Arsht Research on Ethics and Community Grant

How do personal values, culture, and perceptions of alleged perpetrators and victim children bias child protection professionals' decisions about distinguishing between corporal punishment and physical abuse?

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Abstract

Numerous studies have examined the effects of mandated reporters’ (e.g., race, gender, age, beliefs about corporal punishment), alleged perpetrators’ (e.g., race, immigration status, SES, parental intent), and alleged victim children’s (e.g., gender, age) personal characteristics on the rate of reporting suspicions of child abuse (e.g., Ashton, 2004; Dukes & Kean, 1989; Herzberger & Tennen, 1988; Zellman, 1992). However, no studies to date have examined how these characteristics impact findings of physical abuse by child protection professionals (e.g., forensic interviewers, medical evaluators, and psychologists) who specialize in assessing allegations of child maltreatment. That is, child protection professionals’ personal biases and perceptions may impact whether they perceive inflicted injuries on a child as physical punishment or physical abuse. Personal biases within a child protection assessment setting can result in several adverse effects on families’ lives (e.g., the prosecution of the alleged perpetrator, failure to protect children from harm, the recommendation of unneeded services, and/or unnecessary placement of children in alternative care) and need to be minimized to ensure that families receive objective impartial assessments (Florida Department of Health, 2002).

The proposed study aims to gain a better understanding of child protection professionals’ biases through examining the Department of Health Children’s Medical Services Child Protection Team (CPT). CPT is a medically directed, multidisciplinary statewide program (23 sites) that was developed to enhance the child protective assessment activities in complex cases of child abuse and neglect. Specifically, child protection teams provide expertise in evaluating alleged child maltreatment, assessing risk and protective factors, and providing recommendations for interventions to protect children and enhance their caregiver’s capacity to provide a safer environment when possible (Children’s Medical Services, 2004). All CPT personnel (N ≈ 450) in Florida who take part in physical abuse assessment activities will be invited to participate in the proposed study. By conducting this study, CPT will better understand child protection professionals' personal biases and develop state level training protocols intended to reduce potential biases. Reduction in biases will allow child protection professions to make more objective and consistent decisions when conducting assessments.