

# Institutional Abuse and Deinstitutionalisation, Community Care and Community Rejection: Awopbopalooop Alopbamboom and All That Jazz

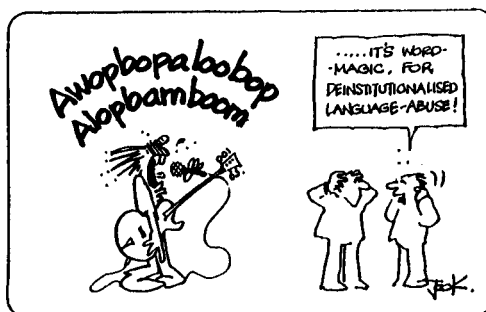
Chris Goddard

**T**wo subjects, apparently unrelated, have long fascinated me: rock and roll and the meanings of words. Rock and roll, of course, is full of words that mean very little; two of my favourites appear in the title of this article: awopbopalooop alopbamboom. There is, believe it or not, an excellent book about rock and roll entitled *Awopbopalooop Alopbamboom* (Cohn, 1972), now regarded as something of a classic.

Some years ago, I heard of a competition amongst journalists to place the titles of songs into newspaper headlines. Many song titles are easy to work into newspapers in such a way. It does not require a great deal of imagination to realise that the football season provides many opportunities for 'Careless Hands', a song by Des O'Connor, to appear in the sports pages, whatever the code described. Simon and Garfunkel's 'The Boxer', Kenny Ball's 'Midnight in Moscow', and the Beatles' 'Paperback Writer' are all easily envisaged in the pages of a newspaper. Other songs prove more difficult. Some latitude was allowed in spelling, but even so vast sums of money must have changed hands when some song titles were considered. My most treasured is without doubt the song by the Crystals entitled 'Da Doo Ron Ron', a phrase that must have taken a great deal of ingenuity to work onto the page. Nevertheless, a sub-editor on *The Guardian* achieved fame with this yellowing headline that I still have on my notice board in my study: 'What's to do Ron? Ron - What's to do?' (*The Guardian*, October 6th. 1988). I cannot now remember what the story that followed was about; it is not important, but I will always treasure the headline.

Words that mean little or nothing, or

are not what they seem, may be acceptable in rock and roll but not in the world of social welfare. In recent months, however, the press in Australia has been full of harrowing headlines about the failures of institutional care. By way of contrast, it is the stories rather than the headlines that stay in the mind. Many of the events concern adults rather than children but the mistakes and lessons have been apparent in many areas of the human services. Some institutional care, in the accounts in the press at least, has had more in common with institutional abuse - all care disappeared.



There are too many stories to recount in detail, which is in itself a terrible indictment of our care of the vulnerable. The findings of the Chelmsford Royal Commission in New South Wales were widely reported in the press at the end of 1990 and early in 1991. The headlines speak for themselves; 'Dignity raped in "disgraceful, terrible tragedy"' and, in an Editorial, 'Nightmare that must not recur' (*The Australian*, December 21 1990), while *The Age* (January 4 1991) also used the word 'nightmare' in one of its stories: 'Chelmsford: the story of a medical nightmare'. It appears that for nearly twenty years doctors at the Chelmsford Private Hospital in Sydney used 'deep sleep therapy' on more than one thousand patients, sometimes without their knowledge or consent. Some twenty-four patients died and another twenty-four committed

suicide, according to the report.

In a later Editorial ('Psychiatry has power to save lives', January 4 1991), *The Australian* assured its readers that the case of Chelmsford was a 'singular' one and not a 'basis for a general critique of psychiatry and its practices'. Unfortunately, almost exactly three months later, *The Age* in another Editorial ('Justifiable inquiry into sleep therapy', April 5 1991) reported that an investigation is being held into the use of a modified version of this 'deep sleep therapy' in Victoria. In spite of the certainty of *The Australian*, the abuses may be widespread.

Almost simultaneously, reports appeared in the Victorian press about 'suspicious deaths' in an institution for people with intellectual disabilities in country Victoria) *The Sunday Age*, December 23 1990) and in Queensland, sixty-five deaths in Townsville's Ward 10B were linked to negligent psychiatric treatment (*The Australian*, January 4 1991). Reading such news it is hard to believe that so many have been working so hard for so long to try and improve conditions in institutions.

I was reminded of these episodes of institutional abuse when I read of the visit to Victoria of Federal Human Rights commissioner, Mr Brian Burd-ekin, as part of his inquiry into human rights and mental illness. According to the report in *The Age* (April 12 1991), patients in one psychiatric hospital in Victoria were denied their rights because they conflicted with the interests of the staff and unions involved. In an earlier report in the same paper, it was stated that some adolescents with psychiatric problems were being locked up in detention centres because of community ignorance and a dearth of appropriate facilities (*The Age*, April 8 1991).

The history of institutional care is a long and fascinating one. Jones and Fowles, in their excellent analysis of the literature on institutions, point out that civilisation in the western world developed behind walls, while the 'outcasts' lived outside in the forests:

Then the position was reversed. The forests were felled, and the Rule of Law was established; and the victims and the predators were in their turn confined behind walls, in hospitals and asylums, in poorhouses and workhouses, in gaols and bridewells (Jones and Fowles, 1984:vii).

The motivation for the separation was sometimes kindness and sometimes fear, according to Jones and Fowles, but the result was always the same: a population held 'captive'. In a prescient description they declare that:

Many people tried to make it more humane, but the system proved curiously resistant to improvement (Jones & Fowles, 1984: vii).

The history of the move towards deinstitutionalisation is now familiar territory to health and welfare workers the world over:

Social scientists advocated the abolition of the institution, because they thought the system was beyond reform. Politicians and civil servants promoted community care, because they hoped it would be better, and knew it would be cheaper (Jones & Fowles, 1984: vii).

Jones and Fowles review the literature that lead to the changes: the work of Goffman, Szasz, Foucault, Kittrie, Townsend, and others.

At the same time that the literature that prompted deinstitutionalisation was appearing (Goffman's *Asylums* was published in 1961, Townsend's *The Last Refuge* in 1962) the research that was to initiate renewed interest in child abuse appeared, with Dr. Kempe's seminal article also published in 1962. The link between these movements has not been explored adequately as yet, and cannot be in this article. Suffice it to say that social workers found themselves trapped in a paradoxical situation, caught between two conflicting demands: the need to protect children from abuse and the need to keep them out of potentially damaging institutional care.

Only a few years later, the definitions of child abuse were broadened, most notably by David Gil. Gil argued that abuse of children could occur at three levels: institutional and societal, as well as at an interpersonal level (1975: 347-349).

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As Rindfleisch (1988: 263) asserts, harmful acts towards children in institutions were not a new phenomenon but calling such acts of omission and commission child abuse and neglect was innovative. According to Rindfleisch (1988: 270) thinking about institutional abuse and conceptualising the problem was advanced by Eliana Gil (some relation?) in a book published in 1979. Eliana Gil, Rindfleisch reports, described three forms of institutional abuse: system abuse, program abuse and individual non familial abuse:

Included in the broad definition of system abuse are the kinds of abuses perpetrated on children by a system that allows them to drift through many placements. Program abuse is abuse and neglect due to specific institutional policies or conditions. Individual nonfamilial abuse is maltreatment committed by an employee of an institution against a child in the institution (Rindfleisch, 1988: 270).

This is a potent analysis of institutional abuse and one that throws a harsh light on deinstitutionalisation. According to this framework the act of deinstitutionalisation does not prevent further institutional abuse. Many children who once would have spent too short a time in too many foster placements.

Jones and Fowles, proposing that harsh economic times have contributed to the failure of much of the promise of community care, make a further point that those involved in the care of children need to remember:

The diversification of types of care across the public and private sectors means that it is more difficult than in

the past to monitor conditions; and official statistics now give only a very inadequate guide to what is happening (Jones & Fowles, 1984: 5).

Andrew Scull (1977, quoted in Jones & Fowles 1984: 5), describing the changes to institutional care, suggested that many of the changes had less to do with improving conditions and more to do with what he called 'word-magic'. Words and phrases like deinstitutionalisation can be used to disguise the fact that institutional abuse is still occurring. Community care may mean little more than community neglect. Some of the words may be too long to mean a great deal to young children in the care of the State. They may mean as much or as little as the words of Little Richard: awopbopalooobop alopbamboom.

## References

- Cohn, N. (1972), *Awopbopalooobop Alopbamboom: Pop from the Beginning*, London: Paladin.
- Gil, D.G. (1975), "Unravelling Child Abuse", *American Journal of Orthopsychiatry*, 45 (3): 346-356.
- Gil, E. (1979), *Handbook for Understanding and Preventing Abuse and neglect of Children in Out-of-Home Care*, Prepared by the San Francisco Child Abuse Council and the San Francisco Department of Social Services Pilot Project titled Prevention of Abuse and Neglect of Children in Out-of-Home Care (Quoted in Rindfleisch, 1988).
- Goffman, E. (1961), *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*, New York: Anchor Books, Doubleday.
- Jones, K. and Fowles, A.J. (1984), *Ideas on Institutions: Analysing the Literature on Long-term Care and Custody*, London: Routledge & Kegan Paul.
- Kempe, C.H., Silverman, F.N., Steele, F.B.k Droegemueller, M.D., and Silver, M.K. (1962), "The Battered Child Syndrome", *Journal of the American Medical Association*, 181, July 17-24.
- Rindfleisch, N. (1988), "Combating Institutional Abuse", in Schaefer, C.E. and Swanson, A.J. (eds.) *Children in Residential Care: Critical Issues in Treatment*. New York: Van Nostrand Reinhold Company, pp. 263-283.
- Scull, A.T. (1977), *Decarceration: Community Treatment and the Deviant - a Radical View*, Englewood Cliffs, N.J.: Prentice-Hall.
- Townsend, P. (1962), *The Last Refuge: A Survey of Residential Institutions and Homes for the Aged in England and Wales*, London: Routledge & Kegan Paul.