The infant homicide rate increased from 4.3 per 100,000 in 1970, to 9.2 in 2000, before declining to 7.2 per 100,000 in 2013.

**Importance**

Homicide accounts for nearly one in five injury-related deaths among infants (under one year of age) in the United States. Infants are most likely to be killed by their mother during the first week of life, but thereafter are more likely to be killed by a male (usually their father or stepfather). The risk of infant homicide is highest on the day of birth, and a tenth of all infant homicides occur by the first month of life. Homicide risk is greater during this period than in any other year of childhood before age 18.

Research studies of data drawn from multiple agencies (such as police or social service records) find that the actual rate of deaths attributable to maltreatment of infants and children up to four years old is more than twice as high as the rates reported from death certificate data. Better reporting of the circumstances surrounding infant fatalities would improve the quality of death certificate records. Studies have also indicated that a substantial but uncertain number of unreported homicides may occur among very young infants, particularly those for whom no birth or death certificates are found, such as in cases of births occurring without trained attendants and not in a clinical setting.

Key risk factors associated with infant homicides include the circumstances surrounding the birth. Among homicides occurring on the first day of life, 95 percent of victims were not born in a hospital. Important maternal risk factors include an unmarried teenage mother (19 years of age or younger) having a second or subsequent birth; no prenatal care, or care only late in pregnancy; a history of maternal mental illness; a mother with 12 or fewer years of education; and premature birth (gestation of less than 28 weeks). Studies suggest that male caretakers (fathers or mothers’ intimate partners), often acting impulsively, are the perpetrators of the majority of infant homicides. However, there is generally less information concerning biological fathers than there is for mothers (including risk factors for infant homicide), because paternal data are frequently missing from birth certificates.
Trends

Between 1970 and 1991, the infant homicide rate more than doubled, from 4.3 to 9.5 infant deaths per 100,000 children under age one. The rate was fairly stable between 1991 and 2000, but the trend has been generally downward since then, and was at 7.2 deaths per 100,000 in 2013. (Figure 1)

![Infant Homicides (per 100,000 population): Selected Years 1970-2014](image)

**Note:** Caution is strongly advised in comparing 2000, 2001 and 2002 rates with nearby years, since some of the difference will be due to slightly different estimation procedures.

**Source:**
Differences by Gender

In most years, males have been more likely than females to be killed during the first year of life. In 2013, for example, the infant homicide rate for boys was 8.7 per 100,000 children under age one, and 5.5 for girls. This gap has generally widened since 1970. (Figure 2)

Differences by Race and Hispanic Origin

Black infants are substantially more at risk for homicide than are other infants. In 2013, the homicide rate for black infants was 15.8 per 100,000, while Hispanic and white infants had rates of 5.4 and 5.5 per 100,000, respectively. However, the rate for black infants has decreased greatly since 1990, when it was at 23.7 per 100,000. (Figure 3)
State and Local Estimates

- State and county mortality data by age for 1979-2013 can be accessed using CDC WONDER at http://wonder.cdc.gov/lbd.html

Both WISQARS and WONDER are maintained by the Centers for Disease Control and Prevention (CDC).
International Estimates

None available.

National Goals

Through its *Healthy People 2020* initiative, the federal government has set several related goals. These include reducing the rate of infant deaths from 6.7 per 1,000 live births in 2006 to 6.0 per 1,000 in 2020. Subgoals include a reduction of the rate of neonatal deaths (within the first 28 days of life) from 4.5 per 1,000 live birth in 2006 to 4.1 per 1,000 in 2020, and a reduction in the rate of post-neonatal deaths from 2.2 per 1,000 live births in 2006 to 2.0 per 1,000 in 2020. Additionally, there is a goal to reduce child maltreatment-related deaths from 2.4 to 2.2 per 100,000 children under 18.


Related Indicators

Definition

Infant homicides are classified as deaths purposefully inflicted by other persons on children less than one year old. Data on infant homicide are developed by the National Center for Health Statistics, drawn from death certificates recorded by local medical examiners or coroners and reported to the National Vital Statistics System. These records code infant deaths using the injury classification framework developed by the International Classification of Diseases (ICD) codes, 9th and 10th editions.

For more information about ICD codes see: http://www.cdc.gov/nchs/dvs/dvs/icd10fct.pdf

A small number of stillbirths may be incorrectly classified as infant homicides. Medical examiners usually will attribute a death to infanticide only when they can rule out other causes (i.e., autopsy evidence indicates that respiration had occurred, no evidence indicates death from natural causes, and circumstantial evidence is consistent with homicide).11

Data Sources


Raw Data Source

National Vital Statistics System

http://www.cdc.gov/nchs/nvss.htm
### Appendix 1 - Homicide Rates for Infants Under 1 Year (per 100,000), by Gender, Race, and Hispanic Origin: Selected Years 1970-2013

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Endnotes


3 Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2013 on CDC WONDER Online Database. Available at: http://wonder.cdc.gov/ucd-icd10.html


10 Hispanics may be of any race. Totals for whites and blacks in this report do not include Hispanics.