Abstract and Operational Definitions of Psychological/Emotional Abuse and Neglect (PEA) of Children

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I, Masumi Hayashi confirm that the work presented in this thesis is my own. Where information has been derived from other sources, I confirm that this has been indicated in the thesis.
Abstract

The purpose of this thesis is to further evolve and clarify the definition of Psychological/Emotional Abuse and Neglect (PEA) of children and consider the implications the definition has for policy, practice, and research. The definition of PEA is examined from multiple perspectives based on a definitional conceptual framework which consists of (i) abuser, (ii) abusive behaviour, (iii) intention, (iv) frequency, (v) interaction, (vi) consequences, (vii) child age, and (viii) child’s other characteristics.

First, an examination of abstract definitions (i.e. theoretical meaning) of PEA amongst academic and broader literature was conducted. The analysis using the conceptual framework provided a broad picture of PEA definitions and highlighted its nature and diversity.

Second, operational definitions (i.e. determining the response threshold) of PEA in guidelines were investigated to identify how general professionals are guided to exercise the definitions. The results identified various thresholds of PEA for different levels of response within as well as across jurisdictions. The study highlighted that operationalisation of PEA is often left open to professionals' own judgement.

Third, a systematic review was undertaken of existing primary studies on professionals’ PEA definitions. The review demonstrated the high threshold of professionals’ abstract definitions (i.e. recognising) as well as operational definitions (i.e. responding) of PEA compared to other types of CAN.

Finally, an original vignette survey study, underpinned by the conceptual framework and the findings of previous chapters, was undertaken to examine the current situation of professionals’ PEA definitions. The study identified a high threshold for both abstract and operational definitions by the respondents. Importantly, the suspicion of PEA did not always result in professionals’ response. Frequency, consequences and abusive behaviour were strong predictors of professionals’ definitions of PEA.

Overall, the thesis provides a conceptual analysis and data on definition of PEA, draws implications and considers strategies for further research in the area.
Impact Statement

A central contribution of the thesis was the development of a new tool, the definitional conceptual framework, to better conceptualise the meaning of PEA systematically. The four analyses based on the framework (presented in Chapters 2 to Chapter 5) provided significant evidence of the benefits of the framework both individually as well as contributing to the thesis as a whole.

An examination of abstract definitions of PEA in Chapter 2 and of operational definitions in professional guidance in Chapter 3 provided evidence of: (i) considerable variation in definitions; (ii) a lack of awareness of the implications of the use of different definitions of PEA; and (iii) that the conceptual framework could clarify the variation between definitions. These results have significant practical implications for how definitions are produced and used by researchers, policy-makers, professional practitioners, and members of the public.

A systematic review of research on professional definitions in Chapter 4 also identified a lack of conceptual clarity about PEA as well as identifying other gaps in the existing research literature. These results have major implications for improving the conceptual clarity and thus usefulness of research on PEA.

An original primary research study on professionals' definitions of PEA in Japan in Chapter 5 provided new evidence on professional views and decision-making which has implications for, first, policy-makers to re-consider their existing strategies in recognising and dealing with PEA. Second, it enables professionals to clarify their understanding about PEA and this can be used in training to improve their practice. Third, it allows researchers to further test the definitional framework approach in their studies.

Overall, the thesis produced both a conceptual tool plus empirical evidence on the definitions of PEA, encompassing from theory to practice as well as from abstract definitions to its operationalisation. The approach to look at PEA through its conceptual components could further enhance the understanding of PEA. Researchers could establish better methodology in examining the issue of PEA. Policy-makers could enhance strategies on PEA as part of child protection. Practitioners could act effectively to deal with PEA. The public could be more aware
that their or others’ way of communication with a child can be considered PEA. When policy, practice, research and societal understanding of PEA improves, discussions about what is and what is not PEA and how it can be most appropriately prevented or responded to can be more explicitly debated.
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CHAPTER 1
INTRODUCTION

Chapter contents

1.1. General background
1.2. Creating a definitional conceptual framework from conceptual issues
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1.1 General background

The United Nations Convention on the Rights of the Child (UNCRC) 1989 explicitly states that all children should not be exposed to any forms of abuse/neglect (United Nations, 1989). Child Abuse and Neglect (CAN) is maltreatment of children and has been recognised as a global phenomenon (Finkelhor & Korbin, 1988). CAN is often categorised into the four major categories: physical abuse, sexual abuse, neglect, and psychological/emotional abuse and neglect (PEA) (Gilbert, et al., 2009a). The term abuse refers to act of commissions and neglect refers to act of omissions.

The term PEA usually refers to that which occurs between adult and child. However, PEA could exist between anyone, for example, between two children, when it would be called bullying or peer abuse. There are also issues of cyber bullying or digital violence which have gradually becoming common with the development and wide use of technology. All of these forms of abuse/neglect can be considered as PEA, however, they are often studied independently (e.g. Peterson & Densley, 2017; Volk et al., 2014) rather than treated as a part of PEA and so are not the central focus of this thesis.

The International Conference on Psychological Abuse of Children and Youth which was held in 1983 produced the following definition of PEA:

Psychological maltreatment of children and youth consists of acts of omission and commission which are judged by community standards and professional expertise to be psychologically damaging. Such acts are committed by individuals, singly or collectively, who by their characteristics (e.g. age, status, knowledge, organizational form) are in a position of
differential power that renders a child vulnerable. Such acts damage immediately or ultimately the behavioural, cognitive, affective, or physical functioning of the child. Examples of psychological maltreatment includes acts of rejecting, terrorizing, isolating, exploiting and mis-socializing. (Proceedings of the International Conference on Psychological Abuse of Children and Youth, 1983, p.2 cited by Hart and Brassard, 1987, p.160)

A few years later, James Garbarino and his colleagues (1986) defined PEA as a “concerted attack by an adult on a child’s development of self and social competence…” (p.8). The authors suggested categorising PEA into five different forms: “rejecting”, “isolating”, “terrorizing”, “ignoring”, and “corrupting” (ibid).

These 1983 and 1986 definitions of PEA are well-known but are not comprehensive in their coverage of the concept of PEA. Defining PEA is complex as has been pointed out by many in the literature (e.g. Brassard et al., 1987; Glaser, 2011; Hart & Brassard, 1987; McGee & Wolfe, 1991; Rosenberg, 1987).

Iwaniec (1995) expressed the definitional conceptual difficulty of PEA as follows:

The literature (although not all that extensive) is full of contradictions. Some difficulties lie in the absence of unified and precise definition of what exactly constitutes emotional abuse, and in how it is possible to provide measurable evidence that would be convincing and scientifically sound. (p.3)

The definitions are a fundamental part of PEA. Nevertheless, as Iwaniec (1995) pointed out, the nature of existing definitions is tremendously diverse. Such diversity makes the concept of PEA ambiguous, inexplicit, and even confusing. What is more, the lack of a clear concept of PEA could hinder the development of research, policy, and practice and prevent society from developing strategies to protect children from PEA.

Therefore, this thesis aims to progress an understanding of the definitional issues of PEA. In doing so, this thesis takes a social science perspective to examine the conceptual distinctions in the theoretical and practical use of the term PEA. PEA is a global issue without cultural, geographical, or disciplinary boundaries. Anyone could experience PEA during their childhood or be involved in PEA as an abuser, witness, or professional. Moreover, the significance of PEA as an issue is obvious
from its high prevalence, negative consequences, and infringements of children’s rights (see discussion on negative impacts of PEA in Section 1.1.3.). Considering the nature of PEA as a global issue, therefore, it is necessary to take a broad perspective in examining definitions of PEA.

This first chapter introduces a general overview of PEA, develops a definitional conceptual framework and then explains the research strategies used in the thesis to examine the definition of PEA.

1.1.1. Terminologies

When a certain concept is studied, it is crucial to be clear about the definition of and ‘labels’ used to represent the concept. In this thesis, the term *child abuse and neglect* (CAN) is used to inclusively encompass relevant concepts such as ‘child abuse’, ‘child neglect’, and ‘child maltreatment’. Child or children refers to, but is not strictly limited to, those who under 18 years old based on the definition by the UN Convention on the Rights of the Child (United Nations, 1989).

The concept of CAN is very broad and encompasses different types of abuse/neglect. As stated, this thesis specifically deals with one of the major types of CAN, psychological/emotional abuse and neglect (PEA). In referring to the phenomenon of PEA as a sub-type of CAN, various terminologies, including ‘emotional abuse’, ‘psychological abuse’, and ‘psychological maltreatment’, have been employed interchangeably (Baker, 2009; Doyle, 1997; Moran et al., 2002).

The thesis uses the term *psychological/emotional abuse and neglect* (PEA) as a broad term to inclusively cover all the relevant concepts, including negative experiences for children from both commission (abuse) and omission (neglect). However, when an author uses a specific term to refer to PEA and using the term is necessary to deliver a specific meaning, the same term is utilised in the thesis. The purpose to standardise the terminologies within the thesis is a purely practical purpose to avoid inconsistency and confusion.

Interestingly, there is a geographic aspect to the terms used. The American literature is likely to use the term ‘psychological maltreatment’, and the British literature tends to use the term ‘emotional abuse’ (Edmundson & Collier, 1993). This tendency can be a reflection of the linguistic difference between American and
British English. Such geographic differences may be due to different understandings of the nature of PEA or may simply be the use of different labels to describe the same concept. It may also be that any differences arise from policy, practice, research, or legal terminology.

1.1.2. Emerging concept of PEA

Presumably, PEA has always existed. However, when individuals or society do not see a certain child experience as a problem, there may be no discussion about it because it is part of their everyday lives, that is, a part of their normality. However, when 'something' is being questioned or seen as a problem, people are likely to give a name to it and observe or discuss it. Such a process is not always documented perfectly, but this section briefly reviews recent history on the concept of PEA.

Pre-1960s

PEA has probably been understood in one form or another from the earliest of human societies. In the 19th Century the term “soul murder” appeared in a book about Kaspar Hauser written by Anselm von Feuerbach, a distinguished German judge, in 1832 (Shengold, 1979). Kaspar was a foundling who grew up in a dark isolated dungeon without almost all possible human contact for about 17 years which was nearly the lengths of his entire life.

“Soul murder is a crime in which the perpetrator is able to destroy the victim’s capacity for feeling joy and love”. (Shengold, 2011, p.121)

Presumably, the use of the terminology “soul murder” reflects the author’s intention to deliver the powerful message to readers that the child can be psychologically damaged without resulting in death. This example illustrates that relevant concept to PEA existed prior to the wide acceptance of PEA as a social issue.

Post-1960s

A key event which accelerated the social recognition of CAN was the development of the term The battered child syndrome by Henry Kempe and his colleagues in 1962. This is a terminology describing a clinical condition of victimised children who can be diagnosed with medical symptoms as having received physical abuse.
Subsequently, the concept of CAN has expanded to involve not only physical abuse but also other forms of abuse/neglect (Gough, 1996a). For example, Munro (2008) summarised the conceptual development of CAN as follow.

“Historically, it seems, societies first become concerned about protecting children from serious physical injury and neglect. At a later stage, they become aware of, and condemn, child sexual abuse and then extend their concern to include emotional abuse. There has also been a broadening of each category of abuse so that it is not just the most serious levels that are condemned” (p.56).

The late recognition of PEA compared to physical abuse is also noted by others (Egeland, 2009; Hibbard et al., 2012). In 1974, the federal Child Abuse Prevention and Treatment Act (CAPTA) included ‘mental injury’ as one of the categories of CAN. Nevertheless, the statute was not clear about defining the meaning of PEA (Brassard et al., 1987; Hart & Brassard, 1987). Subsequently, PEA was recognised as an individual form of CAN in legislation in the United States, England and Wales (Iwaniec, 1995).

In 1986, James Garbarino published a book *The psychologically battered child*, which title was named to show his respect to the book by Kempe and his colleagues in 1962 (Garbarino, 2013). In 1991, an entire issue of the journal *Development and Psychopathology* was dedicated to discussing PEA, and it highlighted the existing conceptual issues. Since then, PEA has been studied and discussed in a diverse area including health, education, law, and social welfare.

When Anselm von Feuerbach introduced the term ‘soul murder’, there did not seem to the concept of PEA in the literature. It then took 150 years to the publication of the book on PEA by Garbarino and his colleagues. As stated at the beginning of this section, when people consider a certain idea as a problem, they start naming and discussing it. This was illustrated by the appearance of various labels, such as ‘soul murder’, ‘mental injury’ and ‘psychologically battered child’. What this suggests is that a concept of PEA did not emerge suddenly, rather it gradually evolved (and still is evolving) as a social issue.
1.1.3. Significance of PEA

Despite the recognition of PEA as a social issue, relatively little attention has been given to PEA compared to other forms of CAN (Behl et al., 2003; Hart & Brassard, 1987; Teicher et al., 2006). In recent years, however, PEA has increasingly been perceived as a core issue of CAN (Egeland, 2009; Garbarino, 2013). This phenomenon is motivated and justified by an enhanced understanding of the extent and nature of PEA and that it can often be a component of or precursor to all other forms of CAN.

Prevalence

There used to be a belief, among some researchers and practitioners, that PEA was uncommon (Shpiegel et al., 2013). However, there has been growing awareness that PEA can be one of the most prevalent forms of CAN (Hibbard et al., 2012; Thompson & Kaplan, 1996). Although the true figure of PEA cannot be captured, its prevalence can be estimated (Tonmyr et al., 2011).

Relevant child protection data in various countries, such as Japan, UK, and Canada, has shown that the number of reported, recognised, or investigated cases of PEA has increased over time (Chamberland et al., 2011; Department for Education, 2016; e-Stat, 2016). These data cannot be understood as independent objective data on the prevalence of PEA. All types of CAN are underreported (Gilbert et al., 2009a; Gilbert et al., 2009b) and responses to them change over time, for example, increased social awareness towards PEA can lead to higher prevalence rates. Reporting is also influenced by changes in relevant laws and policies requiring professionals to report PEA as part of CAN. From these, it is unknown if the actual number of PEA has risen or if cases have increasingly come to light.

Considering the difficulty in interpreting official data, self-reporting studies might better reflect the actual prevalence of PEA than child protection data. Stoltenborgh et al. (2012), for example, undertook a meta-analysis of 29 studies, to estimate that self-report studies produced a rate of PEA of 363 per thousand compared to reports of PEA of 3 per thousand.

A number of other studies have found high prevalence rates of PEA through community surveys. A population-based study in the US found prevalence of 103
per thousand in children aged 2-17 years in the USA (Finkelhor et al., 2005). According to this study, PEA (defined as name calling or denigration by an adult) was the most frequent form of CAN compared to other forms such as physical abuse, sexual abuse, neglect and family abduction or custodial interference.

A survey based on a random probability sample in the UK found that 3.6% of under 11 years, 6.8% of 11-17 years, and 6.9% of 18-24 years during their childhood respectively reported experience of PEA (Radford et al., 2011). PEA was described in the survey as “being scared or made to feel really bad because a parent or guardian called the child/young person names, said mean things, or said they did not want the child”, “breaking or ruining the child’s things” and threatening the child with violence (ibid).

A Taiwanese population-based study showed that 69.2% of the respondents, 12-18 years, informed their experience of PEA (Feng et al., 2015). PEA in this study included eight items- “screaming”, “insulting”, “made you feel embarrassed”, “wished you were dead”, “threatened to abandon”, “locked out of home”, “threatened to hurt or kill you”, and “bullied by another child at home” (ibid).

The variation in these findings can be influenced by methodology used in the studies. First, various definitions of PEA in the studies could affect their findings. For instance, Radford et al. (2011) included threatening with violence as part of the definition of PEA. The authors, however, do not specify the meaning of violence. Thus, violence in this context can be both physical and psychological. In contrast, Feng et al. (2015) explicitly referred to eight behaviours in the definition of PEA. Such a difference in the meaning of PEA certainly affected the study findings. Second, the cultural background of study participants could also influence their study findings. For instance, study participants of self-reporting studies in a certain culture may be unlikely to reveal their experience of PEA compared to those from another culture, or vice versa.

Overall, despite these variations in contexts, method, and results, the studies all suggested high rates of prevalence of PEA.
Adverse effects

In addition to the prevalence of PEA, there has been growing evidence on the adverse outcomes of PEA.

The immediate effect of PEA can be difficult to identify compared to physical abuse (Wright, 2007). A number of detrimental outcomes associated to PEA include internalisation problems such as low self-esteem, self-blame, depression, and anxiety (Burns et al., 2010; Crittenden & Clausen, 1994; Festinger & Baker, 2010; Harter et al., 1998; Stone, 1993; Webb et al., 2007), externalisation problems such as anger, aggression, interpersonal difficulties, juvenile delinquency and crime (Chamberland et al. 2011; Manly et al., 2001; Vissing et al., 1991), suicide (Mullen et al., 1996), substance abuse (Campo & Rohner, 1992; Rosenkranz et al., 2012), insecure attachment (Riggs, 2010), bipolar disorder (Etain et al., 2010), negative impact on neurological development (Yates, 2007; van Harmelen, 2010) and brain structure (Tomoda et al., 2011), migraine (Tietjen et al., 2010), and physical effects (Green, 1984).

The studies on adverse effects vary in their methods. Some are retrospective studies identifying the precursors of those who have later problems in life. Other studies follow up the later life experiences of those who have had experienced PEA as a child, often agency cases which may be more serious or at least more identifiable than community prevalence cases. Further studies examine correlations between adults reporting childhood PEA and also reporting adult life problems. All of these approaches have methodological weaknesses but together they provide a wide range of evidence suggesting that PEA potentially has long-lasting impacts on individuals’ lives in a number of ways.

However, it is also important to note that as with other forms of CAN there are many instances of PEA cases where there are no such known adverse consequences.

Cause

The evidence that PEA is associated with negative outcomes for the individuals raises the issues of the mechanisms by which PEA have its effect. How does PEA lead to the adverse psychological or development outcomes? As with all significant levels of correlation it may be that the causal process is not as simple as PEA directly causing negative outcomes.
It may be that there is another variable (A) that causes PEA (B) and that then causes adverse outcomes (C). Alternatively, it may be that an underlying causal mechanism (A) has separate effects on causing PEA (B) and negative outcomes (C). In other words, it may not be the PEA itself or itself alone that causes the bad outcomes. For instance, ‘A’ may involve family stress (e.g. low income), personality (e.g. aggression, hostility) (Black et al., 2001) all of which may in themselves have adverse effects. In addition, a causal factor may be other types of CAN with PEA as a “side effect” of, for example, physical abuse or sexual abuse (Miller-Perrin & Perrin, 2013).

One reason why PEA is difficult to understand is that there are not fixed clear agreed criteria as to what is considered acceptable treatment or care of children. It is easier to agree on and specify the criteria for something to be, for example, an apple or an orange than the care of children which is more based on social values of the nature of parenting and children’s needs and rights. For example, a group of people may agree or disagree as to whether a child witnessing domestic violence is or is not PEA or about what verbal behaviours toward children are too harsh and thus PEA. In order to clarify such variations in the understanding of the term PEA, the following section develops a definitional conceptual framework to examine how definitions of PEA vary.

1.2. Creating a definitional conceptual framework from conceptual issues

1.2.1. Conceptual issues underlying all types of CAN

When Kempe and his colleagues introduced the notion The battered child syndrome in the 1960s, it referred to specific child condition caused by severe physical abuse. At that time, the meaning of CAN was relatively narrow and precise. The subsequent expansion of the meaning of CAN developed people’s awareness towards risky situations and the need to protect children from potentially harmful situations. At the same time, however, the expansion of the meaning of CAN has brought a great level of conceptual complexities. The conceptual complexities have been addressed in various ways.

Giovannoni and Becerra (1979) stated that
The term “child abuse” for many people conjures up an image of a tiny baby with a mass of ugly bruises and swollen welts. But in reality, situations labelled as child abuse and neglect cover a very broad range of parental actions and failures, differing greatly in their nature and in the severity of harm inflicted on children through them. (p.2)

Garbarino (2011) argued that

A child whose leg is broken playing football is not an abuse victim; a child whose leg is broken by being beaten is. It is not the injury but the message it conveys, the meaning of the injury that matters. (p.801)

Gough (2002a) raised a question whether the following scenario is abuse or not.

The parents of a baby are arguing with each other. The man is angry and picks up a set of keys. He is not very mature, and he tells his wife that if she does not change her attitude, he will throw the keys at the baby. He pretends to throw the keys and by mistake he does let go of the keys and they do hit the baby leaving a bruise. (p.561)

What all these statements commonly suggest is that there are conceptual elements underlying all types of CAN. One of the fundamental elements is behaviour that has negative consequences for the child. Within the idea of negative behaviour, there are some relevant aspects. First, when there is certain behaviour, there is someone who is responsible for that behaviour (Gough, 1996a). When there is no one responsible for the situation, such as unforeseen accidents, unpreventable illnesses, or acts of God, it is usually not perceived as abuse/neglect (ibid). The quotes above by Giovannoni and Becerra (1979) and Gough (2002a) assume that parents are responsible for the behaviour that is considered CAN.

Second, the lack of certain behaviour can be considered CAN. Much CAN may be due to specific behaviours and so acts of commission. But some CAN such as neglect are acts of omission – “a failure to meet the emotional needs of the child” (Hornor, 2012, p.436).
Third is the issue of intent, which is different to omission and commission. Intention relates to the motivation of the person who is responsible for the behaviour (commission or omission). The scenario described by Gough (2002a) above illustrated an unintentional action which left injury to the child. In legal systems across many countries, intention is considered as a crucial element of murder cases. Nevertheless, in reality, it is difficult to distinguish what is intentional or accidental action (Hutchison, 1990). Also, some abuse/neglect may simply arise from a lack of awareness by the abuser that their acts are abusive.

Fourth, the meaning of what is or what is not appropriate behaviour could differ depending on contexts and culture. Munro (2008) argued that “it is not the behaviour that is socially constructed but the way we talk about it” (p.51). Indeed, the way we talk about certain things differ depending on cultures and historical times. For instance, Western cultures might perceive certain custom of other culture as abusive (e.g. harsh initiation rites). On the other hand, what Western believes to be normal (e.g. let the child sleep alone; walking children with reins) can be considered as abusive from other cultural contexts (Gough, 1996b; Korbin, 1980).

Nevertheless, people’s perceptions, even within the same culture, could change over time. That is, what used to be socially accepted can be now considered as inappropriate or even a crime. For example, children used to be regarded in many legal systems as parents’ property (Kempe & Kempe, 1978). In many societies, it was socially acceptable for parents to do whatever they wish regarding their children. In the UK, it was accepted by an Act of Parliament to use boys for sweeping chimneys until 1874 (Gillham, 1994). However, child labour still exists in some developing countries (Seabrook, 2001 cited in Munro, 2008, p.46).

Infanticide was used as a way to control population size and elimination of children with disabilities, and child selling and child labour were common (Kempe & Kempe, 1978). Killing is now widely recognised as a crime and is not socially acceptable anymore. Nevertheless, killing still occurs in some countries. Many female children die, such as in Bangladesh, India, and Pakistan, just because they were born female (UNICEF, 1992). Furthermore, corporal punishment was traditionally used as a discipline but has now banned in 51 states (in May 2017, Global Initiative to End All Corporal Punishment of Children, n.d.). In other countries, it is still accepted. Or, regardless of the existence of the law, some people just do not care, and corporal punishment is still an ongoing issue.
The examples of CAN above are closely related to physical abuse. Certainly, the meaning of PEA can also be influenced by social contexts and this is addressed later.

Another fundamental element of CAN is harm to the child (Gough, 1996a; Hutchison, 1990). First, CAN could result in various forms of consequences. When there is abuse/neglect occurring, there may or may not be following consequences on the child. One of the most extreme examples is that the notion *The battered child syndrome* which literally referred to the physical harm left on the child. In other words, without the evidence of harm, there was no justification that the concept existed. Unlike such extreme case, there are other situations of CAN which do not result in such obvious consequences. The possible consequences include mild physical injury, hurt feelings, emotional pain, death, and infringement of children’s rights (Gough, 1996a; Hutchison, 1990).

In addition, the frequency of negative behaviour could influence the degree of harm to the child. Besharov (1985) introduced the idea of “cumulative harm”, arguing that the long exposure of abusive behaviour would lead to a cumulatively serious adverse effect on the child.

### 1.2.2. Conceptual issues of PEA

Having considered some of the fundamental aspects underlying all types of CAN broadly, this chapter now introduces some issues particularly relevant to PEA.

**The breadth of definitions**

PEA is discussed under various circumstances and there are diverse opinions about how it should be defined. McGee and Wolfe (1991) assert that having one research definition for PEA is important. However, it may be problematic if that means one broad definition of PEA as abuse/neglect. The possible drawback is that it could be wide enough to make everyone victim of PEA (Miller-Perrin & Perrin, 2013), and leave people being vulnerable to suspicion as an abuser (Hart & Brassard, 1987).

The influence of broad definitions on practice is supported by the study by Shpiegel et al. (2015) who examined the relationship between statutory definitions (broad versus narrow statutes) and reported rates of PEA, using the data from the National
Child Abuse and Neglect Data System (NCANDS). The results showed that states with broad definitions were likely to report a higher rate of both alleged and substantiated PEA than narrow definitions.

In contrast to McGee and Wolfe’s (1991) argument for one overarching definition, some propose to specify the meaning of PEA with multiple narrow definitions. Thompson and Jacobs (1991) argue that narrow and explicit definitions are better in order to take into account the social values of appropriate care and treatment for children than broad definitions. Laurie and Stefano (1978 cited in Garbarino et al., 1986, p.2) suggested a two-level definition. They consider that broad definition is appropriate for mental health professionals, and narrow and explicit definition is better for legal purposes. Haugaard (1991) asserted to have multiple narrow definitions because it is important that a definition is contextualised and fits its purposes.

**What makes PEA?**

Definitions of PEA may or may not be clear conceptually, but they can still be difficult to apply in practice. Is a particular event:

(i) definitely not PEA?
(ii) ambiguous as to whether PEA or not?
(iii) definitely PEA?

Some have argued that as almost all parents psychologically mistreat their children at some point, making it difficult to specify the meaning of PEA (Daro, 1988; Miller-Perrin & Perrin, 2013). Glaser (2011) stated that “one of the main difficulties regarding emotional abuse has been the issue of defining it” (p.867).

Some definitional components of PEA have been addressed by previous authors. A whole issue of *Development and Psychopathology*, a medical journal, was dedicated to discussing PEA in 1991. McGee and Wolfe (1991), which was the key paper in the issue, discussed the meaning of PEA extensively and highlighted important conceptual issues. However, this issue of the journal was produced more than two decades ago, and various aspects need to be updated.
Glaser (2002; 2011) discussed conceptual issues relatively extensively. However, these discussions were underpinned by only a relatively small part of the relevant literatures. Baker (2009) examined and contrasted conceptual definitions, legal definitions and the measurement of PEA in survey studies. The study demonstrated that legal definitions were likely to have an emphasis on child outcome, whereas conceptual definitions and retrospective survey measurement were likely to refer to abusive behaviour.

Despite the work of these and other authors, there is a lack of an overarching approach to considering the definition of PEA. This creates a lack of coherence and consistency in policy, practice, individual decision-making, and research on PEA. When PEA is being discussed or actions are taken to prevent or respond to PEA, there is a lack of clarity of which aspect of PEA is discussed or examined. Certainly, these studies individually illuminated significant issues. However, we are unlikely to progress our understanding or work on PEA without a clearer understanding of what is meant by PEA.

In this thesis, therefore, a definitional conceptual framework, representing conceptual sub-categories of PEA has been developed. This distinguishes the different conceptual components inherent to PEA (and to other forms of abuse/neglect). These components have all been addressed in different ways by the literature on CAN, but these have been driven by the particular focus and interests of each author and so not integrated together to provide a structure to clarify differences between definitions. This definitional framework is then used for the particular aspects of PEA definitions and PEA research examined in the rest of the thesis.

1.2.3. Creating a definitional conceptual framework

The definitional conceptual framework for this thesis has been developed from the logic of what must be involved in abuse/neglect and concepts referred to by other authors in the literature.

Terms, such as abuse, neglect, or maltreatment imply an act (commission) or the absence of an act (omission), and there is therefore an actor. There is then the issue of whether the behaviour was intended to be abusive or not. In addition, is the behaviour (or lack of) a one-off situation or frequent and how frequent. Some
authors, as discussed later, consider abuse/neglect within the relationship between
the abuser and the child being abused. There is then the impact of the abuse/neglect
on the child. For some, it is the harm that predominantly defines something as
abusive. Finally, one needs to consider how children are defined. What is their age,
and do they have any other characteristics apart from being children that is relevant
to defining abuse/neglect?

This provides us with the following list of components that are discussed in turn
below:

(i) Abuser
(ii) Abusive behaviour
(iii) Intention
(iv) Frequency
(v) Interaction
(vi) Consequences
(vii) Child age
(viii) Child's other characteristics

Although the conceptual components are separated out for the purpose of the
framework and conceptual clarity, in practice they are often combined together. So,
for example, aspects of who an abuser can be are linked to the consequences of
their behaviour on a child.

(i) Abuser

Like other forms of CAN, PEA does not happen on its own accord. The concept of
PEA assumes some sort of agency that results in abuse/neglect occurring. That is,
someone (e.g. individual) or something (e.g. institution/organisation, state, or
community) causes PEA by its action or inaction. PEA towards children can
theoretically be carried out by any individual or organisation, and the abuser is an
integral part of all types of CAN (whether or not it is explicitly specified in a definition
of abuse/neglect).

Glaser (2002) defined the abuser of PEA as a “carer” (p.697). An examination of the
legal definitions of PEA by Baker (2009) concluded that approximately one in five of
the state definitions of the US defined abuser as someone close to the child.
Furthermore, Glaser (2011) pointed out that either the abuser is defined as someone close to the child, or not defined at all.

These features of the abuser, addressed by the previous literature, raise question about the relation between abuser and child. That is, what kind of relationship could they have? The nature of relationship can be conceptualised with: (i) relationship condition, (ii) residential status, and (iii) child care involvement.

**Relationship condition**

Firstly, there are diverse relational conditions (i.e. legal) between abuser and child. The abuser can be an immediate family member, family member, or non-family member. Each relationship status may require a different level of responsibility. As shown in Diagram 1-1, generally speaking, the closer the relationship is, the more responsibilities follow.

**Diagram 1-1: Possible relationship of status and responsibility**

![Diagram 1-1: Possible relationship of status and responsibility]

**Residential status**

The second aspect is whether the child and the abuser live in the same household. Either a family member or non-family member might live with the child. This means that residential status does not always correlate to relationship status. Those who live with a child have more access to the life of the child. Residential status often influences frequency of interaction, therefore, this is an important element to understand the actual relationships established. Actual relationships may or may not mean a degree of psychological closeness. Understanding this provides an idea of what kind of circumstances could trigger abusive relationships.
Child care involvement

Finally, child care involvement relates to two other categories – relationship status and residential status. Responsibility towards a child, which is determined by relationship status, entails child care involvement. On the other hand, there are people who are not legally responsible for a child but are available to take care of a child, for example, due to the residential situation, or they may be employed to provide care.

These distinctions can develop the level of analysis regarding the diversity of relationships between abuser and child. So, it will be referred back in the analysis of Chapter 2.

Diagram 1-2: Different types of abuser, familial role, residence, and child care
(ii) Abusive behaviour

One of the most influential definitions of PEA by Garbarino et al. (1986) is based on five categories of abusive behaviours - rejecting; isolating; terrorising; ignoring; corrupting. This definition has played an important role for others to develop the definition of PEA (e.g. APSAC cited in Binggeli et al., 2001).

Baker (2009) examined definitions of PEA and identified abusive behaviors as ranging from one to seven behaviours, suggesting that there is no agreement about which abusive behaviors should constitute PEA. Nevertheless, there are some conceptual distinctions within abusive behaviours.

Act of commission vs act of omission

The first conceptual issue is whether abusive behaviours refer to act of commission or omission (as in neglect). Some early literature distinguished the concept of commission from “neglect” (e.g. Whiting, 1976). On the other hand, others involved both omission and commission in their definitions of PEA (e.g. Brassard et al., 1987; Garbarino et al., 1986; Glaser, 2011).

Psychological vs non-psychological

The second conceptual issue raised by McGee and Wolfe (1991) was whether abusive behaviours should only be psychological in nature or could involve non-psychological behaviours as well. Explicitly or implicitly, some argue to include only psychological behaviours (e.g. Glaser, 2011). On the other hand, others consider physical or sexual behaviours as part of PEA (e.g. Brassard and McNeill cited in McGee and Wolfe, 1991). McGee and Wolfe (1991) concluded that there was not agreement about the nature of abusive behaviours of PEA.

What is or what is not appropriate behavior?

As stated earlier in relation to CAN (see Section 1.2.1.), what is considered to be appropriate or inappropriate behavior could vary depending on contexts such as culture and historical times, and this of course applies to PEA.

Here are some examples of behaviours which can be potentially considered as PEA. First, there is an argument that the experience of parental divorce or separation could create PEA (Klosinski, 1993). On the other hand, it may be argued that
exposing a child to a negative family atmosphere could also potentially be PEA. Interestingly, there is evidence suggesting both situations can be potentially harmful to children. Morrison and Coiro (1999) examined the relationship between marital conflict and child well-being based on the National Longitudinal Survey of Youth in the US. The study found that experience of parents’ separation/divorce as well as exposure to parents’ high marital conflict who remained together both associated to increase of children’s behaviour problems.

Second, amongst British upper-class families, it was traditionally common to send children to boarding school (Munro, 2008). This might allow children to learn academically quickly by focusing on their studies and also learn about a community outside of the household by closely spending the time with their friends and teachers. However, this can also be seen as inappropriate based on an idea that children should build up a relationship with their families first within their household.

Third, some children appear on TV or stage as, for example, actors. Children themselves might have decided to do so to develop their careers and very much enjoy it. However, some children might be forced by their parents to work to earn money for their family and wish to spend more time with their friends at school. Being on TV or stage is one of the forms of work. When child labour (the form might differ from TV or stage work) happens in economically poor countries, people may criticize it as abusive. However, when children are on TV in rich countries, people may not question it or even see as pursuing or developing their careers. Moreover, if an adult, a former famous child actor, becomes psychologically very unwell due to too much attention from the public and paparazzi, is this PEA? Similar discussion can be applied to other contexts, for example, sports. There are children pursuing specific sport and train very hard day and night. Children might or might not be forced to have this lifestyle. Some sports require strict weight control, and if this results in eating disorder, is this PEA?

(iii) Intention

Is intention necessary for an act or the omission of any act to be considered abusive?
McGee and Wolfe (1991) state that most authors do not address the idea of intention. Glaser (2011) asserted that it is generally agreed that “evidence of intention to harm the child” does not have to be included in the definition of PEA (p.869). Nevertheless, explicitly or inexplicitly, some scholars referred to intention in relation to the definition of PEA. Garbarino et al. (1986) defined PEA as “a concerted attack by an adult …” (p.8). In regards to this, O’Hagan (1995) asserted that the use of the term “concerted” suggests that the certain behaviour is “intentional and planned” (p.452).

Considering the idea of intention, the question would be what kind of intention we are talking about. That is, the abuser might intend to cause different things. It might be a wish to act in a negative way because they enjoy it, it might be in order to create negative consequences in the child or it might be not caring what the effect is. This produces four types of intentional behaviour:

First, there is abuser’s intention to be abusive or neglectful to the child and wants to have the consequences of a negative impact on the child (Type A).

Second, an abuser deliberately behaves in an abusive or neglectful way but does not care that it could have negative effects or not. The priority for an abuser is to do with whatever they would like to do rather than thinking about the results (Type B).

Third, an abuser wants to act in a negative way to the child but does not have the intention to produce negative consequences (or the degree of consequence that occurs).

Fourth, an abuser does not consider or realise that his/her behaviour can be abusive or neglectful and could result in adverse effects. (Type D – No intention at all). In some cases, an abuser might even believe that s/he is doing the right thing for the child.

Having considered different types of intention, it is also important to note that it can be difficult to ascertain what motivates people to act in certain ways. For example, what looks like intentional behaviour by others can be an unintentional act by an abuser. On the other hand, what looks like unintentional behaviour by others might be an intentional act by an abuser.
Table 1-1 illustrates different types of abusers based on intention. The level of intention certainly does not necessarily correlate to the level of severity of PEA. For example, Type C, which is theoretically without intention at all, can potentially be highly abusive if defined on the basis of consequences. On the other hand, Type A, with intention to be abusive as well as harmful to the child, may be perceived as not abusive at all by others.

Table 1-1: Different types of abuser based on two types of intention
(+ refers to existence of intention; - refers to without intention)

<table>
<thead>
<tr>
<th>Abuser</th>
<th>Intend to act negatively to the child</th>
<th>Intend to have negative impact on the child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type A</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Type B</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Type C</td>
<td>-</td>
<td>+</td>
</tr>
<tr>
<td>Type D</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

(iv) Frequency

If abuse/neglect involves an act or behaviour by an abuser, there is an issue of how often those acts are happening. PEA could happen only once, a few times, occasionally, or more often.

Repeated vs single event

Glaser (2011) states that there is variation in whether people consider that PEA can be a single event or requires repetition to be abusive. She argues that even if single events can be abusive, repetition is still part of the reason for defining and identifying PEA.

Frequency and abusive behaviours

McGee and Wolfe (1991) discussed frequency in relation to abusive behaviours. The authors asserted, like Glaser, that frequency is morally as well as legally important. Regardless of this, the authors argued that PEA must, at least initially, be defined as behaviours for research purposes. The implication here is that frequency is not a necessary part of PEA.
Frequency and consequences

O’Hagan (1995) argues that abusive behaviours such as the five categories of abusive behaviours listed by Garbarino et al. (1986) are not all necessarily always inappropriate and potentially abusive. O’Hagan argues that they would be harmful and thus abusive “if it was sustained and repetitive over long periods of time” (p. 453).

Moreover, frequency might relate to the level of abusive behaviour and consequences. Assuming that there are different levels of abusive behaviour (in terms of its impact or the degree of the severity of behaviour), one high level of abusive behaviour might be greater than repetition of low level of abusive behaviour. An example is that physical abuse which could from one instance immediately result in death and physical abuse which does not leave any visible mark on the child. There may also be interactions between degree of abusive behaviour, frequency and consequences in PEA cases.

Frequency in research

Interestingly, frequency was used in research to measure practice. Baker (2009) reviewed survey instruments which were developed for assessing retrospective adult recall of their childhood experience of PEA. Most of the measurements identified (fourteen out of fifteen) involved response scales based on the frequency of respondents’ experience. However, the response options ranged from 4-point scales to 7-point scales, suggesting there was no agreement about how to measure frequency.

(v) Interaction

As an action or inaction, PEA exists within a context of the relationship between the abuser and the abused. The relationship between these two involves interactions and communications. The interactions could take various forms and can be mixture of both positives and negatives.

Garbarino et al. (1986) distinguished PEA and ‘growth-inducing challenge’. According to the author, the latter can only occur “in the context of supportive relationships” (p.20). This implies that PEA occurs in a non-supportive relationship.
McGee and Wolfe (1991) proposed to conceptualise abusive behaviours of PEA as “parent-to-child communications” (p.10).

A working definition of PEA suggested by Glaser (2011) explicitly referred to interaction as below.

“persistent, non-physical, harmful interactions with the child by the caregiver, which include both commission and omission” (p.866).

Interaction (or communication, relationship) is related to other components because it encompasses the various elements within. As was shown earlier, Garbarino et al. (1986) defined PEA mainly based on abusive behaviours, which are a form of interaction occurring within some sort of relationship between an abuser (however defined and in whatever familial and caring role and place of residence) and the child (however defined).

(vi) Consequences

As stated in relation to CAN, there are various form of possible consequences which can be caused by PEA. However, unlike physical abuse, for example, immediate consequences of PEA may be less evident (Iwaniec, 1995; Wright, 2007).

Baker (2009, p.706) introduced three different types of child outcomes of PEA.

(i) Psychologically harmful or damaging to the child
(ii) Something that harms the child’s development in one or more functional areas (e.g. social, cognitive, affective, behavioural, or emotional area)
(iii) Something that affects the child’s perception of him or herself

Psychological vs non-psychological

Similar to the nature of abusive behaviours, McGee and Wolfe (1991) raised a question about whether consequences should be psychological in nature or can be non-psychological. For example, when consequence is limited to purely psychological, physical abuse which results in a physical outcome cannot be included into the definition of PEA. In contrast, when the concept of consequence
involves both psychological and non-psychological outcomes, physical abuse results in psychological consequences can be considered as a form of PEA.

**Actual vs potential**
Hutchison (1990) and Gough (1996a) addressed an issue of ‘actual’ as well as ‘potential’ harm.

McGee and Wolfe (1991) suggested to define PEA as:

> “parent-child communications that may potentially damage the child psychologically, given his or her special vulnerabilities (particularly his or her development level)” (p.10).

Belsky (1991) argued that PEA should be defined concerning “*immediate pain*, it causes the child and its potential for lasting harm” (p.33).

**Social consequences**
Psychological consequences can be direct but also indirect. For example, involving how others treat a child and therefore affecting their social status. Stigmatisation is often discussed in relation to sexual abuse. That is, victims can be seen with additional negativities because of their experiences (Finkelhor & Browne, 1985). This could also occur with PEA. For example, when a child experiences verbal humiliation in front of their friends which could then trigger stigmatisation towards the child. Moreover, it is also possible that there is stigmatisation toward PEA itself in some societies and people avoid talking about PEA.

**Harm to child rights**
There is little reference in the literature to a child’s right not to experience PEA behaviours even if there are no other negative consequences. This is in contrast to sexual abuse where there is wider recognition that sexual exploitation is abusive even if there are no measurable effects or even if the child is unaware that it has occurred (Gough, 1996a).
Similarly, there can be situations where a child experiences PEA but is not affected adversely. The potential contradiction between infringement of children’s rights and consequences is one of the reasons for the difficulty in defining PEA.

**Legal context**

There can also be a relation between consequences and legal context. McGee and Wolfe (1991) stated that “Several authors particularly those concerned with legal intervention are more explicit in their description of the harm the child must display for psychological maltreatment to be identified” (p.6). In addition, Baker (2009) demonstrated that legal definitions were likely to define PEA based on child outcomes rather than abusive behaviours.

This feature is not exceptional for PEA. For instance, spanking which does not leave a visible injury on the child might not be considered as physical abuse especially in the legal context which usually requires evidence. Similarly, sexual abuse which is reported ten years later after the death of the abuser may be much more difficult to substantiate unless there is strong evidence. Since PEA is often not subject to legal proceedings, the appropriate definitional focus is unclear.

**(vii) Child age**

All types of CAN require some idea of ‘who’ the recipient is. This study, as it was specified at the beginning of the thesis, limits its focus to children, defined in broad terms.

Children refer to a wide range of states from infancy to adolescence. The level of development varies depending on individuals, but one of the indicators is child age.

**Social context**

Child age could have different meanings depending on social contexts. In many countries, the meaning of childhood has been gradually expanded. That is, people used to have shorter childhood and reached the status of adult in an early stage. For example, in 16th century England, the legal age of adulthood was ten (Munro, 2008). Now, at ten years old, people are in the middle of education and defined as ‘children’ in the majority of countries.
Considering child age in relation to abusive behaviours and consequences

The same behaviour might have different meanings depending on a child’s age (McGee & Wolfe, 1991). Such discrepancy in the meaning of behaviours could then result in different consequences. Garbarino et al. (1986) had pointed out that the same behaviours can be more problematic for younger children than older children, and vice versa. Similarly, McGee and Wolfe (1991) addressed an example that isolating a teenager from his/her friends might be harmful but doing the same to an infant might not be.

Glaser (2002) also discussed the relationship between child age and the degree of negative outcome on the child. The author stated that attachment relationships are built during infancy and early childhood. Thus, the PEA experience of a younger child is likely to increase the severity of consequences compared to the PEA experience of older children. This is underpinned by research evidence. A systematic review by Naughton et al. (2013) identified that pre-school children (0 to 6 years old) who experienced PEA presented diverse emotional as well as behavioural difficulties. According to Riggs (2010), PEA in early childhood by attachment figures triggers insecure attachment in adulthood.

(viii) Child’s other characteristics

Children as individuals are diverse in nature. In addition to child age, there may be other characterises of recipients of PEA.

Garbarino et al. (1986) raised the question of whether children play a role in stimulating the occurrence of PEA. The authors argued that

Children, whether consciously or unconsciously, may trigger or even cause their own maltreatment. To a parent already overwhelmed by environmentally induced stress, attention getting behavior and demands by the child may provide the impetus for violent parental reactions. ... (ibid, p.13)

This statement also implies that a parent’s status (e.g. economic, marital) could affect how they perceive their child’s behaviour or condition. In other words, for
example, certain behaviour of a child may trigger PEA at some times more than others.

There is then the question as to what kind of characteristics could potentially trigger PEA. There would be various characteristics as individual children differ extensively in terms of, for instance, their demographic background, health condition, how they behave or talk.

Garbarino et al. (1986) also addressed the question whether severity of PEA can be influenced by the developmental status of children. The development can be cognitive or physical, and they could differ depending on not only child age but also other factors (e.g. disability, premature birth, difficult birth, poor nutrition).

Glaser (2002) acknowledged that children could have difficult natures for parents to communicate with. However, the author argued that

if the parents are unable to cope, responsible action is to seek help. If the parents, for whatever reason, are unable to seek help, the responsibility lies with others to intervene on behalf of both the child and the parent. (p.698)

Glaser is arguing for abuser responsibility and this could include a carer’s failure to protect a child from abuse by another. Whatever the responsibility, it may be that children with certain characteristics are more vulnerable to PEA than others. Thus, this category is created to capture relevant aspects beyond a child’s age.

1.2.4. Applying the definitional conceptual framework into two stories

The definitional framework could help conceptualise PEA. Table 1-2 and Table 1-3 present two stories reported in the media which help illustrate the use of the framework for considering issues of PEA. These stories are selected because, first, they are (were) topical. Media make stories as topical by reporting them to public or topical stories are picked up by media. It is uncertain which comes first. Either way, media stories are of interest to a specific society or even globally especially with the use of the Internet. Second, as shown later in this section, both cases have psychological/emotional elements and can be potentially seen as cases of PEA.
Thus, these stories are used to demonstrate the application of the definitional conceptual framework developed in Section 1.2.3.

The coding within the table includes interpretation and judgement and assumes that PEA was a possibility. The details of the cases may not be correct, but that is not important for the current purpose, which is to illustrate the component analysis.

Table 1-2: Story A: A boy left by his father went missing for almost a week

| Story A | A seven-year old boy was abandoned in a forest road as a ‘discipline’ by his parents in a rural part of Japan. It is reported that the parents (especially the father) made the boy get out of the car because of his misbehaviour (e.g. throwing stones towards cars). After being left, the boy chased the car crying. At that time the parents let him into the car, but they again left him alone. After driving away about 0.5 km for 5-10 minutes, the father went back to the place where the child was left. Then, the father discovered that the boy was not there anymore. After searching, he reported the situation to the local police. A search team, consisting of more than 180 members, led by local police did not find the child. Instead, after 6 nights, the boy was found by military personnel, who was not part of the searching team, at the military base. The base was located approximately 5 km away from where the boy was believed to have been left alone. The father publicly apologised for abandoning his son. The parents were not charged, but the local police referred them to a Child Guidance Centre based on suspicion of PEA. This story went viral overseas, including the UK (BBC News, 2016; The Guardian, 2016). |

Table 1-3: Story B: Possession of toy gun resulted in child detainment at school

| Story B | This story is relevant to Prevent Duty which came into force as part of counter-terrorism in England since July 2015. Under Prevention Duty, designated authorities, such as schools, have the legal obligation to prevent people from being drawn into radicalisation. In relation to this, in 2017, the Guardian reported a story shared by an anonymous person, a mother of two children. According to this story, two school children (aged five and seven), who were found to possess a toy gun by a teacher, were detained for almost two hours after school in England. The teacher later claimed that she never thought the gun was a toy. It is reported that the children as well as the family have been psychologically negatively affected by their experiences. The local authority later admitted guilt of racial discrimination (The Guardian, 2017). |

The media plays a particular societal role in conveying a certain narrative, public/popular discourse about all aspects of society including what is appropriate
care of children. The media descriptions above do not of course necessarily illustrate the two cases fully. This may be, first, because some details remain unknown to others except the abusers and the children. It may be that, second, the details known by professionals are not shared in the public domain due to privacy issues. Third, the media will have their own priorities about what is important to report. Fourth, some information which is reported in the media can be missed. Still the information in the media on these two cases are used as examples of what could potentially be considered as PEA. Table 1-4 describes the two stories according to the components of the definitional framework.

Table 1-4: Conceptualising Story A and Story B based on the definitional conceptual framework

<table>
<thead>
<tr>
<th>Definitional components</th>
<th>Story A</th>
<th>Story B</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Abuser</td>
<td>Parent (father)</td>
<td>A school teacher, a school, and/or the state</td>
</tr>
<tr>
<td>(ii) Abusive behaviour</td>
<td>Leaving the child alone in a forest as a discipline.</td>
<td>Detainment of children due to toy gun.</td>
</tr>
<tr>
<td>(iii) Intention</td>
<td>The father claimed that his action was ‘discipline’.</td>
<td>To prevent terrorist action (though not necessarily with intention to harm the child).</td>
</tr>
<tr>
<td>(iv) Frequency</td>
<td>Once - as far as we could tell from the media account of the story</td>
<td>Once - as far as could be ascertained from the media story</td>
</tr>
<tr>
<td>(v) Interaction</td>
<td>According to the father, the boy was throwing stones towards cars and he did not stop when told off, and this triggered the father to leave the child.</td>
<td>The detention was taken because the toy was seemingly initially mistaken as a real gun.</td>
</tr>
<tr>
<td>(vi) Consequences</td>
<td>The child was left alone in a forest for several days but was eventually found. No immediate consequence was observed. But long-term consequences are unknown.</td>
<td>According to the mother, the children were affected psychologically.</td>
</tr>
<tr>
<td>(vii) Child age</td>
<td>7 years old</td>
<td>5 and 7 years old</td>
</tr>
</tbody>
</table>
(viii) Child’s other characteristics

<table>
<thead>
<tr>
<th></th>
<th>Not enough information though probably a strong willed and independent child.</th>
<th>Not enough information beyond possible racial discrimination.</th>
</tr>
</thead>
</table>

(i) Abuser

Story A - The potential abuser of this case is the father who is probably in a close relationship with the child. In addition, a mother might be considered to have some degree of responsibility for not intervening to stop the father’s behaviour.

Story B - The abuser of Story B is ambiguous. An abuser could be, the state which introduced the law, or the school or teacher interpreting and applying that law.

(ii) Abusive behaviour

Story A - A potential abusive behaviour is leaving the child by himself in a forest.

Story B - The detainment of the children.

(iii) Intention

Story A - The father probably believed or assumed that making the child alone in an isolated place, which is likely to scare the child, teaches him something. This can be considered as motivation to harm even if he claimed that it was part of the ‘discipline’. The issue here is the ambiguous nature of discipline, namely, any discipline could involve some degree of harm.

Story B - The teacher implied that she thought the gun was a real which made her report the case (to obey the law and/or to prevent terrorism).

(iv) Frequency

Story A - There is no reference of frequency in Story A. Rather, the story seems to be a one-off event. However, if the father thought leaving the child teaches him something, it may be that he has done the same or similar before or may do so in the future. The way of thinking, for example about discipline, is shaped by how people have grown up or are affected by cultural phenomenon. Once a belief is established, it may be unlikely to change.
Story B - There is no reference of frequency in Story B so it was probably an isolated event.

(v) Interaction
Story A - No details of interaction were available though there was a note about what triggered the father’s behaviour to leave the child alone. It might be assumed the child was strong willed in other situations.

Story B - No mention of interaction.

(vi) Consequences
Story A - The child was missing almost a week, but the child was found safe eventually. From this, there was seemingly no immediate negative effect on the child. Nevertheless, there is a risk of potential harm on the child of trauma from the experience or from the father’s behaviour – though the media reaction, the referral to child guidance and father’s public apology might also have an effect.

Story B - The children may have been psychologically affected by the detention.

(vii) Child age
For both stories, the children were relatively young at primary school level. It might be that the media is most likely to report cases when children are young.

(viii) Child’s other characteristics
Story A - the child’s previous behaviour may have affected the father’s response.

Story B - there may have been other aspects of the children’s behaviour that affected the school’ response. The local authority admitted racial discrimination in that the school would not have responded in the same way to White children.

Overall, the application of the framework to the two stories helps to identify the nature of any potential PEA.
Summary

The purpose of developing the definitional conceptual framework is to progress the conceptualisation of PEA definitions. It is hypothesised that unpacking the entire concepts into component levels enables aggregation of the conceptual positions of various definitions of PEA.

The definitional conceptual framework consists of eight components. None of the components are fully independent, rather, they are all interrelated each other. There are certainly other elements shaping PEA. Nevertheless, the definitional components discussed in this chapter are considered to represent intrinsic aspects of PEA. It is hypothesised that the framework enables to examine the definitions of PEA with consistency, therefore, is utilised throughout the analyses in the thesis as a tool and to test its efficacy.

It is important to note that the level of abuse/neglect (e.g. abusiveness) is one of the key conceptual aspects of the definition of PEA. However, people have different perceptions, values and responsibilities, and these affect how the ‘level’ is determined as thresholds of PEA. The issue of the level of abuse/neglect is both part of each concept and of how the concepts combine to lead to judgements of overall level of PEA. The issue of level of PEA is discussed in later chapters in terms of what is abusiveness to be defined PEA and when to respond in different ways to PEA.

1.3. The strategy of the thesis

1.3.1. The rationale

Regardless of the significance of PEA, there is a lack of clarification about what PEA means. The central purpose of this thesis is to evolve the clarification of the definition of PEA and draw implications.

The thesis is motivated by, first, the lack of research on the definition of PEA. There are studies investigating the definitional issues of PEA. However, there are certainly more research studies on effects of PEA rather than on its definition. Gough (1996b) undertook a conceptual analysis of CAN and pointed out that people tend to spend energy on examining the effects of CAN, methods, or intervention rather than spending time on investigating the meaning of CAN. Presumably, people’s wish to
protect children from harmful situations make them prioritise activities which seek to provide immediate responses in the form of practical solutions. This phenomenon certainly applies to PEA, yet there is also an ongoing difficulty and reluctance to address the issue of PEA (Hamarman & Bernet, 2000).

Second, the thesis is motivated by the possible adverse effect of the ambiguous conceptual meaning of PEA. The lack of a clear definition of PEA could affect research negatively. Regardless of the accumulating evidence about, for example, prevalence and adverse effects of PEA (see Section 1.1.3.), the lack of definition hinders the meaning of existing research (Besharov, 1981). That is, it is hard to compare or synthesise the evidence when all studies claim to examine PEA, but their actual meanings of PEA differ.

Moreover, the lack of clear definitions could hinder the development of effective policies based on credible evidence in order to tackle the issues on PEA and could bring drawbacks in practice. According to Giovannoni and Becerra (1979):

> The ambiguity of definition precipitates problems and disagreements among the professionals who work daily with abuse and neglect situations. These difficulties are less well known among the general public and even among peripherally related professionals, such as mental health workers and school teachers. (p.2)

Flynn (2012) stated that:

> policy makers are hesitant to define what is and what is not emotional abuse at the fear of excluding criteria (that may not be common for the majority of victims but may still occur for some). (p.4)

Indeed, Besharov (1981) pointed out the definitional confusion in practice. The author asserted that Henry Kempe accurately described the feelings of child protection professionals when he noted “child abuse is what the Courts say it is” (Kempe, 1972 cited in Besharov, 1981, p.385). The ambiguity of PEA could create a reluctant atmosphere to talk about PEA, to conduct relevant research, or to judge a situation as PEA in practice.
However, if an issue is not appropriately discussed and examined, the existing conceptual problems cannot be solved. Rather, PEA could become much more difficult to be identified and prevented. For this reason, an examination of PEA definitions is socially topical and significant.

Diagram 1-3: Drawbacks of the ambiguous definition of PEA

1.3.2. The main research question and the thesis structure

As stated, the main purpose of this thesis is to evolve the conceptualisation of the definition of PEA to inform policy, practice, and research. The main research question which motivates the entire thesis is:

- How is PEA conceptualised and what are the implications for PEA definitions for policy, practice, and research?

In order to address this question, PEA definitions are investigated from multiple perspectives based on the conceptual framework introduced in Section 1.2.3 earlier in this Chapter 1. In Chapters 2 to 5 of the thesis, four research strategies are used to study definitions of PEA in different ways. These four strategies are introduced below.

Chapter 2: Abstract definitions: conceptualising PEA definitions in the literature

The first strategy is to use the conceptual framework to analyse common abstract definitions of PEA in the child welfare and other relevant literature. Abstract
definitions refer to statements of what PEA is and so are specifying the theoretical meaning of PEA. In doing so, the definitions of PEA are examined. The analysis uses the conceptual framework based on inherent components of PEA to identify variation, nature, and boundaries between definitions. It provides a basic understanding of the conceptual characteristics of PEA to inform the other studies in the following chapters.

Chapter 3: Applying definitions in practice: an examination of operational definitions in professional guidelines

The second strategy is to examine how professionals are guided to apply the definitions of PEA in practice. The chapter studies both the abstract and operational definitions of PEA included in professional guidelines that advise professionals on how to identify and respond to PEA. The term ‘operational definition’ is used in this thesis to refer to how professional practitioners apply or use a definition of PEA in terms of their professional practice (to respond or not respond to possible cases of PEA). Professional guidelines are examined in the three jurisdictions of California, England, and Japan.

Chapter 4: Research on professionals’ abstract and operational definitions of PEA: a systematic review

The third strategy is to understand the nature of pre-existing research studies on professionals’ definitions of PEA. This is achieved through a systematic review of the research on professional perceptions and decision-making in PEA. The review highlights how professionals perceive and act about PEA. It also identified the weakness of studies to develop the understanding of PEA.

Chapter 5: Research on professionals’ PEA definitions – evidence from Japan

Informed by the results from the previous strategies, the final strategy is to undertake a new primary study in order to understand professionals’ definition of PEA in Japan. The chapter examines how professionals see and act on possible PEA cases using vignettes that provide brief scenarios of different child experiences that might be considered PEA. This is to highlight ongoing issues on defining PEA in practice. Not only does this have a research aim, but it also provides important evidence to help understand and develop child protection systems and training in PEA.
Diagram 1-4: The structure of the thesis

- Conceptualisation of abstract definitions (Chapter 2)
- Conceptualisation of operational definitions (Chapter 3)
- Previous research studies on professional definitions of PEA (Chapter 4)
- Original primary study on professional definitions of PEA (Chapter 5)
Chapter contents

2.1. Introduction
2.2. Objective and research questions
2.3. Methodology
2.4. The included abstract definitions
2.5. Analysing individual definitional components
2.6. Analysing across definitional components: cluster analysis
2.7. Discussion and conclusion

2.1. Introduction

Chapter 1 discussed the ways in which definitions of CAN in general and PEA in particular are intrinsically complex and yet at the same time are often described in rather vague and ambiguous ways that do not address the underlying complexity of the definitions. Chapter 1 provided a framework to help clarify some of the core aspects of this complexity.

Chapter 2 takes this approach further by applying the framework to a number of well-known definitions of PEA in the literature. I describe these definitions as ‘abstract definitions’ as they are defining the concept of PEA, rather than indicating how they should be used and how people should respond to instances of PEA. These are typically short definitions of one or more sentences. They provide little detail about the thing they are defining though some definitions provide more detail than others (Baker, 2009). Abstract definitions of PEA are just describing (defining) what PEA is.

The aim of this Chapter 2 is to use the framework developed in Chapter 1 as a tool for analysing these abstract definitions. The framework can break up the abstract definitions into their conceptual elements. This can help us understand the nature
of these definitions and how they vary in terms of their contents and boundaries. This can also help us clarify the meaning of definitions of PEA and make more explicit judgements about appropriate ways to define PEA.

2.2. Objective and research questions

To summarise, the objective of this chapter is to understand the nature, variation, and boundaries of abstract definitions of PEA. In doing so, the following research questions are addressed.

- What are the conceptual components and boundaries of abstract definitions of PEA?
- How do these definitions vary?
- How is PEA conceptualised in the literature overall?
- How does this help us select the appropriate definition of PEA?

2.3. Methodology

This chapter analyses abstract definitions of PEA. The aim is not to provide an exhaustive analysis of all definitions, but instead to describe and understand well-known examples of definitions from important sources. Definitions are developed for different purposes in different contexts and so the search strategy was organised around such different sources. It can thus be described as a non-exhaustive purposive search.

2.3.1. Inclusion and exclusion criteria

In order to be included in this chapter, the definitions of PEA had to meet the following two criteria.

(i) Abstract definitions – statements which explain the conceptual meaning of PEA

Many academic papers or reports describe what PEA means. As there is no agreed definition, the statements differ extensively in terms of the length and wording. In this chapter, these theoretical descriptions about PEA are defined as ‘abstract definitions’. The term is interchangeably used as ‘conceptual definition’ employed
by Baker (2009) and is set as a contrast to ‘operational definition’ which refers to someone’s judgment or decision-making on PEA in practice (see more details in Chapter 4 and Chapter 5).

Although this thesis distinguishes abstract from operational definitions, this distinction is not always clear cut. An operational definition is a combination of abstract definition with information on how to respond to situations meeting the definitional criteria. In other words, an operational definition includes within an abstract definition even if this is not clearly stated. There can therefore be a grey area where abstract definitions include a little information on use. Similarly, some definitions may describe themselves as operational definitions yet have little information on response to PEA and so hardly differ from abstract definitions.

For example, a UK study by Moran et al. (2002) reviewed the literature on the definitions of PEA and proposed a working definition which they described as an “operational definition” (p.219). However, the definition is included in this chapter (rather than Chapter 3 on operational definitions) because it does not provide thorough descriptions of professionals’ roles regarding PEA.

(ii) Language- available in English or Japanese
This chapter takes an approach to consider PEA as a global issue rather than focusing on specific national contexts. Due to practical constraints the abstract definitions considered are restricted to English and Japanese, which can be understood by the principal investigator.

Definitions may not be completely original to the authors quoted as they may be based upon the definitions of others. The identified definitions are included in the analysis unless they are known to be a complete copy of a previous definition.

2.3.2. Searching

Search sources
PEA definitions can be produced for and in different contexts. PEA definitions are often developed within the academic literature. However, there are also other types of abstract definitions developed for different purposes and included in this chapter as listed below.
1. Academic literature: which discusses the nature of PEA. It is important to understand how leading academics understand or suggest defining PEA.

2. Original research studies: which create and use definitions of PEA. The main topic of the chapter is not necessarily the definition of PEA. But when a study involves PEA, it is necessary to provide or create a definition of PEA in order to be clear what is being studied.

3. Definitions by major international and national (state or federal) level organisations that have made statements regarding PEA. There is a growing global consensus to protect children from PEA (e.g. United Nations, 1989). However, a strategy to protect children could differ depending on contexts and this might affect how PEA is conceptualised. Therefore, it is important to capture possible various definitions of PEA from both international and national contexts.

4. NGO, NPO, or charities. Some organisations are specialised in child safeguarding. For example, in the UK, charities have a long history of child protection since Victorian times and still play an important role in child safeguarding.

Academic literature and original studies were both searched in major electric databases (PubMed, Web of Science) and specific journals (Child Abuse and Neglect; Child Abuse Review; Child Maltreatment; Japanese Journal of Child Abuse and Neglect).

Official websites of major organisations as well as non-governmental organisations were directly searched. The websites were searched initially to identify official definitions of PEA. When there was no definition in the website, their databases were searched to identify publications which include the definition of PEA.

In addition, when relevant literature was identified, manual citation tracking was undertaken. Finally, Google and Google Scholar were searched to identify relevant literature which could have been missed by other searches.

The identified abstract definitions are listed in Section 2.4.
Search terminologies

There are various expressions used in the literature to describe phenomena which either fall within or clearly overlap the definition of PEA. In other words, and as mentioned in Chapter 1, various terminologies have been interchangeably used to refer to PEA.

Initially, Search string 1 was used search databases. However, it appeared that this strategy did not work well to identify relevant literature for some cases. When this happened, broader searches were undertaken using Search string 2.

- Search string 1: ((child*) AND (“emotional” OR “psychological”) AND (“abuse” OR “neglect” OR “maltreatment”)) AND (“definition” OR “meaning”)

- Search string 2: (child*) AND (“emotional” OR “psychological”) AND (“abuse” OR “neglect” OR “maltreatment”)

In terms of Japanese searches, the term ‘shinriteki gyakutai’, (‘psychological abuse’ in English) was used to refer to PEA.

2.4. The included abstract definitions

A total of 34 definitions were identified by the search and they are listed in Table 2-1. The majority (n=32) were from English sources and only a few definitions (n=2) were from Japanese sources.

Twelve definitions were identified from academic journals or books dealing with PEA or CAN. Five definitions were from original studies. Of these, there was only study for which the focus was to develop the definition of PEA (Barnette et al., 1991). Ten definitions were identified from international or national organisations, and 6 were from NGO, NPO or charities.

The most commonly used terminologies to refer to PEA was ‘emotional abuse’ (n=12), and this was followed by ‘psychological maltreatment’ (n=8).
As O’Hagan (1993) argued to separately define ‘emotional abuse’ and ‘psychological abuse’ and proposed two definitions in the literature, the analysis included both definitions.

Table 2-1: A list of the abstract definitions of PEA in the analysis (n=34)

<table>
<thead>
<tr>
<th>Authors/source (Alphabetical order)</th>
<th>Type of resources</th>
<th>The main terminology used to refer PEA in the literature</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Humane Association (n.d.)</td>
<td>NGO, NPO or charities</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Australian Institute of Family Studies (2012)</td>
<td>International organisations or national/state/federal government</td>
<td>Emotional maltreatment</td>
</tr>
<tr>
<td>Barnett et al. (1991)</td>
<td>Original study</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>Brassard, Hart &amp; Hardy (1993)</td>
<td>Academic literature on definitions</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>ChildLine (n.d.)</td>
<td>NGO, NPO or charities</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Doyle (1997)</td>
<td>Original study</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Garbarino et al. (1986)</td>
<td>Academic literature on definitions</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>Gavin (2011)</td>
<td>Academic literature on definitions</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Glaser (2011)</td>
<td>Academic literature on definitions</td>
<td>Emotional abuse and neglect</td>
</tr>
<tr>
<td>Hibbard et al. (2012)</td>
<td>Academic literature on definitions</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>Ike (2006)</td>
<td>Academic literature on definitions</td>
<td>Shinriteki gyakutai (psychological abuse)</td>
</tr>
<tr>
<td>Iwaniec (1995)</td>
<td>Academic literature on definitions</td>
<td>Emotional abuse and neglect</td>
</tr>
<tr>
<td>Kairys &amp; Johnson (2002)</td>
<td>Academic literature on definitions</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>Leeb et al. (2008) (Centers for Disease Control and Prevention)</td>
<td>International organisations or national/state/federal government</td>
<td>Psychological abuse</td>
</tr>
<tr>
<td>Reference</td>
<td>Type of Source</td>
<td>Topic</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------</td>
<td>-------</td>
</tr>
<tr>
<td>Martin &amp; Walters (1982)</td>
<td>Original study</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>McGee &amp; Wolfe (1991)</td>
<td>Academic literature on definitions</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>Ministry of Community Development, Youth and Sports (2005)</td>
<td>International organisations or national/state/federal government</td>
<td>Emotional and psychological abuse</td>
</tr>
<tr>
<td>MHLW (Ministry of Health, Labour, and Welfare-Japan) (n.d.)</td>
<td>International organisations or national/state/federal government</td>
<td>Shinriteki gyakutai (psychological abuse)</td>
</tr>
<tr>
<td>Moran et al. (2002)</td>
<td>Original study</td>
<td>Psychological abuse</td>
</tr>
<tr>
<td>Morelen &amp; Shaffer (2012)</td>
<td>Academic literature on definitions</td>
<td>Emotional maltreatment</td>
</tr>
<tr>
<td>NSPCC (n.d.)</td>
<td>NGO, NPO or charities</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>O’Hagan (1993)</td>
<td>Academic literature on definitions</td>
<td>Psychological abuse</td>
</tr>
<tr>
<td>Ontario Association of Children’s Aid Societies. (n.d.)</td>
<td>NGO, NPO or charities</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Prevent Child Abuse America (n.d.)</td>
<td>NGO, NPO or charities</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Prevent Child Abuse North Dakota. (n.d.)</td>
<td>NGO, NPO or charities</td>
<td>Psychological maltreatment</td>
</tr>
<tr>
<td>Schmitt (1978)</td>
<td>Academic literature on definitions</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>Skuse (1989)</td>
<td>Academic literature on definitions</td>
<td>Emotional abuse and neglect</td>
</tr>
<tr>
<td>UN Secretary General (n.d.)</td>
<td>International organisations or national/state/federal government</td>
<td>Emotional violence</td>
</tr>
<tr>
<td>UNICEF Innocenti Research Centre (2005)</td>
<td>International organisations or national/state/federal government</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>WHO (2002)</td>
<td>International organisations or national/state/federal government</td>
<td>Emotional abuse</td>
</tr>
<tr>
<td>WHO (2007)</td>
<td>International organisations or national/state/federal government</td>
<td>Emotional and psychological abuse</td>
</tr>
</tbody>
</table>
The definitional conceptual framework, which consists of eight components, described in Chapter 1 were applied to the identified definitions in order to unpack the abstract definitions into component level. Excel was used to make a data set.

The analyses were undertaken in two phases. First, the abstract definitions were examined in terms of each individual component in the conceptual framework. Second, the definitions were examined in terms of how the different components were combined.

2.5. Analysing individual definitional components

The first analysis unpacked the identified abstract definitions according to their definitional components.

*All proportions (%) shown in the results were calculated based on the all included definitions (100%; n=34).

2.5.1. Abuser

PEA cannot happen on its own. Rather, there is usually someone or something which is responsible for the abusive situation.

Reference to abuser in the data

One-fifth of the abstract definitions in the data made no mention of an abuser (20%; n=7). The absence of information on the abuser might imply a lack of awareness that abuser can be part of the definition of PEA, an assumption about who an abuser could be (such as a family member) or it might also suggest a deliberate choice not to specify the meaning of abuser in defining PEA.

The rest of the definitions referred to abuser but in different ways. First, many definitions defined abuser narrowly, indicating that abuser was someone who knows the child (65%; n=22). More specifically, abuser was referred to as ‘carer’ (or
caregiver, caretaker) or ‘parent’. Also, one definition referred to family context, suggesting that abuser is a member of family (UNICEF Innocenti Research Centre, 2005).

Second, there were definitions which left the meaning of abuser very broad (15%; n=5). For example, statements such as ‘adult’ (Garbarino et al., 1986) ‘perpetrator’ (Gavin, 2011; Moran et al., 2002) and ‘a person’ (Kairys & Johnson, 2002), suggested that a stranger could be an abuser.

Diagram 2-1: Different types of reference to abuser

Abuser - conceptual issues

**Relationship condition, residential status, and child care involvement**

Frequently, the abuser was specified as ‘parent’ or/and ‘carer’ in the data. The meaning of these terminologies can be further discussed based on the conceptual issues addressed in Chapter 1 (i.e. relationship condition; residential status; child care involvement).

First, one of the conceptual issues underlying between a parent/carer and the child is relationship condition. One’s relationships with the child can be explained either biologically or legally. It is often that biological and legal parent refers to the same person, and s/he is an immediate family member of the child. However, there are also cases when there are separate legal and biological parents. In some cases, both have some extent of responsibilities for the child. In other cases, one might take full responsibility for the child. Therefore, the degree or types of responsibilities of a parent could differ depending on circumstances of individual families or

Without reference of abuser 20%
With reference- narrow definition (e.g. parent/carer) 65%
With reference- broad definition 15%

**Diagram 2-1: Different types of reference to abuser**
legislation. This would affect the condition of who is an immediate family member or a family member of the child.

On the other hand, a carer can be anyone taking care of the child and does not require the legal or biological relationship with the child. Therefore, a carer can be a family member or even a non-family member.

Second element underlying between a parent/carer and the child is residential status. A parent often lives with the child but not always. For example, when there are two distinguished biological and legal parents, the child may live with one of them. Moreover, when parents are divorced, a child may regularly live with one and visit another occasionally.

A carer could also live with the child. For example, there might be a live-in carer for a child while the parents are working. Also, when a child lives in a child care home or other equivalent institution, carer would refer to a member of staff in the home.

Third element underlying between a parent/carer and the child is child care involvement. The parent(s) is usually responsible for taking care of their child, namely, being a parent often means being a carer. Nevertheless, there are circumstances when a parent is not a primary carer of the child. For example, one of the parents within a household might not be involved in child care at all. But s/he might still be involved in care occasionally or in a different form (e.g. financial assistance).

Similarly, a carer is not necessarily a parent of the child. The carer could be other family members (rather than a parent) or a non-family member (e.g. cohabitant of a parent), although they might be more likely to be an immediate family member.

The abstract definitions in the data did not specify the meaning of the terms ‘parent’ or ‘carer’. The use of these terms suggests that the abuser of PEA is someone who knows the child and have some degree of relationship with the child. As be seen, however, there is diversity in what kind of relationship exists between a parent/carer and the child.

*PEA and other forms of CAN*

The issue of who is responsible for abusive situation is relevant to not only PEA but
also other forms of CAN. However, the meaning of abuser might differ depending on which CAN we are talking about.

In regard to PEA, Glaser (2002) asserted that abuser is “almost invariably the primary carer and attachment figure for the child” (p.700). Indeed, this phenomenon was observed amongst more than half of the definitions of PEA in this analysis.

In contrast to PEA, other forms of CAN suggest different meanings of abuser. The abuser in sexual abuse is likely to be understood broadly involving any person or group (Gough, 1996a, 1996b). Physical violation by a parent (immediate family member) is often defined as 'physical abuse', but by teacher (non-family member) can be described as 'corporal punishment' or assault. Also, homicide by a stranger is usually considered as murder rather than 'child abuse' (Gough, 1996a). In contrast, homicide by an immediate family member might be seen as the result of escalation of physical abuse or neglect.

2.5.2. Abusive behaviour

PEA involves negative behaviour by an abuser, and behaviours could take various forms.

**Reference to abusive behaviours in the data**

Most of the abstract definitions (97%; n=33) in the data, except one (i.e. Martin & Walters, 1982), referred to abusive behaviours.

As already mentioned in Chapter 1, Garbarino et al. (1986) defined PEA as:

> “a concerted attack by an adult on a child’s development of self and social competence, a *pattern* of psychically destructive behavior” (p.8).

Garbarino et al. (1986) proposed to conceptualise PEA with five categories of abusive behaviour: rejecting; isolating, terrorising, ignoring, and corrupting. This is widely known as one of the earliest definitions, and it has been referred to or cited in PEA related literature (e.g. Brassard et al., 1986; Doyle, 1997; Hamarman & Bernet, 2000; Hamarman et al., 2002; McGee & Wolfe, 1991; Moran et al., 2000).
Initially, this current analysis attempted to conceptualise the abusive behaviours based on the five categories of Garbarino et al. (1986). However, it appeared that there were behaviours in the definitions in the literature which did not fit to these categories. Thus, additional categories were added and few of the names of categories were amended to expand or limit the meanings. First, four categories, ‘degrading’, ‘blame’, ‘discrimination’, and ‘exposure to violence’, were added. Second, ‘isolating’ was replaced as ‘control’. This is because isolating the child is considered as part of controlling, and it was identified that there were other ways to control children from the examination of the abstract definitions.

Table 2-2 presents examples of abusive behaviour identified in the data. Since the definition by Garbarino et al. (1986), it can be seen that the scope of abusive behaviour has expanded.

<table>
<thead>
<tr>
<th>Sub-categories of abusive behaviors</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degrading (New)</td>
<td>degrade/ denigration, insults, humiliation, ridicule</td>
</tr>
<tr>
<td>Blaming (New)</td>
<td>blaming, criticise, berate</td>
</tr>
<tr>
<td>Discrimination (New)</td>
<td>discrimination against, single out, comparison</td>
</tr>
<tr>
<td>Exposure to Violence (New)</td>
<td>Witnessing violation by an abuser on a third person, domestic violence</td>
</tr>
<tr>
<td>Rejecting (Garbarino et al., 1986)</td>
<td>rejection, spurning -WHO (2007) and WHO &amp; ISPCAN (2006) limits rejection as “non-physical forms”.</td>
</tr>
<tr>
<td>Control (Replaced ‘isolating’ from Garbarino et al. 1986)</td>
<td>Isolating; demand too much from a child</td>
</tr>
<tr>
<td>Terrorising (Garbarino et al., 1986)</td>
<td>terrorising, threatening, frightening</td>
</tr>
<tr>
<td>The lack of appropriate response (Replaced ‘ignoring’ by Garbarino et al., 1986)</td>
<td>inappropriate emotional response, emotional unavailability, unresponsiveness</td>
</tr>
</tbody>
</table>
As it can be seen, a number of different forms of abusive behaviour were identified. The complexity of abusive behaviour can be explained by, first, the use of language. There were usually slight differences in how specific forms of behaviour, which could belong to the same category, were mentioned across definitions (e.g. ‘humiliate’ and ‘insults’ were both categorised under the ‘degrading’ in this analysis). Second, multiple forms of behaviours were often included in one definition. As Baker (2009) noted, however, there is not agreement about which behaviours should be involved in the definition of PEA.

**Abusive behaviour - conceptual issues**

As the literature indicates, various behaviours are illustrated in the definitions of PEA. Based on the issues raised in Chapter 1, we can further investigate the nature of these definitions.

**Act of commission vs act of omission**

As Chapter 1 highlighted, the abusive behaviour could be either active or inactive. Explicitly or implicitly, the abstract definitions were likely to refer to both active and neglectful behaviour (88%; n=30). This result is consistent to Glaser (2011) who argued to define PEA based on both.

The rest of the definitions either did not refer to abusive behaviour at all (2%; n=1) or referred to abusive behaviour but the information did not allow us to identify both active and inactive behaviours (8%; n=3).
The phenomenon to involve both acts of commission and omission might be unique to PEA. Other forms of CAN are likely to refer to one of these. For example, sexual abuse and physical abuse are often considered acts of commission. Neglect usually refers to acts of omission, though it is possible to have an active strategy to be neglectful.

**Psychological vs non-psychological**
As already mentioned, McGee and Wolfe (1991) raised the issue of whether abusive behaviour of PEA should be psychological in nature or could involve non-psychological behaviours. In regard to this, some theorists explicitly suggested to frame the definition of PEA in terms of non-physical abuse (Glaser, 2011; Ike, 2006; McGee & Wolfe, 1991).

Nevertheless, the concept of whether certain potentially emotionally abusive behaviour is psychological or non-psychological can be ambiguous. For instance, when a parent pretends to hit the child with physical gesture to threaten him/her, although not directly, there is some degree of physical as well as emotional act. Another example is locking the child in a small space for a long time of period. This act can be considered as physical based on the fact that the child’s physical movement is restricted even though it could be argued that there is no direct physical action toward the child.

Considering these potential ambiguities in terms of the meaning of ‘psychological’ or ‘non-psychological’ of abusive behaviours could help to clarify the definition of other forms of CAN. In that way, the boundary of different forms of CAN may become clearer.
**Direct vs indirect**

Another conceptual distinction of abusive behaviour is whether it takes a direct or an indirect form.

In general, most of the definitions did not stipulate whether a certain behaviour takes a direct or an indirect form. But they were usually focused on abusive behaviours which are often interpreted as taking a direct form, from abuser to child (such as blaming, humiliating, rejecting), rather than an indirect form of abuse/neglect.

In contrast, some definitions explicitly involved indirect forms of PEA. For instance, witnessing someone else (e.g. sibling, partner of abuser) experiencing PEA or any type of CAN has been also perceived as PEA. Interestingly, indirect forms of abusive behaviour were likely to be referred to in definitions by NGOs, charities, or national/international organisations (e.g. NSPCC, n.d.; ChildLine, n.d.; Prevent Child Abuse North Dakota, n.d.; WHO, 2007).

The concept of indirect forms of abusive behaviours could provide insight of the situation of PEA which is especially useful in practice. One aspect is the relationship of the child and the abuser. One of the examples of indirect form of PEA is Domestic Violence (DV). When there is an identified case of DV and there are other family members such as children within the site, the potential existence of PEA is considered.

The aspect of indirect forms of abusive behaviour may be unique to PEA. Other forms of CAN usually focus on direct form of behaviour from abuser to child or acts of omission to the child. For example, a child not being protected from viewing sexual behaviours may be defined as sexual abuse, but this may be partly because of the PEA that this involves. Therefore, it can be seen that the nature of abusive behaviours of PEA is a particularly complex form of CAN to define.

**Factors influencing the standards of what is or what is not appropriate**

The common nature of abusive behaviours in the data is negative behaviour. It might seem obvious that the behaviours, shown in Table 2-2, are abusive or inappropriate. Nevertheless, in practice, conceptualising what is acceptable and what is unacceptable behaviour is a difficult task.

As stated in Chapter 1, the standards about what is normal or abnormal behaviour may be influenced by factors such as personal experience, culture, or historical
times. The abstract definitions in this analysis did not directly refer to those aspects. However, the data demonstrated that there were a greater number of abusive behaviours than the five categories of abusive behaviours by Garbarino et al. (1986). This implies that the forms of behaviours which are perceived as abusive has broadened since the 1980s.

2.5.3. Intention

PEA might be underpinned by some sort of motivation by an abuser.

Reference to intention in the data

As McGee and Wolfe (1991) stated, the majority of the definitions do not refer to intention (74%; n=25). That is, only a small proportion of the definitions (26%; n=9) addressed the idea of intention. The reference of intention can be grouped into three types. First, there were definitions which clearly stated that intention was not a necessary component of PEA definition (15%; n=5). Moran et al. (2002) consider potential risks in relation to intention. The author asserts that with or without abuser’s intention, a child is equally exposed to risks, therefore, they consider that the abuser’s intention is not an essential component of PEA.

On the other hand, some definitions provide different reasoning. Ike (2006) acknowledges the clinical importance of the abuser’s intention. However, the author suggests defining PEA regardless of intention primarily because it is difficult to objectively judge the existence of intention. McGee and Wolfe (1991) state that intention is important morally and legally but argue that PEA must be defined based on abusive behaviour, excluding intention, for research purposes. It can be seen that these authors understand the importance of intention but prioritise the practical use and propose that intention is not a compulsory component for defining PEA.

The second type (6%; n=2) suggests that intention is a necessary element of PEA. The Centers for Disease Control and Prevention describes PEA as “intentional caregiver behavior…” (Leeb et al., 2008). Garbarino et al. (1986) defined PEA as “a concerted attack by an adult...”. Although there is no explicit term of intention, the expression ‘concerted attack’ seems to indicate that PEA is a planned act which is closely linked to intentional behaviour. Neither paper specifies what intention means, either intention to be abusive or be harmful to the child.
The third type refers to intention only for a particular form of abusive behaviour or partially (6%; n=2). According to Gavin (2011), “aggression can also be indirect, taking the form of criticism, advice, or help, but with the intent to belittle and control the recipient” (p.57). NSPCC (n.d.) stated that “emotional abuse can involve deliberately trying to scare or humiliate a child or isolating or ignoring them”. Both definitions refer to intention but do not state that the existence of intention is a compulsory element of PEA. This approach can be confusing because the lack of specification could result in different interpretations.

In addition, the nature of intention is ambiguous. It seems Gavin (2011) refers to abuser’s intention to be abusive, but it is not explicit. The definition by NSPCC (n.d.), on the other hand, implies that it refers to the intention to have a negative impact on the child.

Diagram 2-3: Different types of reference to intention

The results demonstrate that there is a disagreement about inclusion or exclusion of intention as a component to define PEA. The disagreement seems to be underpinned by the definitional purposes depending on discipline.

**Intention- conceptual issues**

*The nature of intention*

Chapter 1 (Section 1.2.3. (iii)) distinguished different types of abuser’s intention – (i) intention to be abusive and (ii) intention to harm the child. The data, however, did not show explicit distinctions of different types of intention. There were few definitions which inexplicitly referred to types of intentions (e.g. Gavin, 2011).
**Further complexities of intention**

There could be situations when intention is clear, for example, when the abuser admits his/her intention to harm the child. However, it is often difficult to understand the existence of intention (Ike, 2006). The difficulty can be explained by an ambiguous definition of abuser’s intention. Thompson and Jacobs (1991) state that PEA occurs “in the context of trying to parent, and when psychological abuse is concerned it is likely to happen unknowingly or non-reflectively” (p.98). Hamarman and Bernet (2000) also consider that PEA is unlikely to be committed intentionally. Even if there was intention, however, it can be forgotten or denied by abuser. That is, it is almost impossible to understand the actual intention by third person if there is no verbal confession by the abuser.

Regardless of the difficulty of identification, intention plays an important role in some contexts. One explanation is based on consequences, namely, recipient’s perception. The entity of intention does not necessarily correlate with the feelings of the child. McGee and Wolfe (1991) think that the child’s perception of intention will strongly affect the impact of abusive behaviour. Indeed, the concept of intention can be affected by how child interprets or feels about the situation. For example, abuser could say something horrible without intention, but child could perceive it as a spiteful act motivated by intention to hurt him/her. Then, the child might feel worse than if interpreting the action as not motivated by certain intention. ChildLine (n.d.), which defines PEA from a child’s perception, deny the importance of intention. The implication here is that child’s perception is considered as important to protect children from PEA.

Another explanation is based on the legal context. Copperthwaite (2013) examined the criminal law in relation to PEA across 31 jurisdictions (samples were selected from Europe, Asia, North America, Africa and Australia). The author reported that the majority of the jurisdictions (25 out of 31), covered the area of PEA, that is, it was criminal offence to emotionally or psychologically abuse/neglect the child. Among these, it was common phenomena to refer to perpetrator’s intention (or means rea e.g. ‘wilfully’, ‘intentionally’) in the law.

Moreover, Hamarman and Bernet (2000), which deals with PEA in clinical context, suggested measuring the ‘severity’ of PEA based on ‘intention’ and ‘harm’ adopting an approach taken in legal context. The authors stated that the entity of intention should be judged by specialists such as psychiatrists, mental health professionals.
and child protection practitioners. This probably reflects the complex nature of intention which requires extensive knowledge, experience, and access to the information of the child as well as the abuser to make a rigorous judgement. Hence, the practicality of this approach to be used by any other group of individuals (other than specialists mentioned above- e.g. other practitioners as well as the general public) is questionable because of lack of access to information or technical skill to judge intention. This may be why some (e.g. Ike, 2006; McGee & Wolfe, 1991; Moran et al., 2002) suggest defining PEA regardless of intentionality.

### 2.5.4. Frequency

When something happens, there is always a matter of how often it is occurring. PEA can be one-off event or be repeated twice, three times or even more frequent.

**Reference to frequency in the data**

The majority (68%; n=23) involved frequency and these all referred to its high frequency. Consistent with Glaser (2011) referred in Chapter 1, there were two types of approaches regarding frequency of PEA.

First, most commonly, the definition of PEA was only referred as repetitive (47%; n=16). Nevertheless, the nature of repetitiveness was differently elucidated across the definitions. One type was to refer repetitiveness as part of the entire concept of PEA, suggesting that it is always a necessary component of PEA (24%; n=8). Another type was to refer to the repetitive nature only in relation to certain forms of abusive behaviour (24%; n=8). For example, frequency was mentioned with certain forms of behaviour such as verbal abuse/neglect (ChildLine, n.d.; Ontario Association of Children’s Aid Societies, n.d.; Australian Institute of Family Studies, 2012), neglectful behaviour (Australian Institute of Family Studies, 2012), scapegoating and rejection (Schmitt, 1978), or over-expectation of achievement (Prevent Child Abuse North Dakota, n.d.). These definitions imply that the behaviours need to be repetitive to be considered as PEA. However, it is unclear whether frequency should be a part of the definition of PEA for other forms of abusive behaviours. In other words, there is ambiguity about whether frequency is seen as definitional component of PEA.
Second, other definitions referred to not only high frequency but also one-off situations (21%; n=7). Nevertheless, there were two different approaches to single events. One was to treat any single event to be considered as PEA (9%; n=3) (Moran, 2002; WHO, 2007; WHO & ISPCAN, 2006). That is, this approach considered PEA regardless of its frequency. In other words, single or repeated incidents are equally perceived as PEA. Another approach was taking the degree of severity of PEA into account (12%; n=4). For instance, Ike (2006) and Ministry of Community Development, Youth and Sports (2005) only defined single events as PEA when the case was severe or extreme. Kairly and Johnson (2002) explained that “contentious divorce” as an example which could end up being PEA because this is “a very painful” experience for the child which usually changes the structure of household and subsequent pattern of daily life (ibid, p.1). Divorce is an event, but the experience may continue over an extended time. In this way, a potential adverse effect on the child as a painful experience is due to the entire process rather than an event at a narrowly specified time.

Diagram 2-4: Different types of reference to frequency

Commonality between Glaser (2011) and this current analysis can be summarised as follows.

1. Both demonstrated the two types of definitions of PEA (i) which refer to only frequency and (ii) which refer to repeated and single events.
2. There was no definition which only considered one-off events as PEA.
3. There was a phenomenon to emphasise the repetitive nature of PEA.

Overall, this analysis has added evidence which brought further details about the nature of frequency pointed out by Glaser (2011).
**Frequency- conceptual issues**

*Abusive behaviours vs consequences*

Chapter 1 pointed out that the definition of PEA is addressed with abusive behaviours or with consequences. The abstract definitions in this analysis always refer to frequency in relation to abusive behaviours rather than consequences. McGee and Wolfe (1991) asserted that the definition of PEA does not have to involve frequency at the theoretical level. If this is true, the explicit reference of high frequency in more than half of the definitions in this analysis suggests that this is likely to be taken into account in practice.

*PEA and other forms of CAN*

The emphasis of high frequency amongst the definitions of PEA is interesting, because other forms of CAN can be treated differently and seen as serious even if they are one off events.

On the other hand, for physical abuse, there could be complexities depending on the circumstances. The circumstances can be conceptualised with the relationship between frequency and consequences. For example, a single physical abuse which results in severe injury can be identified relatively easily by anyone. Another example is repetitive physical hitting. An individual hitting may not be severe enough to cause visible injury and the child is get used to it and do not feel anything. Is this abuse? This example is more or less similar to PEA which does not result in immediate adverse effects on the child.

*Further complexity of frequency*

One issue of frequency is that it is difficulty to monitor. Generally speaking, the lower the frequency is, the less likely PEA is observed. Even when PEA is repeated, it may be difficult to be spotted by the same individuals. Additionally, even when PEA appears to be single event to an observer, it is possible that PEA is actually or will happen over time. We can never exclude the possibility that PEA will happen again. Hence, a single event should be also alerted as part of PEA. This way of thinking might be a routine for certain professional groups, for example, primary investigators at the police. However, from examining how the national professional guidelines are organised (Chapter 3), it is probably not a common way of thinking for other professional groups.

Another issue of frequency is the difficulty in measuring PEA. There are often multiple damaging interactions within a child-parent relationship (Glaser, 2011).
That is, there are possibilities that different forms of PEA occur and accumulate within the same relationship. Indeed, children are likely to experience more than one form of PEA (Trickett et al., 2009). When PEA is repeated with slightly different forms, it would become more difficult to measure its frequency.

2.5.5. Interaction

When there is PEA, there are usually at least two people involved in the situation – the abuser and the abused. In between these two, there would be a relationship. The relationship involves various aspects. One of them is an interaction which refers to interactive communications inclusively.

Reference to interaction in the data

Few definitions suggested (11%; n=4) defining PEA as interactions (or communications) between the abuser and the child.

An adaptation of the approach by Glaser (2011)

Glaser (2011) has established a conceptual framework (FRAMEA) to understand PEA with five tiers of child-carer interactions. Glaser’s approach (which is discussed in other publications including Glaser (2002) and Glaser & Prior (1997)) has been referred to and adopted by Kairys and Johnson (2002) and Hibbard et al. (2012). The commonality among these authors is the emphasis that PEA is persistent so that it eventually becomes a part of the ‘relationship’ between the child and the abuser.

Interaction- conceptual issues

Non-verbal vs verbal

As stated earlier, McGee and Wolfe (1991) used the term “communications” (p.10). The authors state that communications can take a non-verbal form. As an example of non-verbal form of abusive situation, the following situation was illustrated.

- the parent destroys the child’s toy and forces the child to see it.

The author asserts that the interpretation of this communication is “I hate what you value” (p.10). This suggests thinking about the message delivered by certain behaviours to the child. However, the message could certainly differ depending on the situation or the child.
Considering the definitional component of abusive behaviour (Section 2.5.2.), explicitly or inexplicitly, it often involved verbal actions even if it was the verbal behaviours emphasised in the definitions. An example of non-verbal behaviours identified in this analysis was ‘domestic violence (DV)’. Indeed, DV could take not only verbal but also non-verbal forms (e.g. witnessing physical violation).

**PEA and other forms of CAN**

Interaction can be an aspect of all CAN. Nevertheless, as far as this current author is aware, other types of CAN do not refer to interaction in relation to their definitions. This might be one aspect of PEA that differentiates it from other forms of CAN, though other forms of CAN such as sexual abuse and neglect could also potentially be framed as having relational components.

It is widely known that PEA does not always leave visible evidence (Daro, 1988; Iwaniec, 1995; Wright, 2007). In contrast to PEA, other forms of CAN, such as physical abuse or sexual abuse, may be easier to identify through physical evidence (though of course this can still be very difficult). When there is obvious evidence, there is probably no need to observe the interaction.

This is one reason that Glaser and other authors see interaction or communication as key aspects of PEA and also argue that it provides the type of evidence to indicate PEA – rather than the physical evidence used for other types of CAN.

**Further complexities of interaction**

It is argued that the advantage of this approach is that interactions are observable (Glaser, 2011; McGee & Wolfe, 1991). Indeed, interactions can be more observable than abusive behaviour. However, they are not always observable. In particular, there would be different level of access to child-carer interactions depending on the observers’ position. For instance, mental health clinicians might have more access than police officer or physicians. Regardless of the different level of accessibility to observe PEA, it is important to note that observing the situation as a ‘continuum’ is an important approach in order to understand the situation.

Moreover, the ‘interaction’ approach enables PEA to be understood broadly and inclusively. That is, the concept of interaction closely relates to other definitional components. For example, interaction would involve abusive behaviour and subsequent reaction of the abused child, namely, consequences. Also, other elements such as frequency and intention can be considered to construct interaction.
2.5.6. Consequences

PEA may involve some form of negative effects on the child.

Reference to consequences in the data

The majority of definitions (94%; n=32) referred to negative impact. Nevertheless, as stated by Gough (1996a) and Hutchison (1990), various types of consequences were identified in the data.

This current analysis used the three groups of consequences of general psychological harm by Baker (2009), developmental function and self-perception. The data for this analysis also included behavioural effects and so this was added as fourth category as shown in Table 2-3 alongside examples from the data.

Table 2-3: Examples of sub-types of consequences: conceptualisation based on Baker (2009, p.706)

<table>
<thead>
<tr>
<th>Sub-categories based on Baker (2009)</th>
<th>Examples</th>
</tr>
</thead>
</table>
| (i) Psychologically harmful or damaging to the child | -“emotional abuse is any kind of behavior that is designed to psychologically subjugate, control, or harm the recipient. As such, it can erode self-confidence, sense of self-worth, and self-concept” (Gavin, 2011)  
-“It impairs emotional development, that is, the child’s continuing ability to experience an increasing range of emotions, to regulate and modulate emotional experiences, and to express them appropriately”. (O’Hagan, 1993 [emotional abuse])  
-“emotional maltreatment involves parental acts that thwart children's basic emotional needs.” (Barnette, 1991)  
-“Hostile or indifferent parental behaviour which damages a child’s self-esteem, degrades a sense of achievement, diminishes a sense of belonging, prevents healthy and vigorous development, and takes away a child’s well-being.” (Iwaniec, 1995)  
-“Psychological maltreatment occurs when a caregiver's pattern of behavior, whether through action or inaction, creates psychological hurt for a child.” (Prevent Child Abuse Dakota, n.d.) |
(ii) Something that harms the child's development in one or more functional areas
-“can seriously damage a child’s emotional health and development” (NSPCC, n.d.)
-“These have potential for damaging the social, cognitive, emotional, or physical development of the child” (Moran et al., 2002)
-impact on physical development (WHO, 2007; WHO & ISPCAN, 2006)

(iii) Something that affects the child’s perception of him or herself
-“Emotional abuse is a pattern of behaviour that attacks a child’s emotional development and sense of self-worth.” (Ontario Association of Children’s Aid Societies, n.d.)
-“Psychological maltreatment refers to a repeated pattern of parental behavior that is likely to be interpreted by a child that he or she is unloved, unwanted” (Hibbard, et al. 2012)

(iv) Behavioural impact
-“..disturbances in the child’s behaviour resulting from the adult’s persistent hostility, ignoring, blaming, discrimination or blatant rejection of the child” (Ministry of Community Development, Youth and Sports (2005)
-“Severe psychopathology and disturbed behaviour in the child documented by a psychiatrist.” (Schmitt,1978)
-“Such acts damage immediately or ultimately the behavioural, cognitive, affective, or physical functioning of the child” (International Conference on Psychological Abuse of Children and Youth, 1983)

One of the key issues observed from the data was to what extent consequences were perceived as an integral part of PEA.

First, only one definition stipulated that impact on the child is not a necessary element to define PEA (2%; n=1). Ike (2006) proposed to define PEA solely on abusive behaviour regardless of its consequences. The author argues it is not necessary to wait until negative consequence appear, and early action could prevent or minimise the adverse effect on the child.

The second approach was, explicitly or inexplicitly, to imply that consequences are necessary to define PEA (56%; n=19). For example, Gavin (2011) defined PEA as “any kind of behaviour that is designed to psychologically subjugate, control, or harm the recipient” (p.507). According to Garbarino et al. (1986), PEA is “a concerted attack by an adult on a child’s development of self and social competence” (p.8). In
this way, both authors specify the meaning of abusive behaviour based on the subsequent harm on the child as well as the intention to produce that outcome.

The third approach was to imply that consequence is an optional part of PEA (35%; n=12). For example, WHO and ISPCAN (2006) states that PEA has high probability to harm a child’s development. In addition, McGee and Wolfe (1991) suggested restricting the meaning of consequence as “potential damage” not as “observable harm” which introduces the concept of risk. This approach relates to the issue of whether consequence is actual or potential which was addressed in Chapter 1. This aspect is discussed further below.

Diagram 2-5: Different types of reference to consequences

Consequences - conceptual issues

Psicological or non-psychological
As discussed in Chapter 1, one of the issues of consequences is whether they refer to psychological and/or non-psychological aspects.

As indicated in Table 2-3, the nature of consequences in the abstract definitions were predominantly ‘psychological’. In contrast, only a few definitions referred to the impact of physical development (e.g. WHO, 2007; WHO & ISPCAN, 2006).

The controversy here is whether psychological effects which are caused by other forms of CAN (e.g. physical abuse, sexual abuse) should be also considered as PEA or not. In regard to this, Ike (2006) proposed to limit PEA to non-physical consequences for the child. On the other hand, there were authors who perceive
other forms of CAN as part of PEA (e.g. Prevent Child Abuse Dakota, n.d.; Skuse, 1989). From these, it can be seen that there is no agreement about the boundary about the nature of effects of PEA.

**Actual vs potential**
Another conceptual issue raised in Chapter 1 was whether the effects of PEA should be actual or potential.

As stated, most definitions involved consequences, but it was not clear whether the statements meant to be actual harm. In contrast, some definitions referred to potential harm. Examples are shown below.

- WHO (2007) - “potential to damage…”
- McGee & Wolfe (1991) - “possibility to harm…”
- Moran et al. (2002) - “potential for damaging…”

The problem is how we should predict or assess potential consequences which could differ depending on the child or circumstances. Children can be affected by PEA differently depending on the circumstances as well as their individual differences (Baker, 2009). Some children may be more resilient to PEA than others and vice versa. For example, some may suffer from severe mental health problems due to PEA. On the other hand, others may not suffer from anything (Garbarino, 2011). Moreover, there is difficulty in assessing the relationship between PEA and its consequences. What seems to be caused by PEA can be a result of other incidents or the inherent nature of the child.

The concept of ‘potential’ harm can be ambiguous, and the judgement heavily relies on the observer’s perception. Nevertheless, unlike actual harm which requires evidence to justify, potential harm does not have to wait until the adverse consequences appear (Glaser, 2011). In this sense, the concept of potential harm could protect children from violation of their rights. Similarly, sexual abuse can be seen as abuse in terms of infringement of rights even without physical, psychological, or social consequences.

**Time-lines of appearance of adverse effect**
As shown in Chapter 1, Belsky (1991) suggested that it might be necessary to consider “immediate pain, it causes the child and its potential for lasting harm (p.33)”
in defining PEA. This statement addresses an issue that adverse effects could emerge at different times.

First, a child can be affected immediately. Although Belsky (1991) did not specify the meaning of immediate, in the phrase “immediate pain”, it is assumed that immediate refers to situations just after the abusive behaviour takes place. Usually, the abuser and the abused are still present in the same space. For example, immediate or later effect could include how a child feels about the abusive situation. ChildLine (n.d.) states that when the child feels sad or upset as a result of certain behaviour, the behaviour is wrong, and the situation can be defined as PEA. The Centers for Disease Control and Prevention (Leed at al., 2008) asserts that PEA “conveys to a child that he/she is worthless, flawed, unloved, unwanted, endangered, or valued only in meeting another’s needs”.

Second, there might be no immediate effect, but negative consequences could gradually emerge during childhood, adolescence, or even adulthood. Victims might experience negative consequences in terms of health, development, and behaviour as, for example, those described in Table 2-2 earlier. Most importantly, victims might suffer with not only short-term but also long-term effects (Doyle, 1997; International Conference on Psychological Abuse of Children and Youth, 1983). Also, there are some indications of the persistent impact of PEA. Prevent Child Abuse America (n.d.) states that even visible scars fade away, emotional scars could last for a long time. It further argues that long-lasting PEA results in a huge economic impact on society including hospitalisation, mental health treatment, and foster carer services.

Social effects
The findings demonstrated that the data were predominantly about the clinical impact on the child. Social effects of PEA (e.g. infringement of children’s rights, stigmatisation), which were discussed in Chapter 1, were not referred to in the data.

As discussed in Chapter 1, social effects are often addressed in sexual abuse. This means that there is a phenomenon that sexual abuse is defined regardless of the existence of its consequences. Considering this, the emphasis of the clinical impact of PEA might imply that PEA is considered to require evidence. Or, clinical consequences may be at least seen as an important part of PEA.
2.5.7. Child age

PEA could affect a child differently depending on the child’s age and level of development.

Reference to child age in the data

Although there was no clear statement of child age within the definitions, one definition (3%; n=1) referred to child age in relation to consequences of PEA. According to O’Hagan (1995, p.458), “psychological abuse impedes and impairs the child’s developing capacity to understand and manage her environment to the degree that age and development should normally enable her to understand and manage it” (Leeb et al., 2008). This shows that the two concepts ‘age’ and ‘development’ are closely related. However, it is important to note that child development, both emotionally and physically, differs from child to child. Therefore, child development does not always correlate to the age of the child. Nevertheless, age is one of the indicators to understand the level of child development.

Child age - conceptual issues

**Social context**

There was no definition which explicitly stated the meaning of ‘child’ within the abstract definitions of Chapter 2. A possible explanation is that definitions are taking into account potential various contexts. For example, the drinking age and voting age differ widely depending on jurisdictions. Therefore, the literature, which is usually not complementary to specific legal context, might avoid specifying the meaning of child. By doing this, the definition is theoretically flexible enough to be adopted not only by researchers but also by any jurisdictions without legal limitations.

Another explanation is due to the evolving concept of what is a child. As it was pointed out in Chapter 1, the concept of children was different in the past. For instance, the Japanese child abuse prevention law in 1933 defined children as those who are under 14 years old. In comparison to this, the Japanese Child Abuse Prevention Law of 2000 defines children as those who are under 18, the same as UNCRC. This shows that the concept of children has changed over the decades even within the same culture. Because of the possibility of alteration of the concept, it might be considered as meaningless to specifically define child age in the definitions of PEA.
Considering child age in relation to abusive behaviours and consequences

As discussed in Chapter 1, the same form of abusive behaviour could have a different meaning depending on the age of the child, and it could then result in different effects on the child.

This feature is not exceptional for PEA. Straus et al. (1998) developed the Parent-Child Conflict Tactics Scales (CTSPC) whose purpose was to measure CAN by parents and nonviolent discipline. They undertook a survey with a national representative sample of the US. According to the study, spanking infants is uncommon, spanking toddlers is almost universal, and slapping adolescents is common but not universal. In addition, the author provides an example of relationship between child age and effects - shaking infants can be seriously damaging, but shaking older children is unlikely to result in severe injury (ibid).

2.5.8. Child’s other characteristics

In addition to child age, there might be other features of children who experience PEA.

Reference to child’s other characteristics in the data

The examination of the abstract definitions did not identify any references within the selected definitions to other child characteristics as being integral parts of PEA definitions.

Child’s other characteristics- conceptual issues

As already discussed in Chapter 1 (Section 1.2.3. (viii)), the nature of a child may influence the meaning of PEA. Child characteristics may influence both the occurrence and identification and attribution of PEA. Some authors referred to vulnerable groups of children. Characteristics such as difficult behaviours (Garbarino et al., 1986; Glaser, 2011), low IQ (McGee & Wolfe, 1991), and disabilities (O’Hagan, 1993) are considered to make children vulnerable to PEA. However, there was no definition which considered other child characteristics to be an integral part of PEA.

There are some studies which explore the relation between certain nature of children and PEA. Spencer et al. (2005) undertook a cohort retrospective study to investigate the relationship between disabling conditions and registration for CAN
(including PEA) in the UK. This study identified that children with speech and language disorders and mild learning difficulties were more likely to registered under the category of PEA. Sullivan and Knutson (2000) examined prevalence rates in child protection services in Nebraska. According to this study, children with disabilities were 3.88 times more likely to experience PEA than children without disabilities. Children with visual impairment were twice more likely to experience PEA than children without disabilities. Children with speech and language impairments are nearly seven times at the risk of PEA, and children with health-relevant disabilities are three times more likely to experience PEA (ibid). These studies imply that the characteristics of children can be risk factors of PEA.

Another crucial aspect is that identification, reporting, and intervention of PEA could be potentially influenced by the characteristics of the child. There is some evidence illustrating that perpetrators are perceived as less responsible when victims are reported to be provocative. Broussard and Wagner (1988) examined the impact of child characteristics on the attribution of the child’s responsibility and the perpetrator in the context of sexual abuse, by undertaking vignettes amongst 360 undergraduates. This study found that children who were described as “encouraging” were more likely to be seen as responsible for sexual abuse than those who were described as “passive” and “resisting” (ibid). Muller et al. (1993) also conducted a vignette study amongst 897 undergraduate students in the US to investigate factors which contribute to blaming attributions towards victims of child physical abuse. This study identified that aggressively provocative children were more likely to be blamed than nonprovocative children (ibid). Such a phenomenon could also happen in the case of PEA.

2.5.9. Summary of findings – analysing individual definitional component

Applying the conceptual framework to the definitions in the literature has made explicit the ways in which the definitions differs from each other. Some shared the same basic approach and distinctions but differed in terms of the specifics. Others, on the other hand, had different ideas and disagreed about how to define a specific component. It was not always clear if differences were due to lack of explicit specification on definitional components or disagreements in how PEA should be defined.
The analysis of each component has brought important insights to PEA definitions which have been understood as ambiguous. That is, the ambiguity has been revealed by the component analysis. In addition, the definitions of PEA vary in terms of a combination of definitional components. That is, a component was involved in one definition, but not being referred in another definition. This aspect is further investigated in the analysis in the next section (Section 2.6).

2.6. Analysing across definitional components: cluster analysis

So far, the current chapter has mostly examined each component of the abstract definitions individually. In this section, the definitions are examined together to provide an overall picture of PEA definitions. Cluster analysis was undertaken in order to observe the combinations of definitional components which construct the definitions of PEA.

2.6.1. Data set

Seven out of eight definitional components (abuser; abusive behaviour; intention; frequency; interaction; consequences; child age) were included in the analysis across the components. The variable child’s other characteristics was excluded because there was not sufficient information regarding this aspect in the data.

Information about whether the components were included in each of the definitions was coded in binary form (1 or 0) as present or not in Excel. The specific criteria for the coding are described below.

- **Abuser**: (1) the definition of abuser includes parent, carer, or refers to family setting; (0) others (including when there is no reference about abuser)
- **Abusive behaviour**: (1) abusive behaviour has an implication of or refers to inclusion of active behaviour and neglectful behaviour; (0) others
- **Intention**: (1) intention is considered as necessary criteria; (0) others (including when there is no reference to intentions)
- **Frequency**: (1) repetitiveness is considered to be necessary to define PEA; (0) others (including when there is no reference to frequency)
- **Interaction**: (1) interaction is considered to be necessary to define PEA; (0) others (including when there is no reference to interaction)
2.6.2. Procedure
In order to examine the diversity and common patterns across the sample of PEA definitions, cluster analysis was undertaken using SPSS 24.

Cluster analysis was used to identify ‘groups’ of definitions in terms of having a similar balance of emphasis on the key definitional focuses (abuser; abusive behaviour; intention; frequency; interaction; abuse consequences; child age).

2.6.3. Results
The results of the hierarchical cluster analysis are shown in Diagram 2-6 in the form of a dendrogram (tree diagram). The longer the horizontal distance across which the number of groups remains the same, the more objectively justifiable is a solution based on that number of groups.

The diagram suggests that the number of groups (types of definitions) could be reasonably set at three. We can use this information about natural groupings in the definitions to identify the relevant groups. Diagram 2-7 shows the combinations of references to each of the seven coded variables among the three groups of definitions.

Three clusters
Group A consists of the total number of 13 definitions. All the definitions in Group A refer to ‘abuser’ (as someone close to the child), ‘abusive behaviour’ (both active and inactive), ‘frequency’ (as repetitive), and ‘consequence’. From these, it can be seen that Group A showed a very clear pattern in the combination of definitional components.

Group B consists of 10 definitions. All the definitions in Group B refer to ‘abusive behaviour’ and ‘consequences’. Also, repetitive nature of ‘frequency’ was often
referred to (n=8). The significant difference from Group A is that the majority (n=9) did not specify the meaning of abuser as someone close to the child.

**Group C** consists of 11 definitions. Most of them involved ‘abuser’ (n=8), ‘abusive behaviour’ (n=7), and ‘consequences’ (n=8). Unlike other two groups, the majority of Group C did not refer to the nature of ‘frequency’ as repeated acts.

Group A: abuser, abusive behaviour, frequency, consequence
Group B: abusive behaviour, consequence (not mentioning the abuser as close to the child)
Group C: abuser, abusive behaviour, consequence

**Comparison of three identified clusters**

The main characteristics which distinguish these three groups can be summarised as follows. First, **Group A** has a very clear pattern in combination of definitional components (i.e. abuser, abusive behaviour, frequency, consequences).

Second, the inclusion or absence of reference to the ‘abuser’ (as someone close to the child) is a key distinction across the three groups. This means that the majority of Group A and Group C consider PEA as interfamilial issue, but Group B does not. This difference is significant because considering PEA as interfamilial issue or as something which could occur outside of the family setting affects the entire concept of the definition of PEA. For example, bullying by a teacher in a school setting does not fit to the definition which takes an interfamilial approach and cannot be considered as PEA, but it could be PEA by definitions in the other two groups.

Third, ‘abusive behaviour’ and ‘consequences’ were important elements for all groups. For abusive behaviour, the implication is that there is wide consensus that PEA involves both active and neglectful behaviours.

It is unclear as to whether these groupings reflect anything in particular or if it is just that these definitions happen to be grouped based on what authors happened to define PEA. In order to investigate this, the groups were analysed to see whether the differences between groups were associated with: (i) the type of definition in terms of its source (see Table 2-1); and (ii) publication year for the cluster groups.
(see Diagram 2-7). Nevertheless, the analysis did not identify any phenomenon which could characterise each group.

2.6.3. Summary of findings – analysing across definitional components

In addition to the examination of each definitional component (Section 2.5.), this current section examined the definitions of PEA more broadly across definitional components. The use of the definitional framework identified three major patterns of definitional components consists of the entire concept of PEA. Nevertheless, it was not clear from the analysis whether there were or were not underlying reasons for the different patterns of the definitions of PEA.
Diagram 2-6: Dendrogram using ward linkage
Diagram 2-7: Different combinations of definitional components for various definitions of PEA

(A) Hibberd (2012) [Academic lit]
(B) Moran (2002) [Original study]
(C) Barnette et al. (1991) [Original study]

(A) UNICEF Innocenti Research Centre (2005) [International/national]
(B) Ontario Association of Children’s Aid Societies. (n.d.) [NGO etc]
(C) Martin and Walters (1982) [Original study]

(A) McGee and Wolfe (1991) [Academic lit]
(B) O’Hagan (1993) EMOTIONAL [Academic lit]
(C) Iwaniec (1995) [Academic lit]

(A) Glaser (2011) [Academic lit]
(B) Kairys & Johnson (2002) [Academic lit]
(C) Schmitt (1978) [Academic lit]

(A) WHO & IPSCAN (2006) [International/national]
(B) O’Hagan (1993) PSYCHOLOGICAL [Academic lit]
(C) MHLW-Japan (2017) [International/national]

(A) Skuse (1989) [Academic lit]
(B) Garbarino et al. (1986) [Academic lit]
(C) Glaser (2011) [Academic lit]

(A) WHO (2007) [International/national]
(B) O’Hagan (1993) [Academic lit]
(C) Hibberd (2012) [Academic lit]

(A) Prevent Child Abuse North Dakota. (n.d.) [NGO etc]
(B) CDCP (2008) [International/national]
(C) UN Secretary General. [International/national]

(A) Prevent Child Abuse America (n.d.) [NGO etc]
(B) NSPCC (2017) [NGO etc]
(C) Prevent Child Abuse North Dakota. (n.d.) [NGO etc]

(A) MCDYS (2005) [International/national]
(B) ChildLine (2017) [NGO etc]
(C) ChildLine (2017) [NGO etc]

(A) Australian Institute of Family Studies (2012) [International/national]
(B) American Humane Association (2013) [NGO etc]

(A) Morelen & Shaffer (2012) [Academic lit]
(B) CDCP (2008) [International/national]
(C) ChildLine (2017) [NGO etc]

(A) Skuse (1989) [Academic lit]
(B) WHO & IPSCAN (2006) [International/national]
(C) American Humane Association (2013) [NGO etc]

(A) WHO (2002) [International/national]
(B) NSPCC (2017) [NGO etc]
(C) Prevent Child Abuse North Dakota. (n.d.) [NGO etc]

(A) Doyle (1997) [Original study]
(B) American Humane Association (2013) [NGO etc]
(C) ChildLine (2017) [NGO etc]
2.7. Discussion and conclusion

This chapter has examined the abstract definitions of PEA in the child welfare and other relevant literature. The aim of this chapter was to understand the variation, nature, and boundary of the definitions of PEA. Application of the definitional conceptual framework enabled consistent analysis, both within and across the different components of PEA— to identify the categories commonly used to construct PEA definitions. This analysis revealed an ongoing inexplicitly, inconsistency, and even disagreement about the meaning of PEA. Based on the findings, the following section discusses the issues of PEA.

2.7.1. Variation of PEA definitions

This chapter has demonstrated that there are multiple levels of variation within the abstract definitions of PEA.

Various terminologies

Consistent with Baker (2009), the chapter identified that various terminologies were interchangeably employed to refer to the broad concept of PEA. Amongst the abstract definitions in this chapter, the term ‘emotional abuse’ appeared to be the most frequently used term, followed by ‘psychological abuse’. The implication here is that there is no agreement regarding which term should be used.

Various combinations of the definitional components

The chapter identified three major patterns of combinations of definitional components constructing the definitions of PEA. However, it was not clear from the analysis why specific definitional components were included or excluded.

One possibility is deliberate exclusion in order to avoid controversy. For instance, as it was pointed earlier, having a clear position about ‘intention’ could make the definition narrower, and therefore exclude certain circumstances as PEA. Potentially, the definitional approach to include specific components could conflict with legal definitions within certain jurisdictions but could agree with another definition.

Another possibility is that certain components happened to be excluded without a particular reason. In other words, there was no thorough consideration or awareness about the excluded definitional components. An example for this is that the same
author does not necessarily provide a consistent definition across their publications. Glaser (2002) clearly states that “motivation to harm the child is not necessary for the definition” (p.697) with her working definition. However, 9 years later, Glaser (2011) does not explicitly include the component of intention (or motivation) within the definition anymore. The publication in 2011 states that there is a general agreement not to include intention to define PEA. However, it is not straightforward to understand her position from the recent publication. The argument here might be that the main purpose of these two papers differed. The earlier publication (2002) extensively discussed different elements of PEA including intention (or ‘motivation’). In the latter publication of 2011, it did not discuss the different elements of PEA anymore. This was because it was already done in the paper of 2002 and wanted to avoid repetition. Nevertheless, it is crucial to provide consistent definition by including the same combination of definitional components.

**Various meanings of the individual components**

The level of detail and the meanings of the descriptions of each component varied across the definitions. For example, rejection was one of the most common sub-categories of abusive behaviour. Some of the definitions only provided terminology such as ‘rejection’ or ‘refusal’. On the other hand, others provided further specifications about what rejection can be. According to Garbarino et al. (1986), rejection means “the adult refuses to acknowledge the child's worth and the legitimacy of the child's needs” (p.8). This can be interpreted as non-physical act. On the other hand, Kairy and Johnson (2002) consider rejection as “avoiding or pushing away” which includes physical forms of rejection. The American Humane Association (n.d.) also includes active rejection - “refusing to touch a child”, but this can be done both verbally and non-verbally. Thus, even the same sub-category was equally involved across the definitions, the explanations were diverse not only for the level of information but also the actual meanings.

Another example is the existing disagreements about the meanings of individual components. For intention, one argument claims to include intention and another argument claims not to consider intention. Similar to frequency, there were different ideas around whether PEA should be always considered as something that is repeated or could be a single occurrence. Such discrepancy about the meaning of one definitional component could have a significant impact in changing the meaning of PEA. The accumulation of differences in the meaning of each of the components can have an additive effect creating extensive diversity in the meaning of PEA.
2.7.2. Boundary - threshold of PEA

The component analysis based on the definitional framework has shown how the definitions of PEA vary in a complex manner. In addition, there is also an issue of boundaries, namely, the cut-off point between PEA and non-PEA. A question arises about which definitional components determine the boundary of PEA. However, as discussed in the analysis, all definitional components are underpinned by conceptual complexities. Thus, no single component could determine the threshold of PEA. The boundary might be affected by how definitional components interact together.

Glaser (2011) addressed the issue of threshold and proposed to determine the threshold of PEA based on persistency. According to Glaser, the terminology on persistence “indicates the need to evidence the repeated presence of the harmful caregiver child interactions” (ibid, p.868). The author also points out that persistent nature of PEA implies that the abuser is in contact with the child on a regular basis. As can be seen, Glaser considers the relationship between different aspects of PEA in considering its threshold.

Other abstract definitions did not clarify or address the boundary of PEA. Presumably, doing so was not their purpose. The issue of threshold is further explored in the following chapters.

2.7.3. Limitations

This chapter has systematically applied a conceptual framework into abstract definitions of PEA to clarify the nature of these definitions and to examine how they vary. However, like other research studies, there were some limitations.

The first limitation was the lack of an exhaustive approach to identify and include abstract definitions from the literature. As it was mentioned earlier, however, a purposive strategy to include the breadth of types of definition in four different types of literature well fitted the purposes of this chapter to understand the nature and variation of PEA definitions.

Second, not all languages were being searched due to the limitation of language knowledge of the investigator. It would be interesting for future research to include other languages to see if there is any cultural variation in PEA definitions.
Third, it was sometimes challenging to classify the definitional texts into the components. For example, it could be difficult to separate the categories of abusive behaviour and consequences. This chapter only classified definitional components into categories when there were explicit statements to code.

2.7.4. Implications

Overall, this chapter provided a broad picture of how the definitions of PEA vary. Individually, PEA definitions might seem sensible and straightforward. However, once they are unpacked into the components and compared, the extensive diversity emerged - the variations in emphasis differed and there were even contradictions across the definitions. There are some strategies that could help clarifying inconsistencies in PEA definitions.

First, it is suggested for original research studies to explicitly provide their definition of PEA including the position taken on each of the components in the conceptual framework developed for this thesis. It can either be their original definitions or borrowing someone's definition. During the process of searching the literature, there were studies which did not clearly specify what they were discussing. As shown in this chapter, the meaning of PEA varies. Therefore, it cannot be assumed that everyone who reads a study understands PEA in the same way. Also, the lack of explicit provision of definition hinders the credibility and meaning of the results of such primary studies.

Second, as suggested by Baker (2009), consistent use of terminology is preferable. It has been acknowledged that there are different existing terminologies to refer PEA and they are usually used interchangeably. For the purpose of research practicality and avoidance of public and practitioners’ confusion, one consistent terminology is preferred. This can be achieved using the conceptual framework used in this thesis.

Third, it is suggested, for those who are in a position to establish PEA definitions (e.g. policy-makers), to be aware of all of the different definitional components instead of only focusing on particular components, such as abusive behaviour and consequences. Referring to the components in the definitions could help public and practitioners to clarify their understanding of PEA.
Fourth, similar to other points but relating to the specific issue of the criteria for who can be an abuser in PEA, it is proposed that there is clarity about the type of abuser being considered. It could be argued that PEA should only relate to intrafamilial cases but that would exclude PEA caused by other perpetrators (Moran et al., 2002).

Distinctions amongst various situations of PEA can be made in terms of the abuser’s relationship with the child, the level of abuser and setting.

- Abuser’s relationship with the child - parent, other family member, other known person, stranger (4)
- The level of abuser - individual, group/institution, community, wider-community (4)
- Setting - family, institution, community, wider-community (4)

According to this distinction, in total, there are $4^4 = 64$ different kinds of abuser. Encompassing the entire concept would be not realistic for research, policy, and practice purposes. It is therefore suggested to provide specification of the meaning of PEA using these distinctions.

For example, although bullying is often studied separately from PEA, it could take various forms including PEA. In this way, a study could focus on PEA (i) by other known person (teachers or peers), (ii) by individual and group/institution, and (iii) which takes place in an institutional (in particular school) setting.

The current chapter has examined theoretical aspects of PEA based on the literature. The following chapter examines how the definitions of PEA are used to operationalise PEA in practice.
CHAPTER 3

APPLYING DEFINITIONS IN PRACTICE: 
AN EXAMINATION OF OPERATIONAL DEFINITIONS 
IN PROFESSIONAL GUIDELINES

Chapter contents

3.1. Introduction
3.2. Objective and research question
3.3. Methodology
3.4. Understanding the fundamental information of the guidelines
3.5. Conceptualising PEA within professional guidelines: from abstract definition to operational definitions
3.6. Discussion and conclusion

3.1. Introduction

Chapter 2 investigated how PEA was defined in theory amongst the academic and other relevant literature, using the definitional conceptual framework. In Chapter 3, the focus moves from abstract definitions to operational definitions. Operational definition in this chapter refers to how to use the definitions of PEA in practice and what to do about it. The aim of this chapter is to understand how guidelines direct professionals to operationalise the definition of PEA.

Theoretically, anyone can be a user of the definition of PEA. As Diagram 3-1 illustrates, various group of people, including the public, researchers, policy-makers, and professionals, could be the user of a definition. All of these groups of people have some degree of responsibility to protect children from PEA, but the nature and degree of their responsibilities vary.
The current chapter particularly focuses on professionals’ use of definitions. In this chapter, ‘professionals’ broadly refer to those who can be involved in child protection in practice. Professionals’ engagement with child protection can be diverse including suspicions, referrals, and decision-making (Gough, 1996a), and from universal service for all to selective services for those who are identified to require special needs (Gough, 2002b). Their involvement can be either as part of a routine role (e.g. education, health, social work) or as a more specific child protection role. Therefore, professional roles and responsibilities could differ depending on their main routine role, specialist role, expertise, or the nature of the individual case. Although professional roles and responsibilities could differ extensively, they could all contribute by recognising and responding to CAN (Gilbert et al., 2009a). The reason to look at professionals in particular is because, first, they are often active users of definitions. Second, the way that professionals operationalise the definition has some degree of power to determine the future of children.

As professionals are frequently at the frontline of child protection, it might be assumed that they have a relatively high level of understanding about PEA. However, PEA is still a complex concept for professionals (Iwaniec, 1995). There has been some research examining abstract definitions (e.g. Baker, 2009) and professional practice (e.g. Carleton, 2006). However, there is relatively little evidence examining how abstract definitions are applied in the real world. This current chapter therefore aims to progress our understanding of this issue by
examining the nature of existing professional guidelines and how they help professionals to contextualise the definitions in practice. 'Professional guidelines' in this chapter, refer to official documents which include information for professionals to operationalise the definition of PEA. Further specification of the term is described later in Section 3.3.

3.2. Objective and research question

The main purpose of this chapter is to understand how professionals are guided to apply the definitions of PEA in practice. In order to achieve this, this chapter addressed the following main research question.

- How do professional guidelines guide professionals to operationalise and apply the definition of PEA?

3.3. Methodology

This chapter investigates professional guidelines. Nevertheless, as ‘professional guidelines’ could refer to various things depending on the context, this part of the chapter describes the methodological strategies to identify relevant guidelines systematically.

3.3.1. Setting: California (US), Japan, England (UK)

Depending on the social or organisational system, there are various ways to apply the definitions in practice (Gough, 1996a). Therefore, professional guidelines were searched from more than one country to give breadth to the analysis. The included jurisdictions were California, Japan, and England.

California is the most populous state in the United States (US). An estimate population of 2018 was 39.557 million (United States Census Bureau, 2018) and population density in 2017 was 253.8 per square km (Statista, n.d.). In the US, each state has own child protection system and they differ extensively in whether PEA is included or excluded under legislation or statutes. At the state level, the California Department of Social Services (CDSS) is a central agency which manages child protection programmes. 58 individual counties within California administers their own child protection systems although CDSS monitors them. There is a state law, the Child Abuse and Neglect Reporting Act (CANRA), which is examined later in this chapter.
Japan is a country which consists of 47 prefectures. The total population of Japan in 2017 was 126.8 million (World Bank, n.d.) and the population density was 341 per square km in 2015 (Statistics Japan, n.d.). The Ministry of Health, Labour and Welfare (MHLW) is responsible for child protection at the national level, and each individual prefecture has regional authority. There is at least one Child Guidance Centre (CGC) within each prefecture. CGC plays a central role in child protection and provides services including consultation about child or family, in-home care, and temporary out-of-home protection care. Legislations which provide a framework for child protection in Japan are Child Welfare Act 1948, which has been amended more than 80 times, and the Child Abuse Prevention Law 2000.

England is one of the countries in the United Kingdom (UK), which consists of four (i.e. England, Scotland, Northern Ireland, and Wales). The estimated population of England in 2017 was 55.63 million (Office for National Statistics, 2018) and it had the highest population density within the UK (413 per square km) (Office for National Statistics, 2014). Each country develops its own child protection strategies. In England, the Department for Education (DfE) is responsible for child protection, and Children Act 1989, Children Act 2004, and Children and Social Work Act 2017 are relevant legislation. From June 2018, safeguarding partners replaced local safeguarding children’s boards (LSCBs). The statutory safeguarding partners are (i) the local authority, (ii) the clinical commissioning group, and (iii) the police, and they lead the local safeguarding arrangements (NSPCC, 2018).

These three jurisdictions were selected because of commonalities as well as diversities. There needed to be sufficient similarities to make comparison meaningful, yet with differences in how the jurisdictions had responded to the social problem of PEA. First, they are all part of the OECD and have a reasonably similar level of economic development. Second, they have relatively developed child welfare systems, though these differ in their details and historical background. Third, CAN, including PEA, has been recognised as an issue in all these societies. Indeed, all jurisdictions indicate the presence of legislative or policy-based reporting responsibilities of professionals (Mathews & Kenny, 2008), suggesting there are some common strategies to tackle PEA. Fourth, the inclusion of these jurisdictions from different geographical areas allows interesting comparisons that help understand the nature of how definitions are applied in practice. As stated in Chapter 1, the recognition of CAN as well as PEA emerged in the US and subsequently in
other Western countries. On the other hand, the scarcity of research on PEA in Japan suggests that there is relatively low social awareness about the topic compared to Western countries (Ike, 2006).

3.3.2. Inclusion and exclusion criteria of professional guidelines

In order to take a systematic approach to identify the relevant professional guidelines, inclusion and exclusion criteria were specified prior to the search for the guidelines. The guidelines had to:

(i) be of jurisdictions in England, California, or Japan
(The reasons to include these jurisdictions are provided in Section 3.3.1.)

(ii) be written for professionals
As it was mentioned earlier, in this chapter, professionals refer to those who are or can be involved in PEA. The rigorous meaning of the term ‘professionals’ is not specified here.Rather, it is one of the aims of this chapter to find out which professionals were given guidance to operationalise the definitions.

(iii) be national or state level on CAN/PEA OR regional level only if it is about PEA specific
Guidelines can exist at different geographical and organisational levels including, national/state, regional, and local levels. This chapter is particularly interested in national/state level as central governments. This is because the aim of this chapter is to examine operationalisation of PEA definitions which are applicable to wide context rather than in every local area.

However, it is possible for some jurisdictions not to have guidelines which meet all of the inclusion criteria. In such cases, other types of guidelines are also taken into account. First, if there is no national or state level of guidelines, profession-specific guidelines are included. Second, if the guidelines are specifically about PEA only at regional and not at national level, then the regional guidelines are included.

(iv) be available for public
There may be guidelines which are not available for public and shared only amongst the certain professional group of members. However, this chapter only included
guidelines which are publicly available and where professionals could easily gain information about what other professional groups do or are required to act in response to PEA.

### 3.3.3. Search strategy

The main searches were conducted via the official websites of governmental bodies of each jurisdiction. Searching terminologies included: ‘child abuse and neglect’, ‘psychological abuse’, ‘emotional abuse’, ‘child protection’, ‘child safeguarding’, ‘professional(s)’, ‘practitioner(s)’ ‘guideline’, ‘guidance’, and ‘manual’.

When guidelines which met all the criteria were not identified, further searches were undertaken in order to identify relevant guidelines. These further search strategies involved, first, direct inquiry via email to the governmental bodies. Second, the Internet search engine Google was used to identify guidelines based on the terminologies above.

### 3.4. Understanding the fundamental information of the guidelines

As a result of searching, a total of 8 guidelines were identified in the three jurisdictions. Table 3-1 shows a list of the identified professional guidelines.

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Guideline</th>
<th>Level</th>
<th>Focus</th>
<th>Whom the guideline written for?</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>The California child abuse &amp; neglect reporting law: issues and answers for mandated reporters. (Rady Children’s Hospital San Diego, 2012)</td>
<td>State</td>
<td>CAN</td>
<td>Professionals (Mandatory reporters)</td>
</tr>
<tr>
<td>Japan</td>
<td>Guideline to deal with child abuse (MHLW, 2013)</td>
<td>National</td>
<td>Child protection</td>
<td>Child Guidance Centre</td>
</tr>
<tr>
<td>Jurisdiction</td>
<td>Guideline to deal with child abuse for Yōgo Teacher (MEXT, n.d.)</td>
<td>National</td>
<td>CAN</td>
<td>Yōgo teachers</td>
</tr>
<tr>
<td>------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------</td>
<td>----</td>
<td>---------------</td>
</tr>
<tr>
<td>England</td>
<td>What to do if you’re worried a child is being abused: advice for practitioners (HM Government, 2015b)</td>
<td>National</td>
<td>CAN</td>
<td>Professionals</td>
</tr>
<tr>
<td></td>
<td>Working together to safeguard children (HM Government, 2015a)</td>
<td>National</td>
<td>Child protection</td>
<td>Professionals</td>
</tr>
<tr>
<td></td>
<td>Child maltreatment: when to suspect child maltreatment in under 18s (NICE, 2009)</td>
<td>National</td>
<td>CAN</td>
<td>Health care professionals</td>
</tr>
<tr>
<td>Nottinghams hire (England)</td>
<td>Guidance to support practitioners with emotional abuse (Nottingham City Local Safeguarding Children Board 2014).</td>
<td>Regional</td>
<td>PEA</td>
<td>Professionals</td>
</tr>
<tr>
<td>Bristol (England)</td>
<td>Emotional abuse: multi-agency practice guidance (Bristol Safeguarding Children’s Board, n.d.)</td>
<td>Regional</td>
<td>PEA</td>
<td>Professionals</td>
</tr>
</tbody>
</table>

Before addressing the main research question of this chapter, it is important to grasp the fundamental context of the identified guidelines. Therefore, this part of the chapter addresses the following initial research questions.

- What are the general characteristics of the identified guidelines? (Addressed in Section 3.4.1.)
- How are ‘professionals’ defined across the identified guidelines? (Addressed in Section 3.4.2.)

### 3.4.1. The general characteristics of the professional guidelines

The following part firstly summarises the nature of guidelines in each jurisdiction. Then, it compares and contrasts the guidelines across the three jurisdictions.
Analysis within each jurisdiction

In California, there is a state level of guideline *The California child abuse & neglect reporting law: issues and answers for mandated reporters* (Rady Children’s Hospital San Diego, 2012). As the title suggests, the guideline is underpinned by the Child Abuse and Neglect Reporting Act (CANRA). The guideline was originally produced for mental health professionals to understand CANRA and relevant issues in practice including reporting responsibilities. This revised version of 2012 takes into account a wide range of professional groups involving education, health, and child care. The details about who are the mandatory reporters in California are explained later (see Section 3.4.2.). The guideline was not inclusive about all situations nor about providing legal advice.

Both in California and England, there were national/state level of guidelines on CAN which were produced for professionals in general. In contrast, an equivalent guideline was not found in Japan. Instead, there was a *Guideline to deal with child abuse* (*Kodomo gyakutai taiō no tebiki*) by the Ministry of Health, Labour and Welfare (MHLW, 2013). This was a national level of CAN specific guideline, but the main targeted readers of the guideline were child protection agencies (i.e. Child Guidance Centre) rather than various professional staff. The guideline involves an extensive area of child protection, from the basic background information on CAN to practice (e.g. temporary child separation, assessment, cooperation between Child Guidance Centres and multiple agencies).

In addition to this, there was a guideline on particular professional groups *Guideline to deal with child abuse for Yōgo teacher* (*Yōgo kyōyu no tameno jidōgyakutai taiō no tebiki*) produced by the Ministry of Education, Culture, Sports, Science and Technology (MEXT, n.d.). Yōgo teachers are “special licensed educators who support children’s growth and development through health education and health services” (Okada, 2011, p. 21). The aim of this guideline is to provide information for, but not limited to, yōgo teachers, about CAN in practice. The guideline consists of background information about CAN and guidance about professionals’ response. Interestingly, the guidance includes dedicated sections for physical abuse and sexual abuse but not for PEA. PEA is explicitly acknowledged as one of the major types of CAN. However, the lack of a dedicated section on PEA might suggest, first, PEA is considered as less important than other types of CAN. Second, it might be that the ambiguous nature of PEA makes it difficult to clarify the
strategy to deal with PEA in the guidelines. Third, it is assumed that professionals know how to deal with PEA.

In England, there was a national guideline *What to do if you’re worried a child is being abused: advice for practitioners* (HM Government, 2015b). This is a non-statutory guideline, aiming to provide information which helps professionals to identify and appropriately respond to CAN. This CAN specific guideline is complementary to *Working together to safeguard children* (Working Together hereafter) (HM Government, 2015a). Working Together is a statutory guidance, aiming to provide broad information on safeguarding and promoting the welfare of children.

In addition, there was a guideline specifically produced for health professionals *Child maltreatment: when to suspect child maltreatment in under 18s* by the non-departmental public body National Institute for Health and Care Excellence (NICE, 2009). This is an evidence-based clinical guideline, aiming to raise awareness and help professionals, those who are not specialised in child protection, in identifying CAN.

In addition to the national guidelines, further searching identified a regional level of guidelines – *Guidance to support practitioners with emotional abuse* (Nottingham City Local Safeguarding Children Board, 2014) in Nottinghamshire and *Emotional abuse: multi-agency practice guidance* (Bristol Safeguarding Children’s Board, n.d.) in Bristol. The latter was produced based on the former guidance, thus the contents of two guidelines are very similar. The existence of PEA specific guidelines may suggest, first, these regional areas have a specific interest in PEA. Second, it might reflect an interest on PEA by policy-makers or researchers those who are based in these regional areas.

**Analysis across the three jurisdictions**

Overall, relevant guidelines, which the study was initially aiming to examine, were identified across all the three jurisdictions. Amongst these, there were some similarities and differences.

First, there were different levels of relevance to PEA. The national levels of guidelines were likely to take a broad approach either on CAN or on child protection,
instead of being PEA specific. A possible advantage of this approach is efficiency. Professionals are usually busy with their main roles and they might have limited time to thoroughly understand different types of CAN and information relevant to this. Therefore, the generic approach could allow professionals to quickly grasp overall responsibilities on CAN or child protection.

However, a possible disadvantage of this approach is the lack of thorough explanations about PEA. This feature was especially significant in Japanese guidelines. Although it may be obvious from the guidelines that professionals have responsibilities to refer/report the case when there is suspicion of CAN (including PEA), stipulating such a responsibility is not sufficient for professionals to operationalise the definition of PEA. One of the roles of guidelines is to clarify how the responsibilities should be completed.

The lack of explanation on PEA could have an effect of hindering professionals’ understanding of PEA and thus make them less likely to identify or respond appropriately to it. As a result, PEA might be less likely to be identified. That is, professionals’ attention could focus on other forms of CAN which have detailed descriptions (i.e. physical abuse, sexual abuse) in the guidelines. These forms of CAN are often considered as easier to identify than PEA due to the possible visible consequences of the abuse. Also, some physical abuse cases require urgent intervention because of the danger to the child’s life. It is certainly important to save the child’s life when s/he is in immediate danger. Nevertheless, it is also important to ensure that PEA is treated appropriately like other forms of CAN. As it was mentioned earlier, there has been evidence of long-term adverse effects caused by PEA. Therefore, guidelines should treat PEA equally as other forms of CAN.

A second common feature in the guidelines was the emphasis on a multidisciplinary approach to deal with CAN. In California and England, there were national guidelines for multidisciplinary groups of professionals who work closely with children. Although Japan also stresses the importance of cooperation amongst different agencies, there were no guidelines which were inclusively written for relevant professionals. One possible implication is that there is only cooperation between professionals working together and more integrated multidisciplinary work does not take place. There may be some local governments which have been undertaking the multidisciplinary approach. Nevertheless, it is important to keep a consistent level of child protection system across regions in order to ensure that
every child has equal opportunity to live safely. Another possible implication is that in Japan the focus of guidance is less on a broad range of professionals who may come across and identify CAN in the community and more upon Child Guidance Centres, which have the responsibility of working with identified CAN cases.

A third and related common feature was the diversity in whom the guidelines were produced for. In Japan, as well as the guidance for Child Guidance Centres there were guidelines especially for yōgo teachers. This might be because the government considers that they are the most important people in relation to the care of children and CAN in general. On the other hand, in England, different groups of organisational bodies produce guidelines which are complementary to Working Together. This may reflect the government’s endorsement of ‘working together’ approach in child protection.

As demonstrated, the details of the guidelines were various in nature. The aim of this chapter is to examine the operationalisation of the definition of PEA within these guidelines. Therefore, it is determined to mainly use CAN or PEA specific guidelines for the following analyses. For Japan, where there was no equivalent guideline to the two other jurisdictions, a guideline specifically produced for yōgo teachers is used as the major source for the analysis because this deals with CAN rather than child protection in a wider context. Considering that other jurisdictions have CAN specific guidelines written for professionals generally, it is considered that examining the guidelines for yōgo teacher is well suited. When there is relevant information, however, other guidelines are also included.

3.4.2. Meaning of professionals

Broadly speaking, the term ‘professionals’ refer to those who are or can be a part of child protection in practice. Nevertheless, this group of people could include diverse types of people with different expertise or from different backgrounds, and these different jurisdictions might conceptualise the meaning of professionals differently. Therefore, this section explores how each jurisdiction defines which professionals have some degree of responsibilities for PEA.

Analysis within each jurisdiction

In California, the reporting law CANRA was passed in 1980. Under CANRA, mandatory reporters include (but are not limited to) clergy members, child carer
professionals, educators, law enforcement, medical professionals, mental health professionals and commercial film and photographic print processors. These mandatory reporters are responsible not only for their own reporting but also reporting by others. That is, a professional has to make a report when someone, who is a mandatory reporter, failed to report a case. According to the California Penal Code, failure of mandatory reporting could result in by up to six months in jail or/and a maximum $1,000 fine.

Although there is no mandatory CAN reporting law in Japan, there is Child Abuse Prevention Law (CAPL) which was established in 2000. According to Article 5 of the CAPL, professionals (teachers, members of staff at child welfare institutions, medical professionals, lawyers, and other professionals who are related to child welfare) as well as institutions (schools, child welfare institutions, hospital and other institutions related to child welfare) are responsible for the early identification of CAN. In addition, Article 6 states that ‘anyone’ who suspects an abused child should report the situation to the designated agency. It can be seen that professionals’ responsibilities are especially emphasised in regards to early identification. Although reporting responsibility clearly includes professionals as well as the public, there is no legal mandate for either to make reports.

In England, there is no law specifically about CAN. Instead, the arena of CAN is covered by the Children Act 1989 (Berridge, 1997) and by the Working Together guidance. The guidance stipulates that anyone who closely works with children and families, namely, those who work in the area of early years, social care, health, education, police and adult services are responsible for CAN/PEA. Moreover, it is stated that even professionals who are not in contact with children on a regular basis, such as doctors or police officers, could also come across CAN/PEA and should know how to respond appropriately.

**Analysis across the three jurisdictions**

Overall, the meaning of ‘professional’ was similar across the jurisdictions. Generally speaking, the term professionals refer to those who closely work with children or/and family across a wide range of areas such as health, education, social work and law enforcement. Nevertheless, there were some unique features of each jurisdiction.

First, California included professionals (i.e. clergy members and commercial film and photographic print processors) which were not referred to in the other two
jurisdictions. Inclusion of clergy members reflects the fact that Roman Catholic is a widespread religion in California (28%) (Pew Research Center, 2014) with close involvement with the public. Additionally, the inclusion of commercial film and photographic print processors may be relevant to the fact that neglect is the most common types of CAN in California. In 2017, there were 65,342 victimised children in California. Of these, 57,027 (87%) experienced neglect (Children’s Bureau, 2017). Neglect, which could result in the delay of physical development or low weight, can be captured visually (e.g. photo).

Second, England emphasises the possibility of the identification of CAN by all types of professional groups. This may sound obvious but being explicit about this is important as, in practice, it is possible for those who do not have frequent contact with children or family to believe that they would not come across an abused or neglected child. However, it is unknown when and how people could detect CAN cases, namely, anyone could come across CAN. Therefore, the approach by English guideline could increase the awareness towards CAN for all types of professionals.

Third, Japan referred to not only an individual level of responsibilities but also that of the institutional level (e.g. school). The clarification of the institutions’ responsibilities might make individuals feel comfortable to express their concerns when they are suspicious that PEA may be occurring and could therefore possibly enhance the identification of PEA. It might also create an atmosphere which allows members of staff to be cooperative with each other within an institution and improve smooth information sharing. It might sound obvious that institutions, where individuals often belong to, have some degree of responsibility on child protection. However, being explicit about the responsibility would make a difference especially in Japan where interpersonal harmony and social hierarchy are emphasised (Zhang et al., 2005). In such a society, there is likely to be unequal power balance between individuals, for instance, juniors are expected to obey seniors. If individuals’ responsibilities are only emphasised in child protection, juniors’ voice can be easily dismissed by seniors. However, being explicit about the responsibility of institutional level might enable to respect the voice of juniors and this might avoid missing serious cases of abuse and neglect.

**Summary**
This part of the chapter has examined the nature of guidelines within and across the three jurisdictions. The guidelines were identified with a systematic approach and
met the same inclusion criteria. But there were diversities across the jurisdictions in terms of the types and nature of the retrieved guidelines. The examination of the guidelines highlighted that they were underpinned by different child protection systems.

3.5. Conceptualising PEA definitions within professional guidelines: from abstract definition to its operationalisation

This part of the chapter investigates the nature of information in professional guidelines to support professionals to develop their understanding about their roles and responsibilities on PEA. In doing so, the main research question below (which was already shown in Section 3.2.) is addressed in this part of the study.

- How do professional guidelines guide professionals to operationalise and apply the definition of PEA?

In general, the guidelines provide an abstract definition and then guidance on how to respond to possible or known cases of PEA. The guidelines encompass various information (e.g. abstract definition, risk factors, threshold criteria) together, and there are often no specific borderlines in between. Probably, this is because the guidelines do not aim to distinguish relevant information into sub-categories. Rather, their purpose may be to simply provide information which supports professionals’ adherence to child protection strategies more broadly.

This part of the chapter specifically looks at three aspects of information in the guidelines and they are illustrated in Diagram 3-2. First, the meaning of PEA, abstract definitions, are described (Abstract definitions - Section 3.5.1.). Abstract definitions amongst the relevant literature were already discussed in Chapter 2. Thus, this part of Chapter 3 examines the abstract definitions within the guidelines in the three jurisdictions. Second, issues of thresholds of PEA and professionals’ relevant response responsibilities are discussed (Thresholds and Response - Section 3.5.2.). When there is a potential case of PEA, professionals have some degree of responsibility to respond to the situation. Although an abstract definition explains the meaning of PEA, it may not specify the response threshold. Therefore, the issue of thresholds is independently examined. Third, possible issues which
occur during the process in operationalising the definitions are explored (Issues in applying the definitions in practice - Section 3.5.3.).

Among the various information, risk factors were one of the aspects involved in the guidelines. Risk factors involved indicators of the child (e.g. low self-esteem, anger, anxiety, low educational achievement) and of parent/carer (e.g. history of abusive childhood, mental health problems, alcohol, or substance misuse). Understanding risk factors help professionals to recognise signs of CAN. However, these risk factors were usually inclusive to all types of CAN unless the guidelines were specifically about PEA. That is, one risk factor can be the sign of any form of CAN. As this chapter seeks information which can be applied in cases of PEA, factors that might indicate a risk of PEA are not considered in the analysis.

Diagram 3-2: The relationship between Chapter 2 and Chapter 3

![Diagram 3-2: The relationship between Chapter 2 and Chapter 3](image)

### 3.5.1. Abstract definitions

Abstract definitions address the theoretical meaning of PEA, and this part of the chapter examines abstract definitions within the guidelines. Nevertheless, the guidelines usually do not use the term ‘abstract definition’. Therefore, depending on
the jurisdictions or guidelines, what can be considered as abstract definitions differ. The details of what is treated as abstract definitions for each jurisdiction is summarised in Table 3-2 below.

Table 3-2: Abstract definitions across the professional guidelines

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>California</td>
<td>In California, the Child Abuse and Neglect Reporting Act (CANRA) was passed in 1980. CANRA is the central part of the guideline. Thus, this study examines the definition of CANRA within the guideline as an abstract definition. CANRA encompasses four types of CAN- ‘physical abuse’, ‘sexual abuse’, ‘neglect’, and ‘willful cruelty or unjustified punishment’. As can be seen, there is no explicit category of PEA. Alternatively, PEA is covered under the category of “willful cruelty or unjustified punishment” (PC 11165.3) which is further specified as: <em>inflicting or permitting unjustifiable physical pain or mental suffering, or the endangerment of the child’s person or health.</em></td>
</tr>
<tr>
<td>Japan</td>
<td>In Japan, the Child Abuse Prevention Law (CAPL), which was established in 2000, underpins the guidelines. This study examines the CAPL’s definition of PEA within the national guideline (MHLW, 2013) as an abstract definition of Japan.</td>
</tr>
<tr>
<td>England</td>
<td>In England, Working Together defines PEA as one of the forms of CAN. Working Together is statutory guidance and is complementary to other guidelines, which are included in this study. Thus, this study, examines the definition of PEA by Working Together as an abstract definition.</td>
</tr>
</tbody>
</table>

In this part of the chapter, the meaning of each definitional component is examined and contrasted between California, Japan and England.

(i) Abuser
All the jurisdictions defined abuser inclusively to all forms of CAN, rather than defining it only for PEA. Consistent with Chapter 2, narrow and broad definitions of abuser were observed in the guidelines.

Japan considered the abuser as someone who is involved in child rearing, suggesting that the abuser knows the child and is within the household. In contrast,
California (e.g. “any person”) and England (e.g. “somebody”) left the meaning of abuser broader than Japan.

Table 3-3: Different types of reference to abuser

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>“any person (including a child)”</td>
<td>“hogosha” (literally means ‘protector’ in English.)</td>
<td>“somebody”</td>
</tr>
<tr>
<td></td>
<td>“When a person who has a parental right or a guardian is not directly involved in child rearing, the person is not considered as ‘hogosha’. On the other hand, when a person who does not hold parental right or is not a guardian can be considered as ‘guardian’ when s/he is involved in child rearing (e.g. cohabitant of child’s mother).”</td>
<td>The description further stated abuser as:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Both family context and institutional/community contexts</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Both known and unknown to the child</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Both adult and child</td>
</tr>
</tbody>
</table>

(ii) Abusive behaviours

Consistent with Chapter 2, abusive behaviours were referred to in all the jurisdictions. Japan and England explained what abusive behaviours of PEA could mean by illustrating sub-categories. In contrast, California used only broad terms (i.e. “cruelty”, “unjustified punishment”) to define abusive behaviours and did not specify further meanings. The concepts of these terms were very ambiguous but implied negative behaviours like other jurisdictions.

Table 3-4: Different types of reference to abusive behaviour

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>“cruelty”; “unjustified punishment”</td>
<td>“ignoring”, “rejection”, “discrimination against”, “DV”</td>
<td>“It may involve seeing or hearing the ill-treatment of another”</td>
</tr>
</tbody>
</table>

(iii) Interaction

Interaction was only observed in the English guidelines. Amongst the abstract definitions in Chapter 2, only small amount of literature explicitly referred to interaction, and one of them was Glaser (2011). Glaser is one of the members who
contributed the development of NICE guidelines (NICE, 2009), which were produced for medical health professionals in England. The abstract definition examined in this chapter was that of Working Together. It is stipulated in the NICE guideline that the definition of CAN, including PEA, in Working Together is shared in the NICE guideline. Therefore, the reference to interaction within the definition of PEA in Working Together implies awareness of the work of Glaser.

Table 3-5: Different types of reference to interaction

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not applicable.</td>
<td>Not applicable.</td>
<td>“These may include interactions that are beyond a child’s developmental capability…”</td>
</tr>
</tbody>
</table>

(iv) Frequency

Similar to Chapter 2, frequency was treated very differently across the jurisdictions. England emphasised the persistent nature of PEA. On the other hand, Japan only referred to a repetitive nature in the case of verbal abuse, suggesting frequency is an optional aspect of PEA. Also, there was no relevant reference to frequency in California.

Table 3-6: Different types of reference to frequency

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not applicable.</td>
<td>“repetitive verbal behaviour which psychologically harms the child”.</td>
<td>“persistent”</td>
</tr>
</tbody>
</table>

(v) Intention

Consistent with Chapter 2, intention was not a common part of PEA definitions within the guidelines.

There was an implication that California considered intention as a necessary part of the category of “willful cruelty or unjustified punishment”. In England, intention was referred to only for certain forms of abusive behaviour, suggesting intention can be an optional part of PEA. In Japan, there was no relevant statement about intention within its abstract definition.
Table 3-7: Different types of reference to intention

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;willful&quot;</td>
<td>Not applicable.</td>
<td>&quot;deliberately silencing them…&quot;</td>
</tr>
</tbody>
</table>

(vi) Consequences

Consistent with Chapter 2, consequences were commonly mentioned in the abstract definitions. From the references to consequences (see below for the details), there was an implication that England and California considered consequences as major part of PEA. On the other hand, the consequence was only referred with verbal behaviour in Japan, suggesting it is considered as an optional part of PEA.

Table 3-8: Different types of reference to consequences

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘unjustifiable physical pain or mental suffering, or the endangerment of the child’s person or health’</td>
<td>&quot;repetitive verbal behaviour which psychologically harm the child”.</td>
<td>“…to cause severe and persistent adverse effects on the child’s emotional development”</td>
</tr>
</tbody>
</table>

(vii) Child age

The reference to child age was rarely observed in the literature reviewed in Chapter 2. In the guidelines, child age was specified for the entire guideline or for CAN broadly, rather than as part of PEA definitions. All jurisdictions commonly defined children as those who under the age of 18. That is, the guidelines clarify what situations, in terms of child age, are covered in their statements. Nevertheless, it is important to note that these specifications of child age are not part of the specific definitions of PEA. Only the English guideline referred to child age and development in relation to PEA.

Table 3-9: Different types of reference to child age

<table>
<thead>
<tr>
<th>California</th>
<th>Japan</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not applicable.</td>
<td>Not applicable.</td>
<td>&quot;It may feature age or developmentally inappropriate expectations being imposed on children.&quot;</td>
</tr>
</tbody>
</table>

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(viii) Child’s other characteristics

Consistent with Chapter 2, there was no statement about child’s other characteristics within the abstract definitions in the guidelines.

Summary

Consistent to the analysis of the abstract definitions in Chapter 2, the definitions of PEA vary across the three jurisdictions. The overall feature of each jurisdiction is summarised below.

- California - Consequence, intention, and abusive behaviours were referred to, but the meaning of each component was left broad.
- Japan - Abusive behaviour is the focus of the definition.
- England - An inclusive approach is used involving various definitional components, including interaction.

The jurisdictional level of differences in the definitions of PEA implies, first, a different degree of awareness of the definitional components. As seen, the inclusion of definitional components in England is extensive, whereas Japan involved only a few. The Japanese approach in defining PEA is similar to one of the earliest definitions suggested by Garbarino et al. (1986), which was included in an analysis of Chapter 2. Garbarino et al. (ibid) had proposed to define PEA with five forms of abusive behaviours. A comparison of this definition and other newer definitions in Chapter 2 showed that the meaning of PEA has been extended not only in terms of the meaning of abusive behaviours but also in the inclusion of other definitional components. Therefore, the definition of PEA in Japan might be seen as historically behind that of other countries. This aspect can be examined further in future research.

Second, it might imply cultural effects on the definitions of PEA. As stated in Chapter 1, the concept of what is or what is not appropriate could vary depending on cultural context. Although not explicitly, the cultural diversity might underpin the different definitions of PEA across the jurisdictions.

The abstract definitions in the guidelines can provide fundamental information for professionals to theoretically understand the meaning of PEA. Nevertheless, considering the professionals’ positions to be on the frontlines of child protection, the centre of their attention is also when and how they should respond to PEA in
practice. Therefore, the next part of the chapter investigates the threshold and response of PEA.

### 3.5.2. Threshold and response

As discussed in Chapter 2, a boundary of what is or what is not PEA was not clear from the abstract definitions in the literature. Not surprisingly, as shown in Section 3.5.1., the same phenomenon was observed in the abstract definitions in the guidelines.

Professionals are one of the groups of people who are responsible for protecting children from CAN, including PEA. This means that professionals judge what is appropriate and what is inappropriate, and they do something about the situation when something inappropriate is happening.

Gibbons et al. (1995) compared the child protection system to “a small-meshed net, in which are caught a large number of minnows as well as a smaller number of marketable fish” (p.51). In a community, there is an unknown number of PEA cases. Some cases are identified by someone (e.g. public, professionals) and brought to the attention of social agencies. The recognised cases are assessed, and then some are filtered out and others remain for further investigation. There is no rule about the boundary of what is a minnow and what is marketable fish. Thus, there can be a different logic of a ‘fishing net’ which sets the boundary depending on jurisdiction. Therefore, this section aims to understand how the guidelines articulate threshold criteria for professionals to assess PEA.

**A) California**

*Mandatory reporting threshold defined by CANRA*

As stated, CANRA covers the definition of PEA under the category of “wilful cruelty or unjustified punishment”. Because CANRA is a mandatory reporting law, the definitional components which were involved in CANRA determine the mandatory reporting threshold. Considering the reference of three definitional components identified in CANRA (i.e. abusive behaviours, intention, consequences), the threshold is set high for mandatory reporting. However, the meaning of individual definitional components was not thoroughly explained, and thus, left ambiguous for interpretation.
In addition to the CANRA definition which was treated as the abstract definition of California (see Section 3.1.2.), the guidelines provide further information. In order to be explicit about the difference between CANRA and other relevant information, the latter is referred to as ‘guidance’ in this section. Guidance is certainly underpinned by CANRA, but it also adds extra information. This section examines what the guidance tells professionals about PEA by comparing it with CANRA.

First, the abuser was observed in both CANRA and the guidance. CANRA defined the abuser as “anyone” for all types of CAN. In contrast to this, the guidance defined the abuser of PEA as a “caretaker”. The guidance therefore narrowly defines abuser compared to CANRA.

Second, abusive behaviours were referred to in both CANRA and guidance. The reference to abusive behaviour in CANRA was ambiguous (e.g. “cruelty”) and there was no concrete example of behaviours. On the other hand, the guidance provided concrete examples (e.g. “criticism”, “threats”, “rejection”).

Third, intention was observed in both CANRA and the guidance. CANRA referred to intention with only one term (i.e. “wilful”). On the other hand, the guidance explained what intention could be (e.g. “intended to produce fear or guilt…”).

Fourth, frequency, which was not involved in CANRA, was referred to in the guidance (i.e. “pattern of behaviour”; “consistent criticism…”).

Finally, consequences were referred to in both CANRA and the guidance. CANRA used the phrase “mental suffering”, but there was no further explanation of what it could mean. In this sense, the meaning of mental suffering was left broad. In contrast, the guidance used different expressions to refer to consequences (e.g. “emotional and behavioural problems, in varying degrees”, “attention deficits”). As can be seen, the consequences in the guidance are diverse. In addition, it is important to note that the guidance stipulated that experience of other forms of CAN (e.g. sexual abuse, physical abuse, neglect) is considered as PEA as well. This implies that any forms of CAN which could result in a psychological adverse effect is perceived as PEA. That is, PEA is defined based on consequences.
Table 3-10: A comparison of CANRA (legal statement) and Guidance (additional information)

<table>
<thead>
<tr>
<th>Definitional components</th>
<th>CANRA</th>
<th>Guidance: Additional information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abuser</td>
<td>Any person</td>
<td>Caretaker</td>
</tr>
<tr>
<td>Abusive Behaviours</td>
<td>“cruelty”; “unjustified punishment”</td>
<td>“criticism”, “threats”, “rejection”</td>
</tr>
<tr>
<td>Intention</td>
<td>“Wilful”</td>
<td>“intended to produce fear or guilt…”</td>
</tr>
<tr>
<td>Frequency</td>
<td>Not applicable.</td>
<td>“pattern of behaviour”; “consistent criticism…”</td>
</tr>
<tr>
<td>Consequences</td>
<td>“mental suffering”</td>
<td>“emotional and behavioural problems, in varying degrees”, “attention deficits”</td>
</tr>
</tbody>
</table>

Overall, the comparison of CANRA and the guidance highlighted some differences. First, the guidance referred to definitional components which were not involved in CANRA. CANRA referred to only three definitional components (i.e. abusive behaviour, intention, consequences) in the definition of “wilful cruelty or unjustified punishment” and two definitional components (i.e. abuser, child age) inclusively for all types of CAN. On the other hand, the guidance referred to other definitional components which were not involved in CANRA (e.g. frequency). Second, the guidance specified the meaning of individual components whereas CANRA left them broad.

**Another threshold which does not reach mandatory reporting threshold - ‘may’ be reported**

As can be seen, the guidance referred to multiple definitional components. However, it does not mean that all the definitional components, which were involved in the guidance, contribute in determining the response threshold of PEA. Indeed, there was further information which clarifies what is or what is not the criteria determining the response thresholds.

The first explicit statement on the threshold was addressed with consequences. The guidance stipulated that “mental suffering in and of itself” does not have to be reported. Rather, it “may” be reported, suggesting that the mandatory reporting obligation does not occur only based on the presence of adverse mental effects on the child.
Second, the guidance referred to the threshold in relation to how PEA comes to the attention of professionals. It states that “reasonably suspicious” PEA which “must” be reported frequently comes to light through verbal disclosure or direct observation. When there is no verbal disclosure or direct observation, but professionals suspect PEA, this “may” be reported. The guidance focuses on ‘how’ suspicion arises rather than specifying a threshold criterion based on definitional components.

From this, it can be seen that there are ambiguous situations which do not reach the mandatory threshold, but professionals have some degree of responsibility to respond.

Overall, two thresholds of PEA were identified in the guideline of California. One was the threshold for mandatory reporting, which must be reported. CANRA specified a mandatory reporting threshold, explicitly involving three definitional components. But the meaning of each individual definitional component was not thoroughly explained. Therefore, the meaning of each component was left ambiguous for interpretations. Another was the threshold which might be reported (non-mandatory reporting). In contrast the mandatory reporting threshold, the non-mandatory reporting threshold referred to various definitional components and provided more concrete descriptions of each definitional component.

Diagram 3-3: Different levels of thresholds - California

(B) Japan

In Japan, there is the Child Abuse Prevention Law (CAPL), which was established in 2000. CAPL explicitly includes PEA as one of the forms of CAN. Nevertheless, unlike California, there is no mandatory reporting law.
Referral/report
The central characteristic of the Japanese guidelines is the lack of specification about threshold criteria. In 2004, the definition of ‘reportable’ CAN (including PEA) in CAPL was extended from “the child who was abused” to “the child who might be abused”. The scope of the new definition involves not only situations when there is evidence of abuse/neglect, but also situations when there is no evidence, but there is suspicious of abuse/neglect. That is, the meaning of reportable situations has extended, and this change now allows people (both professionals and non-professionals) to report cases even without specific evidence of ongoing abuse/neglect. However, it is not clear from the statement how to judge the child ‘might’ be abused. Therefore, there are no precise criteria which clarify the threshold of PEA. This phenomenon was observed in England and California to some extent, but the degree of vagueness was higher in Japan due to the lack of reference to definitional components other than abusive behaviours.

Temporary immediate protection
The main criteria which result in further discussion regarding emergency temporary protection are when (i) the child is seeking protection, (ii) what the child claims is likely to happen soon, or (iii) there are ongoing significant consequences (p.101-102). Although the third criteria relate to the inherent nature of PEA, the other two are based on the child’s attitude or statement.

Legal separation
Under Article 28 of Child Welfare Law, legal separation of a child from their family can be applied when there is abuse, neglect or other form of significant violation of child welfare which meets the definition set by CAPL. However, even when the case does not meet the CAPL definition, “when the guardian’s child-rearing harms the child’s welfare”, the legal separation can be approved.

Overall, one of the characteristics of threshold criteria in Japan was its ambiguity. In addition, there was a lack of consistency in criteria for different level of response.
(C) England

Like Japan, there is no mandatory reporting law in England. But all the guidelines in this chapter were underpinned by Children Act 1989 and Working Together.

Exceptionally in England, additional PEA specific guidelines were identified at the regional level. Therefore, this part of the study firstly examines broad guidelines on CAN like California and Japan. Then, regional PEA specific guidelines are analysed to identify the thresholds of PEA.

- CAN guidelines

**Referral/reporting**

When a child is considered to be “in immediate danger” or “at risk of harm”, professionals are required to refer the case to relevant agencies such as local authority children’s social care. Subsequently, local authorities have a duty to make inquiries when the child is suffering or is likely to suffer from significant harm in order to determine whether the action should be taken or not (Section 47, Children Act 1989).

**Immediate protection**

While the assessment is undertaken, some children might require immediate protection. When there is “a risk of the life of a child” or “a likelihood of serious immediate harm”, statutory child protection powers should be immediately used to ensure the child safety. The powers can be used by social workers, the police, or NSPCC.
Child protection plan

A child protection plan is set by local authority, aiming to keep the children safe as well as to make things better for the family. When there is evidence that a child has suffered or is likely to suffer from significant harm, a protocol is developed. When it is thought necessary, appropriate legal action is also considered.

As can be seen, the threshold criteria were specified based on harm (consequences) to the child for different levels of response, within as well as across guidelines. Importantly, both actual harm and potential harm were considered as assessment criteria. This feature enables intervention regardless of the explicit evidence of consequences as long as there is a risk of harm.

Diagram 3-5: Different levels of thresholds - England

- PEA guidelines

In England, some regions (i.e. Bristol; Nottinghamshire) have produced PEA specific guidelines. Consistent with other guidelines, significant harm was the key notion to determine the threshold of PEA.

The significance of PEA guidelines, which is different from CAN guidelines, is the provision of extensive information which helps professionals to apply the definition in context. The information included: nature of worrying interaction; frequency of worrying interaction; nature of consequences on the child; the degree of consequences on the child (mild, moderate, or serious); and a link between parental behaviour/status and state of the child. Additionally, it explicitly states that PEA could exist without clear abuser’s intention, suggesting intention is not a necessary criterion to define PEA. As can be seen, PEA guidelines were clearer about how professionals should apply the definition practice than CAN guidelines.
Summary
Overall, it has been demonstrated that there are different approaches to screen out cases. California filters out cases at initial phase by having a high threshold set for mandatory reporting. On the other hand, England and Japan set out lower threshold criteria than California. They were more open to potential PEA cases and filter out cases later with a formal assessment procedure.

3.5.3. Issues in applying the definitions in practice
Professional guidelines not only consider what PEA means as an abstract concept but also provide guidance on how to respond to actual or potential cases as PEA. PEA could come to professionals’ attention in various ways. That is, there are various types of contexts for professionals to apply the definition. This part of the chapter discusses the relevant issues based on the contexts identified across the guidelines.

Direct observation of PEA
An obvious route for professionals to come across PEA is directly observing abuse/neglect or risk of abuse/neglect. Regarding this, there were only a few explicit statements in the guidelines. The California guideline stated that one of the common ways for PEA which meet the higher threshold (‘must’ be reported) to come to light is via direct observation. In England, direct observation was referred in relation to interaction.

“Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it, for example, in the way that a parent interacts with their child.” (HM Government, 2015, p.7)

The statement above implies that PEA can be observable from interaction even if a negative consequence is not present.

In theory, direct observation (e.g. witnessing ongoing PEA) allows professionals to apply the definition in practice straightaway. Nevertheless, there are some practical difficulties. First, it may be difficult to witness PEA in practice because the majority of family interactions occur in a private space. For example, a parent who behaves nicely to the child in public could be abusive only when no one else is around.
Second, it may be difficult to evaluate the situation with limited time and access to the child. Third, when the threshold criteria are not explicit in theory (as in, for example, Japan), it would be almost impossible to apply the criteria.

**Verbal disclosure**

As stated in Chapter 1, there is always someone who is responsible for PEA – abuser. When there is an abuser, there is also a victimised child who is a recipient of PEA. Either of them, an abuser or a victimised child, could come forward and disclose their experience to others including professionals.

Similar to direct observation, there were a few statements about verbal disclosure in the guidelines. The California guideline state that PEA, which falls into the category of ‘must’ be reported, is commonly revealed via verbal disclosure. Although this does not specify whose verbal disclosure, it is likely to refer to that of the child. The implication here is that the child’s verbal disclosure itself becomes the evidence of PEA, therefore meets the high threshold for mandatory reporting. The Japanese guidelines did not specifically refer to verbal disclosure of PEA. However, as part of the guidelines, it emphasised the importance of establishing a good relationship with children so that children could seek help when they need to do so. In contrast to California and Japan, English PEA guidelines (i.e. Bristol; Nottinghamshire) asserted that children were unlikely to reveal the reality of their situation to others. The potential reasons are discussed in the following section.

**Reasons for infrequent child verbal disclosure**

As it was presented, some PEA guidelines argued that the child’s verbal disclosure is unlikely to occur. There are some possible reasons why verbal disclosure can be rare in practice. First, children may not be willing to disclose their experiences because of fear about possible subsequent negative consequences. Indeed, Kantor et al. (2004) asserts that younger children might have stronger fear about reporting violence which occurred in a family context than older children. The authors also point out that younger children may be likely to feel guilty about disclosing interfamilial violation which they believe to be family secrets.

The second possible reason is that children have a fear that their disclosure may not be taken seriously. Lollar et al. (1982) identified that children’s experience of pain was underestimated by adults. This suggests that children’s experience of PEA
as an unpleasant or hurtful experience could be also underestimated. In addition, according to Dingwall et al. (1983), when parents are perceived as morally good, formal intervention is unlikely to be undertaken. The implication here is that even if the child discloses his/her negative experience, the professionals might see a parent as a good person and may not take any action.

Third, children may be told not to talk about their experience to others by an abuser. Bottoms et al. (1990) (cited by Steward et al., 1993) identified that children (5 years old) were likely to remain silent about the event when mother asked them to do so. The study let children witness wrongdoing (breaking a doll) of their mothers. The mothers subsequently asked children not to tell the event to others. As a result, children were likely to keep secret regardless of the leading questions. From this, there might be circumstances, for example, threats or begging of an abuser, which make children not able to report their negative experiences of PEA to others.

Fourth, the child might try to defend the abuser’s behaviours. Indeed, a Japanese guideline states that there are children who try to protect parent/carer from blame. It continues that it is therefore important to appropriately deal with the issue by acknowledging the possible feelings of the child. Foynes et al. (2009) reported that children who experienced PEA from abusers with whom they have a very close relationship, were more likely to take longer to disclose or never disclose compared to those who experienced PEA from an abuser who is not very close to them. One explanation of this is that there is a general tendency to report abusive experiences later (e.g. London et al., 2005). Another explanation is that children who are abused by someone close to them are more likely to worry about adverse consequences than children who are abused by someone whom they do not depend on daily, because of the fear of negative consequences (as was pointed out earlier in relation to the first point above).

Fifth, children may have limited ability to process, assess or articulate their experience as PEA. This might be because of their level of cognitive development (Kolko et al., 1996; Steward et al., 1993). Adolescents might be better at processing this than younger children. Nevertheless, attributing PEA to the responsibility of the abuser is hard for adults, and this can be even more difficult for children or children with disabilities.
Finally, children may not talk about their experience of abuse/neglect because they are never being asked (Lyon et al., 2007). For example, when a professional approaches and talks to the child, first, it could make the child realise their experience was something they did not deserve, and therefore they could seek help from others. As was pointed out earlier, children may not have understood the concept of PEA or other types of CAN, or they might be threatened for speaking out. Therefore, approaching children might enable them to disclose their experience. Second, when the child is approached by a professional, s/he could build up trust and could feel at ease to discuss their personal experiences. This is because the gesture to approach the child itself shows that the person cares about the child. Indeed, Japan considers that it is important to build a trusting relationship so that children could seek help for professionals when it is required. In addition, because of the difficulty of verbal disclosure, English procedures emphasise the importance of questioning child’s behaviour (HM Government, 2015b). Considering these factors, professionals could play a significant role when they are able to detect the sign of PEA.

**Reasons for rare verbal disclosure of abuser**

Additionally, although the guidelines did not explicitly refer to it, verbal disclosure is also possible from an abuser. However, first, an abuser may not recognise that his/her behaviour can lead to negative consequences towards the child. Rather, they might believe that their negative abusive behaviour was necessary for the child. Second, an abuser might not be willing to disclose the fact they are being abusive. Presumably, nobody, including a parent or a carer, would like to be defined as an abuser.

Overall, there were only a few points made by the guidelines about the disclosure of abuse/neglect. Nevertheless, the discussions in this part of the chapter have highlighted the existing dilemma between negative abusive experiences of children and their difficulties to be open about their experiences to others.

**Receiving a notification from a third party**

In addition to direct observation and verbal disclosure (of the child or the abuser), it is also possible for professionals to receive notification from someone else regarding the concern about the child.
One of the examples explicitly stated in the guidelines was a friend of the child. The California guideline states that a child might disclose his/her experience to another child who subsequently tells this to a professional. Another example is the professionals’ colleague. It is also possible for professionals to receive notification from colleagues and become involved in a process to understand the situation, but this was not clearly stated in the guidelines. As mentioned earlier, in California, mandatory reporters have a duty to make a report if they happen to know about a failure to report by someone with reporting responsibility.

Moreover, although not mentioned in the guidelines, professionals could possibly receive notification about concerns of PEA from other people such as a parent of the child’s friends, neighbour, or patient.

**Summary**

As can be seen, there are various routes for professionals to obtain relevant information regarding PEA. Most importantly, the examination has highlighted the practical difficulties for professionals to obtain relevant information on PEA. This means that professionals are required to judge and make decisions based on “imperfect knowledge” (Munro, 1996).

### 3.6. Discussion and conclusion

This chapter has examined how guidelines help professionals to move from theory to practice. Professional guidelines contextualise PEA into professional practice and, therefore, encompass broader information compared to abstract definitions examined in Chapter 2. Information in the professional guidelines includes (i) abstract definitions, (ii) threshold and response, and (iii) issues in applying the definitions in practice. These are all relevant information for professionals’ practice. Amongst these, the central focus of this chapter is on (ii) threshold and response and this is further explored in this section.

#### 3.6.1. Threshold and background of each jurisdiction

The examination of the guidelines demonstrated that the thresholds vary for different levels of response within as well as across jurisdictions. This finding raised the question of why such diverse thresholds exist for PEA? In this section, the nature of thresholds is discussed with reference to the background of each jurisdiction.
In California, the guideline suggested that there are two levels of thresholds for PEA. One was a higher threshold which defines the criteria of mandatory reporting, and another was a lower threshold which is for optional reporting. The nature of the thresholds may be underpinned by the child protection system, especially the existence of mandatory reporting law CANRA. A possible benefit of legal mandate reporting duty (e.g. California) is its clarity of professional responsibility. Such clarification could improve individuals' awareness about their responsibility to report PEA. This could enhance the practice of identification of PEA due to psychological pressure (e.g. penalty) on professionals.

However, mandatory reporting could lead to over-reporting of cases (Mathews & Kenny, 2008) and overwhelm child protection agencies (Gilbert et al., 2009a). When child protection agencies are overwhelmed, reported cases might not be adequately responded to due to lack of resources (e.g. time, staff). Indeed, “when mandatory reporting exists, the proportion of children investigated by child-protection services, who have maltreatment substantiated, is low” (Gilbert et al., 2009a, p.168).

Presumably, considering the pros and cons of mandatory reporting, California sets two levels of thresholds for PEA which allows a “fish-net” (Gibbons et al., 1995), for identifying different levels of PEA. The high threshold based on CANRA could capture extreme cases which can be brought to court proceedings. Nevertheless, it is unlikely that PEA cases, which are often difficult to leave obvious evidence, are brought to court. That is, many cases can be missed only with the higher threshold. Therefore, the lower threshold plays an important role to capture cases which do not meet the high threshold based on CANRA.

The guidelines in England referred to various definitional components and emphasised 'significant harm' (both actual and potential harm). The concept of significant harm is important. First, it indicates a situation which is harmful to the child, namely, this approach values the needs of children. Second, it is an important concept for professionals. The concern of professionals is less about worrying about whether it is abuse/neglect or not, but whether a response is required to protect the child from future harm. By involving potential harm as well as actual harm, this definition allows the authority to intervene either with or without explicit evidence.
As seen earlier, the details of the thresholds of PEA were different between California and England. Nevertheless, it was common that both took into account situations both with and without evidence of explicit consequences of PEA. This probably reflects the attitude of both jurisdictions that cases without obvious evidence of effects of PEA are still dealt with appropriately under the child protection system.

Compared to California and England, Japanese guidelines had rather ambiguous thresholds for PEA by referring to some types of abusive behaviours. A benefit of the ambiguous threshold is that this provides professional flexibility in response to possible PEA. However, it could be considered that this gives too much power to professional judgement. This may also lead to confusion amongst professionals because individual staff could vary considerably in what they consider abuse/neglect or not.

Unique social values in Japan could explain the ambiguous threshold of PEA. First, Japanese society might underestimate the significance of PEA as a social issue. According to Gough (1996a), Japanese society values children, but it does not guarantee that “all children are so valued or that a desire to care well for children is always achieved in practice” (ibid, p.14).

Indeed, there are some examples to support this statement. One is that Japan is tolerant to physical punishment. There is an idea in Japan that physical punishment is “affection for my dear child” (Morita, 2002a, 200b; Nishizawa, 2010 cited in Kadonaga and Fraser, 2010, p.10). This culturally embedded idea might have affected policy. For example, Japanese law has banned physical punishment only in the school setting. This means that physical punishment in the home setting is technically allowed and this is concerned by the Committee on the Rights of the Child (United Nations Committee on the Rights of the Child, 2019).

Nevertheless, this is still an ongoing issue while the national government has been seeking an option to ban corporal punishment in the home setting especially after a 10-year-old girl’s death due to severe persistent physical abuse (BBC News, 2019). Another example is that Japan is tolerant of child pornography. In 2014, possession of child pornography was legally banned in Japan. However, sexualisation of children is widespread and can still be observed in various settings such as TV commercial, advertisement, games, and books.
It can be argued that these examples illustrate that Japan is slow in implementing child protection. However, the counter-argument would be that Japan has different criteria for protecting children from other countries which consider, for instance, physical punishment and child pornography as serious issues. Similarly, there may be culturally different criteria for PEA which makes its definition unclear in Japan.

Second, Japanese society might be hesitant in defining PEA. According to Kadonaga and Fraser (2015), family matters are often seen as private in Japan, and there is a phenomenon that people do not want to get involved in family affairs even if they recognise potentially abusive situations in the neighbourhood. Under such a cultural phenomenon, people may be reluctant to discuss PEA which is often considered to occur in a family setting (see Chapter 2 for the details). Moreover, such reluctance could not only occur in daily lives but also in the practice of research. Indeed, in Japan, there is a lack of research on PEA (Ike, 2006). The scarcity of evidence on PEA could make policy-makers, those who manage guideline development, reluctant to define and act on PEA.

Overall, this chapter highlighted that the level and strictness with which potential cases are identified (Gibbons et al., 1995), is constructed differently across the jurisdictions (as explained in Section 3.5.2.).

3.6.2. Limitations

There were some limitations of this chapter. The first limitation was the inclusion criteria of guidelines. There are different types of guidelines which were not included in this chapter. Excluded guidelines include ones which are created by local governments and which are not available for the public. However, the main aim of this chapter was to grasp an overview of professionals’ roles and responsibilities regarding PEA which is shared at the national/state level. Thus, the inclusion strategy was appropriate for the purpose of this chapter.

The second limitation was the inclusion of a limited number of jurisdictions. This chapter examined three jurisdictions which shared similarities as well as differences in contexts. For a future study, it would be interesting to investigate other jurisdictions to add more contextual variations.
3.6.3. Implications

The examination of professional guidelines in this current chapter demonstrated various thresholds of PEA within as well as across the three jurisdictions. What is highlighted in this chapter is that professionals are not necessarily provided clear explicit guidance about how to deal with PEA cases. Based on the findings, there are some recommendations for research, policy, and practice.

First, it is suggested for guidelines to elucidate response thresholds of PEA in a way that professionals can understand, regardless of their different level of experiences or capacities. As shown, all the guidelines involved various information (e.g. abstract definition, threshold, risk factors) in one guidance document to contextualise the definition of PEA. All of these are important. Nevertheless, the information which specifies response thresholds may be one of the most significant aspects of professional practice. The thresholds based on the definitional components can be clarified in terms of:

- the combination of definitional components, and
- the meaning of each definitional component

If they are difficult to specify and left for professionals’ interpretations, it needs to be explicitly stated.

The meaning of response thresholds was more or less left for professionals to interpret and based on their decisions. For instance, like other jurisdictions, guidelines from England, inclusively refer to various definitional components of PEA. However, the response threshold was consistently referred to as the risk of harm. The consistency of the response threshold is a strength of the approach in England, but the meaning of harm can still be interpreted differently by individual professionals. In California, the mandatory reporting threshold was specified with three definitional components. However, the meaning of each component was not specified. As a result, the mandatory reporting threshold also appeared to be left broad for individuals’ interpretations. Compared to California and England, the response threshold of PEA of Japan was very unclear. The central information about PEA was the legal definition by CAPL. That is, the Japanese guidelines lack the information to help professionals understand when they should respond.
Second, in relation to the specification about the response thresholds, guidelines could be more specific whether PEA should be defined based on abusive behaviours or consequences, or both. As can be seen, England emphasises the importance of the risk of consequences. In contrast, Japan and California left some ambiguity.

Third, it is suggested for guidelines to re-consider whether treating all types of CAN in the same way is the best strategy. In some of the regions in England, few PEA specific guidelines were identified. On the other hand, the major national level of guidelines treated PEA as one form of CAN. There are also some aspects of the guidelines shared for all types of CAN, although there were some statements specifically about PEA. It is certainly important to grasp the broad picture of CAN before developing in-depth knowledge about sub-categories of CAN (e.g. PEA, neglect, sexual abuse, physical abuse). However, having the same thresholds for all types of CAN might be questionable. For instance, in Japan, the threshold for temporary immediate protection involved the criteria “there are ongoing significant consequences” (p.101-102). Considering only this aspect, PEA is unlikely to meet the threshold compared to other forms of CAN which could present consequences in visible form. Therefore, it could be that the threshold might not be able to protect the child from ongoing PEA.

Fourth, it is suggested to treat PEA as an independent form of CAN and to provide a consistent definition across guidelines within the same jurisdiction. In England, the central definition of PEA was established in Working Together and it was applied consistently amongst both national and regional guidelines. On the other hand, Japanese guidelines did not consistently use the same definition. Although the legal definition was often referred to in the guidelines, it was not clear if the guidelines also apply the legal definition or slightly adjust for practical use. Moreover, the Japanese guidelines did not have a dedicated section for PEA unlike other forms of CAN such as physical abuse and sexual abuse. The current approach of the guidelines could deliver a message to readers that PEA is less important than other CAN due to its lack of information, and this should be improved in order to avoid confusion for professionals.

Fifth, it is recommended for Japan to have a national level of guideline for professionals to understand their responsibilities about CAN including PEA. Professionals have various professions’ positions and working environments, and
the situations in which they might come across PEA vary. Regardless of the varieties, it is important for professionals to understand their roles and responsibilities. Also, understanding what is common across professional backgrounds might help people to communicate better in practice.

Sixth, it is suggested for Japan to refer to cultural considerations in the guidelines. Both in California and England, there were statements to emphasise the importance of taking cultural diversities into account. This is particularly important for PEA where the definition of appropriate or inappropriate parenting matters (see Chapter 2). It is, therefore, a responsibility for the government to prevent minority group from becoming vulnerable to PEA and provide sufficient support when it is necessarily (e.g. language translation support). At the same time, however, it is also important to consider how cultural issues could result in cultural bias. Although understanding cultural differences is important, it is also crucial to understand that not every single person acts in the same way regardless of their cultural background.

Seventh, it is suggested to examine professionals’ definitions of PEA in practice. In order to identify PEA, there needs to be ‘awareness’ as well as ‘willingness’ to consider that children are abused/neglected, and the situation requires action (Gough, 1996a). Also, Michie et al. (2011) proposed a framework, which consists of capability, opportunity, and motivation, to improve practitioners’ behaviour in practice. These suggest that there are certain conditions which influence professionals’ practice. That is, there are possible gaps between how PEA is defined and how it is exercised by professionals.

Eighth, the conceptual framework developed in Chapter 1 has again been useful in distinguishing the nature of different abstract and operational definitions. Even if it is decided that guidelines should not be overly precise in defining the criteria to identify and respond to PEA, the guidelines could more overtly discuss the different components of the PEA definitions. This would provide a language for professionals to consider how components could be considered individually and in combination in order to make decisions about potential cases of PEA.
CHAPTER 4

RESEARCH ON PROFESSIONALS’ ABSTRACT AND OPERATIONAL DEFINITIONS OF PEA: A SYSTEMATIC REVIEW

Chapter contents

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4.2. Objectives and research questions
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4.6. Map (ii): Understanding the characteristics of vignettes with the definitional conceptual framework
4.7. Synthesis
4.8. Discussion and conclusion

4.1. Introduction

The previous chapters examined the theoretical meaning of PEA from two perspectives. Chapter 2 used the definitional conceptual framework developed in Chapter 1 to investigate the abstract definitions of PEA in the literature and demonstrated the diversity within and across the definitional components. Subsequently, with the same conceptual framework, Chapter 3 demonstrated that professional guidelines were unclear about the professionals’ operationalisation of PEA, in particular, in terms of response thresholds. Thus, the guidelines seemed to leave the responsibilities for professionals to judge and make decisions regarding PEA.

The term ‘professionals’ in this chapter refers to those who can be involved in child protection as part of their professional roles. The meaning of ‘professionals’ could differ depending on contexts and examining its meaning is one of the objectives of this chapter.
Having examined the abstract definitions in the literature and professional guidelines on how to respond to PEA, the question remains as to how in practice professionals exercise the definition of PEA. This chapter therefore undertakes a systematic review of research on professionals’ definitions of PEA. As stated in Chapter 3 - Section 3.1., front line professionals are in key and crucial position to exercise the definitions of CAN including PEA.

Professionals’ definitions involve two major perspectives. First is an ‘abstract definition’ which refers to the cognitive understanding of what PEA is. Second is an ‘operational definition’ which refers to the action of applying the cognitive understanding in making practical decisions. To clearly distinguish the concepts studied in previous chapters, this study uses the term ‘professionals’ abstract definitions’ and ‘professionals’ operational definitions’ to refer to professional practice.

Diagram 4-1: The relation between Chapter 2, 3, and 4
4.2. Objectives and research questions

The objective of this review is to clarify the evidence base on professionals’ definitions of PEA. In order to achieve this, the review addresses the following questions.

- What does the existing research literature tell us about definitions of PEA?
  - What do the study results tell us about professionals’ abstract definitions of PEA?
  - What do the study results tell us about professionals’ operational definitions of PEA?

4.3. Methodology

The approach of systematic review used here is informed by Gough et al. (2013) Learning from research: systematic reviews for informing policy decisions. and Gough et al. (2012) An introduction to systematic reviews.

4.3.1. Inclusion criteria and screening

The review questions inform what kind of research studies to include in the review. The specific boundaries of the types of studies to be included in the review were specified as:

- Abstract was available
- Reported in English or Japanese
- Studies of PEA of children
- Studies which regard CAN/PEA as intrafamilial issue
- Study participants included professionals
- Studies about CAN include PEA as one of the components
- The study report included primary data on professionals’ PEA of abstract definitions or/and operational definitions

4.3.2. Search strategy

Search sources

Different sources were exhaustively searched to identify relevant studies.
First, the two major bibliographic databases, PsycINFO (EBSCO) and PubMed, were selected for search in order to cover journals across the multidisciplinary areas in child psychology, and child social care and welfare. Key journals concerned with CAN and thus PEA such as *International Journal of Child Abuse and Neglect, Child Abuse Review, Child Maltreatment*, and *Journal of Aggression, Maltreatment, and Trauma* (previously named as *Journal of Emotional Abuse*) are covered by these databases.

Second, specific websites of well-known organisations which work on child protection were searched. The searched organisations included UNICEF; NSPCC Library Online; and Canadian Child Welfare Research Portal.

Third, Japanese key journal *Child Abuse and Neglect*, which has been published by Japanese Society for Prevention of Child Abuse and Neglect (JaSPCAN) since 1999, was hand searched because the journal is not available electronically.

Fourth, the reference lists of the papers reporting studies that met the inclusion criteria (after screening) studies were checked for further potentially relevant studies.

Fifth, related organisations and researchers were contacted through email to identify relevant literature or to obtain further details of studies.

Finally, search engines, Google and Google Scholar, were used to identify relevant studies which could have been missed by other searching sources.

**Search terminologies**

In order to identify research studies which meet the inclusion criteria (see Section 4.3.1.), three major concepts were combined in the searching. The search was for studies that included all three of the concepts of ‘PEA’, ‘professionals’ and ‘definition’. A sensitive search strategy using controlled terms as well as free-text was developed for each bibliographic database PsycINFO and PubMed (see Appendix for further details).
Diagram 4.2: Image of combination of different concepts

- PEA (Example of terms: ‘emotional abuse’; ‘psychological abuse’)
- Professionals (Example of terms: ‘practitioner’; ‘expert’)
- Definition (Examples of terms: ‘views’; ‘perceptions’; OR ‘action’; ‘behaviour’)

For searching the web using Google and Google Scholar and searches of specific websites complex searches were not practical or successful. In these cases a broader search strategy using variants of the term PEA was used.

### 4.3.3. Screening and coding of studies

The screening is the process to check that studies identified through the search strategy meet the inclusion criteria. Studies identified by the search strategy were initially screened based on title & abstract. Then, full-texts of studies that potentially met the inclusion criteria were obtained and screened in detail to determine the final inclusion of studies. All studies which met these inclusion criteria were imported into EPPI-Reviewer 4 (Thomas et al., 2010) for screening.

The screening process was piloted using a 10% random sample of the studies. This was conducted by two people (one was the reviewer for the entire process, and another was an experienced systematic review researcher working at the EPPI-Centre) in order to ensure the quality of screening process and minimise the potential errors.
The full screening was undertaken by the main reviewer, and the remaining studies were allocated to the first part of the review – map (i). A systematic map is a description of the nature of a research field (the studies included in a review) as defined by the review inclusion criteria. The studies in map (i) were coded to capture the scope of the studies which are addressing the issue of professionals’ definition of PEA. The coding process extracts relevant information to identify the features of included studies. The coded information included setting, reporting year, sample, study focus and types of studies. Further details are described later (see Section 4.5.).

The results of the map (i) identified a diverse range of studies, many of which were not relevant to the main focus of the review. It was therefore decided to narrow the scope of the review down to studies which presented close relevance to the definition of PEA.

The studies in the map that most closely examined the nature of professionals’ definitions of PEA were vignette studies. Vignettes are “short stories about hypothetical characters in specified circumstances” (Finch, 1987, p.105) and the studies examined whether professionals considered specific vignettes to be examples of PEA or not or asked how professionals would respond to situations described in vignettes. Vignettes used in the studies were diverse. Depending on what kind of vignettes are used, the results about professional definitions of PEA could change. Therefore, a second more focused map examined the nature of these vignettes.

Finally, study findings from the vignette studies were synthesised to understand professionals’ definition of PEA. A synthesis is an analysis of the findings of individual studies in order to answer the review questions (see Section 4.2.).

4.4. The pathways of studies through the process of searching and screening

The systematic searches located 10,494 records in total. Most of the studies were identified from the electronic databases (PubMed: N=6,494; PsycINFO: N=3,987).

After the exclusion of 1,110 duplicates, 9,384 records were screened by title and abstract. The majority (9,204) of these records were excluded as not meeting the
inclusion criteria. This left 180 potential papers that were screened in more detail using the full-texts of the papers, and 62 of these were identified as relevant in meeting the inclusion criteria. There were some studies that were reported in more than one paper and these papers were linked. After the removal of 8 duplicate papers from linked studies, 54 studies remained for data extraction (coding) and were included in the first map. The inclusion criteria were then narrowed to only include vignette studies leading to 43 studies being in the second map and synthesis (i). The PRISMA diagram 4-3 delineates the pathway of papers and studies through the whole process of searching and screening.

Diagram 4-3: PRISMA diagram of studies throughout the systematic review process
4.5. Map (i): the characteristics of identified studies involving professionals’ definition of PEA

The main analysis of the review is to synthesise the study findings on professionals’ definitions of PEA. Prior to the in-depth analysis, this part of the review aims to grasp the scope of the identified studies.

In doing so, the map examined six aspects of study features. First, study setting was coded because cultural context is one of the fundamental aspects of the definition of PEA. Research on PEA can be conducted only when the society perceives PEA as an issue. In addition, as stated in Chapter 1, the meaning of PEA can be influenced by cultural context.

Second, reporting year was coded because, similar to study setting, historical time is a significant aspect of the definition of PEA. Researchers from a certain time period might take PEA more seriously than researchers in other time. Also, as Chapter 1 discussed, historical times could shape peoples’ perceptions towards PEA.

Third, the sample was coded to understand the nature of meaning of professionals across the studies. Professionals could refer to diverse group of people and this needed to be clarified.

Fourth, study focus was coded to understand to what extent the study was relevant to PEA. The review included studies which involved an aspect of professional definition of PEA. Therefore, it was important to grasp to what extent an individual study was specifically on professional definition of PEA or other issues.

Fifth, the type of study was coded to understand the nature of relevance to PEA definitions in more detail than study focus. The studies in the review involved an examination of professional definition of PEA. However, the rational and central aims of these studies can vary.

Sixth, research strategy was coded to further develop understanding of the nature of studies identified by study types.
4.5.1. Settings

The studies were undertaken across 15 different countries in total. There were 4 studies which did not provide explicit information in regards to study location.

Table 4-1 shows that nearly half of the studies were undertaken in the United States (42%; N=23). There are some possible explanations for the high proportion of studies conducted in one country. First, it might be a reflection of high social awareness towards PEA. Indeed, recognition of PEA was started in the US (e.g. Garbarino et al., 1986). Second, professionals in the US might be more willing to participate in studies involving PEA which is often considered as a sensitive issue. Third, the US is a large country consisting of 50 states with independent jurisdictions. Therefore, it might mean that the US has more opportunities to conduct PEA related research compared to other countries. Fourth, there is relatively high research capacity in the United States in terms of both research funding and personnel with research skills.

The majority of studies (76%) were conducted in countries where English was an official language or one of the official languages (i.e. US, UK, Australia, Canada, Singapore, South Africa, India, New Zealand). The high domination of English speaking countries may be affected by the search strategy focusing on English and Japanese language resources.

Table 4-1: Country

<table>
<thead>
<tr>
<th>Country</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>US</td>
<td>23 (43%)</td>
</tr>
<tr>
<td>UK</td>
<td>6 (11%)</td>
</tr>
<tr>
<td>Israel</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Australia</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Canada</td>
<td>3 (6%)</td>
</tr>
<tr>
<td>Singapore</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>Japan</td>
<td>2 (4%)</td>
</tr>
<tr>
<td>South Africa</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Taiwan</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Spain</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Finland</td>
<td>1 (2%)</td>
</tr>
</tbody>
</table>
4.5.2. Sample

Various groups of professionals were examined across the different studies. Some studies examined only professionals (48%; N=26). In total, 30% (N=16) of studies examined more than one professional groups. Other studies examined both professionals and non-professionals (22%; N=12).

Table 4-2 shows that the most frequently recruited professionals were teachers (37%), and this was followed by nurses (26%) and social workers (19%).

Overall, the results illustrated that a wide range of professional groups have been studied in relation to PEA. The high proportion of certain professional groups might suggest, first, researchers consider they play crucial roles in PEA. Second, it could also mean that these professional groups were more willing to take part in research.

Table 4-2: Professional groups across the studies

<table>
<thead>
<tr>
<th>Professional group</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher</td>
<td>21 (38%)</td>
</tr>
<tr>
<td>Nurse</td>
<td>14 (26%)</td>
</tr>
<tr>
<td>Mental health professionals</td>
<td>15 (28%)</td>
</tr>
<tr>
<td>Physician</td>
<td>9 (17%)</td>
</tr>
<tr>
<td>Health visitor</td>
<td>5 (9%)</td>
</tr>
<tr>
<td>Social worker</td>
<td>10 (19%)</td>
</tr>
<tr>
<td>Worker at child protection/welfare services</td>
<td>9 (17%)</td>
</tr>
<tr>
<td>Nursery school carer</td>
<td>1 (2%)</td>
</tr>
<tr>
<td>Lawyer/attorney</td>
<td>4 (7%)</td>
</tr>
<tr>
<td>Police officer</td>
<td>4 (7%)</td>
</tr>
</tbody>
</table>

*Not mutually exclusive. Some studies included multiple professional groups.
Professionals were categorised into the groups in Table 4-2 based on the explicit terminologies used in the texts of the studies, but this was not an exact process as authors used different terms to describe types of professionals. There may be similar professional groups those who have slightly different roles and responsibilities depending on contexts (e.g. country, local authority). For instance, people who were recruited from a child protection team or agency were described in various ways. They might include professionals from different backgrounds such as medicine or social work. This means that workers might have a main role and then have a second role as part of child protection team. Few studies (4%) selectively recruited professionals who had previously been involved in PEA in practice.

4.5.3. Report year

Table 4-3 shows the dates in which the studies were reported. The total number of studies undertaken showed a significant increase during the 1990s. This might suggest that there was an increase of research funders or researchers’ awareness about PEA. There were indications of increased awareness of abuse/neglect in general and PEA specifically in the 1980s and 1990s. Examples include the International Conference on The Psychological Abuse of Children and Youth in 1983 (Edmundson & Collier, 1993) and the publication of The Psychologically Battered Child by James Garbarino and his colleagues in 1986.

There might also be an issue of accessing older studies which may not be as available on electronic databases and websites as more recent studies. Also, it is important to note that the current decade from 2011 is not yet complete.

<table>
<thead>
<tr>
<th>Year</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before 1980</td>
<td>1 (%)</td>
</tr>
<tr>
<td>1981-1990</td>
<td>4 (%)</td>
</tr>
<tr>
<td>1991-2000</td>
<td>27 (%)</td>
</tr>
<tr>
<td>2001-2010</td>
<td>18 (%)</td>
</tr>
<tr>
<td>2011-2014</td>
<td>4 (%)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>54</td>
</tr>
</tbody>
</table>
4.5.4. Study focus

This review only included studies which explicitly included PEA as a variable. As shown in Table 4-4, the majority of studies examined PEA with other forms of CAN. There were 12 studies which examined PEA alone.

Table 4-4: Topic of study

<table>
<thead>
<tr>
<th>Topic</th>
<th>N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEA</td>
<td>12 (22%)</td>
</tr>
<tr>
<td>PEA and other forms of CAN</td>
<td>42 (78%)</td>
</tr>
<tr>
<td>TOTAL</td>
<td>54</td>
</tr>
</tbody>
</table>

Most of the studies were not specifically on the definition of PEA. Rather, their research was likely to be undertaken on CAN broadly and PEA was one of the sub-categories.

4.5.5. Types of studies

All of the studies in the map involved professionals' definitions of PEA. However, their relevance to PEA was diverse. To conceptualise this diversity further, the studies were grouped into different types based on their study aims.

As shown in Table 4-5, nine study types were identified. It is important to note, first, one study can involve several aspects. Thus, a study can be allocated into multiple categories. Second, when a study consists of multiple aspects and involves an irrelevant study, only the information relevant to professionals' definition of PEA was considered in grouping studies.

Table 4-5: Study types based on study aims

<table>
<thead>
<tr>
<th>Type of studies</th>
<th>List of included studies</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Testing perception</td>
<td>Al-Moosa (2003); Arruabarrena &amp; Paúl (2012); Beck et al., (1994); Beck &amp; Ogloff (1995); Bjerke (1993); Boss (2013); Briggs &amp; Potter (2004); Campbell (2000); Carleton (2006); Collier et al., (1999); Crenshaw (1995); Fraser et al., (2010); Fung &amp; Chow (1998); Giovannoni &amp; Becerra (1979); Haj-Yahia (2000); Hansen et al. (1997); Hawkins &amp; McCallum (2001); Howe et al., (1988); Kean &amp; Dukes (1991); Masuda &amp; Asada (2003); Misener (1986); O’Toole (1993); O’Toole et al., (1999); Pakieser et al., (1998);</td>
</tr>
</tbody>
</table>
(1) Testing perception
The studies in this category examined the level of knowledge about PEA with reference to the researcher’s a priori definition of PEA. (Researchers’ definition refers to their a priori idea about what is or what is not PEA.) The instrument used to test or check knowledge was either (i) developed for the study or (ii) adopted from previous literature. All of these studies used vignettes as their research strategy.

(2) Develop instrument of CAN
The studies in this category aimed to develop an instrument to measure CAN (including PEA). The development of the instrument is undertaken as part of the
study. Subsequently, the validity of the developed instrument was checked using professionals' perceptions.

Two studies (i.e. Heyman & Slep, 2006; Slep & Heyman, 2006), which were categorised into this study type, were part of the same series of research projects.

(3) Nature of actual case
A single study type explored the nature of actual cases of PEA. Rushton & Dance (2005) examined a specific form of PEA, a child being negatively singled-out (Chapter 2 demonstrated that this form of abusive behaviour, being singled-out, was commonly a part of the abstract definitions of PEA). It was clear that the study was about PEA by the authors’ use of the term “emotional abuse” and “emotional maltreatment”. The paper consists of three studies, and the first study was about professionals’ definition of PEA. The aim of the study was to understand health visitors’ perceptions as well as what made them concerned. In doing so, those who previously identified singled-out PEA during their work were interviewed.

(4) Explore perception
The studies in this category examined respondents understanding of PEA (but without using an a priori definition as in study type 1).

(5) Consensus development of definitions
The aim of these studies was to develop a definition of PEA. The studies used vignettes to understand study participants’ opinions about PEA and then used these to develop a definition of PEA.

(6) Response attitude
The studies in this category examined how professionals respond to certain situations such as presentation of cases that might involve PEA.

(7) Factors influencing response attitude
The studies in this category aimed to understand the factors why professionals report or do not report certain situations as abuse/neglect. The influential factors were examined with different strategies. One strategy was to use vignettes. Another strategy was to present respondents with independent qualitative questions about the factors that affect reporting. This study type has some overlap with type 6 which
took a more open approach to examining responses to PEA rather than aiming to identify factors affecting reporting.

(8) Training evaluation
This study type evaluated the effectiveness of training based on professional abstract definitions.

Hawkins and McCallum (2001) examined the effects of mandated notification training by comparing those who received and who did not receive training. The focus of this study was to measure the effectiveness of the training based on vignettes.

Glaser et al. (2012) examined the effectiveness of training on the four tiers of concern of PEA described in her FRAMEA framework, specifically on PEA, based on FRAMEA. This is a definitional framework developed by the author consisting of four tiers of concerns (the nature of definition suggested by Glaser was already discussed as part of abstract definitions in Chapter 2). In this study, therefore, the author’s priori definition (FRAMEA) was the fundamental part of the study.

(9) Not initially PEA focused
There were a few studies (n=3) which did not initially aim to study PEA, but the results happened to involve PEA. For instance, Paavilainen and Tarkka (2003) conducted focused interviews amongst public health nurses in Finland. The study participants were encouraged to talk freely about their professional experience with abused/neglected children and their families, and they defined CAN as physical abuse and PEA. The study happened to involve findings of PEA without having a priori definition of PEA.

4.5.6. Research strategy
The range of types of studies described the diversity within the professional definitions of PEA. To further grasp the characteristics of the studies, this section explores research strategies.

Research strategy is usually underpinned by study aim. However, it was not possible to group studies based on study aims as well as research strategies. That is, the studies categorised into the same study type do not always use the same
research strategy, and vice versa. Regardless of this, the frequent use of vignettes (n=43; 80%) was identified.

Diagram 4-4: Conceptualising studies based on study aim and research strategy

As Diagram 4-4 illustrates, four types of studies (Study type 1, 5, 6, 7) out of nine were predominantly undertaken based on vignettes. Having closely looking at these studies, different research focus within the scope of professionals’ definitions of PEA were identified.

The first group of studies investigated professionals’ abstract definitions based on vignettes. Study type 1 used vignettes to understand professionals’ definition of PEA. Study type 5 used vignettes to develop the definition based on professionals’ consensus. Regardless of the different study aims, both types of studies used vignettes to investigate the professionals’ theoretical threshold of PEA. In this thesis, this is referred to as “professionals’ abstract definition”.

The second group of studies examined professionals’ operational definitions based on vignettes. Study type 6 used vignettes to measure professionals’ response threshold, namely, when professionals respond or when they do not respond. In this thesis, this is referred as “professionals’ operational definition”.

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The third group of studies used vignettes to examine the influential factors on professionals’ response. Study type 7 used vignettes to understand influential factors on professional response.

Vignettes are constructed by someone. Therefore, vignettes are underpinned to some extent of a priori definition. In other words, explicitly or implicitly, researchers think over what is or what is not PEA during the process of developing their research design. Therefore, the use of vignettes suggests some degree of researchers’ interest in seeking the boundary of the definition of PEA.

**Summary**

The first map (Map i) has demonstrated the diverse characteristics of the studies. The studies were underpinned by various contexts, focus, and purposes. Having observed these multiple diversities, we can think about what these results, as a whole, tell us about the scope of the identified studies. Broadly speaking, the nature of the studies was too diverse to synthesise their results. This implies that the scope of the studies needs to be narrowed.

4.6. Map (ii): understanding the characteristics of vignettes with the definitional conceptual framework

The first phase of the review, map (i), concluded that the breadth of the identified studies was too extensive to synthesise their results, therefore, the scope of the review needs to be further restricted.

Considering the central aim of the review to understand the nature of professionals’ definitions of PEA, it is crucial to understand ‘how’ the studies were undertaken. Thus, the scope of the review was narrowed down based on their research strategy.

Having observed the research strategies amongst the studies in the map (i), what appears to be a significant distinction amongst the studies was whether a study sets a priori definition of PEA or not. In this context, the term ‘priori definition’ refers to researchers’ (i.e. those who undertaken primary research) initial idea about what PEA means.
Some studies set priori definitions, but others do not. Due to the nature of its technique, vignette studies were underpinned explicitly or implicitly by a priori definitions, namely, an illustration of relevant stories about PEA. Therefore, the current and subsequent parts of this review focus on vignette-based studies.

Vignettes, one of the common research strategies amongst the identified studies, reflect an idea of what is considered as PEA or potentially PEA by researchers. Based on vignettes set by researchers, studies usually examine how study participants respond to certain questions. In other words, vignette-based studies explore study participants' thresholds of PEA based on a priori definitions of PEA set by researchers.

If all studies use the same series of vignettes to scrutinise PEA, synthesising study findings would be a simple procedure. However, in reality, what is included within a vignette differs tremendously from study to study. Therefore, this review examines the nature of vignettes before synthesising the study findings. In doing so, the vignettes of PEA are unpacked into the component level using the definitional conceptual framework. The framework approach was also undertaken in Chapter 2 and Chapter 3. Thus, when it is possible, the analyses refer to the findings in the previous chapters. As this review is essentially a mapping exercise of a narrower group of studies than those included in map (i), it is described as map (ii).

4.6.1. Individual definitional component

In addition to the broad distinction of vignette types based on a priori definition, there is further diversity in how vignettes are formed. The design of vignette matters because it affects the nature of study findings. The following section, therefore, examines the characteristics of vignettes, using the definitional conceptual framework.

It is important to note that the availability of actual vignettes was diverse from study to study. Not all studies included a full list of vignettes. When the full list was not shown within their studies, authors were contacted via email to obtain further information. When neither the paper nor the author provided the complete series of vignettes used in their studies, there was only limited information. Due to this nature of limited information for the analysis, it is not possible to provide numerical data.
(i) **Abuser**
Consistent with Chapter 2 and Chapter 3, ‘parent(s)’ was a common description of abuser across vignettes. Some vignettes added brief description of abuser, such as gender, race, or psychology of abuser. These characteristics were also observed among professional guidelines in Chapter 3 as a sign to detect possible PEA.

In addition, there were vignettes which provided further details about family background. One example was a simple description such as ‘single mother’ (Shanalingigwa, 2010), ‘divorced mother, who has custody of the child’ (Campbell, 2000), and ‘custodial parent’ (Beck et al., 1994; Beck & Ogloff, 1995). These statements deliver overall characteristics of abuser very briefly.

Another example was to provide history of family structure with detailed specifications. One of the vignettes by Williams et al. (1987) illustrated divorce and subsequent remarriage of the mother and described possible PEA situations by the stepfather. Another vignette by the same author (ibid) described the situation when the child lost their family through a plane crash. As a result, the child had to live with his relatives (uncle, aunt, and their child) and their harsh treatment was illustrated. The inclusion of family structure might reflect the awareness of researchers that children from reconstructed families could be at risk of PEA.

(ii) **Abusive behaviour**
Chapter 2 and Chapter 3 reported that abusive behaviours were a common major definitional component of PEA. Vignettes identified in this review also predominantly involved abusive behaviours. As shown in Chapter 2 (see Table 2-2), there were a number of sub-types of abusive behaviours. The map (ii) found that there were further varieties of abusive behaviour in the vignettes.

First, a different number of sub-types of abusive behaviours were examined across studies. Studies which investigated different forms of CAN were likely to include only few vignettes of PEA (e.g. Boss, 2003; Hansen et al., 1997; Williams et al., 1987). On the other hand, studies specifically about PEA were likely to use more than ten or more PEA vignettes (e.g. Baily & Baily, 1996; Bjerke, 1993; Burnette, 1993; Carleton, 2009).

Second, the specific form and content of vignettes was diverse varying from study to study. Therefore, a behaviour, which can be categorised into the same sub-
category (see Chapter 2, Table 2-2), could be illustrated very differently. For examples, the following vignettes look more or less similar and would grouped into the same form of behaviour. However, the difference in details could possibly give different impressions to readers.

- The parents are constantly screaming at their child, calling him foul names. (Giovannoni & Becerra, 1979)
- The parents constantly tell the child he’s stupid and ugly. (Pierce & Bozalek, 2004)
- This 10-year-old girl's parent yells at her when she doesn't do her homework correctly. They call her "stupid, idiot" and tell her that she will never succeed in life. (Collier et al., 1999)

Third, the boundary of PEA and other forms of CAN was treated differently across studies. The inclusion of sexual abuse as part of PEA illustrates this. The study by Carleton (2006) states it is about PEA by using the term “emotional abuse”. The vignettes, however, included parental behaviour which seem to be sexual abuse. As it was discussed in Chapter 2, it can be argued that sexual abuse which could possibly result in psychological harm on the child is considered as part of PEA.

Another example is a study by Collier et al. (1999) which investigated different forms of CAN. Under CAN, there are different CAN categories including “emotional abuse” and “nonphysical abuse”. Under the category of “nonphysical abuse”, there is a vignette illustrating ‘encourage to steal’. In other study by Burnett (1993), ‘coercing into delinquency’, which is similar situation to ‘encourage to steal’, was considered as “abuse” by more than 80% of study respondents.

Fourth, the “level of seriousness of abusive behaviour” was involved and manipulated (e.g. O’Toole et al., 1993; O’Toole et al., 1999; Webster et al, 2005). However, the level of seriousness is a subjective matter which is the result of someone’s assessment. Therefore, inclusion of this element reflects researchers’ a priori definitions which was discussed earlier. In contrast, other studies asked study respondents to assess the degree of seriousness, and this is discussed later in this chapter (see Section 4.8).
(iii) Intention

In Chapter 2, only a few of the abstract definitions referred to intention. Within the definitions that make reference to intention, three sub-categories of intention were identified. They considered intention as (i) necessary for the definition of PEA, (ii) necessary with a particular form of abusive behaviour, or (iii) not necessary. In Chapter 3, guidelines took an approach of either (ii) or (iii).

The review also identified intention as a component of vignettes. First, few studies (n=2) explicitly stated that their vignettes included intention as one of the controlled variables. Portwood (1997) and Portwood et al. (2000) manipulated four definitional components including “intent of perpetrators”. Having observed the actual vignettes in the studies, however, it was not clear which description was elucidated as intention. A possible explanation is that the definition of intention differs between the author and the author of this thesis.

Second, there was a vignette which indirectly indicated the abuser’s intention to harm the child. One of the vignettes by Al-Moosa et al. (2003) stated “parents curse the day their child was born within hearing distance of the child”. By explaining the act was held within hearing distance, it can be interpreted that there is abusers’ intention to harm the child. However, it is also possible that abuser was physically close to the child without intention. It is difficult to assess the existence of intention in practice (Ike, 2006) and this can be the same for vignettes if they are not explicit about the definitional components they are addressing.

(iv) Frequency

Chapter 2 demonstrated that it was common for abstract definitions to perceive PEA as repetitive whereas some stated that a single incidence can be PEA as well. In Chapter 3, the guidelines of England illustrated PEA as including repetition of abusive behaviour while Japanese guideline did not have such an explicit reference to repetition.

Across the vignette studies, three types of frequency were identified. The first type clearly stated their inclusion of frequency as one of the controlled variables. For instance, Burnette (1993) manipulated frequency as (i) single episode or (ii) over time with adverse effects on the child. However, it is important to note that (ii) involves not only frequency but also another definitional component - consequences.
The second type did not explicitly state the inclusion of frequency, but texts of vignette involved words/phrases which could be considered as frequency. The examples are underlined in the following extracts of vignettes.

- “the parents are **constantly** screaming at their child, calling him/her foul names…” (Beck et al., 1994; Beck & Ogloff, 1995)
- “When the child approaches the parent for help, s/he is **regularly** ignored…” (Baily & Baily, 1986)
- “The parents ignore their child **most of the time**, **seldom** talking with him or listening to him.” (Campbell, 2000)
- “”her parent has **sometimes** threatened to hit her, but has never followed through” (Hawkins & McCallum, 2001)

More importantly, when multiple vignettes of PEA were presented, it was often the case that only certain types of abusive behaviours were combined with these frequency statements (instead of including to all vignettes). The same approach was taken in Japanese guidelines (see Chapter 3). The implication here is that the authors of these studies have some idea that frequency can be part of PEA, but this is not consistently reflected in their vignettes.

The third type embedded multiple forms of abusive behaviours within one scenario (e.g. Williams et al., 1987). Although not explicitly, such vignettes might have attempted to demonstrate the persistent nature of PEA. Indeed, one relationship between abuser and the child could involve multiple forms of negative interactions (Glaser, 2011).

**(v) Interaction**

In Chapter 2, some authors (e.g. Glaser, 2002, 2011) suggested to define PEA based on interaction and to see the situation as a continuum. Subsequently, Chapter 3 identified that English guidelines took the same approach.

Interaction refers to mutual communication between abuser and the child. As was pointed out earlier, some vignettes only consisted of abusive behaviours. These were only showing the act of abuser rather than that of the child. In contrast to this, others involved both in one vignette. Collier et al. (1999) illustrated child behaviours,
such as not doing homework correctly or not helping food preparation, which triggered abusive behaviours. Kean & Dukes (1991) systematically manipulated whether the child is provocative or not provocative towards the abuser. These child behaviours are also related to child characteristics (viii).

(vi) Consequences
A number of consequences were observed as one of the major definitional components amongst abstract definitions in Chapter 2. An examination of guidelines in Chapter 3 also found that consequences played an important role in determining thresholds for professionals.

The review identified different illustrations of consequences. Firstly, there were studies which controlled consequences as one of the variables (e.g. Burnette, 1993; Portwood, 1997; Portwood et al., 2000).

Second, although consequences were predominantly illustrated with other components, few vignettes included the child’s status in a way that could be interpreted as a consequence of abuse/neglect or the nature of the child. Examples are:

- “A child is severely mentally ill” (Segal, 1992)
- “A child has severe behavior problems” (Pierce & Bozalek, 2004; Segal, 1992)

As was discussed in Chapter 2, it is difficult to distinguish consequences from inherent characteristics of the child. It is hard to know which came first or which one triggered the other. And these are the same for examples pointed out earlier (e.g. provocative behavior of the child).

Third, there were different levels of details of consequences illustrated in vignettes. Some vignettes involved, for instance, depression, anxiety, low self-esteem, and aggressive features of the child. Others provided more concrete illustration of consequences. For example, “the girl says she feels sad and upset most of the time, and sometimes even wishes she were not alive” (Hawkins & McCallum, 2001).

Finally, some studies asked study respondents to rate the degree of harm on the child based on vignettes. This is further discussed later in Section 4.8.
(vii) Child age

Professional guidelines (Chapter 3) defined child age in relation to all types of CAN whereas abstract definitions (Chapter 2) did not refer to it.

In vignettes, there were different patterns of inclusion of child age. The first type was the systematic inclusion of child age. For example, Royme (1998) manipulated vignettes as ‘young child’ or ‘adolescent’. Baily & Baily (1986) used three age groups – preschool (age 0-5), latency (age 6-12), and adolescence (age 13-17).

The second type was to apply one specific child age to all of the vignettes in a study. For example, a study by Campbell (2000) gave an instruction for study participants to consider the child in their vignettes 7 years old.

The third type was random inclusion of child age without consistency across vignettes within one study.

(viii) Child’s other characteristics

In Chapter 2, no information on child’s other characteristics was identified. In Chapter 3, children with disabilities were mentioned as vulnerable to CAN in the guidelines.

Across vignettes, multiple types of child characteristics were observed. First, in addition to child age above, other demographic information, such as gender (e.g. girl/boy, daughter/son) and race (e.g. black son / black daughter) of the child, were identified.

The second type was behavioural features of the child, which overlaps with other definitional components (i.e. interaction, consequences). Behavioural features were illustrated as, first, the potential cause of PEA. For example, Kean & Dukes (1991) presented vignettes with and without a child’s provocative behaviour. The provocative behaviour was described as “throwing a dish of ice cream during a birthday party” (p.424).

Second, others illustrated child behaviour which can be considered as part of their routine habit. One of the vignettes by Collier et al. (1999) included “This 10-year-old girl's parent yells at her when she doesn't do her homework correctly. They call her "stupid, idiot" and tell her that she will never succeed in life” (p.243).
Third, child behaviour was illustrated after certain abusive behaviour. For example, Shanalingwa (2010) included the vignette below.

The parents and their 12-year-old stepson are of a different color. When they are out meeting people, the parents introduce him as their stepson. He does not want to be identified as a stepchild. He is angry at his parents and is threatening that one day he will physically attack them. (p.166)

Although there is no explicit statement, the underlined child behaviour can be interpreted as the result of inappropriate behaviour by the parents. The child behaviour seems to be a response to the parental behaviour. However, other children could respond differently. Again, it is indeed difficult to distinguish a child’s inherent character from consequences of PEA.

4.6.2. Different combinations of definitional components
So far, the differences of individual definitional component across studies were examined. The type of individual component across vignettes can be grouped as:

(i) no inclusion of definitional component.
(ii) ambiguous inclusion of definitional component and unclear effect on study result.
(iii) explicit inclusion and manipulation of definitional component, and explicit study of its effect on the study result

These inclusions and exclusions of definitional components resulted in different combinations of definitional components across vignettes. In regard to type (iii), in total, 25 studies conducted a definitional component level of analyses.

Summary
One of the strengths of examining PEA definitions with vignettes is that there is control over a priori meanings of PEA. That is, researchers can determine what is illustrated within vignettes as PEA at the process of designing the research and of examining professionals’ definitions of PEA.
An examination of vignettes based on the definitional framework demonstrated the diverse nature of PEA illustrated across vignettes. The diversity involved:

(i) the meaning of individual definitional component, and
(ii) the combination of definitional components in each vignette.

This phenomenon was consistently observed in the abstract definitions in previous chapters (i.e. Chapter 2 and Chapter 3).
4.7. Synthesis: what do the study results tell us about the definitions of PEA?

Based on the findings of the map (i), the extensive diversity of the studies, the scope of the review was limited to vignette-based studies described as map (ii). This map (ii) then demonstrated the lack of transparency of the construct of vignettes.

This current section of the review synthesises the findings of the studies in map (ii) on professionals’ definitions of PEA. The synthesis has a broad review question and two sub-questions. Diagram 4-5 shows the relation between the main review questions and sub-questions.

Diagram 4-5: The main and sub review questions

- What do the study results tell us about the definitions of PEA?

  - What do the study results tell us about professionals’ abstract definitions of PEA? (Addressed in Section 4.7.1.)
    - What are “professionals’ abstract definitions”?
    - How was the issue of professionals’ abstract definitions addressed in the research?
    - How do study findings help further understanding of professionals’ abstract definitions?

  - What do the study results tell us about professionals’ operational definitions of PEA? (Addressed in Section 4.7.2.)
    - What are “professionals’ operational definitions”?
    - How was the issue of professionals’ operational definitions addressed in the research?
    - How do study findings help further understanding of professionals’ operational definitions?
4.7.1. What do the study results tell us about professionals’ abstract definitions of PEA?

(i) What are “professionals’ abstract definitions“?

In the previous chapters, the theoretical aspect of abstract definitions was discussed. Chapter 2 examined the meaning of PEA amongst the relevant literature and concluded that it was not clear from the literature about the boundary of what is or what is not PEA. Also, as part of Chapter 3, abstract definitions within the professional guidelines in the three jurisdictions were examined. Explicitly or implicitly, the guidelines showed that professionals were expected to have some degree of theoretical understanding of PEA definitions.

As shown in Diagram 4-6, the abstract definitions explored in Chapter 2 and Chapter 3 were about theoretical aspects of PEA. In contrast, the focus of this systematic review is on the practice of abstract definitions, namely, abstract definitions determined by professionals.

Diagram 4-6: The relation between Chapter 2, 3, and 4

(ii) How was the issue of professionals’ abstract definitions addressed in the research?

The issue of professional abstract definitions was addressed with a series of vignettes and subsequent questions.

Vignettes

All the studies in the synthesis were undertaken based on vignettes. Broadly speaking, therefore, the studies used the same type of tool (i.e. vignettes) to study PEA. However, as shown in map (ii), there was diversity in how vignettes were
constructed. Thus, strictly speaking, the studies were using different tools (i.e. various types of vignettes) to examine PEA.

**Vignette-based questions addressed to study participants**
All the vignettes were followed by some questions which were answered by study participants. The questions examined the threshold of professionals’ abstract definitions, using several concepts – ‘abusiveness’, ‘seriousness’, and ‘harm on the child’.

The use of these three concepts reflects different research strategies to measure the thresholds of PEA. The first approach used the concept of ‘abusiveness’. This approach assumed study respondents had their own understanding of what is abusive. In a sense, it checks respondents’ perception of PEA whether they see the vignette as abusive.

The second approach used the concept of ‘seriousness’. Unlike the first method based on the concept of abusiveness, this approach does not directly check certain concepts. Rather, it examines the degree of seriousness within an implicit or explicit concept of PEA.

The third approach used the concept of ‘harm’. Unlike the first and the second approaches which measured the threshold by looking at each vignette, harm-based question attempted to measure the threshold with a specific aspect of PEA, namely, potential consequences for the child. This approach has similarities with the English guidelines (see Chapter 3) which defined PEA (as well as other types of CAN) as ‘significant harm’.

**(iii) How do the study findings help further understanding of professionals’ abstract definitions?**

**Findings on PEA in relation to other forms of CAN**
The results of the vignette studies demonstrated that study respondents were less or least likely to consider PEA as abusive (n=16), serious (n=11), or harmful to the child (n=9) than other forms of CAN.

This finding raises a question of why PEA is seen differently and what are the possible reasons which underpin the professionals' perceptions on PEA.
Findings on PEA: examining the high threshold of professionals’ abstract definitions

Having examined PEA broadly with other forms of CAN, the following section now closely explores the issue of the high thresholds of professionals’ abstract definitions of PEA.

Case characteristics

One of the underlying reasons for the professionals’ high threshold for PEA might be the nature of the situations presented in the vignettes. The previous chapters (i.e. Chapter 2, Chapter 3) showed that unpacking the definitions of PEA into definitional components enables the development of understanding of PEA. Similarly, some vignette-based studies examined professionals’ definitions with definitional component level.

First, one of the studies implied the effects of frequency or/and consequences on the child on professionals’ definitions of PEA. Burnette (1993) identified that vignettes which illustrated repetitive PEA with consequences were considered more serious than vignettes of a single occurrence. As this study did not manipulate the negative outcome and frequency separately, it is not clear which affected the responses. One possibility is that the nature of high frequency resulted in a high level of abusiveness. The second possibility is that the existence of a negative outcome resulted in high level of abusiveness. The last possibility is that the situation was considered as more abusive because of both components – high frequency and consequences.

Second, a situation involving a certain group of children might be taken more seriously than others. Hansen et al. (1997) found that vignettes of younger children were perceived as more abusive than those of older children. Also, Giovannoni and Becerro (1997) identified the impact of child gender on a specific form of abusive behaviour. That is, ‘dressing a boy like girl’ was seen as much more serious than ‘dressing a girl like a boy’ amongst all types of professionals.

Third, some forms of abusive behaviours can be perceived as more severe than others, and vice versa. There was a specific form of abusive behaviour which study respondents showed similar understandings across studies. For example, ‘locking/confining a child in a limited space’ was considered as relatively highly abusive (Al-Moosa, 2003; Haj-Yahia, 2000) or highly serious (Burnett, 1993;
Giovannoni & Becerra, 1979). These studies were conducted in three different countries (Kuwait, Israel, and USA respectively). This suggested that common professionals’ perceptions could exist in relation to certain forms of PEA across different cultures.

Characteristics of respondents
The high threshold of professionals’ abstract definition might also be related to the nature of respondents. First, some respondents might be more sensitive to PEA or otherwise have lower thresholds than others for PEA. Burnette (1993) reported that female respondents were more likely to consider vignettes as more abusive and serious than males. In addition, Fraser et al. (2010) demonstrated that both parental role and age of respondents predicted high recognition of the seriousness of the situation. Traditionally, females tend to take the main responsibility for child rearing and this phenomenon still continues even if this is to a lesser degree than historically.

Kamp Dush et al. (2018) examined how dual-earner couples in the US spend their time after the birth of their first child and found out that women were likely to spend more time on child care and housework than men.

Second, the cultural background might affect how individuals see certain situations. Briggs and Potter (2004) undertook a study to identify the accuracy of teachers’ knowledge about CAN (including PEA) in Singapore. The study showed that respondents (44% of special education teachers and 24% of kindergarten teachers) believed that it was not appropriate to show affection to children due to their belief that “it might make them promiscuous” (p.351). The authors argue that the overt expression of affection is an important experience for children in their development and express their concern about their study finding that this is withheld by the teachers.

Although not included in this systematic review (for not meeting the inclusion criteria because of the sample), Kiong et al. (1996) investigated public perceptions on CAN involving PEA in Singapore, and found that the public had a higher threshold for PEA than other types of CAN. In addition, there is some existing evidence showing unique parenting practice in Singapore which is likely to be seen as ‘harsh parenting’ by other cultures. Quah (2003) investigated parenting style among Singapore population via personal interviews undertaken between 1997 and 1999. The study identified that Chinese parents were least likely to show affection (i.e. hugging, kissing, holding their children) compared to Malay parents, Indian parents, or
parents from other ethnic groups. Stright and Yeo (2013), in a discussion paper, argues that psychological control (e.g. reminding a child about their poor grade in front of their entire family) is widely used in Singapore. A possible explanation for such phenomenon is influence of Chinese culture. Singapore is multi-ethnic country. The majority of its population is Chinese (74.3%) and it subsequently followed by Malay (13.4%), Indian (9.0%), and others (3.2%) (Department of Statistics Singapore, 2018). Parenting in China is underpinned by Confusion philosophy of filial piety, and Chinese parents value parental authority (Bornstein, 2002).

A study by Sawada (1999) examined the perception of CAN (including PEA) by nurses in Japan. The study identified that the respondents did not consider rejecting behaviour or words, which are often considered as a form of PEA (Garbarino et al., 1986; WHO, 2007; WHO & ISPCAN, 2006 – see Chapter 2), as abusive. It might be because this study was undertaken before 2000 when the Child Abuse Prevention Law (CAPL) was passed with a specific definition of PEA that refers to ‘rejection’ (see Chapter 3). At the time of the data collection which was prior to the CAPL might have had lower level of awareness or understanding of PEA. Another explanation is that there can be an embedded cultural phenomenon in Japan to accept verbal harsh treatment towards children or consider it as part of acceptable discipline.

These studies imply that there are unique conceptual criteria regarding appropriate child rearing in different cultures, which closely relates to the concept of PEA. Interestingly, Japan and Singapore can be categorised as the ‘East’, although it is important to note that these countries differ in various ways (e.g. ethnicity, religion). This might imply that there is a different understanding of what constitutes PEA not only between the East and the West but also between countries in these regions.

Third, a different level of responsibility in PEA could influence how people see the situation. As shown in Chapter 3, professionals have some degree of official responsibility for child protection (e.g. reporting) which non-professionals do not have. Such responsibility could make professionals take particular care when judging PEA. Pierce and Bozalek (2004) showed that lay persons were likely to rate vignettes of PEA with a higher level of severity than social workers. According to Shanalingigwa (2010), child welfare professionals were likely to consider PEA as less serious than parents. These studies demonstrated professionals were likely to hold a high threshold of PEA compared to non-professionals.
Overall, the study results demonstrated that professionals are likely to have a high threshold of PEA. Some studies examined the definitions of PEA to some extent at the component level and suggested that the nature of the individual case as well as the nature of the study respondents could shape the thresholds of PEA amongst professionals.

4.7.2. What do the study results tell us about professionals’ operational definitions of PEA?

(i) What are “professionals’ operational definitions”?
Professional practice involves multiple aspects. One aspect is to theoretically understand the meaning of PEA, namely, professionals’ abstract definitions. Another aspect is professionals’ responsibilities to respond to PEA. This is defined as professionals’ operational definitions.

Chapter 3 examined operational definitions within professional guidelines and the ambiguous nature of response thresholds was identified across the three jurisdictions. The implication was that professionals are largely required to make decisions based on their judgements. This part of the chapter, therefore, aims to understand the nature of professionals’ operational definitions based on the vignettes research identified by the systematic review. Diagram 4-7 shows the relationship between Chapter 3 and the current chapter.

Diagram 4-7: The relation between Chapter 3 and Chapter 4

(ii) How was the issue of professionals’ operational definitions addressed in the research?
The research studies involved presenting vignettes and asking respondents to state how they would act in response to such information. This was achieved by several approaches. First, professionals’ likelihood of reporting was measured either by a binary choice (i.e. yes/no) or using a Likert scale (from 4 to 10-point scales). Second, professionals’ reporting willingness was measured with Likert scale (6-point scale). Third, professionals’ possible types of intervention were examined. For instance, Burnette (1993) provided four possible responses (0= no major problem, do nothing; 1= family should receive counselling; 2=family should be referred to court; 3=child should be removed from the family).

(iii) How do the study findings help further understanding of professionals’ operational definitions?

**Findings on PEA in relation to other forms of CAN**

The review identified that PEA was least (Beck et al., 1994; Beck & Ogloff, 1995; Bonardi, 2000) or less likely (Feng, 2003; Fraser, 2010; O’Toole et al., 1993; Shanalingigwa, 2010; Williams et al., 1987) to be reported compared to other forms of CAN. These findings suggest (just as with the results of vignette studies on abstract definitions) the high threshold of professional operational definitions of PEA.

**Gap between abstract and operational definitions of professionals**

Although it might be expected that abstract and operational definitions are similar, there is no guarantee that they should always correspond. Indeed, some results demonstrated the gap between professionals’ abstract definitions and operational definitions when respondents did not always decide to report their suspicions of PEA. Boss (2013) examined 59 professionals (paediatricians, mental health professionals, and school personnel) on their experience of mandatory reporting training. The results showed that only 31.7% answered that they would report the cases presented although 69.5% of vignettes were considered as abusive. Shanalingigwa (2010) conducted a vignette study amongst US born parents, African born parents, and child welfare professionals. Among these three groups, professionals’ responses accounted for the fewest vignettes which they considered as abuse/neglect. Also, there was general unwillingness amongst child welfare professionals to report the cases. For example, 34.9% of professionals considered ‘ignoring the child’ was abuse/neglect but only 19% stated that they would report it.
These findings highlighted that the professionals’ recognition of PEA does not always result in reporting. That is, there may be PEA cases which are known by someone but never come to the attention of child protection system, as a higher bar is used for such reporting.

The possible reasons of underreporting

There may be various reasons for the gap between professional abstract definitions and operational definitions. The first possible reason is a belief that the situation is not serious, abusive or harmful enough to respond. That is, regardless of the recognition of sign that there might be PEA, it might be conceived that the degree of a situation is not reached to the level of response threshold. Such non response can be triggered by the nature of PEA. Indeed, it was shown that PEA vignette was conceived as reportable when it was combined with other forms of CAN (e.g. physical abuse, sexual abuse, criminal abuse) (Bjerke, 1993; Pakieser, 1998). Furthermore, Hawkins and McCallum (2001) found that when the evidence of abuse/neglect was vague like PEA, there was low willingness to report the case.

The second reason may be that some situations are perceived as requiring state intervention more than others. For instance, a certain form of abusive behaviour may seem to present immediate danger for the child. According to the study by Collier et al. (1999), most of their respondents (85%) recommended intervention for a vignette describing ‘observation of domestic violence’.

Another example is that certain groups of children can be seen as vulnerable to PEA and are therefore thought to be more in need of intervention than others. Hansen et al. (1997) found out that vignettes with White people (child and abuser) were more often considered reportable compared to vignettes with African Americans. In contrast, child age (Crenshaw, 1995) and child gender (Bjerke, 1993; Pakieser, 1998) had no effects on professionals' reporting behaviour. The discrepancy of the effects of the nature of child might imply that perceptions of children could differ depending on study respondents.

The third possible reason is a more general lack of willingness to make any response (Shor, 1997; Shor, 1998). The unwillingness of reporting was a prominent phenomenon among professionals compared to non-professionals (Burnette, 1993; Shanalingigwa, 2010). This might be due to an incorrect understanding or lack of
knowledge about response procedure. Or, it could also come from their previous experience. Having a negative image might lead to being reluctant to respond. Indeed, Fraser et al. (2010) reported that those who had positive attitudes about reporting were more likely to correctly report CAN as well as PEA.

Another explanation is that unwillingness might be underpinned by an idea that response cannot make the situation better. Indeed, Carleton (2006) found that the reporting attitude of non-mandatory reporters was influenced by their faith in child protection. According to Howe et al. (1988), it was believed by respondents that there is less control over the recurrence of PEA compared to physical abuse. This suggests that it is seen as difficult to break the chain of PEA, which is often embedded in a relationship of an abuser and the child (Glaser, 2011).

Finally, there might be a view of professionals that it is more of a questionable moral decision to intervene in cases of PEA compared to other forms of CAN.

**Enhancing practice**

Hawkins and McCallum (2001) demonstrated that negative attitudes about response can be enhanced by training. The author identified that more respondents without training tend to think legal intervention has a possibility to make the circumstances worse for the child compared to people with training (ibid). That is, trained people have a more positive attitude to interventions. Although legal mandatory reporting does not necessarily influence professional response attitudes (Carleton, 2006), the findings by Hawkins and McCallum (2001) implies that training improves practice.

**Summary**

The examination of the study findings illuminated the high thresholds of both professional abstract definitions and operational definitions of PEA. However, importantly, the synthesis revealed that the professionals’ recognition of PEA does not always lead to action.

**4.8. Discussion and conclusion**

The purpose of this systematic review was to identify existing primary studies on and aggregate the information about professionals’ definitions of PEA. The
characteristics of the identified studies in Map (i) was very broad, so the scope of the review was restricted to vignette studies for the subsequent analyses in Map (ii) and synthesis. This section considers and discusses the issues based on the findings especially of vignette studies.

4.8.1. Identifying study findings on the definitions of PEA from two maps

The review identified a number of studies that had used vignettes to understand professional responses to PEA. PEA was often not the central focus of the research and it was studied with other forms of CAN. A close examination of vignette studies then highlighted the high threshold of professionals in identifying PEA compared to other types of CAN. However, due to the limitations of the included studies, the review could not provide strong evidence about the details of how professionals understand and respond to PEA.

Importantly, the review could not identify why the diverse nature of vignettes exists. Studies were often not clear about why and how their vignettes were established. Such phenomenon might be, first, underpinned by a lack of awareness of considering the definitional components of PEA. It may then not be possible to understand the author’s a priori definition used to build the vignettes. It can also mean that some areas of potential variation between definitions of PEA cannot be examined, for instance, it was common for studies to focus on abusive behaviours – one of the definitional components of PEA. When a study limits the meaning of PEA by involving only abusive behaviours, the study findings, as well as their discussion, cannot go beyond abusive behaviours. In other words, the study excludes other definitional components. Thus, the non-specified assumptions and design of vignettes could limit potential to examine the definitions thoroughly. Second, a clarification of a vignette’s construct might have been unnecessary to achieve their study aims. However, the nature and thus the components of PEA definitions is important for the range of vignette study types listed in Section 4.5.5.

In conclusion, an ambiguous construct of vignettes prevents studies from scrutinising PEA at the definitional component level. This hinders a rigorous examination of the definitions of PEA.
4.8.2. Threshold of PEA and professional practice

From the perspective of professionals as users of the definitions, one of the significant aspects of information is the ‘boundary’ of PEA – that is, the threshold between what is or what is not PEA. The issue of the threshold was discussed in previous chapters. The threshold was not clear from the examination of the abstract definitions in Chapter 2. Chapter 3 showed a different level of thresholds of PEA within and across the three jurisdictions.

Chapters 2 and 3 examined written abstract and operational definitions of PEA. This showed that there was a lack of clarity about which definitional components and their interactions defined PEA and the response to PEA.

The systematic review of vignette studies of professionals’ identification and response to PEA found that there was a lack of systematic approach to examining the effects of individual and combinations of components. Some studies did examine conceptual components but not in a comprehensive or systematic way. Despite these limitations in the research literature, the review did find that in general respondents and particularly professional respondents had a high threshold for identifying PEA and an even higher threshold for responding to PEA.

The analyses of previous chapters illuminated the ambiguous nature of the definition of PEA. Such feature could confuse people, including professionals. Moreover, what is worse is that professional practice can be even more complex and confusing than theory. First, the nature of individual cases differs extensively. That is, there is no single situation which is exactly the same as others. Thus, professionals need to build up their knowledge every time they come across a new case. Second, it is hard to capture the full picture of individual cases. That is, professionals might have to make a judgement based on limited information. This means that what theory states (e.g. guidelines) may not always applicable to the actual situation.

Considering this possible complexity in practice, the review aimed to develop the understanding of professionals’ definitions of PEA. However, as shown, the review illuminated that there was little evidence which could tell us about the insight of PEA with definitional component level. Without having such evidence, it is hard to understand how professionals assess the situations, for instance, either taking intuitive reasoning or analytic thinking (Munro, 2008).
For example, when the threshold is explicit with some of the definitional components (e.g. Californian legal mandatory reporting threshold), it is important to check if professionals follow the guideline. Moreover, even when the threshold is ambiguous (e.g. Japan), it is important to understand how professionals conceptualise the situation. This is because the lack of clear threshold required professionals to use their own assessment strategy using such as knowledge, experience, or intuition. Therefore, this review argues that professionals' definitions of PEA need to be further investigated with a rigorous strategy, and this is further discussed in Section 4.8.3.

4.8.3. Strengths and limitations of the review

A major strength of the review was, first, the rigorous and transparent review methodology. Second, the review included studies not only specifically of PEA but also broadly of different types of CAN. This approach enabled an understanding of PEA from a broad perspective and made the study richer than limiting the scope to PEA.

Third, the inclusion of theses and dissertations made the in-depth analysis of vignettes rich. This made the review process more demanding in terms of data extraction because these materials were usually based on extensive projects. On the other hand, they were likely to include more details (such as details of vignettes) compared to papers in peer-reviewed journals. When the details were not available, the authors were contacted to obtain further details. However, further details were not always obtainable from authors.

Despite these strengths, the review also had limitations. First, vignette-based studies, which were within the scope of the map (ii) and the synthesis, cannot entirely reflect the realities of practice. Stories illustrated in vignettes would differ from actual cases. In addition, professionals might think and act differently in practice where there are different demand pressures. However, studying professionals' definitions based on actual cases is difficult due to the sensitive nature of PEA. Vignettes have the potential to add meaningful evidence which could enhance the understanding of professional practice.
Second, similarly to issue number one, the information which was elicited through vignettes might have been conceived as too little to make a decision (Baily & Baily 1986; Burnette, 1993). When this is the case, study respondents might think the situation is uncertain and so were less likely to identify and respond as if it were PEA. In practice, however, professionals are usually required to make decisions with limited information (Munro, 2008). Therefore, if a study participant assigns a low degree of PEA due to the lack of information, the person probably does the same in real life. That is, limited information in vignettes might not explain the possible hesitation to make a decision.

Third, a systematic search is in practice unlikely to be fully exhaustive and there is no guarantee to retrieve every single relevant study. To illustrate this is that a few studies already known to the author were not identified by the formal search strategy (although they were, of course, included).

Fourth, this review was conducted by one reviewer. A systematic review is usually conducted by a team consisted of multiple reviewers. However, it was not possible for this review to take the same approach because of the nature of the project which was conducted by an individual author. A second reviewer assisted with a double screening of a random sample of the studies identified by the search strategy. For other issues, any challenges were discussed with experienced systematic review researchers during the process to ensure its quality.

Fifth, this review was restricted to the English and Japanese languages. Restriction of languages leads to selection bias in identifying studies. That is, studies which were reported in other languages were likely to be missed. However, it is not practical to retrieve studies in every single language within limited time and resources.

4.8.4. Implications for future research

The systematic review highlighted the lack of research evidence on professionals’ definitions and responses to PEA. Considering this, this part of the chapter discusses implications which could enhance further research.

First, it is recommended to conduct further study on PEA definitions. Most of the studies in the review were undertaken broadly on the definitions of CAN and very
few specifically dealt with PEA. The lack of PEA specific studies could result in the scarcity of the study findings on PEA. Indeed, some of the study findings had an emphasis on physical abuse or sexual abuse and there was little attention on PEA.

Second, it is suggested to conduct further research to examine professionals’ perceptions and decision-making together. The review identified the gap between abstract definitions and operational definitions of PEA. That is, professionals’ recognition of PEA does not always lead to their responsible action. This phenomenon needs further investigation to identify underlying reasons and solutions.

Third, it is suggested to conduct further vignette studies on professional practice on PEA. The review identified the inconsistent inclusion of definitional components across vignettes. Presumably, this is because of the study aims, whose focus was not specifically on professionals’ definition of PEA. Rather, one of the frequent aims of using vignettes was likely to create boundaries between different forms of CAN. This may be why the study findings in the review did not reveal much about PEA definitions. As stated in Section 4.8.3., a vignette study is not a perfect technique. But, with rigorously established methodology and systematic conceptual analysis, it could add significant evidence.

Fourth, it is suggested to study PEA definitions across various cultural contexts. The cultural aspect is especially important for practice. One of the reasons of this is because that the diversity of cultures within a community or society has increased rapidly across the world. However, the review identified a research gap, namely, existing studies were predominantly conducted in Western countries, especially, the US. Moreover, the review identified potential cultural variation of professionals’ definition of PEA based on the studies in Eastern countries (e.g. Singapore, Japan), where there were very few relevant studies on PEA. In addition, examining cultural differences might provide insight into the conceptual definitional distinctions within individual cultures.
CHAPTER 5

RESEARCH ON PROFESSIONALS’ PEA DEFINITIONS – EVIDENCE FROM JAPAN

Chapter contents

5.1. Introduction
5.2. Objectives and research questions
5.3. Methodology
5.4. Results: How do professionals define PEA?
5.5. Discussion and conclusion

5.1. Introduction

The main aim of this thesis is to develop the conceptualisation of the definition of PEA. In doing so, as Diagram 5-1 illustrates, previous chapters have analysed PEA from multiple perspectives and built up evidence from abstract definitions to its operationalisation. Chapter 2 demonstrated various levels of diversities amongst abstract definitions in the literature. Subsequent analysis of professional guidelines in Chapter 3 found that there was a lack of clear information about how professionals should operationalise the definition of PEA in practice.

Having examined the theoretical aspects of PEA in the literature and guidelines respectively, Chapter 4 then undertook a systematic review of prior research on the use of definitions by professional practitioners. The review systematically mapped and synthesised research on professionals’ definition of PEA and highlighted the methodological weaknesses which hinder the thorough examination of PEA definitions. One of the conclusions of the review was the need for a range of further research studies on definitions, and the current chapter takes forward that conclusion with a new primary research study.
5.2. Objectives and research questions

This chapter aims to generate original evidence on professionals' definitions of PEA and test the feasibility of the definitional conceptual framework in this research. In doing so, this chapter addresses the research questions below. Each sub-question (from (a) to (f) below) is underpinned by the previous chapters. The mechanism of how the study findings motivated the questions is explained here.
• How do professionals define PEA?

(a) How do professionals view a possible PEA situation?
   (Professionals’ abstract definition)
   The review of pre-existing vignette research in Chapter 4 found that there was a relatively low threshold of the abstract definition of PEA by professionals. This chapter aims to add new evidence on this aspect with particular reference to Japan.

(b) What would professionals do about a possible PEA situation?
   (Professionals’ operational definition)
   The systematic review in Chapter 4 on professional definitions of PEA demonstrated the relatively low threshold of professionals’ operational definition of PEA, and this chapter further investigates this aspect.

(c) Which definitional components have an impact on professionals’ PEA definition?
   Chapters 2, 3 and 4 have shown the importance of the conceptual components and framework developed in Chapter 1. Therefore, the study reported in this chapter uses vignettes to examine the conceptual components involved in professionals’ definitions of PEA in Japan.

(d) Is there any gap between an abstract and operational definition by professionals?
   Chapter 4 reported that previous research found out that there was a gap between professionals’ abstract definition and operational definition. That is, professionals’ identification of PEA does not necessarily lead to any response. The current chapter investigates the extent and nature of any such lack of response in a Japanese sample.

• Is the approach, based on the definitional conceptual framework, feasible and useful?

(e) Is it feasible to use the definitional framework in undertaking research?
   The definitional conceptual framework developed and used productively in the analyses applied in Chapters 2, 3 and 4. The current chapter examines whether
this approach is also feasible in undertaking primary research on definitions of PEA.

(f) It is useful to use the definitional framework in conceptualising PEA? This chapter also addresses whether the conceptual framework approach provides results which are useful for developing clear conceptualisations of PEA.

5.3. Methodology

5.3.1. Overall research strategy

The overall research strategy was to undertake an on-line survey of professionals in Japan. The primary aim is to collect their views on the abstract and operational definitions of PEA, structured according to the conceptual framework developed in Chapter 1.

The survey involved two phases. The first phase consisted of a set of 32 vignettes. Each vignette was followed by two questions to measure professionals’ abstract and operational definitions of PEA respectively. In the second phase, respondents’ background information was gathered. The survey was prepared in the Japanese language and designed to be completed in approximately 15-20 minutes.

The survey was piloted with five Japanese professionals prior to the actual data collection. The written and verbal feedbacks from these pilots were used to amend and finalise the details of the vignette presentations and questions.

The data was collected via Survey Monkey, online survey development software, where all the information was transmitted using SSL encryption. All the data were stored on a secure computer with a password which was only accessible by the principal investigator. The survey did not collect personal information such as name, affiliation, and IP address.

5.3.2 Study participants

Defining study participants

The meaning of ‘professionals’ in this chapter was limited to those who work in health, education, social work, and law enforcement.
Recruitment procedure

Prior to data collection, the ethics form was approved by the UCL Institute of Education, University College London. In the phase of ethics completion, it was necessary to think about the following issues. First, the general sensitivity to undertake research on PEA that involves ethically difficult issues of parental, child, and state rights and responsibilities. Second, there is the ethical issue of anonymity of those involved in professional involvement in PEA cases. Therefore, this study asked professionals' views and decision-making, but it did not ask about individual cases where the participants were involved in practice. Third, it was important to guarantee that the study participation into this study was completely voluntarily. It was explained to participants that they were able to withdraw from the study at any time, including during the middle of undertaking the survey. More details are shown later in this section.

Both public and personal contacts were used to identify potential participants. Based on the available contacts, professionals were approached using the following methods.

First, relevant institutions or organisations (i.e. elementary schools, hospitals, child welfare institutions) were approached. Initially, these were searched within metropolitan areas of Japan. However, as it was not successful to gain a high level of response, the area was extended to the whole of Japan. Then, a senior member of staff was initially contacted to gain permission to approach other members of staff at the same institution or network. If permission was obtained, individuals were then approached either by circulation of emails or in person via the senior member of staff. Those individuals who were interested in participating in the study approached the investigator directly by email.

Second, organisations, where relevant professionals were likely to be members, were approached. When a senior member of the society agreed, invitations to participate were circulated to members by email or through the organisations' official website. The individuals who were interested in participating in the study were asked to contact the principal investigator.

Third, police officers were approached at training sessions. A senior lecturer briefly explained the research and distributed invitation letters to individuals. Individuals
who were interested in participating in the study were asked to contact the investigator directly.

Fourth, individual professionals were directly approached using both personal and public contacts. Finally, these strategies above were combined with ‘snow balling’ to identify further professionals.

As has been stated, those who were interested in taking part in the study were asked to contact the principal investigator. That is, individuals were asked to send an empty email to request an online survey link. This process enabled to limit responses to one per email address, to minimise the potential for duplicate responses.

Once individuals accessed the survey link, they went through a three-stage process. First, an information sheet, the second a consent page, and the third an actual survey. After reading the information sheet, potential participants were asked to select either ‘agree to participate’ or ‘disagree to participate’ button. This process was regarded as their formal consent to their study participation. Only when a person agreed to participate, did the survey start. Those who did not consent were automatically withdrawn from the survey.

The letters of invitation and the on-line information sheet explained that participation was completely voluntarily, and their decision to participate or not would not be communicated to anyone or affect them in any way. Thus, it was individuals’ decisions whether to take part in the study or not. It was also stated that participants could withdraw at any time. These materials are available in the Appendix.

**The characteristics of study participants**

With purposive sampling, potential study participants were recruited from the areas of social work, health, education, and law enforcement in Japan.

In total, 185 individuals consented to participate in the study. Of these, 22 observations were excluded because of the following reasons. First, 10 were excluded due to a lack of sufficient response. Second, 4 were excluded due to the lack of occupational information. Third, 8 were excluded because of working in occupations not meeting the study criteria. As a result, 163 observations were used for the analysis.
It is important to note that response rate in this study cannot be known. This is because there is no clarity about how many people had considered the study invitation. Rather, the study participants simply reflect who responded to the study.

Further details about the characteristics of study participants are shown later (see Table 5-2).

5.3.3. Development of vignettes

Using vignettes as research strategy

Strengths of vignette studies
A vignette technique is well suited for this study. First, a vignette technique enables to make the research less personal compared to discussing about respondents’ actual experiences (Barter & Renold, 1999). Therefore, it is suitable to explore sensitive topics. Second, the provision of certain contexts by vignettes enables an exploration of the respondents’ action in specific contexts (ibid). Third, vignettes allow eliciting information regardless of respondents’ experiences or current situations (Schoenberg & Ravdal, 2000).

Limitations of vignette studies identified in Chapter 4
As discussed in Chapter 4, regardless of the strengths of vignette technique, the systematic review identified weaknesses of existing vignette studies in examining the definition of PEA. First, there were few vignette studies specifically dealt with the issue of PEA. Second, there was a lack of studies whose examination focused on the definitional components which represent the conceptual nature of PEA. Rather, their most frequently observed aim was to examine the differences amongst different types of CAN, often based on abusive behaviours (e.g. sexual, psychological, physical abusive behaviours).

Selection of variables
It would have been preferable to vary the presentation of vignettes by all of their possible combinations of the definitional components. However, this was not feasible for the following reasons. First, inclusion of many patterns of vignettes were technically not suitable for the statistical analysis. The estimated sample size in this study was relatively small. Although there is no strict rule about the relationship
between logistic regression analysis and sample size, only a small number of variables can be used when the sample size is small.

Second, conducting a long survey was not suitable for this research practically. The more variables included, the longer the survey became. If, for example, each of the seven definitional components were used with just two choices of response, then this would require 128 vignettes to be included in the questionnaire which would have been an unacceptable length, taking too long for each participant to complete.

- **Independent variables**

As Chapter 4 discussed (see Section 4.7.1.), there are various factors which could influence professionals' perceptions and decision-making in regard to PEA in practice. The possible factors involve, first, the case characteristics, and second, the nature of those who operationalise the definition (i.e. the professionals). Thus, these two aspects were treated as independent variables to assess their effects on professionals' definitions of PEA.

**I. Case characteristics based on the definitional components**

Independent variables involved in this study were: (i) abusive behaviour; (ii) frequency; (iii) consequences; and (iv) child age. These four components were selected due to their significance nature as part of the definition of PEA, as found in the previous chapters. The details about the significant nature for each definitional component are discussed from (i) to (iv) below.

(i) Abusive behaviour- 4 levels

The analyses of previous chapters have demonstrated that abusive behaviours are treated as one of the core parts of PEA. However, as Chapter 2 discussed, there has been an ongoing issue about whether PEA should be defined either by abusive behaviour or by consequences. This discussion was highlighted by two vignette studies included in Chapter 4. According to Baily and Baily (1986), the majority of their study participants considered that PEA can be defined only with abusive behaviours. On the other hand, Burnette (1993) found that both frequency and negative consequences were rated higher than single episodes of PEA suggesting that consequences are also important.
The conceptual distinctions of sub-types of abusive behaviour were drawn from the findings of Chapter 2, as illustrated in Table 5-1. Sub-types, ‘degrading’, ‘active rejection’, ‘control’, and ‘lack of appropriate response’, were selected as they were commonly part of abstract definitions.

Chapter 2 also identified that there are diversities within each sub-category of abusive behaviours. The diversity relates to how each story is presented as a vignette. That is, one sub-category can be illustrated in various ways. This study does not manipulate the multiple diversities within sub-category. However, each sub-category was illustrated considering (i) active or neglectful acts and (ii) verbal or non-verbal acts.

Table 5-1: Sub-categories of abusive behaviour

<table>
<thead>
<tr>
<th>Common sub-categories of abusive behaviour identified in Chapter 2</th>
<th>Illustration of abusive behaviours in the survey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degrading (active; verbal)</td>
<td>[Abuser] tells [the child] that ‘you are stupid’ or ‘you are worthless’.</td>
</tr>
<tr>
<td>Active rejection (active; verbal)</td>
<td>[Abuser] tells [the child] things like ‘do not come close to me’ and ‘do not touch me’ to her daughter.</td>
</tr>
<tr>
<td>Control (active; non-verbal)</td>
<td>[Abuser] locks up (confines) [the child] in order to isolate her from other children.</td>
</tr>
<tr>
<td>Lack of appropriate response (neglect; non-verbal)</td>
<td>[Abuser] completely ignores [the child] when she talks or tries to receive affection and does not show affection.</td>
</tr>
</tbody>
</table>

(ii) Frequency - 2 levels

Amongst the literature in Chapter 2, the majority of the abstract definitions referred to frequency. However, there were issues about how frequency should be defined. In Chapter 3, professionals’ guidelines for California and England emphasised the persistent nature of PEA, but frequency was not involved in the part of response thresholds.

In addition, a vignette study identified by the systematic review in Chapter 4 involved examination of frequency. Burnette (1993) demonstrated that vignettes with both high frequency of PEA and consequences of that PEA were considered more serious than vignettes illustrating a single abusive event. As pointed out earlier,
however, Burnette did not control frequency and negative consequences separately. Therefore, it was not clear whether frequency or negative outcomes for the child had the effect on professionals’ perceptions.

Taking this into account, the current study examines frequency as one of the independent variables. Frequency was manipulated as two levels - ‘repeated many times’ or ‘single event’. These two sub-categories of frequency were drawn from the analysis of Chapter 2.

(iii) Consequences – 2 levels
Similar to abusive behaviour, previous chapters have demonstrated that adverse effects on the child were often treated as one of the core elements of PEA across different definitions. In regard to the ongoing discussion about whether PEA should be defined as abusive behaviours or consequences and the need to identify the effects of individual component clearly, this study treats consequences as a separate variable. Vignettes in this study were controlled with two levels – children with or without negative effects of PEA.

As the consequences of PEA could be different depending on the child or circumstances, it is difficult for professionals to distinguish the consequences of PEA from the outcomes would have occurred anyway (with or without the PEA due to child inherent characteristics). Taking this into account, the study illustrated consequences explicitly in the vignettes. That is, consequences were illustrated with a combination of child’s psychological status and behaviour - ‘very depressed and aggressive towards others’ or ‘cheerful and calm to others’.

(iv) Child age – 2 levels
Child age was not referred to by the abstract definitions in Chapter 2. Nevertheless, the significance of child age was highlighted in other chapters. First, as discussed in Chapter 1, the level of child development could affect the meaning of PEA. Second, as Chapter 3 pointed out, the level of child development could affect the identification of PEA, both spontaneous verbal disclosure from the child and recognition by others. Third, as shown in Chapter 4, previous studies examined the effect of child age on professionals’ definition of PEA and this needs to be further investigated. Hansen et al. (1997) found out that vignettes concerning younger children were perceived as more abusive than those concerning elder children. On
the other hand, Crenshaw (1995) did not find any effects of child age on professionals’ reporting behaviours. These studies examined different aspects of the definition of PEA – the former is about theoretical professional abstract definitions and the latter is about professional operational definitions. From these, child age is considered to be one of the important elements of PEA and the current study aims to add further evidence.

The sample is too small to divide child age up into specific years. Instead, age was described by the level of schooling, with two levels of kindergarten and elementary school. In Japan, where the study was undertaken, the former refers to children under age 6 and the latter refers to ages 6-12.

(v) Abuser and the child
Without involving the abuser and the child, it is hard to make sense of the meaning of vignettes. In the current study, the abuser and the child were described as ‘mother’ and ‘daughter’ respectively for all vignettes in order to keep the information consistent.

The abuser was set as mother because mothers have been most frequently identified as an abuser in Japan (MHLW, 2015). The gender of abuser and child was coordinated as female (i.e. mother/daughter). This is because that it is possible that variation of gender between abuser and child could influence the results. In a future study, this aspect can be investigated further. However, as already discussed, it was not possible for this study to manipulate these elements of PEA.

Example of vignette
Taking into account all of these variables produced 32 combinations (4*2*2*2=32) and so 32 different variants of the vignettes were constructed. All participants were presented with the same set of vignettes. Diagram 5-2 provides an example of the vignettes used in this study.
II. Professionals’ characteristics

In addition to case characteristics, the nature of person who is operationalising the definition might also affect how the situation is perceived. Therefore, this chapter recorded information about the participants’ characteristics as independent variables. Table 5-2 describes the characteristics of the professionals in the study.

(i) Demographic background

Some studies in Chapter 4 demonstrated the effect of respondents’ demographic background on definitions of PEA. For example, Burnette (1993) identified that female respondents were likely to have lower thresholds for defining PEA than male respondents. In addition, Fraser et al. (2010) concluded that parental role and age predicted low thresholds of the definition of PEA. Therefore, the current study included gender, age, and parental role as independent variables.

The majority of the respondents were female (female 67%; male 33%). Age groups ranged from 20s to 70s years. Those who were under 40 years old (53%) accounted for slightly more of the sample than those who were 40 years or older (47%). Those who responded that they did not have children (52%) accounted for a slightly higher proportion of the sample than those who had children (49%).

Child care professionals (28%), mental health professionals (25%) and social work professionals (21%), were the most common respondents. In addition to profession types, professionals differ in their experiences. The length of professional
experience was diverse: respondents with 1-5 years of experience (29%); 20 years or longer (25%); 11-15 years (18%); 6-10 years (17%); under 1 year (7%); and 16-20 years (5%). Respondents were dispersed across Japan and the majority answered that they were working in an urban area (81%).

(ii) Occupational background
As stated in Section 5.3.2., the targeted sample in this study was professionals in education, health, child care, law enforcement who are responsible for child protection. The sample were predominantly social work professionals (21%), nurses (18%), child care professionals (28%) and mental health professionals (25%).

(iii) Training
As shown in Chapter 4, Hawkins and McCallum (2001) demonstrated the effect of training about CAN on professionals’ definition of PEA. However, Chapter 3 demonstrated that the Japanese guidelines did not emphasise the importance of training, unlike the guidelines of California and England. Therefore, it was important to understand to what extent training was widespread amongst professionals in Japan and whether it affects their definition of PEA. The majority (86%) responded that they had received training.

(iv) Understanding of professionals’ responsibilities
It was discussed in Chapter 4 (Section 4.8.2.) that a low incidence rate of PEA can be because professionals are unwilling to identify it. Such unwillingness could come from various reasons. For instance, when professionals are not aware of their responsibilities, they might be unwilling to react to the situation.

In this study, therefore, understanding of professional responsibility for CAN was addressed by a question “Do you think you have professional responsibility when you suspect CAN?” The answers were measured with three levels. The majority responded that “I think I have a responsibility to do something” (83%). There was very small proportion of respondents who answered, “I have nothing to do” (2%). Importantly, some of the respondents (15%) expressed their confusion about their responsibilities by “I feel I am responsible, but I do not know what to do”.
(v) Confidence in dealing with CAN

It was shown in Chapter 3 that professionals in Japan were responsible for reporting suspicious cases of CAN. However, it was also shown that guidelines were not clear about the threshold for responding to PEA. Such ambiguity implies that professionals need to make decisions based on their professional knowledge, experience and capability as there is no detailed specification provided and rigorous rules to follow. This might result in professionals' lack of confidence in dealing with CAN cases.

In this study, confidence was measured by “Do you have the confidence to smoothly respond to the situation when you suspect CAN during your professional role?” and evaluated with [yes/no]. More than half of the respondents answered that they were confident (57%).

(vi) Previous experience of CAN

Those who previously came across any types of CAN might have a high degree of awareness of PEA.

In this study, professionals' previous experience of CAN was measured by a question “Have you ever suspected CAN during your work?” [yes/no]. The majority (74%) responded that they had suspected CAN. It was hypothesised that those who answered that they encountered CAN are more likely to assign abusiveness and to act based on vignettes.

Table 5-2: Characteristics of the respondents (N=163)

<table>
<thead>
<tr>
<th>Demographic background</th>
<th>%</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>33.3</td>
<td>54</td>
</tr>
<tr>
<td>Female</td>
<td>66.7</td>
<td>108</td>
</tr>
<tr>
<td><strong>Age group</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39 years old and under</td>
<td>53.4</td>
<td>87</td>
</tr>
<tr>
<td>40 years old +</td>
<td>46.7</td>
<td>76</td>
</tr>
<tr>
<td><strong>Parental role</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes - have a child or children</td>
<td>48.5</td>
<td>79</td>
</tr>
<tr>
<td>No - does not have a child or children</td>
<td>51.5</td>
<td>84</td>
</tr>
<tr>
<td>Occupational background</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>-------------------------</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td><strong>• Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elementary school teacher</td>
<td>5.5</td>
<td>9</td>
</tr>
<tr>
<td>Social work professional</td>
<td>20.9</td>
<td>34</td>
</tr>
<tr>
<td>Nurse</td>
<td>17.8</td>
<td>29</td>
</tr>
<tr>
<td>Paediatrician</td>
<td>1.8</td>
<td>3</td>
</tr>
<tr>
<td>Child care professional</td>
<td>27.6</td>
<td>45</td>
</tr>
<tr>
<td>Mental health professional</td>
<td>25.2</td>
<td>41</td>
</tr>
<tr>
<td>Police</td>
<td>1.2</td>
<td>2</td>
</tr>
<tr>
<td><strong>• Length of profession</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 years and under</td>
<td>52.7</td>
<td>86</td>
</tr>
<tr>
<td>11 years+</td>
<td>47.2</td>
<td>77</td>
</tr>
<tr>
<td><strong>• Location of work</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>urban</td>
<td>80.7</td>
<td>130</td>
</tr>
<tr>
<td>Rural</td>
<td>19.3</td>
<td>31</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Attitudes and experiences on CAN</th>
<th>%</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>• Understanding of professionals’ responsibility</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I have a responsibility to do something.</td>
<td>83.4</td>
<td>144</td>
</tr>
<tr>
<td>I have nothing to do.</td>
<td>1.8</td>
<td>3</td>
</tr>
<tr>
<td>I feel I have something to do but I do not know what to do.</td>
<td>14.7</td>
<td>24</td>
</tr>
<tr>
<td><strong>• Confidence in dealing with CAN</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes-confident</td>
<td>57.1</td>
<td>93</td>
</tr>
<tr>
<td>No-not confident</td>
<td>42.9</td>
<td>70</td>
</tr>
<tr>
<td><strong>• Training experience</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>no training at all</td>
<td>13.6</td>
<td>22</td>
</tr>
<tr>
<td>some training</td>
<td>86.4</td>
<td>148</td>
</tr>
<tr>
<td><strong>• Previous experience to suspect CAN</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>74.2</td>
<td>121</td>
</tr>
<tr>
<td>No</td>
<td>25.8</td>
<td>42</td>
</tr>
</tbody>
</table>

**Dependent variables**

The variation in vignettes and respondent characteristics were treated as the independent variables. The dependent variables were the respondents’ classification of each vignette as meeting abstract or operational definitions of
‘abuse’ (The reason to use this term is explained below). Each vignette was followed by two questions to address whether the respondent thought that the vignette met the threshold for both abstract and operational definitions respectively.

**Abstract definitions of professionals**

Professionals’ abstract definitions of PEA were measured by a question “Based on the vignette, would you consider the situation as abuse?” This was evaluated with a 4-point scale: [(1) not abuse; (2) maybe abuse; (3) probably abuse; (4) definitely abuse]. The 4-point scale was used to avoid an answer which indicates neutral position such as ‘I do not know’.

In this question, the term ‘abuse’ (gyakutai) was used instead of ‘PEA’. This is to avoid confusion amongst the respondents. That is, professionals might be familiar with the term ‘abuse’ but may not be clear about the meaning of ‘PEA’. When this is the case, professionals may not consider a vignette as ‘PEA’ but may perceive it as ‘abuse’. The goal of this study was not to understand if professionals correctly understood the concept of PEA. Instead, it aimed to understand how vignettes about potentially PEA situations were understood by professionals as abuse. Therefore, the presentation of the study results in the following sections (within Chapter 5), the term ‘abuse’ (referring to ‘gyakutai’) is used to refer to PEA. It is important to note that the term ‘gyakutai’ is a commonly used word to refer to broad concept of CAN in Japan. For instance, the law to prevent CAN in Japan is called ‘Jido gyakutai bōshi hō’ (Child Abuse Prevention Law), suggesting that the term ‘gyakutai’ encompasses both abuse and neglect.

**Operational definitions of professionals**

This study asked respondents about how they ‘would’ respond. The vignettes as well as questions were hypothetical, and they do not record actual behaviours. In the results section of this chapter, the respondents’ answers are referred as actions. However, it must be remembered that these are hypothetical responses.

Professionals’ operational definitions of PEA were measured by a question “Based on the vignette, what would you do about the situation?” with following options: [(i) report; (ii) consult boss or colleague and report; (iii) consult boss or colleague and let them decide what to do; (iv) neither report nor consult others; (v) others-specify].
The concept of ‘consult’ was employed in this study because, first, reporting suspicions of CAN is not a legal responsibility for professionals in Japan, even though the importance to do so is emphasised. Therefore, professionals might seek other means to intervene in situations without reporting. Second, previous studies identified in the systematic review in Chapter 4 have shown that professionals were unlikely to report PEA (see Chapter 4). This also suggests the possibility of informal interventions other than reporting. Third, professionals working within organisations, for example schools, may be required to consult first with their co-workers before making decisions and taking action.

In addition, by adding (v) ‘others’ option, the study aimed to capture all possible decision-makings by professionals.

5.4. Results: How do professionals define PEA?

5.4.1. Data analysis

The vignette study was planned to help address the following research questions. For the clarity, the research questions stated in Section 5.2. are again listed below.

- How do professionals define PEA?
  (a) How do professionals view a possible PEA situation? (Professionals’ abstract definition)
  (b) What would professionals do about a possible PEA definition? (Professionals’ operational definition)
  (c) Which definitional components have an impact on professionals’ PEA definition?
  (d) Is there any gap between an abstract and operational definition by professionals?

- Is the approach, based on the definitional conceptual framework, feasible and useful?
  (e) Is it feasible to use the definitional framework in undertaking research?
  (f) Is it useful to use the definitional framework in conceptualising PEA?

To address research questions (a) and (b), distribution of abstract definitions and operational definitions were observed among respondents.
To address research question (c) and (d), cross tabulations as well as logistic regressions were undertaken. These analyses were conducted using SPSS 24.

Research questions (e) and (f), the feasibility and credibility of the definitional conceptual approach, were assessed based on the study findings.

5.4.2. (RQ a) How do professionals view a possible PEA situation? (Professionals’ abstract definition)

The data on professionals’ abstract definitions and operational definitions was originally collected with a Likert scale. This data was also made binary to grasp the broad phenomenon of the responses. Therefore, the tables in this section involves two types of data.

Table 5-3 illustrates the distribution of responses about perceptions of abuse.

According to the binary data, PEA was slightly more likely to be assigned with a low than a high degree of abusiveness.

As shown in Table 5-3, ‘maybe abuse’ was most frequently assigned, and this was followed by ‘probably abuse’ and ‘definitely abuse’ subsequently. Responses which completely do not suspect PEA ‘not abuse’ was least likely to be selected.

Table 5-3: Frequency of professionals’ abstract definitions

<table>
<thead>
<tr>
<th>4-point scale</th>
<th>%</th>
<th>Binary</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1=Not abuse</td>
<td>13.5</td>
<td>Low degree of abusiveness</td>
<td>49.4</td>
</tr>
<tr>
<td>2=Maybe abuse</td>
<td>35.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3=Probably abuse</td>
<td>24.6</td>
<td>High degree of abusiveness</td>
<td>47.8</td>
</tr>
<tr>
<td>4=Definitely abuse</td>
<td>23.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>97.3</td>
<td><strong>Total</strong></td>
<td>97.2</td>
</tr>
<tr>
<td><strong>Missing</strong></td>
<td>2.7</td>
<td><strong>Missing</strong></td>
<td>2.7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>100.0</td>
<td><strong>Total</strong></td>
<td>100.0</td>
</tr>
</tbody>
</table>
5.4.3. (RQ b) What would professionals do about a possible PEA situation? (Professionals’ operational definition)

Table 5-4 illustrates the distribution of proposed responses to the situations described in the vignettes.

The majority (86%) responded that they would do something about the situations. Among these, it was most common to ‘consult’ with others. On the other hand, there were only 5% of the cases which would be reported.

Table 5-4: Frequency of professionals’ operational definitions

<table>
<thead>
<tr>
<th>5-options</th>
<th>%</th>
<th>Binary</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>0=others</td>
<td>12.8</td>
<td>Do something</td>
<td>85.5</td>
</tr>
<tr>
<td>1=report</td>
<td>4.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2=consult &amp; report</td>
<td>28.4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3=consult &amp; leave</td>
<td>39.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4=do nothing</td>
<td>11.7</td>
<td>Do nothing</td>
<td>11.7</td>
</tr>
<tr>
<td>Total</td>
<td>97.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Missing</td>
<td>2.7</td>
<td>Missing</td>
<td>2.8</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>Total</td>
<td>100</td>
</tr>
</tbody>
</table>

5.4.4. (RQ c) Which definitional components have an impact on professionals’ PEA definitions?

As stated, the vignettes in this study systematically manipulated case characteristics of vignettes (definitional components). This part of the study discusses the effects of definitional components. In doing so, cross tabulations and logistic regressions were undertaken, and their results are shown in Table 5-5; 5-6; 5-7. It is important to note that both analyses were undertaken using binary versions of dependent variables.

Case characteristics based on the definitional components

Table 5-5 illustrates the cross tabulations showing the relationship between case characteristics based on the four definitional components and professionals’ abstract definitions as well as operational definitions. Table 5-7 shows the results of a logistic regression.
In the abstract definition, vignettes with a high frequency of abusive behaviour and negative consequences on the child were more likely to be perceived as abuse. In the operational definition, respondents also reported that they would be more likely to act in vignettes with these features.

In the abstract definitions, ‘control’ and ‘lack of appropriate response’ were the most likely to be assigned higher levels of abusiveness. In the operational definition, participants also reported that they would be more likely to take action in response to these abusive behaviours.

These results were the same in the logistic regression controlling for all the definitional components and professionals’ characteristics.

The results for age of child showed that vignettes involving younger child were slightly more likely to be assigned as abuse. However, these were not statistically significant in the regression.

**Professionals’ characteristics**

Table 5-6 presents a cross tabulation on the relationship between professionals’ characteristics and professionals’ abstract definitions as well as operational definitions. The results of a logistic regression are shown in Table 5-7.

**Gender and age** - Females as well as younger respondents were more likely to suspect abuse, however this result was not significant in the regression analyses. For operational definitions, both groups reported that they would be more likely (than male and older respondents) to take action. The results were the same in the regression analysis involving definitional components and professionals’ characteristics.

**Parental role** - For the abstract definitions, professionals who have children were less likely to suspect abuse. The same trend was also observed in the regression analysis, but it was not statistically significant. In the operational definition, those who have children were less likely to act. Unlike abstract definitions, this result showed statistical significance.

**Occupation** - There was no significant difference among different professional groups.
**Length of profession** - Respondents with shorter professional experience were more likely to suspect abuse. This result was the same and significant in the regression. In addition, those people with shorter experience were less likely to act than experienced respondents. The regression presented the same effect, but this was not statistically significant.

**Location of work** – Those who work in urban areas were slightly more likely to suspect abuse, but there was no difference in operational definitions. There was no statistical significance in either abstract definitions and operational definitions.

**Understanding of professional responsibility** – Respondents who believe they have no responsibility about CAN in general were the least likely to suspect abuse and to act in response to the situations compared to other two groups of people. This was not statistically significant.

**Confidence** - Respondents who have confidence in dealing with CAN were more likely to suspect abusive situations and this result was the same in the regression with statistical significance. For the operational definitions, descriptive data showed that those who have confidence were three times more likely to report the case. The regression result did not show the same effects and was not significant.

**Training** - Participants who have never had training on CAN were less likely to suspect abuse and act, than those who had training. The same results were observed in regression analysis with statistical significance holding other variables constant.

**Previous experience of CAN** - There was no substantial difference between two groups of people both in descriptive data and logistic regressions.
Table 5-5: Cross tabulation- Four definitional components*Abstract definitions & Operational definitions (binary)

<table>
<thead>
<tr>
<th>Abusive behaviour</th>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low degree of abusiveness</td>
<td>High degree of abusiveness</td>
</tr>
<tr>
<td>Degrading</td>
<td>60.8</td>
<td>39.2</td>
</tr>
<tr>
<td>Active rejection</td>
<td>57.5</td>
<td>42.5</td>
</tr>
<tr>
<td>Control</td>
<td>39.7</td>
<td>60.3</td>
</tr>
<tr>
<td>Lack of appropriate</td>
<td>45.1</td>
<td>54.9</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Child age</th>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kindergarten</td>
<td>50.5</td>
<td>49.5</td>
</tr>
<tr>
<td>Elementary school</td>
<td>51.1</td>
<td>48.9</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repetitive</td>
<td>23.4</td>
<td>76.6</td>
</tr>
<tr>
<td>Once</td>
<td>78.2</td>
<td>21.8</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Consequences</th>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>With consequences</td>
<td>40.7</td>
<td>59.3</td>
</tr>
<tr>
<td>Without consequences</td>
<td>60.8</td>
<td>39.2</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
</tbody>
</table>

Table 5-6: Cross tabulation- Professionals’ characteristics*Abstract definitions & Operational definitions (binary)

<table>
<thead>
<tr>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low degree of abusiveness</td>
<td>High degree of abusiveness</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
</tr>
<tr>
<td>male</td>
<td>49.8</td>
</tr>
<tr>
<td>female</td>
<td>51.7</td>
</tr>
<tr>
<td>Total</td>
<td>51</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Age</th>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>39 years old and under</td>
<td>49.4</td>
<td>50.6</td>
</tr>
<tr>
<td>40 years old +</td>
<td>52.4</td>
<td>47.6</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parental role</th>
<th>Abstract definition</th>
<th>Operational definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>yes</td>
<td>52.3</td>
<td>47.7</td>
</tr>
<tr>
<td>no</td>
<td>49.4</td>
<td>50.6</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
<tr>
<td>Occupation</td>
<td>10 years and less</td>
<td>11 years or longer</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>-------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Elementary teacher</td>
<td>41.8</td>
<td>58.2</td>
</tr>
<tr>
<td>Social worker and worker at Child Welfare institution</td>
<td>45.1</td>
<td>54.9</td>
</tr>
<tr>
<td>Nurse</td>
<td>61.4</td>
<td>38.6</td>
</tr>
<tr>
<td>Paediatrician</td>
<td>44.8</td>
<td>55.2</td>
</tr>
<tr>
<td>Child care workers</td>
<td>49.9</td>
<td>50.1</td>
</tr>
<tr>
<td>Mental health professionals</td>
<td>50.6</td>
<td>49.4</td>
</tr>
<tr>
<td>Police</td>
<td>67.2</td>
<td>32.8</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Length of current profession</th>
<th>10 years and less</th>
<th>11 years or longer</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>urban</td>
<td>50</td>
<td>50</td>
<td>100</td>
</tr>
<tr>
<td>rural</td>
<td>52.9</td>
<td>47.1</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>50.5</td>
<td>49.5</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Professional responsibility</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>I have a responsibility to do something.</td>
<td>50.8</td>
<td>49.2</td>
<td>100</td>
</tr>
<tr>
<td>There is nothing I have to do</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I feel I have to do something but I do not know what to do</td>
<td>62.5</td>
<td>37.5</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>49.2</td>
<td>50.8</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Confidence</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>yes</td>
<td>48.8</td>
<td>51.2</td>
<td>100</td>
</tr>
<tr>
<td>no</td>
<td>53.5</td>
<td>46.5</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Training</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>no training at all</td>
<td>60.5</td>
<td>39.5</td>
<td>100</td>
</tr>
<tr>
<td>received training</td>
<td>49.2</td>
<td>50.8</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Previous experience of CAN</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>yes</td>
<td>50.7</td>
<td>49.3</td>
<td>100</td>
</tr>
<tr>
<td>no</td>
<td>51</td>
<td>49</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>50.8</td>
<td>49.2</td>
<td>100</td>
</tr>
<tr>
<td>Case characteristics</td>
<td>Abstract definitions (1=less abuse; 2=more abuse)</td>
<td>Operational definitions (1=do nothing; 2=do something)</td>
<td></td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------------------------</td>
<td>------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Intercept</td>
<td>B 2.12  Std. Error 0.427  Sig. 0</td>
<td>B 0.064  Std. Error 0.46  Sig. 0.889</td>
<td></td>
</tr>
<tr>
<td><strong>Abusive behaviour</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Degrading</td>
<td>1.055  0.107  0.064  Sig. 0</td>
<td>0.542  0.151  0</td>
<td></td>
</tr>
<tr>
<td>Active rejection</td>
<td>0.833  0.106  0.031  Sig. 0</td>
<td>0.315  0.154  0.044</td>
<td></td>
</tr>
<tr>
<td>Control</td>
<td>-0.344  0.105  0.143  Sig. 0</td>
<td>-0.443  0.171  0.009</td>
<td></td>
</tr>
<tr>
<td>Lack of appropriate response</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Child age</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kindergarten</td>
<td>-0.029  0.074  0.075  Sig. 0</td>
<td>0.075  0.108  0.486</td>
<td></td>
</tr>
<tr>
<td>Elementary school</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Frequency</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repetitive</td>
<td>-2.823  0.085  0.001  Sig. 0</td>
<td>2.223  0.167  0</td>
<td></td>
</tr>
<tr>
<td>Once</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Consequences</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With negative consequences</td>
<td>-1.21  0.08  0</td>
<td>2.014  0.132  0</td>
<td></td>
</tr>
<tr>
<td>Without negative consequences</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td><strong>Professionals' characteristics</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>0.013  0.095  0.21  Sig. 0</td>
<td>1.053  0.14  0</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39 and under</td>
<td>-0.041  0.102  0.143  Sig. 0</td>
<td>0.811  0.158  0</td>
<td></td>
</tr>
<tr>
<td>40+</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Do you have child?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>0.094  0.093  0.094  Sig. 0</td>
<td>1.075  0.143  0</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elementary school teacher</td>
<td>-0.552  0.432  0.021</td>
<td>-4.336  0.467  0</td>
<td></td>
</tr>
<tr>
<td>Social worker and workers at CWI</td>
<td>-0.203  0.402  0.615</td>
<td>-3.948  0.405  0</td>
<td></td>
</tr>
<tr>
<td>Nurse</td>
<td>0.503  0.397  0.205  Sig. 0</td>
<td>2.96  0.38  0</td>
<td></td>
</tr>
<tr>
<td>Paediatrician</td>
<td>-1.285  0.491  0.009  Sig. 0</td>
<td>1.917  0.5  0</td>
<td></td>
</tr>
<tr>
<td>Child care workers</td>
<td>-0.155  0.395  0.695  Sig. 0</td>
<td>3.03  0.38  0</td>
<td></td>
</tr>
<tr>
<td>Mental health professionals</td>
<td>-0.23  0.397  0.563</td>
<td>-3.106  0.385  0</td>
<td></td>
</tr>
<tr>
<td>Police</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Length of current profession</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 years and under</td>
<td>-0.568  0.099  0</td>
<td>0.21  0.145  0.148</td>
<td></td>
</tr>
<tr>
<td>11 years or more</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>
5.4.5. (RQ d) Is there any gap between abstract and operational definition by professionals?

The regression analysis showed that when respondents suspected abuse, they were more likely to act (the level of action was – report; consult; or take other forms of action). On the other hand, when they did not perceive the situation as abuse, they were less likely to act. These results were both statistically significant.

However, according to the descriptive data, there were situations when respondents suspected abuse but chose not to do anything. There were 0.6% of cases when respondents perceived the situation as ‘definitely abuse’ but decided neither report, consult to others nor take any form of action about it. In other words, there are situations when respondents do not take any action regardless of their high certainly about the existence of PEA. This suggests that there are possible PEA cases which are suspected by professionals but left without receiving any form of intervention or support.
Table 5-8: Cross tabulation - abstract definitions and operational definitions of professionals

<table>
<thead>
<tr>
<th>Abstract definitions 4-point Likert</th>
<th>Operational definitions-5 options</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1=not abuse</td>
<td>0=others</td>
<td>1=report</td>
</tr>
<tr>
<td>2=maybe abuse</td>
<td>12.5%</td>
<td>0.0%</td>
</tr>
<tr>
<td>3=probably abuse</td>
<td>57.3%</td>
<td>3.0%</td>
</tr>
<tr>
<td>4=definitely abuse</td>
<td>16.3%</td>
<td>16.9%</td>
</tr>
<tr>
<td>Total</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

5.4.6. (RQ e) Is it feasible to use the definitional framework in undertaking research?

The current chapter used the conceptual framework to create examples of potential definitions of PEA in the form of vignettes. These ‘prior definitions’ are not mean to be ‘correct’ definitions. Rather, the important thing is that the different meanings of PEA are specified prior to the research. This gives researchers opportunities to think about PEA at the component level and so identify the conceptual issues which they are specifically trying to examine in their research. This process is important because some of research examined in this review seemed to assume that the meaning of PEA as commonly understood by others, and this phenomenon results in definitions of PEA varying across research studies in unclear ways. In other words, the studies are both assuming and studying definitions of PEA.

One aspect of this is that specified components of prior definitions enable the identification and measurement of the gap between a researcher’s definition and study results.

In sum, the clarification of the components of the prior definition makes the research strategy more rigorous in exploring definitions of PEA.

The current study demonstrated that the application of the conceptual framework is feasible through an original vignette study.
5.4.7. (RQ f) Is it useful to use the definitional conceptual framework in conceptualising PEA?

In this chapter, the definitional component framework was employed to systematically construct vignettes. This approach has demonstrated some strengths in examining professional definitions of PEA. First, it enabled specification of the conceptual components of definitions, which could then be illustrated with vignettes, and represented to participants in a systematic and consistent way. As shown in Chapter 4, there were studies with vignettes which did not distinguish conceptual differences in them. Such vignettes randomly involved different definitional components and it hindered the rigorous analysis of responses to the vignettes. Although some studies systematically controlled independent variables (e.g. Webster, 2005), there was no study which manipulated at least four definitional components of PEA. Therefore, this chapter has brought new evidence for PEA which was underpinned by structured vignettes.

Second, the consistent construction of vignettes allowed examining the data not only descriptively but also with logistic regressions. A significant aspect of logistic regression was that the results were holding all the other included variables consistent. This approach therefore has provided strong evidence on professionals’ definitions of PEA.

5.5. Discussion and conclusion

The current study aimed to establish a feasible and credible methodology to examine professionals’ definitions of PEA. In doing so, a vignette study was undertaken amongst professionals in Japan. Based on the results, the following section discusses relevant issues.

5.5.1. Definitional components as determinants of thresholds of PEA (RQ a)

Consistent with the previous studies in Chapter 4, the results demonstrated the relatively high thresholds for both abstract and operational definitions of PEA by professionals. It was discussed earlier that one of the reasons of this high threshold may be underpinned by the nature of situation. Taking this into account, this chapter constructed vignettes systematically with combination of definitional components.
As a result of logistic regressions, frequency, negative consequences and abusive behaviour appeared to be significant predictors of high degree of abusiveness as well as act of intervention. From the effect size of the regression results, frequency and consequences appeared to be stronger predictors than abusive behaviours in this chapter.

**Frequency and negative consequences**

As discussed earlier, Baily and Baily (1986), based on an independent narrative question in the survey, demonstrated that the majority of their respondents (85% out of 75 respondents) considered that PEA could be defined only with abusive behaviour. Seven years later, Burnette (1993) conducted a vignette study, and showed that vignettes which illustrated PEA with repetitiveness and negative effects on the child were rated higher than vignettes illustrated with single occurrence. Burnette argued that if the result demonstrated by Baily and Baily (1986) were true, abusive behaviour was required to appear repetitively with negative consequences to be defined as PEA, therefore, the author argued that the results were not consistent with the study by Baily and Baily (1986).

Consistent with Burnette (1993), this chapter showed that both high frequency and negative consequences became significant predictors for professionals to define PEA. The significance of this chapter was that frequency and consequences were controlled separately. Thus, this chapter added much more credible evidence to prove the effects of these components than that of Burnette (1993). However, it is important to note that there are possible discrepancies across countries.

**Abusive behaviour**

It has been demonstrated by the previous chapters that abusive behaviours were likely to be considered as core part of PEA, both in abstract definitions (Chapter 2) and professional guidelines (Chapter 3). The same phenomenon was also shown in the systematic review (Chapter 4). For example, Mcdowell (1996) and Paavilainen and Tarkka (2003) found that professionals often define PEA based on abusive behaviour when they were given an opportunity to create a definition of PEA. As stated earlier, Baily and Baily (1986) showed that the majority of respondents answered that PEA can be defined solely with abusive behaviour. In the current study, alongside of the effects of frequency and consequence, abusive behaviours
also appeared to be a predictor for professionals’ definitions for the identification of PEA.

The results of this chapter demonstrate that ‘active rejection’ and ‘degrading’ were seen as less abusive and less likely to be acted on in comparison to ‘control’ and ‘lack of appropriate response’. This might be, first, because of the nature of illustrated behaviours. That is, these sub-types of abusive behaviours were unlikely to be considered as a problem. For example, as it was discussed in Chapter 4 (Section 4.8.1), Sawada (1999) demonstrated that rejecting behaviours were unlikely to be seen as abusive in Japan. From these, there is an implication that the phenomenon to see rejecting behaviours as non-abusive is unique to Japan.

Second, it might be because of the nature of illustration of situations in the vignettes. In this chapter, ‘active rejection’ and ‘degrading’ were both elicited as verbal behaviours, although other two behaviours were illustrated as non-verbal. If this is the case, regardless of its wide recognition of verbal abuse as one of the forms of abusive behaviour as well as existing evidence of negative effects (Solomon & Serres, 1999; Polcari et al., 2014; Vissing et al., 1991), there is an implication that verbal behaviours are unlikely to be seen as a problem. Indeed, Carleton (2006) pointed out that some people deny the fact that verbal behaviour can be damaging. This might be because verbal negative behaviour is too common and underestimated. For instance, when people said or received something similar to the situation illustrated as verbal abuse, they might underestimate the situation.

Moreover, this phenomenon might be a unique feature amongst professionals in Japan due to a lack of training. According to a study undertaken by Sawada (1999), the majority (80%) of respondents (nurses) answered that they had no opportunities in learning CAN (including PEA). Training would be especially valuable for Japanese society where PEA can be hidden in an excessive degree. In Japan, there is an unwillingness to reveal the negative aspect of family matter (Gough, 1996b) and has a stigma on mental health issues (Ando et al., 2013). Therefore, training has the potential to enhance understanding and performance of Japanese professionals.

**Child age**

It was shown by Hansen et al. (1997) that vignettes with younger children were more likely to be perceived as abusive than vignettes with older children. However, in this
chapter, child age was not statistically significant, although descriptive results suggested a similar phenomenon to Hansen et al. (1997).

This result might be influenced by the research design. First, the result might be affected by the relatively small sample size. It is suggested to conduct further studies with a bigger sample size. Second, the comparison of two young age groups might have affected the results. One explanation is that there might be respondents who did not see the difference between children in pre-school and elementary school. Their perception might be linked to their nature of work. If their occupation involves more interaction with adolescents than younger children, for example, they might see pre-school child and elementary school child as more or less the same group. On the other hand, respondents who work closely with young children might be familiar with different levels of child development and might be more affected by age differences. Although this chapter did not demonstrate statistical significance in terms of child age, it is believed that understanding differences between age groups is still important and recommended to be further investigated.

Overall, this chapter has demonstrated that professionals' thresholds of PEA were influenced by the nature of the situation illustrated in vignettes, namely, definitional components. Concurrently, the study findings presented the feasibility and credibility of a definitional conceptual framework approach in examining professional definitions of PEA (RQs (e) and (f)).

5.5.2. Factors influencing professional decision-making (RQ b)

The logistic regression demonstrated that when a higher degree of abusiveness was suspected, action was more likely to be taken. When abuse was identified and there was a proposed response then this was usually ‘consultation’ with only a few instances of ‘reporting’ being proposed. Chapter 4 also found the same phenomenon of a low reporting rate of PEA. Potential reasons for this are now discussed.

Nature of vignettes

The current study, like others, has found that the nature of vignettes (abusive behaviour, frequency, and consequences) affect professionals’ decision-making. It
may be that the vignettes are generally considered not serious enough as examples of potential abuse.

**Nature of respondents**

In addition to the nature of vignettes, the characteristics of respondents can be also influential. First, the personal background of respondents could affect their decision-making. In Chapter 4 (Section 4.7.1., (iii)), the thesis argued that previous experience of interacting with children might affect the recognition of PEA. However, this argument was not supported by this chapter. The findings showed that those who have children were both less likely to suspect abuse and less likely to respond to it than those without children. This suggests that those who have children might underestimate situations of PEA. A possible reason is that those who are parents are aware that child rearing involves both negative and positive aspects, therefore, their thresholds of PEA are higher. A similar way of considering this could be that the parents’ daily lives overlapped with what the vignettes illustrated, and they did not want to describe this as abusive.

Second, professional background could also affect decision-making. In this chapter, there were no significant differences on perceptions and response attitudes depending on the professional groups. Nevertheless, in practice, there is diversity in working circumstances. The diverse environment of work is not necessarily represented by the different professional groups in this chapter.

For example, a counsellor, who does not belong to specific organisation on a daily basis, may have some degree of freedom to spontaneously react to PEA. In a sense, the counsellor does not have anyone to rely on, therefore, they are automatically responsible for taking action by themselves. In contrast, when professionals work for an organisation or institution, they might need to follow certain rules and processes, therefore, they may be more likely to decide to ‘consult’ with others. This tendency can be strong in Japan where there is an emphasis on harmonious interdependence with others (Markus & Kitamura, 1991). Sawada (1999), who examined nurses’ perceptions on CAN, demonstrated that none of their respondents answered to report a case individually. Rather, the majority selected “I do not know”. The author argued that this tendency might be underpinned by the fact that nurses in Japan work as a team and it might be difficult to make a decision about reporting individually.
Another example is that some professionals might have a role which allows them to provide direct support to children. Carleton (2006) pointed out that some legally mandatory reporters could try to help the child directly. This statement is not completely applicable for Japan where there is no mandatory reporting law. However, people might be able to provide direct support depending on their profession or working circumstances. Indeed, in this chapter, there were mental health professionals who noted that they would offer direct support, such as counselling or talking to the child or parent, to obtain further information.

In addition, being professionals (in contrast to lay people) might affect their decision-making. According to Munro (2008, p.56), it is evident that professionals are influenced by their exposure to families who have problems. That is, professionals might have a higher tolerance level to families with more problems. If this were the case, professionals could have higher thresholds of PEA than the public.

First, this phenomenon might reflect the professionals' careful assessment of PEA (Thoburn et al., 2000). A careful assessment sounds like a positive attitude as it could avoid errors. However, it can be negative when it occurs in initial phase of child protection. This means that professionals’ initial judgement, to report or not to report, affect the child’s life directly. That is, professionals could miss the risk which a child is facing or involved. It is not to argue that careful assessment is bad. Rather, screening the risk of the child alone could possibly be risky for missing potential PEA.

Second, this could be because of professionals’ unwillingness to be involved in PEA. If there is unwillingness, then professionals could, consciously or unconsciously, have a higher threshold for PEA. Nevertheless, such negative attitudes about responding/reporting can be changed. This chapter showed that those who had training were more likely to act than those who without training, and this evidence supports Hawkins and McCallum (2001) who found that training could improve professionals’ practice (see Chapter 4).

**Other factors**

Furthermore, there can be other factors influencing professionals’ behaviour in practice. First, the ambiguity of the threshold of PEA in Japanese professional guidelines could result in low reporting rates. As it was stated in Chapter 3, the lack of guidance on how to operationalise the definition of PEA suggests that
professionals need to rely on their own subjective judgements. The lack of information certainly does not help professionals to understand PEA. It could also have psychological effects, for example, lower confidence to deal with PEA. Indeed, although not statistically significant, the respondents those who did not express their confidence were likely to assign lower level of abusiveness and were unlikely to report abuse.

Second, the official reporting system could affect professionals’ practice. As stated in Chapter 4, Carleton (2006) demonstrated that a legal reporting obligation does not influence professionals’ attitude. The current study did not examine this aspect as Japan has no mandatory reporting law. It may be that the lack of mandatory reporting results in low reporting. Most respondents were aware of their responsibility to do something when there is CAN, but the reporting rate was low. One possible explanation of this is that respondents were not aware that PEA is reportable (Crenshaw, 1993 cited in Crenshaw, 1995) or were aware they could report but underestimated their reporting responsibility. Some might think someone else would report on behalf or instead of them. This phenomenon is a matter of individual differences, but it could become bigger at institutional or organisational level. For example, when professionals work with other members of staff, the degree of how individuals strongly feel about their responsibilities can weaken. That is, they may expect or assume that others would report the case which could lower spontaneous action by individuals.

A third possible factor is the lack of transparency of Japanese child protection procedures after reporting. It was demonstrated in Chapter 3 that in California and England reporters of abuse receive feedback about the child’s situation. On the other hand, this aspect was not mentioned in the Japanese guidelines. Without having an update about the reported case, professionals cannot understand how the case was dealt with. This hinders professionals’ opportunities to learn from practice. Without knowing what is going on about a specific case they are involved in, professionals might feel reluctant to make a report.

Overall, it can be said that such characteristics of Japanese child protection system has been created by Japanese culture. On the other hand, some might argue that the system shapes cultural features. It is unknown which comes the first and which created the other. But surely, as already discussed, there are likely to be differences in professionals’ attitudes toward PEA across cultures.
As it has been seen, respondents were unlikely to ‘report’ possible PEA situations to designated agencies. Although there may be differences depending on type of professions and other circumstances, it is possible to intervene in the situation without using official reporting procedures. Indeed, ‘consult’ with others, which is informal intervention, was frequently selected by the professionals. However, there are possible drawbacks of informal intervention. First, it is possible that a disagreement about the definition of PEA could occur amongst professionals who work together. Indeed, the results identified various effects of professionals’ characteristics on PEA definitions. Respondents who had shorter professional experience and who were confident in dealing CAN in general were more likely to suspect PEA. Respondents who have children were less likely to act on the situation. When there are such discrepancies in perceptions and operationalisation of PEA amongst professionals, it becomes uncertain how and who make the best decision for the child to receive appropriate support. For example, when consultation is made by a professional, it is possible that someone (presumably those who are in senior positions) stops further recognition of the case as abuse by the designated agencies by deciding the case does not require formal reporting.

Second, PEA cases which were not formally reported to child protection agencies or police are likely to remain officially unknown as PEA. This would prevent victimised children and their parents from receiving the official support which they are entitled to (Tite, 1993). Even if informal support is provided, the child or family could suddenly disappear from the child protection system regardless of professionals’ efforts, leaving the child at risk of further abuse/neglect.

Formal intervention, which enables the case to be recorded in official data and allows for appropriate intervention, is a significant part of dealing with PEA. Without it, abusive behaviours could escalate, and the situation could deteriorate. Also, children can be continuously exposed to PEA which may have a long-term detrimental impact on their lives. Therefore, professional practice, in particular, reporting, requires further investigation. This of course assumes that such intervention is effective.
5.5.3. Applying the definitional framework in research (RQ e & f)

The application of the definitional framework enables researchers to design studies rigorously and undertake conceptual analysis. If this approach is adopted in future research, this would allow the comparison of various research studies to aggregate their results systematically.

Evidence underpinned by the definitional framework is suitable for in-depth analysis on the definitions of PEA. This can highlight current issues and clarify ideas about the future direction on PEA.

This approach should be further tested, and also there needs an investigation about how the definitional framework can be used differently in future research.

5.5.4. Limitations

This chapter has added significant evidence on professional practice underpinned by a rigorous methodology. However, like other research studies, there were some limitations.

First, vignettes can neither exhaustively cover all possible patterns of PEA nor illustrate situations which are exactly the same as real cases. This means, vignettes cannot fully reflect practice. However, any relevant situations to PEA can be unpacked into its conceptual components.

Second, it was not possible to examine all of the combinations of possible definitional components due to the necessarily limited length of the survey instrument and the relatively small sample size. However, this chapter has added new original evidence on the effects of definitional components on professionals’ definition of PEA, using a systematic approach based on the definitional component framework.

The third limitation is the nature of study participants. The participants in this chapter were recruited by purposive sampling and they were not a representative sample, and this might have affected the results. One possibility is that people who took part in my study might be those who had some interests in the topic or those who had confidence about their knowledge about PEA. Another possibility is that, an online
survey might have hindered study participation of those who are not familiar with using computing devices. However, the online survey which does not involve direct communication with participants might have motivated others to participate as it does not involve direct communications with an investigator.

The purpose of the study was to add original evidence on professionals’ definitions of PEA based on a rigorous methodology. In this means, the study reported in this chapter has achieved its aim and provided important evidence for future studies.

5.5.5. Implications

With the definitional conceptual framework approach, this chapter was able to develop important insights into how professionals in Japan define PEA. Based on the evidence provided by the current study, this section suggests some implications.

First, it is suggested to further test the definitional framework approach in primary studies. As stated in Chapter 4, the consideration of the conceptual components of definitions of abuse/neglect by researchers is a fundamental part of undertaking research on PEA. Nevertheless, amongst relevant primary studies on PEA identified in Chapter 4, there was often a lack of transparency of constructs of definitions. Considering these weaknesses, the current study was designed to apply the definitional framework to construct vignettes. As the findings have demonstrated, this chapter has added new evidence underpinned by a rigorous research design. However, all definitional components in the framework could not be examined in this chapter. Therefore, undertaking further studies involving the rest of the definitional components (e.g. abuser, intention, child’s other characteristics) is recommended. Doing so would add further evidence on insights of professional practice.

Second, a further examination on the definitions of PEA is suggested across various cultural contexts. Chapter 4 demonstrated that the identified studies were predominantly conducted in the US, followed by the UK. In contrast, there was only a few studies identified in Japan. As noted, countries where there is high social awareness about PEA might be more likely to conduct research. On the other hand, in countries where there is low social awareness or avoidance to talking about PEA, it might be difficult to conduct research due to lack of access to study participants or data. With research evidence, policy-makers could create rigorous guidelines for professionals. It was shown in Chapter 3 that the threshold for response to PEA was
much more ambiguous in the Japanese guidelines compared to those of California and England. The implication is that the scarcity of research could affect the contents of the guidelines. That is, the lack of evidence on PEA, brought by research, could result in ambiguous guidelines which cannot specify instructions for professionals to follow. With clearer guidelines, professional practice can be enhanced by providing professionals with a clearer understanding of the phenomena of PEA and appropriate responses to different presenting scenarios. It may also be useful to build up evidence from various cultures which might demonstrate different findings.

Third, it is recommended to promote professionals’ regular training on CAN including PEA and the components involved in its definition. The current study showed that respondents who previously had training were more likely to suspect and act on PEA relative to those who never received training. Similarly, Hawkins and McCallum (2001) identified the association between high reporting and professionals’ recent training experiences, especially in situations where there is no clear evidence such as with PEA. Provision of training therefore could play an important role to enhance professionals’ reporting of PEA.

In order to achieve the provision of training, however, there are few things which could be also considered. One is financial support which make possible to achieve this. Another is to make sure that professionals can commit to training without having stress or problem with workload in their primary role.

Fourth, it is suggested that the possibility of establishing a formal intervention procedure exclusively for PEA subsequently to reporting should be explored. As already mentioned, professionals might be reluctant to formally report PEA if they lack trust in the system. Indeed, Glaser and Prior (1997) argued that PEA is not manageable under the current child protection procedures, even though PEA does belong to the area of child protection. The authors suggested an alternative intervention approach without necessarily involving police and social services in the early stage. Preparing a different route for PEA to be responded to might increase the credibility of the system and make professionals feel they can actually help children via a formal reporting system.

Finally, it is suggested to examine potential definitional gaps between professionals (potential reporters) and child protection professionals (recipients of report) based
on the definitional framework approach. The study reported in this chapter showed that there is a gap between abstract and operational definitions by individuals. Also, Rushton and Dance (2005) found that only a minority of reported cases of PEA actually reached the stage of formal intervention. Thus, there might be a huge gap between what is considered as reportable by professionals and what is considered as risky or harmful enough to be intervened by child protection professionals. This can be investigated by the framework approach.
6.1. Summary of the findings

Since the recognition of PEA as a social issue, there have been discussions about definitions and about practice, in addition to a number of research studies. However, the ambiguous nature of its definition, a central issue of PEA, has not yet been clarified. There is unlikely to be one final definition of PEA as definitions are developed for different purposes and there are many social factors involved in any definition within one culture, let alone across cultures. Yet, there is not even clarity about how different definitions vary from each other. The lack of such clarity can hinder the development of research, policy, and practice. Therefore, this thesis specifically focused on the issue of PEA and sought to answer the main research question:

- How is PEA conceptualised and what are the implications for PEA definitions for policy, practice, and research?

To address this, an initial phase of the thesis, Chapter 1, observed and used basic logic to analyse the academic literature, which was usually written by leading authors on PEA, to identify existing conceptual issues of PEA. The observation of the literature highlighted the discrepancy about how PEA was conceptualised, addressed, or discussed. The level of discrepancy was too high to be able to aggregate the relevant information to clarify the meaning of PEA. Thus, it was considered that there needs to be something which brings coherency to the issue and can incorporate the range of definitions together. To achieve this, as shown in
Chapter 1, the definitional conceptual framework consisting of eight definitional components (i.e. abuser, abusive behaviour, intention, frequency, interaction, consequences, child age, child’s other characteristics) was developed. Based on this framework, the thesis investigated PEA definitions using four different strategies, spanning theoretical and practice issues. Individual analyses were presented in previous chapters (from Chapter 2 to Chapter 5). Here, an overall summary of the thesis is provided.

In Chapter 2, abstract definitions of PEA were examined based on the academic and other relevant literature. The framework was effective at demonstrating and making explicit the diverse nature of PEA within and across definitional components. Then, Chapter 3 examined how professionals are guided to operationalise the definition of PEA in the context of California, England, and Japan. The framework was again effective in that it identified the different level of thresholds within as well as across the three jurisdictions. It demonstrated that guidelines do not provide sufficient information for professionals to thoroughly conceptualise PEA as an independent form of CAN. Thus, professionals need to rely on their understanding to make decisions about PEA in practice.

Both Chapter 2 and Chapter 3 highlighted the diversity of PEA definitions. Regardless of the lack of information about what PEA means, PEA is exercised in practice. Therefore, Chapter 4 undertook a systematic review to understand professionals’ views and responses to PEA based on previous research. The review identified that there were a small number of studies investigating the nature of PEA. Rather, the studies tended to involve an examination of PEA alongside of other forms of CAN. When PEA was studied with other CAN, professionals were likely to have a higher threshold of abstract definitions as well as operational definitions compared to other types of CAN. More importantly, it was identified that there was a gap between abstract definitions and operational definitions by professionals. That is, some studies showed that there were situations when PEA was suspected but no response was proposed.

The findings of the lack of clear definition of PEA in theory (Chapter 2 & Chapter 3) as well as the lack of studies which can tell us about the insight of professionals’ definitions of PEA (Chapter 4), led in Chapter 5 to conduct an original vignette study on professional practice using the conceptual distinctions.
Consistent with Chapter 4, the respondents of Chapter 5 had a high threshold for both abstract definitions and operational definitions of PEA. Importantly, there were occasions, just as in Chapter 4, where the respondents determined not to do anything about the situation regardless of their suspicion of PEA. The regression results showed that three definitional components (i.e. frequency; consequences; abusive behaviours) were the predictors of professionals’ abstract and operational definitions.

Overall, the thesis highlighted a gap between theory and practice. In other words, in spite of the ambiguous nature of PEA definitions, professionals in practice are required to make decisions about PEA. In doing so, they take into account various aspects which were represented by the definitional conceptual framework. Considering these results, some implications are suggested later in this chapter.

6.2. Contributions

A central contribution of this thesis was the development of a new research tool—the definitional conceptual framework which was constructed with eight definitional components. The significance of this framework was that it enabled multiple analyses to be conducted on the definitions of PEA with coherency and consistency. This part of the chapter first considers how each analysis has made a contribution in developing the conceptualisation of PEA. Then, it addresses the overall contributions brought by the four analyses.

6.2.1. Contributions of individual chapters

Chapter 2

Chapter 2 added evidence on abstract definitions of PEA. The contribution of the analysis was that it demonstrated the efficacy of the definitional framework in understanding the theoretical meaning of PEA. The definitional framework enabled the unpacking of definitions into their conceptual components. The analysis explained the mechanisms of the previously ambiguous nature of PEA with two levels - within and across the definitional components. In other words, the study turned PEA, which had been understood as ambiguous, into a visible mechanism.
Chapter 3
Chapter 3 added evidence on operational definitions of PEA in three jurisdictions. The contribution of the analysis was that it showed the efficacy of the definitional framework in understanding the nature of PEA in guidelines. The professional guidelines involved various types of information. Some parts of the guidelines inclusively consider all types of CAN together and it was hard to aggregate the information about PEA. Nevertheless, using the definitional framework enabled the identification of various thresholds of PEA, within and across the three jurisdictions.

Second, the study added evidence on theoretical guidance for professionals’ operationalisation of PEA, which was not previously addressed. In general, existing research studies either discussed the theoretical meaning of PEA or undertook primary studies on practice (e.g. on people’s definitions of PEA; effects of PEA). That is, there has been a lack of studies which examine the link between theory and practice. Therefore, this chapter provided significant evidence which falls in-between the theory (i.e. Chapter 2) and practice (i.e. Chapter 4 and Chapter 5).

Chapter 4
Chapter 4 added evidence on professionals’ definitions of PEA with a systematic review. The first contribution of the analysis was that it showed the efficacy of the definitional framework in understanding the construct of vignettes illustrating situations relevant to PEA. The examination of the vignettes revealed how PEA was addressed in the studies differently. The identified diversity of vignettes implied that most studies did not design vignettes meticulously to understand the insight of PEA. The systematic review did find awareness and use of a few of the conceptual components of PEA definitions in prior research. But these were isolated rather than structured systematic uses of the conceptual components. This lack of an overarching framework and conceptual analysis in previous research studies has therefore not only limited clarity about abstract and operational definitions. It has also limited previous research on these issues. This finding was especially important for constructing the vignettes used in the new primary study in Chapter 5.

Second, it demonstrated the efficacy of the definitional framework in understanding professionals’ definitions of PEA. The study identified the methodological weaknesses of existing studies which prevent us from seeing the insight of
professionals’ definitions of PEA at the definitional component level. This evidence was vital to design the subsequent analysis of Chapter 5.

**Chapter 5**

Chapter 5 added original evidence on professionals’ definitions of PEA in Japan. The first contribution of the analysis was that it showed the efficacy of the definitional framework in undertaking a primary study. A research strategy to construct vignettes based on the definitional components allowed us to observe how the definitional components influenced professionals’ perceptions and decision-making on PEA. This strategy added new evidence which enhances our current understanding of professionals’ practice on PEA.

Second, the study added original evidence with particular reference to Japan. Bringing evidence from various cultural contexts is imperative to develop understanding of PEA, because social norms could influence people’s perceptions of PEA. Thus, undertaking research where there are fewer studies on PEA than other countries (e.g. US, UK- as shown in Chapter 4) is valuable.

**6.2.2. Overall contributions of the thesis**

As seen so far, each analysis investigated a specific aspect of PEA and brought forward significant evidence, underpinned by the definitional conceptual framework. The use of the framework brought consistency across the four analyses and this enabled greater clarity, when exploring the nature of definitions of PEA more broadly.

First, the thesis added evidence on abstract definitions in a broad context, from theory to practice. Diagram 6-1 illustrates the relationship of the multiple analyses on abstract definitions. Abstract definitions, the theoretical meaning of PEA, provides a basic understanding of PEA.

Initially, theoretical aspects of abstract definitions were examined in Chapter 2. Chapter 3 showed that professional guidelines also involved abstract definitions whereas it was not the central focus of the study. Then, vignettes, which reflected the researchers’ priori definitions of PEA, were explored in Chapter 4. The findings of Chapter 4 were used to construct vignettes in Chapter 5. Finally, moving on to the practical aspect, Chapter 4 and Chapter 5 investigated professionals’ abstract definitions of PEA.
Second, the thesis added evidence on operational definitions in various contexts, from theory to practice. Operational definitions are about how PEA is exercised in practice. Diagram 6-2 presents the relation of the multiple analyses on operational definitions of PEA.

Chapter 3 examined the theoretical aspects of operational definitions (i.e. the response threshold for PEA) based on professional guidelines. Subsequently, professionals’ operational definitions were investigated initially with a systematic review in Chapter 4. Then, the same were scrutinised based on original vignettes in Chapter 5.
The application of the definitional framework to the analyses enabled the thesis to compare and contrast not only within but also across different analyses. In this way, the definitional framework brought us a new level of understanding of the definition of PEA.

The thesis investigated the definition of PEA rigorously and added significant evidence. Furthermore, the evidence brought by the thesis could help to enhance individuals’ conceptualisation of PEA. First, it allows professionals to think about PEA with the component level in practice. Second, it allows policy-makers to develop policies based on the PEA definitional components. Third, it provides criteria of PEA definitions for researchers to compare their research outcomes with. Fourth, it allows the public, who could potentially detect PEA, to discuss PEA definitional components.

6.3. Limitations
The thesis was rigorously designed, but there were some limitations. First, the definitional conceptual framework, which was developed and applied in the thesis, is not the only way to look at PEA. Certainly, the eight definitional components in
the framework allowed us to observe the nature of PEA extensively. But it is important to note that it is possible to conceptualise PEA differently.

Second, the thesis had limited capacity in dealing with the issue of PEA definitions. As stated, the evidence provided by the thesis would help people to develop their understanding on PEA. However, there are limits to what a thesis can achieved, for example, by eliminating the existing diversity of the definitions of PEA. Rather, what the thesis brought is a suggestion to see PEA how discussions of definitions of PEA can be improved. As demonstrated in the thesis, the framework approach is applicable for both theory and practice, and this approach can be further implemented in various contexts.

Third, the thesis had limitations in its coverage of practice. PEA in this thesis referred especially to child protection, which is a complex system. A child protection system usually consists of multiple phases and involves various agencies. In this thesis, an initial response phase of child protection was particularly examined in Chapters 3, 4, and 5. There are other phases of child protection (e.g. ongoing work with child protection professionals). As suggested in Chapter 5 (Section 5.5.), the use of definitions in other parts of child protection should be investigated in the future.

Fourth, the thesis was limited in terms of the coverage of operationalisation of PEA. The thesis focused on professionals’ practice. As referred to at the beginning of Chapter 3, however, there are other groups of people (e.g. the general public) who could be the users of PEA definitions. It was also limited in terms of geographical area (i.e. Chapter 3- California, England, Japan; Chapter 5- Japan). In future research, the different scope of operationalisation of PEA requires investigation.

Fifth, the thesis was limited to considering various social values underpinned by culture or historical times. It is not possible to study everything in one research project. Thus, it is important to add evidence from different contexts in the long-term.
6.4. Implications

The identified diversity of the definitions of PEA in the thesis raises a question about how we should define PEA. Variation in definitions may be based on positions taken on various issues such as:

- value judgments about the experiences children should or should not have in their lives
- research data on the outcomes that are likely to occur from having particular experiences
- the various rights, roles and responsibilities of children, parents, members of the community, and the state

There can therefore never be one final definition of PEA. This thesis provides a basis for more overt debate about the appropriateness of different definitions. The thesis can however provide a structure for how to think about definitions within current assumptions and knowledge of PEA. Below is a ‘working definition’ of PEA in terms of a suggested structure for developing definitions of PEA.

6.4.1. Developing a working definition of PEA

The point of the following working definition in Table 6-1 is to be explicit about definitional components consisting of PEA and the conceptual nature of the individual component. As has been pointed out several times, existing definitions are often not clear about their positions about how they consider or even whether they aware of these core components of the definition of PEA. This thesis argues that it is crucial to acknowledge and be explicit about multiple definitional components and specifying where an individual case is located within a broad concept of PEA. It may of course not always be known where a case fits within these conceptual components, but they can still all be considered and addressed. Similarly, the balance of components of PEA can be addressed in any central or local government policy.

Table 6-1: A working definition of PEA

| PEA | refers to negative interaction between abuser (e.g. parent/carer) and child. PEA is a continuum concept made up of multiple components (i.e. abuser, abusive behaviour, consequences, frequency, intention, interaction, child age, child's other characteristics). |
There are various forms of abusive behaviours of PEA. Examples include degrading, blaming, discriminating, rejecting, witnessing DV, controlling, and the lack of emotional response. Useful conceptual distinctions of abusive behaviours are (i) commission or omission, (ii) psychological/emotional or non-psychological/emotional, or (iii) direct or indirect in effect. The meaning of abusive behaviour, what is inappropriate behaviour, can be affected by social values, therefore, it is important to understand the context of PEA (e.g. cultural background of the child or family and the society and culture where consideration of PEA is being made).

One of the frequent characteristics of PEA is its persistency. However, it is important to note that a one-off event can also be PEA, especially when the degree of incidence is severe or traumatic for the child. Also, PEA can be underpinned by abuser’s intention, for instance, to be abusive or to bring harm on the child.

PEA could affect children adversely (consequences). However, whether the child is affected depends on the circumstances including child age and other child’s characteristics (e.g. the level of development; personality). One behaviour could adversely affect one child but not another child. Therefore, the presence of actual consequence is not a definite component of PEA. When there is no actual consequence, potential consequence on the child should be considered as part of PEA. Consequences might appear in various aspects of children’s lives (e.g. behaviour, mental health, physical development). Moreover, consequences could appear immediately as well as later in the life of the child.

Importantly, all definitional components are closely interrelated each other. In other words, none of these individual components can define PEA. Rather, a combination of components underpins PEA. A combination differs depending on the circumstance of each case. Therefore, this thesis proposes to operationalise the definition of PEA by the following procedure from (a) to (c) in Table 6-2.

Table 6-2: An assessment model of PEA

(a) Specification of central definitional components
(i.e. abusive behaviour; consequences; or interaction)
Abusive behaviour, consequences, and interaction are defined as central components here because PEA exists with one or more of these components. In other words, when there is none of these, PEA cannot exist. Throughout the multiple analyses in the thesis, it was apparent that abusive behaviours and consequences are often considered as core element of PEA. Interaction is an inclusive concept which could involve both abusive
behaviour and consequences, therefore, can be considered as an independent component which could replace these.

In this way, a suspicion of PEA could start with the recognition of one of the definitional components above. Thus, as a first step, it is proposed to clarify which of the central component raised an initial concern of PEA.

As stated in Table 6-1, consequence is important component, but its existence may or may not be obvious. When there is no explicit evidence of consequence, it is proposed to understand the relationship between abusive behaviour and child age as well as other child characteristics to guess the nature of potential negative consequences on the child.

Each component is conceptualised and scored as:
- Explicit information about a definitional component exists=3;
- Information which suggests potential existence of a definitional component=2;
- No information therefore unknown=0

(b) Specification of sub-definitional components
(i.e. frequency (i.e. persistency); intention)
Both frequency and intention exist together with at least one of the central components in (a). Frequency is about how often certain behaviour is occurring, therefore, it is closely related to abusive behaviours. Similarly, intention is about what motivate the abuser to act in certain way and its aim whether being abusive or to bring harm on the child, therefore, it is closely related to multiple components including abuser, abusive behaviour, and consequences. They are both important components and play sub-role to add further specification to the central components in (a)

Therefore, subsequent to the clarification of (a), it is suggested to identify information about sub-definitional components such as frequency and intention.

Each component is conceptualised and scored as:
- Explicit information about a definitional component exists=3;
- Information which suggests potential existence of a definitional component=2;
- No information therefore unknown=0

(c) Specification of the relationship of abuser and the child
As discussed in the thesis, the meaning of abuser, in other words, the relationship between abuser and the child, determines the scope of PEA. Therefore, as a final step, it is proposed to identify who is the abuser from the perspective of the child.
Abuser is conceptualised and scored as:

- Parent or other primary carer = 2;
- Others = 1;
- No information therefore unknown = 0

Section 6.4.3. demonstrates how this model can be applied into practice.

6.4.2. Explaining the structure of a working definition of PEA

Section 6.4.1. presented a working definition of PEA and the procedure to operationalise the definition. This section further discusses the position of each of the definitional components in relation to this proposed definition.

(i) Abuser

When the abuser is parent or carer, the child is likely to have a close relationship or opportunities to interact with him/her. Such features increase the risk of long-term exposure for the child as well as the escalation of an ongoing PEA situation. Therefore, the meaning of PEA is especially important when the abuser is a parent or carer, which is why they were explicitly referred to in the working definition.

However, it is important to note that other individuals or agencies can also be abuser. As mentioned, the meaning of abuser could affect the scope of concept of PEA. In this thesis, it was explicitly stated in Chapter 1 (Section 1.1.) that some forms of abuse/neglect, such as bullying, peer abuse, cyber bullying, digital violence, are not the focus of this thesis. However, these situations can be seen as PEA depending on where the definitional boundary is in different contexts. The model developed in this section allows anyone to be considered as a potential abuser without limiting the scope of PEA as interfamilial issue.

(ii) Abusive behaviour

As Glaser (2011) pointed out, it is not possible to exhaustively list all of the potential abusive behaviours. As shown in the definition above, there are major abusive behaviours which can be relatively obvious to see due to their negative impact. However, there can be behaviours where it may not be immediately understood if they are appropriate or inappropriate. Therefore, the working definition provided
conceptual distinctions within abusive behaviours of PEA to help an operationalisation of the definition in practice.

(iii) Intention

As shown in the previous chapter, it is common for the definitions of PEA to not refer to intentions, and the lack of such specification can be interpreted differently and cause confusion. Therefore, it is important to refer to intentions in the definition.

Abuser intentions can be important for practice. First, intention might affect the level of adverse consequences on the child. When the child knows or assumes that his/her parent’s negative behaviour is intentional, the effect might become stronger than when the child believes the behaviour is just a part of normal behaviour. However, as repetitively stated, this would vary depending on the characteristics of the child and other factors.

Second, intentions might influence the type of intervention which can be effective for the situation. When an abuser is abusive towards the child without intention, it might imply that there is a gap between the values of society and of the abuser. That is, what the abuser perceives, for example, as a form of necessary learning for the child might be socially considered as abusive. The abuser’s value can be an individual matter, but it can also be affected by culture. Then, intervention would require delivering a message for the abuser that his/her attitude is or can be abusive to the child. In contrast, when the abuser is intentionally abusive to the child, there might be a strong motivation to harm the child. Then, it might be more important to identify why they have such negative intentions and if there is any factor that triggers such intention.

Despite these potential impacts of intention, the abuser’s personality or mental health status could cause both intentional or unintentional abusive communications with children.

(iv) Frequency

The working definition referred to PEA as both a repetitive and a single event. It is recommended for professionals to make careful judgements about frequency of PEA. This is because, as mentioned earlier (see Chapter 5 – Section 5.5.), actual frequency is difficult to capture and measure. That is, what it seems to be single
episode might in fact be a repetitive act that has not been recognised. When PEA was a single event, the degree of PEA should be judged by whether the situation is likely to cause long term harm to the child.

(v) Interaction

Interaction is an inclusive concept which is closely relevant to other definitional components (e.g. abusive behaviour, consequences, frequency). The working definition adopts the approach by Glaser (2011) that treats interaction as a key component of defining PEA. This is because Glaser sees PEA as a relationship issue but also because a potential PEA situation might be first observed or recognised as a problem of a relationship, communication, or interaction rather than abusive behaviours or consequences of PEA. In other words, understanding the relationship between the potential abuser and abused is a fundamental part of identifying PEA as well as abusive behaviours and consequences.

(vi) Consequences

Consequences of PEA could take various forms. It is not possible to list all potential consequences but being aware of distinctions between the different status of types of harm (i.e. actual/potential, immediate/later) would be helpful in operationalising the definition.

An obvious evidence of consequence should be taken into account in defining PEA. However, in practice, there would be cases where there is no explicit consequence. It might be because the evidence is difficult to be seen or because adverse effect has not happened yet. Even when there is no obvious evidence, it is important to consider the possibility that the consequence may be hidden or happen later in the life of abused.

Additionally, in practice, it is important that professionals are aware that the timing of appearance of consequences differs depending on cases. Adverse effects can be observable immediately or may take time to appear. Therefore, information sharing between different professional groups in child protection system is extremely important.

The issue of consequences (as one potential component of PEA) can also be examined through research on the effects of different experiences on children.
(vii) Child age

PEA in this thesis refers to situations when its recipients are children. As stated in Chapter 1, the thesis has generally referred to children under 18 by following the United Nations Convention on the Rights of the Child (United Nations, 1989). Nevertheless, the meaning of childhood could differ across countries. Therefore, it is suggested to consider the legal definition of child age within each jurisdiction to consider PEA. Other more general laws may be applicable for all age ranges such as, for example, hate crimes in some countries.

Age is one of the indicators of the level of child development. Thus, age should be used to understand the situation of PEA. However, it is important to aware that the nature of child development differs extensively depending on individuals and so individual development age is also important.

(viii) Child’s other characteristics

Any child can be exposed to PEA. But children are diverse in nature. As stated, there are other characteristics which may make children vulnerable to PEA (e.g. disability, young age). Regardless of the child’s characteristics, PEA should not happen. However, knowing the characteristics of the child could be helpful for professionals to understand the nature of PEA or to think about an intervention strategy.

Overall, the definitional conceptual framework enables people to be clear about conceptual components of the concept of PEA. First, this definitional framework approach allows the definitions to be underpinned by transparent decisions (instead of hidden decisions) about what is important. Second, this approach allows building a strategy to encompass PEA in broad settings (which was suggested in Chapter 2). With this approach, maltreatment, such as bullying or digital violence can be also further investigated rather than excluded. Additionally, the meaning of PEA keeps evolving, for instance, with social values. Therefore, the definition should always be ready for adjustment and updating.

6.4.3. Applying the definitional framework into stories

Chapter 1 (Section 1.2.4.) presented two stories (Story A & Story B), which were both reported by the media, and showed a simple application of the definitional
framework in practice. Since then, the thesis analysed the definitions of PEA and revealed the insight of within and across definitional components.

This section refers back to the two stories in Chapter 1 to show how the conceptual components and the working definition can be used in practice to characterise a case and to consider the nature and extent of PEA whatever the local variation in how PEA is considered and how thresholds for theoretical or operational definitions are applied. (Section 6.4.1).

Table 6-3: Application of the definitional framework into Story A

<table>
<thead>
<tr>
<th>Definitional components</th>
<th>Unpacking story into component level [From Chapter 1]</th>
<th>Interpretation of the information</th>
<th>Model</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Abuser</td>
<td>Parent (father)</td>
<td>A potential abuser is part of the family</td>
<td>(c)</td>
<td>2</td>
</tr>
<tr>
<td>(ii) Abusive behaviour</td>
<td>Leaving the child alone in a forest as a discipline.</td>
<td>The behaviour can be potentially abusive.</td>
<td>(a)</td>
<td>2</td>
</tr>
<tr>
<td>(iii) Intention</td>
<td>The father claimed that his action was ‘discipline’.</td>
<td>There was father’s intention to be abusive underpinned by a belief that harsh parenting make the child learn.</td>
<td>(b)</td>
<td>2</td>
</tr>
<tr>
<td>(iv) Frequency</td>
<td>Once – as far as we could tell from the media account of the story.</td>
<td>The available information suggests that the event was one-off event. However, because the potential abuser is a parent (i) and there was intention (iii), it is possible that the similar situation has been repeated.</td>
<td>(b)</td>
<td>1</td>
</tr>
<tr>
<td>(v) Interaction</td>
<td>According to the father, the boy was throwing stones towards cars and he did not stop when told off, and this triggered the father to leave the child.</td>
<td>It seemed that there was difficult behaviour by the child.</td>
<td>(a)</td>
<td>2</td>
</tr>
</tbody>
</table>
Consequences
The child was left alone in a forest for several days but was eventually found. No immediate consequence was observed. But long-term consequences are unknown.

It is possible that the child was affected by the event and it emerges later in his life.

<table>
<thead>
<tr>
<th>(vi) Consequences</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>The child was left alone in a forest for several days but was eventually found. No immediate consequence was observed. But long-term consequences are unknown.</td>
<td>(a) 2</td>
</tr>
</tbody>
</table>

(vii) Child age
7 years old
Relatively young for being left alone in a forest.

<table>
<thead>
<tr>
<th>(vii) Child age</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>7 years old</td>
<td>(a) N/A</td>
</tr>
</tbody>
</table>

(viii) Child’s other characteristics
Overlap with (v) interaction
Not enough information though probably a strong willed and independent child.

<table>
<thead>
<tr>
<th>(viii) Child’s other characteristics</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Overlap with (v) interaction</td>
<td>(a) N/A</td>
</tr>
</tbody>
</table>

Table 6-3 allocated the scores for individual definitional component of Story A based on information. The sum of the scores are illustrated in Diagram 6-3.

Diagram 6-3: Total score of Story A

\[
(2+2+2)+(2+1)+2 = 11
\]

Abusive behaviour

Table 6-4: Application of the definitional framework into Story B

<table>
<thead>
<tr>
<th>Definitional components</th>
<th>Unpacking the story into component level [From Chapter 1]</th>
<th>Interpretation of the information</th>
<th>Model</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Abuser</td>
<td>A school teacher, a school, and/or the state</td>
<td>It is unclear who is responsible for the situation. But it is explicit</td>
<td>(c)</td>
<td>1</td>
</tr>
</tbody>
</table>
Table 6-4 allocated the scores for individual definitional component of Story B, and the sum of these scores are shown in Diagram 6-4.
In this section, the two examples of the stories which were reported by media were examined based on the model (Diagram 6-3; Diagram 6-4). Diagram 6-5 illustrates how the model works to conceptualise PEA. It provides a conceptual profile of PEA along continuum for each of the definitional components. The diagram shows that, based on the information obtained, Story A is more likely to be abusive compared to Story B.

It is likely that media tend to present stories which have certain characteristics such as involving young children or police. In practice, however, there would be more diverse types of cases which have different types and levels of severity. To conceptualise such complex situations, it is necessary to unpack them into definitional components step-by-step. In doing so, the model developed in this chapter allows people to measure the level of abusiveness as PEA based on accessible information.
6.5. Future research

Having examined the definition of PEA and discussed the findings, this final section considers future research.

First, it is suggested that the definitional framework be applied in studying the definition of PEA to see its efficacy in other contexts. This thesis has examined the definitions of PEA, from theory to practice, based on the definitional framework. The research has provided evidence on PEA. However, like other research, this could not cover all issues within PEA. Thus, the framework approach needs to be further tested in various contexts. One possibility, as stated in Chapter 5 (Section 5.5.5.), is to investigate the potential discrepancy in the definition of PEA between general professionals (i.e. potential reporters) and child protection practitioners (i.e. recipients of reports).

Second, it is suggested to apply the definitional framework in studying other types of CAN. The definitional conceptual framework was established for scrutinising the definitions of PEA systematically. Nevertheless, the framework can be used to clarify the meaning of other types of CAN. As discussed in Chapter 2, the individual definitional components could have different features depending on the types of CAN. For example, a one-off event of sexual abuse is usually considered as abuse, but the same might not apply for PEA. Rather, one of the characteristics of PEA is its persistency, and when the event is one-off the degree of situation is recommended to be taken into account. Thus, investigating the features of each component across different types of CAN could develop the understanding of CAN by clarifying the boundary between different types of CAN.

Third, it is suggested to further study PEA. As shown in Chapter 1, there is an increasing number of identified cases of PEA in various countries and research on PEA. However, as repetitively pointed out, the meaning of PEA could change. Indeed, the meaning of PEA has been expanding since its recognition. The expansion of the concept makes the definition of PEA, which is already diverse, even more complex. Therefore, there needs to be continuous effort in thinking about and discussing what PEA means.
References


HM Government (2015b) What to do if you’re worried a child is being abused: advice for practitioners. Department for Education.


Nottingham City Local Safeguarding Children Board (2014) *Guidance to support practitioners with emotional abuse*.


Appendix

Appendixes of Chapter 4

Search strategy

Pubmed
Searched on 23 July 2014
Results: 6,494

((((child abuse [mh]) OR ("emotional abuse" OR "psychological abuse" OR "emotional maltreatment" OR "psychological maltreatment" OR "emotional neglect"[Title/Abstract])) AND (((((occupational groups [mh]) OR (profession* OR practitioner OR practitioners OR expert OR experts[Title/Abstract])) OR ((health occupations [mh]) OR (pediatric* OR paediatric*[Title/Abstract])) OR (nurses, community health [mh]) OR ("health visitor" OR "health visitors" OR "community nurse" OR "community nurses*[Title/Abstract] OR (social work [mh]) OR ("social work" OR "social workers*[Title/Abstract]))) OR (police [mh]) OR (police* OR "police officer" OR "police officers*[Title/Abstract]) OR (faculty [mh]) OR (teacher OR teachers OR educator OR educators[Title/Abstract]))) AND (((perception [mh] OR comprehension [mh] OR thinking [mh]) OR (percept* OR underst* OR comprehe*n* OR view* OR perspect* OR think* OR thought[Title/Abstract]) OR (((mandatory reporting [mh] decision making [mh] OR attitude [mh] OR behavior [mh]) OR (report* OR decision-making OR respon* OR attitude* OR behav* OR act*[Title/Abstract])) OR (professional practice [mh]) OR ("professional practice" OR "professional practices" OR "real case" OR "real cases" OR "actual case" OR "actual cases" OR "real situation" OR "real situations" OR "actual situation" OR "actual situations*[Title/Abstract])))}}
<table>
<thead>
<tr>
<th>S1</th>
<th>DE ( &quot;child abuse&quot; OR &quot;child neglect&quot; OR &quot;emotional abuse&quot; ) OR TI ( &quot;emotional abuse&quot; OR &quot;psychological abuse&quot; OR &quot;emotional maltreatment&quot; OR &quot;psychological maltreatment&quot; OR &quot;emotional neglect&quot; ) OR AB ( &quot;emotional abuse&quot; OR &quot;psychological abuse&quot; OR &quot;emotional maltreatment&quot; OR &quot;psychological maltreatment&quot; OR &quot;emotional neglect&quot; )</th>
</tr>
</thead>
<tbody>
<tr>
<td>S2</td>
<td>DE &quot;professional personnel&quot; OR TI (profession* OR practitioner OR expert ) OR AB ( profession* OR practitioner OR expert )</td>
</tr>
<tr>
<td>S3</td>
<td>DE &quot;pediatricians&quot; OR TI (pediatric* OR paediatric* ) OR AB ( pediatric* OR paediatric* )</td>
</tr>
<tr>
<td>S4</td>
<td>DE &quot;health personnel&quot; OR TI (health visitor OR community nurse ) OR AB ( health visitor OR community nurse )</td>
</tr>
<tr>
<td>S5</td>
<td>DE &quot;social workers&quot; OR TI social worker OR AB social worker</td>
</tr>
<tr>
<td>S6</td>
<td>DE &quot;police personnel&quot; OR TI (police* OR police officer ) OR AB ( police* OR police officer )</td>
</tr>
<tr>
<td>S7</td>
<td>DE &quot;teachers&quot; OR TI (teacher OR educator ) OR AB ( teacher OR educator )</td>
</tr>
<tr>
<td>S8</td>
<td>S2 OR S3 OR S4 OR S5 OR S6 OR S7</td>
</tr>
<tr>
<td>S9</td>
<td>DE (&quot;perception&quot; OR &quot;comprehension&quot; OR &quot;thinking&quot; OR &quot;cognitions&quot;) OR TI ( percept* OR underst* OR comprehe<em>n</em> OR view* OR perspec<em>t</em> OR think* OR thought ) OR AB ( percept* OR underst* OR comprehe<em>n</em> OR view* OR perspec<em>t</em> OR think* OR thought )</td>
</tr>
<tr>
<td>S10</td>
<td>DE (&quot;child abuse reporting&quot; OR &quot;decision making&quot; OR &quot;attitudes&quot; OR &quot;behavior&quot;) OR TI ( report* OR decision making OR respon* OR attitude OR behav* OR act* ) OR AB ( report* OR decision making OR respon* OR attitude OR behav* OR act* )</td>
</tr>
<tr>
<td>S11</td>
<td>TI (professional practice OR real case OR actual case OR real situation OR actual situation) OR AB (professional practice OR real case OR actual case OR real situation OR actual situation)</td>
</tr>
<tr>
<td>S12</td>
<td>S9 OR S10 OR S11</td>
</tr>
<tr>
<td>S13</td>
<td>S1 AND S8 AND S12</td>
</tr>
</tbody>
</table>
Appendixes of Chapter 5
Recruitment letter (Japanese)

関係者各位
林真澄美

心理的虐待に関する研究へのご協力のお願い（依頼）

拝啓　時下益々ご清栄のこととお慶び申し上げます。
　早速で大変恐縮ですが、私は児童虐待の一種である心理的虐待に関する研究に取り組んでおります。その一環として、教育、福祉、医療等の分野で活躍されている専門家の皆様がどのように心理的虐待を理解されているのかを明らかにすることを目的とし、アンケート調査を実施しております。
　つきましては、下記の研究概要をご参照の上、研究協力の諾否をご検討くださいますようにお願い申し上げます。お手数をお掛けいたしますが、研究にご協力いただける場合には、研究責任者までご一報ください。
　お忙しいところ大変恐縮ですが、児童福祉の現場・政策・研究の向上を目指す本研究に、一人でも多くの専門家の皆様のお声をお聞かせいただければ有り難く存じます。何卒ご検討の程、宜しくお願い申し上げます。
　敬具

記

1. 研究題目： 「日本における専門家の心理的虐待に関する意識調査」

2. 調査目的
　本調査は、福祉、医療、教育関係者や警察等の専門家の方々が、心理的虐待に関してどのように考えておられるかを理解することを目的としています。

3. 調査参加者
　本調査は、福祉、医療、教育関係者や警察等の専門職に就かれている方々（以下参照）に調査協力をお願いしています。
　● 児童福祉施設職員（社会福祉士）
　● 心理職（学校、福祉施設、病院、警察等で心理専門職に就かれておられる方々。）
　● 小学校教員
　● 看護師
　● 小児科医
　● 警察官

4. 調査参加
　研究協力の諾否は任意であり、強制されるものではありません。ご協力を控えられた場合でも、不利益になることは一切ありません。
5. 調査の概要
本調査は、専門家の方々を対象とした無記名のインターネット調査です。指定のURLにアクセスし、アンケートに回答していただきます。回答時間は20分程度です。

6. プライバシー及び個人情報の取り扱い
アンケートデータはSSLを利用し暗号化され、匿名で収集されます。全ての情報は厳重に管理され、研究責任者のみこれにアクセスします。データは学術目的のみに使用し、その際、個人や所属が特定されないよう十分配慮いたします。

7. 研究により期待される利益
本研究協力者の方々への謝礼はございませんが、児童福祉の向上を目標とする研究であることをご理解の上、ご協力いただければ幸いです。

8. 研究への参加に伴うリスク
本調査で使用する事例については、協力者の方々の精神面について配慮すべく、実際の児童虐待事例等は使用せず、架空のシナリオ（ヴィネット）を用いています。

9. 調査結果の公表
本調査は、博士論文の一部としてまとめられます。結果公表の際にも、上記同様に個人情報保護への配慮を十分にいたします。

研究に関するご質問等がございましたら、どうぞ研究責任者までご連絡下さいますよう何卒宜しくお願い申し上げます。

研究責任者：林真澄美
Email:

指導教授：デイビッド・ゴフ（教授）

指導教員：サラ・クラフター（上級研究員）

所属機関：Department of Social Science,
UCL Institute of Education,
University College London
Online survey (including consent form) in Japanese

研究概要

本研究は、UCL Institute of Education, University College London の倫理委員会により承認されています。

研究題目：「日本における専門家の心理的虐待に関する意識調査」

1. 調査目的
本調査は、職務上児童虐待に関わる可能性がある専門職の方々が、心理的虐待に関してどのように考えておられるかを理解することを目的としています。

2. 調査参加者
本調査は、教育、福祉、医療、司法関係の専門家に調査協力を依頼しています。

3. 調査参加
研究協力の諾否は任意であり、強制されるものではありません。ご協力を控えられました場合でも、不利益になることはありません。また、一旦参加に同意された場合でも、理由を明らかにすることなくいつでも同意を撤回することができます。研究に関する質問がありましたら、研究責任者（下記、問い合わせ先参照）まで、いつでもお問い合わせください。

4. 調査の概要
本調査は、教育、福祉、医療、司法関係の専門家を対象にした無記名のインターネット調査です。回答時間は15〜20分程度です。

5. プライバシー及び個人情報の取り扱い
アンケートデータはSSLを利用し暗号化され、匿名で収集されます。全ての情報は厳重に管理され、研究責任者のみこれらにアクセスします。データ及び結果は、学術目的以外に用いることはありません。

6. 研究により期待される利益
本研究協力者の方々に謝礼等はございませんが、児童福祉の向上を目標とする研究であることをご理解いただいた上で、一人でも多くの皆様の貴重なご意見をお聞かせいただければ幸いです。

7. 研究への参加に伴うリスク
本調査で使用する事例については、協力者の方々の精神面について配慮すべく、実際の児童虐待事例等は使用せず、架空のシナリオ（ヴィネット）を用います。
8. 調査結果の公表
本研究は、博士論文の一部としてまとめられます。結果公表の際にも、上記同様に
個人情報保護への配慮を十分にいたします。調査結果の概要をお知りになりたい場
合、研究責任者までご連絡下さい。

[お問い合わせ先]
- 研究責任者：林 真澄美
- 電子メール：
- 指導教員：デイビッド・ゴフ（教授）
  サラ・クラフター（上級研究員）
- 所属機関：Social Science Research Unit, Department of Social Science,
  UCL Institute of Education University College London

お忙しいところ大変恐縮でございますが、以上の研究趣旨をご理解いただき、ご協力
賜りますよう宜しくお願い申しあげます。

※ 次頁において、調査参加への諾否が問われます。その際、「同意して、アンケート
に参加する」を選択された場合のみ、アンケートが開始します。一方、「同意せず、
アンケートには参加しない」を選択された場合、調査は自動的に終了します。
研究参加同意書

研究題目：「日本における専門家の心理的虐待に関する意識調査」

私は上記研究の実施に際し、説明文書（前頁）を用いて説明を受け、以下の項目について理解しました。

研究説明文書（前頁）の内容

・この研究が UCL Institute of Education, University College London の倫理委員会において承認されていること。
・本調査への参加は任意であること。
・研究の成果の公表はされるが、個人の特定可能な情報は一切公開されないこと。
・この研究が博士論文の一部としてまとめられること。
・研究に関する質問をする機会が与えられたこと。

上記に関する説明を十分理解した上で、研究協力への諾否を選択してください。

上記に同意し、アンケートへ参加しますか。
〇同意し、アンケートへ参加する
〇同意せず、アンケートには参加しない
アンケートへご参加いただき、どうも有り難うございます。

- 次のページからは、親子間の架空の状況（シナリオ）に基づいたアンケートが開始されます。
- シナリオは [A] から [D] まであり、それぞれに追記があります。シナリオと各追記を併せて考慮し、全ての質問に回答してください。その際、追記の内容の違いを良く確認してください。
- シナリオは架空の状況ですが、実際の状況であると想定してください。
- 質問に対する答えに正解・不正解はありません。アンケート中に第三者と相談したり調べたりせず、ご自分の考えに基づいて正直に回答してください。
- 本アンケートによって知り得た内容及び情報は、決して第三者へ口外しないよう（インターネットへの書き込み等を含む）、ご協力の程よろしくお願い申し上げます。

それでは、準備がよろしければ「次へ」を押して回答を開始してください。
・シナリオ[A]：母親が娘に対して、「ばか」、「役立たず」と言う。

△追記[A-1]：娘は幼稚園児。母親の[A]の言動は何度も繰り返されている。娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 1: [A] と[A-1]を併せて考慮し、虐待だと思いますか？
   もしかしたら
   確実に虐待だ ○ ○ ○ ○ ○

●質問 2: [A] と[A-1]を併せて考慮し、状況に対してどのような対応をしますか？
   ○自ら通告をする。
   （*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
   ○上司または同僚に相談してから、通告をする。
   ○上司または同僚に相談し、その後の判断は一任する。
   ○相談も通告もしない。
   ○その他（具体的に記入してください。）

△追記[A-2]：娘は幼稚園児。母親の[A]の言動は何度も繰り返されている。娘は明るく、他人に対して穏やかである。

   もしかしたら
   確実に虐待だ ○ ○ ○ ○ ○

   ○自ら通告をする。
   （*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
   ○上司または同僚に相談してから、通告をする。
   ○上司または同僚に相談し、その後の判断は一任する。
   ○相談も通告もしない。
   ○その他（具体的に記入してください。）
□追記[A-3]：娘は幼稚園児。母親の[A]の言動は一度のみ。
娘は非常にふさぎ込み、他人に対して攻撃的である。
●質問 5: [A] と [A-3] を併せて考慮し、虐待だと思いますか？
もしかしたら
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●質問 6: [A] と [A-3] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

□追記[A-4]：娘は幼稚園児。母親の[A]の言動は一度のみ。
娘は明るく、他人に対して穏やかである。
●質問 7: [A] と [A-4] を併せて考慮し、虐待だと思いますか？
もしかしたら
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●質問 8: [A] と [A-4] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）
□ 追記[A-5]：娘は小学生。母親の[A]の言動は何度も繰り返されてる。娘は非常にふさぎ込み、他人に対して攻撃的である。


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○ 自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）

○ 上司または同僚に相談してから、通告をする。
○ 上司または同僚に相談し、その後の判断は一任する。
○ 相談も通告もしない。
○ その他 (具体的に記入してください。)

□ 追記[A-6]：娘は小学生。母親の[A]の言動は何度も繰り返されてる。娘は明るく、他人に対して穏やかである。


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○ 自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）

○ 上司または同僚に相談してから、通告をする。
○ 上司または同僚に相談し、その後の判断は一任する。
○ 相談も通告もしない。
○ その他 (具体的に記入してください。)
□追記[A-7]：娘は小学生。母親の[A]の言動は一度のみ。

娘は非常にふさぎ込み、他人に対して攻撃的である。

    もしかしたら
    虐待ではない 虐待かもしれない おそらく虐待だ 確実に虐待だ
    ○ ○ ○ ○

●質問 14: [A] と [A-7] を併せて考慮し、状況に対してどのような対応をしますか？
    ○自ら通告をする。
    （*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
    ○上司または同僚に相談してから、通告をする。
    ○上司または同僚に相談し、その後の判断は一任する。
    ○相談も通告もしない。
    ○その他（具体的に記入してください。）

□追記[A-8]：娘は小学生。母親の[A]の言動は一度のみ。

娘は明るく、他人に対して穏やかである。

●質問 15: [A] と [A-8] を併せて考慮し、虐待だと思いますか？
    もしかしたら
    虐待ではない 虐待かもしれない おそらく虐待だ 確実に虐待だ
    ○ ○ ○ ○

●質問 16: [A] と [A-8] を併せて考慮し、状況に対してどのような対応をしますか？
    ○自ら通告をする。
    （*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
    ○上司または同僚に相談してから、通告をする。
    ○上司または同僚に相談し、その後の判断は一任する。
    ○相談も通告もしない。
    ○その他（具体的に記入してください。）

回答漏れが無いか確認し、よろしければ次のページへ進んでください。
■シナリオ[B]: 母親が娘に対し、「こっちに来ないで」、「お母さんに触らないで」と言う。

□追記[B-1]: 娘は幼稚園児。母親の[B]の言動は何度も繰り返されてい る。娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 17: [B] と [B-1] を併せて考慮し、虐待だと思いますか？
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●質問 18: [B] と [B-1] を併せて考慮し、状況に対してどのような対応をしますか？
   ○自ら通告をする。
   （*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
   ○上司または同僚に相談してから、通告をする。
   ○上司または同僚に相談し、その後の判断は一任する。
   ○相談も通告もしない。
   ○その他（具体的に記入してください。）

□追記[B-2]: 娘は幼稚園児。母親の[B]の言動は何度も繰り返されてい る。娘は明るく、他人に対して穏やかである。

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●質問 20: [B] と [B-2] を併せて考慮し、状況に対してどのような対応をしますか？
   ○自ら通告をする。
   （*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
   ○上司または同僚に相談してから、通告をする。
   ○上司または同僚に相談し、その後の判断は一任する。
   ○相談も通告もしない。
   ○その他（具体的に記入してください。）
□追記[B-3]：娘は幼稚園児。母親の[B]の言動は一度のみ。
娘は非常にふさぎ込み、他人に対して攻撃的である。
●質問 21: [B] と [B-3] を併せて考慮し、虐待だと思いますか？

もしかしたら

虐待ではない 虐待かもしれない おそらく虐待だ 確実に虐待だ

○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

□追記[B-4]：娘は幼稚園児。母親の[B]の言動は一度のみ。
娘は明るく、他人に対して穏やかである。

もしかしたら

虐待ではない 虐待かもしれない おそらく虐待だ 確実に虐待だ

●質問 24: [B] と [B-4] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）
□追記[B-5]：娘は小学生。母親の[B]の言動は何度も繰り返されている。娘は非常にふさぎ込み、他人に対して攻撃的である。
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●質問 26: [B] と [B-5] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他 (具体的に記入してください。)

□追記[B-6]：娘は小学生。母親の[B]の言動は何度も繰り返されている。娘は明るく、他人に対して穏やかである。
●質問 27: [B] と [B-6] を併せて考慮し、虐待だと思いますか？
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●質問 28: [B] と [B-6] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他 (具体的に記入してください。)
□ 追記[B-7]：娘は小学生。母親の[B]の言動は一度のみ。
娘は非常にふさぎ込み、他人に対して攻撃的である。

● 質問 29：[B] と [B-7] を併せて考慮し、虐待だと思いますか？
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● 質問 30：[B] と [B-7] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他 (具体的に記入してください。)

□ 追記[B-8]：娘は小学生。母親の[B]の言動は一度のみ。
娘は明るく、他人に対して穏やかである。

● 質問 31：[B] と [B-8] を併せて考慮し、虐待だと思いますか？
　もしかしたら

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● 質問 32：[B] と [B-8] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
　（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他 (具体的に記入してください。)

回答漏れが無いか確認し、よろしければ次のページへ進んでください。
シナリオ[C]：母親が、他の子どもたちから孤立させるために、娘を部屋に閉じ込む。

追記[C-1]：娘は幼稚園児。母親の[C]の行動は何度も繰り返されてい る。娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問33：[C]と[C-1]を併せて考慮し、虐待だと思いますか？

<table>
<thead>
<tr>
<th></th>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>虐待か来ない</th>
<th>確実に虐待</th>
</tr>
</thead>
<tbody>
<tr>
<td>○</td>
<td></td>
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</tr>
</tbody>
</table>

●質問34：[C]と[C-1]を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。
 (*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他 (具体的に記入してください。)

追記[C-2]：娘は幼稚園児。母親の[C]の行動は何度も繰り返されてい る。娘は明るく、他人に対して穏やかである。

●質問35：[C]と[C-2]を併せて考慮し、虐待だと思いますか？

<table>
<thead>
<tr>
<th></th>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>虐待か来ない</th>
<th>確実に虐待</th>
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<td>○</td>
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</tbody>
</table>

●質問36：[C]と[C-2]を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。
 (*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他 (具体的に記入してください。)
追記[C-3]：娘は幼稚園児。母親の[C]の行動は一度のみ。
娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 37: [C] と [C-3] を併せて考慮し、虐待だと思いますか?

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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<tbody>
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<td>○</td>
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</tbody>
</table>

●質問 38: [C] と [C-3] を併せて考慮し、状況に対してどのような対応をしますか?

○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

追記[C-4]：娘は幼稚園児。母親の[C]の行動は一度のみ。
娘は明るく、他人に対して穏やかである。

●質問 39: [C] と [C-4] を併せて考慮し、虐待だと思いますか?

<table>
<thead>
<tr>
<th>虐待ではない</th>
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<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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</tbody>
</table>

●質問 40: [C] と [C-4] を併せて考慮し、状況に対してどのような対応をしますか?

○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）
追記[C-5]：娘は小学生。母親の[C] の行動は何度も繰り返されてい
る。娘は非常にふさぎ込み、他人に対して攻撃的である。
●質問 41: [C] と [C-5] を併せて考慮し、虐待だと思いますか？
もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
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</tr>
</tbody>
</table>

●質問 42: [C] と [C-5] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他 (具体的に記入してください。)

追記[C-6]：娘は小学生。母親の[C] の行動は何度も繰り返されてい
る。娘は明るく、他人に対して穏やかである。
●質問 43: [C] と [C-6] を併せて考慮し、虐待だと思いますか？
もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
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<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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</tr>
</tbody>
</table>

●質問 44: [C] と [C-6] を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他 (具体的に記入してください。)
□追記[C-7]：娘は小学生。母親の[C]行動は一度のみ。

娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 45: [C]と[C-7]を併せて考慮し、虐待だと思いますか？
もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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</tbody>
</table>

●質問 46: [C]と[C-7]を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談して通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

□追記[C-8]：娘は小学生。母親の[C]の行動は一度のみ。

娘は明るく、他人に対して穏やかである。

●質問 47: [C]と[C-8]を併せて考慮し、虐待だと思いますか？
もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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<td>○</td>
</tr>
</tbody>
</table>

●質問 48: [C]と[C-8]を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
（*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。）
○上司または同僚に相談して通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

回答漏れが無いか確認し、よろしければ次のページへ進んでください。
■シナリオ[D]: 母親は、娘が話しかけたり甘えたりするのを完全に無視し、愛情表現をしない。

□追記[D-1]: 娘は幼稚園児。母親の[D]の行動は何度も繰り返されている。娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 49: [D]と[D-1]を併せて考慮し、虐待だと思いますか？

もしかしたら

虐待ではない ○ 虐待かもしれない ○ おそらく虐待だ ○ 確実に虐待だ ○

●質問 50: [D]と[D-1]を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。

(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他（具体的に記入してください。）

□追記[D-2]: 娘は幼稚園児。母親の[D]の行動は何度も繰り返されている。娘は明るく、他人に対して穏やかである。

●質問 51: [D]と[D-2]を併せて考慮し、虐待だと思いますか？

もしかしたら

虐待ではない ○ 虐待かもしれない ○ おそらく虐待だ ○ 確実に虐待だ ○

●質問 52: [D]と[D-2]を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。

(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他（具体的に記入してください。）
追記[D-3]：娘は幼稚園児。母親の[D]の行動は一度のみ。
娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 53: [D] と [D-3] を併せて考慮し、虐待だと思いますか？

もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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<tbody>
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</tr>
</tbody>
</table>

●質問 54: [D] と [D-3] を併せて考慮し、状況に対してどのような対応をしますか?

○自ら通告をする。

(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他 (具体的に記入してください。)

追記[D-4]：娘は幼稚園児。母親の[D]の行動は一度のみ。
娘は明るく、他人に対して穏やかである。

●質問 55: [D] と [D-4] を併せて考慮し、虐待だと思いますか？

もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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</tbody>
</table>

●質問 56: [D] と [D-4] を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。

(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他 (具体的に記入してください。)
□追記[D-5]：娘は小学生。母親の[D]の行動は何度も繰り返されてい る。娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 57: [D]と[D-5]を併せて考慮し、虐待だと思いますか？

もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
<th>おそらく虐待だ</th>
<th>確実に虐待だ</th>
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</tr>
</tbody>
</table>

●質問 58: [D]と[D-5]を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。

>(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他 (具体的に記入してください。)

□追記[D-6]：娘は小学生。母親の[D]の行動は何度も繰り返されてい る。娘は明るく、他人に対して穏やかである。

●質問 59: [D]と[D-6]を併せて考慮し、虐待だと思いますか？

もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
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<th>確実に虐待だ</th>
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</tr>
</tbody>
</table>

●質問 60: [D]と[D-6]を併せて考慮し、状況に対してどのような対応をしますか？

○自ら通告をする。

>(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)

○上司または同僚に相談してから、通告をする。

○上司または同僚に相談し、その後の判断は一任する。

○相談も通告もしない。

○その他 (具体的に記入してください。)

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追記[D-7]：娘は小学生。母親の[D]の行動は一度のみ。
娘は非常にふさぎ込み、他人に対して攻撃的である。

●質問 61: [D]と[D-7]を併せて考慮し、虐待だと思いますか？
もしかしたら

<table>
<thead>
<tr>
<th>虐待ではない</th>
<th>虐待かもしれない</th>
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<th>確実に虐待</th>
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</tr>
</tbody>
</table>

●質問 62: [D]と[D-7]を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

追記[D-8]：娘は小学生。母親の[D]の行動は一度のみ。
娘は明るく、他人に対して穏やかである。

●質問 63: [D]と[D-8]を併せて考慮し、虐待だと思いますか？
もしかしたら

<table>
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<th>虐待ではない</th>
<th>虐待かもしれない</th>
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<th>確実に虐待</th>
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</tbody>
</table>

●質問 64: [D]と[D-8]を併せて考慮し、状況に対してどのような対応をしますか？
○自ら通告をする。
(*通告先は、児童相談所、市区町村の窓口、福祉事務所や警察を含む。)
○上司または同僚に相談してから、通告をする。
○上司または同僚に相談し、その後の判断は一任する。
○相談も通告もしない。
○その他（具体的に記入してください。）

回答漏れが無いか確認し、よろしければ次のページへ進んでください。
次のページからは、あなたご自身やご自身の経験に関する質問がされます。
準備がよろしければ、「次へ」を押して回答を始めてください。

<table>
<thead>
<tr>
<th>S1. あなたの性別を教えてください。</th>
</tr>
</thead>
<tbody>
<tr>
<td>○男性</td>
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<tr>
<td>○女性</td>
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</tbody>
</table>

<table>
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<tr>
<th>S2. あなたの年齢はどれに該当しますか？</th>
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<td>○50〜59歳</td>
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<tr>
<td>○60〜69歳</td>
</tr>
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<td>○70〜79歳</td>
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<tr>
<td>○80 歳以上</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>S3. あなたのお子さまの有無を教えて下さい。</th>
</tr>
</thead>
<tbody>
<tr>
<td>○子どもあり</td>
</tr>
<tr>
<td>○子どもなし</td>
</tr>
</tbody>
</table>

* S4. あなたの現在の職業はどれに該当しますか？
| ○小学校教員 |
| ○社会福祉士 (児童福祉施設) |
| ○看護師 (児童福祉施設) |
| ○看護師 (病院-小児系) |
| ○小児科医 (児童福祉施設) |
| ○小児科医 (病院) |
| ○保育士 (児童福祉施設) |
| ○心理職 (学校) |
| ○心理職 (児童福祉施設) |
| ○心理職 (病院) |
| ○心理職 (個人開業) |
| ○心理職 (警察) |
精神科医（児童青年精神科）
○警察官 (生活安全部門)
○警察官 (地域部門)
○警察官 (刑事部門)
○警察官 (交通部門)
○警察官 (その他の部門)
○その他（具体的に、職種と専門分野又は所属機関の種類を記入してください）

S5. 現在の職業には、何年程従事されていますか？
○1年未満
○1-5年
○6-10年
○11-15年
○16-20年
○20年以上

S6. 現在の勤務地に該当するものを選択して下さい。
○下のいずれかの都道府県
東京都、埼玉県、千葉県、神奈川県、茨城県、栃木県、群馬県、栃木県
○愛知県、岐阜県、三重県
大阪府、京都府、兵庫県、滋賀県、奈良県、和歌山県
○その他の都道府県

S7. 児童虐待を疑った際、職務上の義務としてすべきことは何かありますか？
○特にすべきことはない。
○何かしなければならない気がするが、それが具体的に何であるかは思いつかない。
○すべき責務がある。 (具体的に記入してください)

S8. 勤務中に児童虐待を疑った場合、速やかに対応する自信がありますか？
○自信がある
○自信がない

S8. 職務の一環として、児童虐待について学ぶための講習や学会等に参加したこと
○自信がある
○自信がない

S8. 職務の一環として、児童虐待について学ぶための講習や学会等に参加したこと
○全くない
○一度だけある
○複数回あるが、定期的ではない
<table>
<thead>
<tr>
<th>問題</th>
<th>内容</th>
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</thead>
<tbody>
<tr>
<td>S8-A.</td>
<td>あなたが参加した児童虐待に関する講習や学会等はどのようなものでしたか。 (該当するものを全て選択してください。)</td>
</tr>
<tr>
<td>○児童虐待に関する講義聴講やセミナーへの参加</td>
<td></td>
</tr>
<tr>
<td>○児童虐待に関する学会参加</td>
<td></td>
</tr>
<tr>
<td>○その他 (具体的に)</td>
<td></td>
</tr>
<tr>
<td>S9.</td>
<td>勤務中、児童虐待を疑ったことはありますか？</td>
</tr>
<tr>
<td>○ある</td>
<td></td>
</tr>
<tr>
<td>○ない</td>
<td></td>
</tr>
<tr>
<td>S9-A.</td>
<td>勤務中、どのくらいの頻度で虐待を疑うことがありますか？</td>
</tr>
<tr>
<td>○いつも</td>
<td></td>
</tr>
<tr>
<td>○頻繁に</td>
<td></td>
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<tr>
<td>○時々</td>
<td></td>
</tr>
<tr>
<td>○滅多にない</td>
<td></td>
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<tr>
<td>S9-B.</td>
<td>あなたが遭遇した虐待と思われる状況に関し、どのように変わりましたか？ (該当するものを全て選択してください。)</td>
</tr>
<tr>
<td>○特に変わりはなかった</td>
<td></td>
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<tr>
<td>○通告した</td>
<td></td>
</tr>
<tr>
<td>○その他 (具体的に記入してください)</td>
<td></td>
</tr>
<tr>
<td>S9-C.</td>
<td>勤務中に遭遇した、児童虐待と思われた状況は、どの種類に当てはまると思 いますか？ (該当するものを全て選択してください。)</td>
</tr>
<tr>
<td>○身体的虐待</td>
<td></td>
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<tr>
<td>○性的虐待</td>
<td></td>
</tr>
<tr>
<td>○心理的虐待</td>
<td></td>
</tr>
<tr>
<td>○ネグレクト</td>
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</tbody>
</table>
アンケートに関するご感想や、心理的虐待に関するご意見等がございましたら、ご記入ください。

◆必要があれば、前に戻って回答漏れが無いかを確認してください。
◆準備がよろしければ、下にある「完了」ボタンを押してアンケートを提出してください。
以上でアンケートは終了です。

お忙しい中、貴重なお時間を本調査へ割いていただき、誠にありがとうございました。
Online survey - English translation

Participant information sheet
This research project was approved by the UCL Institute of Education, University College London Research Ethics Committee.

1. Title of project:
Research on professionals’ perceptions on psychological/emotional abuse in Japan.

2. The purpose of this study
This research aims to understand how professionals, who might identify and deal with child abuse and neglect, consider psychological/emotional abuse.

3. Study participants
This study invites people who are currently working as one of the professionals in the area of education, welfare, health or legal enforcement.

4. Study participation
It is not compulsory to take part in the study. You are able to withdraw from the study anytime you want to without stating the reason. You may obtain more information from the researcher in order to make your decision about the participation.

5. Summary of the research
This is an anonymous online survey amongst professionals. This will take approximately 15-20 minutes to complete.

6. Privacy and confidentiality
The survey is collected anonymously using SSL encryption. All information will be stored securely, and only the principal investigator has access to the data.

7. Possible benefits of taking part in this study
This study will not have direct benefits for the study participants. However, it will help us to further understand existing issue of child protection and potentially contribute the society to improve the child protection system.

8. Possible risks of taking part in this study
The research is designed in order to minimise the potential risk of discomforts of participants by using hypothetical cases (i.e. vignettes) instead of actual cases of child abuse and neglect.

9. Dissemination
The study will be written up as part of the doctoral thesis. All participants are able to request a summary of the research findings.

If you have any questions or concerns at any time of the study, you may contact the principal investigator (contact details below).

[My name and email address]

[Department address]
Participant consent form

Title of the project: Research on professionals’ perceptions on psychological abuse in Japan

Declaration
I confirm that:

- I have read and understood the participant information sheet (provided in previous page).
- I understand that the study has been reviewed and approved by the UCL Institute of Education, University College London Research Ethics Committee.
- I understand that the participation of the study is completely voluntarily.
- I understand that no one identify my participation and responses in the study.
- I understand that the study will be a part of the doctoral thesis.
- I have been given the opportunity to ask questions regarding the study or my participation.

Please select one of the buttons below.

☐ Agree  ☐ Not agree

[Here is a page break]
Thank you very much for taking part in this study.

- From the next page, you will see questionnaires based on hypothetical situations (scenarios) which illustrate daily communication between a parent and a child.
- There are scenarios from [A] to [D] and each of them is followed by additional details. I would like you to answer the questions based on scenarios and additional details altogether. In doing so, please pay attention to the details of the additional details as they look similar but different.
- Scenarios are hypothetical cases. However, please imagine that they are real events.
- There is no right or wrong answer. Please do not discuss with others or search while you answer the questions. It is very important that you answer the questions honestly based on your own opinions.
- Please do not share the contents of this survey with others (including sharing Internet).

If you are ready, please press “Next” and start answering questions.
Situation [A]: The mother tells her daughter: “You are stupid” and “You are useless”.

Additional information [A-1]: The daughter is at kindergarten. The behaviour of mother [A] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q1. Take into [A] and [A-1] consideration together, do you think the situation is abuse?

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Q2. Take into [A] and [A-1] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [A-2]: The daughter is at kindergarten. The behaviour of mother [A] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q3. Take into [A] and [A-2] consideration together, do you think the situation is abuse?

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Q4. Take into [A] and [A-2] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [A-3]: The daughter is at kindergarten. The behaviour of mother [A] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q5. Take into [A] and [A-3] consideration together, to what extent the situation do you think is abusive?

Not abuse  Can be abuse  Probably abuse  Definitely abuse

Q6. Take into [A] and [A-3] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [A-4]: The daughter is at kindergarten. The behaviour of mother [A] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q7. Take into [A] and [A-4] consideration together, do you think the situation is abuse?

Not abuse  Can be abuse  Probably abuse  Definitely abuse

Q8. Take into [A] and [A-4] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [A-5]: The daughter is an elementary school student. The behaviour of mother [A] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q9. Take into [A] and [A-5] consideration together, do you think the situation is abuse?

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Q10. Take into [A] and [A-5] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [A-6]: The daughter is an elementary school student. The behaviour of mother [A] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q11. Take into [A] and [A-6] consideration together, do you think the situation is abuse?

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Q12. Take into [A] and [A-6] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [A-7]: The daughter is an elementary school student. The behaviour of mother [A] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q13. Take into [A] and [A-7] consideration together, do you think the situation is abuse?

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Q14. Take into [A] and [A-7] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [A-8]: The daughter is an elementary school student. The behaviour of mother [A] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q15. Take into [A] and [A-8] consideration together, do you think the situation is abuse?

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Q16. Take into [A] and [A-8] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Situation [B]: The mother tells her daughter: “Do not come close to me” and “Do not touch me”.

Additional information [B-1]: The daughter is at kindergarten. The behaviour of mother [B] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q17. Take into [B] and [B-1] consideration together, do you think the situation is abuse?

<table>
<thead>
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<th>Definitely abuse</th>
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Q18. Take into [B] and [B-1] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [B-2]: The daughter is at kindergarten. The behaviour of mother [B] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q19. Take into [B] and [B-2] consideration together, do you think the situation is abuse?

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<thead>
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<th>Not abuse</th>
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Q20. Take into [B] and [B-2] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [B-3]: The daughter is at kindergarten. The behaviour of mother [B] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q21. Take into [B] and [B-3] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
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Q22. Take into [B] and [B-3] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [B-4]: The daughter is at kindergarten. The behaviour of mother [B] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q23. Take into [B] and [B-4] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
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Q24. Take into [B] and [B-4] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [B-5]: The daughter is an elementary school student. The behaviour of mother [B] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q25. Take into [B] and [B-5] consideration together, do you think the situation is abuse?

Not abuse Can be abuse Probably abuse Definitely abuse

○ ○ ○ ○

Q26. Take into [B] and [B-5] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [B-6]: The daughter is an elementary school student. The behaviour of mother [B] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q27. Take into [B] and [B-6] consideration together, do you think the situation is abuse?

Not abuse Can be abuse Probably abuse Definitely abuse

○ ○ ○ ○

Q28. Take into [B] and [B-6] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [B-7]: The daughter is an elementary school student. The behaviour of mother [B] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q29. Take into [B] and [B-7] consideration together, do you think the situation is abuse?

- [ ] Not abuse
- [ ] Can be abuse
- [ ] Probably abuse
- [ ] Definitely abuse

Q30. Take into [B] and [B-7] consideration together, what would you do?
- [ ] I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
- [ ] I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
- [ ] I would consult with my colleague or boss and leave the subsequent decision to them.
- [ ] I would neither consult nor report.
- [ ] Others (please provide the details.)

Additional information [B-8]: The daughter is an elementary school student. The behaviour of mother [B] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q31. Take into [B] and [B-8] consideration together, do you think the situation is abuse?

- [ ] Not abuse
- [ ] Can be abuse
- [ ] Probably abuse
- [ ] Definitely abuse

Q32. Take into [B] and [B-8] consideration together, what would you do?
- [ ] I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
- [ ] I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
- [ ] I would consult with my colleague or boss and leave the subsequent decision to them.
- [ ] I would neither consult nor report.
- [ ] Others (please provide the details.)

[Here is a page break]
**Situation [C]** The mother confines her daughter to a room in order to prevent her to play with other children.

□ Additional information [C-1]: The daughter is at kindergarten. The behaviour of mother [C] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q33. Take into [C] and [C-1] consideration together, do you think the situation is abuse?

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Q34. Take into [C] and [C-1] consideration together, what would you do?

- I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
- I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
- I would consult with my colleague or boss and leave the subsequent decision to them.
- I would neither consult nor report.
- Others (please provide the details.)

□ Additional information [C-2]: The daughter is at kindergarten. The behaviour of mother [C] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q25. Take into [C] and [C-2] consideration together, do you think the situation is abuse?

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</table>

Q36. Take into [C] and [C-2] consideration together, what would you do?

- I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
- I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
- I would consult with my colleague or boss and leave the subsequent decision to them.
- I would neither consult nor report.
- Others (please provide the details.)
Additional information [C-3] The daughter is at kindergarten. The behaviour of mother [C] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q37. Take into [C] and [C-3] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
<th>Can be abuse</th>
<th>Probably abuse</th>
<th>Definitely abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td>○</td>
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</table>

Q38. Take into [C] and [C-3] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [C-4] The daughter is at kindergarten. The behaviour of mother [C] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q39. Take into [C] and [C-4] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
<th>Can be abuse</th>
<th>Probably abuse</th>
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<td>○</td>
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</tbody>
</table>

Q40. Take into [C] and [C-4] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [C-5] The daughter is an elementary school student. The behaviour of mother [C] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q41. Take into [C] and [C-5] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
<th>Can be abuse</th>
<th>Probably abuse</th>
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<tbody>
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</table>

Q42. Take into [C] and [C-5] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [C-6]: The daughter is an elementary school student. The behaviour of mother [C] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q43. Take into [C] and [C-6] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
<th>Can be abuse</th>
<th>Probably abuse</th>
<th>Definitely abuse</th>
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</table>

Q44. Take into [C] and [C-6] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [C-7]: The daughter is an elementary school student. The behaviour of mother [C] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q45. Take into [C] and [C-7] consideration together, do you think the situation is abuse?

Not abuse Can be abuse Probably abuse Definitely abuse

○ ○ ○ ○

Q46. Take into [C] and [C-7] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [C-8]: The daughter is an elementary school student. The behaviour of mother [C] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q47. Take into [C] and [C-8] consideration together, do you think the situation is abuse?

Not abuse Can be abuse Probably abuse Definitely abuse

○ ○ ○ ○

Q48. Take into [C] and [C-8] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Situation [D] The mother completely ignores when her daughter tries to talk or get their attention. The mother does not show affection to the daughter.

Additional information [D-1]: The daughter is at kindergarten. The behaviour of mother [D] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q49. Take into [D] and [D-1] consideration together, do you think the situation is abuse?
   - Not abuse
   - Can be abuse
   - Probably abuse
   - Definitely abuse

Q50. Take into [D] and [D-1] consideration together, what would you do?
   - I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
   - I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
   - I would consult with my colleague or boss and leave the subsequent decision to them.
   - I would neither consult nor report.
   - Others (please provide the details.)

Additional information [D-2]: The daughter is at kindergarten. The behaviour of mother [D] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q51. Take into [D] and [D-2] consideration together, do you think the situation is abuse?
   - Not abuse
   - Can be abuse
   - Probably abuse
   - Definitely abuse

Q52. Take into [D] and [D-2] consideration together, what would you do?
   - I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
   - I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
   - I would consult with my colleague or boss and leave the subsequent decision to them.
   - I would neither consult nor report.
   - Others (please provide the details.)
Additional information [D-3]: The daughter is at kindergarten. The behaviour of mother [D] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q53. Take into [D] and [D-3] consideration together, do you think the situation is abuse?

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<tr>
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</table>

Q54. Take into [D] and [D-3] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [D-4]: The daughter is at kindergarten. The behaviour of mother [D] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q55. Take into [D] and [D-4] consideration together, do you think the situation is abuse?

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<thead>
<tr>
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</table>

Q56. Take into [D] and [D-4] consideration together, what would you do?

○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
Additional information [D-5]: The daughter is an elementary school student. The behaviour of mother [D] is repeated many times. The daughter seems depressed and has aggressive behaviour towards others.

Q57. Take into [D] and [D-5] consideration together, do you think the situation is abuse?

<table>
<thead>
<tr>
<th>Not abuse</th>
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<td>○</td>
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</tbody>
</table>

Q58. Take into [D] and [D-5] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

Additional information [D-6]: The daughter is an elementary school student. The behaviour of mother [D] is repeated many times. The daughter seems cheerful and has calm behaviour towards others.

Q59. Take into [D] and [D-6] consideration together, do you think the situation is abuse?

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<th>Definitely abuse</th>
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</table>

Q60. Take into [D] and [D-6] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)
□ Additional information [D-7]: The daughter is an elementary school student. The behaviour of mother [D] happened only once. The daughter seems depressed and has aggressive behaviour towards others.

Q61. Take into [D] and [D-7] consideration together, do you think the situation is abuse?

Not abuse   Can be abuse   Probably abuse   Definitely abuse

○   ○   ○   ○

Q62. Take into [D] and [D-7] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

□ Additional information [D-8]: The daughter is an elementary school student. The behaviour of mother [D] happened only once. The daughter seems cheerful and has calm behaviour towards others.

Q63. Take into [D] and [D-8] consideration together, do you think the situation is abuse?

Not abuse   Can be abuse   Probably abuse   Definitely abuse

○   ○   ○   ○

Q64. Take into [D] and [D-8] consideration together, what would you do?
○ I would report to an appropriate authority. (For example, Child Guidance Centre, municipal offices, welfare offices, or police.)
○ I would consult with my colleague or boss and encourage them to report the situation to an appropriate authority.
○ I would consult with my colleague or boss and leave the subsequent decision to them.
○ I would neither consult nor report.
○ Others (please provide the details.)

[Here is a page break]
From the next page, you are asked about yourself or your experience.

If you are ready, please start by pressing “Next”.

<table>
<thead>
<tr>
<th><strong>S1.</strong> What is your gender?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ male</td>
</tr>
<tr>
<td>□ female</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>S2.</strong> Which age group do you belong to?</th>
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</thead>
<tbody>
<tr>
<td>□ 20 or under</td>
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<tr>
<td>□ 21-29</td>
</tr>
<tr>
<td>□ 30-29</td>
</tr>
<tr>
<td>□ 40-49</td>
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<tr>
<td>□ 50-59</td>
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<tr>
<td>□ 60-69</td>
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<tr>
<td>□ 70-79</td>
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<tr>
<td>□ 80 or above</td>
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<tr>
<th><strong>S3.</strong> Do you have any children?</th>
</tr>
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<tbody>
<tr>
<td>□ yes</td>
</tr>
<tr>
<td>□ no</td>
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<table>
<thead>
<tr>
<th><strong>S4.</strong> What is your current occupation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Elementary school teacher</td>
</tr>
<tr>
<td>□ Social worker (child welfare institution)</td>
</tr>
<tr>
<td>□ Nurse (child welfare institution)</td>
</tr>
<tr>
<td>□ Nurse (hospital)</td>
</tr>
<tr>
<td>□ Paediatrician (child welfare institution)</td>
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<tr>
<td>□ Paediatrician (hospital)</td>
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<td>□ Child care worker (child welfare institution)</td>
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<td>□ Psychologist (school)</td>
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<td>□ Psychologist (child welfare institution)</td>
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<td>□ Psychologist (hospital)</td>
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<td>□ Psychologist (clinic)</td>
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<td>□ Psychologist (police)</td>
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<tr>
<td>□ Psychiatrist (division of child and adolescent psychiatry)</td>
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<td>□ Police officer (community safety section)</td>
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<td>□ Police officer (community section)</td>
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<td>□ Police officer (criminal section)</td>
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<tr>
<td>□ Police officer (traffic section)</td>
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<tr>
<td>□ Police officer (others)</td>
</tr>
<tr>
<td>□ Others (please provide details)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>S5.</strong> How long have you been in your current occupation?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ less than a year</td>
</tr>
<tr>
<td>□ 1-5 years</td>
</tr>
<tr>
<td>□ 6-10 years</td>
</tr>
<tr>
<td>□ 11-15 years</td>
</tr>
<tr>
<td>□ 16-20 years</td>
</tr>
<tr>
<td>□ more than 20 years</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>S6.</strong> Where is your current work place?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Prefectures including Tokyo, Saitama, Chiba, Kanagawa, Ibaraki, Tochigi, Gunma, Yamanashi, Aichi, Gifu, Mie, Osaka, Kyoto, Hyōgo, Shiga, Nara, or Wakayama</td>
</tr>
<tr>
<td>□ others</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>S7.</strong> When you suspect child abuse and neglect, do you have any professional responsibility in doing something?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ I do not have any responsibility.</td>
</tr>
</tbody>
</table>
☐ I feel I have something to do but I do not what it is.
☐ I have a responsibility (please provide details)

S8. Are you confident in responding when you suspect child abuse and neglect?
☐ Yes, I am confident.
☐ No, I am not confident.

S8. Have you ever taken part in lecture or conference to study child abuse and neglect as part of your profession role?
☐ never
☐ once
☐ multiple times but not regularly
☐ regularly
☐ other (please provide details)

S8-A. What kind of lecture or conference on child abuse and neglect did you participate? (please select all)
☐ Lecture or seminar on child abuse and neglect
☐ Conference on child abuse and neglect
☐ Others (please provide details)

S9. Have you ever suspected child abuse and neglect during your professional role?
☐ yes ☐ no

S9-A. How often have do you suspected child abuse and neglect?
☐ always ☐ often ☐ sometimes ☐ rarely

S9-B. How were you involved in a case in which you suspected child abuse and neglect? (you may choose more than one)
☐ I was not involved in a case.
☐ I reported a case.
☐ other (please provide details)

S9-C. Which forms of child abuse and neglect do you think you came across in your profession role?
☐ physical abuse ☐ sexual abuse ☐ psychological/emotional abuse ☐ neglect

If you have any feedback or query about this survey, please write in a box below.

◆ If necessary, please return and check your answers.
◆ If you are ready to submit, please press “submit” below.

Thank you very much for taking part into this survey.