Public Policy and the Influence it Holds

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PUBLIC POLICY AND THE INFLUENCE IT HOLDS

by

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Public Policy and the Influence it Holds

Intro

The policy that a society creates is a reflection of that population’s history, culture, and values. Policies are a set of rules and guidelines that a society creates based upon the history, culture, and values that they share; however there is often much that members of a society do not share. This can be reflected within policy in various different ways: ambiguous language, elimination of certain topics, addition of irrelevant topics, etc. This occurs in nearly every kind of policy written (Wedel et. Al, 2005). In the state of Iowa, the public policy created to govern child maltreatment, specifically neglect, reflects this dissent. Public perceptions of taboo topics like neglect and poverty influence the way they are presented in the state’s public policy, leading to what appears to be an unproductive discussion upon the legalities of child maltreatment.

The concept of child maltreatment is not a new idea; many individuals within public health, philanthropy, and criminal justice have been combatting these behaviors for years. Despite this, it wasn’t until 1962 when Kempe’s article, The Battered Child Syndrome was published that the U.S. public began to discuss what until then was commonly believed to be a private matter: the upbringing and punishment of children (Krieger, 2008). The questions that arose from these revelations included how does one go about protecting these ‘battered’ children, and where does the responsibility lie?
After the idea of the ‘battered child’ was introduced, much of the stigma surrounding child maltreatment appeared to withdraw. At this point the ‘un-nameable’ was named; child maltreatment became less of a taboo topic, and this led to the start of discussions to improve the health of children and families (Krieger, 2002). Following the release of The Battered Child Syndrome, many public child maltreatment organizations began to appear. At this point, much of the United States saw a rise in federal and locally funded organizations, such as Child Protective Services, founded in 1972, as opposed to those funded by religious and independent organizations that dominated the previous century (Lancy, 2011). With the increase in federally funded programs to combat child maltreatment the public policy pertaining to this topic became more prevalent as well.

When analyzing public policy, specifically within an anthropological mindset, it is important understand how a society and its values are reflected within. Moving on, it is also important to understand that a society can also learn from their own public policy. In understanding this relationship, anthropological analysis provokes the question

“What role do policies play in the fashioning of modern subjects and subjectivities?

...how do policies shape a community’s ideas about human beings and being human?”

(Wedel et. Al, 2005)

Looking ahead to further discussion, the relationship between society, its values, and the public policy that governs will be explored within the context of child maltreatment in the U.S. and the state of Iowa. Drawing on concepts in the anthropology of policy, linguistic analysis, and perceptions of poverty and child neglect throughout the U.S., this paper will discuss how cultural norms in the state of Iowa have manifested themselves within ambiguous and unproductive public policy on child maltreatment.
**Background**

Child maltreatment acts as a sort of “umbrella” term, and encompasses several different parental behaviors. A standard definition of child maltreatment defines it as all forms of emotional and physical maltreatment and exploitation that result in potential or actual harm upon a child (World Health Organization, 2017). Child maltreatment covers both physical abuse and neglect.

Looking further into child abuse, this phenomenon is defined as “willful acts that harm a child” (Fontes, 2005). These willful acts are considered to be acts of commission, meaning they are intentional and deliberate; they have an intended purpose (CDC, 2017). Sexual abuse, physical abuse, and emotional abuse are all considered to be forms of child abuse.

Contrasting with child abuse is child neglect, or acts of omission. An act of omission is considered to be the failure to provide for a child’s basic needs, or a failure to protect a child from harm (CDC, 2017). Beyond this basic definition, child neglect is a practice that is not easily defined, as there are many different parental behaviors that are considered to be neglectful. Adding further to uncertainty surrounding child neglect is that neglect itself is something that is not easily detectable. Signs of child abuse are often obvious to a bystander, much to do with the fact that the behaviors are intentional; this is not the case with neglect. Due to its omissive nature, the consequences of neglect upon a child are often invisible to the world around them (Winton and Mara, 2001). A standard definition of neglect follows,

“The failure of a parent or other person with responsibility for the child to provide needed food, clothing, shelter, medical care, or supervision to the degree that the child’s health, safety, and well-being are threatened with harm” (Children’s Bureau, 2009).
This definition gives a general idea of how professionals recognize when a child is truly being neglected. Moreover, neglect can be described further within three different categories; physical neglect, educational neglect, and emotional neglect. In total, 17 definitions can be made to understand and classify the various types of child neglect witnessed (Winton, 2001).

The central child abuse prevention program present in the state of Iowa is the Prevent Child Abuse Iowa Campaign (PCAIowa), an organization that has been active for more than 40 years. They describe their organization as follows,

“Prevent Child Abuse Iowa’s mission is to lead child abuse prevention efforts in Iowa through: Advocacy - advances the cause of child abuse prevention among legislators, administrators and professionals, Awareness - informs the public about the effects of child abuse and methods to prevent it, Assistance - offers organizational development, program guidance and grant management to local partners” (PCAIowa, 2017)

Throughout their existence, PCAIowa have promoted several programs that strive to eliminate child abuse and promote the education of this phenomena to community members. These have included a joint study with Adverse Childhood Experiences (ACEs), the Iowa Child Abuse Prevention Program (ICAPP), and a project called Community Based Child Abuse Prevention (CBCAP). These three projects all focus upon understanding child psychology and development, creating social networks for parents, and promoting community based responses to child abuse.

Looking further into the concept of community based tactics to prevent child maltreatment, it is vital to understand how maltreatment, specifically neglect, and the occurrence poverty are related. When looking at poverty solely in an economic sense, the United Nations uses the term ‘income poverty.’ Income poverty is when “a family’s income fails to meet a federally established threshold,” a threshold established by their home country. (UNESCO, 2016). Using
this definition, the U.S. has created a series of income thresholds that consider salary relative to family size (Table 1)

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*Table 1: Source: U.S. Bureau of Census, 2015*

Overall, 14.7% of people in the United States live below the established poverty level, and specifically in Iowa, this rate is slightly below the national average, at 12.2% (United States Census Bureau, 2015).

Examining again the definition of child neglect, it is observed as a parent’s failure to provide their child with adequate food, shelter, clothing, etc. Moreover, poverty is seen as one having insufficient food, shelter, clothing, etc. When considering both of these definitions, it is clear to see how the two are related. Often, many children who are reported as having been neglected wouldn’t be in that position if their family weren’t living in poverty (Duva and Metzger, 2010).

Considering this, when working to prevent child maltreatment, especially neglect, poverty is something that should be at the forefront of the discussion. Speaking specifically about this idea Dr. L. Fontes, who’s research goals are in achieving cultural competency in the mental health, social service, and criminal justice systems, states,
“Eliminating poverty would undoubtedly go a long way in reducing child abuse and neglect by reducing family stress, providing wider support networks, and increasing resources for all families” (Fontes, 2005).

The ways in which Fontes suggests fighting poverty (i.e. reducing stress, providing wider support networks, and increasing resources) fall under the category of structural interventions, meaning these interventions are focused above the individual level and instead target communities and populations. These structural interventions can also include practices such as removing barriers that prevent participation in the labor market, building life skills, and promoting economic development (Torjman, 1998). Essentially, this research suggests that by using structural interventions, populations can eliminate poverty in their community.

PCAIowa is currently using the concept of structural interventions to prevent and eliminate child maltreatment in Iowa; however, they have done very little to address the topic of child neglect, something that accounted for 94% of all child maltreatment cases in Iowa between 2010 and 2013 (DHHS, 2010-2013). Given that child neglect and poverty are highly related and that structural interventions are a key method of eliminating poverty, it can be inferred that structural interventions have the potential to eliminate child neglect as well. As utilizing structural interventions is PCAIowa’s main method of eliminating child maltreatment it is both concerning and intriguing that they offer very little information on child neglect as a whole.

**Method**

The primary mode of investigation used within this study was that of a literature review. Literature in the theory of anthropological analysis of policy was used to shape the interpretation of the studied policies, specifically work by Wedel, Shore, and Wright. Understanding the
federal and state public policy and the PCAIowa policy within this framework allowed for the researcher to identify how the themes of child neglect and poverty are evident both in these policies and the society that created them. A linguistic analysis of these policies was also done, utilizing Standard English definitions of various words and phrase as defined by Merriam-Webster of Oxford dictionaries. The societal views of poverty and child neglect are discussed using current research, including Lee’s work on the reproduction of poverty in New York City’s Child Welfare System and the Center for Disease Control’s study and program in Adverse Childhood Experiences (ACEs).

First considered were the societal and political definition of child maltreatment and associated topics. Much of this information was gained via textbook and teaching materials. Additionally, child maltreatment was also explored in a more cultural context by drawing on sources related to the social science, primarily sociology and anthropology.

Next to be considered was the current data available concerning the occurrence of child maltreatment in Iowa. This was researched both at the state and federal levels. The federal data was collected from the yearly “Child Maltreatment” report published by the Children’s Bureau in the U.S. Department of Health and Human Service. It should be noted that although this is considered a yearly report, there is a delay in publishing the data. For example, the data for the year of 2013 was published in 2015, the data for 2014 was published in 2016, and so on. Data concerning child maltreatment within the state of Iowa was gathered primarily through reports published by PCAIowa. This data was compiled and prepared by PCAIowa, but was collected by the Iowa Department of Human Service.

Last to be considered was the policy surrounding child maltreatment, specifically neglect. This was studied at both the federal and state level. The federal policy was provided by the Child
Welfare Information Gateway, funded, again, by the U.S. Department of Health and Human Services. Likewise, the Iowa policy was published by the Iowa Department of Human Services. The PCAIowa website was also used to understand the child maltreatment policy practiced by the state of Iowa.

**Results**

Like many regulations in the U.S., the federal government mandates a nation-wide standard upon which individual states base their laws upon. Child neglect as defined by the federal government is as follows, “An act or failure to act which presents an imminent risk of serious harm” (Child Welfare Information Gateway, 2017). Following this standard, the state of Iowa creates their own definition of child neglect. First, it should be noted that Iowa doesn’t use the traditional terms within child maltreatment. Instead of using the blanket term of “child maltreatment,” the state refers to “child abuse.” Within child abuse, the state of Iowa does not use “child neglect,” instead calling this term the “denial of critical care.” The state definition of denial of critical care is wrote,

"'Denial of critical care’ is defined as the failure on the part of a person responsible for the care of a child to provide for the adequate food, shelter, clothing or other care necessary for the child's health and welfare when financially able to do so or when offered financial or other reasonable means to do so.” (Iowa DHS, 2017)

It should be noted that within this definition, Iowa recognizes the relationship between child neglect and poverty, but controls for the influence of poverty by eliminating it from the discussion. Instead, the policy focuses solely upon families who live above the poverty line and those receiving financial assistance.
Considering Iowa policy further, there are 10 total categories within their child abuse policy. In addition to the denial of critical care (i.e. neglect) there are some more universally accepted categories of child maltreatment, including physical abuse, mental injury, and sexual abuse. In addition to these, there are several more specific categories, including allows access to obscene materials, allows access to a registered sex offender, child prostitution, and bestiality in the presence of a child. Lastly, there are several categories devoted to addressing drug use. These consist of the presence of illegal drugs in a child’s body, and the manufacturing or possession of a dangerous substance.

Beyond governmental policy on child maltreatment, the policy and goals of the PCAIowa organization were researched. Looking at PCAIowa’s website, when discussing their mission and defining child abuse the first statement alludes to child neglect:

“Failure to provide adequate food, shelter, clothing or other care necessary for a child's health and well-being.” (PCAIowa, 2016)

Although neglect is the first piece of information offered when discussing the definition of child abuse, the PCAIowa website makes little further mention of this. Considering the data PCAIowa has provided regarding child abuse rates, maltreatment types, and the demographics within the state of Iowa, neglect is not included. This differs significantly from national documentation, where neglect is at the forefront of much of data analysis (DHHS, 2013). In understanding how the PCAIowa defines child maltreatment, they address all the maltreatment topics in the Iowa state public policy, with the exception of bestiality. A major difference between PCAIowa’s policies on child maltreatment as opposed to the state’s public policy is that PCAIowa refers to child neglect as opposed to “denial of critical care”.
Despite PCAIowa provides child abuse policy similar to the state’s public policy, when presenting current datasheet titled “Types of Child Abuse” they only address four maltreatment categories. These categories are physical injury, sexual abuse, the presence of illegal drugs, and meth manufacturing. Neglect, or “denial of critical care,” is noticeably absent from this report and all others provided on their website.

Looking deeper into PCAIowa’s data upon statewide demographics, they include a data set related to children living within poverty. However, nowhere else does PCAIowa discuss poverty rates in the state of Iowa or on the nationally. Moreover, there is nothing mentioned throughout their website that discusses how child maltreatment, specifically neglect, is related to the instance of poverty. Stated earlier, a significant way to decrease child maltreatment would be to decrease the rate of childhood poverty as accomplished by structural interventions, for example. PCAIowa focuses very heavily on eliminating child maltreatment through structural interventions, working on initiatives like Connections Matter and the Community Based Child Abuse Prevention (CBCAP) programs. However, this organization fails to introduce the connection between maltreatment and poverty, and structural intervention’s role in reducing poverty. Although PCAIowa’s main goal is to eliminate child maltreatment in the state of Iowa, they fail to make the vital connection in the relationship between child neglect and poverty.

PCAIowa also addresses all of these categories on their website (aside from bestiality.) Although PCAIowa does provide information addresses what is considered child abuse in Iowa, when presenting current datasheet titled “Types of Child Abuse,” they only address four categories. These categories are physical injury, sexual abuse, the presence of illegal drugs, and meth manufacturing. Denial of critical care is noticeably absent from this report, and any other report provided on their website.
Discussion

Anthropology of Policy

When considering public policy from an anthropological standpoint, one must understand that policy is a significant topic in understanding the way societies are organized. Policies are described as “[regulating] the conditions of our entire [human] existence” (Wedel et. Al, 2005). In today’s world policies shape the way in which people live their lives, or in other words “almost every aspect of contemporary life is now subject to the implementation of policy…” (Wedel et. Al 2005). Policy determines anything from the age at which one can drive at to where one can build their home to the countries one can enter and exit. Looking deeper into policy, it is described that they “encapsulate the entire history and culture of the society that generated them” (Shore and Wright, 1997). Put simply, policies are the rules and principles of action chosen and adopted by a given population. Policies can come from anywhere; they can be decided and practiced by individual families, businesses, or non-governmental organizations, etc. (Merriam-Webster, 2017; Shore and Wright, 1997). Concerning this discussion, only policies developed and implemented by a government will be discussed, specifically the US federal government and the Iowa state government. Moving forward these policies will be referred to as ‘public policy.’

Context and Relevance

As it impacts almost every aspect of modern existence, public policies use language that appears to be neutral, efficient, and effective (Wedel et. Al, 2005). At its heart, governments are trying to create public policies that help those that they govern. Specifically in the U.S. where the political system identifies itself as a true ‘republic,’ public policies are being developed by
people who have been voted into political office by their peers. The entire government is built this way meaning politicians’ jobs are dependent upon the support of their peers. As President Lincoln spoke, the U.S. government is “…a government of the people, by the people, for the people…” (Lincoln, 1863). Considering all of this, it is fair to assume that public policies are supported by the majority of those that it governs; that public policy is simple, clear, and reflects the culture of the society that created them.

However, considering public policies further it is seen that they often arise from specific occurrences within specific contexts (Wedel et. Al, 2005). Instead of considering the whole history of the society that they govern, public policies are often developed in response to a specific occurrence that the governing body feels needs to be addressed. This is demonstrated in the Iowa state child abuse public policy: an entire category of that policy is focused upon a minor being present in the occurrence of bestiality. Yes this reflects a cultural rejection of both bestiality and exposing minors to sex acts within the U.S., yet has “bestiality in the presence of child” ever been relevant enough to warrant an entire category of public policy to be created concerning it? Current studies estimate the rate of occurrence of bestiality in the U.S. to be between 1 and 4% (Beetz, 2004), or infrequent in occurrence. This demonstrates that public policy can be oddly specific, and appear completely irrelevant to general life within a society.

By addressing very broad topics as well as very specific topics, public policy reflects the values and culture of a society. However, when a public policy addresses a very particular occurrence it ends up addressing a topic that society doesn’t often think about, topics that a society may not even consider applicable to individuals in the community. Looking specifically at Iowa, the current public policy on child maltreatment addresses categories that could be considered broad and generally applicable to most of the population, but also topics that seem
very specific and irrelevant to greater society. For example, there is a category in this public policy that addresses physical abuse, something already discussed to be regularly occurring within society Iowa and the US. Contrasting with this, the Iowa public policy in child maltreatment also addresses significantly less frequent offenses, like bestiality.

**Iowa Public Policy and Child Neglect**

In the United States, state governments are able to create their laws on varying topics (e.g. child maltreatment) given they adhere to the standard set by the federal government. Again, concerning child neglect, the federal standard is as follows, “an act or failure to act which presents an imminent risk of serious harm” (Child Welfare Information Gateway, 2017). Returning to the textbook definition of child neglect, again it is noted that child neglect is an ambiguous and complex topic that is not easily defined.

The standard set by the U.S. federal government is incredibly vague. Beginning with “an act or failure to act…,” no definition what this act consists and who is committing it is given. Moving onto “…which presents an imminent risk of serious harm.” The kind of harm is not addresses, whether it be physical, mental, emotional, etc. Not defining the type harm implied by this definition leaves the decision up to the states’ governments. One state may choose to address all physical harm in their public policy, another may highlight both emotional and mental harm, etc. For example, many definitions of child neglect include lack of or prevented access to education. Could this be considered an imminent risk of serious harm? Given to the lack of clarification in the federal standard this matter is left for individual states to decide.
Denial of Critical Care

When creating the state public policy concerning child neglect, Iowa appears to stray relatively far from this federal standard. To begin neglect is not identified as neglect, instead it is called ‘denial of critical care.’ This alteration in language has two implications. First, by replacing 'neglect' with “denial of critical care” the Iowa state public policy suggests that there is something wrong with calling neglect as what it is. By removing the word neglect from the discussion about child neglect, Iowa state public policy ascribes a negative connation to the word. This doesn’t suggest that neglecting a child is bad, but instead it perpetuates the idea that the entire topic of child neglect is taboo and shouldn’t be talked about.

The second implication this holds is that Iowa state public policy assumes the “denial of critical care” can mean the same thing as child neglect. As stated earlier neglect is hard define; one vague definition can be split up into more than 15 different topics. These topics range anywhere from not adequately giving one’s child enough food to not sending one’s child to school. When Iowa public policy refers to denial of critical care, what is considered ‘critical care?’ On the state of Iowa’s Department of Health and Human Services (DHS) website, it is written that critical care consists of eight sub categories: provision of adequate food and nutrition, clothing, shelter, health care, mental health care, ability to meet the emotional needs of the child, and the ability to provide proper supervision of a child. The last of the eight subcategories is added separately from this group of definitions, and adds that critical care also pertains to children being confined to a car when the driver is driving recklessly or while intoxicated.

When defining these critical care subcategories and what the denial of them consists of many of the descriptions follow the same format. For example,
“… Failure to provide adequate food and nutrition to such an extent that there is danger of the child suffering injury or death.” (Iowa DHS, 2017)

For half of these subcategories, the Iowa DHS states the denial of these critical care categories is punishable if it results in injury or death. Here there is a clear and definable threshold as to what denial of critical care means. Denial of critical care occurs in these cases when there is evidence of injury or death; however, in other sub-categories the grounds as what denial of critical care is less concrete.

When considering the categories pertaining to mental health care and meeting the emotional needs of the child, the Iowa DHS states that denial occurs when ‘substantial impairment in the child’s ability to function [is observed].” Yet, a clear boundary is not given as to what ‘substantial’ and ‘ability to function’ can consist of. Substantial is defined as, “of considerable importance” (Oxford Dictionary, 2017). This definition is ambiguous; what one may define as considerable and important is different from another. There is a lack of consistency in the way that different people, and populations of people define these words.

Further, this logic holds true in considering the ambiguity that surrounds defining what a child’s (average) ability to function. First, one must ask what average behavior is for a child at a given age, and second they must be able to understand how a child’s observed behavior deviates from this defined average. In both of these instances, the public policy utilizes vague language that can have multiple meanings depending upon the assessor.

As a result of using this ambiguous language in state public policy, Iowa allows the occurrence of denial of critical care to be debatable when it pertains to child’s access to mental health care and emotional fulfillment. Unlike earlier categories where the denial of critical care is observed within a concrete boundary (i.e. serious injury or death), within these categories the
threshold for deciding at what point the state should intervene is unclear and left to personal judgement. As a result of this ambiguity, children within the state of Iowa are not treated equally when it comes to defining whether or not maltreatment is present.

Looking further into the language used in this public policy, again, the term neglect is replaced with ‘denial of critical care.’ The implications associated with the phrase ‘critical care’ have been discussed above; however using the verb ‘denial’ brings its own insinuations as well. As discussed earlier, child neglect differs from child abuse in the sense that it is an act of omission, or a failure to act. This indicates that a parent or guardian is neglectful when they fail to provide for or protect a child. This appears to follow the trend of the phrase ‘denial of critical care;’ defined by the state of Iowa as “… the failure on the part of a person responsible for the care of a child…” (Iowa DHS, 2017). Essentially, parent or guardian is failing to provide a child with the care deemed critical by the state of Iowa. Although this definition clearly outlines the omissive nature of these acts, it is necessary to look deeper into the phrase ‘denial of critical care.’ This expression must also be assessed by considering how it relates to the acts of commission that are commonly associated with child abuse, as opposed to neglect.

Differing from acts omission, acts of commission are willful, intended actions. Although “denial of critical care” is defined as a failure to act by a guardian, the use of the word ‘denial’ contradicts this omissive description. By definition, denial is the “refusal to satisfy a request or desire” (Merriam-Webster, 2017). Moreover, to refuse can be defined as “to not allow someone to have or do something” (Merriam-Webster, 2017). Considering the definitions of both denial and refusal, it is understood that within ‘denial of critical care,’ the act of denial is deliberate and intentional. It is a willful act, much like an act of commission. Essentially, although by the state
of Iowa’ definition, “denial of critical care” reflects an act of omission, the phrasing of this statement makes it appear to be commissive in nature.

Yet, a further argument could be made against this in the sense that there is quite a bit of ambiguity within the standard definition of child neglect. Yes, child neglect is by textbook seen as consisting of acts of omission, but often when neglect is defined there is an additional statement that notes neglect is incredibly difficult to explain. Given the ambiguous nature of child neglect, it is easy to see how its definition can get misconstrued within Iowa public policy. However, the question that arises is should the public within Iowa allow for this to be overlooked?

The dividing feature of child abuse and neglect can be found when differentiating these two categories by their omissive and commissive natures. Yes, child neglect is hard to define, but the one feature that remains secure is its omissive nature. By using language in its public policy that allows for the standard ideas surrounding child neglect, or as they put it, ‘denial of critical care,’ to deviate from what is standardly accepted, the state of Iowa presents an image of child neglect that differs for what society already understands it as. In presenting the idea of ‘denial of critical care,’ and defining this way the state of Iowa allows for the possibility of influencing how its society currently perceives as child neglect. Designing and implementing public policy that deviates from what is already understood as child neglect creates an environment for social change, for the redefinition of social norms. It remains unclear at this point, however, if this deviation will hold a positive or a negative impact.

Moreover, by choosing to redefine child neglect with the phrase ‘denial of critical care,’ the child maltreatment public policy upheld by the state of Iowa takes an already disputed topic that is fraught with conflicting viewpoints and manages to further misconstrue it from its origins.
Child neglect is a confusing practice to define, that much is known. Yes, the standard definition that the federal government dictates for the United States is simple at best and completely vague at worst, but it holds true to the most basic definition of child neglect: a failure to provide for one’s child. Although Iowa’s public policy of “denial of critical care” does cover this simple definition of neglect, it refuses to identify neglect as what it is. Instead, neglect is replaced with a new original phrase that contradicts itself before it is even defined.

Further, once the public policy begins to define what this phrase means and looks like, its parameters are ambiguous and left to the judgement of individuals who may know very little about the details of each distinct case. By replacing child neglect with “denial of critical care” Iowa public policy further distances itself from any standardization as to what child neglect consists of, leaving judgment for these cases to rest upon individuals who, although may mean well, are strangers to each of the families they encounter.

**Poverty and Denial of Critical Care**

Now that is it understood as to how the word denial can be inferred as an intentional act, the role of poverty within neglect must discussed. When child neglect is influenced by poverty it isn’t a case of denial, the intentional act of not providing one’s children, but instead a child is considered to be neglected as the result of a parent or guardian being unable to provide for them financially. Although a parent or guardian may not actively be neglecting, or maltreating, their child, as a result of their current financial status they are unable to provide their child with adequate food, shelter, clothing, etc. This parent may want to provide their child with all of these resources, however they are unable to due to circumstance.
The “denial of critical care” public policy adopted by the state of Iowa appears to understand the relationship between poverty and neglect, and even addresses this relationship in its definition. Discussed briefly in the results, when defining “denial of critical care” the state of Iowa public policy mentions that it is a failure to provide for a child by a parent or guardian; however, it further goes on to state that a parent or guardian would be denying critical care when they fail to provide despite being “financially able to do so or when offered financial or other reasonable means to do so” (Iowa DHS, 2017). This shows that the state of Iowa is trying to be mindful of not only the link between poverty and child neglect, but also the struggles families living in poverty my face. However by addressing poverty in this way, the policies eliminates it from further discussion.

Although it may seem odd that poverty is accounted for by not addressing it, when considering public perceptions of poverty one can begin to understand its absence. Poverty has been, and a remains to be a taboo subject in U.S. culture. There are many different opinions surrounding what it means to live in poverty, who specifically lives in poverty, and who ‘deserves’ to not live in poverty (T. Lee, 2017). As a result of the differing opinions on this taboo subject, poverty is simply eliminated from the discussion of child neglect, or ‘denial of critical care,’ in Iowa public policy.

Perceptions of Poverty

Poverty is a condition that can persist in certain populations. It is often passed down from parent to child, from generation to generation. Recent research has found that “children who grow up [in poverty] are 3.5 times more likely to [experience poverty] as an adult” (Musick and Mare, 2006). When considering the inheritance of poverty across generations, and the
relationship between poverty and child neglect, it can be assumed that neglect something that persists in these populations as well given their ambiguous relationship.

Dr. D. Lancy has conducted extensive research in the emerging field of the anthropology of child rearing and childhood. When discussing how children are valued in society, specifically in cases of mothers living in poverty and the occurrence of infanticide and abandonment, Lancy claims that “the community must value the life and emotional wellbeing of its experienced, productive adult females over any potential value a tiny infant might have” (Lancy, 2011). He goes on to site other research in which an author suggests that mothers are forgiven for abandoning their children because “society failed them” (K. Lee, 1994).

Again, poverty is something that persists across generations, and by inference, neglect persists as well. Lancy suggests that society as a whole recognizes this trend; however chooses to do nothing about it. Instead, he proposes that bystanders ultimately understand that society is blame for the occurrence of poverty, and by association neglect. Lancy goes on to suggest that bystanders who witness the behavior he described, child abandonment, would immediately understand it isn’t the parent’s fault they were unable to care for their child, but instead society’s for allowing poverty to persist in certain populations.

This idea is refuted by the research done by Dr. T. Lee. When doing fieldwork within the New York City child welfare system, Lee found that the majority of families involved were living in poverty. Following the logic stated by Lancy, the parents who have become involved in this system and lost custody of their children wouldn’t necessarily face the brunt of the blame; instead this blame would redirected to social structure within New York. This pattern of thought doesn’t hold true when considering the results of Lee’s ethnography.
Instead, Lee found that many parents within the NYC child welfare system felt as though they were being punished into complying with the demands of family court. They felt as if they had to go through extreme, and sometimes unnecessary, measures meet the requirements that the family court system deemed necessary to regain custody of their child. Further, many families who do become involved with the child welfare system found themselves worse off financially by the time they made their way out of family court. The families cited losing days of pay, and even their jobs, in order to attend their court hearings. Instead of helping families who live in poverty and giving them the assistance they need to make sure their children weren’t being neglected in the eyes of the state, the NYC child welfare system instead perpetuated the reproduction of poverty in the families who are involved (T. Lee, 2017).

Poverty is perceived in different ways world-wide. Even in the U.S. perceptions of poverty vary significantly across regions. Despite this variance, today a common perception of poverty held throughout the U.S. is the idea that individuals are to be blamed for the occurrence of their own poverty. Dr. J. Chafel’s discusses this in his work in the societal view of poverty. Chafel writes that society as a whole has “a predisposition to ‘blame the victim,’ [and this] provides moral justification for the disenfranchisement of millions from the economic mainstream” (Chafel, 1997). Further, the author suggests that individuals within a society tend to hold the belief that those who experience poverty are responsible for their circumstances. These findings further add to the support of the idea that those in a society blame an individual for their poverty, not the society as Lancy proposes.

Looking back on Lee’s research, it not only refutes Lancy’s stance in the perception of poverty in his analysis of the anthropology of childhood, but it also demonstrates how poverty can continue to persist within populations. A major finding of Lee’s work was that families who
become involved within New York City’s child welfare system, families often already living poverty. After months and years of working alongside the family court system to regain custody of their children many parents lost a significant amount of their income, pushing already struggling families further into poverty. Many parents reported that after exiting the family court system they qualified for and relied on government assistance programs. In effect, due to this reproduction of poverty, families found themselves in circumstances that their parenting could be considered neglectful. As demonstrated many times, neglect and poverty go hand in hand. Living in poverty leads to parents making decisions on whether or not to spend the money they do have on certain necessities, like food, shelter, or healthcare. As a result of the persistence of poverty, there is going to be a persistence of neglect.

**Poverty, Child Neglect, and Iowa Public Policy**

In the instance of the child welfare system in NYC, the connection between child neglect and poverty is clearly identified. Additionally, looking at the way the public policy and family court system govern child abuse and neglect it is evident that poverty plays a focal role in the outcome of a family involved in this system. Again, each state chooses how they would like to govern child maltreatment based on the federal standard. Unlike Iowa, the State of New York doesn’t address poverty when they define child abuse and neglect (New York OCFS, 2017). Yet this doesn’t mean that if the public policy doesn’t address poverty, then poverty will play a prominent role in a child welfare system. Conversely, even if poverty is addressed in public policy, like in the state of Iowa, this doesn’t mean that poverty will no longer continue to influence child neglect.
As a result of the differing opinions on this taboo subject, poverty is simply eliminated from the discussion of child neglect, or ‘denial of critical care,’ in Iowa public policy. Why Iowa chose to write the public policy in this way is a deeply nuanced question. A question that would take intensive research to answer, perhaps by completing in-depth interviews with policy makers, conducting ethnographic research studying how local, state, and national governments work with each other and their constituents. That being said, it must again be acknowledged that a policy reflects the values and the culture of the society that it governs. The flaws Iowa’s “denial of critical care” public policy reflects the short comings of society within the state of Iowa. The public policy avoids using the word neglect, and this could be related to fact that child maltreatment is still considered to be a taboo topic to some. Further, eliminating poverty from the discussion of “denial of critical care” demonstrates that society recognizes that poverty exists, but it still remains to be a cultural taboo. Society doesn’t want to address these cultural taboos, so they are absent for the public policy that the society makes.

**Adverse Childhood Experiences**

As already discussed, poverty and child neglect are related; however due to the public perceptions of both neglect and poverty being taboo topics, it has been difficult to find this relationship addressed in a constructive way. Recognizing this gap in knowledge, a group of researchers conducted a study on group of adults at a San Diego medical center (Felitti et. Al, 1998). This study consisted of survey aimed at determining,

“The relationship of health risk behavior and disease in adulthood to the breadth of exposure to childhood emotional, physical, or sexual abuse, and household dysfunction during childhood.” (Felitti et. Al, 1998)
This study would later become known as Adverse Childhood Experiences (ACEs).

Currently, ACEs is a CDC funded study and approach to addressing child maltreatment and its lingering effects. ACEs focuses on highlighting the childhood experiences that can have a negative impact on the development and later life of an individual, specifically looking into health outcomes and risk taking behavior. ACEs uses both professionally and self-rated surveys to address three different adverse childhood experience topics: abuse (physical, emotional, and sexual), neglect (physical and emotional), and household dysfunction (mental illness, incarcerated relative, mother treated violently, substance abuse, and divorce). The scoring of this survey suggests the likelihood that an individual will be at a higher risk for health (physical and mental) and behavioral problems later in life. Essentially, ACEs suggests that the more adverse events one faces in their childhood and developmental years, the more likely they will be to experience these negative health outcomes and risk taking behaviors later in life. (CDC, 2017; NPR, 2015; Felitti et. Al, 1998)

In 2012 the ACEs study was brought to Iowa and research was completed in 2016. Prevent Child Abuse Iowa supported this study and worked closely with researchers to implement a community engagement program in response to the findings of the ACEs study. This program is known as ‘Connections Matter,’ and is presented as “…an initiative designed to engage community members in building caring to connections to improve well-being” (PCAIowa, 2017). This program hopes to use one’s community as a positive resource for those who are currently experiencing or have experienced adverse childhood experiences as defined by the ACEs study (PCAIowa, 2017).

In addition to addressing the customary topics within child maltreatment, abuse and neglect, ACEs also recognizes a relationship between a child’s home life and how it may
influence their development. By addressing topics within a household dysfunction area, ACEs is able to address the adverse effects of events that might not be considered maltreatment under federal and state public policy; factors not necessarily related to acts of commission or omission by a parent. These other factors include divorce or having a member of one’s family incarcerated; however, it should be noted that these household dysfunction topics in no way address poverty.

There is no standard ACEs survey, instead the various studies that have been done in ACEs provide definitions of each of adverse event categories and offer their own surveys. In one specific ACEs survey, the BRFSS ACE Module, there are a series of 11 questions focused upon addressing the three different topics mentioned earlier. Yet, out of all 11 of these questions, there were no prompts concerning neglectful behavior that one might have experienced in their childhood. Looking further into ACE’s disconnect in addressing neglect, using an ACEs survey presented by NPR, but created by the ACEs program, demonstrates how neglect can often be confused with poverty. This survey contains a collection 10 brief yes or no questions. When completing this survey, one question asked is,

“Before your 18th birthday, did you often or very often feel that…You didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you? Or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?”

(NPR, 2015)

This series of questions is clearly inquired to address the occurrence of neglect in one’s childhood. The first question addressed in this series appears to be inquiring as to whether or not a child had access to basic materials in their childhood. A negative answer could imply that a parent was neglecting them and not providing with essential things like food, clothes, etc.;
however, given the way this question is addressed, it is unclear as whether the researcher wants to know if these materials were absent due to a parent choosing not to provide them, or as the result of another factor such as poverty. When asking if one felt as if their parents were too drunk or high to take care of them the researchers are clearly looking to see if a child faced an act of omission by their parents, specifically in an instance in which substance abuse is present.

By both piecing these two prompts together in one question and failing to make a distinction between neglect carried out by a parent as opposed to what could be considered neglect by the hands of poverty, this survey is unable to control for various different kinds of neglect. As discussed earlier, there are upwards of 17 different definitions and categories of child neglect, far more than the categories seen within child abuse. Yet, the developers of this survey choose to address neglect in two ways: an unclear prompt addressing parts of the blanket definition of child neglect, and the occurrence of child neglect at the hands of substance abuse.

As a result of making such a large topic a miniscule aspect of their survey, these researchers diminish the scope of child neglect, and effectively exclude many of the adverse experiences that may result from neglect’s various forms. Moreover, by failing to recognize a difference between neglect at the hands of a parent and neglect as the result of poverty, ACEs essentially equates these two occurrences to the same thing.

The use of the ACEs study as a mainstream program to combat child maltreatment outside its traditional boundaries is commendable. This study brought many innovative ideas to the way in which society understands child maltreatment. That being said, there is a disconnect in the way the survey used in the study approaches not only child neglect, but also childhood poverty. ACEs present a great start in changing society’s perceptions of what child maltreatment can look like, and how it can affect children as they age. By understanding the weaknesses of the
ACEs study, future researchers can address topics like neglect and poverty to provide a deeper discussion upon how these occurrences related, what they look like, and how the effects that they may influence will be displayed later in one’s life.

**Prevent Child Abuse Iowa and Public Policy**

Discussed earlier in the introduction of this paper, Prevent Child Abuse Iowa (PCAIowa) is a leading organization in Iowa that focuses on identifying, preventing, and ending child abuse in the state. Working closely with the state of Iowa, much of their policy surrounding child maltreatment mimics the public policy implemented by the state. A major difference, however, is that PCAIowa uses and defines the word ‘neglect’ instead of the “denial of critical care” as the state of Iowa does. Although PCAIowa does appear to reject the “denial of critical care” public policy, when they present statistics on child maltreatment in the state their website refers visitors to data collected and presented by the Iowa State DHS. This is the same entity that heads investigations relating to child maltreatment, including cases of ‘denial of critical care.’ It is easy to understand why PCAIowa takes data from the Iowa State DHS instead of collecting their own data: the organization itself is focused on educating Iowans on how to identify, report, and fight child maltreatment, not creating and implementing child maltreatment policy. Yet, for an organization that wants to build public awareness surrounding child maltreatment in the state of Iowa they not adhere their own materials to match the state’s public policy. This may represent a dissent in how Iowan society understands child neglect.

By understanding the differences in policy between these two organizations it is again demonstrated that policy is reflection of the society it is made in. Both the public policies created the by the state of Iowa and PCAIowa reflect the history and culture of the society they were
made for, the population in Iowa; however, even within this finite group there are different values and morals. These two different public policies are just a small part of the cultural dissent in not only Iowan society, but the population of the US as well.

Further, PCAIowa makes absolutely no mention of poverty throughout their website. This in itself is unsurprising as has already been established in this discussion poverty is something that society often dismisses. Also considering that the Iowa state public policy removes poverty from its discussion of “denial of critical care,” if PCAIowa is modeling the information they report off of this public policy in any way it isn’t unexpected that they too not address poverty. However, looking deeper into the PCAIowa website, they present some statistics on children living in poverty. Yes PCAIowa does mention child neglect briefly, but they don’t discuss poverty and all. Additionally, there is no mention of poverty’s relationship with child neglect or maltreatment. Yet, without addressing poverty in any way a section of data discussing childhood poverty in Iowa is provided.

Considering this further, as mentioned above all of PCAIowa’s statistics come from data collected by the Iowa DHS. In the Iowa public policy on “denial of critical care,” poverty is eliminated from the discussion. Yet in combatting child neglect without acknowledging poverty, the Iowa DHS still collected and presented data on childhood poverty. Moreover, there were no statistics reported by PCAIowa related to child neglect or “denial of critical care.” This leads one to ask why the Iowa state DHS is collecting and reporting data related to something they removed from their discussion on ‘denial of critical care,’ yet not reporting the data relevant to this topic? Like before, to answer this question would take highly intensive research most likely involving in-depth interviewing and ethnography. That being said, there is room for speculation.
In considering the lack of awareness of child neglect and poverty presented by PCAIowa one must look into the public policy, and the society in which it was formed. As mentioned several times throughout this discussion, child maltreatment, specifically child neglect, is a taboo subject. PCAIowa deviating from the “denial of critical care” public policy and called neglect as such shows that in some way the society in Iowa is moving forward in the discussion of this taboo topic. Yet, considering the data used by PCAIowa comes from the Iowa DHS, the entity that implements this public policy, moving forward in creating a discussion about child neglect is difficult when there is no data present. Looking on PCAIowa’s lack of discussion on poverty, this may suggest that society is not yet ready to discuss this taboo topic.

**Conclusion**

Public policy can be used to understand the things that a society values the most, what ideals they uphold to the extent that deviating from these ideals is illegal. Given the wide range of public policy created on child maltreatment in the U.S., specifically within the state of Iowa, it can be inferred that child abuse and neglect is seen as very unethical in these societies. Yet, although this topic is considered unethical, a remaining cultural taboos prevent constructive discussion by society members. This is demonstrated several times by the way in which Iowa state public policy addresses, and doesn’t address, child neglect, poverty, and the relationship between the two. In recognizing the presence of these taboos, public policy has the opportunity to change the discussion on how society perceives them. In this case, by having public policy that doesn’t veer away from topics like child neglect and poverty, populations can begin to have productive conversations on these matters.

Although in this work, the presence of the relationship between public policy and societal values has become clear, there are still many questions surrounding the child maltreatment public
policy in Iowa that remain unanswered. First, who is in charge of developing the public policy on child maltreatment? How did they get to be in that position? And do their values reflect the values of the greater society? If not, are they willing to compromise? Further, why was poverty eliminated from Iowa’s public policy on ‘denial of critical care?’ Was it truly because poverty is a taboo topic, or was it easier for politicians to not address poverty in order to get the policy enacted? These questions present just a few unanswered thoughts surrounding the development of Iowa’s public policy on child maltreatment. In order to fully understand the scope what influences the development of public policy, and what public policy in turn influences, much more research must be done. In moving ahead, future researchers could work closely with policy makers to understand how public policy comes to be.

The role an anthropologist can play in the development of public policy is pivotal. Anthropologists work with people; with those that the public policy affects, those designing the public policy, and those in charge of implementing it. An anthropologist has the opportunity to be present at all points in the life of a policy, and thus should have input on how it is designed and implemented. Many anthropologists currently working and doing research within policy call for greater education of the public. They urge anthropologists to advocate for those who the policy affects and those it ignores. Anthropologists should begin to provide communities with the knowledge of how a specific public policy works and what it can do (Wedel et Al., 2005). By completing this, the hope is that anthropologists can help communities to place political pressure upon those who are creating the public policies that will affect them. Anthropologists can help to inspire the change needed to create fair, equal, and productive public policies.
Bibliography


