

Analysis of Infant Abduction Trends

Data Collected: 1983 through April 2017

BACKGROUND ON THE INFANT ABDUCTIONS PROGRAM AT NCMEC

The National Center for Missing & Exploited Children® is a resource for law enforcement and the health care industry about the topic of infant abductions¹.

As the nation's clearinghouse about missing and sexually exploited children, NCMEC maintains statistics regarding the number and location of infant abductions and provides technical assistance and training to health care and security professionals in an effort to prevent infant abductions from occurring in their facilities. NCMEC also provides evidence-based guidance about how to respond when an infant abduction occurs and technical assistance to law enforcement during and after an incident.

CHARACTERISTICS OF "TYPICAL" INFANT ABDUCTOR

This list of characteristics was developed from an analysis of 308 cases occurring from 1983 through April 2017.

- Usually a female of childbearing age who appears pregnant.
- Most likely compulsive; most often relies on manipulation, lying and deception.
- Frequently indicates she has lost a baby or is incapable of having one.
- Often married or cohabitating; companion's desire for a baby or the abductor's desire to provide her companion with "his" baby may be the motivation for the abduction.
- Usually lives in the community where the abduction takes place.
- Frequently initially visits nursery and maternity units at more than one health care facility prior to the abduction; asks detailed questions about procedures and the maternity floor layout; frequently uses a fire exit stairwell for her escape; and may also try to abduct from the home setting.
- Usually plans the abduction, but does not necessarily target a specific infant; frequently seizes any opportunity present to abduct a baby.
- Frequently impersonates a nurse or other allied health care personnel.
- Often becomes familiar with health care staff members, staff member work routines and victim parents.
- Often demonstrates a capability to provide care to the baby once the abduction occurs, within her emotional and physical abilities.

In addition, an abductor who abducts **from the home setting** (is):

- More likely to be single while claiming to have a partner.
- Often targets a mother whom she may find by visiting health care facilities and tries to meet the target family.
- Often plans the abduction **and** brings a weapon, although the weapon may not be used.
- Often impersonates a health care or social services professional when visiting the home.

There is no guarantee an infant abductor will fit this description.

¹ These trends include only abductions associated with healthcare facilities, birth-announcements, home and public locations, and by ruse.

SUPPORTING POINTS

The list below includes nationwide cases documented by NCMEC, the International Association for Healthcare Security & Safety and the FBI’s National Center for the Analysis of Violent Crime concerning abductions by nonfamily members of newborns/infants (birth to 6 months) from health care facilities, homes and other places. A nonfamily member is defined as someone who is not a parent or legal guardian.

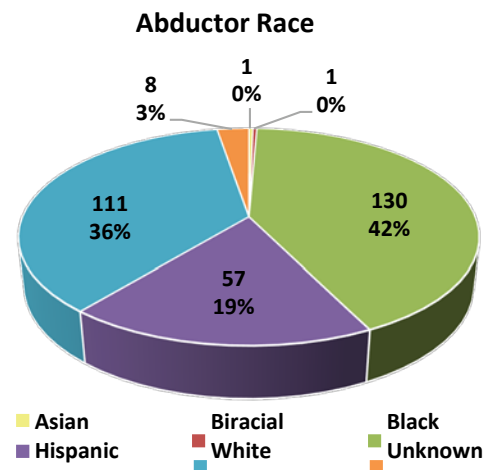
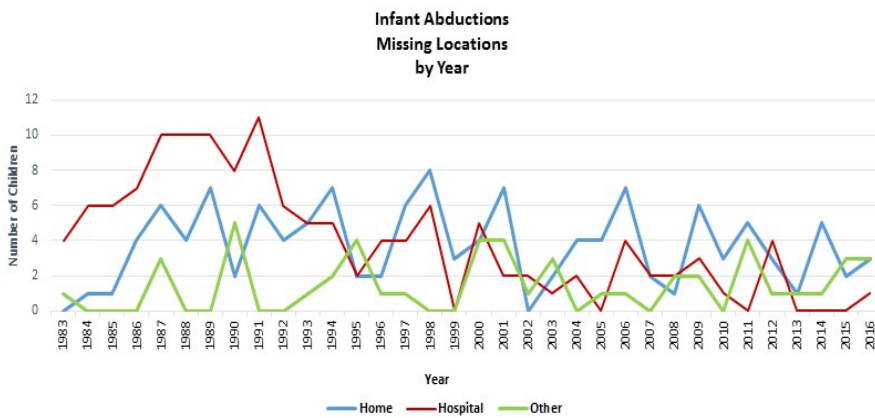
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| Total abductions of infants confirmed by NCMEC from 1983 - April 2017 | 308 |
| Total abducted from 1983 - April 2017 still missing | 11 |

**Infant Abductions between 1/1/1983 and 4/25/2017
Organized by General Location of Abduction**

| Location of Abduction | Total 1983 – April 2017 | Still Missing |
|---|----------------------------|---------------|
| From Health Care Facilities | 133 (43.18%) | 3 |
| From Home | 128 (41.56%) | 4 |
| From Other Locations | 47 (15.26%) | 4 |
| Total Infant Abduction Incidents | 308 | 11 |

**Infant Abductions from Health Care Facilities between 1/1/1983 and 4/25/2017
Organized by Specific Location within Health Care Facilities**

| Specific Location of Abduction Within Health Care Facilities | Total 1983 – April 2017 |
|--|----------------------------|
| From Mother’s Room | 78 (58.65%) |
| From “On Premises” | 21 (15.79%) |
| From Nursery | 17 (12.78%) |
| From Pediatrics | 17 (12.78%) |
| Total Incidents | 133 |



**Infant Abductions between 1/1/1983 and 4/25/2017
Organized by Abductor Age and Abductor Sex**

| Abductor Age | Abductor Sex | | | Grand Total |
|--------------------|--------------|----------|----------|-------------|
| | Female | Male | Unknown | |
| 14-19 | 62 | 0 | 0 | 62 |
| 20-29 | 100 | 1 | 0 | 101 |
| 30-39 | 86 | 2 | 0 | 88 |
| 40-49 | 28 | 1 | 0 | 29 |
| 50 and Older | 4 | 0 | 0 | 4 |
| Unknown | 18 | 2 | 4 | 24 |
| Grand Total | 298 | 6 | 4 | 308 |

**Infant Abductions between 1/1/1983 and 4/25/2017
Organized by Abduction Location and Abductor's Impersonation**

| LOCATION OF ABDUCTIONS | | | | |
|--|--|------------------------------|---|--------------------------|
| ABDUCTOR'S PERSONATED: | From Health Care Facilities 1983 – Apr 2017 | From Home 1983 – Apr 2017 | From Other Locations 1983 – Apr 2017 | Total 1983 – Apr 2017 |
| Nurse or other health care worker | 62 (72.94%) | 5 (10.64%) | 0 (0.00%) | 67 (45.27%) |
| Babysitter or childcare worker | 0 (0.00%) | 22 (46.81%) | 3 (18.75%) | 25 (16.89%) |
| Relative, friend, or acquaintance | 13 (15.29%) | 7 (14.89%) | 4 (25.00%) | 24 (16.22%) |
| Involved in business-related interactions with mother (i.e. advertising, selling, or purchasing) | 4 (4.71%) | 5 (10.64%) | 3 (18.75%) | 12 (8.12%) |
| Social worker, INS or other government entity | 2 (2.35%) | 7 (14.89%) | 3 (18.75%) | 12 (8.12%) |
| Other methods | 4 (4.71%) | 1 (2.13%) | 3 (18.75%) | 8 (5.41%) |
| Total Incidents | 85 | 47 | 16 | 148 |

Note 1: Percentages derived from columns totals

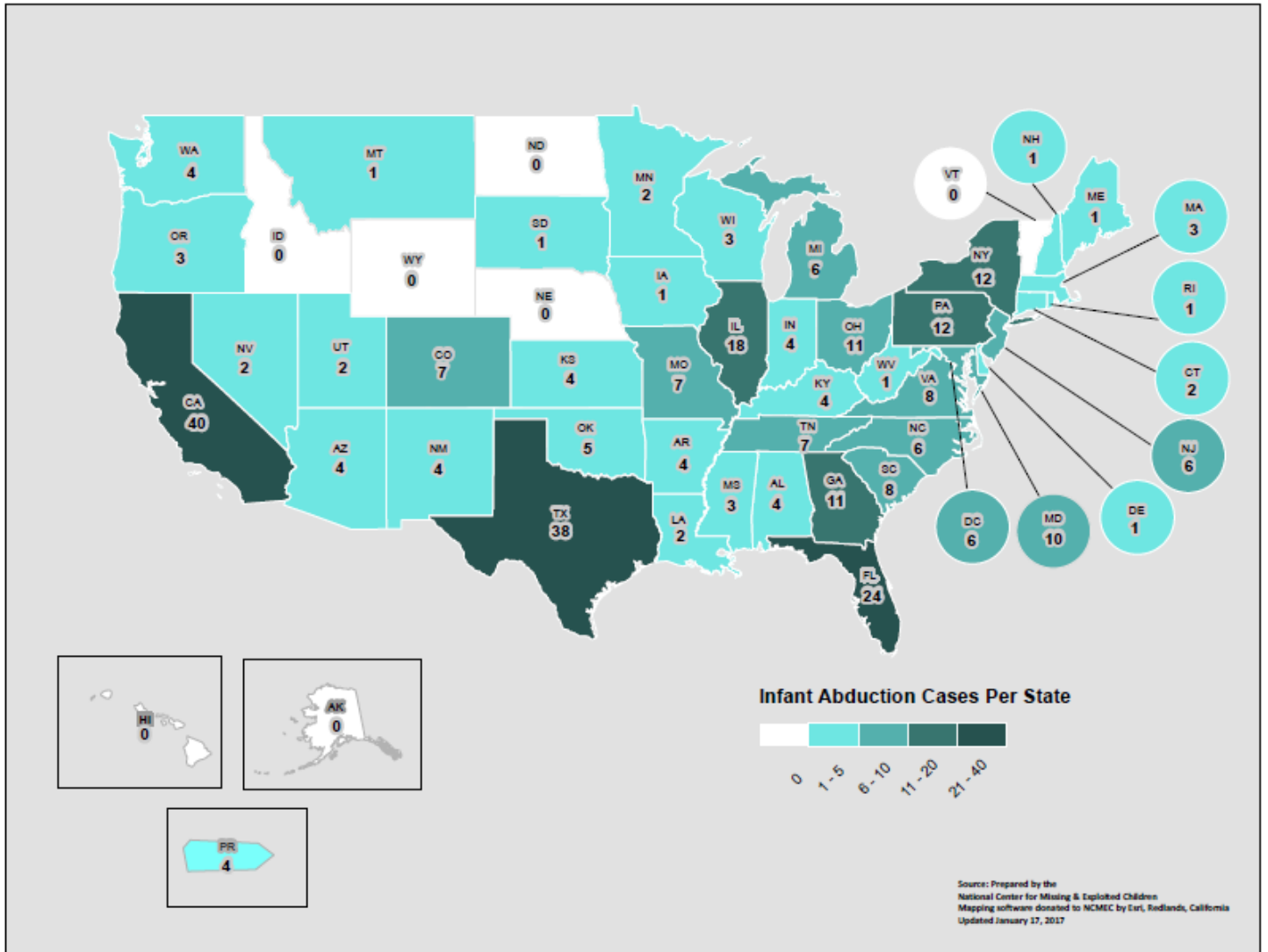
Note 2: Abductor impersonation known in 148 out of 308 cases

Total cases of infant abductions that involved violence **68 (22.07%)**

Total cases of infant abductions where the mother died **35 (11.36%)**

Total cases of infant abductions where the infant died **9 (2.92%)**

Infant Abduction Cases per State



ADDITIONAL Q&A

Q. Can you tell us more about the analysis you conducted?

- A. First and foremost, this is not a scientific research study. Given timing and relevancy, we believe it's important to share the trends and patterns seen within this analysis with parents/guardians and healthcare professionals. This analysis includes data compiled from 1983 through April 2017.

Q. How do you collect infant abduction information?

- A. NCMEC Missing Child Division's, Project ALERT® (America's Law Enforcement Retiree Team), works with local law enforcement, healthcare facilities and the media to secure information on infant abductions. The data includes information from confirmed incidents NCMEC staff are able to locate through media, voluntarily reports from law enforcement and healthcare professionals. Project ALERT® is a team of approximately 170 retired local, state and federal law enforcement professionals who donate their time and experience to the law enforcement community. Members are no longer sworn investigators, but they all share their abilities, knowledge and experience through the Project ALERT program.