

Halloween Sadism:

The Evidence

Joel Best
Professor of Sociology and Criminal Justice
University of Delaware
Newark, DE 19716-2580
302-985-7710
joelbest@udel.edu

The practice of giving contaminated treats to children during trick-or-treating has been termed *Halloween sadism* (Trubo 1974). In 1985, I published an article that reviewed press coverage of Halloween sadism in four U.S. newspapers: the leading papers in the three largest metropolitan areas (*New York Times*, *Los Angeles Times*, and *Chicago Tribune*); as well as the *Fresno Bee* (at the time, I lived in Fresno, California). The article, co-authored with one of my undergraduate students, examined those papers for the period 1958-84 (Best and Horiuchi 1985). An updated version, covering the same four newspapers through 1989 appeared in my book, *Threatened Children* (Best 1990), and I have continued tallying these reports in this document (which is revised each fall).

In reviewing the press coverage, I searched for reports which specified (a) where the incident had occurred, and (b) how the treat had been contaminated. Thus, a story reporting that a child in Boston had received a candy bar with a pin in it would have counted as an incident. In reviewing these reports, a couple things stood out. First, there weren't all that many incidents reported. Although the belief in Halloween sadism is widespread, I don't think that media coverage can be blamed--there simply haven't been that many stories. (The media do, however, often warn parents about the risk of Halloween sadism. Lists of recommended precautions routinely advise parents to inspect their children's treats, in addition to making sure they can see through the eyeholes in their masks, etc.) Second, there were relatively few reports of children being injured by Halloween sadism; most of the reported incidents involved the discovery of a contaminated treat, but no injury. (This is confirmed by efforts to follow up on reports of Halloween sadism; researchers who have done this have concluded that a large proportion of these reports are hoaxes [*Editor and Publisher* 1973; National Confectioners Association et al. 1982]. For more recent coverage of hoaxing, see De

Groot [2015]; Walker [2015].) In my own research, *I have been unable to find a substantiated report of a child being killed or seriously injured by a contaminated treat picked up in the course of trick-or-treating.*

Since 1985, I have been interviewed by hundreds of reporters from television, radio, magazines, and newspapers. They often ask whether I have updated my research. Therefore, I am posting both my original data, supplemented by my efforts to bring the research up to date. I also list all of the cases that have come to my attention in which children's deaths were initially attributed to Halloween sadism (in each of those cases, follow-up stories offered a different interpretation), and I am including discussions of the medical literature's treatment of Halloween sadism, and of the Internet's impact on reporting.

A basic logical principle is that one cannot prove a negative. Therefore, I can never prove that no child has been killed by a Halloween sadist. I can simply note that such a death probably would be a major news story, yet I can't find any evidence of such a story being covered by major media.

Halloween sadism is best seen as a contemporary legend (sometimes called an urban legend) (Best and Horiuchi 1985, Grider 1984, Ellis 1994). That is, it is a story that is told as true, even though there may be little or no evidence that the events in the story ever occurred. Contemporary legends are ways we express anxiety. Note that concerns about Halloween tend to be particularly acute in years when some sort of terrible recent crime has heightened public fears. Thus, the September, 1982 reports of deaths due to poisoned Tylenol capsules led to many warnings about trick-or-treating's dangers in that year. Similarly, the September 11, 2001 terrorist attacks were followed by legends warning against visiting malls on Halloween. Of course, many malls now offer "safe" trick-or-treating, just as some church congregations now host "trunk or treat" events in their parking lots, and this legend may be seen as a way of expressing fears that Americans are no longer safe. (There are related legends in more recent years, that children have received cryptic, terrorist-related messages in their treats.)

The concern lives on. A 2011 Harris Interactive poll of parents of children 12 and under found that 24 percent had concerns about poisoned treats (and 15 percent stated that abduction was a concern) (Mickalide, Rosenthal, and Donahue 2011). In 2014 (the first year recreational marijuana was legally available in Colorado), the Denver police warned that children might be given pot-infused candy, although there were no reports of that actually having happened.

In 2015, during my 31st year of giving pre-Halloween interviews about my research, I received an e-mail message from a man reporting his experience as a victim of Halloween sadism:

My incident happened Halloween night in 1984. I was 9 at the time and I began hallucinating that night after eating a small amount of candy. Rushed to the hospital I was treated by several doctors who had concluded I had symptoms of being given LSD. In the years since I've seen many specialists and I still do today for a medical condition I now have as a result. My parents, who are still alive, have the police and hospital reports

which I've already verified myself as I got older and more curious. Personally I've never seen this in any news report and I'm not sure why. I do know my parents did their very best to keep the attention off of me so that could be what happened.

This happened in St. Clair Shores, Michigan and the police were involved on November 1st, 1984 after I was already in the hospital. The police took all of the candy that me and my siblings received that night. It's been so long and I do not know if they tested it. Based on the doctors and their tests on me is how they concluded what I had in my system.

This is only firsthand report of victimization I've received. Because it is impossible to prove a negative, I can't say that there have never been incidents of children being harmed. What I can say is that I've reviewed press coverage back to the late 1950s, and I have not found reports of serious injury. Nor have lots of people contacted me with stories that suggest Halloween sadism is widespread but unreported.

DEATHS ATTRIBUTED TO HALLOWEEN SADISM

1. *Kevin Totson* (Detroit, 1970). Five-year-old Kevin died after eating heroin supposedly hidden in his Halloween candy. Less heavily publicized was a follow-up story that Kevin had found the heroin in a relative's home.
2. *Timothy O'Bryan* (Pasadena, TX, 1974). Eight-year-old Timothy died after eating cyanide-laced Halloween candy. Later investigation revealed that he had received the candy from his father (who had taken out a life insurance policy on his son). The father was tried, convicted, and executed for the murder of his son.
3. *Patrick Wiederhold* (Flint, MI, 1978). Two-year-old Patrick died after eating Halloween treats. However, tests of tissue samples failed to find traces of drugs or poison, and police concluded that Patrick's death was from natural causes.
4. *Ariel Katz* (Santa Monica, CA, 1990). Seven-year-old Ariel collapsed while trick-or-treating and died. Although her parents told the authorities that she had heart problems, the initial press reports blamed Halloween sadism. The coroner attributed the death to an enlarged heart.
5. *Name Withheld* (Vancouver, British Columbia, 2001). A four-year-old girl died after eating some Halloween candy, leading police to advise parents to throw out all Halloween treats. However, pathology tests showed no evidence of poisoning, and the autopsy showed she died of a streptococcus infection.

Other rumors may be less specific. In 2010, police in Waterloo, Ontario dismissed reports on social media sites that someone had died after eating contaminated candy.

WHAT DOES THE MEDICAL LITERATURE SHOW?

One medical overview argues that Halloween sadism is “quite rare and the risk may be exaggerated” (Weir 2000: 1046). I know of only two reports of foreign bodies having been ingested and the injury attributed to Halloween sadism; in one of these cases, a pin was swallowed nearly a week before Halloween; in the other, a 55-year-old man ingested a needle thought to have been in a caramel-covered apple. In other words, it seems unlikely that either incident was directly related to trick-or-treating (Conforti et al 1987; Bajwa 2003). In a third case, an adolescent entered a hospital on Halloween suffering from abdominal pain. He attributed this to a commercially wrapped cupcake that he had purchased at a gas station; however, he later acknowledged that he had overdosed on prescription medication (White et al. 2002). In other words, the medical literature does not offer any reports of children poisoned or otherwise harmed by treats they received while trick-or-treating.

Although many hospitals once offered to X-ray Halloween treats, this practice is controversial among radiologists both because few foreign objects are found, and because some worry that the practice may induce a false sense of security, since X-rays cannot detect drugs or poisons (Calvanese 1986; Cappelle et al. 1993; Malott 1987). For whatever reason, the practice seems to have largely died out.

In recent years, some communities have banned known sex offenders from passing out treats, but a study of “nonfamilial sex crimes against children” found no evidence that these offenses increased on or around Halloween (Chaffin et al. 2009).

The medical literature does offer evidence that Halloween is indeed a dangerous holiday. After all, it is a night when tens of millions of children are wandering through the streets. Studies show that children’s risk of being struck by a car is four times higher on Halloween than on other nights (*Morbidity and Mortality Weekly Report* 1997), and the Halloween has more child-pedestrian fatalities than any other day of the year (State Farm Insurance (2012). An analysis of “pediatric holiday-related injuries” in emergency rooms found that, among eight holidays, Halloween ranked fourth in the number of injuries, behind Labor Day, Memorial Day, and the Fourth of July, and just ahead of Easter (D’Ippolito et al. 2010).

HOW MEDIA COVERAGE IS CHANGING

I began trying to track press coverage of Halloween sadism in the early 1980s. At that time, print journalism offered the most thorough news coverage, and I concentrated on examining the *New York Times*, the *Los Angeles Times*, and the *Chicago Tribune*—the three leading newspapers in the three largest urban areas. But newspapers are in trouble—readership and advertising is down, and newspapers have fewer reporters writing fewer stories. In contrast, the Internet continues to expand. There are online professionals, such as the websites maintained by newspapers and television stations, but also stand-alone websites and podcasts. Moreover, social media allow anyone with a Facebook page or a Twitter account to report news.

Consider 2015. In 2015, a Facebook user posted a picture of a host of colorful pieces of what were said to be Ecstasy in a variety of unusual shapes (e.g., skulls, etc.) accompanied by a warning that these might be given as candy to trick-or-treaters. The warning circulated through Facebook until it received a boost in October when the police department in Jackson, Mississippi relayed it. That story was picked up by a variety of news outlets, and was debunked on *Snopes.com* (LaCapria 2015). (On the flip side, a comic post entitled “How to Spot Suspicious Halloween Treats” got millions of hits [<http://aboveaverage.com/how-to-spot-suspicious-halloween-candy/#.vc5jt6:QeyV>].)

Local reports of Halloween sadism often involve posts on Facebook or on the websites of local media. In 2015, there were such reports in Massachusetts, New York, Pennsylvania, Ohio, Minnesota, Ontario, and Alberta. Typically, these reports involve some easily available sharp object (needles, tacks, etc.); only a single child reports finding something and there are no injuries. And, in many cases, follow-up stories reveal that the child has acknowledged that the report is a hoax (for examples, see De Groot 2015; Walker 2015). Precisely because these stories are too minor to receive newspaper coverage, most of them don’t appear in the tally I update each year.

REPORTED INCIDENTS OF HALLOWEEN SADISM BY YEAR

1958 – 0	1978 – 1	1998 – 2
1959 – 1	1979 – 3	1999 – 0
1960 – 0	1980 – 0	2000 – 2
1961 – 0	1981 – 0	2001 – 1
1962 – 1	1982 – 12	2002 – 0
1963 – 1	1983 – 1	2003 – 1
1964 – 3	1984 – 0	2004 – 0
1965 – 1	1985 – 0	2005 – 0
1966 – 5	1986 – 1	2006 – 0
1967 – 4	1987 – 0	2007 – 1
1968 – 3	1988 – 1	2008 -- 1
1969 – 7	1989 – 0	2009 -- 0
1970 – 10	1990 – 1	2010 -- 0
1971 – 14	1991 – 0	2011 -- 0
1972 – 1	1992 – 1	2012 -- 1
1973 – 4	1993 – 0	2013 -- 0
1974 – 1	1994 – 0	2014 -- 0
1975 – 2	1995 – 1	2015 -- 3
1976 – 2	1996 – 1	2016 -- 3
1977 – 0	1997 – 0	

Methodological note: The numbers in this table are derived from slightly different sources (which reflect changes in the ways newspapers are indexed). For the period 1958-84, I searched the printed annual indexes for the *New York Times*, the “morgue” files of the *Fresno Bee*, and microfilmed copies of the *Chicago Tribune* and the *Los Angeles Times* for Nov. 1-3. Beginning in 1985, I was able to draw upon the LEXIS-NEXIS database (this is an electronic database that covers major newspapers). I do not include Internet-only reports.

The above table uses a more-or-less standard method which focuses on newspaper reports from larger cities. It is increasingly possible to find other incidents reported on the websites of smaller newspapers and TV stations, or in social media (see above section on changing media). While it is impossible to devise a complete list of reported incidents, it should be evident that these reports are not very common, and that the incidents reported are not very serious.

REFERENCES

- Bajwa, Hammad Ahmed. 2003. “Needle Ingestion via Halloween Caramel Apples,” *Mayo Clinic Proceedings* 78: 1311-12.
- Best, Joel. 1990. *Threatened Children: Rhetoric and Concern about Child-Victims*. Chicago: University of Chicago Press.
- Best, Joel, and Gerald T. Horiuchi. 1985. “The Razor Blade in the Apple: The Social Construction of Urban Legends,” *Social Problems* 32: 488-99.
- Calvanese, Jerry. 1986. “Should We X-Ray Halloween Candy?,” *American Journal of Roentology* 147: 854-55.
- Cappelle, Christine, Steve Eberly, and Ronald I. Paul. 1993. “Routine Screening of Halloween Candy: Helpful or Hazardous?,” *Annals of Emergency Medicine* 22: 1541-44.
- Chaffin, Mark, Jill Levenson, Elizabeth Letourneau, and Paul Stern. 2009. “How Safe Are Trick-or-Treaters? An Analysis of Child Sex Crime Rates on Halloween,” *Sexual Abuse: A Journal of Research and Treatment* 21: 363-74.
- Conforti, Frederick P., Douglas R. Smego, and Kirk K. Kazarian. 1987. “Halloween Appendicitis: Pin Perforation of the Appendix,” *Connecticut Medicine* 8: 507.
- De Groot, Kristen. 2015. “Tis the Season: Halloween Candy Scares Mostly Hoaxes.” Associated Press (November 6). (<http://abcnews.go.com/US/wireStory/tis-season-halloween-candy-scares-hoaxes-35018136>)
- D’Ippolito, Christy L. Collins, and Dawn R. Comstock. 2010. “Epidemiology of Pediatric Holiday-Related Injuries Presenting to US Emergency Departments,” *Pediatrics* 125: 931-37.
- Editor and Publisher*. 1973. “Press Finds Halloween Sadism Rare But Warns of Danger.” 106 (March 3): 22.
- Ellis, Bill. 1994. “Safe Spooks: New Halloween Traditions in Response to Sadism Legends.” Pp. 24-44 in *Halloween and Other Festivals of Death and Life*, edited by Jack Santino. Knoxville: University of Tennessee Press.

- Grider, Sylvia. 1984. "The Razor Blades in the Apples Syndrome." Pp. 128-49 in *Perspectives on Contemporary Legend*, edited by Paul Smith. Sheffield: Sheffield Academic Press.
- LaCapria, Kim. 2015. "Molly Twaddle." *Snopes.com* (September 29). (<http://www.snopes.com/ecstasy-halloween-candy/>)
- Malott, Jack C. 1987. "X-Raying Halloween Candy: A Public Service?," *Radiology Management* 9 (Fall): 78-79.
- Mickalide, A. D., K. M. Rosenthal, and M. P. Donahue. 2011. *Halloween Safety: A National Survey of Parents' Knowledge, Attitudes, and Behaviors*. Washington: Safe Kids Worldwide.
- Morbidity and Mortality Weekly Report*. 1997. "Childhood Pedestrian Deaths During Halloween—United States, 1975-1996." 46 (October 24): 987-90.
- National Confectioners Association, Chocolate Manufacturers Association, and National Candy Wholesalers Association. 1982. "Halloween/1982: An Overview." Unpublished paper.
- State Farm Insurance. 2012. "Halloween Is "Deadliest Day" of the Year for Child Pedestrian Fatalities." Press release at: <http://www.multivu.com/mnr/56790-state-farm-halloween-pedestrian-child-safety>.
- Trubo, Richard. 1974. "Holiday for Sadists," *PTA Magazine* 69 (October): 28-29.
- Walker, Jese. 2015. "Another Halloween, Another Crop of Tampered-Treat Hoaxes." *Reason.com*, November 4. (<https://reason.com/blog/2015/11/04/another-halloween-another-crop-of-tamper>)
- Weir, Erica. 2000. "The Hazards of Halloween," *Canadian Medical Association Journal* 163: 1046.
- White, Suzanne, Grace Dy, and John M. Wilson. 2002. "The Case of the Slandered Halloween Cupcake," *Pediatric Emergency Care* 18: 185-88.