

# Evidence of Child Abuse: Inferring the Causes of Effects

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**Child Abuse Evidence: New Perspectives from  
Law, Medicine, Psychology, and Statistics**

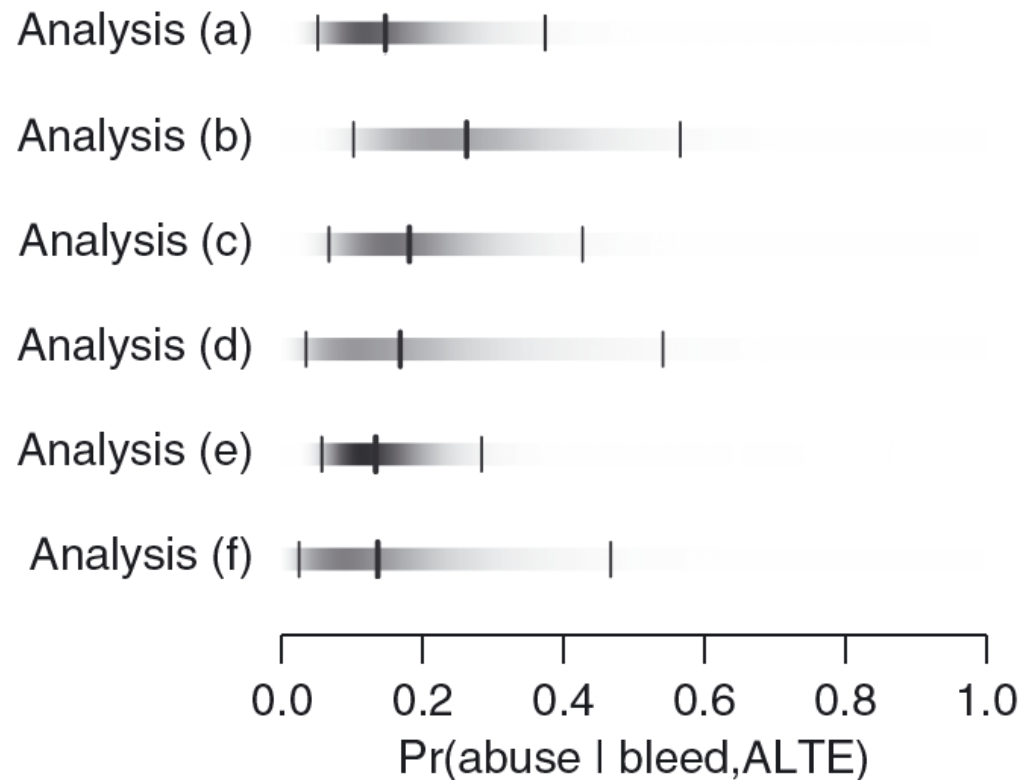
**University of Michigan**

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# Statistical Study Predicting Abuse

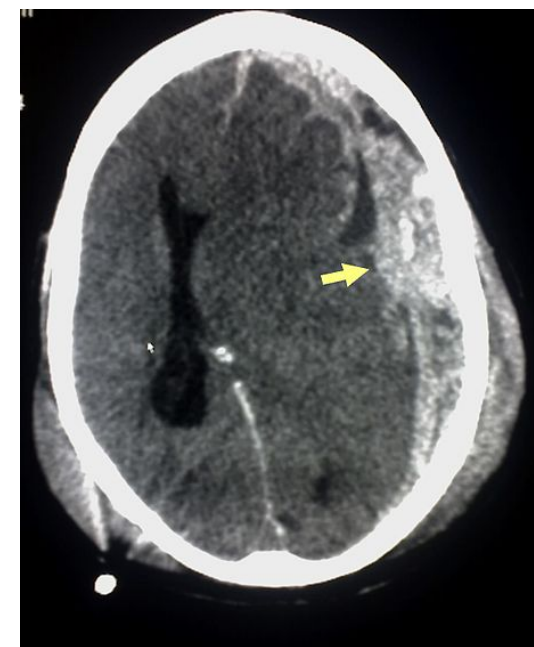
- **N. Best, D. Ashby, F. Dunstan, D. Foreman and N. McIntosh ((2013)**



Density strip plots of the posterior credence distribution of  $\Pr(\text{abuse} \mid \text{bleed}, \text{ALTE})$

# Abusive Head Trauma (Shaken Baby Syndrome)

- **“SBS is injury to skull or intracranial contents of infant or young child due to inflicted blunt impact and/or violent shaking.”**
- **The Triad:** constellation of 3 medical findings, subdural hematoma, retinal bleeding, and brain swelling.
- **Violent shaking → Triad (and death)**
- **We observe triad (and death).  
Was the cause violent shaking?**



# Questions

- **What are the data?**
  - **Provenance of the data.**
  - **Biases in evaluation.**
  - **Biases in interpretation.**
  - **Blinding in assessment?**
- **What is the science?**
- **What statistical question do we want to answer?**
  - **Predictions? Conditional on what quantities?**
  - **Causation?**

# Causes of Effects

- **Effects of Causes (EoC):** *Does violent shaking of infants cause the specific triad symptoms in infants?*
- **Causes of Effects (CoE):** *Was violent shaking the cause of triad symptoms observed in infant? [Can we eliminate alternative possible causes.]*
- **Is a question about CoE essentially the same as one about EoC? If not how do they differ?**

# 2012 KIDS Data (from Cuellar)

- Traditionally we would address this question with high quality experimental data, and odds ratio or risk ratio.
- What is available?
- **Problem:** Misclassification and misdiagnosis

Diagnosis	Triad		Totals
	Yes	No	
Shaking	160??	113???	273??
Short Fall	78???	3646??	3724??
Totals			

# Understanding Causes of Effects in Simpler Setting

- **Effects of Causes (EoC):** *I have a headache. Will taking aspirin help?*
- **Causes of Effects (CoE):** *Was it the aspirin I took 30 minutes ago that caused my headache to disappear?*
- **Is a question about CoE essentially the same as one about EoC?**
- **If not how do they differ?**

# Assessing Causes of Effects

- *Was it the aspirin I took 30 minutes ago that caused my headache to disappear?*
- **Recovery rates (in randomized trial):**
  - **No aspirin: 12%**
  - **Aspirin: 30%**
- **Odds Ratio:**
$$\alpha = (30 \times 88) / (12 \times 70) = 3.14$$
- **[This what statisticians traditionally would have liked to do in SBS setting, but we could not because of the poor data available.]**



# Probability of Causation

- Potential responses:

$R_1$  to aspirin;  $R_0$  to no aspirin

- *Probability of Causation:*

$$\text{PC} = \Pr(R_0=0 \mid R_1=1)$$

- Requires **JOINT DISTRIBUTION** of  $(R_0, R_1)$ 
  - Cannot estimate!
    - *Only know marginal probabilities*
- What can we say?

# Probability of Causation

$R_1$	$R_0$		Total
	0	1	
0	$88 - x$	$x - 18$	<b>70</b>
1	$x$	$30 - x$	<b>30</b>
Total	<b>88</b>	<b>12</b>	<b>100</b>

- $PC = \Pr(R_0=0 \mid R_1=1) = x/30$
- Know  $18 \leq x \leq 30$
- So  $PC \geq 60\%$

# Probability of Causation

- In general, this argument shows

$$PC \geq 1 - 1/RR$$

where **RR** =  $\Pr(R_1 = 1)/\Pr(R_1 = 0)$

is the (experimental) *risk ratio*.

- In particular,

$$RR > 2 \text{ and } PC > \frac{1}{2}$$

–“proof on the balance of probabilities”

–*But converse is false!*

# Probability of Causation for SBS

- Causes: violent shaking =1, no violent shaking =0
- Potential responses: triad=1, no triad=0
  - $R_1$  to shaking;  $R_0$  to no shaking
- ***Probability of Causation:***
  - PC** =  $\Pr(R_0=0 \mid R_1=1)$
- Requires **JOINT DISTRIBUTION** of  $(R_0, R_1)$ 
  - Cannot estimate!
    - No experimental data
    - *We can only ESTIMATE marginal probabilities, for  $R_0$  and  $R_1$ .*
    - **Bounds on PC.**
    - **Bayesian analysis for observational data.**

# Case Study in Dawid, Musio, and Fienberg (2015)

- Data from Best et al. (2013) involving diagnosis of abuse in an infant child, presenting with an acute life-threatening event (“ALTE”).
- **Attribution:** If the child suffers ALTE, what is the **probability** this was **caused** by abuse?
- Full Bayesian Analysis with observational data.
- Individual-focused uncertainty interval for **PC\*** is **(0, 0.043)**
- **Upper bound does not meet the balance of probabilities criterion for civil litigation.**

# Moral for Child Abuse Evidence

- **Most statisticians and epidemiologists seek out quality data to address traditional scientific question of **effects of causes**.**
  - Gold Standard of randomized experiments unavailable.
  - We only have **deeply flawed** observational data.
- **But real question is one of **causes of effects**.**
  - New statistical approaches are required, with much greater uncertainty.
- **This is an overlay to the issues addressed by other speakers today.**

# References

- **N. Best, D. Ashby, F. Dunstan, D. Foreman, and N. McIntosh (2013) A Bayesian Approach to Complex Clinical Diagnoses: A Case-Study in Child Abuse (with Discussion). *Journal of the Royal Statistical Society: Series A*, 176: 53–96.**
- **A. P. Dawid, D. L. Faigman and S. E. Fienberg (2014) Fitting Science Into Legal Contexts: Assessing Effects of Causes or Causes of Effects? *Sociological Methods & Research*, 43: 359-390.**
- **A. P. Dawid, M. Musio, and S. E. Fienberg (2015) From Statistical Evidence to Evidence of Causation. *Bayesian Analysis*, forthcoming.**