



## Child fatality in Intercountry adoption: What media reports suggest about deaths of Russian children in the U.S.



Rebecca L. Hegar\*, Olga Verbovaya, Larry D. Watson

School of Social Work, University of Texas at Arlington, Box 19129, Arlington, TX 76019-0129, USA

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### ABSTRACT

This article addresses the ultimate risk in child placement, fatality, in the context of international adoption. It first reviews relevant literature, then profiles demographic and policy trends, followed by analysis of risk factors derived from public media reports related to the children, families, and placing agencies in 19 known cases of death of Russian children in U.S. adoptive homes since 1996. The article concludes that many of the child deaths involved recently placed boys, frequently age 3 or younger, most with special needs or challenging behaviors, and often placed along with siblings. Most of the children who died had multiple injuries characteristic of battered child syndrome. Parents were traditional couples under severe parenting stress who usually had other children, often including additional preschoolers and/or homeschoolers. Mothers frequently pled guilty to various charges, typically less serious than murder. In four situations, parents either were not charged or were found not guilty. Most placements involved agencies founded within 15 years before the child fatality, and several subsequently closed, three amid scandals unrelated to the deaths. The remaining agencies include well-regarded organizations, and five directors or representatives contributed their perspectives. This article identifies patterns and makes recommendations for practice, with the goal of reducing risk of harm to children placed internationally.

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### 1. Introduction

Indignation over the deaths of children adopted from abroad has flared in the international press, but the fatalities have been slighted in the academic literature, with very few exceptions (e.g. Gunnar & Pollak, 2007; Miller, Chan, Reece, Tirella, & Pertman, 2007; Miller, Chan, Tirella, Reece, & Pertman, 2007). This article briefly reviews literature concerning child fatality, with an emphasis on deaths due to maltreatment, then profiles recent trends in international adoption, particularly involving Russia and the United States. It goes on to review extensive press and limited available professional accounts of the 19 cases of fatality of children from the Russian Federation placed in United States adoptive homes and involving legal proceedings, including 13 parental convictions since 1997.

Major sections of the article examine U.S. and Russian systems for approving agencies to place children internationally and the circumstances surrounding the fatalities, with the goal of discerning risk factors concerning children, parents, and agencies. After identifying patterns in the deaths, the article addresses how improved services might reduce risk of harm in intercountry placements, irrespective of the countries of origin or adoption.

### 2. Literature review

#### 2.1. Incidence and prevalence of child death

It is important to note that this article profiles the situations of any Russian children who died in U.S. adoptive placements under circumstances that were investigated as possible crimes and resulted in a grand jury hearing or further legal action. Many, but not all, of the deaths led to the conviction of a parent or parents as perpetrators. Throughout the sections of this article that refer to the specific children who died, the authors are careful to avoid terms that suggest parental responsibility when that has not been established by the judicial process. However, with the goal of building understanding of the deaths where parents were found culpable, this review of the literature includes sources that use a variety of terms, including filicide, child-abuse-related deaths, child murder, and similar language.

Filicide, or the murder of a child by a parent, has always existed, and according to numerous reports, was a common phenomenon at various times in both Europe and the United States (Mikhel, 2007; Spinelli, 2004). The first recognized attempt to regulate child fatalities at the hands of parents dates to 1649 when the Russian czar Alexander Mikhailovich enacted laws that punished mothers who killed their children born out of wedlock more harshly than those who took the lives of their legitimate children (Koenen & Thompson, 2008; Mikhel, 2007; Spinelli, 2004). In colonial North America laws addressing murder of children by a mother were also very severe. As Spinelli (2004) notes,

\* Corresponding author.

E-mail address: [rhegar@uta.edu](mailto:rhegar@uta.edu) (R.L. Hegar).

infanticide was common and became a capital offense. The criminal and civil law, largely state matters in the U.S., have evolved to produce complex relationships among public child protective services, law enforcement, the courts, coroners, and various reporting systems.

Despite the existence of Child Death Review Committees in every state, along with various other bodies concerned with the welfare and rights of children, the exact number of child deaths in the U.S. is unknown (Barth & Hodorowicz, 2011; Jackson, 2011; Koenen & Thompson, 2008). A report of National Center for Child Death Review (2010) indicates a total of 45,068 child deaths out of which 2,808 were cases of known homicide and 54.1% were fatalities of children under the age of 5 (National Center for Child Death Review, 2010). The rates of filicide, however, are unquestionably underreported (Jackson, 2011). Crume, DiGuiseppi, Byers, Sirotnak, and Garrett (2002) reviewed the reports of the Child Fatality Review team in Colorado between 1990 and 1998 and discovered that only half of the child-abuse-related fatalities were consistently noted on death certificates as resulting from maltreatment. The researchers suggest that violent deaths were more likely to be reflected on death certificates, while more concealable causes were underreported or completely excluded (Crume et al., 2002). Dubowitz (2007) also addresses the issue of under-reporting, stating that nearly 85% of child deaths due to maltreatment are not noted as such on death certificates. He concludes that official statistics drastically underestimate the extent of the problem. In over half of the fatality cases reviewed by Crume et al. (2002), parents were responsible, and other authors draw similar conclusions about parents, their surrogates, and close relatives being the main perpetrators (Dubowitz, 2007; Papenfuss, 2013). Prichard (2004) puts the proportion of “within family” assailants in child homicides at 85% to 90%.

Papenfuss (2013) points out that, because individual filicides often go unreported, the public views them as very rare events that do not require serious intervention, as opposed to mass murders of children, such as shootings at schools. However, such individual deaths account for the majority of child homicides. Papenfuss (2013) notes that the approximate annual cost of deaths due to child maltreatment is \$124 billion dollars, including the costs of criminal justice, healthcare, child welfare, special education expenses, and productivity losses. He further notes that the United States has one of the three highest rates of child-maltreatment death among wealthy nations.

Pritchard and Williams (2010) draw from World Health Data to estimate the number of child deaths and child-abuse-related deaths in a group of major developed countries for the years between 1974 and 2006. Child deaths due to all causes and those related to child abuse decreased dramatically between the earlier and later periods in almost all countries, including the U.S., but at the later period, the U.S. led the other counties studied in both categories deaths. Jackson (2011) regards filicide as a sentinel event not only for the United States, but also for the world in general, emphasizing the need for a greater understanding of the social problem and for the development of effective preventive strategies. For this to occur, it is important to explore what may lead parents to take the lives of their children.

## 2.2. Theory concerning child deaths

Multiple explanations for the phenomenon of filicide exist. Jackson (2011) points out that in the ancient world, Plato and Aristotle justified killing weak and disabled infants. Contemporary researchers also conclude that children’s physical, behavioral, and developmental problems can contribute to child maltreatment and fatality (Dubowitz, 2007; Gunnar & Pollak, 2007; Jackson, 2011; Koenen & Thompson, 2008).

Other theorists propose sociobiological explanations for homicide, noting that the risk of filicide is significantly greater for non-biological children than for biological children due to the natural drive of parents to fulfill the procreative goal of passing along their genes (Daly & Wilson, 1994; Papenfuss, 2013). Barth and Hodorowicz (2011) also mention this theory and note that Termin, Buchmayer, and Enquist

(2000) dispute sociobiological conclusions based on Swedish cases of child homicide over many years. The researchers discovered that the risk of homicide was not higher for genetically unrelated children. When controlling for situations in which a perpetrator lived with a child versus not living with a child, the authors found the majority of children in a sample were killed by a biological parent (Termin et al., 2000). In a similar vein, van IJzendoorn, Euser, Prinzie, Juffer, and Bakermans-Kranenburg (2009) discuss maltreatment in the context of parental investment theory and present findings of elevated rates of maltreatment in Dutch homes with stepparents, but not in adoptive homes.

Dubowitz (2007) proposes explaining filicide cases from an ecological perspective, stating that no one factor is ever responsible. He suggests that multiple risk factors on individual, family, and societal levels must be taken into account, providing a broader perspective for an understanding of child homicide. In addition he proposed five principles for medical professionals responding to deaths from possible neglect: 1) ensure safety of other children in the household; 2) provide support to the family, especially in cases where other children were involved; 3) consider involving child protective services; 4) assess the situation from a broad perspective, addressing underlying issues that caused a homicide to prevent future deaths; 5) carefully assess and appropriately respond to “single” failures in care that resulted in death (Dubowitz, 2007, 197–198).

Miller, Chan, Reece et al. (2007) and Miller, Chan, Tirella et al. (2007) state that, in cases of adoption, fatalities are in fact very rare occurrences, despite the media attention they receive. However, the authors emphasize the need for medical and other helping professionals to monitor adoptive parents carefully for risk of depression. They identify the phenomenon of “post-adoption depression” as being prevalent and very similar to postpartum depression. Although the authors do not elaborate on the relationship between post-adoption depression and risk of child death, some insight may be gleaned from other scholarship. Spinelli (2004) addresses maternal infanticide (which he defines as the killing of a child within the first year of life) based on the court case that was finally resolved in *Yates v. Texas* (2005). The author concludes that courts often rely on the current Diagnostic and Statistical Manual (DSM) in their deliberations, yet the DSM does not have criteria for postpartum psychotic disorders. In addition, according to the manual, postpartum depression appears in the first 4–6 weeks after birth, a diagnostic criterion that has been criticized because for many women the drastic changes brought about by childbirth make it difficult for women or their physicians to recognize the symptoms within that period of time. Koenen and Thompson (2008) conclude that about 78% of mothers who commit filicide have been under tremendous pressure, have little social support, and many have developed symptoms of psychosis. They suggest that non-psychotic mothers who fatally injure children tend to come from unsupportive, high-stress environments.

As noted above, Miller, Chan, Reece et al. (2007) and Miller, Chan, Tirella et al. (2007) compare post-adoption depression to postpartum depression, stating that the symptoms may be very similar. However, research on post-adoption depression is limited. Payne, Fields, Meuchel, Jaffe, and Jha (2010) revealed that 28% of their sample of adoptive mothers (n = 85) experienced depressive symptoms four weeks post-adoption and 9.3% of mothers experienced depression even at 52 weeks post-placement. Foli, South, and Lim (2012) surveyed 332 adoptive parents and discovered through qualitative content analysis that many narratives described depressive symptoms and unexpected negative feelings in parents. In another study the same team of researchers explored depressive symptoms in adoptive fathers and concluded that adoptive fathers tend to exhibit depressive symptoms later than mothers, with over half of the adoptive fathers starting to experience depression six months post-placement (Foli, South, & Lim, 2013). Foli et al. (2012) suggested that post-adoption depression is very similar to postpartum depression and proposed using Beck’s Postpartum Depression Theory as a model for researching and analyzing depression

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