The Influence of Personal History of Abuse and Gender on Clinicians' Judgments of Child Abuse

Allison C. Howe, 1 Sharon Herzberger, 2 and Howard Tennen3

Two extra-legal factors were examined for their influence on professionals' decisions to report child abuse: having been abused as a child oneself, and the gender of the child, the parent, and the professional. One hundred and one men and women who worked regularly with children in mental health settings rated a series of scenarios presented as cases from a protective service agency. Participants made several judgments regarding the case including the severity of the parent's behavior, the likely effect on the child, whether the situation was abusive, and whether the case should be reported to a social service agency. Despite some interpretive limitations, the results generally support the hypothesis that extra-legal factors influence the perceptions of professionals who are mandated to report a suspected incident of abuse.

KEY WORDS: child abuse; extra-legal factors; personal history of abuse; gender effects.

INTRODUCTION

The decision to report a suspected incident of child abuse has an enormous impact both on child victims and their families. If an abusive situation is not brought to the attention of authorities, a child may well be abused repeatedly with significant emotional and physical consequences. But the decision to act on one's suspicions may lead to investigations which may themselves take a considerable emotional toll on the family. In view of the significance of such decisions, personal biases about what constitutes mis-

¹Department of Psychology, University of Connecticut, Storrs, Connecticut 06268.

²Department of Psychology, Trinity College, Hartford, Connecticut 06106.

³Department of Psychiatry, University of Connecticut Health Center, Farmington, Connecticut 06032.

treatment of children should be reduced. The study described sought to determine whether characteristics of the victim or of the professional mandated to report suspected child abuse influence judgments about an allegedly abusive situation.

A number of factors have been associated with whether professionals suspect abuse. Labeling an event as child abuse is a multifaceted process with a variety of factors contributing to the outcome. The factors that affect whether a professional will label a violent act as abusive include the professional's definition of what constitutes abuse (Gelles, 1977; Giovannoni and Becerra, 1979) and the type of evidence available (Attias and Goodwin, 1984; Saulsbury and Campbell, 1985). Other factors, which are termed extra-legal, pertain to the characteristics of the abused child and his/her family and to characteristics of the potential reporter (cf. Herzberger, 1987). For example, the socioeconomic status and race of the abusive parent affect physician's judgments about alleged incidents of abuse (Hampton and Newberger, 1985; Nalepka et al., 1981). The age of the child may also affect judgments of professionals (Finkelhor, 1984; Groeneveld and Giovannoni, 1982; Hampton and Newberger, 1985). Professional orientation also affects judgments (Giovannoni and Becerra, 1979), with social workers and police officers more likely than physicians and attorneys to view a case as serious.

The present study extends the existing literature by investigating extralegal factors that affect the judgments of clinical psychologists, psychiatrists, and social workers who actually decide upon interventions needed in cases of child abuse. Two factors were chosen for investigation: *first*, the influence of the gender of the child, parent, and clinician in judgments about abusive acts; and *second*, the influence of the clinician's personal history of abuse.

From previous investigations we know that parental acts are judged by females to be more severe than by males (Finkelhor and Redfield, 1984; Garrett and Rossi, 1978; Herzberger and Tennen, 1985a; Shrum and Halgin, 1984; Snyder and Newberger, 1986). [See Giovannoni and Becerra (1979) for an exception.]

Furthermore, physical and sexual abuse by mothers is regarded by professionals as less severe than similar abuse by fathers (Finkelhor, 1984; Hampton and Newberger, 1985; see Garrett and Rossi, 1978, for an exception). Laypeople also regard physical and emotional maltreatment as less serious when mothers are involved (Herzberger and Tennen, 1985a). We predicted that similar judgments will be made by the clinicians in the present study.

The role of the child's gender in judgments of abuse is less clear. Finkel-hor (1984) found that sexual abuse was judged more serious by professionals when it involved female victims than male victims, and Herzberger and Tennen (1985a) found similar results in cases of physical and emotional abuse

judged by laypeople. However, Garrett and Rossi (1978) and Martin (1983) failed to find such differences.

Much less is known about the role of one's personal history of abuse on his/her judgments of abuse cases, or about the personal history of abuse among those who now work with abused children. One purely descriptive purpose of this investigation is to assess the incidence of child abuse among our cohort of professionals. A second purpose is to examine the effect of personal history of abuse on the judgment process. Herzberger and Tennen (1985b) report that laypeople who had been abused as children viewed the abuse of others as less serious than those who had not been abused. Individuals with similar experiences believed the discipline was less severe, more appropriate, less likely to have untoward effects on the child's emotional development, and more likely to decrease the incidence of future misbehavior.4 Furthermore, highly educated people, like the clinicians in our sample, view abusive acts as less serious than do less educated individuals (Giovannoni and Becerra, 1979). We ask whether professionals who have themselves been abused demonstrate the same tendency to minimize the severity and potential impact of abusive episodes. An alternative hypothesis is that unlike the layperson, individuals who choose a career that involves working with abused children do not show the bias toward minimizing the impact of disciplinary actions. In fact, having experienced similar punishments, they may view them as *more* severe than others and may seek a career which will enable them to help victims of abuse. These hypotheses were tested in the present study.

METHOD

Questionnaire Development

A list of disciplinary techniques was prepared from similar lists by Herzberger and Tennen (1985a,b) and by Giovannoni and Becerra (1979). The list was presented to psychologists and social workers (17 male, 16 female) attending a convention. Seventy-nine percent of these professionals had earned a doctoral degree, and another 21% had a master's degree.

These professionals were approached by the first author and an undergraduate research assistant during the registration phase of the convention.

⁴The finding that abused individuals perceive abuse of others less seriously is complemented by evidence that abused toddlers react with anger, threats and fear to an agemate's distress, whereas nonabused toddlers are more likely to react with concern or interest (Main and George, 1985).

Technique		Mean	SD
Physical	Parent hit child with a leather strap on		
	bare skin.	6.06	1.14
	Parent strikes child with wooden stick.	6.39	0.75
	Parent strikes child in the face with fist.	6.67	0.69
	Parent bangs child against wall several times.	6.73	0.52
Emotional	Parent calls child's best friend and tells friend (in front of child) of an embarrassing		
	fault (e.g., child wets bed at night).	5.88	1.11
	Parent screams for 10 minutes, calling child a "miserable bastard" and a "worth-		
	less piece of crap."	5.94	1.03
	Parent threatens to call adoption agency.	6.12	1.02
	Parent refuses to speak to child for 5 days.	6.33	1.05

Table I. Ratings of the Severity of Parental Discipline Techniques

They were asked to rate a list of disciplinary techniques on a scale from 1 (not at all severe) to 7 (extremely severe) and to return the list to the experimenters either immediately following the registration period or at the end of the convention.

The following criteria were employed for including the disciplinary technique in the questionnaire for this study: (1) The parental act was regarded as severe (i.e., with mean ratings above 5 on a 7-point scale). The four most severe emotional discipline techniques were chosen, with means ranging from 5.88 to 6.33. Four physical discipline techniques (with means ranging from 6.06 to 6.73) were selected so that there was no significant difference in severity between physical and emotional techniques. (2) Severity ratings were not significantly different for male and female professionals. (3) Each parental act included within the emotional and within the physical abuse categories received severity ratings similar to the other three acts included in the same category. The latter criterion minimized the variance associated with any specific parental act. The discipline techniques and their ratings appear in Table I.

The professionals also rated a list of child misbehaviors on a scale from 1 (not at all deserving of punishment) to 7 (extremely deserving of punishment). The child misbehaviors included in the final questionnaire met two criteria: (1) They were rated as moderately deserving of punishment, thus not evoking extreme parental reactions (mean ratings ranging from 2.97 to 3.85). (2) Deservedness ratings were not significantly different for male and female raters. Table II lists the child misbehaviors included in the final questionnaire.

The child misbehaviors were randomly paired with parental actions and developed into eight short vignettes, which included names for the characters and a few contextual details. Four of the vignettes involved physical abuse

Table II. Ratings of Child's Misbehavior for Deservedness of Punishment

Deservedness	Mean	SD
Hit a baseball through a neighbor's window after		
being told not to play except in park.	3.85	1.72
Failure to return home from school on time for		
third time this week.	3.64	1.43
Acts rude to house guest (continually interrupts,		
tells him/her to go away).	3.52	1.25
Constantly teasing the family cat; 1 day		
yanked cat's tail.	3.47	1.59
Refused to clean up room after being asked		
several times.	3.18	1.21
Spilled grape juice on the carpet, after being		
told never to take food into the living room.	3.12	1.34
Told teacher she was dumb.	3.09	1.55
Snuck into neighbor's yard and stole some berries.	2.97	1.49

while four described incidents of emotional abuse. Deservedness ratings for children's behaviors described in vignettes involving emotional abuse were not significantly different than those described in vignettes involving physical abuse. The examples below represent emotional and physical abuse, respectively:

Ann is the daughter of Mr. and Mrs. Stevenson. One day she failed to return home from school on time for the third day in one week. Mrs. Stevenson screamed at Ann for 10 minutes calling her a 'miserable bastard' and a 'worthless piece of crap.'

David is the son of Mr. and Mrs. Smith. One day he spilled juice on the carpet, after having been told never to take food into the living room. When Mr. Smith discovered what David had done, he struck David with a wooden stick.

The gender of the parent and child varied within a given participant's questionnaire such that each subject received one vignette with every parent-child combination (i.e., father-son, father-daughter, mother-son, mother-daughter) for both the physical and emotional abuse categories. The four possible parent-child combinations associated with a specific vignette were counterbalanced across questionnaires. The particular vignettes comprising each of the four combinations were collated in one of four random orders.

Subjects

Men and women from a variety of social service agencies were approached at work and asked to participate in the study. Seventy-one percent of the 149 distributed questionnaires were returned. Five of the 106 returned questionnaires were excluded from the analyses because the respondents did not have experience with abuse cases and were not currently treating children and/or families. All of the subjects in the final sample (40 males, 61 females) were working with children ($\overline{X} = 24\%$ of their current caseload)

and/or families ($\overline{X}=38\%$ of their current caseload). Eighty-eight percent of the sample had experience with abuse cases ($\overline{X}=6.13$ years of experience with abuse cases). Seventy percent of the sample worked in either a child and family clinic or a community mental health center. Seventeen percent worked primarily in a university outpatient clinic or an inpatient university hospital. Another 8% worked with protective service or foster care agencies. Five percent worked in private practice. Most of the respondents earned an M.A. or M.S.W. degree (65%); 22% held a Ph.D., Psy.D., or M.D. The respondents ranged in age from 26 to 64 ($\overline{X}=36.71$ years).

Procedure

Participants either were approached by the director of his or her agency or were approached directly by the experimenter and asked to complete a questionnaire consisting of eight vignettes and a series of questions about each vignette. They were asked to complete the questionnaires anonymously and return them to the director of the agency or to return them by mail directly to the experimenter. The vignettes were presented as actual cases investigated by an intake worker from a protective service agency. Subjects were told that the names of the parent and his or her 4- to 8-year-old child were fictitious and that identifying information had been deleted to protect the anonymity of the individuals involved. Participants were asked to approach the descriptions as they would approach their own cases and to judge: (1) the severity of the parent's behavior (1 not at all severe; 7 extremely severe); (2) the extent to which the child deserved punishment (1 not at all deserving of punishment; 7 extremely deserving of punishment); (3) the appropriateness of the discipline (1 not at all appropriate; 7 perfectly appropriate); (4) the likelihood that the parental act will produce a positive or negative effect on the child's emotional development (-4 very likely to produce a negative effect: +4 very likely to produce a positive effect); (5) the degree to which the parent's action was seen as the child's and the parent's responsibility (these ratings were expressed in percentage form and were required to sum to 100%); (6) whether the parental act should be termed "emotional abuse," "physical abuse," "negelct," or "within the normal range of disciplinary interaction." (7) whether reporting the case to a social service agency was an appropriate action; (8) whether the case should be opened or closed; (9) if the case were closed, the likelihood that similar incidents would occur in the future (1 very unlikely to recur; 7 very likely to recur); (10) recommended actions should the case be opened; and (11) likelihood that the interventions chosen would prevent similar incidents from occurring in the future (1 not at all likely to prevent; 7 very likely to prevent). After providing demographic information, participants indicated if they were emotion-

ally, physically, or sexually abused, or neglected as a child. Finally, all participants were debriefed regarding the purpose of the study.

RESULTS

Unweighted means analyses of variance were performed on each of the dependent measures with participant's gender and abuse history and between-subjects independent variables and gender of child, gender of parent, and type of abuse as within-subjects independent variables.

Validity Checks

After reading each story and making the requested ratings, participants were asked whether the parental behavior should be regarded as emotional abuse, physical abuse, neglect, or within the normal range of disciplinary interaction. This question served as a check that the cases presented did in fact concern physical or emotional abuse, as confirmed by a sample of experienced clinicians. The case were perceived as intended. Parental behaviors that we selected to represent emotional abuse were so labeled by 92% of the sample; 91% of the sample confirmed our label of physical abuse. One-fourth of the sample also applied the label of emotional abuse to stories with a physically abusive theme. Less than 9% of the sample labeled any story as either neglect or within the normal range of discipline.

We selected children's provocations that were moderately deserving of parental punishment, albeit *not* abusive punishment. Respondents perceived the child's behavior in the intended way. Children were registered as moderately deserving of punishment ($\overline{X} = 3.58$, where 4 is labeled "moderately deserving" on a 7-point scale; range across stories: 3.38-3.68).

Consistent with common practices of social service agencies, participants were more likely to concur with reporting cases of physical abuse to Child Protective Services (79% of these cases versus 33% of emotional abuse cases) (F(1, 185) = 122.29, p < 0.0001). Similarly, participants were more likely to recommend that a case be opened and assigned to a treatment worker when the case involved physical abuse (74% of the cases) than when it involved emotional abuse (47% of the cases) (F(1, 76) = 51.64, p < 0.0001).

Abuse History of Respondents

Table III displays the abuse history of respondents. As depicted in the table, one-third of the sample experienced what they believed was abuse as

	Percentage Involved			
Type of abuse	Overall	Males	Females	
Emotional	25.0	16.7	30.4	
Physical	9.9	11.1	9.1	
Sexual	7.9	5.6	9.4	
Neglect	9.9	8.1	. 11.1	
More than one	10.2	5.7	13.2	
Abuse of any type	33.3	28.2	36.8	

Table III. Abuse History of Respondents

a child. The most common form of abuse was emotional. Ten percent of the sample experienced more than one type of abuse. Female respondents were somewhat more likely to report being victims of abuse, but not significantly so (Z = 1.56, p > 0.05).

Contrary to earlier work with laypeople, the present results reveal that clinicians with a history of abuse view abuse of others as more serious than those without such a history. The specific results will be discussed below.

Severity of Parental Behavior

Acts of physical abuse were rated as more severe ($\overline{X}=6.10$) than acts of emotional abuse ($\overline{X}=5.38$) (F(1, 90)=47.06, p<0.0001). Female respondents regarded the discipline as more severe ($\overline{X}=5.90$) than males ($\overline{X}=5.59$) (F(1, 90)=4.46, p<0.05). Acts were rated as more severe also when a son was involved ($\overline{X}=5.81$ vs $\overline{X}=5.66$ for daughters (F(1, 90)=6.76, p=0.01)) and when a father was the perpetrator ($\overline{X}=5.83$ vs 5.65 for mothers) (F(1, 90)=9.03, p=0.004). An interaction between parent's gender and the type of abuse, however, revealed that physical abuse by a father was regarded as more severe ($\overline{X}=6.24$) than identical treatment by a mother ($\overline{X}=5.95$), while emotional abuse by either parent was regarded as equally severe ($\overline{X}=5.38$) (F(1, 90)=4.06, p=0.05).

Respondents with a history of abuse viewed the parent's behavior as more serious than those without such a history, particularly when the father is the perpetrator (F(1, 90) = 3.75, p < 0.06) (see Table IV).

Table IV. Mean Severity Ratings by Perpetrator and Personal History of Abuse

	Personal History		
Perpetrator	Yes	No	
Father	6.00	5.66	
Mother	5.70	5.60	

Attributions of Responsibility

Two measures assessed participants' attributions of responsibility: a direct measure of the degree to which the parent should be held responsible for the action and a rating of the appropriateness of the parent's action as a response to the child's behavior.

Contrary to our findings with laypeople (Herzberger and Tennen, 1985b), no significant effects were associated with the responsibility rating. Professonal respondents almost uniformly regarded the parent as responsible for his or her actions ($\overline{X} = 83.23\%$ responsibility attributed to the parent, with the range across cases: 81.89%-85.62%). These results held for respondents who had personally experienced abuse (range across cases: 82.27%-89.09%) and those who had no experience with abuse (range: 74.86%-87.67%).

Respondents did, however, show variation in their responses to the query about appropriateness. Female respondents regarded the parental behavior as less appropriate ($\overline{X} = 1.31$) than did males ($\overline{X} = 1.47$) (F(1, 90)) =4.89, p<0.03). Parental abuse of a son was regarded as less appropriate $(\overline{X} = 1.36)$ than abuse of a daughter $(\overline{X} = 1.45)$ (F(1, 90) = 4.16, p < 0.05).

Those who had experienced abuse regarded the parent's behavior as less appropriate ($\overline{X} = 1.30$) than did those who had not experienced abuse $(\bar{X} = 1.49) (F(1, 91) = 7.09, p < 0.01)$. Finally, as depicted in Table V, those who experienced abuse believed that physical abuse by fathers and emotional abuse by mothers were less appropriate than other combinations (F(1,91) = 4.50, p < 0.04).

Effect upon the Child

One question tapped attitudes towards the potentially debilitating effect of abusive treatment. We asked respondents how much the parental be-

Perpetrator and Personal History of Abuse Personal History		
Type and Perpetrator	of Abuse	
of Abuse	Yes	No
Emotional		

Father Mother

Physical Father

Mother

1.38

1.21

1.22

1.37

1.47

1.50

1.52

1.46

Table V. Mean Ratings of Appropriateness of

Type and Perpetrator	History of Abuse		Gender of Respondent	
of Abuse	Yes	No	Male	Female
Emotional				
Father	-3.37	-3.01	-2.88	-3.50
Mother	-3.36	-2.89	-2.94	-3.32
Physical				
Father	-3.46	-2.89	-3.18	-2.87
Mother	-3.17	-2.97	-3.17	-3.27

Table VI. Mean Ratings of Harm to Emotional Development by Type of Abuse, Perpetrator and by Personal History and Gender of Respondent

havior would affect the child's emotional development. Across stories and conditions mean responses were negative, indicating that respondents believed that abuse would adversely affect the child. Those who had experienced abuse were more likely ($\overline{X} = -3.34$) than those who had not experienced abuse ($\overline{X} = -2.94$) to feel that abuse adversely affects the child's emotional development (F(1,91) = 8.28, p = 0.005). A higher-order interaction among type of abuse, gender of the perpetrator, and history reveals that those who experienced abuse felt that the least harm would result from physical abuse by a mother (F(1, 91) = 3.85, p = 0.05) (see Table VI). Those who had not experienced abuse saw little difference in the emotional effect of physical or emotional abuse by mothers or fathers.

Female respondents predicted more of a deleterious effect ($\overline{X} = -3.31$) than males ($\overline{X} = -2.97$) (F(1, 91) = 6.32, p < 0.02). When examined by the type of abuse and the gender of the perpetrator, males and females differed again, (F(1, 91) = 6.55, p < 0.02). As Table VI shows, males believed that physical abuse, whether committed by the father or the mother, was more harmful than emotional abuse. Females felt that emotional abuse would produce more harmful consequences than physical abuse, particularly when committed by fathers.

Effect of the Intervention

Respondents were asked to note what actions they would recommend in response to the parental behavior and then were asked to judge the likelihood that a similar incident would recur if no actions were taken and if the recommended action(s) were taken.

Respondents believed that physical abuse was more likely to recur (\overline{X} = 6.21) than emotional abuse (\overline{X} = 5.92) (F(1, 76) = 12.66, p < 0.0006),

although the mean ratings show that both types of abuse are deemed highly likely to recur without intervention. Abuse by a father is deemed more likely to recur ($\overline{X} = 6.12$) than abuse by a mother ($\overline{X} = 6.02$) (F(1, 76) = 4.59, p < 0.04). An interaction between history of abuse and perpetrator status revealed that only people with a history of abuse saw fathers as more likely to repeat the abuse ($\overline{X} = 6.34$ versus $\overline{X} = 5.97$ for the maternal abuse); those who had not experienced abuse saw no differences between fathers and mothers (\overline{X} 's = 5.96, 5.97, respectively) (F(1, 76) = 4.97, p < 0.03). Female respondents tended to believe that the abuse would recur ($\overline{X} = 6.20$) more so than male respondents (\overline{X} 5.92) (F(1, 76) = 3.24, p = 0.08).

The respondent's rating of the likelihood that the parent would repeat the action if no action on the case were taken was subtracted from his/her rating of the likelihood that intervention would prevent recurrence of abuse. This difference score may be conceptualized as an index of primary control: The respondent's belief that the intervention will affect the outcome of the case. A similar index has been employed successfully in laboratory studies of perceived control (Tennen *et al.*, 1982). The difference score was subjected to an analysis of variance and the following significant results emerged. Respondents believe that there is more control over the recurrence of physical abuse ($\overline{X} = +2.82$) than emotional abuse ($\overline{X} = +2.57$) (F(1, 70) = 4.59, p < 0.05).

DISCUSSION

The findings of this study support our hypothesis that extra-legal factors influence the perceptions of professionals who are mandated to report a suspected incident of abuse. The gender of the professional, of the parent, and of the child all influenced judgments of severity. One's personal history of abuse also influenced these judgments. Consistent with previous research (Finkelhor and Redfield, 1984; Garrett and Rossi, 1978; Herzberger and Tennen, 1985a; Shrum and Halgin, 1984; Snyder and Newberger, 1986), female respondents believed that the disciplinary actions depicted were more severe and would have a more deleterious effect than did their male counterparts. Furthermore, mothers' actions were considered less severe and perhaps more temporary than the same behavior by fathers (Finkelhor, 1984; Hampton and Newberger, 1985; Herzberger and Tennen, 1985a).

Contrary to our earlier work (Herzberger and Tennen, 1985a), however, parental discipline was judged less severe and more appropriate when a daughter was involved. Moreover, compared to participants with no personal history of abuse, those with a personal history of abuse judged the parental actions depicted as *more* severe and they believed that the disciplinary ac-

tion would have a more adverse effect on the child's development. Again, this pattern of findings is in a direction opposite to the pattern we reported earlier among laypeople (Herzberger and Tennen, 1985b).

Several caveats require discussion before we consider the potential implications of these findings, First, the results noted above are sometimes modified by interactions and some of the higher order interactions are difficult to explain and were not predicted. Second, the differences described, while statistically significant, account for only a small proportion of the variation in participants' judgments. We are, however, impressed that there is any significant variation based on the gender of the mandated professional or his/her personal history of abuse. Any variation systematically related to extra-legal factors should be reason for concern and further exploration. Since both laypeople and professionals appear to show some similar patterns of judgment, we must consider that common biases in human information processing (Fiske and Taylor, 1983; Kahneman et al., 1982) may account for these findings. Educational programs might minimize bias in professional decision-making. Retaining mandated reporting laws (cf. Butz, 1985; Smith and Meyer, 1984; Sonkin, 1986) and encouraging consensus in decision-making about alleged abuse provide additional checks on the judgments of one person. However, to the extent that professionals hold similar biases, and several studies now suggest that they do, relying upon group decisions alone may not eliminate the problem.

Of course, that our sample of professionals judged cases according to the gender of the perpetrator and victim may not reflect bias at all, so we may be wrong to label it as such. Perhaps there is some clinical wisdom reflected here, and the gender of parent and child do make a difference with regard to the sequalae of abuse. This matter is best resolved empirically, Few current studies address the issue and those that do produce ambivalent results. DeJong et al. (1982) reviewed hospital charts of sexual abuse victims and found that boys were subjected to more physical trauma than girls, but Adams-Tucker's (1982) study of sexually abused children found that girls experienced more emotional distress. Studies of physical abuse suggest that boys and girls react to abuse differentially. Galdston (1975), for example, found that abused males tended to be aggressive, whereas females adapt selfcentered activities (e.g., thumbsucking, rocking). We might hypothesize that alloplastic reactions garner more attention, even from clinicians, than do autoplastic reactions and thus stimulate more concern for male victims who are more likely to exhibit acting-out responses.

Judgments that abuse by fathers would be more severe than by mothers likewise may reflect clinicians' experience (cf. Adams-Tucker, 1982). Some investigators, however, suggest that abuse by a mother may be particularly deleterious, given the likelihood of a stronger initial bond between mother and child (Kinard, 1979). One finding from our study may reflect this un-

derstanding: Clinicians who experienced abuse believed that physical abuse by fathers and emotional abuse by mothers were especially inappropriate. Perhaps fathers' size and strength lead to more severe physical consequences, whereas the child's attachment to the mother leads to more dire emotional consequences. The dynamics of differential predictions of consequences due to maternal versus paternal victimization should be explored further.

Another caveat concerns the effect of a personal history of abuse. Our criterion for a history of abuse is based solely on self-report. It is quite possible that there were differences among our professional and lay samples in their definition of what constitutes abuse (Gelles, 1977; Giovannoni and Becerra, 1979). Individuals may have experienced identical disciplinary techniques as a child but may have interpreted these techniques differently. In fact, there is now good evidence that an adaptive mechanism for coping with extreme stress such as abuse is to redefine the stressor in a positive light (e.g., Affleck et al., 1987).

Furthermore, when something happens regularly enough to a child she/he is more likely to view that "something" as normative. Moreover, the pervasive sense of talon justice and "just world" notions among children (Piaget, 1932) and their desire to see their parents as caregivers could lead children who were abused to experience a sense of deservedness, thus decreasing their experience of parental cruelty, arbitrariness and severity. Any of these processes could have led the abused laypeople in our earlier study to tolerate abuse and not to label it accordingly.⁴

Why, then, did the professionals in the current study react oppositely to the vignettes depicting abusive parent-child interactions? Those who reported having been abused viewed the depicted parental acts as more severe and more likely to be harmful than those with no reported history of abuse. We can speculate about several processes that may have influenced the judgments of abused professionals. It is possible that either as children or during their professional training the abused professionals recognized that their abusive treatment was inappropriate. The recognition may have stemmed from the reactions of their uninvolved parent or a third party who intervened. Perhaps the abused respondents were treated by clinicians who emphasized the nonnormative nature of their experience and the genuine severity of their parents' behavior. Thus, among our sample of professionals, those who were abused and perhaps helped by another, may now make a career of helping other abused children. This explanation must remain at the level of speculation, since we did not investigate the process by which respondents attained their views. Identifying with a nurturant role model is however, common enough to warrant further investigation of this notion.

Finally, what are the implications of our findings for potential interactions between parent suspected of abuse and the mandated reporter? The abusive parent, who may very well have been abused him/herself, is likely,

based on our earlier findings, to minimize the consequences of his/her acts, particularly if that parent is a father who has hurt his son. But based on the findings of this study, a mandated reporter who has been abused as a child may well hold the opposite view. The difference in perspective may have significant consequences for the child and his/her family. We suspect, then, that the therapists' history, which has received scant attention in the abuse literature, deserves a careful conceptual and empirical analysis.

ACKNOWLEDGMENTS

The authors wish to thank Amerigo Farina for his helpful comments on an earlier version of this paper, David Wheeler for assistance with data analysis, Susan Freter for help with data collection.

REFERENCES

- Adams-Tucker, C. (1982). Proximate effects of sexual abuse in childhood: A report on 28 children. Am. J. Psychiat. 139: 1252-1256.
- Affleck, G., Tennen, H., Croog, S., and Levine, S. (1987). Causal attribution, perceived benefits, and morbidity after a heart attack: An 8-year study. J. Consult. Clin. Psychol. 55: 29-35.
- Attias, R., and Goodwin, J. (1984). Knowledge and management strategies in incest cases: A survey of physicians, psychologists and family counselors. Paper presented at the Fifth International Congress on Child Abuse and Neglect, Montreal, Canada.
- Butz, R. A. (1985). Reporting child abuse and confidentiality in counseling. *Social Casework J. Contemp. Social Work*, 83-90.
- De Jong, E. R., Emmett, G. A., and Hervada, A. R. (1982). Sexual abuse of children. Am. J. Disabled Child. 136: 129-134.
- Finkelhor, D. (1984). Child Sexual Abuse, Free Press, New York.
- Finkelhor, D., and Redfield, D. (1984). How the public defines abuse. In Finkelhor, D. (ed.), Child Sexual Abuse, Free Press, New York.
- Fiske, S. T., and Taylor, S. E. (1983). Social Cognition, Addison-Wesley, Reading, Mass.
- Galdston, R. (1975). Preventing the abuse of little children. Am. J. Orthopsychiat. 45: 372-381.
- Garrett, K. A., and Rossi, P. H. (1978). Judging the seriousness of child abuse. *Med. Anthropol.* 2: 1-48.
- Gelles, R. F. (1977). Problems in defining and labeling child abuse. Paper presented to the Study Group on Problems in the Prediction of Child Abuse and Neglect, Wilmington, Del.
- Giovannoni, J. M., and Becerra, R. M. (1979). Defining Child Abuse, Free Press, New York.
 Groeneveld, L. P., and Giovannoni, J. M. (1982). Disposition of child abuse and neglect cases.
 Social Work Res. Abstr. 18: 9-15.
- Hampton, R. L., and Newberger, E. (1985). Child abuse incidence and reporting by hospitals: Significance of severity, class, and race. Am. J. Public Health 75: 56-60.
- Herzberger, S. D. (1987). Labeling of abuse cases: Professional judgments and biases. In Wells,
 S. J., and Maney, A. (eds.). Proceedings of Symposium on Professional Ethics and Child
 Abuse, National Technical Information Service, Washington, D.C.
- Herzberger, S. D., and Tennen, H. (1985a). Snips and snails and puppy dog tails: Gender of agent, recipient, and observer as determinants of perceptions of discipline. Sex Roles, 12: 853-865.
- Herzberger, S. D., and Tennen, H. (1985b). The effect of self-relevance on judgments of moderate and severe disciplinary encounters. *J. Marr. Fam.* 311-318.

Kahneman, D., Slovic, P., and Tversky, A. (1982). Judgment under Uncertainty: Heuristics and Biases. Cambridge University Press, Cambridge.

- Kinard, E. M. (1979). The psychological consequences of abuse for the child. J. Social Issues 35; 82-100.
- Main, M., and George, C. (1985). Responses of abused and disadvantaged toddlers to distress in agemates: A study in the day care setting. *Dev. Psychol.* 20: 407-412.
- Martin, J. (1983). Gender-related Behaviors of Children in Abusive Situations, R and E, Saratogay, Calif.
- Nalepka, C., O'Toole, R., and Turbett, J. P. (1981). Nurses' and physicians' recognition and reporting of child abuse. *Issues Comp. Ped. Nurs.* 5: 33-44.
- Piaget, J. (1932). The Moral Judgment of the Child, Harcourt Brace Jovanovich, New York.
 Saulsbury, F. T., and Campbell, E. (1985). Evaluation of child abuse reporting by physicians.
 Am. J. Dis. Child. 139: 393-395.
- Shrum, R. A., and Halgin, R. P. (1984). Gender differences in definitions of the sexual victimization of children, Paper presented at the Second International Conference of Family Violence Researchers, University of New Hampshire, Durham, N.H.
- Smith, S. R., and Meyer, R. G. (1984). Child abuse reporting laws and psychotherapy: A time for reconsideration. *Int. J. Law Psychiat.* 7: 351-366.
- Snyder, J. C., and Newberger, E. H. (1986). Consensus and difference among hospital professionals in evaluating child maltreatment. *Viol. Vict.* 1: 125-139.
- Sonkin, D. F. (1986). Clairvoyance vs. common sense: Therapist's duty to warn and protect. Viol. Vict. 1: 7-22.
- Tennen, H., Drum, P. E., Gillen, R., and Stanton, A. (1982). Learned helplessness and the detection of contingency: A direct test. J. Personal. 50: 426-442.