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NEIGHBORHOOD VIEWS ON THE DEFINITION AND ETIOLOGY OF CHILD MALTREATMENT

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ABSTRACT

Objective: The purpose of this study, as part of a larger study on neighborhoods and child maltreatment, was to determine how parents residing in neighborhoods with differing profiles of risk for child maltreatment reports defined child abuse and neglect and viewed its etiology.

Method: Parents ($n = 400$) were systematically selected from neighborhoods ($n = 20$) with different profiles of risk for child maltreatment report rates. As part of a larger interview, parents were asked to generate lists of behaviors that they would define as child abuse and neglect and to rate 13 etiological factors on a 10 point scale as to their contribution to the occurrence of child maltreatment.

Results: While there were differences in definitional emphases, with African-American parents including behaviors of neglect and European-American parents including behaviors of physical abuse, there was marked congruence on the catalogue of behaviors that parents would define as child abuse and neglect. Four factors were identified that explained almost two-thirds of the variance in parents' etiological explanations: poverty and family disruption, substance abuse and stress; lack of moral and family values; and individual pathology. These factors were related to neighborhood conditions, individual perceptions of neighborhood and individual characteristics.

Conclusions: Community-based programs aimed at preventing or ameliorating child maltreatment must have at their very core an understanding of how populations being served define child maltreatment and why they believe that it occurs.
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Key Words—Child maltreatment, Neighborhood, Ethnicity.

INTRODUCTION

THE IMPORTANCE OF neighborhood context in child maltreatment has been reflected in suggestions for the reformulation of child protection policy and practice to the neighborhood level

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(e.g., Barry, 1994; Melton & Barry, 1994; U.S. Advisory Board on Child Abuse and Neglect, 1993). The prevailing wisdom behind neighborhood-based initiatives is that populations will be better understood and thus better served if child protection is in closer proximity than has traditionally been the case. Neighborhood-based child protection has also been conceived as an avenue towards enhanced cultural competence. Nevertheless, the precise processes and mechanisms by which neighborhoods and child maltreatment are related remain somewhat elusive.

One question in considering neighborhood-based child protection has been how neighborhood residents view child maltreatment, and whether there is a lack of congruence with professional views that interferes with prevention and intervention strategies. Congruence between the agency and the community is thought to enhance child protection. While substantial research attention has been directed towards how definitions of child maltreatment may vary across populations and professional groups (Dubowitz, Black, Starr, & Zuravin, 1993; Dubowitz, Klockner, Starr, & Black, 1998; Giovannoni & Becerra, 1979; Hong & Hong, 1991; Ima & Hohm, 1991; Korbin, 1981, 1997; National Research Council, 1993; O'Toole, Turbett, & Nalepka, 1983; Portwood, 1999; Sternberg & Lamb, 1991), scant attention has been directed towards how different populations view the etiology of child maltreatment. As part of a larger study on the impact of neighborhood conditions on child maltreatment (Coulton, Korbin, & Su, 1999; Korbin & Coulton, 1999), we sought the views of neighborhood residents about behaviors and acts that they consider child abuse and neglect and about factors that they believe contribute to its occurrence.

BACKGROUND

The National Research Council's (1993) review of research in child maltreatment set a priority on an ecological developmental model. One important, but poorly understood, ecological level is the neighborhood in which families and children reside (Coulton et al., 1999; Korbin & Coulton, 1999). The National Research Council's review (1993) also pointed to definitional issues as a major unresolved problem in child maltreatment research. In this current paper, we are interested in how neighborhood and individual factors contribute to definitions and causal beliefs about child maltreatment.

Definitional issues have been a major stumbling block in research on child maltreatment. As with all research topics, research in child maltreatment hinges on how the problem has been defined. Questions about the distribution of child maltreatment across populations often have focused on how diverse populations might differentially define child maltreatment. This has been a particular concern in research on cultural competence in child protection (e.g., Korbin, 1997; National Research Council, 1993).

A review of the literature on differences in definitions of child maltreatment suggests that there have been three basic approaches to this issue. First, theoretical constructions have been formulated based on ethnographic descriptions of child rearing practices and deviation from those practices and on international accounts of child maltreatment (Finkelhor & Korbin, 1988; Garbarino & Ebata, 1983; Korbin, 1981, 1997; Korbin & Spilsbury, 1999). Second, studies with specific cultural/ethnic groups have sought to identify the diversity of conceptions of abuse and outline the parameters for cultural misunderstanding of culturally appropriate practices (e.g., Gray & Cosgrove, 1985). And third, studies employing vignettes have sought to systematically study cultural, socioeconomic, and professional definitions and perceptions of the seriousness of hypothetical incidents (Ahn, 1994; Ahn & Gilbert, 1992; Dubowitz et al., 1998; Giovannoni & Becerra, 1979; Hong & Hong, 1991; Ima & Hohm, 1991; O'Toole et al., 1983; Polansky, Ammons, & Weathersby, 1983; Polansky & Williams, 1978; Polansky, Chalmers, Bittenwieser, & Williams, 1981; Rose & Meezan, 1995, 1996). Table 1 summarizes the results of selected vignette studies that have examined differences in definition of child maltreatment by cultural, ethnic, or socioeconomic group.

All three approaches have strengths and weaknesses. In the first two literatures, definitions are often anecdotal or based on small, nonrepresentative samples. Theoretical models for definitions have been suggested in these literatures, but have not been subjected to empirical verification. However, these literatures have underlined the importance of considering cultural meanings and definitions in child maltreatment. The third approach, vignette studies, are methodologically rigorous, but do not necessarily reflect real-world responses (Garbarino & Ebata, 1983). Vignette studies, however, have suggested cultural differences in child rearing beliefs and values that may impact on definitions of child maltreatment (e.g., Hong & Hong, 1991; Ima & Hohm, 1991). Vignette studies also have countered a misconception based on the disproportionate representation of people of color in child welfare caseloads. Vignette studies have generally indicated that while there may be diversity in definition of specific incident types, people of color do not regard child maltreatment more tolerantly than the middle-class European-American population that has directed the course of child protective services. Some recent literature has suggested that there is substantial and growing consensus in both professional and lay definitions of child maltreatment (Dubowitz et al., 1998; Portwood, 1999).

While there has been an effort to obtain lay definitions of child maltreatment, lay conceptualizations about the etiology of child maltreatment have been virtually ignored. The etiology of child maltreatment is exceedingly complex (National Research Council, 1993). In early work on child maltreatment, Gil (1970) pointed to the public conception that almost anyone could abuse a child. Nelson's (1984) social policy analysis of the federal child abuse legislation pointed to efforts to draw attention away from poverty as an explanation for child abuse, thereby increasing its appeal as an issue to Congress and the public. The National Committee for Prevention of Child Abuse and Neglect (currently Prevent Child Abuse America) has undertaken years of public service announcements, some of which suggest that the abused children of yesterday are the abusive parents of today. Yet, we know little about how the populations to be served by child protection agencies view the causation of child maltreatment.

METHODS

The sample for this study consisted of 400 residents of 20 census tracts in Cleveland, Ohio. A two-stage sampling strategy was employed with neighborhood units selected first and respondents then selected from within those neighborhoods. In order to assure an adequate range on the structural characteristics that our previous research (Coulton, Korbin, Su, & Chow, 1995) had shown to be highly correlated with child maltreatment rates, a stratified sample of neighborhoods was drawn. All residential census tracts in the City of Cleveland ($n = 196$) were stratified on three factors measured with US census variables: impoverishment, child care burden and whether they were predominantly African-American, predominantly European-American, or of mixed ethnicity. The three factors were dichotomized at their means to create strata (for a complete description of the sampling methodology, see Coulton and colleagues (1999) or Korbin and Coulton (1999)). Twenty census tracts were randomly selected for the study representing each stratum. A census-defined block group was randomly selected from each census tract as the neighborhood unit. A several square block area is often considered a reasonable approximation for a neighborhood where families and children are concerned, although research suggests that neighbors may not agree on neighborhood boundaries, even within small areas (Coulton et al., 1997; Elliott & Huizinga, 1990).

Twenty respondents then were selected from each block group. All addresses in each block group were listed from computer-generated map files and verified in person by our research team. Streets within each block group were then randomly ordered and an address randomly chosen on each street. Interviewers began at the randomly selected address and contacted every third household, which was the interval determined necessary to obtain the requisite 20 households with

Table 1. Selected Vignette Studies on Definitions of Child Maltreatment Among Diverse Populations

Reference	Sample/Population	Method	Results
Ahn, 1994	Nonprobabilistic purposive (snowball) sample of 364 mothers (95 African-Americans, 30 Cambodians, 56 Caucasians, 96 Hispanics, 57 Koreans, 30 Vietnamese) recruited through churches.	Instrument developed by authors asking questions pertaining to parent-child bathing practices, sleeping arrangements, and physical contact.	<ul style="list-style-type: none"> ● 90% Vietnamese do not perceive a 9-year-old with bruises from physical discipline as abusive. ● African-Americans, Koreans, Vietnamese most confident about effectiveness of physical discipline and less inclined to assess bruises as evidence of abuse. ● Caucasians and Hispanics both regard bruising as abusive. ● Unlike other groups, Caucasians make effort to differentiate spanking from hitting (spanking is an effective disciplinary measure, while hitting is never appropriate). ● Cambodians rate spanking as much less effective than other groups. ● Comparison across educational level showed that among African Americans and Hispanics, the lower the educational status, the greater the likelihood of rating a 9-year-old with bruises as abusive. ● 70% Koreans and 50% Vietnamese approve of punishing a 9-year-old who cheats in school by hitting him on the hand with a wooden rod; while 80% or more of all other groups disapprove.
Ahn & Gilbert, 1992	Same as above	Same as above	<ul style="list-style-type: none"> ● Generally, Koreans were most accepting and African-American and Hispanics were least accepting of parents and children bathing together. ● Asian groups generally approved of parent-child co-sleeping to a later age than did Caucasians, African-Americans, and Hispanics; Caucasians were least tolerant of co-sleeping. ● Vast majority of respondents in all groups thought it unacceptable for a mother to touch her 1-year-old son's genitals to calm him down. ● Much higher percentage of Koreans and Vietnamese considered it acceptable for a grandfather to touch his 3-year-old grandson's genitals with pride than did Caucasians, African-Americans, and Hispanics. ● Vast majority of Caucasians, African-Americans, and Hispanics approved of parents kissing in front of their 12-year-old son, while majority of Cambodians and Vietnamese disapproved.
Craft & Staudt, 1991	100 urban and 100 rural adults in U.S. Midwest state selected at random from telephone directory and mailed questionnaire; overall response rate 39%.	30 short case descriptions; 9 were extrapolated from Polansky & Williams, 1978; Childhood Level of Living Scale. Respondents rate likelihood for them or someone else in community to report as possible neglect.	<ul style="list-style-type: none"> ● Considerable agreement between urban and rural residents concerning what constituted neglect. ● Both groups rated "lack of food" and "abandonment" as most likely to report. ● Overall, rural respondents only slightly more likely than urban to report as neglect (71.8% vs. 70.5%). ● Only 1 vignette had statistically significant difference between groups: 85% rural residents indicated would report if parent lost job and was too proud to get assistance, versus 63% urban.

Table 1. (Continued)

Reference	Sample/Population	Method	Results
Dubowitz et al., 1998	165 low-middle class, African-American and white female primary caregivers attending pediatric clinics.	45-vignette Adequacy of Care measure developed by panel of child neglect experts.	<ul style="list-style-type: none"> ● Overall, substantial agreement among community groups concerning what circumstances are harmful to children. ● Middle-class African-American and White community groups showed greater concern for psychological care than lower-class African-Americans. ● Lower and middle-class African-Americans were more concerned about physical care than middle-class whites.
Giovannoni & Becerra, 1979	1065 white, black, Hispanic, "other" (mostly Asian and Native American) respondents aged 17–60+ (median age 31) selected through stratified probability sampling of households in Los Angeles Metropolitan area.	156 vignettes covering 13 incidents developed by investigators; respondents rated severity.	<ul style="list-style-type: none"> ● Blacks and Hispanics rated 94% of individual vignettes as more serious than did Whites. ● Principal components analysis revealed 5 categories: sexual abuse, supervision, parents' drug/sex activity, failure to provide, physical abuse. ● Blacks and Hispanics reported all categories as more serious than did Whites. ● Blacks perceived categories "failure to provide" and "supervision" more serious than did Hispanics and as more serious than parental drug/sex activity or physical abuse. ● Hispanics reported sexual abuse, physical abuse, drug/sex activity more serious than did Blacks.
Hong & Hong, 1991	Quota sample of 150 California university students (50 immigrant Chinese, 50 U.S. born/early childhood immigrant Hispanics, 50 U.S. born/early childhood immigrant White); median family income \$30,000; 87% female.	12-vignette instrument depicting parental conduct that might be considered abusive or neglective. Vignettes developed from Boehm, 1964, and Giovanni & Becerra, 1979, instruments and from actual situations encountered by investigators in clinical practice in Chinese-American community. Respondents rate severity level and selected appropriate intervention.	<ul style="list-style-type: none"> ● Chinese rated vignettes as less severe than Hispanics and Whites. ● Chinese generally more likely to recommend no action or milder intervention than Hispanics or Whites. ● Hispanics assigned highest severity levels of vignettes. ● All groups rated certain acts as similarly serious—parents exhorting children to commit crime (high severity range); blatantly ignoring children's physical health (middle-upper middle range); co-sleeping (lower-middle range). ● Chinese rated "parents encouraging children to steal" as the most serious vignette, while Hispanics and Whites rated "beating/branding for stealing" as the most severe.
Ima & Hohm, 1991	158 cases of child maltreatment involving Asian/Pacific Islanders (predominantly Vietnamese, Filipino, Cambodian, Laotian) referred to Union of Pan Asian Communities by Child Protective Services	Review of case files; anecdotal findings from case narrative and informant comments (not strictly a vignette study).	<ul style="list-style-type: none"> ● Almost all Asian/Pacific Islander adults amazed that U.S. law limits parental rights to physically punish children. ● Laotian and Cambodian adults reported that leaving children unattended in front of home and having young children care for siblings are not neglectful.

Table 1. (Continued)

Reference	Sample/Population	Method	Results
Polansky & Williams, 1978; Polansky et al., 1981, 1983	431 U.S. mothers divided into the following approximately 8 equal subgroups: (1) white-middle class-urban; (2) white-middle-class rural; (3) white-working class-urban; (4) white working class-rural; (5) black middle class-urban; (6) black-middle class-rural; (7) black-working class-urban; (8) black-working class-rural. No information given regarding sampling procedures.	Childhood Level of Living Scale. Respondents rate "quality" of parenting practice on 6-point Likert scale ("excellent" to "report to legal authorities")	<ul style="list-style-type: none"> ● Overall, high agreement among all subgroups of women concerning quality of practices. ● Working class mothers placed greater emphasis on physical care. ● Middle class mothers emphasized psychological care.
Rose & Meezan, 1995	Convenience sample of 43 Hispanic, 49 White, 39 African-American mothers recruited from Chicago day care centers	66-vignette instrument reflecting 9 indices of child neglect: Specific items selected from Childhood Level of Living Scale (Polansky, DeSaix, & Sharlin, 1972), Giovanni & Becerra (1979) research instrument and DCFS Child Abuse & Neglect Tracking Instrument	<ul style="list-style-type: none"> ● White respondents rated lapses in physical care significantly less serious than did African-Americans or Hispanics. ● African-American and Hispanic ratings of severity nearly identical. ● All mothers on average rated lapses in supervision and emotional care as more serious than lapses in physical care and sexual orientation of parents.
Rose & Meezan, 1996	Same as above	Same as above	<ul style="list-style-type: none"> ● Caucasian mothers rated unwholesome circumstances, inadequate clothing, and inadequate shelter significantly lower than did African-American or Latino mothers. ● Overall, three groups' rankings of neglect dimensions highly similar. African-American and Latino mothers almost completely agreed that child exploitation, inadequate supervision, and unwholesome circumstances were most severe and that inadequate food, clothing, shelter were least severe. Caucasian mothers rated lack of adequate food as more serious and unwholesome circumstances and inadequate schooling as less serious than did African-American or Latino mothers.

children. Interviewers made three call-backs at different times of the day and different days of the week before excluding a household. Households were eligible for the study if they had at least one child under 18 and at least one parent or guardian living in the home. The parent or guardian served as the respondent. Interviewers were graduate students in anthropology, social work, and medicine, and were matched with the predominant ethnicity of the neighborhood.

Interviewers approached 2,448 occupied housing units. If nobody was home, interviewers made three call-backs before deleting the household from the sample. Interviewers were able to speak with an adult in 2,098 households (85.7%). Of the 2,098 households that were contacted, 1,399 (66.7%) reported that they did not have children under 18 years of age residing in the household, 243 (11.7%) refused to be screened, and 56 (2.7%) did not speak English. Four hundred households met the criteria for inclusion in the study and a parent or guardian in each household completed the interview.

The selection criteria resulted in a sample ($n = 400$) that was largely female (81.8%) with a mean age of 33.9 years. The sample consisted primarily of African-Americans (54.8%) and European-Americans (36.3%), with a smaller representation of Hispanic/Latinos (6.8%) who were primarily Puerto-Rican, and Asian-Americans and Native American Indians (2.1%). There was high ethnic homogeneity of African-Americans and European-Americans within block groups, reflecting Cleveland's extremely high level of racial segregation (Farley & Frey, 1994; Massey & Denton, 1993). Participants had lived an average of 10.7 years in their neighborhoods. However, length of residence varied widely, with a range of 3 weeks to 46 years. On average, participants' households contained 2.47 children under 18 years of age. Approximately 44% of the sample were married. Just under three quarters of the sample had completed high school or its equivalent, and two thirds of the sample were employed at least part time. Half of the sample reported a total household income less than \$20,001, while 15% reported an income greater than \$40,000.

As part of a larger interview (Korbin & Coulton, 1999), we questioned neighborhood residents ($n = 400$) about their views on the definition and etiology of child maltreatment. In order to ascertain neighborhood definitions, we sought respondent-generated lists of behaviors and acts thought to constitute child maltreatment. Respondents were asked to name three things that they would consider "child abuse and neglect." They were not provided with lists of behaviors or vignettes as examples or as response stimuli. These open-ended responses were coded by developing a post-interview coding system. To determine resident views of the etiology of child maltreatment, we asked respondents to rate 13 items on a scale of 1 (contributes nothing) to 10 (contributes a lot) as to how much they believed that each factor contributed to the occurrence of child abuse and neglect. These 13 factors were drawn from current literature to represent theories about the etiology of child maltreatment (e.g., National Research Council, 1993) and from our prior ethnographic work in Cleveland's neighborhoods (Korbin & Coulton, 1994).

Individual variables of age, race-ethnicity, income, education, and marital status were collected as part of a demographic section of the interview. Social support was measured using a brief instrument developed by Zimet and colleagues (Zimet, Dahlem, Zimet, & Farley, 1988), and violence in one's childhood was measured using the Conflict Tactics Scales retrospectively (Straus, Gelles, & Steinmetz, 1980).

Two types of measures of neighborhood conditions were used in this study. The first included census-based measures of neighborhood structural conditions that explained a substantial portion of the variance in child maltreatment report rates (Coulton et al., 1995, 1999). Specifically, we examined neighborhood factors that we labeled impoverishment and child care burden. The impoverishment factor reflects neighborhoods characterized by disinvestment and disorganization, and is composed of the following indicators: poverty rate, unemployment rate, vacant housing, population loss, female-headed households, percent African-American. The factor we labeled child care burden reflects a higher proportion of children in a neighborhood and is composed of the

following variables: ratio of children to adults, ratio of males to females, and percent of the population that is elderly.

The second neighborhood measure involved residents' perceptions of their neighborhood conditions. These perceptions were measured using the Neighborhood Environment for Children Rating Scales (Coulton, Korbin, & Su, 1996). This instrument includes seven subscales and has demonstrated acceptable individual and aggregate reliability as well as validity in distinguishing between neighborhoods (block groups) with high versus low rates of child maltreatment reports. The seven scales used for the analysis are:

1. The "neighborhood quality" subscale ($\alpha = .8055$) included items reflecting respondents' views of the overall quality of their neighborhood as a place to live and raise children.
2. The "facility availability" subscale ($\alpha = .6939$) reflected respondents' reports of the resources in their neighborhoods. These included food and drug stores, libraries, banks, laundry facilities, schools, and child care centers, for example.
3. The third subscale, "neighborhood disorder" ($\alpha = .9457$) reflected respondents' reports of loitering and disorderly children, teens, and adults, the occurrence of graffiti, litter, abandoned cars, and the presence of drunks, gangs, and drug users and dealers in their neighborhoods.
4. The "fear of retaliation" subscale ($\alpha = .8964$) included residents' concerns that neighborhood adults and children retaliate against those who "correct" other children's behavior.
5. The "stop misbehavior" subscale ($\alpha = .7647$) indicated how likely it was that residents thought others would intervene in child misbehavior such as throwing rocks or hitting another child.
6. The "assist" subscale ($\alpha = .7803$) indicated how likely it was that residents thought others would help a child who was wandering alone, who had fallen off a bicycle, who was left alone, or who was being spanked in public.
7. The "neighborhood interaction" subscale ($\alpha = .7062$) indicated the degree to which residents report behaviors such as visiting outside with one another, loaning things to one another, or watching one another's homes.

RESULTS

Results will be discussed separately for findings related to neighborhood definitions of child maltreatment and findings related to neighborhood views about the etiology of child maltreatment.

Neighborhood Definitions of Child Abuse and Neglect

Again, we were interested in the behaviors or acts that would be generated by respondents as child abuse and neglect. We selected this approach because, as discussed above, substantial work has been done using vignettes as stimuli for definitions and judgements of seriousness. We asked respondents for three things that they would consider child abuse or neglect without giving them a list of caretaker behaviors, child outcomes, or a series of vignettes. Because respondents did not all provide exactly three answers, the first step in our analysis was to take into account variability in the number of responses. A total of 1,413 specific behaviors were generated. The mean number of responses was 3.5, and the median 3.0. Only one respondent did not provide any behaviors or acts in response to this question. A Kruskal-Wallis test yielded a significantly lower median number of responses ($\chi^2 4.515, p < .05$) among African-Americans (3.4) than among European-Americans (3.7). There were no significant differences in the median number of responses by level of neighborhood impoverishment, level of neighborhood child care burden, or gender.

In order to minimize the effects of residents offering differing numbers of definitions, we created six summary variables (see Table 2). The summary variables were created using conceptual categories based on the literature and an analysis of the specific behaviors or acts offered by the

Table 2. Summary Maltreatment Variables

Summary Variable	Respondent-Generated Behaviors of Child Abuse and Neglect
Physical Abuse	Physical abuse; spanking; hitting, slapping or smacking; whooping; beating; kicking; punching; hitting with objects; using a knife or gun on a child; hitting for no reason or unnecessarily; hitting out of anger or frustration; hitting constantly; burning a child; leaving a mark or bruise; causing serious injuries (e.g., burns, broken bones, scars); biting; pulling hair
Neglect	Neglect; not taking proper care of child; deprivation of food; depriving of certain needed/nutritious foods; poor diet; starving; clothing insufficient; not dressing child for the weather; inadequate cleanliness or hygiene; not keeping child or child's clothes clean; not changing diapers; not keeping house clean; not taking child to doctor for health care; not enrolling a child in school or attending to child's schoolwork
Inadequate Supervision	General lack of supervision; child left alone; not keeping an eye on children; letting children run around unsupervised; not knowing where children are; leaving children outside or on the street alone or unsupervised; leaving children unsupervised during the day; leaving children unsupervised after dark; leaving children at home alone during the day; leaving children at home alone during the evening or night; leaving a child with other children who are too young to supervise the child; letting a child play with or use dangerous things (e.g., matches, knives); exposing child to danger (e.g., leaving child alone in bathtub)
Emotional/Verbal Maltreatment	Emotional maltreatment; mental maltreatment; psychological maltreatment; denigrate; belittle; berate; make child feel that he/she is no good; verbal mistreatment; swearing about child; calling child names; making mean statements to child; making child afraid of parent; bullying child; ignoring child; not giving time and attention to child; expecting too much of children; not understanding age-appropriate behavior; expecting child to act like an adult.
Sexual Abuse	Sexual abuse/molestation
Parents' Misbehavior	Parents using drugs; parents letting child sell or use drugs; parents' misuse of alcohol; parents being drunk too often or all of the time; parents stay out all night; parents are just bad (bad people or bad at parenting); parents taking out problems on kids; parents letting child drink or smoke

respondents. Of the 1,413 total responses generated, 101 (7.1%) did not fall into one of the six summary maltreatment categories. Seventy-two of these 101 responses consisted of actions that could not be readily categorized, such as “it’s abusive to allow them (children) to see too much of what’s going on in the world;” “not having a solid home.” Twenty-eight of the responses were statements specifically that spanking is not child abuse. One respondent reported that she couldn’t name anything that was child abuse and neglect. For the purposes of the analysis, if a respondent named any of the more specific behaviors within each larger summary category, that summary category was counted only once. Respondents could have answered in multiple summary categories. Using the Kruskal-Wallis test comparing medians, we found no significant differences in the number of answers for summary categories by level of impoverishment, level of child care burden, gender, or race-ethnicity.

As seen in Figure 1, physical abuse was the most frequently mentioned summary category of maltreatment (82%), followed by neglect (65%). Inadequate supervision of children (46%) and emotional or verbal mistreatment (43%) were mentioned in nearly equal frequencies. When a summary variable was constructed that included both neglect and inadequate supervision (84%, *n* = 334), it slightly exceeded physical abuse.

While inadequate supervision is most often encompassed in definitions of neglect in the literature, it was kept as a separate category because it emerged as a salient issue in our

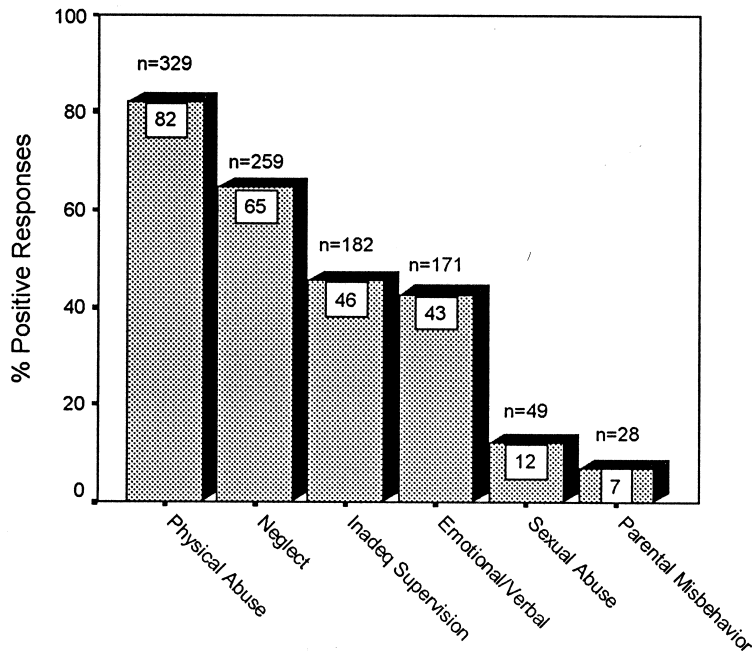


Figure 1. Summary maltreatment variables ($n = 400$; respondents could include behaviors in more than one summary category).

ethnographic work (Korbin & Coulton, 1994, 1997). Considering public awareness of and attention to sexual abuse, it is surprising that this category was mentioned by only 12.3% ($n = 49$) of the respondents. Behaviors such as parental drug or alcohol abuse were mentioned as a form of child maltreatment by 7% of the sample.

Analyses of the summary definition variables were undertaken to determine if respondent-generated definitions of child maltreatment differed by neighborhood factors of impoverishment and/or child care burden from our prior work and/or individual variables of race-ethnicity and gender. Chi-square tests of independence were performed on whether or not each summary definition category was mentioned or not by the neighborhood factors dichotomized at the mean (high and low impoverishment and high and low child care burden) and individual variables (African-American versus European-American and females versus males).

There were no significant differences in the summary behaviors of maltreatment by either of the neighborhood factors of impoverishment or child care burden (see Table 3). That is, the definitions of child maltreatment generated by neighborhood residents did not vary by whether or not they lived in an impoverished neighborhood or one that had a high ratio of children to adults.

Individual level variables, in contrast, yielded some significant differences (see Table 4). European-Americans were more likely than African-American parents to report physical acts of maltreatment. No significant differences between European-Americans and African-Americans were found for any of the other five summary variables. Men and women did not differ in naming acts of physical abuse, neglect, emotional abuse, or parental behavior. Women, however, were more likely than men to include a lack of supervision as child maltreatment while men were more likely to include sexual behavior in their definitions. It should be noted that the number of men in the sample was relatively small.

We undertook additional chi-square analyses to examine within group differences and to verify that there were not more significant differences masked by interactions among our variables of

Table 3. Child Maltreatment Summary Variables by Neighborhood Factors

Variable	Impoverishment				Chi-square	Child Care Burden				Chi-square
	High (<i>n</i> = 220)		Low (<i>n</i> = 180)			High (<i>n</i> = 200)		Low (<i>n</i> = 200)		
	<i>n</i>	%	<i>n</i>	%		<i>n</i>	%	<i>n</i>	%	
Physical Abuse	175	(79.5)	154	(85.6)	.509	166	(83.0)	163	(81.5)	.154
Neglect	140	(63.6)	119	(66.1)	.215	132	(66.0)	127	(63.5)	.274
Inadequate Supervision	101	(45.9)	81	(45.0)	.033	91	(45.5)	91	(45.5)	.000
Emotional/Verbal Maltreatment	90	(40.9)	81	(45.0)	.677	85	(42.5)	86	(43.0)	.010
Sexual Abuse	29	(13.2)	20	(11.1)	.395	23	(11.5)	26	(13.0)	.209
Parents' Misbehavior	16	(7.3)	12	(6.7)	.056	16	(8.0)	12	(6.0)	.641

* *p* < .05.

interest. We found no significant differences by level of impoverishment or child care burden within either African-American or European-American racial/ethnic categories. That is, there were no significant differences within African-Americans or within European-Americans by whether they were living in high versus low impoverishment or high versus low child care burden neighborhoods.

However, there were significant race-ethnicity differences when examined within neighborhood classifications of high versus low impoverishment and high versus low child care burden. In high impoverishment neighborhoods, European-Americans (*n* = 64, 88.9%) were more likely than African-Americans (*n* = 93, 73.8%) to include acts of physical abuse ($\chi^2 = 6.345, p < .05$). This pattern was the same in low child care burden neighborhoods, with European-Americans (*n* = 77, 90.6%) more likely than African-Americans (*n* = 63, 72.4%) to include acts of physical abuse ($\chi^2 = 9.378, p < .01$). Within high child care burden neighborhoods, African-Americans (*n* = 94, 71.2%) were more likely than European-Americans (*n* = 33, 55.0%) to include behaviors of neglect ($\chi^2 = 4.842, p < .05$).

Even though the number of males in our sample was small, we examined males and females separately. There were no significant differences when comparing within males. When only comparing females, however, European-American women (*n* = 107, 89.2%) were more likely than African-American women (*n* = 138, 78.0%) to include behaviors of physical abuse ($\chi^2 = 6.212, p < .05$), while African-American women (*n* = 127, 71.8%) were more likely than European-American women (*n* = 72, 60.0%) to list behaviors of neglect ($\chi^2 = 4.467, p < .05$). Note that

Table 4. Child Maltreatment Summary Variables by Race-Ethnicity and Gender

Variable	Race-Ethnicity				Chi-square	Gender				Chi-square
	African-American (<i>n</i> = 219)		European-American (<i>n</i> = 145)			Female (<i>n</i> = 328)		Male (<i>n</i> = 72)		
	<i>n</i>	%	<i>n</i>	%		<i>n</i>	%	<i>n</i>	%	
Physical Abuse	169	(77.2)	130	(89.7)	9.272**	272	(82.9)	57	(79.2)	.572
Neglect	152	(69.4)	89	(61.4)	2.513	215	(65.5)	44	(61.1)	.509
Inadequate Supervision	94	(42.9)	69	(47.6)	.767	158	(48.2)	24	(33.3)	5.241*
Emotional/Verbal Maltreatment	93	(42.5)	61	(42.1)	.006	140	(42.7)	31	(43.1)	.003
Sexual Abuse	26	(11.9)	16	(11.0)	.006	35	(10.7)	14	(19.4)	4.228*
Parents' Misbehavior	13	(5.9)	13	(9.0)	1.207	20	(6.1)	8	(11.1)	2.280

* *p* < .05; ***p* < .01.

Table 5. Rank Order of Ten Frequently Named Acts of Child Abuse and Neglect ($n = 400$)

Rank	Action	n	%*
1	Inadequate food	208	52.0
2	Beating child	127	31.8
3	Lack of supervision	93	23.3
4	Lack of cleanliness	82	20.5
5	Leaving child alone	78	19.5
6	Denigrating child	77	19.3
7	Hitting child	62	15.5
8	Sexual abuse	49	12.3
9	Ignoring child	46	11.5
10	Generalized physical abuse	46	11.5

* % of respondents naming behavior.

when both males and females are included above, there was a significant difference for physical abuse but not neglect.

We also examined the rank order of the frequencies with which the summary definitional variables were provided by respondents. Those mentioned the most frequently had the highest rank. Referring back to Figure 1, the rank order was: physical abuse, neglect, inadequate supervision, emotional/verbal maltreatment, and bad parental behavior. The rank order was identical in comparisons of high versus low impoverishment, high versus low child care burden, and African-Americans versus European-Americans. The rank order differed slightly by gender, with females listing inadequate supervision more frequently than did males, thereby slightly altering the rank order. It should be noted again that the number of males ($n = 72$) was small in our sample.

In addition to examining the summary variables, we also examined the rank order of the specific behaviors offered by respondents. Table 5 presents the 10 most frequently reported behaviors. Inadequate food was mentioned most frequently by respondents. Further, there is a substantial gap between inadequate food, and the next most frequently mentioned behavior, beating. When we compared these rankings across neighborhood level factors of impoverishment and child care burden, and by individual characteristics of race-ethnicity and gender, the rank order was similar, though not identical (Korbin & Coulton, 1999).

Neighborhood Beliefs About the Etiology of Child Maltreatment

In addition to how residents defined child abuse and neglect, we were also interested in why they thought it occurs. We asked respondents to rate 13 items on a scale of 1 (contributes nothing) to 10 (contributes a lot) in causing child maltreatment. As indicated in Table 6, the 13 etiological items were all considered important contributors to child maltreatment by respondents, with drugs and alcohol the greatest and single parents the least important explanatory factors. All of the items had a median rating of at least 6, suggesting that they were all viewed as contributing to child maltreatment.

A factor analysis using the SPSS varimax procedure yielded four factors with eigen values greater than 1.0 that explained 63.21% of the variance in the thirteen etiological items (see Table 7). The first factor, which we labeled Poverty and Family Structure explained the largest proportion of the variance, 30.18%. This factor included unemployment and poverty as indicators of financial difficulties as well as family structures including single parents and teen parents. While we expected lack of knowledge about raising children to load on the individual pathology factor, we believe that lack of knowledge about how to rear children was associated in respondents' views with young and inexperienced parents. This first factor, then, reflects respondents' views of societally-induced stresses on families and family disorganization.

Table 6. Etiological Factors in Child Abuse and Neglect

Factor	Median*
Drugs	10
Alcohol	10
Stress	9
Lack of Family Values	9
Childhood Abuse	9
Psychological Problems	9
Poverty	8
Unemployment	8
Teen Parents	8
Knowledge Deficit	8
Divorce	7
Lack of Religion	7
Single Parents	6

* Minimum value 1 (“contributes nothing”), maximum value 10 (“contributes a lot”) for all factors.

The second factor, which we labeled Substance Abuse and Stress, explained 13.78% of the variance and included drug and alcohol use and stress. Stress, which we did not define for the respondents, loaded the least well on this factor. The third factor, which we labeled Lack of Moral Values, explained 11.35% of the variance and included lack of religious and family values. This factor reflects current popular concerns in the media about the institution of the family as the purveyor of societal morals. The fourth factor, labeled Individual Pathology reflects explanations of child maltreatment rooted in the individual, including abuse in one’s own childhood, and psychological or emotional problems. This factor explained 7.89% of the variance.

We then used Pearson correlational analyses to examine the relationships of these four causal factors with our two neighborhood conditions measures, structural conditions and resident perceptions (see Table 8). First, we examined the previously described neighborhood structural conditions that we had labeled impoverishment and child care burden. These factors, along with a residential instability factor, had explained approximately half of the variance in neighborhood child maltreatment reports in our previous study (Coulton et al., 1995). A score on each factor was calculated

Table 7. Child Maltreatment Causal Factors Rotated Factor Loadings

Variable	Factor 1: Poverty and Family Structure	Factor 2: Substance Abuse and Stress	Factor 3: Lack of Moral Values	Factor 4: Individual Pathology
Unemployment	0.76	0.36	0.10	-0.08
Single Parents	0.74	-0.18	0.09	0.10
Teen Parents	0.74	-0.09	0.11	0.24
Poverty	0.72	0.39	0.13	-0.07
Divorce	0.56	0.03	0.02	-0.08
Knowledge deficit	0.53	0.20	0.12	0.25
Drugs	0.00	0.89	0.04	0.11
Alcohol	0.07	0.88	0.07	0.14
Stress	0.36	0.47	0.08	0.30
Lack of Family Values	0.11	0.09	0.92	0.09
Lack of Religion	0.17	0.06	0.92	0.05
Childhood Abuse	-0.02	0.04	0.08	0.74
Psychological Problems	0.11	0.22	0.02	0.66
Eigen Values	3.92	1.79	1.48	1.03
% Variance Explained	30.18	13.78	11.35	7.90

Table 8. Correlation Coefficients Between Causal Factors and Neighborhood Conditions

	Factor 1: Poverty and Family Structure	Factor 2: Substance Abuse and Stress	Factor 3: Lack of Moral Values	Factor 4: Individual Pathology
Neighborhood Structural Factors (<i>n</i> = 20)				
Impoverishment	.442	-.191	-.490*	-.022
Child care burden	.105	.134	.210	.017
Neighborhood Perceptions				
Neighborhood quality (<i>n</i> = 347)	-.115*	-.054	.019	.023
Facility availability (<i>n</i> = 294)	-.009	-.084	.025	.095
Disorder (<i>n</i> = 347)	.213*	.061	-.028	-.031
Retaliation (<i>n</i> = 357)	.165*	.075	-.023	-.112*
Stop misbehavior (<i>n</i> = 389)	.000	.042	-.042	.034
Assist (<i>n</i> = 370)	-.096	-.025	-.019	-.010
Interaction (<i>n</i> = 332)	.014	-.040	-.078	.021

* $p < .05$.

for each census tract and correlated with individual etiology factors. Second, we examined perception of neighborhood conditions as measured by the seven scales that comprise the Neighborhood Environment for Children Rating Scales (Coulton et al., 1996), also described earlier.

As indicated in Table 8, Causal Factor 1, Poverty and Family Structure, was not significantly related to any of the neighborhood structural conditions. It was, however, inversely related to resident perceptions of neighborhood quality ($p < .05$) and positively correlated with perceptions of neighborhood disorder ($p < .05$). That is, those individuals who perceived lower neighborhood quality and greater neighborhood disorder were more likely to view poverty and family structure as contributing to child maltreatment. Additionally, individuals who believed that their neighbors would retaliate against them if they intervened in child misbehavior were more likely to attribute child maltreatment to Causal Factor 1 ($p < .05$).

Causal Factor 2, Substance Abuse and Stress, was not significantly correlated with neighborhood structural conditions or with neighborhood perceptions. Causal Factor 3, Lack of Moral Values, was negatively related to the structural factor of impoverishment ($p < .05$). Residents of the most impoverished neighborhoods were less likely to rate lack of morals as a cause of child maltreatment. Causal Factor 3 was not related to any of the neighborhood perceptions scales. Causal Factor 4, Individual Pathology, was not significantly related to neighborhood structural conditions. Individuals who believed that their neighbors would retaliate against them if they intervened in child misbehavior were less likely to attribute child maltreatment to Causal Factor 4 ($p < .05$).

We also examined the four causal factors in relation to individual social and demographic variables (see Table 9). Income, social support, violence in one's childhood, and length of time residing in the neighborhood were analyzed using Pearson correlational analysis. Causal Factor 1,

Table 9. Pearson Correlation Coefficients Between Causal Factors and Demographics

	Factor 1: Poverty and Family Structure	Factor 2: Substance Abuse and Stress	Factor 3: Moral Values	Factor 4: Individual Pathology
Family Income (<i>n</i> = 385)	0.050	0.084	0.205***	0.140**
Social Support (<i>n</i> = 400)	0.092	0.056	0.048	0.011
Violence in Childhood (<i>n</i> = 395)	0.032	0.067	-0.045	-0.082
Length of Time Residing in Neighborhood (<i>n</i> = 400)	0.111*	-0.134**	0.042	-0.012

* $p < .05$; ** $p < .01$; *** $p < .001$.

Table 10. *T*-Tests Between Causal Factors and Demographics

	Factor 1: Poverty and Family Structure	Factor 2: Substance Abuse and Stress	Factor 3: Moral Values	Factor 4: Individual Pathology
Sex ($n = 400$)	-3.198**	1.065	-0.987	0.620
High School Graduate ($n = 400$)	-1.608	-0.381	-2.639**	-2.127*
Marital Status ($n = 400$)	-1.167	-1.476	-2.364*	-1.666
Respondent's Ethnicity ($n = 364$)	0.421	-0.152	-0.123	2.112*

* $p < .05$; ** $p < .01$.

Poverty and Family Structure, was positively correlated with the number of years lived in the neighborhood ($p < .05$) while Causal Factor 2, Substance Abuse and Stress, was negatively correlated with years living in the neighborhood ($p < .01$). Factor 3, Lack of Moral Values, was correlated with family income ($p < .001$) as was Factor 4, Individual Pathology ($p < .01$). Social support and violence in one's childhood were not related to any of the causal factors.

The relationships between the causal factors and gender, race-ethnicity, marital status, and high school graduation were analyzed using independent *t*-tests (see Table 10). Causal Factor 1, Poverty and Family Structure, was significantly greater in males than females ($p = .001$) with mean factor scores of .3374 and $-.0741$, respectively. Factor 2, Substance Abuse and Stress, was not related to any of these individual variables. Causal Factor 3, Lack of Moral Values, was significantly greater among individuals who had completed high school than in those who had not ($p < .01$), with mean factor scores of .0802 and $-.2140$, respectively. Factor 3 was also greater among married than non-married individuals ($p < .05$), with scores of .1339 and $-.1031$, respectively. Causal Factor 4, Individual Pathology, was greater among African-Americans than European-Americans ($p < .05$) with mean factor scores of .1022 and $-.1292$, respectively. Factor 4 was also significantly greater among individuals who had completed high school than in those who had not ($p < .05$) with mean factor scores of .0648 and $-.1730$, respectively.

DISCUSSION AND IMPLICATIONS

While we found a basic congruence in definitions of child maltreatment, there were differences in emphases between urban African-Americans and European-Americans. African-Americans were more likely to list behaviors of neglect while European-Americans were more likely to list behaviors of physical abuse. These definitional differences between African-Americans and European-Americans also were evident when comparing within neighborhood structural conditions of impoverishment and child care burden. While one could speculate that these differences reflect views of physical punishment or long-standing experience with material deprivation, further research is needed within these communities to tease out the underlying reasons for such differences.

However, despite the differences in emphases, there was congruence on the basic catalogue of abusive and neglectful behaviors and acts, and their rank ordering. While cultural variability in definitions of child maltreatment is an important consideration (e.g., Korbin, 1981, 1997; Korbin & Spilsbury, 1999), the current study suggests that there is a level of basic agreement in definitions of child maltreatment, at least in the catalogue of behaviors of concern for these two urban populations. Our findings, then, are consistent with other recent studies (e.g., Dubowitz et al., 1998; Portwood, 1999) that indicate that while some differences in definitions occur, a basic definitional consensus exists among professional groups, socioeconomic groups, and African-Americans and European-Americans in urban areas. This suggests that the major categories of child maltreatment

identified in the literature (National Research Council, 1993) are consistent with categories that emerge from lay or community definitions. Community-based programs, then, should assume a starting point of a shared definitional catalogue. Programs also should consider whether differences in definitional emphases, however small, are salient to the population and therefore should influence program priorities.

While physical abuse attracts more media attention, and neglect constitutes a majority of caseloads, physical abuse and neglect were of nearly equal concern to neighborhood residents. Behaviors that could be grouped as physical abuse constituted the most frequently mentioned definitional category. However, we separated physical neglect from inadequate supervision on the basis of our previous ethnographic work, which suggested that supervision of children has important implications in urban neighborhoods (Korbin & Coulton, 1994, 1997). A combined category of physical neglect and inadequate supervision slightly exceeded physical abuse. When specific behaviors were analyzed, inadequate food was the most frequently mentioned concern. Child sexual abuse, despite the public attention to child molestation, was mentioned by 12% of the respondents and not included in women's listings of the top 10 behaviors of child abuse and neglect. This may be because child sexual abuse is viewed as a separate entity by lay persons as opposed to being encompassed as a form of child abuse by professionals.

In addition to examining neighborhood definitional issues, this is the first study of which we are aware that has systematically sought the views of laypersons in the neighborhood and community about what causes child maltreatment. We have identified four factors that explain almost two-thirds of the variance in neighborhood residents' explanations of the causes of child maltreatment. These causal factors coalesce around some of the major explanatory theories for child maltreatment: poverty and family disruption; substance abuse and stress; lack of moral and family values; and individual pathology. Interestingly, poverty and family structure explained the largest portion of the variance while individual pathology, including a childhood history of abuse, explained the least. While professional formulations about the etiology of child maltreatment have been somewhat conflicted about the role of poverty in causing child maltreatment, it is clearly an important construct in the minds of a neighborhood or lay population. Beliefs about individual pathology, including the cycle of violence, hold less sway. The intergenerational transmission of child maltreatment, then, is a less powerful explanatory principle for a lay population than it is in the research and clinical literature, despite public awareness campaigns stressing this intergenerational cycle.

The four causal factors displayed a mixed relationship to neighborhood and individual variables. Neighborhood structural factors of impoverishment, child care burden, and instability were not significantly related to the causal factors with one exception. Those living in more impoverished neighborhoods were less likely to offer moral values as an explanation for child maltreatment. One could speculate that it is the stresses of daily living in these disinvested neighborhoods that holds the most salience.

Neighborhood perceptions yielded a relationship to the way that this lay population viewed the etiology of child maltreatment. Individuals who lived in neighborhoods which were characterized by residents as poor, chaotic, and high in crime and disorder were more likely to attribute the etiology of child maltreatment to poverty and family structure. This suggests that families mired in bad neighborhoods were acutely aware of the constraints of their living conditions and that first-hand experience with the pressures of poverty had an impact on their causal attributions for problems such as child maltreatment. Conversely, individuals living in neighborhoods which were perceived as less poor, disorganized and crime-ridden were more likely to attribute the occurrence of child maltreatment to a lack of moral values. For these individuals, the stresses of poverty stricken neighborhoods may not be as pressing such that explanations centered on individual character come to the foreground.

Neighborhood concerns about retaliation have been suggested as an important construct in our

previous work. Neighborhood adults are less willing to intervene in the misbehavior of neighborhood children if they fear retaliation from the parents of those children or from the children themselves (Korbin & Coulton, 1996, 1997). This echoes the concepts of social capital (Coleman, 1988) and collective efficacy (Sampson, Raudenbush, & Earls, 1997). In the current study, individuals who believe that their neighbors will retaliate if they intervene in the behavior of other people's children are also likely to view poverty and family structure as well as individual pathology as causing child maltreatment.

Individual social and demographic variables had weaker relationships with the four causal factors and therefore must be interpreted cautiously. Residents with higher family incomes, who were married, and who had graduated high school were more likely to provide explanations of child maltreatment that centered on moral values and individual pathology instead of poverty, household disorganization, or substance abuse and stress. African-Americans were more likely to view child maltreatment as caused by individual pathology than were European-Americans. Males tended more than females towards viewing child maltreatment as rooted in impoverishment and family disorganization. Those who had lived in the neighborhood for a longer period of time were more likely to attribute child maltreatment to poverty and family disorganization and less likely to attribute child maltreatment to substance abuse and stress.

The rationale for needing to understand populations' definitions and etiological formulations of child maltreatment lies in the fact that prevention and intervention efforts are inextricably linked to conceptualizations about the causes of child maltreatment. Programs aimed at preventing or ameliorating child maltreatment must have at their very core an understanding of what the populations being served believe the problem is and why it has occurred.

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REFERENCES

- Ahn, H. N. (1994). Cultural diversity and definition of child abuse. In R. Barth, J. Duerr Berrick, & M. Gilbert (Eds.), *Child welfare research review* (Vol. 1, pp. 28–55). New York: Columbia University Press.
- Ahn, H. N., & Gilbert, N. (1992). Cultural diversity and sexual abuse prevention. *Social Service Review*, **66**, 410–427.
- Barry, F. (1994). A neighborhood-based approach: What is it? In G. Melton & F. Barry (Eds.), *Protecting children from abuse and neglect* (pp. 14–30). New York: Guilford.
- Boehm, B. (1964). The community and the social agency define neglect. *Child Welfare*, **43**, 453–464.
- Coleman, J. (1988). Social capital in the creation of human capital. *American Journal of Sociology*, **94**, S95–120.
- Coulton, C., Korbin, J., Chan, T., & Su, M. (1997). *Mapping resident perceptions of neighborhood boundaries*. Cleveland, OH: The Center on Urban Poverty and Social Change, Mandel School of Applied Social Sciences, Case Western Reserve University.
- Coulton, C., Korbin, J., & Su, M. (1996). Measuring neighborhood context for young children in an urban area. *American Journal of Community Psychology*, **24**, 5–32.
- Coulton, C., Korbin, J., Su, M., & Chow, J. (1995). Community level factors and child maltreatment rates. *Child Development*, **66**, 1262–1276.
- Coulton, C., Korbin, J., & Su, M. (1999). Neighborhoods and child maltreatment. A multi-level analysis. *Child Abuse & Neglect*, **23**, 1019–1040.
- Craft, J. L., & Staudt, M. M. (1991). Reporting and founding of child neglect in urban and rural communities. *Child Welfare*, **70**, 359–370.
- Dubowitz, H., Black, M., Starr, R., & Zuravin, S. (1993). A conceptual definition of child neglect. *Criminal Justice and Behavior*, **20**, 8–26.
- Dubowitz, H., Klockner, A., Starr, R., & Black, M. (1998). Community and professional definitions of child neglect. *Child Maltreatment*, **3**, 235–243.
- Elliott, D., & Huizinga, D. (1990). *Mediation effects of social structure in high risk neighborhoods*. Unpublished manuscript, University of Colorado.
- Farley, R., & Frey, W. (1994). Changes in the segregation of Whites from Blacks during the 1980s: Small steps toward a more integrated society. *American Sociological Review*, **59**, 23–45.
- Finkelhor, D., & Korbin, J. (1988). Child abuse as an international issue. *Child Abuse & Neglect*, **12**, 3–23.

- Garbarino, J., & Ebata, A. (1983). The significance of cultural and ethnic factors in child maltreatment. *Journal of Marriage and the Family*, **45**, 773–783.
- Gil, D. (1970). *Violence against children: Physical child abuse in the United States*. Cambridge, MA: Harvard University Press.
- Giovannoni, J., & Becerra, R. (1979). *Defining child abuse*. New York: Free Press.
- Gray, E., & Cosgrove, J. (1985). Ethnocentric perception of childrearing practices in protective services. *Child Abuse & Neglect*, **9**, 389–396.
- Hong, G., & Hong, L. (1991). Comparative perspectives on child abuse and neglect: Chinese versus Hispanics and Whites. *Child Welfare*, **70**, 463–475.
- Ima, K., & Hohm, C. (1991). Child maltreatment among Asian and Pacific Islander refugees and immigrants: The San Diego case. *Journal of Interpersonal Violence*, **6**, 267–285.
- Korbin, J. (Ed.). (1981). *Child abuse and neglect: Cross-cultural perspectives*. Berkeley and Los Angeles, CA: University of California Press.
- Korbin, J. (1997). Culture and child maltreatment. In M. E. Helfer, R. Kempe, & R. Krugman (Eds.), *The battered child* (5th ed., pp. 29–48) Chicago: University of Chicago Press.
- Korbin, J., & Coulton, C. (1994). *Neighborhood impact on child abuse and neglect*. Final report of grant #90-CA1494. Washington, DC: National Center on Child Abuse and Neglect, Health and Human Services.
- Korbin, J., & Coulton, C. (1996). The role of neighbors and the government in neighborhood-based child protection. *Journal of Social Issues*, **52**, 163–176.
- Korbin, J., & Coulton, C. (1997). Understanding the neighborhood context for children and families: Combining epidemiological and ethnographic approaches. In J. Brooks-Gunn, G. Duncan, & L. Aber (Eds.), *Neighborhood poverty: Context and consequences for children* (pp. 77–91). New York: Russell Sage.
- Korbin, J., & Coulton, C. (1999). *Neighborhood and household factors in the etiology of child maltreatment*. Final report of grant #90-CA1548. Washington, DC: Office on Child Abuse and Neglect, Department of Health and Human Services.
- Korbin, J., & Spilsbury, J. (1999). Culture and child neglect. In H. Dubowitz (Ed.), *Neglected children: Research, practice and policy* (pp. 69–88). Newbury Park, CA: Sage Publications.
- Massey, D. S., & Denton, N. A. (1993). *American apartheid: Segregation and the making of the underclass*. Cambridge, MA: Harvard University Press.
- Melton, G., & Barry, F. (Eds.). (1994). *Protecting children from abuse and neglect*. New York: Guilford.
- National Research Council. (1993). *Understanding child abuse and neglect*. Washington, DC: National Academies Press.
- Nelson, B. (1984). *Making an issue of child abuse*. Chicago: University of Chicago Press.
- O'Toole, R., Turbett, P., & Nalepka, C. (1983). Theories, professional knowledge, and diagnosis of child abuse. In D. Finkelhor, R. Gelles, G. Hotaling, & M. Straus (Eds.), *The dark side of families: Current family violence research* (pp. 349–362). Beverly Hills, CA: Sage.
- Polansky, N., Ammons, P., & Weathersby, B. (1983). Is there an American standard of child care? *Social Work*, **28**, 341–346.
- Polansky, N., Chalmers, M. A., Bittenwieser, E., & Williams, D. (1981). *Damaged parents*. Chicago: University of Chicago Press.
- Polansky, N., DeSaix, C., & Sharlin, S. (1972). *Child neglect: Understanding and reaching the parent. A guide for welfare workers*. New York: Child Welfare League of America.
- Polansky, N., & Williams, D. (1978). Class orientations to child neglect. *Social Work*, **23**, 397–401.
- Portwood, S. (1999). Coming to terms with a consensual definition of child maltreatment. *Child Maltreatment*, **4**, 56–68.
- Rose, S., & Meezan, W. (1995). Child neglect: A study of the perceptions of mothers and child welfare workers. *Children and Youth Services Review*, **17**, 471–486.
- Rose, S., & Meezan, W. (1996). Variations in perceptions of child neglect. *Child Welfare*, **75**, 139–160.
- Sampson, R., Raudenbush, S., & Earls, F. (1997). Neighborhoods and violent crime: A multilevel study of collective efficacy. *Science*, **277**, 918–924.
- Sternberg, K., & Lamb, M. (1991). Can we ignore context in the definition of child maltreatment? *Development and Psychopathology*, **3**, 87–92.
- Straus, M., Gelles, R., & Steinmetz, S. (1980). *Behind closed doors. Violence in the American family*. Garden City, NY: Anchor Books.
- U.S. Advisory Board on Child Abuse and Neglect. (1993). *Neighbors helping neighbors: A new national strategy for the protection of children*. Washington, DC: US Government Printing Office.
- Zimet, G., Dahlem, N., Zimet, S., & Farley, G. (1988). The Multidimensional Scale of Perceived Social Support. *Journal of Personality Assessment*, **52**, 30–41.

RÉSUMÉ

Objectif: Cette étude avait pour but de préciser comment des parents de différents quartiers définissent les mauvais traitements et la négligence et en perçoivent l'étiologie, ces quartiers ayant différents profils de risque en tant que lieux d'origine de signalements pour mauvais traitements et négligence.

Méthode: 400 parents ont été choisis venant de 20 quartiers ayant des profils différents. Dans le contexte d'une longue entrevue, on leur a demandé de produire une liste de comportements qu'ils considéraient être des mauvais traitements ou de la négligence et de coter, sur une échelle de 10 points, 13 facteurs pouvant mener à la maltraitance.

Résultats: Bien que l'emphase sur une ou l'autre définition variait selon les parents, (les parents d'origine afro-américaine incluait les comportements négligents et les parents d'origine européenne incluait les comportements d'abus physiques), on a remarqué une cohérence importante au niveau des comportements définis comme abus ou négligence. On a noté 4 facteurs pouvant expliquer presque les deux tiers des variances: La pauvreté et la dissociation familiale, les toxicomanies et le stress, le manque de valeurs morales et familiales et la pathologie individuelle. Ces facteurs s'associaient aux conditions qui prévalaient dans les quartiers, à la façon dont les individus percevaient leur quartier et leurs caractéristiques personnelles.

Conclusions: Les programmes communautaires qui cherchent à prévenir ou améliorer les conditions de maltraitance doivent reconnaître à la base comment des populations diverses définissent les mauvais traitements et se les expliquent.

RESUMEN

Objetivo: El estudio forma parte de una investigación más amplia sobre los barrios y el maltrato infantil. Su objetivo es determinar la forma en que padres que viven en barrios con diferentes perfiles de notificaciones de maltrato infantil, definen el maltrato y abandono infantil y perciben su etiología.

Método: Se seleccionó una muestra de padres ($n = 400$) de manera sistemática en una serie de barrios ($n = 20$) con diferentes perfiles en las tasas de notificaciones de situaciones de riesgo para el maltrato infantil. Como parte de una entrevista más amplia, se les hicieron a los padres una serie de preguntas de manera que se generara una lista de conductas que definirían como maltrato y/o abandono infantil y se les pidió que puntuaran una lista de 13 factores etiológicos en una escala de 1 a 10 en base a la percepción que ellos tenían de su importancia para la existencia de maltrato infantil.

Resultados: Se observó una marcada congruencia en el catálogo de conductas que los padres definen como maltrato y abandono infantil. No obstante, se apreció que los padres afroamericanos incluyeron más conductas de abandono y los padres europeo-americanos incluyeron más conductas de maltrato físico. Se identificaron cuatro factores que explicaron casi dos tercios de la varianza en las explicaciones etiológicas de los padres: (1) pobreza y desorganización familiar, (2) abuso de drogas y estrés, (3) falta de valores familiares y morales, y (4) patologías individuales. Estos factores estuvieron relacionados con las condiciones de los barrios, las percepciones de los individuos sobre el barrio y características individuales.

Conclusiones: Los programas comunitarios que tienen como objetivo prevenir y reducir las situaciones de maltrato infantil deben tener en cuenta la forma en que las poblaciones que van a recibir los recursos definen el maltrato infantil y porqué ellos creen que ocurre.