



## Analysis of Infant Abduction Trends

Data Collected: 1964 through September 2021

### **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 abductions<sup>1</sup>.

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 334 cases occurring from 1964 through September 2021.**

- 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.**

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<sup>1</sup> 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.

<b>Total abductions of infants confirmed by NCMEC from 1964 - September 2021</b> <small>*includes set of twins who were abducted</small>	<b>335*</b>
<b>Total abducted from 1964 - Septmeber 2021 still missing</b>	<b>15</b>

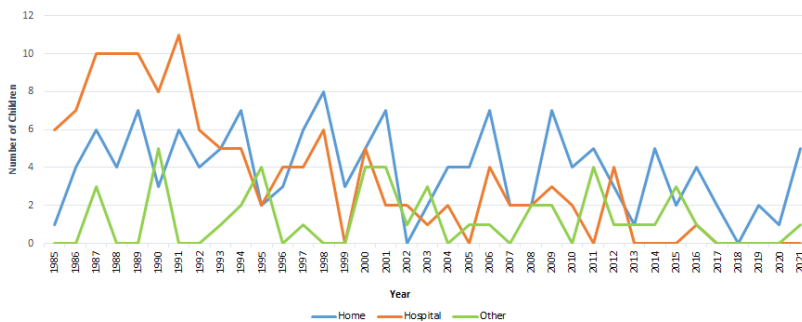
**Infant Abductions between 1/1/1964 and 9/30/2021  
Organized by General Location of Abduction**

Location of Abduction	Total 1964 – September 2021	Still Missing
<b>From Health Care Facilities</b>	140 (41.8%)	5
<b>From Home</b>	147(43.9%)	7
<b>From Other Locations</b>	48 (14.3%)	3
<b>Total Infant Abduction Children</b>	<b>335</b>	<b>15</b>

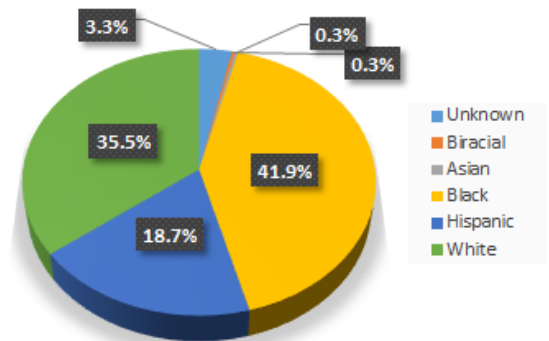
**Infant Abductions from Health Care Facilities between 1/1/1964 and 9/30/2021  
Organized by Specific Location within Health Care Facilities**

Specific Location of Abduction within Health Care Facilities	Total 1964 – September 2021
<b>From Mother’s Room</b>	82 (58.6%)
<b>From “On Premises”</b>	22 (15.7%)
<b>From Nursery</b>	19 (13.6%)
<b>From Pediatrics</b>	17 (12.1%)
<b>Total Incidents</b>	<b>140</b>

**Infant Abduction Missing Locations by Year**



**Abductor’s Race**



**Infant Abductions between 1/1/1964 and 9/30/2021  
Organized by Abductor Age and Abductor Sex**

Abductor Age	Abductor Sex			Grand Total
	Female	Male	Unknown	
14-19	64	0	0	64
20-29	109	1	0	112
30-39	90	2	0	92
40-49	30	1	0	31
50 and Older	5	0	0	5
Unknown	24	2	5	31
<b>Grand Total</b>	<b>322</b>	<b>8</b>	<b>5</b>	<b>335</b>

**Infant Abductions between 1/1/1964 and 9/30/2021  
Organized by Abduction Location and Abductor's Impersonation**

LOCATION OF ABDUCTIONS				
ABDUCTOR'S IMPERSONATION:	From Health Care Facilities 1964 – Sept 2021	From Home 1964 – Sept 2021	From Other Locations 1964 – Sept 2021	Total 1964 – Sept 2021
Nurse or other health care worker	66 (72.5%)	6 (9.7%)	0 (0.0%)	72 (42.1%)
Babysitter or childcare worker	0 (0.0%)	24 (38.7%)	3 (16.7%)	27 (15.8%)
Relative, friend, or acquaintance	13 (14.3%)	17 (27.4%)	6 (33.3%)	36 (21.1%)
Involved in business-related interactions with mother (i.e. advertising, selling, or purchasing)	4 (4.4%)	6 (9.7%)	3 (16.7%)	13 (7.6%)
Social worker, INS or other government entity	2 (2.2%)	8 (12.9%)	3 (16.7%)	13 (7.6%)
Other methods	6 (6.6%)	1 (1.6%)	3 (16.7%)	10 (5.8%)
<b>Total Incidents</b>	<b>91</b>	<b>62</b>	<b>18</b>	<b>171</b>

Note 1: Percentages derived from column totals

Note 2: Abductor impersonation known in 171 out of 335 individuals

**OUTCOME OF ABDUCTIONS**

Total abduction cases that involved violence	<b>78 (23%)</b>
Total abduction cases where the mother died	<b>41 (12%)</b>
Total abduction cases where the infant died	<b>11 (3%)</b>

**FETAL ABDUCTIONS (AKA CESAREAN ABDUCTIONS)**

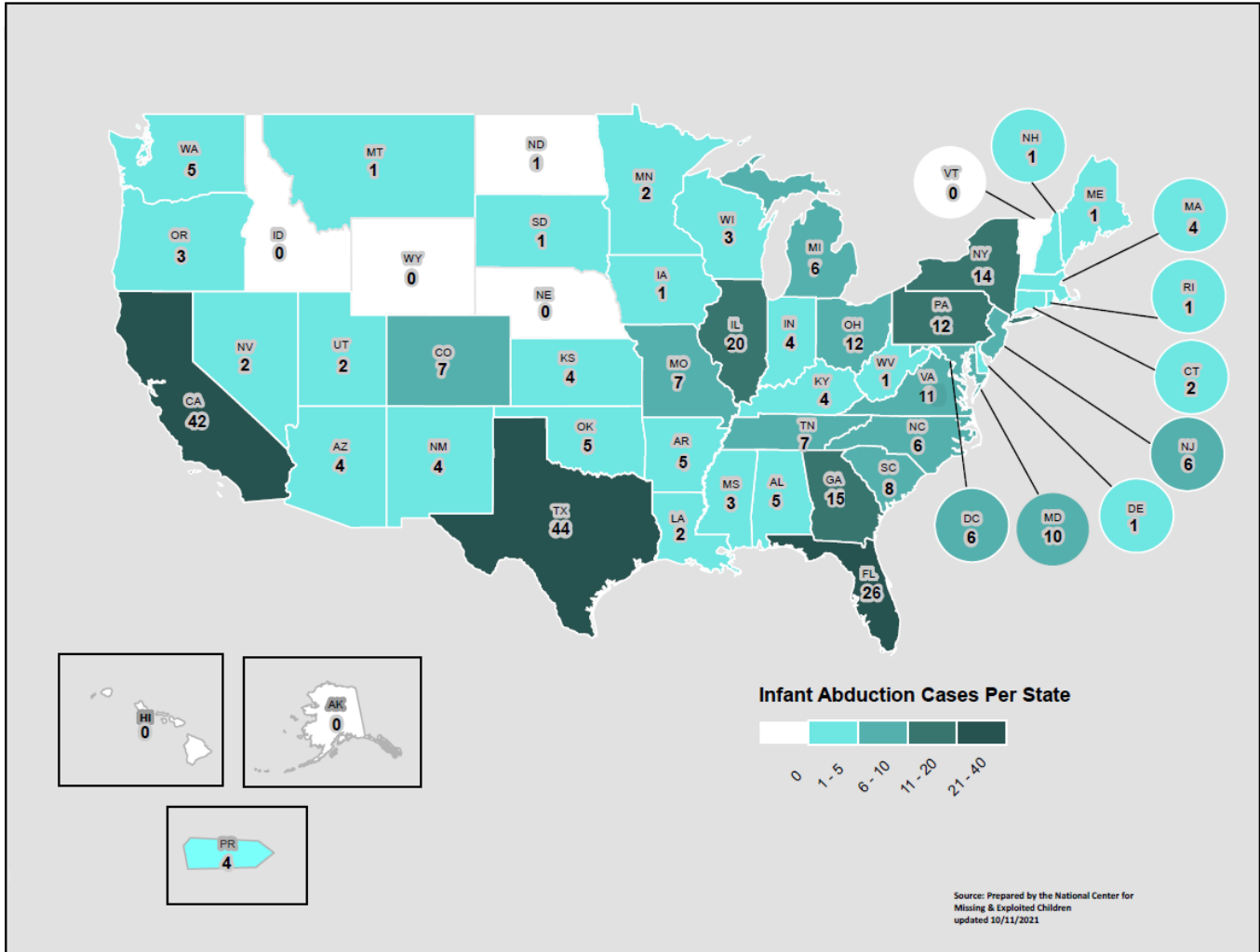
Fetal abductions make up **6%** of the total amount of infant abductions reported to NCMEC

There have been **21** cases of fetal abduction cases (aka cesarean abductions) reported to NCMEC since 1987

Out of the 21 cases, **19** mothers were killed or died as a result of the attack and/or cesarean abduction

Out of the 21 cases, **9** fetuses died as a result of the cesarean abduction

## 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 1964 through September 2021.

**Q. How do you collect infant abduction information?**

**A.** NCMEC's Team Adam program 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 can locate through media, voluntary reports from law enforcement and healthcare professionals. Team Adam is a free resource provided by the NCMEC to law enforcement. Team Adam consultants are retired law enforcement professionals with years of experience at the federal, state and local levels. The program's unique access to NCMEC's resources, coupled with years of law enforcement experience provides departments with the added tools needed to help address complex, media-intensive cases.