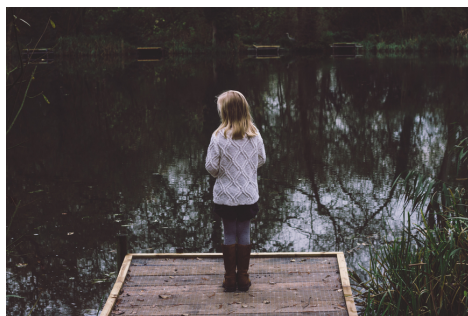
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The role of poverty as a contributor to disparities in the health and well being of children and adults has become a major area of concern for all of us dedicated to improving the health of children.

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The role of poverty as a contributor to disparities in the health and well being of children and adults has become a major area of concern for all of us dedicated to improving the health of children. While we know that poverty is associated with adverse childhood experiences such as infant and child maltreatment, the magnitude of just how concerning this association can be, in terms of child mortality, has not been well documented until this week, when we release a study that warrants all of our attention.

Farrell et al. ([10.1542/peds.2016-1616](#)) have compiled a serial cross-sectional analysis of child abuse fatalities in the US in children 0-4 years of age over a 15 year period (1999-2014) using Centers for Disease Control mortality files, and linked this information to data on population and poverty from the US Census. Although the data on both child abuse fatalities and poverty are devastating to read about, when the two are put together, the results become even more tragic. For example, counties with the highest rates of poverty in terms of population density had three times the rate of child abuse fatalities. This information is extremely disheartening. We view this study as a call to arms for us to work to develop strategies to overcome the effect of poverty through strategies that can provide the protective resiliencies needed to these low income communities.

To help us better understand what we can do and provide further insight on the import of this study, we have invited Dr. Robert (Bob) Block, former AAP President and Medical Director of the AAP's Center on Healthy Resilient Children ([10.1542/peds.2017-0357](#)) to offer an accompanying commentary. Both this study and commentary remind us of why we do what we do as child health care professionals—and perhaps will be just what it takes to have us advocate even harder for the interventions and resources needed to overcome poverty and in doing so reduce child mortality in this country and around the world.

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