

### **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 325 cases occurring from 1965 through September 2018.**

- 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 1965 - September 2018</b>	<b>325</b>
<b>Total abducted from 1965 - September 2018 still missing</b>	<b>16</b>

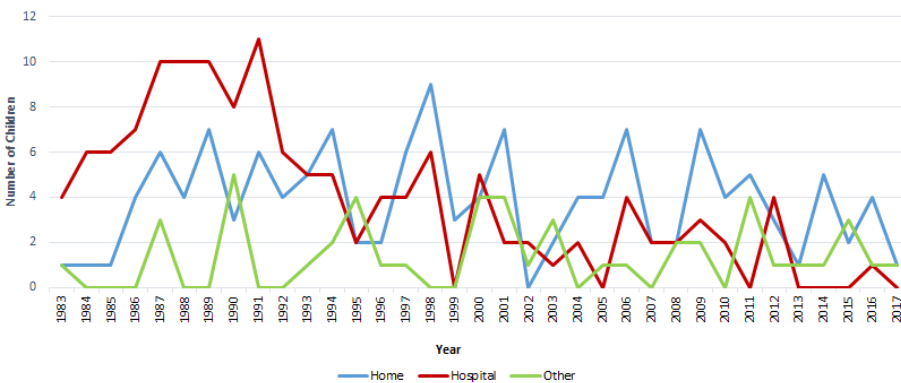
**Infant Abductions between 1/1/1965 and 9/15/2018  
Organized by General Location of Abduction**

Location of Abduction	Total 1965 – September 2018	Still Missing
From Health Care Facilities	140 (43.08%)	5
From Home	138 (42.46%)	8
From Other Locations	47 (14.46%)	3
<b>Total Infant Abduction Incidents</b>	<b>325</b>	<b>16</b>

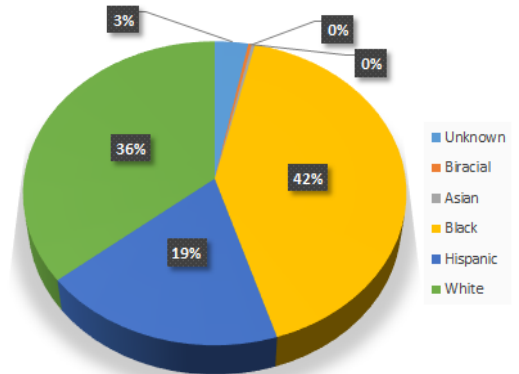
**Infant Abductions from Health Care Facilities between 1/1/1965 and 9/15/2018  
Organized by Specific Location within Health Care Facilities**

Specific Location of Abduction Within Health Care Facilities	Total 1965 – September 2018
From Mother’s Room	82 (58.57%)
From “On Premises”	22 (15.71%)
From Nursery	19 (13.57%)
From Pediatrics	17 (12.14%)
<b>Total Incidents</b>	<b>140</b>

**Infant Abduction Missing Locations by Year**



**Abductor Race**



**Infant Abductions between 1/1/1965 and 9/15/2018  
Organized by Abductor Age and Abductor Sex**

Abductor Age	Abductor Sex			Grand Total
	Female	Male	Unknown	
14-19	62	0	0	62
20-29	106	2	0	108
30-39	88	2	0	90
40-49	29	1	0	30
50 and Older	4	0	0	4
Unknown	24	2	5	31
<b>Grand Total</b>	<b>313</b>	<b>7</b>	<b>5</b>	<b>325</b>

**Infant Abductions between 1/1/1965 and 9/15/2018  
Organized by Abduction Location and Abductor's Impersonation**

LOCATION OF ABDUCTIONS				
ABDUCTOR'S PERSONATED:	From Health Care Facilities 1965 – Sept 2018	From Home 1965 – Sept 2018	From Other Locations 1965 – Sept 2018	Total 1965 – Sept 2018
Nurse or other health care worker	66 (72.53%)	6 (11.32%)	0 (0.00%)	72 (44.72%)
Babysitter or childcare worker	0 (0.00%)	22 (41.51%)	3 (17.65%)	25 (15.53%)
Relative, friend, or acquaintance	13 (14.29%)	11 (20.75%)	5 (29.41%)	29 (18.01%)
Involved in business-related interactions with mother (i.e. advertising, selling, or purchasing)	4 (4.40%)	5 (9.43%)	3 (17.65%)	12 (7.45%)
Social worker, INS or other government entity	2 (2.20%)	8 (15.09%)	3 (17.65%)	13 (8.07%)
Other methods	6 (6.59%)	1 (1.89%)	3 (17.65%)	10 (6.21%)
<b>Total Incidents</b>	<b>91</b>	<b>53</b>	<b>17</b>	<b>161</b>

Note 1: Percentages derived from columns totals

Note 2: Abductor impersonation known in 161 out of 325 cases

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**Total cases of infant abductions that involved violence** **74 (22.77%)**

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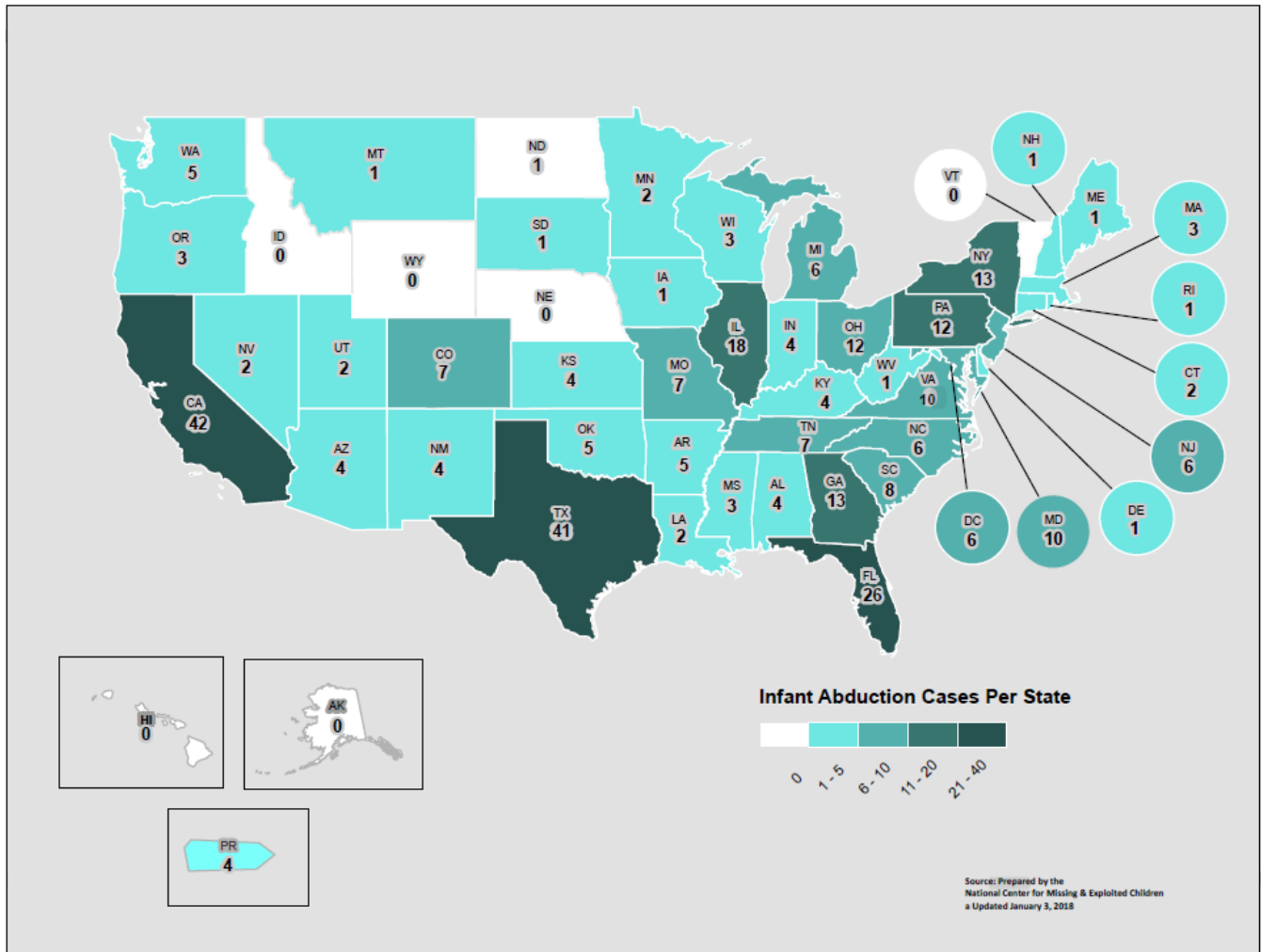
**Total cases of infant abductions where the mother died** **38 (11.69%)**

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**Total cases of infant abductions where the infant died** **9 (2.77%)**

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## 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 1965 through September 2018.

#### **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.