

COMBATING VIOLENCE AGAINST CHILDREN

Re-integration and rehabilitation programmes for child victims, witnesses and perpetrators of violence

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PSYCHOLOGICAL INTERVENTIONS TO HELP CHILDREN AND FAMILIES

- Only the other week a teenage girl who happened to be pregnant stabbed another girl in Malta. Apparently she was furious because the victim who nearly lost her life was going out with one of her old boyfriends.
- This teenager is now being followed by a probation officer but it is certainly the case that more psychological work with her and her family is needed if the process of re-integration and rehabilitation is to be envisaged.

VIOLENCE MAY BE INFLICTED IN DIFFERENT WAYS

“The neglect and damage caused by early privation of parenting is equivalent to violence, to a young child placed in residential care, as it inhibits optimal development and neglects the rights of the child to grow up in a family”

Johnson, Browne & Hamilton- Giachritsis (2006 p35)

.CHILDREN WHO WITNESS VIOLENCE

- Children who witness violence are also subject to a host of psychological, emotional, behavioural, social and academic problems.
- Very often these children remain unnoticed ... If they are resilient enough they may seek psychological help for themselves at a later stage. (Sammut Scerri work in progress)
- A few may seek help as children. For others the situation is so serious that it ends up being reported to the Protection Services and many of them are removed from their family. From research we carried out very recently in Malta, when such children are placed in residential care, they continue to yearn for their family...

THE IMPORTANCE OF KEEPING OUR HEAD ABOVE THE WATER

- Accompanying these children and their families during these critical periods in their lives is often experienced as a very complex endeavour. It usually requires a multidisciplinary approach including a wide range of services.
- These services need to be offered in a holistic way as opposed to a fragmented one where children and families are often lost in the meanders of the system. A ***space to think*** about the interventions that are carried out is well worth investing in.

THE VALUE OF PSYCHOLOGICAL AND SYSTEMIC THINKING

- From my experience of working in countries like Georgia and even in Russia, I am aware that the professional training of psychologists is not yet regulated.
- However some of the psychological approaches that inform the thinking of psychologists and family therapists can be very helpful in informing the thinking of the other helping professionals.

ADDRESSING ISSUES EMBEDDED IN THE **CONTEXT**

- Not all issues can be addressed through therapy
- Intertwined family and environmental factors may contribute to children's drop out from school, gang and criminal activity, drug trafficking and drug taking. Eg
- Interventions to reduce family vulnerability must address the **environmental forces** that exacerbate violent behaviour
- The eradication of poverty and discrimination necessitate political will

THE NEED FOR A SYSTEMIC UNDERSTANDING INCLUDING INTER-GENERATIONAL LEGACIES

- In the past many psychologists tended to look at people as problems. They wanted to find the cause of the problem in a linear fashion
- Getting to know the family, and the important stories in their lives is now considered much more fruitful.
- The use of the **genogram** or family tree is extremely helpful and unintrusive
- Crises situations may also open old wounds. Past traumas may have not been properly explored before. Violence and abuse are very often well kept secrets eg. because of the code of honour and shame in the Mediterranean
- They need to be understood and integrated for people to be able to survive them in a resilient way.

ADOPT A RESILIENCY APPROACH VIS A VIS TRAUMA

- This approach challenges the idea that traumatic experiences are inevitably damaging (Walsh 2003; Rutter 2000)
- Rutter (1999) noted that irrespective of the risk involved more than half of the children effected by trauma did not suffer from any particular disorder.
- Instead of dwelling only on the traumatic effects, ask the person what she/he needed then to overcome the hurdle and how she/he could pass on this wisdom to their children (Walsh 2007)

FAMILY BY ADOPTING A RESILIENCE PERSPECTIVE

- Move away from the concept of seeing families as families who are at risk to seeing them as 'families at promise' Swadener & Lubeck 1995
- The recent post modern trends focus more on a strengths perspective rather than the presence of psychopathology
- The stance of the therapist is a collaborative one as opposed to that of an expert.
- This approach gives importance to the **voice** of the members of the family and their **own expertise** in dealing with the difficulties they are faced with (Andersen 1997; De Shazer 1988; White 1995)

RISK IS MITIGATED BY PROTECTIVE FACTORS

In the Child	In the Family	In the Larger Systems
positive easy temperament	Lives at home	Adult mentor for child outside immediate family
Autonomy and independence as a toddler	Secure mother-infant attachment	Extra adult help for caretaker of family
High expectations for the future	Warm relationship with a parent	Support for child from a mentor at school

IN CHILD IN FAMILY COMMUNITY

Internal locus of control as a teen	Consistent discipline by parents	Support for a family from church
Interpersonally engaging, likable	Perception that parents care	Support for family from workplace
Empathic	Established routines at home	
Above average intelligence		
Perceived competencies	Vance & Sanchez (1998)	

BELIEVING AND EMPOWERING SERVICE USERS

- We must never forget that in spite of the fact that families face difficulties, they still possess a lot of resources on which they can rely
- This is substantiated by research (Allison et al 2003)

FROM THIS PERSPECTIVE

- From problem saturated ways of talking ...therapeutic work becomes a search for a better story ...

OUR REFLEXIVE STANCE AS PROFESSIONALS IS IMPORTANT FOR OUR CLIENTS

- How do we look at parents of children at risk?
- Do we take a position that promotes access to all social rights in particular education, health, social protection and housing ?
- Or do we blame them for their difficulties?

THE WAY WE LOOK AT FAMILIES COUNTS!

Trauma is experienced at two levels;
one level is the actual experience,
the other level is how others look at
you!
(Cyrulnik 2007)

The way people look at you sends
you messages of who you are.

THE PUPILS OF OUR EYES ARE LIKE MIRRORS!

- What messages are our pupils sending to those we work with?
- Are we “othering” them by our looks pushing them further into social exclusion?
- Are we burnt out and cannot show our empathy during our encounter with them?

THE PSYCHOLOGICAL EFFECTS OF SHAME AND

Shame has a debilitating effect on people; *it isolates them!*

Very often parents are not prepared to disclose their situation with professionals. They think that by so doing they will further stigmatise their children and themselves as parents!

(Abela and Berlioz 2007; Abela and Tabone 2007; ATD Fourth World 2000; Borg and Mayo 2001)

TRAINING OF PROFESSIONALS

- Needs to include the views of families in situations where they find themselves in extremely vulnerable situations.
- Professionals may not always be conscious of the pressures and constraints of vulnerable families who are socially excluded (Falicov 1998). They treat them in a patronising manner paradoxically stripping them of the little authority they have to influence their children (Abela & Berlioz 2007)

HOW CAN WE FIGHT SHAME & STIGMA?

- Develop a good relationship with the children and the parents
 - Help them develop a network
- Ask for their point of view; value their knowledge
- Meet them in their own territory
- Treat them as similar to us; avoid 'othering'

Thank you!

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