

Lessons From History: Parents Anonymous and Child Abuse Prevention Policy

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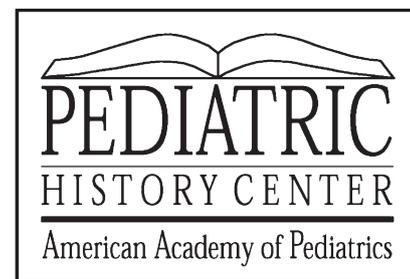
Child abuse policy has long been a politically contentious topic in the United States. This article points to a critical moment in the mid-1970s in which a small organization, Parents Anonymous, helped shape a paradigm for understanding child abuse and its causes. This approach would remain influential for decades despite contradictory evidence. Although researchers in numerous studies from the 1960s and onward have suggested that racial and social inequality contribute significantly to serious child injury,¹⁻³ the advocacy work of Parents Anonymous was instrumental in drawing the discussion away from social determinants of health. This article examines the historical origins of the perception of child abuse as being an equal-opportunity social ill related solely to parental mental health rather than to socioeconomic inequities. It uses this historical background to suggest the need for a discussion of the role of social inequities as being at the crux of child abuse prevention.

In early 1973, Minnesota Senator Walter Mondale developed legislation to authorize funds for child abuse prevention and treatment. This would become the Child Abuse Prevention and Treatment Act (CAPTA) signed by President Richard Nixon in early 1974, and it has enjoyed

decades of bipartisan support. One of the reasons for CAPTA's popularity was that it intentionally circumvented discussions of race and class despite available evidence indicating the importance of these social factors.⁴

Although then-contemporary research had found that child abuse was more common in low-income families, Mondale actively pushed an agenda presenting child abuse as a scourge of all walks of society. This is evident in the bill's 1973 hearings. When renowned child abuse researcher David Gil testified on the higher incidence of child abuse in poor and minority families, Mondale pushed back, leading Gil to concede that child abuse indeed also happened in middle-class families. Mondale quickly added, "This is not a poverty problem; this is a national problem," making his agenda clear.⁵

Mondale had numerous reasons to avoid framing child abuse as a consequence of poverty, including his previous legislative experience.⁶ President Nixon, a veto-prone president, had used his veto power in 1971 to bring down Mondale's Comprehensive Child Development Act after it had passed both chambers.⁷ This act would have provided for universal, federally subsidized early child care. Accompanied by charges that Mondale had wanted to



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“Sovietize” America, this failure left Mondale cautious about proposing new legislation related to the family.⁸ Additionally, public enthusiasm for antipoverty measures had declined significantly after the riots of the late 1960s.⁹

Parents Anonymous, an advocacy group, bolstered Mondale’s views of the origins of child abuse. Founded in 1969 by a young California woman known as Jolly K and her psychiatric social worker, Leonard Lieber, this group quickly positioned itself as an important shaper of child abuse policy.¹⁰ Its membership was mostly white, educated, married mothers.¹¹ Most did not physically abuse their children but were worried about verbal abuse and sought to improve their parenting skills. The group’s activities varied by chapter but consisted of self-help meetings as well as public advocacy.^{12,13}

Jolly K’s 1973 articulate testimony at the CAPTA hearings demonstrated how well Parents Anonymous’s work fit with Mondale’s agenda. In fact, Mondale later cited her testimony as having “taught [him] what child abuse was about.”¹⁴ Her narrative was compelling, an abuser who had repented. She cited her own experiences as an abused child; her daughter, she testified, “reflected her negative self.” She asked pointedly, “was hurting your child ‘homicide or extended suicide?’”⁵

This pop-psychology framework resonated with the popular discourse of the time. Although some clinicians warned against the medicalization and “psychologization” of child abuse, they were the minority. It was simpler to believe that only seriously disturbed people could do something as serious and disturbing as abuse children. Interventions to improve the emotional health of parents were seen as key in preventing child abuse.

In no small part thanks to Jolly K’s testimony, Mondale succeeded in passing CAPTA. Parents

Anonymous benefitted as well, for the new act provided funding for the organization. Rapid growth followed. At the time, Parents Anonymous had 60 loosely knit chapters, mostly in California, with main headquarters located in Jolly K’s kitchen offering peer support.¹¹ Within a few years, hundreds of chapters had popped up in states throughout the nation. At the core, Parents Anonymous was a volunteer-staffed hotline and a support group that met regularly. The group also worked indefatigably to raise awareness of child abuse and publicize the group. The members played an important role in redefining child abuse and broadening its meaning in their media appearances, publications, and outreach. In particular, they highlighted how abusers were emotionally unstable and needed treatment and support.

The media readily adopted this narrative of Parents Anonymous as a treatment for abusive parents. Positive profiles appeared in high-impact newspapers throughout the nation. Jolly K’s own troubled life story, revealed piece-meal in the popular media, helped solidify the connections in the public mind between emotional instability and child abuse. Jolly candidly divulged that she had suffered from child abuse herself, had been harshly treated in institutions as a child, and had worked as a prostitute, experiencing rape and later a dangerous abortion.¹⁵ These graphic details portrayed Jolly K in all her vulnerability. Child abuse was seen to be caused by a cycle of poor parenting of now-abusive parents and could only be resolved by improving mental health and providing peer support.

Poverty, inequality, and discrimination, themes that had been evident in the assessments of child abuse in the 1960s, were pushed aside. Parents Anonymous worked with the media to promote

its perception of child abuse, which recognized the following 6 forms: physical, sexual, verbal, and emotional abuse, and physical and emotional neglect. It attempted to portray abuse as omnipresent in American society; any parent could be abusive, and all forms of abuse were equally damaging.¹⁶

Yet, questions arose as to Parents Anonymous’ expenditures given that most of the federal dollars it received did not directly benefit individual parents or children. In 1976 and 1977 combined, Parents Anonymous received >\$500 000 in federal funding from the Office of Child Development. Payment to individuals, in particular salaries and consulting, were by far the highest item in the budget expenses. In 1976, from a total grant of \$350 315, nearly \$100 000 was spent on salaries and an additional \$67 292 on consulting fees.¹⁷ Many of these paid consultants were group members.¹⁸ The bulk of the grant money to Parents Anonymous was being used to pay individuals for services that did not directly impact at-risk children. Although the financial audit found no improprieties, these spending priorities raised eyebrows among some District of Columbia policy makers, and the group’s entire board of trustees resigned.¹⁹

In 1981, Jolly K was relieved of all her duties with Parents Anonymous. Her termination letter thanked her, noting only that the board had voted not to renew her contract for services. A letter found in the same archival folder sheds light on this decision. A woman who had participated in a Parents Anonymous workshop wrote that Jolly K had blamed her for her husband’s abusive behavior and had called her 6 adopted children “ni—ers.”²⁰ Shortly after receiving her termination letter, Jolly K committed suicide. Her obituary noted that she had been

despondent over differences with Parents Anonymous and its decision not to renew her contract.²¹ Parents Anonymous continued to be active over the decades, maintaining an active agenda of support groups, public advocacy, and community activism.²²

There are a number of ways to consider the lessons from this brief story about Parents Anonymous and its role in the 1970s debate on child abuse. I propose to view it as a story in which the pursuit of palatable social policy led to a rejection of existent evidence. In the mid-1960s and early 1970s, a small group of researchers pushed to show that child abuse was more prevalent in low-income and minority communities, linking it to social inequities, and accordingly, argued for interventions to decrease poverty as a means for primary prevention.^{1,23} Their voices were effectively silenced as the dominant narrative became a story of a class-free epidemic of sick parents abusing their children, helpless to stop the cycle of abuse. Presenting child abuse as an equal-opportunity social evil and tying it to individual psychopathology helped distance it from unpopular antipoverty interventions of the 1960s and resonated with America's popular embrace of social psychology.²⁴ The legacy of this approach is evident in child welfare today, which suffers from significant racial and socioeconomic disparities.²⁵

Learning from history, pediatricians can work to ensure families have access to support services to help them weather times of great stress and material need, which are periods known to increase the risk of child maltreatment. Clinicians should not shy away from addressing the social conditions that can increase the risk for child abuse (particularly joblessness, crowding, food insecurity, and

racial discrimination) in addition to providing important behavioral guidance for struggling parents. History shows us that focusing solely on the individual mental health of abusive parents misses an important opportunity to intervene and improve the safety of children, both at the individual and the policy-making level.

ABBREVIATION

CAPTA: Child Abuse Prevention and Treatment Act

REFERENCES

1. Pelton LH. Child abuse and neglect: the myth of classlessness. *Am J Orthopsychiatry*. 1978;48(4):608–617
2. Rangel EL, Cook BS, Bennett BL, Shebesta K, Ying J, Falcone RA. Eliminating disparity in evaluation for abuse in infants with head injury: use of a screening guideline. *J Pediatr Surg*. 2009;44(6):1229–1234; discussion 1234–1235
3. Wood JN, Medina SP, Feudtner C, et al. Local macroeconomic trends and hospital admissions for child abuse, 2000-2009. *Pediatrics*. 2012;130(2). Available at: www.pediatrics.org/cgi/content/full/130/2/e358
4. Hoffman E. Policy and politics: the Child Abuse Prevention and Treatment Act. *Public Policy*. 1978;26(1):71–88
5. Child Abuse Prevention Act, 1973. Hearings before the Subcommittee on Children and Youth of the Committee on Labor and Public Welfare, United States Senate, Ninety-third Congress, First Session on S 1191, Congress of the US. Washington, DC: Senate Committee on Labor and Public Welfare
6. Nelson B. *Making an Issue of Child Abuse: Political Agenda Setting for Social Problems*. Chicago, IL: University of Chicago Press; 1984
7. Raz M. *What's Wrong With the Poor? Race, Psychiatry and the War on*

Poverty. Chapel Hill, NC: UNC Press; 2013

8. Brademas J. The condition of education in America: a legislative perspective. *J Edu*. 1977;159(2):69–76
9. O'Connor B. *A Political History of the American Welfare System: When Ideas Have Consequences*. Lanham, MD: Rowman & Littlefield; 2004
10. MacFarlane K, Lieber L. *Parents Anonymous: The Growth of an Idea*. Washington, DC: Department of Health, Education, and Welfare, Office of Human Development Services, Administration for Children, Youth and Families, Children's Bureau, National Center on Child Abuse and Neglect; 1978:8
11. Wheat P. *Hope for the Children: A Personal History of Parents Anonymous*. Minneapolis, MN: Winston Press; 1979:358
12. Bernstein S, Martinson L, Welsh M. *Parents Anonymous: A Study of a Voluntary Self-Help Organization for Child Abusers [master's thesis]*. Los Angeles, CA: University of Southern California; 1973
13. Mothers Anonymous: Therapy That May Lessen Child Abuse. *New York Times*. November 5, 1971; 30
14. Mondale WF. Child abuse: issues and answers. *Public Welf*. 1974;32(2):9
15. Barthel J. A cruel inheritance. *Life Magazine*. 1979;2(6):73–83
16. Cummings J. Child Abuse Parley at Rikers is Scored. *New York Times*. Sunday June 12, 1977;44
17. Peat, Marwick, Mitchell & Co. Certified Public Accounts, to Parents Anonymous Board of Directors, Reports November 30, 1976 and December 21, 1977, Box 3 Folder 8, Parents Anonymous Records, 1970-1982. Social Welfare History Archives, University of Minnesota
18. Fritz, M. in Regional Coordinator Manual, July 1975, explains that Regional Coordinators are paid by a monthly consultant fee. Box 2, Folder 18, Parents Anonymous Records
19. Letter, Drena Van Alen to Ellen Hoffman, February 23, 1977, Box 3 Folder 6, Parents Anonymous Records

20. Letters dating May 20, 1980 and October 20, 1980, Box 1, Folder 6, Parents Anonymous Records
21. Parents Anonymous Founder a Suicide. Courier-news (Bridgewater, NJ). 1980;20
22. About Us. Available at: www.parentsanonymous.org. Accessed March 16, 2017
23. Gil DG. Primary prevention of child abuse: a philosophical and political issue. *J Pediatr Psychol*. 1976;1(2):54–57
24. Herman E. *The Romance of American Psychology*. Berkley, CA: University of California Press; 1995
25. Roberts D. *Shattered Bonds: The Color of Child Welfare*. New York, NY: Basic Books; 2002

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