

CHILD ABUSE AND CHILD PROTECTION IN THE UNITED KINGDOM

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Historical Introduction

In the early 19th century British society began to acknowledge that children had needs and rights separate from the needs and rights of their parents. Despite this the state rarely intervened in families to protect children. The parents' (or rather fathers') power to control and punish their children was sacrosanct and the state usually only intervened if the family had clearly broken down.

In the late 19th century this situation began to change. A variety of philanthropic societies developed in response to the social problems arising from the great disparity in wealth between rich and poor. Some of these societies were concerned with the rescue of children from maltreating or in other ways 'bad' families (Dingwall et al, 1983) and campaigned for legal reform to challenge the absolute rights of fathers over their children. These child protection societies combined to form the National Society for the Prevention of Cruelty to Children (NSPCC). The campaign led to the 1889 Prevention of Cruelty to, and Protection of Children Act, which made cruelty to children a clear criminal act (Harding, 1989).

Subsequent acts of parliament have further developed the state's role in protecting children (for example, Children Act, 1948; Children and Young Persons Act, 1969; Children Act, 1989), though the basic premise of this legislation is that in normal circumstances the family is the best place for children to be raised and that the state should only intervene and interfere with parental rights where children are being mistreated or are unable to receive a minimum necessary level of care from their own families.

From before the First World War until the 1960's there seemed to be little concern or awareness about child abuse, though the NSPCC continued its work with extreme cases of child cruelty. Most state intervention was related to general family dysfunction or pathology that might lead to inadequate child care; particular attention being given to family dysfunction as a cause of child delinquency. These family problems were often attributed to poverty and the 1960's saw the rise of political interest in assisting children of poor families escape the disadvantage of their backgrounds. Central government funded compensatory educational programmes for children in deprived areas

and initiated research into cycles of disadvantage where disadvantage in one generation was transmitted to the children who became the adults of the next generation.

A similar emphasis on prevention was also prevalent in social work. Social work staff of the children's departments of local authorities had the responsibility of assisting families in order to prevent family breakdown and to prevent the need for children to come into the care of the local authorities. The increasing role of the welfare state in supporting families was further evidenced by the reorganization and major growth of social work departments in 1971.

At the same time as these changes in the welfare state and in theories of the cause of family and child problems, the social problem of child abuse was rediscovered. This process started first in America where technical advances in radiology helped to identify many unexplained healed fractures in the X rays of children's bones. It did not take long for the doctors to suppose that parental mistreatment might be responsible for these fractures. The issue did not, however, receive much media attention until after a paediatrician, Henry Kempe, published a well publicized and emotively titled article 'The Battered-Child Syndrome' in the prestigious journal of the American Medical Association (Nelson, 1984). These

concepts of baby battering and child abuse spread to Britain and reached prominence in 1973 with the murder of a six year old child, Maria Colwell, by her stepfather whilst under the monitoring care of social workers. The death of Maria Colwell and the resultant government inquiry led to the creation of central government guidance on the management of child abuse cases. Each local authority social work department included the main elements of the central government guidance within local procedures for child abuse work. These procedures specified the organisational framework and the basic minimum standards of work in these cases. Government also required each area of Britain to create inter-disciplinary Area Review Committees (now called Area Child Protection Committees) composed of senior representatives from each of the relevant professions to ensure good inter professional communication on child abuse issues and the resolution of any local difficulties in the management of child abuse cases.

Since the 1970's there have been many changes to the legislation concerning children and to the central guidance on working with cases of child abuse. Many of these changes have arisen in response to difficulties in applying legislation or problems in practice identified by inquiries into child abuse tragedies (see Department of Health, 1982, 1991a; Hallett, 1989). Most of these inquiries (of which there have been nearly

forty) have arisen from cases where children known to social services have been killed by their parents or the parent's partners as in the case of Maria Colwell. The inquiries have attempted to ascertain why it was not possible to prevent the children's deaths. The unspoken assumption being that social work and other agencies should have been more interventive. Although these inquiries were based upon implicit criticisms of social work practice and were accompanied by extensive media criticisms of social work as a profession, they have resulted in government increasing the powers and responsibilities of social work child protective services. The inquiries have damaged the public reputation of social work yet contributed to a growth in the roles and responsibilities of social work as an agency.

In the early 1970's and early 1980's there were very few cases of sexual abuse identified despite some discussion of the problem in the literature. Since the mid 1980's the increasing awareness of sexual abuse has led to a massive increase in the identification of such cases. These cases have proved to be highly sensitive and difficult to investigate and manage. In a few instances the difficulties agencies have experienced in investigating sexual abuse referrals have led to government inquiries (for example, Cleveland, Secretary of State for Social Services, 1988; Orkney, Secretary of State for Scotland, 1992). These inquiries have arisen where a large number of children

have been removed from their families on emergency orders because of suspicions of sexual abuse. The inquiries have been concerned with whether the professional agencies have intervened too strongly or inappropriately in family life. This is in contrast to the inquiries into the management of cases of physical abuse where social work has been accused of intervening too weakly to protect children.

The widening of the concept of child abuse to include sexual and other forms of abuse and maltreatment and the increased experience of working with these cases has led to changes in detail and in the philosophy of child protection services, though the general organisational arrangements have not changed dramatically. The main changes include:

- the broadening of the concept of abuse from physical violence to also include neglect, failure to thrive, emotional abuse, and sexual abuse.
- the difficulties in responding to cases of suspected sexual abuse have led to new arrangements for cooperation between agencies (particularly between police and social work) in investigating suspicions of abuse, methods of interviewing children during investigations, the medical examination of children for signs of sexual abuse, and the admissibility of different forms of children's evidence in court.

—a change from a terminology of child abuse work to one of child protection in recognition that the main social work task is to protect children in the future. Child protection work is primarily concerned with investigating and planning work for future protection of children at risk rather than simply identifying children who have been victims of abuse.

—a growing awareness of the need to work in partnership with parents and parents' rights to be fully involved and informed in child protection work. For example, to be involved and informed about child abuse investigations and to have rights of appeal and access to children if their children are removed into care.

—a consolidation and revision of the many different pieces of legislation concerning children in the new Children Act, 1989 (see Parton, 1991), and the issuing of new government guidance to the relevant agencies (Department of Health, 1991b). The new legislation and government guidance also incorporates the changes in philosophy towards child protection, partnership with parents, the rights of parents, and the need to only intervene in family life if it is in the child's best interests to do so. Legal intervention should only occur if the child is at risk of 'significant harm'.

Current Child Protection Systems in Britain

The current systems of child protection in Britain operate at three different levels. Firstly there is the system of agency procedures. These specify the main organisational arrangements for investigating and responding to child protection cases. The government issues central guidance as to the basic form of these arrangements, but each geographical area has an inter-disciplinary Area Child Protection Committee that publishes more detailed local procedures (as the statutory agency responsible for child protection, social work is in practice often the main instigator of these procedures). The procedures are basically internal agency rules for managing cases and do not depend upon the involvement of the courts or of any legal processes, though the roles and responsibilities of the agencies are determined by acts of parliament (for example, Children Act, 1989).

The second level of child protection is the civil law which can be invoked to provide legal protection to children. Social work can apply to the courts for powers to remove a child from immediate dangers, to gain powers of supervision over the family, or to remove the child into foster or residential care. These actions require evidence to convince the courts that on the balance of probabilities the child's interests would be best served by invoking the powers requested by the social work department.

The third level of child protection is the criminal law. Individuals may be prosecuted for crimes such as a physical or sexual assault on a child. This process is undertaken by the police and the prosecution service and focuses on the behaviour of the alleged abuser rather than on the child's need for protection. The criminal courts require the highest level of proof, that it is beyond reasonable doubt that the defendant committed the alleged crimes. As this level of proof is so high and because criminal courts are concerned only with the past rather than future risk it is not surprising that civil courts are much more frequently involved in cases of child protection than criminal courts.

The discussion so far has referred mostly to developments in England. Scotland has a separate legal system and the Scottish Office issues its own guidance to agencies, though this usually follows English guidance. The main difference in the legal system is the use of Children's Hearings to decide upon the disposal of cases in the civil child care system. If a child is considered to be in need of care and protection either because he or she is committing crimes or because he or she is at risk of abuse then the case can be referred to the Children's Hearings for legal powers of supervision of the child in the family or the removal of the child to some other form of care. The basis of the referral (the facts of the case) have to be established in court, but this having been done, the

Children's Hearing decides upon what should then occur. The Hearing consists of a 'Reporter', a special professional who manages the process, and three non professional but partly trained volunteer 'Panel Members' who make the decision on disposal in terms of what would be best for the child. These hearings can only make renewable one year orders and can not order permanent changes for the child as in, for example, adoption. In the English system the court decides upon both the facts and upon case disposal. Until recently English cases could be referred through a complex route of different courts, but this complexity has been considerably reduced by the 1989 Children Act. The Scottish legal system has not needed such consolidation, but a more limited revision is to take place following inadequacies in the system identified by the inquiry into the investigation of a number of suspected cases of sexual abuse in Orkney (1992). The Scottish Office will then also issue new central guidance to agencies.

In parallel with these developments in government guidance and legislation, voluntary agencies like the NSPCC (and the Royal Scottish Society, RSSPCC, in Scotland) have also developed their work in this area. Previously NSPCC and RSSPCC staff were mostly comprised of local officers or inspectors who investigated cases of suspected child abuse often arising from referrals from the general public. The Social Service Departments

created in 1971 have the statutory responsibility to protect children at risk and (although the voluntary child protection agencies have some statutory powers) the NSPCC and RSSPCC have had to develop other ways of working. They now concentrate on specialized work such as working in depth with a small number of cases or providing expert advice to other professionals. With the increased awareness and publicity about child abuse other charities have also begun to offer child abuse services (for example, National Children's Homes, Barnado's and the Children's Society).

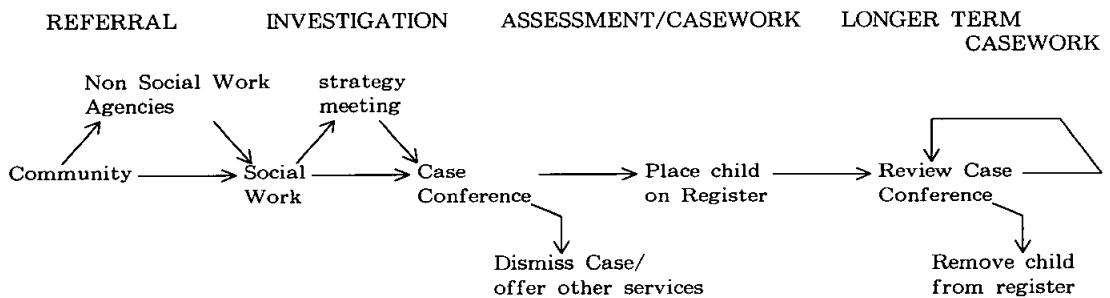
Management of Individual Cases

Many different agencies may be involved in child protection cases, but local authority social work departments have the most central role. They have the general responsibility

to support children and families and specific responsibilities concerning the investigation and management of cases of child abuse. Social work is essentially a reactive agency. Although some argue for local community social work where workers have close contact with those living in the neighbourhood, the reality is that social work is dependent upon referrals from others (see Figure 1). The referrals may come directly from the family or other members of the community or from other agencies. In some cases a range of different agencies may be involved before social work is informed that there is suspicion of child abuse or of the risk of child abuse. All agencies know that they have a responsibility to refer such cases to social work, though this does not always happen quickly and sometimes does not happen at all.

FIGURE 1
Child Protection Systems

1. Procedural Systems



2. Civil Child Care Law

for example : Child Assessment Order
Emergency Protection Order
Supervision Order
Care Order

3. Criminal Law

prosecution of an abuser for an offence against a child

Once social work is informed about a possible child protection case, then a decision has to be made whether to investigate it. Social work may decide that there is not sufficient information or sufficient concern about the child's welfare to necessitate an investigation or there may be information to suggest that the referral is malicious. If an investigation is considered necessary then it should be undertaken according to local procedural guidelines. This will often entail two social workers visiting the child and family and speaking to other interested parties such as the initiator of the referral and the professional staff already involved with the family. If the initial investigation indicates that there are grounds for concern, then the social workers usually request that the child be medically examined to ensure that the child is well and to ascertain whether there are any signs indicative of abuse. In a few cases medical evidence can clearly indicate maltreatment. For example, cigarette burns or internal damage to the child's genitalia. In most cases, there are other possible (even if unlikely) explanations for the child's physical condition. In these cases medical data can only show if there is damage consistent with abuse or maybe inconsistent with the parental explanations of what has occurred. The greatest controversy has surrounded the use of medical examinations to determine if a child has been sexually abused. In most cases of sexual abuse there will be no signs of physical trauma, but even if such signs exist they are difficult to diagnose because

of the lack of knowledge and expertise about what is normal in children's genitalia (Hegar, 1991).

With investigations of allegations of sexual abuse by the parents, the parents may not be contacted immediately because of the concern that they might destroy evidence or disappear with the child. If the child is considered to be in immediate danger then the workers may apply to a court for an Emergency Protection Order which allows the child to be temporarily removed from the parents. Also, if the parents frustrate the workers attempts to assess the child's health and condition, then the workers can apply to court for a Child Assessment Order (though older children can refuse to consent to being medically examined). In some cases the social work department will hold a Strategy Discussion with other agencies in order to pool information and to decide what action should be taken.

If the initial social work investigation suggests that there are bases for concern about the child then they will call a case conference to which the parents and all relevant professionals are invited. It is only recently that efforts have been made to fully involve parents in these meetings. Previously the non social work professionals were concerned about parents seeing them discussing the adequacy of their parenting with social workers. Doctors and health visitors, for example, often felt that this

might jeopardize their relationship with the parents, particularly if they had been involved in the referral of the case to social work. Government and social work have attempted to allay the fears of these other professions and to persuade them that it is important to be honest and direct with parents about the allegations and concerns and to involve them in the case conference process. The fears about parental involvement have been somewhat mitigated by the introduction of strategy meetings where professionals can confidentially discuss whether action is necessary without (or before) involving the parents.

If social work decides to convene a case conference then this is called an initial child protection case conference. The main decision is whether to place the child's name upon the local child protection register. This should only occur if there are concerns about the future protection of the child and an inter agency plan is formulated to try to ensure that the child is sufficiently protected. Placing the child's name on the register does not in itself protect the child. Its effect is in defining the case as fulfilling the criteria for a child protection case and thus invoking the child protection procedures. These will require at least the following:

- the appointment of a key case worker from social work.
- a comprehensive assessment of the child and family's situation.

—a written inter agency child protection plan.

—regular review child protection case conferences.

The assessment of the child and family's situation and the formulation of the inter agency plan may take some time to achieve and so may not be available until the first review case conference. As long as the child's name is on the child protection register the child will be subject to the child protection procedures and so will have a key worker, an inter agency plan and regular case conference reviews. A child's name can only be removed from the register by an inter agency case review deciding that the original concerns about the child's safety and protection no longer apply. Exceptions that do not require a review case conference are, (i) when the child moves to another area (and responsibility is transferred to social work and other agencies in that area), (ii) when the child reaches adulthood, or (iii) if the child dies.

When children are placed on the child protection register they are categorised according to the type of risks at issue. Currently the categories are physical injury, neglect, sexual abuse, and emotional abuse (see Table 1). Normally children are placed under only one category but it is possible for them to be placed under two or more. These categories provide a quick indication of the risks to a child, but they are also

used for statistical purposes. These register statistics were previously used by some commentators as indicators of the extent of different types of abuse in the community but most now recognize that the statistics do not reflect prevalence for two main reasons. Firstly, registration occurs because of concerns about future risk. It is not a listing of all children known to have been abused. A child will not be placed on the register if there is little risk of recurrence of

abuse (for example the person who perpetuated the abuse has left the family or the child is dead). Secondly, only a fraction of all cases of children at risk of abuse come to the attention of authorities and are considered for registration. Child protection register statistics are therefore better seen as an indication of child protection activity by agencies rather than the prevalence of child abuse in the community.

TABLE 1
Child Protection Statistics 1991

Abuse	England ¹	Scotland ²	United States ³
Physical	23	31	21
Neglect	15	22	53
Emotional	6	10	8
Sexual	13	23	13
Unspecified	47*	17**	7
Total Percentage	100	100	100
Rate Per 1000 children	4.2	3.4	16***

*Unspecified cases high as in 1991 registration category of Grave Concern, though now no longer used.

**Adjusted figures as in 1991 some local authorities using registration category of At Risk, though now no longer used.

***Estimate calculated from average substantiation rates and confirmed by data from NCCAN, 1992.

¹Cases on registers, Department of Health, 1992.

²Cases on registers, Gough, 1992.

³Substantiated referrals, data from 10 states, Daro and McCurdy, 1992.

In Britain identified cases of physical abuse are very much more likely to involve the poorest, the least educated adults, and those who suffered poor child care experiences when they were children (Gough et al, 1987). This finding is also true for sexual abuse, though not to the same extent. This is partly because poorer and less well educated sections of society are less able to avoid the attention of government agencies. Many identified cases are not clear cut extreme cases of abuse or risk of abuse. Typically there may be generalised bruising of unknown origin and it difficult to ascertain the extent that the child is at risk of maltreatment. For this reason, many workers would like to have some form of test or assessment that could clearly indicate the level of risk in a family, but attempts to create such instruments have not been successful (Dingwall, 1989).

The child protection procedures and child protection register system are internal management processes for ensuring high standards of child protection work. They do not involve the courts, but many of the cases may be subject to court involvement. The most common form of involvement is civil proceedings to ensure the safety of the child or to supervise parental care of the child. Child protection casework often involves the use of temporary or medium term powers of legal involvement. In some of these cases the child will be removed from the parental home to be cared for by others, but this

can only occur with the approval of the courts. The main types of order are:

- temporary emergency orders to ensure the immediate safety of a child
- temporary orders to enable a child's psychological and medical condition to be ascertained.
- medium term orders providing social work with legal powers of supervision over the care of the child in her original home.
- medium term orders providing social work with legal powers of supervision of the child's care in a different home. This may be the home of a relative, a foster home, or a residential children's home.
- permanent changes in the responsibility for care of a child, as in adoption.
- custody disputes between parents who have separated from each other.

In approximately a half of the cases placed on the register there is some involvement with the civil courts (beyond emergency orders) and in about a third of all cases legal powers of supervision or removal of the child occur. A quarter of the children are taken into formal care, mostly into foster care (see Table 2).

TABLE 2

**Legal Status of Children on English
Child Protection Registers, 1991**

'In Care' of the Local Authority	26%
Under Supervision Order	7%
No legal order	67%

Placement of Children 'In Care'

With parent, relative, friend	30%
Boarded out (foster care)	53%
In a community home (children's home)	14%

In addition to civil legal proceedings there is also the possibility of criminal proceedings against the alleged perpetrator of abuse. Because of this, social work and other agencies have to be careful about the manner in which they collect information whilst investigating a case. During an investigation caring agencies tend to focus on the nature of the child's needs for protection, but the nature and quality of the information they collect will affect whether it is admissible as evidence in court. The police and social work therefore require good working relationships to ensure that their methods of investigation do not compromise each others' roles and responsibilities. This is another reason for the recent introduction of strategy meetings before the initial case conference.

Finally, there are several methods by which victims of abuse can seek compensation. There are three main methods: suing the perpetrator, a judge ordering a defendant to pay damages when sentencing them for an

assault, or claiming from a government compensation fund:

—it is possible to sue another person for inflicting some damage or harm upon yourself or your property. Some adult women, for example, have successfully sued their fathers for sexually abusing them as children.

—if someone is found guilty of an offence of any kind where there is a victim then the Court can order the offender to pay damages to the victim. In practice the sums are very small.

—the government funds a Criminal Injuries Compensation Board that pays substantial sums to those who have been victims of a criminal offence. It is not necessary to find the guilty party, only to prove that it was a criminal offence and the extent that you suffered from this. Child abuse is a criminal offence and therefore claims can be made.

**Comparisons between Britain
and the United States**

There are many similarities between the development of child protection in the United States and Great Britain. In both countries child protection became an issue in the mid to late nineteenth century when charitable philanthropic organisations began to form in order to rescue children from situations that were considered dangerous to their morals or their safety. The first

American organisation for the protection of children was formed in response to the case of Mary Ellen, a girl who was found to have been regularly tied up and beaten by her stepmother. The initial referral for this case was made to the president of a society for the protection of cruelty against animals, who then helped form a similar society for children (Nelson, 1984)

Apart from the work of the charitable associations little attention was given to the issue of child abuse until the mid 1950's. Interest in child abuse then began to develop due in part to the high level activity of one the child protection societies, the American Humane Association, and by the discovery of baby battering by American radiologists and paediatricians. Interest grew further with attention from the media and the acceptance of the importance of the problem by the Children's Bureau of the national government. In 1974 the Child Abuse and Prevention Treatment Act became law authorizing \$ 85 million spending on national child abuse programmes over four years and establishing the National Center on Child Abuse and Neglect (Nelson,1984). An important factor in the growth of interest in child abuse was the increase in identified cases. This was assisted by the introduction of mandatory reporting laws in each state in the 1960's. These laws require professionals to inform child protective services of any child that they believe to be the victim of abuse. The laws also protect these professionals

from being sued in court (for example, by parents) for making allegations of abuse as long as these allegations were made in good faith. Such laws do not exist in Britain. Professionals have a responsibility to report cases to social services but are not legally obliged to do so.

The United States has civil laws allowing intervention in family life and criminal laws for the prosecution of those who mistreat children, but, as in Britain, most cases are dealt with without recourse to the law. In the United States referrals or reports of abuse are made to the local child protection services (CPS) who then investigate and decide whether the allegations can be substantiated. The process of substantiation has no legal foundation, it is merely a process of eliminating cases where there is little substance to the referral. In 1991 referrals on 2.7 million children (4.2% of all children) were made to protective services and these had an average substantiation rate of 39% (Daro and McCurdy, 1992). Because of the large numbers of cases being referred to child protection services some cases are beginning to be screened out even before investigation (i.e. merely on the basis of the referral information). For substantiated cases child protection workers provide a supportive and protective service (see Table 1 for breakdown of case types) which might involve application for legal powers of intervention. There are some data to suggest that the large numbers of substantiated

cases result in a minimal service being offered to all but a few of these cases (Daro and McCurdy, 1992). Little, however, is known about the nature of routine protective service work as most research and publications concern the many specialist child abuse treatment facilities. These specialist centres, however, only treat a very small minority of all the child abuse cases identified in the United States each year.

Just as the United States was the first country to rediscover physical abuse of children in the 1950's, it was also the first to give major attention to the problem of sexual abuse in the mid to late 1970's (Finkelhor, 1986). It was not until nearly ten years later in the mid 1980's that substantial numbers of cases of sexual abuse began to be identified in Great Britain. As pioneers in the detection and response to cases of sexual abuse American workers produced the first treatment programmes and clinical literature on this subject. They were also the first to discover the many difficulties in responding to this problem, particularly the use of litigation in the courts with many lawyers becoming specialists at either prosecuting or defending those prosecuted for alleged sexual abuse crimes (sometimes derogatorily termed 'hired guns'). The many scandals of children being sexual abused in their homes, at school, and in foster care in addition to several high profile and protracted court cases has made sexual abuse headline news. Britain has tried

to learn from American experiences (Murray and Gough, 1991), but in many cases has been unable to avoid the types of problems experienced by the American workers.

A major difference between Britain and the United States is the amount of public information on the problems of child abuse available in America. Public, charitable, and commercial organisations produce a plethora of leaflets, video films, television programmes, television advertisements and drama publicizing child abuse. These materials are given extra credibility by support of celebrities. The National Committee for the Prevention of Child Abuse, for example, presents television adverts on child abuse starring Mrs Barbara Bush. The famous television celebrity, Winnie Ophray, hosts television specials on sexual abuse, where she reveals that she was also sexually victimized as a child. Included in this high public profile for abuse is the extensive use of preventive educational programmes in schools to warn children about abuse and to provide them with basic information to protect them from becoming victims or to summon assistance if they can not avoid the abuse. Such educational programmes are available in Britain but to a much more limited extent (Gough, 1991).

Child Abuse in Japan

Although articles on child abuse in recent history in Japan date back to at least the late 1970's (see Ikeda, 1979), there is still

relatively little literature on child abuse (though see Ikeda, 1984, 1987, 1991; Osaka, 1990; Naoya, 1991; Morita, 1992; Takii, 1992). Media reports of child abuse exist, but these are often of extreme cases of abuse that can be dismissed as examples of bizarre or psychologically ill individuals rather than an extreme form of what might occur in many seemingly normal families. There is always a general tendency for the media to report the dramatic rather than the mundane, but the preoccupation of the media and of academic texts on the extreme cases may also reflect the historical pattern of development in Britain and the United States where the media and academics first drew the public's attention to the extreme cases before considering the more widespread forms of maltreatment of children within the population. One reason for this is that if few cases of abuse are being identified, it is likely that these will be the most dramatic cases.

Some authors suggest that child abuse is less prevalent in Japan for cultural reasons. This may well be the case but it is difficult to ascertain the extent of this difference. Statistics on identified cases are extremely low compared to Britain and the United States, but the Japanese statistics are mostly based upon one off surveys of hospitals and child guidance centres (Ikeda, 1991, though the series of surveys from the research group in Osaka are an exception) and may underestimate the true extent of

the problem. British and United States statistics are broader being based upon management information from formal child protection systems (Daro and McCurdy, 1992; Department of Health, 1992; Gough, 1992) or population studies of adults recall of childhood experiences (Finkelhor, 1991).

There are several reasons to suggest that child abuse may be more prevalent in Japan than is currently popularly believed. The first reason is that the experience of countries such as Britain and the United States has been that the number of identified cases remains low until there is public and professional awareness about the problem and special systems for responding to child protection referrals are created. Child abuse was considered extremely rare in Britain in the early 1970's before child protection systems had been developed, but now over three per thousand children are on child protection registers at any one time. Similarly, identified cases of sexual abuse were extremely rare in 1980, but now they comprise between 13% and 23% of all child protection cases (Table 1). Public and professional awareness of the issue makes victims or witnesses more confident about coming forward and revealing the abuse and makes professionals more prepared to accept what the children say and be generally more sensitive to identifying the abuse of children. The slow but growing public awareness about child abuse (for example articles in popular magazines such as Ikeda, 1992) and

the creation of the Child Abuse Prevention Center in Tokyo and the Association for the Prevention of Child Abuse in Osaka and their associated telephone hotlines may therefore lead to an increase in the identification of cases in Japan.

Another reason that child abuse in Japan may be more common than believed is that child homicide figures for Japan are, according to statistics published by the World Health Organization, higher than most other developed nations, particularly for the under five age group. Although such statistics are difficult to interpret because of the different ways in which they are produced in different countries, they still suggest that child homicide is not a rarity compared to other countries. Statistics for rape, however, are considerably lower in Japan compared to other countries (National Police Agency, 1990).

A third reason for believing that child abuse may not be a rare phenomena in Japan is that although some cultural aspects of Japanese society may discourage child maltreatment, there are other aspects that may encourage it or at least reduce the likelihood of its detection. Examples include the private nature of the family; the power of adults, particularly fathers over children; the power and authority of teachers in schools; and the widespread availability of child pornography that suggests a high level of consumer demand for such products.

Even if it is true that child maltreatment is very much less prevalent in Japan than Britain and the United States, then this may not always be the case in the future as Japan is beginning to experience social changes in gender and age roles. The reorganization of old accepted powers and responsibilities may result in more violence. Goode (1971) argues, for example, that violence is more likely to be used when no other resources are available. An extremely powerful male parent may have little need to use direct violence, but might resort to this if all his other powers are eroded and usurped. Greater rights and powers of women and children may thus have the unfortunate short term result of increased violence to women and children.

Only time will tell whether child maltreatment is (or will become) a common but maybe unseen problem in Japan. If child maltreatment does exist to a greater degree than currently acknowledged, then the health, welfare, and legal agencies are likely to be presented with a host of new and difficult demands on their services. Although some of these difficulties are intrinsic to child protection work, others are avoidable. The examination of the history and development of child protective services in other countries may help Japan avoid some of the worst experiences of Britain and the United States.

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