The Swedish Myth

The Corporal Punishment Ban and Child Death

Statistics

Abstract

Sweden is widely believed to have an exceptionally low incidence of child maltreatment deaths. Since Sweden is also the first country to have outlawed all forms of corporal punishment, proponents of a total ban on corporal punishment, in the UK and elsewhere, have argued that this demonstrates that such a ban prevents fatal child abuse. While not taking sides on the corporal punishment issue, this paper demonstrates that the argument is misleading on several counts. The available evidence suggests that Sweden has a low, though not uniquely low, incidence of child maltreatment deaths. Widely cited statistics suggesting that Sweden is an entirely different league from other countries are, however, seriously misleading. Nor does the evidence really allow us to conclude that Sweden’s relative success in this area is attributable to the ban on corporal punishment. Other countries without a corporal punishment ban also have low or lower child maltreatment death rates, the figures that are commonly cited in any case predate Sweden’s corporal punishment ban and there are a number of other important variables, other than a ban on corporal punishment, that could account for international variations. The article concludes with some thoughts about the selective use of evidence in debates of this kind.
Introduction

I will begin with three quotations:

(1) From the NSPCC’s Response to the Report of the UN Committee on the Rights of the Child:

   In Sweden, the first country to change the law to protect children from being hit, only four child abuse deaths were recorded between 1981 and 1996. (NSPCC [National Society for the Prevention of Cruelty to Children] Press release 4th October, 2002)

(2) From the Parliamentary Select Committee on Health:

   …not all other countries seem to have the same problems with child abuse as Britain does. The experience in Sweden, for example, which has long outlawed the physical punishment of children, is one in which child deaths from deliberate harm by adults are now unknown. (My Italics. Para. 55, House of Commons Health Committee: 2003: 17.

(3) From ‘Evidence-based health promotion for children and adolescents in Stockholm county’:

   Between 1976 and 1995, 54 children aged 0-14 were murdered or beaten to death in Stockholm county, according to the death register. There were slightly more during the latter decade (1986-1995) compared to the earlier (1976-1986). (Hjern, 1999)

In the public debate about the merits of making ‘smacking’ illegal in the UK and elsewhere, a piece of misinformation has gained currency: namely that child maltreatment deaths are
uniquely rare – or even unknown - in Sweden. Since any kind of corporal punishment has been illegal in Sweden since 1979, the inference is then made that, by banning smacking in this country, we could drastically reduce the incidence of child maltreatment deaths here.

In fact both the premise and the inference are flawed. Firstly, though Sweden’s track record does look to be better than the UK’s, child maltreatment deaths are far from unknown in Sweden, and six other European countries have (according to UNICEF, 2003) lower rates of child maltreatment deaths. Secondly, Sweden’s apparent good record in this area predates the 1979 legal ban on smacking. Thirdly, there are other factors in Swedish society apart from the corporal punishment ban which one would expect to impact on the incidence of child abuse relative to the UK.

It is not my purpose here to argue against a corporal punishment ban but to correct a misconception that has gained currency in the debate. I am concerned about what the prevalence of this misconception tells us about the level of debate in the child protection field generally. Major policy changes, such as the introduction of a total ban on parental corporal punishment, have huge long-term implications on the ground and should not be adopted on the basis of wildly unrealistic expectations of what they will achieve.

**Child Maltreatment Deaths in Sweden and the UK**

There is a serious discrepancy between international perspectives on the rate of child abuse deaths in Sweden, and the actual statistics. I quoted above a British parliamentary committee asserting that child abuse deaths were *unknown* in Sweden and the foremost English child protection charity stating that over a fifteen year period Sweden had only experienced four child abuse deaths. Other examples could be given from around the globe of the widespread perception that child abuse deaths are exceptionally low in Sweden. ‘Sweden has one of the lowest child abuse death rates in the world’ states the website of a US anti-corporal punishment organisation, quoting a Canadian newspaper article (Project No Spank, 2004); ‘…in the decade after Sweden fully outlawed smacking and every other form of physical
punishment… not one single child in Sweden died of physical abuse at the hands of his or her carer’ states the submission to the Victoria Climbié enquiry by the ‘Children are Unbeatable’ Alliance (Children are Unbeatable Alliance, 2004); ‘Between 1975 and 1995, four deaths were attributed to child abuse in Sweden. In New Zealand during the same period, 240 children were killed. Can we learn from the Scandinavian experience?’ asks the website of the Methodist Mission, South Island, New Zealand (Methodist Mission, South Island, 2004). In the UK again, under the headline ‘Stop smacking: We are allowing children to be killed’, a leading article in the Observer newspaper put the argument in its purest – and most misleading - form:

Since Sweden banned smacking three decades ago, child deaths at the hands of parents have fallen to zero. In Britain, they average one a week.

(Observer, 7th March 2004)

In fact child maltreatment deaths have not ‘fallen to zero’ since the corporal punishment ban in Sweden. The word ‘zero’ is quite simply wrong. The word ‘fallen’ is questionable. According to a report prepared for the Swedish Ministry of Health and Social Affairs:

There is insufficient information regarding child homicide and permanent disability due to child abuse in Sweden. The official statistics tell us that less than ten children under the age of fifteen are killed each year. Child homicide has probably decreased during the last twenty years, but the statistics are not perfect. (Janson, 2001: 2)

Given that Sweden’s population of 8 million is roughly one seventh that of the UK, ‘less than 10’ child deaths a year in Sweden would translate into ‘less than 70’ deaths a year in UK terms. This is certainly a good deal lower than the over 100 child maltreatment deaths per
year that occur in Britain, but not by anything like the different order of magnitude that is implied by the ‘four deaths in fifteen years’ that is quoted by the NSPCC and others.

**Errors and coding problems**

The Swedish report which I have just quoted acknowledged that information on which it was based is insufficient and that the ‘the statistics are not perfect’ (Janson, 2001: 2), so these figures – and indeed all the figures I am going to quote in this article - should be handled with caution. Even a small number of cases misclassified as accidental can radically alter the apparent picture when one is dealing with a very rare event like the killing of children. But evidence from other countries suggests that the error rate in recording child maltreatment death is not marginal but typically very high indeed. Trocmé and Lindsey (1996: 173-4) review a number of studies which look at the accuracy of such statistics, including Christoffel et al (1989) who found that 89% of Illinois child deaths classified as ‘undetermined’ could in fact be attributed to child maltreatment, and Kotch et al (1993), who found in New Zealand that less than a third of child abuse deaths had actually been classified correctly.

Between countries, and even within countries, there are huge variations in the rigour of investigation standards following child deaths, which can result in large differences in the proportion of child abuse deaths that are detected. A US study, for instance, found that autopsy rates for child deaths varied between different cities from 13% to 82% (Lundstrom and Sharpe, 1991). Such differences, along with differences in legal systems and differences in the categories used for coding, make it very difficult to make international comparisons. Indeed within a single country, apparent variations in child abuse deaths over time may turn out to be the result simply of changes in the way that deaths are recorded. Creighton (1993) and Macdonald (1995) convincingly argue that the apparent drop in the numbers of UK child maltreatment deaths celebrated by Pritchard (1992) is entirely the result of a change in coding practices in the year 1979-80.
This should be borne in mind when considering the statistics which I will present in the following discussion. The difference between the rate of child maltreatment deaths in Sweden and the UK, for instance, is considerably smaller than the margin of error identified in New Zealand and Illinois in the studies quoted above, and could therefore quite possibly be entirely an artefact of differing recording systems, differing investigatory practices, or different cultural presumptions about which side to give ‘the benefit of the doubt’ to in cases where there is some uncertainty.

**International Comparisons**

However, insofar as international statistics may have at least some validity, it is worth noting that, according to a recent UNICEF report on child maltreatment deaths in rich nations, Sweden is not in fact the world leader on eliminating child maltreatment deaths. It is either ninth or seventh in the league table of OECD countries, depending on whether or not one chooses to adopt a ‘revised’ measure which aggregates deaths from ‘undetermined causes’ with confirmed child maltreatment deaths (UNICEF, 2003). UNICEF suggests that the revised measure is the more reliable indicator because the unrevised table is ‘too susceptible to marginal random changes and differences in reporting procedures’. As we have seen, there is very considerable scope for interpretation and error involved in classifying child deaths, which can lead to large numbers of intentional child deaths being wrongly classified. UNICEF therefore suggests that it is better to make the assumption that ‘when no other cause or motive can be established, the death of a child is most likely to be the result of abuse or neglect that cannot be proven in a court of law.’ (UNICEF, 2003: 7). This does not get round the problem of deaths for which an accidental cause is wrongly assigned. However, for the purposes of the following discussion, I will accept UNICEF’s position for the moment and assume that Sweden is seventh in the OECD league table, with a child maltreatment death rate of 0.6 per 100,000 children, as against the UK’s 0.9 per 100,000. Sweden’s track record, on this measure, is considerably better than the UK’s but six other countries have an even
better one, namely Spain, whose child maltreatment rate of 0.1 per 100,000 is one sixth of Sweden’s, followed by Greece and Italy (0.2 per 100,000), Ireland and Norway (both 0.3) and the Netherlands (0.6).

If one believed that the incidence of child death was directly related to policy on parental corporal punishment, one would want to look at the world leaders on reducing child deaths to see what their policy was. In fact the top four countries in the list – Spain, Greece, Italy and Ireland – do not have corporal punishment bans at time of writing. Among the countries which do have a corporal punishment ban in place, the highest in the league table is Norway in fifth position (see Table I). It would of course be absurd to make out a case in favour of smacking on the basis that the four world leaders in reducing child maltreatment deaths all permit it. But certainly these statistics do not support the opposite point of view.

[Table I Here]

**Origins of a myth**

The source of statements such as the NSPCC’s assertion that ‘only four child abuse deaths were recorded between 1981 and 1996’ in Sweden appears to be Joan Durrant’s (1999: 440-1) evaluation of the effectiveness of Sweden’s corporal punishment ban. It is important, therefore, to consider what she actually says.

Durrant writes that ‘criminal child deaths in Sweden did not increase between 1974 and 1996… and have never exceeded .009 per 1,000 children.’ The figure of .009 per 1,000 is of course equivalent to 0.9 per 100,000, which is the figure for the UK given in the UNICEF data cited in Table I above. So far, then, Durrant’s conclusion, based on Swedish
official statistics, seems to be consistent with what I have stated earlier: namely that Sweden’s rate of child maltreatment deaths seems lower than the UK’s, though not of a different order of magnitude. However Durrant then goes on to make the following distinction:

It is important to note, however, that not all criminal deaths of children result from child physical abuse. They can occur, for instance, within the context of maternal postnatal depression, suicide of the perpetrator, neglect or neonaticide …. (Durrant, 1999: 441)

Deaths which occur in the context of postnatal depression, or are accompanied by the suicide of the perpetrator, or are caused by neglect, are therefore excluded from Durrant’s definition of child abuse deaths, as are killings of new born babies within 24 hours of birth. So too, in fact, are all *intentional* killings for Durrant is using the definition of ‘fatal child abuse’ adopted by an earlier Swedish study:

The killing of a child by one or a series of assaults by a parent or a person with the status of a parent to eliminate a disturbing behaviour of a child without the intention to kill. (Somander and Rammer, 1991: 47).

This earlier study looked at a total of 94 child homicides in Sweden over the period 1971-1980 and, using the definition just given, classified only *five* of them as ‘fatal child abuse’. (See Table II). We need to be aware that it is within this narrow frame that Durrant too is viewing fatal child abuse.

[Table II]
The largest group of child deaths in the Somander and Rammer study were so-called homicide-suicides, in which the perpetrator kills a child or children and then kills, or tries to kill, him- or herself. The second largest group, ‘other child homicides’, included:

A male perpetrator prosecuted for the killing of his two children (in different years) was found not guilty. Eight children were killed in an altruistic sense [sic] to prevent the children from suffering because of marital conflicts (5), because of economical problems (1), and to spare the child from the kind of life that the perpetrator had led (2). One mother killed her child in revenge of the child’s father who wanted a divorce. Three perpetrators could not understand why they had killed their children.

(Somander and Rammer, 1991: 51)

So it is within a context in which all the above deaths – as well as neglect, postnatal depression and neonaticide cases, and cases of fatal sexual assaults - are discounted as ‘fatal child abuse’ or as ‘physical abuse’ that Durrant writes:

Between 1971 and 1975, five children died in Sweden as a result of physical abuse during incidents in which the caretaker’s motive was ‘a disciplinary measure to eliminate a disturbing behaviour of a child without the intention to kill’ (Somander and Rammer, 1991, p .53). However, during the ensuing 15 years (1976 to 1990), no children died in Sweden as the result of abuse… Between 1990 and 1996, four children died from the effects of physical abuse; only one of these children was killed by a parent… and this rate does not represent a significant increase since 1971…

(Durrant, 1999: 441)

Here then is the basis for the statements quoted at the beginning of this article about child abuse deaths having been abolished, or virtually abolished, in Sweden. One can see that Durrant adopted the Somander and Rammer definition of child abuse deaths because she
wished to make comparisons between the pre- and post-corporal punishment ban periods and wished to use the only major previous study of child abuse deaths in Sweden for these purposes. However in an international context the ensuing figures have proved highly misleading for the following reasons:

Firstly, if one is comparing countries, one should use a measure which is not too open to subjective interpretation and for which data are available in different countries. As UNICEF (2003: 5-7) points out: ‘Maltreatment deaths may seem an unambiguous category on which to base international comparison; but the problem is that it is only the death that is clear and uniform, not the cause or the process by which it is reported, or the rigour with which it is investigated, or the criteria by which it is classified.’ It is precisely because of these sorts of problems, as we have seen, that UNICEF (2003) opted for a revised measure of child maltreatment deaths which included deaths from undetermined causes. It seems clear that, for purposes of international comparison a measure based on the imputed motive of the abuser (‘a disciplinary measure to eliminate a disturbing behaviour of a child without the intention to kill’) is not practicable.

Secondly, and crucially, the narrow nature of this measure is not necessarily acknowledged when these figures are quoted. Thus, the NSPCC statement quoted earlier refers to ‘only four child abuse deaths’ in Sweden between 1981 and 1996, having asserted only a few lines before that ‘at least one child’ is killed every week in England and Wales. It does not make clear that a far broader measure is being used in the case of England and Wales and that like is very decidedly not being compared with like. All maltreatment deaths in England and Wales are being compared with a small subcategory of maltreatment deaths in Sweden. And the NSPCC’s statement compounds this by failing to make clear that Sweden’s population is far smaller than that of England and Wales.

There is no study of UK child homicides which categorises the causes of death in the same way that Somander and Rammer (and, following them, Durrant) did in respect of the Swedish figures, but Creighton (2002: 8) does break down known child homicide deaths in the UK over the 1996-2000 period into the categories listed in Table III. The figures in this
table, like those of Somander and Rammer - and those of Durrant - include only confirmed homicides and not the larger number of deaths which are ‘undetermined whether purposely or accidentally inflicted’ (though Creighton, 2002, goes on to discuss the latter as well.)

[Table III]

The ‘battering’ category surely comes closest to what Somander and Rammer define as ‘fatal child abuse’ since their definition would exclude poisoning, strangling and cutting. But we should bear in mind that, in Somander and Rammer’s scheme, batterings which were intended to kill and/or were not intended as punitive measures would not be classified as ‘fatal child abuse’. We can see from these figures that, at 16%, ‘battering’ in the UK is a relatively small subset of the total child homicide figures. It is true that Somander and Rammer’s ‘fatal child abuse’ category appeared to be a smaller subset (at about 5%), but ‘fatal child abuse’ is also a narrower category than ‘battering’, for the reasons I outlined above. There are difficulties in making exact comparisons but the evidence here really does not suggest that the rate of child abuse deaths - even of those child abuse deaths which specifically result from beatings - differs between Sweden and the UK by anything like the extent that is implied in the NSPCC statement.

Finally, even if we were to choose to accept the figures presented by Durrant as showing an exceptionally low incidence of child abuse deaths in Sweden, they still do not support the view that the ban on smacking is the causal factor for the simple reason that the low rate of child maltreatment deaths thrown up by Durrant’s method of counting precedes the corporal punishment ban. Durrant refers to five child abuse deaths between 1971 and 1975, no deaths at all between 1976 and 1990 and four deaths between 1990 and 1996. Bearing in mind that the corporal punishment ban was in 1979, these figures really cannot be said to demonstrate that the ban was a turning point in respect of child maltreatment deaths. Indeed Durrant herself does not make the claim that banning smacking has reduced physical abuse. She
merely states that ‘child physical abuse has not increased in the wake of the corporal
punishment ban.’ (Durrant, 1999: 446).

**Other factors**

If one can draw any conclusions from the child death statistics so far discussed, those
conclusions would be as follows:

(1) Sweden has a lower rate of fatal child abuse than the UK;
(2) Other countries which do not have a corporal punishment ban have an even lower rate
    (with Spain having the world’s lowest);
(3) Sweden’s own low rate predates that country’s corporal punishment ban.

No obvious link between policy on corporal punishment and fatal child abuse therefore
emerges.

There are, however, many other factors, other than policy on corporal punishment, which might explain the different performance of different countries. Failure to discuss these
factors as possible alternative explanations is another major flaw in the argument that
Sweden’s corporal punishment ban has resulted in a fall in child abuse deaths.

The likelihood of child injury death, both accidental and deliberate, ‘rises steeply
with poverty’ states another UNICEF report, and:

the likelihood of a child being injured or killed is also associated with single
parenthood, low maternal education, low maternal age at birth, poor housing, large
family size, and parental drug or alcohol abuse. (UNICEF 2001a: 2).

This conclusion is consistent with studies such as that of Greenland (1987) which looked at
individual cases of deaths caused by child abuse and neglect and identified the following

If we accept that poverty, incidence of lone parenthood and maternal age at birth are risk indicators in a statistical sense in relation to child maltreatment deaths (though not, of course, predictors of harm in any given case: UNICEF, 2003: 18, rightly warns of the dangers of unfairly stigmatising whole groups), we quickly find differences between Sweden and the UK that are entirely consistent with the finding that Sweden has a lower incidence of child maltreatment deaths.

Thus, in a child poverty league table of OECD countries Sweden came out ahead of all other OECD countries with a child poverty rate of just 2.6 % compared with the UK at 19.8%. (UNICEF 2000: 4, using statistics collected in the 1990s and defining child poverty as living in a household with income below 50% of the national median). Likewise the teenage birthrate for Sweden was also far lower than that of the UK. In 1998, the UK had 30.8 births for every 1,000 women under 20, while in Sweden the figure was just 6.5 (UNICEF 2001b: 4).

By contrast, on ‘share of children in lone-parent families’, both Sweden and the UK are quite similar and are both at the top end of the risk spectrum, with Sweden coming out highest of all the OECD countries at 21.3% and the UK in second place at 20.0%. Interestingly on this measure Spain, Italy and Greece (the three countries which have, on paper, the best track record on child maltreatment deaths) came out far lower at 2.3, 2.8 and 3.7 per cent (UNICEF, 2000: 10), with the Netherlands and Ireland at 7.4 and 8.2% respectively, and Norway at 15%. If we were looking for a possible explanation for these six countries having a better track record than Sweden on child maltreatment deaths, here is a factor which might merit further enquiry. All six of these countries also outperform the UK on teenage births, with the Netherlands and Italy also outperforming Sweden, and five of them do better than the UK on child poverty (the exception being Italy).
These figures prove nothing of course, but they do suggest firstly that Sweden’s lower rate of child maltreatment deaths vis-à-vis that of the UK could be plausibly attributed to social and economic factors, and, secondly, that social and economic factors might well account for the even lower rate of countries like Spain. I have already shown that the available figures do not support the claim that a ban on corporal punishment has brought about a change in the incidence of child maltreatment deaths in Sweden. I simply add here that, if we wished to find factors that might explain the different rates of child maltreatment deaths in different countries, there are plenty of other plausible candidates.

**Discussion**

I will call it the ‘Swedish myth’, though no disrespect is intended to Swedish social policy: the assertion that banning corporal punishment will bring about a radical reduction in child maltreatment deaths. I have demonstrated that the statistics cannot really be said to support such a claim. How then has this myth gained currency? If we rule out the possibly that the figures are deliberately presented in a misleading way for political purposes, one can only assume that what is happening here is the result of ‘confirmatory bias’, the human tendency to seek and notice evidence that supports our own point of view, while discounting or failing to notice evidence which contradicts our point of view.

A glance at the figures cited earlier will suggest many different ways in which international comparisons could be enlisted by lobby groups of various kinds. Whether or not a particular group enlists these statistics in support of their cause perhaps depends on whether the figures confirm prior assumptions. The ‘family values’ lobby, for instance, could use the UNICEF figures cited earlier to construct a case for the importance of two-parent families, on the basis that the countries with the lowest incidence of child maltreatment deaths also have very low incidences of lone parent families, but I imagine that supporters of lone parents would either not alight on these particular figures, or would point to other compounding factors such as poverty. An opponent of New Zealand’s Family Group Conference system
might seize on the child death figures in the UNICEF table as showing that the New Zealand system does not protect children and is not a good role model, but admirers of the Family Group Conference system are unlikely to be deterred by them and would either find other reasons to explain New Zealand’s high child abuse death rate, or would (like Macdonald, 1995) question the validity of using death rates as a measure of the success of a child protection system. Durrant has provided a statistic which the anti-smacking lobby has enthusiastically taken up. No one has similarly taken up Spain’s exceptionally low child maltreatment death statistics, because Spain is not identified with any currently popular policy agenda in the childcare field.

Another reason for the attractiveness of the Swedish myth is that it is a compelling narrative, one of a genre of ‘slippery slope’ or ‘nipping in the bud’ narratives that includes also ‘soft drugs lead to hard drugs’, ‘page 3 girls lead to crime against women’, ‘zero tolerance of petty crime reduces serious crime’ and so on. Narrative as a means of making sense of the world is quite fashionable at the moment in academic social work (see for instance Milner, 2001) and elsewhere, and it is sometimes mooted as an alternative to a supposedly outmoded ‘modernist’ or ‘positivist’ approach that appeals to the ‘facts’. Narrative approaches have useful applications, but their limitation is that, in many situations, one must have a means of choosing between alternative narratives and mere intuitive ‘fit’ does not seem to be a reliable way of doing so. All ‘slippery slope’ arguments make intuitive sense, but that does not mean that they are necessarily accurate representations of what happens in the world in any given instance, or that alternative narratives (which perhaps also make intuitive sense) may not sometimes be more useful. A ‘safety valve’ narrative, for instance, is often used against ‘nipping in the bud’ arguments, as are narratives about how, by banning something, one merely ‘drives it underground’. In the end, where there are competing narratives, there is surely no alternative but to treat them as rival hypotheses to be tested against the available facts, old fashioned and ‘positivist’ as this may appear (see Trocmé and Lindsey, 1996, for instance, for a discussion on whether or not fatal child abuse is on the same continuum as non-fatal child maltreatment). Certainly there is no justification
for using facts selectively as ‘evidence’ when they fit a given narrative but suppressing them when they do not.

Part of the appeal of ‘nipping in the bud’ narratives like the Swedish myth is that they seem to offer the possibility of a ‘quick fix’. It would be wonderful indeed if unimaginable horrors such as those endured by Victoria Climbié could be prevented for good just by placing a new law on the statute books outlawing smacking, just as if it would be wonderful if we could end war simply by banning the sale of toy guns. For politicians and public figures under pressure to ‘do something’, such possibilities must be immensely seductive, as they are for many social workers who long for a straightforward remedy for the problems they struggle with, sometimes with little obvious result. But a narrative which has no real world validity is, in the end, a distraction, an instance of ‘symbolic placation’ (Cobb and Ross, 1997) which gives us a comfortable feeling because it makes us feel we have done something and because it temporarily absolves us from trying to find solutions that will actually work and/or of facing up to the limits of what we can achieve.

The British context is very different from Sweden’s. Swedish expenditure on welfare is much higher than ours. Might not a corporal punishment ban in this country not only fail to reduce serious child abuse, but actually tie down already overstretched child protection professionals in enforcing the ban, with the effect of further weakening their limited capacity to identify and respond to serious abuse? It is this kind of difficult, messy, real-world question that we need to give thought to, and it is this kind of question that seductive ‘quick fix’ narratives like the ‘Swedish myth’ have a tendency to distract us from. This is not to say that there is not a debate to be had about making corporal punishment illegal. Because of the limitations of the forensic approach (as outlined by Macdonald, 1995) broad social/cultural/economic changes look more likely to make a difference to the rate of child abuse deaths than will yet another round of tinkering with the multi-agency surveillance system. It could well be that moves towards a legal ban on corporal punishment could be a component of such a social/cultural change, but we cannot take one measure in isolation without considering the context. Real progress will not be achieved by making simplistic and
wildly inaccurate claims about the likely benefits of a ban on corporal punishment, nor by airbrushing out of existence the Swedish children who still die at their carers’ hands. In this article I have tried to assist in shifting the debate onto more solid ground.

References


Observer (2004) ‘Stop Smacking: we are allowing children to be killed’ (Leading Article), The Observer, 7th March 2004. (Accessible via www.guardian.co.uk/Archive)


Table I. League Table of Child Deaths from Maltreatment in OECD Countries
(From UNICEF, 2003: 4)

<table>
<thead>
<tr>
<th>Position</th>
<th>Child Deaths from Maltreatment, per 100,000 children p.a.</th>
<th>Legal ban on Smacking</th>
<th>Position (and rate per 100,000) in unrevised table [with deaths from undetermined causes excluded]</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Spain</td>
<td>0.1 No</td>
<td>1&lt;sup&gt;st&lt;/sup&gt; (0.1)</td>
<td></td>
</tr>
<tr>
<td>2. Greece</td>
<td>0.2 No</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt; (0.2)</td>
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</tr>
<tr>
<td>3. Italy</td>
<td>0.2 No</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt; (0.2)</td>
<td></td>
</tr>
<tr>
<td>4. Ireland</td>
<td>0.3 No</td>
<td>4&lt;sup&gt;th&lt;/sup&gt; (0.2)</td>
<td></td>
</tr>
<tr>
<td>5. Norway</td>
<td>0.3 Yes (1987)</td>
<td>5&lt;sup&gt;th&lt;/sup&gt; (0.3)</td>
<td></td>
</tr>
<tr>
<td>6. Netherlands</td>
<td>0.6 No</td>
<td>12&lt;sup&gt;th&lt;/sup&gt; (0.5)</td>
<td></td>
</tr>
<tr>
<td>7. Sweden</td>
<td>0.6 Yes (1979)</td>
<td>9&lt;sup&gt;th&lt;/sup&gt; (0.5)</td>
<td></td>
</tr>
<tr>
<td>8. Korea</td>
<td>0.8 No</td>
<td>16&lt;sup&gt;th&lt;/sup&gt; (0.6)</td>
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<tr>
<td>9. Australia</td>
<td>0.8 No</td>
<td>21&lt;sup&gt;st&lt;/sup&gt; (0.7)</td>
<td></td>
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<td>10. Germany</td>
<td>0.8 Yes (2000)</td>
<td>14&lt;sup&gt;th&lt;/sup&gt; (0.6)</td>
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<td>11. Denmark</td>
<td>0.8 Yes (1997)</td>
<td>18&lt;sup&gt;th&lt;/sup&gt; (0.7)</td>
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<td>12. Finland</td>
<td>0.8 Yes (1984)</td>
<td>19&lt;sup&gt;th&lt;/sup&gt; (0.7)</td>
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<td>13. Poland</td>
<td>0.9 No</td>
<td>10&lt;sup&gt;th&lt;/sup&gt; (0.5)</td>
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<td>14. UK</td>
<td>0.9 No</td>
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<td>15. Switzerland</td>
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<td>16. Canada</td>
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<td>17. Austria</td>
<td>1.0 Yes (1989)</td>
<td>23&lt;sup&gt;rd&lt;/sup&gt; (0.9)</td>
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<td>18. Japan</td>
<td>1.0 No</td>
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<td>19. Slovak Republic</td>
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</tr>
<tr>
<td>20. Belgium</td>
<td>1.1 No</td>
<td>15&lt;sup&gt;th&lt;/sup&gt; (0.6)</td>
<td></td>
</tr>
<tr>
<td>21. Czech Republic</td>
<td>1.2 No</td>
<td>13&lt;sup&gt;th&lt;/sup&gt; (0.6)</td>
<td></td>
</tr>
<tr>
<td>22. New Zealand</td>
<td>1.3 No</td>
<td>25&lt;sup&gt;th&lt;/sup&gt; (1.2)</td>
<td></td>
</tr>
<tr>
<td>23. Hungary</td>
<td>1.3 No</td>
<td>24&lt;sup&gt;th&lt;/sup&gt; (1.2)</td>
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<tr>
<td>24. France</td>
<td>1.4 No</td>
<td>11&lt;sup&gt;th&lt;/sup&gt; (0.5)</td>
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<tr>
<td>25. USA</td>
<td>2.4 No</td>
<td>26&lt;sup&gt;th&lt;/sup&gt; (2.2)</td>
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<tr>
<td>26. Mexico</td>
<td>3.0 No</td>
<td>27&lt;sup&gt;th&lt;/sup&gt; (2.2)</td>
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<td>27. Portugal</td>
<td>3.7 No</td>
<td>8&lt;sup&gt;th&lt;/sup&gt; (0.4)</td>
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</table>
Table II  

<table>
<thead>
<tr>
<th>Cause of death category</th>
<th>Definition of category</th>
<th>Intrafamilial (Homicide-suicide)</th>
<th>Intrafamilial (Non-suicide)</th>
<th>Extrafamilial</th>
<th>Unknown</th>
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</thead>
<tbody>
<tr>
<td>‘Homicide-suicide’</td>
<td>Killing within context of suicide or suicide attempt by perpetrator</td>
<td>58</td>
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<tr>
<td>‘Neonaticide’</td>
<td>Killing of a child within 24 hours after birth</td>
<td>1</td>
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<tr>
<td>‘Post-natal depression’</td>
<td>Killing of a child under the age of 12 months by the mother due to severe depression following childbirth</td>
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<tr>
<td>‘Neglect’</td>
<td>Killing of a child by deprivation and starvation</td>
<td>1</td>
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<tr>
<td>‘Fatal child abuse’</td>
<td>Killing of a child by one or a series of assaults by a parent or a person with the status of a parent to eliminate a disturbing behaviour of a child without the intention to kill</td>
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<tr>
<td>‘Fatal sexual abuse’</td>
<td>The killing of a child in the context of a sexual assault</td>
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<tr>
<td>‘Other child homicides’</td>
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<td></td>
<td></td>
<td>15</td>
<td>6</td>
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<tr>
<td><strong>Total</strong></td>
<td></td>
<td>58</td>
<td>24</td>
<td>12</td>
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Table III

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>Percentage of Child Homicide Cases</th>
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<tbody>
<tr>
<td>Unspecified</td>
<td>40%</td>
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<tr>
<td>Poisoning</td>
<td>13%</td>
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<tr>
<td>Strangulation</td>
<td>15%</td>
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<tr>
<td>Cutting</td>
<td>11%</td>
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<tr>
<td>Battering</td>
<td>16%</td>
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<tr>
<td>Others</td>
<td>5%</td>
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</table>