Summary of Monograph No. 2
Professional and Public Perceptions of Child Abuse and Neglect in Singapore: An Overview

Aims
- Understand perceptions and attitudes of different professionals on child abuse and neglect in Singapore.
- Compare professionals’ views with that of members of public obtained from Monograph 1.
- 5 questions asked:
  - Do the relevant professionals agree to a common set of norms and standards with regards to child abuse and neglect?
  - Do the relevant professions share a common attitude towards abusive/neglectful actions?
  - Do professionals agree with the public with regards to beliefs on child abuse and neglect?
  - What kinds of child abuse and neglect cases do front-line professionals deal with?
  - What are professionals’ attitudes towards the reporting of child abuse and neglect?

Methodology

Sample
- Questionnaires distributed to 2141 randomly or conveniently sampled professionals including the police, lawyers, nurses, doctors, social workers, teachers, child care professionals and psychologists.
- 1238 professionals responded to the questionnaires (817 females; 401 males; 20 unknown).

Procedure
- Respondents were encouraged to give their personal views instead of professional opinions.

Findings

Categorisation of Actions
- This chapter looks at how professionals classify actions, as a way to explore how people define child abuse and neglect.
- For a list of 18 behaviours, professionals indicated if the behaviour is abuse/neglect, and if the behaviour is acceptable.
- Moderate to high levels of consensus on acceptability among professionals for 13 items:
  - Have sex with child
  - Parent not protecting child from sexual advances of other family members
  - Adult appearing naked in front of child
  - Burning child with cigarettes
  - Tying child up
  - Shaking child hard
  - Caning child
  - Ignoring signs of illness
  - Locking child outside home
  - Locking child in room
  - Threatening to abandon child
  - Making child study for a long time
  - Telling child other children are better
- High levels of consensus among different professions and the public only for items related to sexual and physical abuse.
- Moderate to high levels of consensus for abuse status for 7 items among professionals:
  - Have sex with child
  - Not protecting child from sexual advances of other family members
  - Burning child with cigarettes
  - Tying child up
  - Caning child
  - Ignoring signs of illnesses
  - Locking child outside home
- No clear trend of consensus on abuse ratings among professionals when compared with the public. In general, the patterns of response were similar as between the public and the professionals.
- Social workers had moderate to high levels of within-group consensus for the most no. of items in acceptability and abuse status ratings.
- Lawyers had lowest within-group consensus for acceptability; but highest consensus for abuse status.
Circumstances that may influence perceptions of actions that suggest Child Abuse and Neglect

- 8 items (2 representing each of the 4 types of maltreatment) were described with different circumstances and checked for acceptability:
  - Caning
  - Slapping face
  - Appearing naked in front of child
  - Parent not protecting child from sexual advances of other family members
  - Make child study for a long time
  - Tell the child that other children are better
  - Leave the child alone at home
  - Ignore signs of illness

- Intentions of parents and frequency of actions were major determinants of acceptability.
- But actions that are bad for children (e.g. appearing naked in front of child) were regarded as unacceptable nevertheless.

Scenarios presented to elicit judgements of seriousness

- Actions thought to be most serious amongst professionals:
  - Parents fondles child’s genital area
  - Parents repeatedly show the child pornographic materials

- Actions thought to be least serious amongst professionals:
  - Parents live with two children in a flat with few furnishings

- Actions thought to be of intermediate seriousness amongst professionals:
  - Parents cane the child because the child did not excel in an examination
  - Parents foster the child out to a relative and bring the child home every weekend
  - Parents usually punish the child by spanking him

- Most of the incidents were rated similarly by the professions and differences found were small in absolute terms.

Professionals’ Recollections of Child Abuse and Neglect Cases

- Physical ill-treatment the most recalled type of child abuse and neglect.
- Recalled sexual abuse cases a lot more scarce; not in line with cases reported under official statistics.
- Neglect or emotional abuse seldom mentioned; showed that these types of maltreatment either unnoticed, regarded as unimportant or genuinely infrequent.
- Professionals felt that child abuse and neglect was increasing rather than decreasing over time.
- Likely factors behind maltreatment identified by professionals (in order of prevalence):
  - Socio-economic (poverty, large families, low educational level)
  - Family dysfunction (poor parenting, broken families, fostered children)
  - Parental load (unemployment, overwork, stress)
  - Parent dysfunction (psychiatric problems, drug/gambling etc)
  - Child dysfunction (Hyperactive/handicapped children)
  - Ethnic related (no consistent view, but more respondents mentioned Malay cases than Indian or Chinese)

Suggestions on how the handling of child abuse and neglect cases should be:

- Administrative
  - Clear guidelines for recognising, reporting and managing cases
  - Closer co-operation between medical and social services

- Treatment and follow-up
  - Provide fostering arrangement for abused children
  - Better support for at-risk families and victim support groups

- Detection and prevention
  - Early detection and intervention; faster responses from relevant bodies
  - Improved public education, counselling provision, community services like drop-in centres for children
  - More proactive family life efforts and reduce education system stress on children
• Legal
  ➢ Stricter laws and more willingness to prosecute
  ➢ Mandatory reporting

**Professionals’ Attitudes Towards Reporting of Child Abuse and Neglect**

• All respondents very supportive of mandatory reporting for all professions and general public

• Top 3 reasons for reporting
  ➢ Protect the child
  ➢ So that child’s physical injuries can be treated
  ➢ So that the child can be given therapy

• Top 3 reasons for not reporting
  ➢ The situation may be misunderstood
  ➢ Not enough evidence to establish a case
  ➢ It’s a family problem; others should not interfere

**Conclusion**

• Implications of findings
  ➢ Need for greater agreement among professionals on what constitutes abuse
  ➢ Need for greater awareness among professionals on the importance of early interventions, even for potential child abuse cases
  ➢ Need for coordination and collaboration among professions and relevant organisations

• Recognizing limits when detecting and dealing with child abuse and neglect
  ➢ Though young children’s memories are quite accurate when first recalled, they are susceptible to suggestion with repeated interviewing or after long delays
  ➢ Repeated physical examination, interviewing or multiple interviews may cause discomfort or trauma
  ➢ Stress of separations of abused children (or suspected to be abused) taken into foster care may be underestimated

• Recommendations
  ➢ De-emphasize the “abuse” label may allow a wider range of unacceptable harmful actions to be brought to the attention of the public and professions
  ➢ Public or professional education is likely to be more readily accepted and effective if emphasis is on maltreatment (unacceptable damaging actions) rather than labeling it as abuse
  ➢ Consider mandatory reporting for some professions such as social workers, teachers and medical doctors
  ➢ Emphasize on good care practices that minimize emotional maltreatment and consequences