Dirty linen should be washed at home: Ethnic communities perceptions of family violence and child sexual abuse - Phase 2, Latin American communities

by T. Kaufman and A. Seitz   Carlton: Victorian Health Promotion Foundation 1994

In recent years, a sizeable number of immigrants to Australia has come from Latin America. Of these, a large proportion have left families in their homeland, in flight from intolerable conditions and repressive regimes. Life in Australia is a culture shock. The immigrants have left hierarchical, Catholic countries where strict family values govern personal relationships. They come to an alien land, characterised by egalitarian philosophy, loose family relationships and individualistic life styles. Their children grow up quickly, learn English faster than they and assimilate much more easily. Battered and traumatised by their homeland experience, they bewilderedly grapple with the new order. Their children become rebellious, promiscuous, and dismissive of their home cultures. And they cannot turn to their extended family for support as they used to for it does not exist here.

Vic. Health, in the second of its reports into the way in which ethnic communities perceive and cope with family violence and sexual abuse, has surveyed four Latin American communities in Melbourne. They are those of Colombia, Guatemala, Chile and El Salvador - all Spanish-speaking, two from South America, two from Central America. The authors' methodology was to interview, in Spanish, 80 immigrants. The majority of the sample were Chilean and Salvadorean. It is notable that Chile and El Salvador

are countries with particularly turbulent histories. Indeed, this report asserts that in El Salvador violence has been institutionalised since the Spanish Inquisition, while modern Chile has seen great violence, especially in the years following the overthrow of the Allende regime.

It is a myth to regard Latin America as a homogeneous entity. Values differ markedly from country to country. But what is common to each is a strong belief in the patriarchal family. Yet it is encouraging to note that these values are not so entrenched that they cannot be modified. It is interesting in this report to observe the manner in which some of even the male interviewees had changed their machismo perceptions. The majority of adults, and all the young people interviewed, regarded it as abhorrent for the husband to use physical force on his wife.

Yet even where such a view prevails, it is far less likely that a female victim of domestic violence will seek outside support. The view remains that these matters should be settled by 'the family'. And who can blame them for their disenchantment with the Australian legal system? It is shown that 91% of such victims are without effective court protection in Victoria, despite the Crimes (Family Violence) Act, 1987 (p11).

The Report highlights an interesting dilemma. While it unreservedly recommends greater community services for

Latin-Americans, it is not unequivocal on whether these should be separate Hispanic entities, or whether they should be provided by mainstream Australian organisations. Cultural preservation or assimilation? The authors come down in favour of the latter for, in their experience, specialist ethnic organisations lack political clout and tend to become marginalised by the narrow constituency.

Latin American attitudes to sexual licence are very different from those of Anglophones. But it is intriguing to note the conflict between the traditionalists and the, generally younger, progressives. Certainly, with some interviewees, there is an almost aggressive advocacy of extramarital sex, and indeed of less patriarchal family values - on the ground that it was precisely these values that prevailed in the countries they have abandoned!

This is a most valuable tract. It is sensitive, balanced and non-polemical. Thoughtfully presented, well tabulated and interestingly written, this Report considerably aids a balanced understanding of the difficulties of adjustment to a new culture. For policymakers, it provides factual data and tabulated polls, which dispel cultural misconceptions and provide clear insights into an issue often obfuscated by bias, prejudice and ignorance.

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Child protection - Messages from research

by R. Bullock, M. Little, S. Millham & K. Mount   UK: HMSO 1995 ISBN 0 11 321781 1

This report, prepared by the Dartington Social Research Unit, looks at key messages from 20 recently completed research studies and the implications of the findings for the development of child protection services.

These studies attempt to:

1. Define child abuse in the context of normal childhood experience and to estimate the incidence of different types of maltreatment.

2. Identify who gets caught in the child protection process and how the child's safety is achieved.

3. Focuses on what conclusions can be drawn in relation to good practice.

Studying what normally happens within families provides information about what society may reasonably consider to be abnormal. Many children experience events which in some circumstances are considered abusive; many parents hit their children when they cannot cope. Support is as important as protective intervention for these families. Thresholds are used to

determine intervention and they are an indicator of how much abuse a society can tolerate; they vary as society reconstructs definitions.

This study questions whether statutory child protection is the best way to assist many of the families who are currently becoming involved with the child protection system. The research suggested that many children caught in the child protection net would benefit more from family support services. In one of the studies, *Paternalism or Partnership? Family Involvement in the Child Protection Process*, Thoburn says:

> ...the child protection process works as well as it can with the most severe cases, it works reasonably well when there is an unproved allegation of serious abuse (especially if services are sensitively offered) but it works less well with needy families who resent being brought into the abuse system.

Most of the studies reviewed found there was more attention paid to issues at the point of entry into the child protection process than there was at the point of exit. The emphasis was on assessment rather than prevention and treatment. Often when matters were closed, parents and the 'outside' professionals were left in a state of limbo.

The studies identified five pre conditions for effective practice:

- a sensitive and informed professional client relationship
- an appropriate balance of power between participants
- a wide perspective in child protection
- effective supervision and training
- services which enhance children's general quality of life

The most important pre condition was a positive alliance between child protection workers and the family. Assisting workers to acquire the practice techniques to achieve this end is one of the current challenges.

The findings of these studies highlight issues that are in the forefront of child protection services in Australia. All of our child protection services are grappling with large increases in the numbers of notifications - in Victoria, notifications have gone up over 40% since the introduction of mandatory reporting in 1993. Of the 31,500 notifications received in Victoria in 1994/95 only about 50% required investigating by protective workers doing a home visit. The concerns were substantiated in less than half of these investigations. Court action was only required in about 5% of all notifications. Many of the families notified to our child protection service needed a welfare response rather than statutory child protection response.

These research findings and our local experience demand that we challenge the child protection system as it currently exists if we are to improve outcomes for both children and families in need of support, and for children who are at risk of significant harm as a result of abuse and neglect.

The need for greater empowerment of families, a skilled and well trained professional work force. increased connections with the wider welfare service system, provision of treatment services for children who have been abused and a determination to enhance the quality of children's lives are all issues with which program planners are grappling. This report gives substance and definition to these matters and is valuable reading for all of us interested in the future development of child protection services.

This publication is available from HMSO, P.O. Box 276, London SW8. 5DT, U.K, Fax Orders 0171 873 8200

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Case Management conference notes

Case management is many things and has positive as well as negative dimensions. Some say it is a kind of 'emperor's new clothes' phenomena, others that it will be a progressive and significant influence towards standardising and improving services to clients. However one may judge it, it certainly does not seem likely to go away.

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CASE MANAGEMENT - WHAT IS IT

Case management is a complex, problem solving process which has its origins in the last century where early models of intervention by a number of disciplines could be viewed as forerunners of modern case management.

A number of presenters, including Dr Elizabeth Ozanne, Ms Mary Draper and Professor David Challis, stated that the

resurgence of interest in case management has occurred because of the complexity and fragmentation of service delivery systems, which, in turn, is the result of the rigidity and inflexibility of government funding. They also warned that case management could be misused to cover up broader structural issues or as a means of cost containment.

The vision of the future is the concept of a 'seamless' care system where the barriers and boundaries which impede movement of client groups across and between various service systems are removed. Case managers are seen as helping clients to successfully negotiate transitions between levels of care facilities in which service is provided.

Professor Challis (UK) presented a definitional model which indicates the many facets of case management practice and which endeavours to distinguish case management from other activities with similar responsibilities. The cautionary note was that some case management

programs take some elements from the model and omit others, often to the detriment of the client group and the program in the long term. For example, if one chooses a brokerage model, it has no capacity to offer therapeutic intervention and has little control over the quality of the services provided or the staff providing them.

Mr Steve Onyett (UK) talked about the 'uncomfortable' tension between care and control as the case manager tries to manage and balance competing and conflicting values and needs. Professional codes of ethics are needed to guide practice in maintaining client-centred perspectives in a cost obsessed environment.

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