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Occasional Paper No. 9106 March, 1991

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Child Abuse In India: An Empirical Report On Perceptions

Uma A. Segal

CHILD ABUSE IN INDIA: AN EMPIRICAL REPORT ON PERCEPTIONS*

by

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^{*}This project was supported in part by funds from the Center for International Studies and the Department of Social Work, University of Missouri--St. Louis.

CHILD ABUSE IN INDIA: AN EMPIRICAL REPORT ON PERCEPTIONS

Abstract

A small, but growing, body of literature has begun to provide an understanding of the issue of child abuse in India, however, there is a dearth of empirical evidence to support general observations. As it is believed that child abuse in India has not received adequate attention primarily because of a general lack of sensitivity to the issue, this study sought to assess perceptions of child abuse by Indian nationals. Comparisons between social workers, other human service professionals and those not involved in human services fields indicated that there was negligible variations between the groups and also that there was little ability to discriminate between the severity of different forms of abuse. Implications of the findings are discussed.

CHILD ABUSE IN INDIA: AN EMPIRICAL REPORT ON PERCEPTIONS

Introduction

Recent years have brought recognition that child abuse is an issue not limited to the West. The maltreatment of children is found in all societies, and Third World countries such as India are beginning to rally around the cause of the abused and neglected child. However, knowledge about causes and effects may not readily be transferred to the East from the West, where most information about child abuse has been generated. In order to avoid the ethnocentric transfer of knowledge, it is imperative that theoreticians and researchers evaluate child abuse within the constructs of their own socio-cultural environments.

The nature and extent of child abuse in India has, thus far, received little attention, and there is a paucity of empirical data on its occurrence. NIPCCD (1988) indicates that the lack of sensitivity to child abuse in India can be attributed to the widespread acceptance of corporal punishment and the belief in the right of parents to determine what is best for their children. Nevertheless, the privacy of the family is being questioned as human service professionals (Ashtekar, 1989; Mehta, 1982), social scientists (Nath & Kohli, 1988; Rane, 1988), and even media reporters (Menon, 1987; Srinivasan, 1989) are beginning to discuss the widespread prevalence of child abuse around the country. Professional groups are calling for the study of, and intervention in, child abuse, as is evidenced by two recent seminars, the First National Seminar on Child Abuse in India, held in New Delhi in 1988, and the National Seminar on Research on Families with Problems, held in Bombay in 1989.

A small, but growing, body of literature has started to provide an understanding of the issue of child abuse in India, yet there is a dearth of empirical evidence to support general observations. This project sought to go beyond reviewing the available literature on child abuse in India and to respond to the call for empirical studies. Since it is believed that the nature and extent of child abuse in India has not received adequate attention primarily because of a general lack of sensitivity to the issue (NIPCCD, 1988; Rath, 1989), this study sought to assess perceptions of child abuse in India and to ascertain to what extent certain behaviors exhibited by caregivers was considered abusive by Indian nationals.

Theoretical Background

In a country such as India, which is 1,269,340 square miles in size with a population of 852.4 million that is projected to double in 33 years (Population Reference Eureau, 1990) and where almost half the population lives below the poverty line, many of the problems faced by children are in the areas of health, nutrition and education and are a result of impoverished economic conditions (Rane, Naidu and Kapadia, 1986). India's child population under the age of 16, itself, was 319.3 million in 1988 (UNICEF, 1990), 67.9 million more than the total population of the United States. Consequently, governmental agencies and human service professionals have, almost by necessity, focused on the basic survival needs of children. However, gradual increases in public and professional interest in the intra-familial maltreatment of children suggests that child abuse will be an issue to warrant attention in India in the 1990s.

While there is little general knowledge about child abuse, the Indian Constitution has made provision to guard the interests and rights of children. Although no single legislation specifically addresses child abuse, several legislative Acts proscribe the maltreatment of children. The National Policy for

Children expresses the obligation of the country to protect children from neglect, exploitation and cruelty. The 1986 National Policy on Education calls for the exclusion of corporal punishment in the schools. The 1986 Juvenile Justice Act, the 1987 Child Labour Act and the 1978 Child Marriage Restraint Act each prohibits different forms of abusive behavior toward children. Despite legislative recognition of the need for society to protect children, however, there appears to be a pervasive ignorance among human service professionals (Singh, 1988), law enforcers (NIPCCD, 1988) and the general public (Nath & Kohli, 1988) about the very existence of child abuse in India. And, interestingly, the Acts, themselves, focus on the societal abuse of children. Focus on parental abuse is negligible.

Several forms of societal abuse have greatly attracted the involvement of child advocates. Child labor (Satyarthi, 1989) child prostitution (Ashtekar, 1989; Nath & Kohli, 1988), child marriage (Jabbi, 1986) and child beggary (Rane, Naidu & Kapadia, 1986) are all forms of abuse, that though perhaps supported by families, are in fact perpetuated by society. Parental child abuse that occurs within the boundaries of the family has failed to elicit a similar response from proponents of child welfare. It appears that this may well be because, in addition to the general acceptance of parental supremacy, little is known about the magnitude of the problem, the causes of parental child abuse or the short— and long-term effects of abusive behavior on children.

The identification of child abuse requires the interplay of the behavior of the parent, the effect on the child and the reaction of the observer (Mayhall & Norgard, 1983). Since child maltreatment has been common to all societies through the ages (Bhattacharyya, 1982; Finkelhor & Korbin, 1988), it can be assumed that it has always existed also in India. Changes have occurred, then, in perceptions of observers who have recently indicated that abusive parental behavior is cause for alarm. Furthermore, in order for far-reaching interventions to be possible,

it becomes imperative that the general public be able to recognize and identify certain behaviors as abusive. However, the perceptions of observers are greatly influenced by societal norms and cultural conditioning.

Before intervention can occur, social scientists need to assess how observers, both those who are in a position to professionally intervene and those who are simply members of the society, perceive the different forms of child abuse that occur in India. If the general public and those with the potential to intervene do not identify certain parental behaviors as abusive, the development of intervention programs needs to be postponed until there is more awareness and sensitivity to the problem. Literature suggests that different groups of people, professional and non-professional and also persons of different professions, vary in their perceptions of child abuse (Giovannoni & Becerra, 1979). In addition, the perceived seriousness of abuse is considered to vary not only with its nature, but also when the consequence to the child is known (Mayhall & Norgard, 1983), therefore, this project sought to study the perceptions and opinions of observers and formulated the following research questions:

- 1. Does the assessment of seriousness vary with the nature of the abuse described?
- Does assessment of the seriousness of an abusive parental behavior increase with the addition of a consequence to the child?
- 3. Do people across human service professional and non-human service groups agree about the seriousness of different forms of child abuse?

Method

Instrument

The instruments used to study the subjects' perceptions of the behavior of parents toward children, were two child abuse questionnaires modelled after and including many of the questions used by Giovannoni and Becerra (1979) in their attempt to define child abuse in the United States. Each questionnaire included 63 vignettes of abusive behavior by parents and required respondents to evaluate

them on a scale of 1 to 9, with 1 being the least serious and 9 the most serious, based on their perceptions of the severity of the abusiveness of the behavior described. Thirty-six of Giovannoni and Becerra's (1979) seventy-eight vignettes were included in this study (Table 2), and another twenty three vignettes were developed to make the questionnaires reflect some of the social and cultural variations found in Indian society. The sixty-three questions were pre-tested on ten Indians residing in the United States, and based on their reactions, twelve of the new questions were modified to be more relevant to the Indian culture. The vignettes themselves could be divided into 17 categories: Alcohol/ drug abuse by parents, benign neglect, child beggary, child labor, child marriage, child prostitution, cleanliness, educational neglect, emotional maltreatment, fostering delinquency, housing, medical neglect, nutritional neglect, parental sexual mores, physical abuse, sexual abuse, and supervision.

Based on the method used for vignette construction by Giovannoni and Becerra (1979), each vignette consisted of a stem—or the behavior exhibited by the parent/caregiver—and a consequence—the effect the parental behavior had on the child. The final pool of vignettes used, in actuality, consisted of 126 vignettes: Sixty—three of the vignettes included only the stem while the other 63 were composed of both stem and consequence. Each questionnaire included several vignettes with only a stem and several with both stem and consequence. If a vignette with only a stem was used in one questionnaire, that vignette with both stem and consequence was found in the second questionnaire. Finally, the order of presentation of vignettes was varied on the two questionnaires to control for order effects.

Setting and Sample

Three groups of people were sampled in each of three metropolitan cities in India: Delhi, Bombay and Hyderabad. Social workers, who are most involved in

dealing with children with, or without, their families constituted one group. The second group was composed of other human service professionals who work with children, such as doctors, nurses and teachers, but who in India may be somewhat less aware of the phenomenon of intra-familial child abuse. The third group included people who had no involvement with the human services field, such as business people and housewives.

The sample was not random since a few social workers, other human service professionals and non-human service participants were recruited to distribute the questionnaires and collect completed ones. Of the 400 questionnaires distributed in the three cities, 133 questionnaires were completed and returned, 45 by social workers, 46 by other human service professionals and 42 by people not involved in human services fields. Table 1 presents the ages, gender and educational levels of the respondents and identifies whether or not they had child rearing experience.

Insert Table 1

Results

Means and standard deviations of responses on the survey for all respondents combined and for each subject group, separately, are presented in Table 2. The overall category rating is presented in parentheses, and the statements in parentheses added to the stem vignettes and those followed by the word "or" are the vignettes with consequences. The first row of numbers for each vignette pair consists of the mean rating and the standard deviation without a consequence, while the second row is composed of the ratings that include the consequence.

Insert Table 2

<u>Seriousness Based on the Nature of Abuse</u>

The categories of types of abuse are presented in decreasing order of the overall perceived seriousness in Table 2. Child prostitution was considered the most abusive (X=8.41) and poor housing conditions were considered the least (X=5.72). However, on a scale of 1 to 9, the overall ratings for even the housing conditions appear to be relatively high. Thus, assessment of the seriousness of abuse varies between the means of 5.75 and 8.41 for the different types of abuse indicating that while the nature of the abuse did influence perceptions of seriousness of abuse, all forms of abuse were believed to be rather serious.

Seriousness of Consequences

To determine if the addition of a known consequence of a potential action of a parent or caregiver significantly changed perceptions of seriousness, t-tests of means compared the ratings of the basic vignettes and the ratings of the vignettes with the consequence added. This followed Giovannoni and Becerra's (1979) method, and tested for all respondents as a group and between the three specific groups, namely the social workers (SW), other human service professionals (HS) and the non-human service persons (NHS).

Table 2 shows that the effect of the addition of a consequence was a significant increase in the perceived seriousness of the vignettes in the overall ratings of only 20 of the 63 pairs of vignettes and a significant decrease in the overall ratings of 4 pairs. Thus, the addition of a consequence made an appreciable difference in just over one third of the total set of statements.

The general pattern was similar for all three respondent groups in that when a difference was found between a stem and a consequence, the direction of increase or decrease was the same for all groups that evidenced a significant change.

However SW indicated a significant change in merely 10 of the 63 vignettes, with 2 vignettes being considered less serious when a consequence was added. Likewise the HS evidenced a change in their perceptions for only 11 of the vignettes, and 3 of these were considered less serious when a consequence was added. Differences in perceived seriousness between parental behavior presented alone and the behavior with a consequence added were found most often with the NHS who indicated a change in 27 situations, with 10 of the vignettes being seen as less abusive when the consequence was added.

Seriousness Across the Groups

As can be seen from table 2, the three groups agreed in their perceptions of all vignettes in the three categories of child prostitution, sexual abuse and child marriage, regardless of whether or not a consequence was attached. However, when any differences were found between the SW and the HS, the HS, in all situations, rated the vignettes as being more serious than did the SW. Likewise, when SW and NHS were compared and where differences were found, the NHS rated all but one of the vignettes as being more serious than did the SW. When variations were evidenced between the HS and the NHS, the HS rated the situations higher than did their NHS counterparts. It appears, however, that in general, the perceptions of the SW and NHS were more similar to those of each other than to those of the HS who rated many of the vignettes as being more serious than did the other two groups.

Social Workers vs. Non-Human Service Respondents. In addition to the three categories on which all groups agreed, SW and NHS perceptions were similar across the categories of physical abuse, medical neglect, supervision, alcohol/drug abuse, cleanliness, educational neglect and housing. Of those cases where a difference in perceptions was evidenced in the presence of a vignette alone, one was from each of the following categories: Emotional maltreatment, parental

sexual mores, benign neglect and child beggary. The remaining five vignettes in which differences were found had an associated consequence, and one each was from the categories of fostering delinquency, emotional maltreatment, nutritional neglect, benign neglect and child labor. It was only in one vignette with a consequence from the child labor category that the SW response was lower than that of the NHS. Therefore, overall, in only 9 of 126 vignettes (63 vignette pairs) did the perceptions of SW and NHS differ significantly.

Human Service Professionals vs. Non-Human Service Respondents. In addition to the three categories of prostitution, sexual abuse and child marriage, where no differences were found across the groups, the HS and the NHS perceptions were found to be similar for the categories of fostering delinquency, nutritional neglect, cleanliness, educational neglect, housing and benign neglect. Where a difference was evidenced in the absence of a consequence, two of the vignettes were from the category of physical abuse, and one each from the categories of emotional maltreatment, medical neglect, supervision, alcohol/drug abuse and parental sexual mores. The remaining vignettes in which there were differences involved the addition of a consequence: Three were from the category of child labor, two from that of supervision and one each from the categories of medical neglect, parental sexual mores and child beggary. In all vignettes where there were differences between the two groups, the HS responses were rated higher than those of their NHS counterparts, and overall, differences in perception were found in 15 of the 126 vignettes.

Social Workers vs. Human Service Professionals. SW and HS differed in their perceptions of the seriousness of abuse on at least one vignettes in all but four categories of abuse, the three categories for which no differences were found across the respondent groups and for the category of nutritional neglect. They differed on two vignette stems for each of the categories of physical abuse,

emotional maltreatment, cleanliness and housing, and one vignette stem in the categories of medical neglect, supervision, alcohol/drug abuse, educational neglect, parental sexual mores, benign neglect, child beggary and child labor. When stems and consequences were presented together, the groups differed on two each in the categories of emotional neglect, parental sexual mores, and child labor and on one each in the categories of fostering delinquency, cleanliness, educational neglect, housing, benign neglect and child beggary. In all vignettes where a significant difference was evidenced, the SW responses were lower than those of the HS. More differences in perceptions were found between these two groups than in other combinations and were found in 28 of the 126 vignettes.

Discussion

The findings of the study, using a comparison of means across respondent groups and vignette pairs, allowed some beginning responses to the research questions posed and were rather surprising for at least two of the questions in that they did not support expectations based on theory or earlier findings.

The expectation that perceived seriousness would vary with the nature of abuse was supported, but the differences of means between the least abusive situations, poor housing conditions, and the most abusive situation, child prostitution, was a mere 2.69 points on a 9 point scale. That the two extreme scores are so close together suggest that either any form of harm to any child in India is considered highly abusive, or/and in India or in Third World countries, where problems with children are so numerous, the area of child abuse, as it is known in the Western countries, is so poorly defined and public awareness is so little that knowledge of it and the ability to differentiate between the impact, both short—and long-term, on the child is relatively undeveloped.

Interestingly, child prostitution and child beggary received the highest overall rankings for the 17 categories. This ought to have been anticipated since

social welfare movements in India in the past decade have turned their attentions toward the widespread societal abuse of children through child prostitution, child labor, child beggary and child marriages. Consciousness raising efforts that disseminate information about the extent of societal abuse and the effects of such abuse must, by their very nature and their objectives, influence persons' perceptions of seriousness. It is to be expected, however, that in a country such as India, where child labor, especially in housework and certain crafts has been woven into the socio- cultural norms of the society for centuries, where it is rationalized as benefitting the families of children so employed and the children themselves, this form of societal child abuse, despite the almost militant lobbying against it, is still generally socially sanctioned. It was ranked only slightly more abusive than poor housing conditions, the lowest ranked category.

While benign neglect, which is often discussed as a means of population control and a method of allocating meager resources in poor and rural families, was seen as more abusive than most other forms of maltreatment, it was alarming to note that when a consequence was added to vignette #13 [The parents did not feed their deformed infant. (The child dies of starvation.)], the mean score decreased significantly for the non-human services respondents and declined also for the other two groups. Must one surmise that depriving a disabled child of food to the point of death is less abusive than occasionally failing to feed the child? Do these findings suggest a tendency for this middle-class sample to sanction such selective neglect in some instances?

As in all societies with very strong incest taboos, sexual abuse was considered highly abusive. That physical abuse ranked relatively low on the abuse hierarchy (tenth) and in fact, was slightly lower than parental sexual mores, reinforces, first, a negative and judgmental societal attitude toward sexual behavior and mores, especially since the consequences did not indicate direct

abuse of the child, barring the child's knowledge of the parents' sexual behavior, and second, and perhaps more importantly, a relatively low level of social censure against corporal punishment and/or physical abuse as a means of controlling and socializing children.

Literature indicates that emotional maltreatment and physical neglect are more chronic, less traumatic and more difficult to document than physical abuse (Hally, Polansky & Polansky, 1980; Tower, 1989), and tend to evoke a less emotive response from the observer. This is supported by the lower ranking found for emotional maltreatment, nutritional neglect, cleanliness, educational neglect and poor housing conditions. Given the state of infancy in which the definition and awareness of the problem of child abuse currently is in India, given its history, as that of other countries, of handling children as the property of their parents and given the consciousness raising efforts of certain social/child welfare programs in India, the general rankings of the respondents' responses regarding the seriousness of 17 different categories of abuse should have been anticipated.

The more surprising findings were those that indicated an infrequent change in perceptions of seriousness when a consequence was added. This did not support expectations. That the addition of a consequence significantly increased the overall ratings in less than one third of the vignette pairs suggest that most of the parental behaviors were considered serious regardless of the consequence to the child. This is in variance with the findings of Giovannoni and Becerra (1979) in which the addition of a consequence affected perceptions in over 50% of the vignettes. Barring vignette #13, the consequences that tended to decrease the perceived seriousness of vignette stems may have been those that either appeared, to some extent, have some benefit to the child or the family (i.e. vignettes #38 & #55), or that may have been less traumatizing for the child than the respondent may have visualized with the stem alone (i.e. vignettes #18 & #38). Perhaps death

for a disabled child (vignette 13) was considered by this sample to be preferable to life with the disability.

When broken down into the sample groups, the addition of a consequence had even less impact. The non-human service respondents were the most influenced by the addition of a consequence, but for approximately one third of the vignettes in which they evidenced a change, it was a change in the direction of a decrease. The pattern evidenced for the two groups that provide interventions to families was similar and suggests that they were less influenced by consequences and tended to see behaviors alone as being abusive or not. Perhaps those working in the human services are more cognizant of the occurrence of these problems and have given some thought to the seriousness of each of these actions while those with less contact with social welfare issues and concerns may be more influenced by the knowledge of the effect on the child. That most parental behaviors, themselves, regardless of the consequences to the child, were considered abusive by the sample is encouraging. Lobbying efforts may be directed to all abusive behavior, regardless of the visible effects on the child, as the effects of parental abuse is often long-range and may evidenced in adulthood through antisocial or pathological behaviors.

Despite the few variations that were found, however, the perceptions of the three respondent groups were fairly similar. The differences that did exist indicated that the social workers' perceptions were more similar to those of the non-human service respondents than to those of the human service professionals. This was completely unanticipated and most surprising. Although there was a general consensus about the seriousness of the different acts of maltreatment, where a difference was present, the human service professionals rated all but one incident as being more serious than the social work and the non-human service respondents, and the two latter groups were often in agreement. Values and

perceptions generally have at least two global sources of influence: The societal culture and the professional culture (Segal, Segal & Niemczycki, 1990). Based on the values undergirding social work and other helping professions, one would expect the professional cultures of the human service helpers (social workers and other human service workers), to be more similar to those of each other than to those of persons not subscribing to human service values. It appears, for this sample at least, that the impact of societal culture and values may have more influence on social workers than on other human service professionals in that their perceptions tended to be more consistent with those of persons not professionally influenced by human service values. Perhaps this was a function of age and length of years in the profession since, on the whole, the social workers, as projected by their mean age, had probably been in the profession a shorter period of time than had the other human service professionals.

Thus, the findings revealed that while different forms of maltreatment were rated differently regarding seriousness, the range itself was relatively small and the addition of a consequence had little influence on perceptions of seriousness. Furthermore, the social worker group and the non-human service respondents may have been more influenced by societal culture and less by a professional human service culture than were the human service professionals. The size of the sample was smaller than would have been preferred, and the respondents were selected on a non-random basis, however, the subjects for each respondent group were recruited from three large cities in India where culture and language vary significantly. In addition this study may provide some much needed beginning data to allow child welfare advocates to support the assertion that there is little knowledge and ability to discriminate between different forms of parental child abuse in India and to champion the cause of abused children.

The focus of this study has been on attitudes, rather than actual behavior, and perceptions may vary when a specific respondent is presented with a real incident, however, this is outside the scope of this study. It is also clear that those incidents that were rated as less abusive, barring physical abuse, were generally those that were associated with poverty, such as physical neglect, nutritional neglect, lack of supervision and lack of cleanliness. However, the relatively low rating of physical abuse (X=6.92) is greatly in variance with Western perceptions where a major focus of child abuse reporting laws is placed on the physical abuse of children.

Implications and Summary

These data and their implications, once again point to the realization that the area of child abuse and neglect is in embryonic state in India. While the size and selectivity of the sample were not ideal, it is relatively clear that there is generally little discrimination between the severity of different forms of intra-familial child abuse and professionals appear to be no more, or no less, sensitive to the varying effects of abusive behavior than are those people who are not trained in providing interventive services for people.

Finkelhor and Korbin (1988) indicate the necessity for individual countries to prioritize the types of abuse most urgently needing attention while focusing on the three widely occurring forms of child abuse, namely, child battering, selective neglect and sexual abuse. Although this study indicated that sexual abuse and benign, or selective, neglect are considered unacceptable, the battering of children, when compared with other forms of maltreatment found in the country, is considered much less detrimental to the welfare of the child. This reinforces the relative acceptance of corporal punishment as a viable method of socialization and discipline and further supports literature that suggests that there is little awareness of the problem. Professionals in the human services field are not much

more sensitized to the issues involved or the impact of child maltreatment than are those persons not affiliated with the human services professions. Public awareness campaigns by child advocates regarding the rights of children, the effect of abuse on the child and the society and the resulting cycle or intergenerational pattern of abuse may be the initial step in bringing attention to the problem, while research efforts must be directed toward assessing its scope and impact.

The findings of this study reinforce the need to go beyond defining child abuse in abstract terms and attempting to operationalize it. Such definitions should address issues regarding parental motivation and consequences to children since intervention programs will reflect the beliefs of policy-makers and service providers. In other words, the definition should attempt to answer the questions of whether

"... all forms of physical aggression against children are abusive; whether ... primary consideration (should be given) to adult motivations and behavior regardless of the actual impact on the child, to the potential harm to the child of adult behavior or the actual impact of adult behavior on the child's ongoing physical, social, emotional and sexual development ... "(Ross & Zigler, 1980:295)

While research is needed among both clinical and non-clinical populations to assess the scope of the problem, before the general public can be made aware of both the short- and long-term effects of abuse on the child, all professionals working in the human services must receive more education about the deleterious repercussions of child abuse that can reverberate throughout India. The call for responsiveness to the issue of child abuse was made in 1988 (NIPCCD, 1988), and active investigation and intervention need to begin.

REFERENCES

Ashtekar, A. (1989). Profile of victimised girls. Presented at the National Seminar on Research on Families with Problems, Bombay: Tata Institute of Social Sciences.

Bhattacharyya, A.K. (1982). Child abuse in India and nutritionally battered child. Child Abuse and Neglect, 3, 607-614.

Finkelhor, D. & Korbin, J. (1988). Child abuse as an international issue. Child Abuse and Neglect, 12, 3-23.

Giovannoni, J.M. & Becerra, R.M. (1979). <u>Defining child abuse</u>, New York: The Free Press.

Hally, C., Polansky, N.F. & Polansky, N.A. (1980). Child neglect: Mobilizing services, U.S. Department of Health and Human Services, Publication No. (OHDS) 80-30257.

Jabbi, M.K. (1986). Child marriages in Rajasthan. Social Change, 16(1), 3-9.

Mayhall, P.D. & Norgard, K.E. (1983). <u>Child abuse and neglect: Sharing responsibility</u>, New York: Macmillan Publishing Company.

Mehta, M. (1982). Physical abuse of abandoned children in India. Child Abuse and Neglect, 6, 171-175.

Menon, R. (1987). Child abuse: Tragically widespread. <u>India Today</u>, January 31, 116-119.

Nath, N. & Kohli, M. (1988). Child abuse in India: Some issues. In NIPCCD, Report on the National Seminar on Child Abuse in India, 22-23 June, 1988, New Delhi: National Institute of Public Cooperation and Child Development, 137-151.

NIPCCD. (1988). Introduction. In NIPCCD, Report on the National Seminar on Child Abuse in India, 22-23 June, 1988, New Delhi: National Institute of Public Cooperation and Child Development, 1-8.

Population Reference Bureau. (1990). 1990 world population data sheet, Washington, DC: Population Reference Bureau, Inc.

Rane, A.J. (1988). Approaches to prevention and management of child abuse in India. In NIPCCD, Report on the National Seminar on Child Abuse in India, 22-23 June, 1988, New Delhi: National Institute of Public Cooperation and Child Development, 71-83.

- Rane, A.J.; Naidu, U.S. & Kapadia, K.R. (1986). Children in difficult situations in India: A review, Bombay: Tata Institute of Social Sciences.
- Rath, S. (1988). In NIPCCD, Report on the National Seminar on Child Abuse in India, 22-23 June, 1988, New Delhi: National Institute of Public Cooperation and Child Development, 152-159.
- Ross, C.J. & Zigler, E. (1980). An agenda for action. In Gerber, G., Ross, C.J. & Zigler, E. (eds). Child abuse: An agenda for action, New York: Oxford University Press, 293-304.
- Satyarthi, K. (1989). Child bonded labour in South Asia: An overview. Presented at the South Asian Seminar on Child Servitude, New Delhi, June 30-July 4.
- Segal, M.W., Segal, U.A., & Niemczycki, M.A.P. (1990). Value network for cross-national marketing management: A framework for analysis and application, Mimeograph. Southern Illinois University-Edwardsville.
- Singh, R.R. (1988). Role of social workers and community in the prevention and management of child abuse. In NIPCCD, Report on the National Seminar on Child Abuse in India, 22-23 June, 1988, New Delhi: National Institute of Public Cooperation and Child Development, 93-120.
- Srinivasan, S. (1989). No one talks about it. <u>Eve's Weekly</u>, July 8-14, 50-53.
- Tower, C.C. (1989). <u>Understanding child abuse and neglect</u>. Needham Heights, MA: Allyn & BAcon.
- UNICEF. (1990). The state of the world's children, Delhi: UNICEF.

TABLE 1

		Characteris	tics of Resp	ondent Groups		
			N = 133			
Professi	on (N)	Mean Age	Female	Child Rearing Experience	Educ	ation*
Social Work	(45)	30.7	71.3%	33.3%	BA MSW PhD	15.5% 73.3% 11.1%
Human Service	s (46)	34.4	45 . 2%	56.5%	HS BA MA PhD	8.9% 17.8% 55.5% 17.8%
Non-Huma Service	l .	39.8	54.8%	66.7%	HS BA MA PhD	10.0% 42.5% 45.0% 2.5%
Total	(133)	34.8	63.9%	52.6%		100.0%

^{*} HS = High School

BA = Bachelor of Arts MA = Master of Arts

MSW = Master of Social Work

PhD = Doctor of Philosophy

TABLE 2

MEANS AND STANDARD DEVIATIONS FOR ALL THREE GROUPS FOR EACH CATEGORY N=133

		VIGNETTES 1,4	Over Rat	all ² ing	Social Work		Human Service n=46		Non-H Serv n=4	ice
	Child Prostitution	, _{v=e} , 3	ī	sd	ž	sd .	x	sd	x	sd
1.	ine parents solo t	possible to feed their other		1.31 1.58		1.31 1.76		1.77 0.52	8.56 8.64	1.63
2.		eir child out to prostitute often cries when they leave her).		1.62 1.33		1.89		1.59		
3.		11) the child to beg all day. (She ab she has collected Rs. 10). ac	8.09 7.40	1.27 1.67		1.40		0.90		0.58 1.77
4.	The parents broke her to beg. The ar now has doubled.	the child's hands and sent count of money she brings home		1.24 1.46		1.31		0.29		1.16
5.	engaged in sexual The parent and the	e parent and the child intercourse. or child repeatedly engaged		1.12	8.40	1.42	8.96 8.30	0.21	8.79 8.33	0.80
5.	engaged in mutual i	ne parent and the child masturbation. or. child repeatedly engaged		1.62 1.91	7.83	2.09 2.34		1.20		0.80 1.98
7.	child's genital ar	e parent fondled the a. <u>or</u> atedly fondled the child's		2.30		2.27 1.89*	6.96 8.48	2.14 0.99*	6.32 8.23	2.46 1.24*
١.	by a staff member.	sed for sexual pleasures (In exchange, she gets better ess difficult tasks).	8.21 8.31	1.63 1.57		1.73 2.09		1.38 1.11	8.26 8.36	
7.		he child to be used in es. (The child acts sexually en).	7.99 7.86	1.34 1.99	7.43 7.75	2.35 1.44	8.50 8.09	1.14 1.31	8.07 8.00	
).		titute is sexually molested prostitute is paid well stomer).		1.57 1.39	7.81 8.21	1.64 1.69	7.82 8.56	1.84 1.31	8.07 8.85	1.33

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Table 2 (continued)

									<u> </u>			
		VIGNETTES		Overall Rating			Socia	ıl Work	k Human Service		Non-Human Service	
	Benign Neglect (X	=7.901		x	sd		x	sd	ī	sd	x	sd
11.	The parent feeds	boy children first, the remains girls. (The girls are all	5		1.82			1.98		1.52		1.92
12.		nned their infant daughters (They had six children already)	-ab		1.63			1.58 1.71		1.74		1.61
13.	The parents did n (The child dies o	ot feed their deformed infant. f starvation).	.ab		1.33			1.75 1.86		0.57		0.80
14.		marriage between two young irl is forced to leave her		6.52 7.06	1.94 1.90		5.94 6.55	1.73 1.84		1.56 1.95		2.19 1.75*
15.		marriage of a girl child e child suffers frequently ations).		8.09 8.03	1.36		7.71 7.75	1.58 1.95		1.31		
16.	A child is widowed is never allowed	soon after marriage. (She remarry).		8.00 7.57	1.17		7.76 7.25	1.24 1.84		1.20		
17.	Fostering Delinque The parents make t articles out of the was caught steali	heir child steal small e supermarket. (The child	ab		1.92 1.94	Ç.F	6.69 6.50			1.36 1.34	7.04 8.43	
18.	was obviously ill eating. (When they	=7.08) d the fact that their child crying constantly and not finally brought the child was found to be seriously	a c	7:.68 6.98	1.78 1.97		7.07 6.62	2.00 1.89		1.42	8.08 6.36	
17.	an earache and chi	d their child's complaint of onic ear drainage. (The child a serious infection and r ear).	c	6.71 6.94	_		6.94 6.46			1.24		2.39 1.60*
20.	outside the house midnight. (Neight	7) rly left their child alone after dark often as late as ors have spotted the child lometers away from home).	ac	6.94 7.63	1.70 1.84		6.31 7.00		7.83 8.17		6.48 8.07	
21.	inside the house d	rly left their child alone uring the day. Often they il midnight. (On one occasion a small fire).	c	7. 25 6.60			6.79 6.50		7.65 7.44			1.95 2.30*

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Table 2 (continued)

		VIGNETTES		Over Rati		Socia	Social Work		n 58	Non-Human Service	
	1			ž	sd	 -	5d	x 	sd '	X	sd
22.	alone all night.	he parents left their child or rly left their child alone	G	6.96 6.43	2.12 1.96	6.17 5.69	2.32 2.09		1.55,	7.31 5.67	2.14
23.		a relative who is a g customers to their house.	b •		2.20	6.95 6.06			2.50 1.57	8.85 6.93	0.56 1.77
24.	The parents have it can see. (The chi	ntercourse where the child ld knows this).	ac	7.07 7.61	2.12 1.86	6.44 7.41	2.42 1.97		1.35	6.61 8.64	2.27 0.73
25.	A divorced mother, is a prostitute.	who has custody of her child, Her child knows this).	ac	6.34 5.96	2.38 2.31	5.93 4.88			2.35 1.59		2.04 2.04
26.		child in the face, striking (The child suffered a black	ac 	6.53 7.59	2.05	6.12 7.33			1.70. 1.56	6.00 7.79	2.02
27.		the child against the wall by the shoulders. (The child ion).	ac		1.96 1.72		2.45 1.92		1.27		1.87
28.	The parent struck	the child with a wooden stick. d a concussion).			2.09		1.82		1.96	6.36 7.11	2.65
27.	The parents usuall spanking him with marks on the child	y punish their child by a leather strap (leaving red 's skin).			1.84 1.79		1.71 2.34		1.74 1.68	7.85 7.26	1.82
30.	The parents usually spanking him with on the child's ski	y punish their child by the hand (leaving marks n).		5.42 6.66	2.37 2.10	5.07 6.44	2.42 2.48	5.30 7.35	2.48 2.01	6.36 6.14	
31.	The parent threw h	ot water on the child. (The ond-degree burns).			2.11 1.84		2.38 2.05	8.17 8.04	2.08	B.71 7.67	0.73 1.78
32.		e child to a post by a two re she's working. (The child by).			2.42 2.34		3.00	6.54 7.13	2.04 ; 2.51	5.07 6.31	
33.		e beaten by their teachers r. (The teacher may leave eating).			2.14 1.89		1.76	5.87 7.44	2.85 : 1.70	5.85 6.25	1.62

Table 2 (continued)

	•	VIGNETTES		Overall Rating		Socia	el Work	k Human Service		Non-Human Service	
				x	s d	x	sd	x	sd	x	sd
34.	control the child	ection centers use sticks to en. (Sometimes the beatings on the child's body).			1.63 1.66		1.96		1.56 1.95	6.82 8.07	1.39
35.	Alcohol/Druq Abuse A parent became ve care of the child and became intoxi	ry drunk while alone taking (The child drank some whiskey	a c	6.31 7.32	1.96		2.09		1.20		2.00 1.60*
36.	house in places wi	bottles of whiskey around the ere the child can get to them. ome and became intoxicated).	c	6.83 7.04	1.85 1.97		1.56		2.19		1.61
37.	since birth. The	ept their child locked in feed and bathe the child physical care. (The child		7.43 7.62			2.36 2.43		1.58 1.88		2.15 1.18
38.	have allowed the	y mentally ill. (The parents hild to undergo treatment erate themselves).	ab		1.35		1.47 2.54		0.94 [#] 1.92	8.64 6.32	1.08
37.	parents have allow	behavior problems. (The ed the child to undergo se to cooperate themselves).		6.48 7.13			2.27 2.01		1.22 [#] ,	6.68 7.43	
40.	The parents are co child, calling him afraid to be with		c =	5.88 7.25	2.09	6.00 6.57	2.13 1.70		1.82	5.07 7.64	2.07
41. '	seldom talking wit	their child most of the time, h him or listening to him. (The lights with other children).	•	6.63 6.37		6.21 5.94	1.47 1.91	7.27 7.13		6.62 5.96	
42.	his younger siblir child is not real!	Fig. 1	a ab	6.70 6.87		5.89 5.67		7.48 7.54		2.86 7.46	
3.		ntly tell the child he's Other children in the family		6.87 7.23		6.81 6.61	2.14 1.85	7.14 8.00	1.88	6.64 7.38	
44.	The child is not a children. (He has	lowed to play with other to work around the house).		6.53 5.84		6.07 6.06	2.26	7.09 6.26	2.31 1.89	6.54 5.29	
45.		en to give away the child or ne doesn't obey. (The child rent nightmares).		6.24 7.33	1.83 1.66	6.25 7.17		6.96 7.61		5.63 7.50	

Table 2 (continued)

		.,	· ·						. 1		
		VIGNETTES		Overall Rating		Soci	al Work	Non-Human Service		Service	
	:			x	sd	x	⊈d		s d '	ī	sd
46.	when he comes near rocking himself).	e the child and push him away . (He sits in the corner		7.28 6.85	1.60		1.56 1.71		1.39	_	1.98
47.	mother. (All other their mothers).	allowed to sleep with his young children sleep with		5.00 5.25			2.50 2.63		2.94 1.93		3.01 2.38
48.	for periods of at	t (X=6.64) In the feed their child least 24 hours. (The child was weeks for being seriously	5 b		2.09 1.70		1.65 1.92		1.88 1.48		2.39 1.16
49.	The parents feel o	nly milk to their child. (The deficiency).		5.76 5.59			2.16		2.38		2.28 2.34
50.	Cleanliness (X=6.5 The parents usuall filthy, sodden mat infected sores on	y leave their child on a tress. (The child has	a a	6.00 7.08	2.05 1.91	5.18 6.38	1.79 1.71*		1.91 1.55		2.02 2.10
51.	The parents do not (The child's arms encrusted sores).	wash their child at all. and legs are covered with		5.92 7.24	2.52		2.79 1.87		1.96	5.50	2.59 1.96
52.	The parents do not bathe the child fo sores in several p	wash their child's hair nor r weeks at a time. (He has laces).		6.18 7.58		5.38 7.14	2.03	7.04 7.96	1.77	5.89 8.08	2.06
53.	The parents make n clean. (The child' old food).	effort to keep their child s hair is matted with bits of	4	6.03 6.24		5.28 5.81	1.96 2.10	6.70 6.78	2.24	6.54 5.96	1.94 2.12
54.	Educational Neglec The parents frequeschool. (The chil	t (X=6.30) htly keep their child out of d is failing in school).	a	6.87 5.73		5.46 4.75		7.00 6.77	2.43 1.90	7.15 6.26	
55.	Child Labor (X=5.7 The child works all owners feed him an	9) I day in the factory. (The d give him a place to stay).	c	6.77 4.75	2.18 2.22*	6.90 4.81	1.86 2.37		2.42 1.95	6.62 3.96	
56.	The child cleans I the rupees from wo	atrines all day. (He takes k to his parents each day).	•	6.51 6.04		5.00 6.41	2.25 2.11	6.91 6.70	1.70 ' 2.42	5.82	
57.	The child is expect children. (The pare	ed to take care of younger ents work in the fields).	2	4.22 5.24		4.56 3.86			2.73 [*] 1.92	4.86 4.31	
58.	The child is expec (He must do it ever	ted to help care for cattle. when he is sick).	ac	4.00 6.09	-	3.64 5.62		4.14 7.22	2.53	4.17 5.36	2.17 2.18

Table 2 (continued)

	VIGNETTES	Overall Reting				Social Work Human Service		Non-Human Service		
	1 1	x	sd	x	sd	x	sd	x	bæ	
59.	The child polishes shoes in the marketplace. (The parent spends the child's earnings on alcohol).		2.04 1.58		2.30		1.67	4.41 8.07	2.06	
60.	The child's nimble fingers are used for weaving carpets in a poorly lit room. (He is forced to stay out of school to practice his craft).		1.93 1.80	_	1.63 1.81		2.19 1.59		1.90 1.70	
61.	Housing (X=5.72) The parents live with their child in an old house. Two windows in the living room where the child plays have been broken for some time, and a		2.06		1.84		1.83		2.12	
	the glass has very jagged edges. (The child cut his hand on the jagged edges, requiring three stitches).	5.89	2.29	5,28	2.27	6.17	2.59 :	6.77	1.48	
62.	The parents live with their child in a small rented house. (No one ever straightens up. Decaying garbage, rats, and cockroaches are everywhere).		2.33		2.00 2.16		2.50	4.62 5.70		
63.	The parents live with their child in a slum. Derelicts sleep in the doorway of the building in which they live. (One of the derelicts accosted the child).		2.39		2.45 2.09	5.82 7.14			1.38 1.78	

Critical t-value = 2.39

significant difference between situation stem and statement including a consequence significant difference between social workers & human service workers

significant difference between social workers & non-human service respondents

significant difference between human service workers and non-human service respondents

NOTE: 1. The statements in parentheses added to the stem and the statements following the word "or" are the vignettes with consequences.

2. The first row of numbers consists of the means & std. dev. for situation stem,

while the second row contains the scores of the statement including the consequence

3. The number in parentheses is the overall category rating.

4. All vignettes with boldfaced numbers are drawn from Giovannoni & Becerra (1979).