



In American Communities with Higher Income Inequality, Children are More Likely to be Abused and Neglected

John Eckenrode, Cornell University

Rising income inequality is a hot topic in U.S. media and political debates – following the Great Recession of 2008-09, the eruption of protests on behalf of “the 99%,” and controversies over skyrocketing executive pay and calls to raise the minimum wage. Why is economic inequality an important issue; why should we care if income gaps are growing in America? One reason is that researchers have found that people who live in more unequal societies suffer from more health and social problems than those who live in more equal communities.

Inequality can be thought of as toxic for entire communities, not just something affecting individual people or families. Just as higher levels of air or water pollution can be harmful to the health and wellbeing of everyone in the community, so can bigger income gaps – and children can be hurt as well as adults.

By now, many researchers looking at the United States and other countries have discovered that income inequality hurts people’s health. Many (though not all) studies have found that higher levels of inequality are associated with poor physical and mental health, as well as with greater incidence of worrisome social problems like crime. More inequality goes hand in hand with worse health outcomes regardless of how poor a country or community may be.

A New Study of Income Inequality and Child Abuse and Neglect

So far, most studies of the health effects of income inequality have focused on adults – although a few have linked inequality to higher rates of infant mortality, preterm births, and low weights for newborn babies. Child abuse and neglect is another important public health issue – and a new study I have done with my colleagues Elliott Smith, Margaret McCarthy, and Michael Dineen asks whether U.S. counties with higher levels of income inequality also have more reported instances of child abuse and neglect.

We examined counties for two good reasons. First, there are enough counties in the United States for a statistical analysis, yet these units are large enough to have significant variations in income inequality. Secondly, counties are important administrative units, where public officials and social workers make important decisions about welfare benefits, Food Stamps, Medicaid and other social and health services that matter to families raising children.

Our study measured income inequality within all counties in the U.S. and then compared those measurements to rates of child abuse and neglect within the same counties. We used the most commonly accepted measure of income inequality, the “GINI index,” which is available for counties in the American Community Survey regularly done by the U.S. Census Bureau. Data on rates of child maltreatment were from taken official reports submitted between 2005 and 2009 to each U.S. state’s child protective services agency.

Income Inequality Goes Hand in Hand with More Maltreatment

The results of this research tell a clear story about inequality and harm to children:

- Overall, the higher the level of income inequality in a county, the higher the reported rate of maltreatment of children tends to be. That is true no matter what the average family income happens to be.
- Poverty still matters, however, because the impact of greater income inequality on maltreatment of children is more pronounced for poorer counties and somewhat less pronounced in somewhat better-off counties. In other words, the worst situation for children is to grow up in a very poor county where there is a lot of income inequality.

- Yet it would be a mistake to conclude that inequality affects only children living in poor counties or plagues only children in poor families. Like air pollution, inequality exerts its toxic effects for all children.

Our findings show that, when it comes to child maltreatment, there are no “safe” levels of inequality. Even small increases in income gaps have adverse effects – child mistreatment worsens as we go from counties with low levels of inequality to counties with a bit more.

How big is the effect of inequality on child abuse and neglect rates? This is an important question to answer, because we want to know what difference it could make if income inequality were to be reduced. My colleagues and I have not done a complete analysis, but a quick back-of-the-envelope calculation suggests that if income inequality were to drop by 10% we would see about a 15% drop in the number of mistreated children reported to child protective services. In the year 2012, there were a total of 686,000 abuse cases reported across all the states. A 15% drop would therefore translate into about 100,000 fewer child victims of abuse or neglect in a given year – a big improvement in wellbeing for American children.

What Should be Done

The research my colleagues and I have done shows that the economic makeup of U.S. communities really matters for the well-being of children. Even slightly greater income inequality is associated with more harm to children. But there is also good news – because a modest reduction in income inequality could sharply reduce child maltreatment.

Great Britain’s recent experience shows that child poverty and harms can be quickly reduced – through extra financial support to child-raising families and improvements in early education and other child services. Now, similar proposals are gaining attention in the United States. A multi-faceted approach is needed. Of course, programs should be deployed to improve parenting skills and create safe home environments. But we also need to make communities more economically equal. Many U.S. professional groups, including pediatric physicians, are calling for steps to reverse rising income inequality – and all Americans who care about the future of our children should urge policymakers to listen and act.

Read more in John Eckenrode, Elliott Smith, Margaret McCarthy, and Michael Dineen, “Income Inequality and Child Maltreatment in the United States.” *Pediatrics* (online-first article, February 2014).