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REPRESENTING AND INTERVENING IN CHILD ABUSE

LAW, STATISTICS, COMMUNITY

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Key words: Child abuse, history, media, law, statistics, community

Abstract

Child protection in Australia is reportedly in a state of crisis. The media regularly provides commentary on escalating rates of child abuse, deaths of clients in child protection services and the massive Federal Government intervention into Northern Territory Indigenous communities, all of which point to a child welfare system in crisis. In Victoria, legislative changes to child protection have introduced new procedures for managing the state's child protection services. Among its objectives, the legislation seeks to promote stable long-term care for children through timely and more efficient family interventions. This paper places these events in the historical context of recurring shifts in how the problem of child abuse is calculated and acted upon. It draws particular attention to the evolution of new forms of power deployed in relation to children, families and communities, which delimit the scope of law while promoting individual responsibility for the underlying arrangements affecting child maltreatment.

A bounded, contingent population

‘Crisis kids exposed to low-lives’, screams the headline in another Sunday newspaper’s expose of child protection in Victoria, Australia (*Sunday Age*, Melbourne, 11 February, 2007, p.1). The article follows the death of a four-month-old boy apparently assessed by protection workers as not-at-risk, even though both his parents were addicted to crystal methamphetamine. Past and present workers in the Department of Human Services (DHS) and welfare agencies speak on condition of anonymity about children in care being exposed to drugs, crime and sex in the State’s residential units. ‘Resi-kids’ are children are taken into residential care usually because they have not been able to be satisfactorily placed in foster care. According to DHS workers, these children are both at-risk and risky. They are often housed with older children - ‘experienced criminals by the time they left the system’- while a child may be the sole resident of a unit because of behaviour or mental health problems. Children can be exposed to long-term residents with severe mental-health problems who self-harm, including body-slashing and attempted suicide. They are also exposed to ‘drug-taking, absconding, chroming and skipping school ... police are regularly called to the units, staffed by shift workers earning \$15 an hour (non-penalty rate), who can be threatened, intimidated and attacked by the DHS “clients”’ (p.2). The workers accuse DHS of ‘...interfering too heavily in children’s lives, of ignoring the experts who work most closely with them, and promoting a bureaucratic and defensive culture paralysed by a fear of damaging publicity’. In defence of the system, Victoria’s Child Safety Commissioner argues that working in residential care is one of most difficult types of work one can be involved in:

... People working in these situations can be extraordinarily skilled and heroic. They put themselves in a position of being in a house with an angry, sometimes violent 16-year-old. You can't physically restrain them, because that is against the law, or lock them in their room, because that is against the law. So they go. It is a no-win situation (*Sunday Age*, p.1).

A few months later, in more headline-grabbing news - 'Children lost in court squeeze' - a judge reports that the Children's Court complex is 'bursting at the seams' with the family division taking over court space from the criminal division to try to handle the workload. Waiting times for final child protection hearings has doubled since 2003. One experienced lawyer said that the court is unique in that parents turn up not knowing the material against them: 'A box is ticked - the child has suffered "physical harm" or "emotional harm"' (*The Age*, Melbourne, 3 June 2007, p. 17). At a national level are reports that the system of child protection throughout Australia is 'coming apart at the seams' due to the level of demand produced by notifications of child abuse (*The Weekend Australian*, 19-20 April, 2008, p.21). At least one social policy experts agrees: 'The child protection system in Australia is in crisis, and nobody knows what to do about it' (Katz, 2008, p.3). Every developed country is experiencing a similar issue - a gruesome child death or the discovery of a paedophilia ring, a media story leading to a commission of enquiry, leading in turn to a department restructure and new policies and programs ... then another event. Katz quotes an *Australian* newspaper opinion piece - 'Protect children, not their no-hoper parents' - which advocates an end to 'welfarist' policies and a return to removing children from inadequate parents. This is

published in the same week that Federal Parliament offers an apology to the stolen generations (Katz, 2008, p.3).

One response to all this might be to criticise the sensationalising and ‘moral panic’ elements in a Sunday newspaper’s treatment of ‘crisis kids’ and the apparent epidemic of child abuse. Child protection is a highly charged and emotive issue. Its newsworthiness lies not in the intensive day-to-day case work with children and families, but rather with images of scarred children in the hands of a system barely able to cope with a constantly escalating workload. Another might be to recognise that indeed the children described above are victims, not just of ‘the system’ but many also of the crime of physical and sexual violence. As Ian Hacking (1991) reminded us, child abuse is the worst of private evils. We must protect as many children as we can. We want to discover and help those who have been hurt. There is a familiarity with this shaping of a social problem and with our responses to it. Yet another response might be motivated by suspicion of an over-regulation of children by state-employed officials which may violate respect for family privacy and the rights of parents and children to confidentiality, as has been mooted in the UK’s Identification, Referral and Tracking system (Munro, 2004). There is a strong argument that radical reduction of privacy can only be justified if it will make a significant difference to the well-being of children. It draws attention to the shortcomings of early intervention programs that target very large numbers of children and families, without reliable indicators about which particular children will require protection, or without sufficient resources to provide early intervention to those who need help (Ainsworth, Pollock and Ramjan, 2007; Munro, 2004, pp. 181-2). Finally, we

might wish to question the notion of crisis itself. Like the contemporary crisis of ‘law and order’, are we not subject to crises as a tool of regulation – an implement to authorise government intervention (Hogg and Brown, 1998)? It is on this ground that we may consider the posing of the problem of child abuse as productive of particular kinds of power, and where specific discursive formations around law, statistical calculation and community become tactically aligned to achieve certain governmental objectives.

The practice of ‘historical ontology’ (Hacking, 2004) invites us to consider distinct categories of children and particular institutional sites as coming into being over time, often egg-ing each other on. The field of child welfare has been significantly shaped by changing definitions of childhood itself, and also the category of child abuse. Categories of persons come into being in tandem with how we count them. Hacking argues that people are also affected by what we call them and by the classifications within which they can describe their own actions and make their own constrained choices: ‘(p)eople act and decide under descriptions, and as new possibilities for description emerge, so do new kinds of action’ (Hacking, 1991, pp. 254-5). These processes apply to both the abused and the abusers. We might suggest that categories of person and particular bounded populations of children come into being as a consequence of managing problems in child and family welfare. For example, the classification of children needing protection has closely interacted over time with the classification of offending children; well into the 20th century children were charged with an offence of being ‘in need of care and protection’ and were brought before the same court as

offenders. Offending and neglected children shared a common knowledge base and institutional apparatus:

While recent reforms have attempted to separate welfare cases from criminal cases the nexus between the two still exists because the mundane daily management of the abused child and the abusive child relies on similar forms of knowledge and power (Carrington, 1993, p. 3).

So perhaps we should not be surprised that the present description of our category of resi-kids – clients of the welfare system - contains descriptors sometimes associated with offending children. More generally, the present might appear less familiar and taken-for-granted if we take into account the historical contingencies that have come to make up this present and the categories of persons who occupy it. In this respect, it will be important to elaborate on the shifting needs of an administration for particular kinds of knowledge of the population it seeks to govern.

Counting child abuse

Firstly, what do the statistics tell us in broad terms about levels of child abuse notifications and substantiations, and out-of-home care (including foster-care and residential care). The published statistics require careful analysis. There are difficulties comparing rates of care between the states, because each state and territory has its own legislation, policies and practices in relation to child protection. But some broad trends in the provision of out-of-home care have been identified. Aggregate numbers of children in care throughout Australia rose from 18,880 children in 2002 to 25,454 in 2006, an increase of 35 percent (Australian

Institute of Health and Welfare, 2007, p. xi). The rate of Aboriginal and Torres Strait Islander children in out-of-home care was over 7 times the rate of non-Indigenous children (p.xi). Rates of residential care (the 'resi-kids') numbers are still relatively small, with just over 1000 children in this kind of care across Australia.

Curiously, while Victoria is recording the highest rate of children placed in residential care, the rate of detention in juvenile justice facilities is the lowest of all states. In 2005, Victoria recorded a rate of 11.8 per 100,000 of the 10-17 population in juvenile detention, compared with 29.7 per 100,000 in New South Wales and an Australia-wide rate of 27.2 per 100,000 (Australian Institute of Criminology, 2005, p.5). While NSW has nearly three times the rate of juveniles in detention, Victoria has three times the rate of juveniles in residential care (7.2 percent of all children in out-of home care) compared with NSW (2.6 percent) (AIHW, 2007, p. 52; AIC, 2006, p. 11). There are hazards in interpreting any kind of inverse relationship between the populations in residential care and juvenile detention, or something akin to Penrose's law regarding a supposed inverse relationship between the size of prison populations with that of mental hospitals.¹ For the purposes of this paper, the point is that differences in the distribution of bodies in particular sites may relate to policies and administrative practices; that workers in residential services in one state may be caring for a population that in another state might well be housed in juvenile detention. But overall the numbers of persons in either system are relatively small. In 2005, NSW had 217 persons aged 10-17 in juvenile detention, down from 611 in 1981, while Victoria had 63 persons,

down from 334. 'Resi-kids' in NSW numbered 258 in 2006, compared with 347 in Victoria, even though NSW had twice the number in care overall (9896), compared to Victoria (4794).

Further issues of interpretation relate to the increased rates of out-of-home care in all the Australian states, and the significant contribution of particular states and territories to this overall increase. NSW, Queensland, Australian Capital Territory and the Northern Territory all record significant increases, a doubling over 10 years to 2006, and in the case of NT a four-fold increase. Victoria experienced lower growth rates in out-of-home care over this period, compared to most other states. Newspaper reports claimed that between 2003-4 and 2005-6, protective orders in the Children's Court of Victoria rose from 26,077 to 32,526, an increase of 25 percent in just three years (*Age*, 2/06/07, p.1). The spike in the number of cases, according to the president of the court, Grant J, was caused by DHS auditing of its cases in one large region, and also because new child protection legislation had prompted DHS to bring more cases to court. However, the most recent AIHW report published in 2008 (AIHW Child Protection, 2006-7), has number of substantiated cases in NSW at 37,094, while Victoria came in at a mere 6828 cases. This represents a slight reduction in Victoria and a five-fold increase in NSW, over a seven year period (see Table below). The apparent startling difference between Victorian and NSW figures for substantiated cases of child abuse occurred due to differences in counting: during 2006-7 all notifications in Victoria were referred to a 'Child First' team, consisting of child protection officers and community organisations supplying family services, who then decided which support services were required and whether child protection should be involved at all. In less than a year, Victorian

child protection was being held up as a model system for the rest of Australia (*The Weekend Australian*, 19-20 April, 2008, p.21).

Table: Notifications and Substantiations of Child Abuse, Australia, 1999-2000 - 2006-7

| Number of notifications, states and territories, 1999–2000 to 2006–07 | | | | | | | | | |
|--|------------|------------|------------|-----------|-----------|------------|------------|-----------|--------------|
| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Total |
| 1999–00 | 30,398 | 36,805 | 19,057 | 2,645 | 15,181 | 422 | 1,189 | 1,437 | 107,134 |
| 2000–01 | 40,937 | 36,966 | 22,069 | 2,851 | 9,988 | 315 | 794 | 1,551 | 115,471 |
| 2001–02 | 55,208 | 37,976 | 27,592 | 3,045 | 11,203 | 508 | 801 | 1,605 | 137,938 |
| 2002–03 | 109,498 | 37,635 | 31,068 | 2,293 | 13,442 | 741 | 2,124 | 1,554 | 198,355 |
| 2003–04 | 115,541 | 36,956 | 35,023 | 2,417 | 14,917 | 7,248 | 5,325 | 1,957 | 219,384 |
| 2004–05 | 133,636 | 37,523 | 40,829 | 3,206 | 17,473 | 10,788 | 7,275 | 2,101 | 252,831 |
| 2005–06 | 152,806 | 37,987 | 33,612 | 3,315 | 15,069 | 13,029 | 8,064 | 2,863 | 266,745 |
| 2006–07 | 189,928 | 38,675 | 28,580 | 7,700 | 18,434 | 14,498 | 8,710 | 2,992 | 309,517 |

Source: Child Protection Australia 2006-7 Canberra, Australian Institute of Health and Welfare, p. 21

Number of substantiations of notifications received during the relevant year, states and territories, 1999–2000 to 2006–07

| Year | NSW | Vic | Qld | WA | SA | Tas | ACT | NT | Total |
|-------------|------------|------------|------------|-----------|-----------|------------|------------|-----------|--------------|
| 1999–00 | 6,477 | 7,359 | 6,919 | 1,169 | 2,085 | 97 | 233 | 393 | 24,732 |
| 2000–01 | 7,501 | 7,608 | 8,395 | 1,191 | 1,998 | 103 | 222 | 349 | 27,367 |
| 2001–02 | 8,606 | 7,687 | 10,036 | 1,187 | 2,230 | 158 | 220 | 349 | 30,473 |
| 2002–03 | 16,765 | 7,287 | 12,203 | 888 | 2,423 | 213 | 310 | 327 | 40,416 |
| 2003–04 | n.a. | 7,412 | 17,473 | 968 | 2,490 | 427 | 630 | 527 | n.a. |
| 2004–05 | 15,493 | 7,398 | 17,307 | 1,104 | 2,384 | 782 | 1,213 | 473 | 46,154 |
| 2005–06 | 29,809 | 7,563 | 13,184 | 960 | 1,855 | 793 | 1,277 | 480 | 55,921 |
| 2006–07 | 37,094 | 6,828 | 8,441 | 1,233 | 2,242 | 1,252 | 852 | 621 | 58,563 |

Source: Child Protection Australia 2006-7, Canberra, Australian Institute of Health and Welfare, p.23

Again, administrative purposes and procedures explain the large differences between Victoria and New South Wales and would explain the ever increasing rates of notification of child abuse in NSW compared with falling rates in Victoria. In NSW, for example, police are the largest source of child protection reports to the Department of Community Services.

Police operating procedures state that a police officer is required to report any child

associated with a domestic violence incident. Interpreted literally, this means that children who normally reside in the household, but who may not have observed an incident or its consequences, may be the subject of a child abuse notification. Police and other reporters are required to report under mandatory reporting legislation: ‘... there is the suggestion that the significant financial penalty, currently \$22,000, has led to risk adverse behaviour and accordingly a far greater level of reporting that might otherwise be the case’ (NSW Department of Community Services, 2008, p. 14).

The reporting of child abuse by authorised agencies like the Australian Institute of Health and Welfare is careful to show what is actually being measured. AIHW points out that using administrative data to portray what is happening to children is problematic - ‘it is only a measure of the activity of child protection departments’ - and not of the extent of child abuse and neglect in the community (Kelly and Kos, 2005, p.1). The data are heavily influenced by legislative changes across Australia, which can make comparisons across jurisdictions and across time problematic, even within states. However, its authors point out that it is the only data collected, and the only method currently available. The Institute claims that although the data do not give a true reflection of what is happening to children, the numbers are ‘startling’ and are needed to ‘raise the profile of this extremely important and essential service’:

Overall, there is a trend of increasing notifications and substantiations. There are many possible reasons for this, the first being that maybe the prevalence is increasing. But also, as already mentioned, it maybe due to media and government public awareness campaigns the general public is becoming more aware of the issues, and

are more likely to report the abuse. As more professionals and organisations are being mandated to report child abuse and neglect, this logically increases the number of notifications (Kelly and Kos, 2005, p3).

Here we see an attempt by the counting agency to reference its results against the publicity and media responses of a child abuse 'crisis', which is itself built upon an interpretation of various counting agencies reports. But the Institute also argued that the changing definition of child abuse is the main factor in understanding rising rates of out-of-home care. In the past 10 years, this is most likely the reason for increasing identification of abusive situations:

The focus of child protection in many jurisdictions has shifted away from the identification and investigation of narrowly defined incidents of child abuse and neglect towards a broader assessment of whether a child or young person has suffered harm. This broader approach seeks to assess the child's protective needs (AIHW, 2006:6).

Finally, then, let us move towards an analysis of the relations between an administration's need to know a population in order to manage it, and shifts in the sites of counting.

Family, community, and the 'child's protective needs'

The streets of Sydney are infested by a large number of vagrant children, or children entirely neglected by their parents; and some of the revelations of juvenile depravity are appalling and almost incredible. According to the evidence of an intelligent

officer of the Metropolitan Police, the traffic in female prostitution has extended its meshes around unhappy children scarcely above the age of infancy, and the closest ties of nature are converted into the bonds of their perdition. Cases of such extreme diabolicalness it is hoped are rare even among those precipitated into courses of early wickedness, but it can no longer be doubted that such cases are to be found among the many hideous forms of ignorance, squalor, and sin, that fill some of the lanes and alleys of this wealthy city (New South Wales Select Committee (Parkes) Report, 1859-60, p. 1272).

Following the Parkes Report new legislation was drafted throughout the country to deal with both offending and neglected children. In Victoria, the major legislative landmark was the *Neglected and Criminal Children's Act* of 1864 which established the institutional system of industrial schools and reformatory schools, backed up by orphanages (Victoria, 1864). The immediate impact of the 1864 legislation was to swell the numbers of children counted as neglected, and the subsequent overcrowding then compromised whatever moral and educational roles these institutions were to serve. But most of the criticism focussed on how larger institutional provision failed to provide children with the experience of living in families, and how it led parents to abandon their children and thus encourage family break-up and social dependence (Jaggs 1986, pp. 36-38). There was a dramatic about-face in policy terms over the next few decades, from large barrack-type accommodation to a policy of 'boarding out' or foster care. The shift was designed to offer children a happy, healthy, secure childhood in 'respectable' homes. Boarding-out would encourage the working classes to be 'better parents' because the penalty for recalcitrance might be a complete and

permanent separation from their children (McCallum 1993). The idea of the family was taken up as a solution to the failure of institutional care to solve the problem of wayward children.

‘Extreme diabolicalness’ continued. In the first decade of the 20th century child welfare organised by religious bodies and ‘ladies societies’ and was taken under the aegis of the new Children’s Courts and became gradually professionalised (see also Donzelot, 1979). There was a strong continuity between adult and juvenile administration of the habitual criminal, and government and philanthropy (justice administration and child welfare) had clear lines of connection rather than separation (McCallum, 2004). These networks were the precondition for the collection of ‘social information’. The object of knowledge was the child and its habits, collected as part of a strategy to manage the risk of the neglected child becoming the criminal adult. Agencies responsible for the collection of this knowledge were the police and the welfare officer (philanthropist and then probation officer) whose activities took the form of deliberate social prophylactics aimed at securing the child from a criminal future. By the 1940s, once a doctor had been placed in charge of the Children’s Court Clinic, categories of pathological parents appeared in reports submitted to the court at the time when the magistrate was to decide on the disposal of the child (McCallum and Laurence, 2007).

Besides medical oversight of the offending and neglected, a new category of person found itself attached to the hospital during the 1950s and 60s in the form of the ‘battered baby’. Colorado paediatricians under Kempe began what the Australian doctor Oates (1985, p. 44)

described as ‘... a period of awareness of child abuse’, as though this term existed as an ahistorical given. The concept of child abuse appeared in the context of battered babies, and importantly also shifted the focus to a medical pathologising of the perpetrators, most often the parents. As Hacking explained, ‘[C]hild abuse ... began with doctors in 1962, and among the opening assertions was that abusing parents are sick and in need of help’ (Hacking, 1991: 287). Wurfel and Maxwell (1965) wrote an early study of the ‘battered child syndrome’ in South Australian, while in Victoria the Birrell brothers (1966) referred to the curiously-named ‘maltreatment syndrome in children’, both predicated on the assumption that parents needed help (Picton and Boss, 1981: 116). Bob Birrell, a paediatrician, and his brother John Birrell, a police surgeon, are credited with publishing the first academic paper on child abuse in Victoria. It seems their contention that child maltreatment was a widespread problem in Victoria received little support from many of their colleagues, and their suggestion to set up a child protection unit within the hospital was treated almost as a joke (Yule, 1999: 446). By the early 1980s researchers claimed there were no reliable studies that could give even approximate estimates of the extent of child abuse in Australia. (Picton and Boss, 1981: 120).

The conditions of possibility for a shift of counting was the removal of the doctor as the chief arbiter of what constituted abuse and the spreading out of reporting responsibilities into ‘the community’, the rudiments of which were laid down in Victoria nearly 30 years ago. The *Community Welfare Services Act* (1979) provided the underpinning for fundamental changes in the way child matters were to be handled in law. Instead of a psychiatrist making

the final decision about how a case involving a child is to be disposed of, the new *Act* made it possible for a social worker to oversee that decision. The word community appeared in the name of the *Act* and in the name of the new government Department. The shift replicated similar moves in the UK: the post-World War 2 consensus around a scientific-medical approach to social casework with families was challenged during the 1970s by several highly-publicised child death inquiries in which the vigilance and intervention of social workers was repeatedly highlighted. Parton et al. (1997) argue that the notion of risk was established into the criteria for social work intervention in families in the UK through the 1989 *Children Act*: 'that the child concerned is suffering, or is likely to suffer significant harm'. Writing about the history of 'risk management', Parton et al (1997) claim that the Act established the risk of harm, its accurate prediction, and the need to establish thresholds of harm as essential to the practice of child protection (Kemshall, 2002: 72). In Victoria, the ultimate authority of medicine and psychiatry in decisions over children was removed, and instead social workers in the State Department of Community Services could make a final recommendation to a court. The by-word was that the child would be managed in the community.

Now that the site of counting had moved beyond the clinic and the hospital and spread across a whole cadre of professional 'mandatory reporters', official rates of child abuse increased exponentially. By 2003, a government-ordered review claimed that if the current administrative arrangements for child protection were maintained, one in five children in the cohort born in Victoria in 2003 would be notified for suspected child abuse or neglect during

their childhood or adolescence; child protection could no longer be an ‘emergency service’ (VDHS, 2003: vi). Populations came under the gaze of an administration concerned to map the functioning of all families and assess ‘protective needs’. The crisis of numbers related to changing management practices rather than just a changed or expanded definition of abuse. A Victorian Department of Human Services (2002) study made an assessment of families who had repeated re-notifications and re-substantiations, showing regular patterns of low income, substance abuse, mental health issues and sole parenting. These circumstances could not be properly counted by incident-driven child protection processes (AIHW, 2006:7). Two-thirds of substantiations of child protection notifications concerned children neglected or suffering from emotional abuse. Cashmore (2001:4) summed up the shift in emphasis observed in other states’ legislation:

The definitions of ‘abuse’ and ‘neglect’ in recent legislation in NSW and Queensland now focus on ‘harm’ and ‘risk of harm’. The aim is to shift the emphasis from a forensic investigation of allegations of abuse or neglect to a broader assessment of whether a child or young person has suffered harm or is likely to suffer harm. While a forensic approach tries to determine whether acts of commission (abuse) or omission (neglect) have occurred, an assessment approach is more concerned with whether parents are able to protect their children and meet their needs.

It follows that a shift away from ‘acts of commission or omission’ would lead to a de-centering of law and legal process in the management of protective needs (Hunt, 1992). Rather, family service systems would place more emphasis on working voluntarily with

parents over longer periods, compared with earlier restrictive and coercive approaches.

Policy documents leading to the new Victorian *Children, Youth and Families Act (2005)* stress the need for a spectrum of responses to families' needs, while retaining the capacity to apply 'tough sanctions'; they need to work in partnership with other agencies, and they work best when people see the system as procedurally fair and treat people with respect.

Importantly,

child protection regulation should build on, or interact more with, parents' own 'private regulation', or self-regulation. Government regulation should respond to how effectively private regulation is working *and can be encouraged to work better* (VDHS, 2003: viii *emphasis in original*).

Reforms in the US and UK have also stressed a greater focus on permanency for children in out-of-home care. A major negative impact of the regulatory approach is the effect of regulation on children who are given a number of short-term placements. 'Intermediate level responses' seek agreement with families and other relevant parties on a plan and necessary support measures to keep the child safe, and hence avoid formal statutory child protection intervention and court proceedings. So there are to be more preventative and diversionary strategies, less resort to statutory and court processes, earlier intervention and permanent care arrangements, and a greater opportunity for children to become part of a family by acting earlier to provide permanent care. Policy advocates explain that this will be achieved through building community partnerships, and encouraging vulnerable families to access support by providing more responsive and flexible services. These strategies will be supported by an expanded community infrastructure. In the VDHS (2003) *Final Report of the Child Protection Outcomes Project*, community infrastructure is described as Community Child

and Family Support Centres in local areas, locally coordinated ‘community based’ services including child protection, family support, health, police, schools, and the development of ‘intermediate level responses that allow for dialogue and deliberation with families outside of formal legal processes’ (VDHS, 2003: xiv).

Conclusion

We commenced a discussion of policies and policing of child abuse by entering the room of present strained relations in Victoria’s residential accommodation for children in need of care and protection. The aim was to convey the levels of contingency in the activity in counting, including accounting for the numbers of children placed in care, and also the kind of residential placement. While there is evidence that expanded definitions led to a wider net of abusive behaviours and conditions, there is good evidence that it is the change in the knowledge requirements of an administration that has produced large increases in reporting of child abuse. At the same time, the social workers understood court processes and a heavily professional engagement as a constraint on the successful integration of the problem child and an amelioration of poverty and social dislocation that was associated, in their studies, with the appearance of both child neglect and offending. In the late 1970s ‘community’ was posed as a solution to a series of individual events of abuse. By the 2000s community was the site of counting and also the grid upon which to assess self-government. Its varied conceptions allowed for community to include teachers, doctors, social workers, and police (Bauman, 2000).

Recent additions to this armoury are the soldiers and police in remote areas of the Northern Territory. We have suggested that the avalanche of printed numbers (Hacking, 1982) produces categories in which people might be thought and might think about themselves. In their classification by recording authorities, the phenomenon of child abuse is rendered into categories of individual actions: 'physical abuse', 'sexual abuse', 'neglect', 'emotional abuse'. The foregoing are perpetrations. They involve illegal acts committed against children for which any reasonable person could have nothing but abhorrence. This is reinforced in the rendition of child abuse provided in newspaper reports. The cross-referencing of counting agencies and the media underpinned notions of crisis that simply reproduced much older notions of 'extreme diabolicalness'. In the recent *Australian* newspaper report on the Mullighan inquiry into child abuse in remote Aboriginal communities in South Australia, the newspaper gives five columns to STD's, sexual assault, rape, non-indigenous men sexually offending against young Aboriginal boys, pornography, bribes for underage sex, etc (*The Weekend Australian*, 19-20 April, 2008, p.21). Removed from this problematic are phenomena that cannot be thought of as resulting from the responsible actions of individuals, such as poverty and social disintegration.

Notes

¹ Gunn writes: 'The idea of Penrose's law has remained alive because one of his findings - an inverse relationship between mental hospital patient numbers and prisoner numbers - has proved remarkably robust...Biles & Mulligan [1973] studied the relationship between the daily average number of people in prison in the six states of Australia, the number on probation, the number in mental hospitals, the police/public ratio and crime rates...the data are consistent with the view, also canvassed by Penrose, that the relative use of mental hospitals or prisons for the segregation of deviants *reflects different styles of administration*'.
[Emphasis added]

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