Discussion

These case examples raise several questions about working with families suffering from Munchausen syndrome by proxy. The major questions appear to be, why is it so difficult to identify the syndrome and how can the many professions involved best work together to successfully intervene in these complex families?

Obstables to Identification

The families involved in these cases were middle class and the parents presented as caring and concerned. The parents cooperated with the professionals involved and formed working relationships with them. The doctors, social workers and psychistrists appeared to identify with the families and feel enormous sympathy for the parents who were distressed about their children's serious illnesses.

Although the parents displayed a high level of co-operation with the hospital staff, the staff did not believe they knew the parents well despite their extensive contact with them. It appears that the very complex nature of these families militates against workers fully understanding or engaging the family. In the cases described workers found the nebulous obstables to them fully engaging the families very stressful.

Children who are very ill over a long period of time and for whom no appropriate treatment can be found engender feelings of impotence and frustration in involved professionals. These feelings may contribute to the escalation of medical investigations and treatments in the absence of a medical diagnosis.

The multidisciplinary hospital teams involved held frequent case conferences and their involvement with the families was highly integrated. Despite their high level of co-operation when a diagnosis of Munchausen syndrome by proxy was first mentioned (by a social worker in the first case and paediatricion in the second) doubt about the diagnosis was created by disbelieving team members. It appears there must be consensus amongst the team about the diagnosis or workers will unconsciously sabotage plans for integrated intervention.

Successful Intervention

Meadows (Meadows 1985) recommends the paediatrician to be the most appropriate person to confront the parents about their involvement in the children's illness. The confrontation will often be met with denial and anger from the parents and be extremely stressful for the paediatrician who has supported the family for a long period of time.

The stage at which the family is reported to Protective Services will vary partly in association with families willingness to cooperate with hospital staff and the seriousness of the risk to the children. It is

appropriate to consult with Protective Services as soon as the hospital staff suspect the parents of causal involvement in the child's illness. This will facilitate the Protective Services understanding of the complexities of intervening in families suffering from Munchausen syndrome by proxy. Case conferences are a useful forum for reporting to the Protective Services and enable them to gain valuable information from the range of professionals involved.

Consideration should be given to inviting the police to case conferences. The complex and deceptive nature of these cases militates against the police investigating protection applications in the Childrens Court and in the cases described they believed criminal prosecution to be inappropriate.

To proceed with a protection application the Protective Service will require the full support of all the professionals involved. The complexity of the syndrome and the grave risks to the children must be conveyed to the court. This necessitates all workers presenting the details of information they have in order to build-up a full history of the often bizarre events which have occurred within the family. When all these events are presented a comprehensive picture of the family emerges and the dangers to the children become clear.

The evidence of the mother's actions is often circumstantial and the stress of the court proceedings may cause workers to doubt the diagnosis. This is an extremely stressful time for all involved and workers will need to continually support each other throughout the protracted court process.

In the first case there was a protracted court battle proceeding through three court systems and it was extremely difficult for workers involved to maintain their commitment to the diagnosis during this stressful process. Ultimatly the child was home released by community services despite the fact that two courts expressed grave concerns for the child safety. In the second case the children are in long term foster care and community services have been heavily reliant upon hospital staff for assistance in case planning.

Conclusion

This paper has focused on the difficulties involved in identifying Munchasen syndrome by proxy and stresses the need for a highly integrated approach to intervention. It is a preliminary analysis of the complex issues involved and has relied upon experience of only two cases and the limited available literature.

The majority of available literature is presented from a medical perspective and despite the apparent need for medical intervention in this syndrome clearly it is not a medical problem. Further studies should address; the psychological and

emotional effects upon the children, appropriate treatment for the mothers, the father's role in the syndrome and the need for doctors to question their value base.

Little is known about appropriate long term intervention in these families or success of reunification but this requires serious consideration as there is a high infant mortality and morbidity rate amongst these families.

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LISTEN TO YOUR CHILD, A parent's guide to children's language (240 pages).

Author: David Crystal Publisher: Penguin Books Ltd., 1986 England. \$9.95 Aust.

Reviewed by Jan MacKenzie, Speech Pathologist, Lincoln Institute, Abbotsford Speech and Hearing Clinic.

"Listen to your Child" is an informative book for people who want to understand in some detail the course of language acquisition. Crystal shows how this can be done by careful listening to, and recording of, the child's speech. It is not intended as a guide of how to encourage language growth, although he makes many points relevant to this, along the way. The writing style is easy to read and often humerous and full of anecdotal situations, so suitable for the stated target population.

Crystal begins in Chapter One, by capturing the imagination with his description of the language learning task that lies ahead of the infant, and the relative speed with which this is achieved. He suggests ways that parents can keep a "language diary" to record their child's language development, just as they do a photographic album in order to record physical development. He indicates clearly the difficulties and the rewards associated with doing this.

Chapter Two covers the stages of language development during the first year of life. This begins with Vegative Noises in the first eight weeks – through Cooing and Babbling at about 20 weeks – Vocal Play at 20-30 weeks – Babbling 25 – 50 weeks and Medolic Utterance 9-18 months.

Crystal discusses the types of sounds that parents can listen for. He uses examples from well known studies to make his points. Perception and comprehension at that stage is also briefly discussed. Attention is given also to the interactive nature of language, even at this early stage. Perhaps this, as the fundamental impetus to language development, should be discussed at the beginning of the chapter rather than the end. It is fortunate that the point is made early in the book that stated ages should only be seen as a guide.

The final section in this chapter is valuable in its description and explanation of "motherese" (language mothers use with their children), and in the list of "do's and don'ts" when interacting with the child.

Chapter Three covers developments in the second year; how much children say, what children talk about, the meaning of the early words and the development of early grammar in the two-word stage. Crystal spends time discussing the characteristics of the first 50 words, including the phonological features. An appendix is provided for parents to record these.

Chapter Four discusses the great leap in language development in the third year when the child begins to produce much longer sentences. Sentences increase not merely in length but in complexity, by development at the word, phrase and clause level.

Vocabulary growth is so rapid it is virtually impossible to keep a record of it at this stage. Again Crystal elaborates on certain semantic features of children's speech at this time; time concept, the use of negatives and grammatical morphemes. The concept of "Mean Length of Utterance" (MLU) is introduced as a way of calculating the language stage of a child. This is done by counting the meaning units in each sentence An appendix is included for the purpose of recording this.

The Pre-School Years are discussed in Chapter 5. These are marked by the ability of children to use complex sentences. This begins with the sudden discovery of "and", and progresses to the use of other conjunctions. Crystal touches on the "normalcy" of non-fluent behaviour at ths stage, as the child struggles to express more complex ideas with elaborate vocabulary and much more complex sentences. The use and understanding of passive tense and embedded sentences are also described. Ideas are presented on how to check your child's linguistic level at this stage, and an appendix is included for record keeping.

It was pleasing to see Chapter 6 entitled "Early School Years", as many books fail to comment on language development, once children reach this level. However, Crystal discusses only grammatical and metalinguistic developments and has failed to address the most importance development at this stage. This development is the change in language used for communication to the language used for learning.

There are brief sections on situations that may complicate language development such as bilingualisma and the language of twins. He includes advice to parents whose children may not be following the expected course. Appendix Six, "Games which help language" is really extremely limited and there is a serious omission in not emphasizing the importance of literature, and shared reading experience as a vital part in language development.

Parents approaching child development with an enquiring mind will find this book interesting and informative. It would be useful also to professionals working with children, or advising parents, and perhaps even as a general introduction to the language area for student speech Pathologists, Psychologists and Teachers. However, there is a strong emphasis on listening to the child's expressive. particularly grammatical, development, while the equally fascinating, but less well researched areas of pragmatic and oral narrative development are virtually ignored. It would be a dedicated parent who would persist with language record keeping beyond the child's third year of life, but Crystal effectively presents some guidelines as to how this may be done.

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NO MORE SECRETS FOR ME by Oralee Wachter, Penguin, Australia, 1986. \$4.95. 88 Pages

Child sexual assault is now recognized as a widespread social problem affecting a significant proportion of the population, and a number of strategies have been developed, which are aimed at preventing such assaults.

Traditional sexual assault prevention approaches have been either victim or offender orientated and have sought to control the behaviour of one or the other. Strategies that have recently been developed both in Australia and overseas have attempted to decrease the vulnerability of all children to sexual assault, teach them to recognize unsafe situations, develop their problem solving skills and help them to establish adult support networks. This book by Oralee Wachter is a useful resource to use in relation with children, on issues about sexual assault.

The book contains four short stories that are designed for parents to read with their children. In addition there is a useful section for parents which provides information on sexual assault, as well as sample questions which they may use to discuss the stories with their children.

All the stories are easy to read, however sometimes the language seems a little stilted and occasionally words are used which are not in common use in Australia. This however occurs infrequently, and as the stories are designed to be read aloud, parents could localize "sweater", "sweetshop" and "swerve a football" if this is so desired.

The first story, "Talking Helps", is about a young boy who does not like his babysitter undressing and bathing him. He discusses this with his mother who in turn talks with the babysitter and the sitution is resolved. The suggested discussion area include identification of uncomfortable touching and possible solutions.

The second story, "Friendly Persuasion", is the story of a young girl, Lynn, who is persuaded to help a lady who is a stranger to her. The woman persuades Lynn to show her the way to the library and then leaves her alone with a puppy. When a man, claiming to be the woman's husband arrives, Lynn runs into a shop and the owner calls her mother. Discussion topics focus on the distinction between "friends", "strangers" and "friendly strangers" and on generating possible solutions when confronted with a situation.

The third story, "What If", is about Sam, a young boy who attends a school camp. One of the leaders attempts to trick Sam into taking his clothes off. Sam runs away and confides in another leader. He is reassured about the appropriateness of his actions.

The final story, "Promise Not to Tell", is about a girl, Maureen. Her stepfather indecently assaults her and makes her promise not to tell. Maureen confides in her friend who suggests she speaks to their teacher. Maureen does and help is provided. Discussion focuses on when to tell a secret and when to keep it, and how to help if someone confides in the child.

The book provides parents and children with an excellent resource to help them begin to discuss, what for many can be a difficult and embarrassing subject. Discussions with parents indicate that many find sexual assault a difficult area to raise with their children. This book could provide parents with a good place to start. It is easy to read, the suggestions for parents are helpful and the book is economically priced.

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