

DOMESTIC VIOLENCE

Booklet15C

Domestic Violence

Compulsory

2A Contemporary issues of vulnerability

(4) Family problems e.g. child and elderly abuse, family violence

Elective

Extended Study on Health Promotion and Health Maintenance Services

- e.g. home safety, medical services for carers and the elderly who live in the community

Extended Study on Community and Social Care Services

- e.g. Services for crisis intervention in domestic violence

Current Issues of Health and Social Care

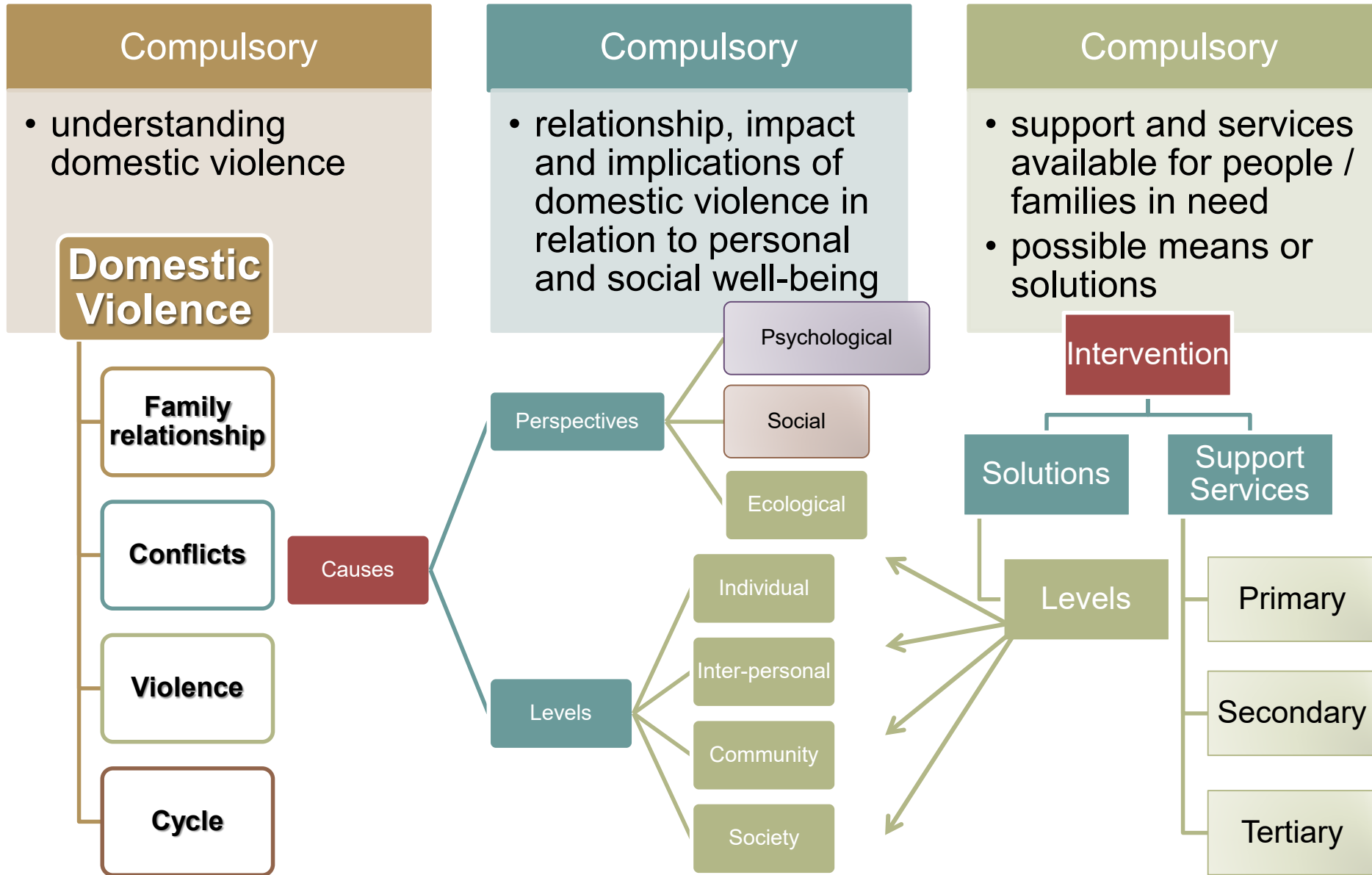
- e.g. legislation and the tragedies of domestic violence

Compulsory Part

- **Topic 2 - Health and Social Care in the Local and the Global Contexts**
 - ***2A Structural issues related to health, social care and personal and social well-being***
 - ***2A4 - Family problems e.g. Child and elderly abuse, family violence***
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- To analyse the relationship, impact and implications of domestic violence in relation to personal and social well-being
 - To identify the support and services available for people / families in need and suggest other possible means or solutions

Domestic Violence – Theories and concepts in **Compulsory Part**

2A Structural issues related to health, social care and personal and social well-being



Booklet 5 Social Relationships

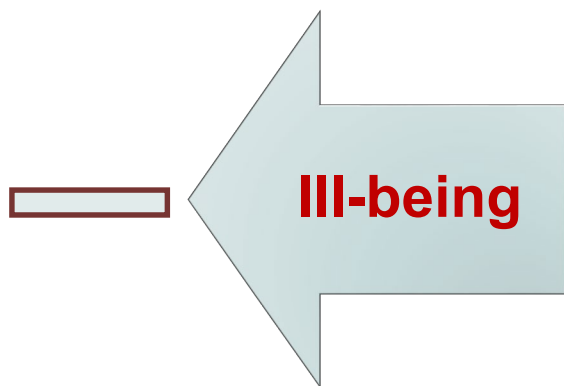
Conflict
Management

Key questions

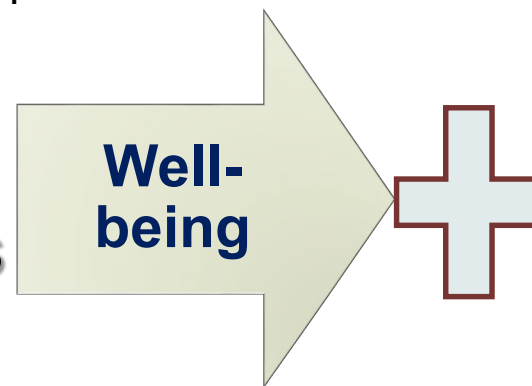
How do relationships affect personal health?
How can we develop and maintain healthy relationships?

Relationship
Building

Negative Impacts



Family
Relationships



Positive Impacts

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Booklet 5.4 Conflict Resolution

Strategies	Description	Example
Avoiding Victims	An individual does not deal with the conflict and ignores it	Act as if there is no conflict. Take no action to deal with the conflict.
Competing ABUSER	An individual pursues his own interests at the expense of others	I am the winner and you are the loser.
Accommodating Victims	An individual neglects is/her own concerns to satisfy the concerns of others but eventually causes conflict within an individual	Self-sacrifice to maintain good relationship.
Compromising	The objective is to find some expedient, mutually acceptable solution that partially satisfies both parties	Meet each other halfway
Collaborating	Respects others' goals and involves an attempt to work with others to find some solution that fully satisfy their concerns, establishing a sense of belonging	Win-win

15C.1 - Domestic Violence (World Health Organization)

Venue

- Usually occurs in the home with some exceptions

Type

- Physical abuse
- Sexual abuse
- Psychological abuse
- Deprivation
- Neglect

Target

- Spouse battering, child abuse, and elderly abuse
- Among persons who are or have been in an intimate or dependent kinship relationship

Form

- Threatening
- Violence
- Abuse

15C.1D Cycle of Domestic Violence

- **Tension building phase**

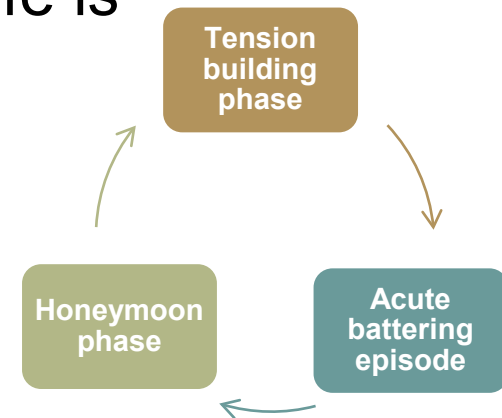
- The relationship between husband and wife is becoming tense because of long-term conflicts that cannot be resolved

- **Acute battering episode**

- The conflicts continue to accumulate and fierce quarrels erupt, leading to violent behaviour

- **Honeymoon phase**

- abusers try hard to please the victims in order to make the victims stay, apologising for the abusive acts, showering the victims with kind words and kind moves

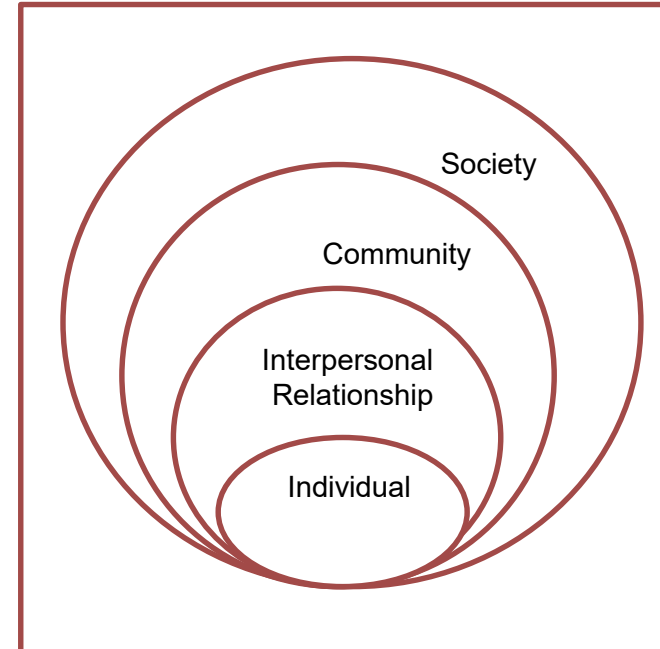


15C.1B Etiology of Domestic Violence

Perspective	Etiology
Psychological	<ul style="list-style-type: none"> The violent behavior comes from the abuser's characteristics (such as lack of security, personality disorder, impulsive and manipulative personality and being a victim of abuse in the past)
	<ul style="list-style-type: none"> Violent behavior is the result of accumulated pressure of the abuser. Sources of pressure may include unemployment, difficulty in bringing up children, etc
Psychosocial	Abuser's behaviour comes from imitation of people around him or the media
Ecological	<p><u>Social Ecological Model(WHO)</u> Human beings live in interactions of different systems Violence is the result of the complex interplay between individual, relational, social, cultural and environmental factors Public health tries to understand how these factors relate to violence</p>

15C.1C Factors Leading to Domestic Violence

- **Society**
 - societal factors such as the cultural norms that give absolute authority and power to male over female
- **Community**
 - organizations outside the family, including schools, companies, religious organizations, hospitals and community centres, in which domestic violence can be effectively discovered and intervened
- **Interpersonal Relationship / Family**
 - how social relationships, e.g. family relationship, increase the risk for violence
- **Individual**
 - biological factors and personal history causing domestic violence, including the individual's psychological response and characteristics such as impulsiveness



15C.2A Factors leading to higher risk of child abuse

	Individual	Family	Community / Society
Child Abuse	<ul style="list-style-type: none"> Personality and behavioural characteristics of abusers: <ul style="list-style-type: none"> Low self-esteem, poor control of their impulses, mental problems and display anti-social behavior Inability to cope with stress and difficulties as well as to access social support systems unrealistic expectations about child development - greater irritation and annoyance in response to children's mood and behaviour Prior history of abuse - parents maltreated as children are at higher risk of abusing their own children 	<ul style="list-style-type: none"> Family structure and resources - low education coupled with a lack of income to meet the family's needs increase the potential of physical violence towards children Family size and household composition - large family size and an unstable family environment, where family members move in and out and there are frequent changes to the composition of a household, often characterize cases of chronic neglect 	<ul style="list-style-type: none"> Poverty - communities with high levels of unemployment and concentrated poverty Lack of social networks and/or weak neighbourhood connections Cultural norms for gender roles and parent-child relationship

15C.2B Factors leading to higher risk of elderly abuse

Elderly Abuse

	Individual	Family	Community / Society
	<ul style="list-style-type: none"> • Cognitive and physical impairments of the abused older person - owing to mental or physical incapacity, they are unable to communicate their circumstances to others • Lack of personal resources, such as financial resources, awareness of personal right, knowledge about services or resources for seeking help or achieving independence from the abusers • Social isolation / lack of social support network because of loss of friends and other relatives during elderly 	<ul style="list-style-type: none"> • The elderly physically, financially or emotionally depend on the abusers • Substance abuse of the abusers leading them to extort money from their old parents by using violence • Resentment by family members at having to spend money on the care of the physically or mentally ill elderly • Migration of young people to new towns, leaving elderly parents behind in deteriorating residential areas and seldom paying visits, leading to the elder neglect 	<ul style="list-style-type: none"> • Cultural norms and traditions such as ageism, sexism and a culture of violence • Inadequate social policies and services to support families taking care of the elderly

15C.2C Possible factor leading to higher risk of spouse battering

	Individual	Family	Community
Spouse Battering	<ul style="list-style-type: none"> • Low income /unemployment may lead to unstable emotions and increase the chance of being a batterer • Individuals with family history of domestic violence/ mental health problem may have a higher chance of being a batterer • Alcohol abuse causing a loss of control may increase the chance of being a batterer 	<ul style="list-style-type: none"> • Difference in parenting style may lead to conflicts in child rearing • Poor marital relationship may lead to more conflicts/ less tolerance 	<ul style="list-style-type: none"> • Traditional and cultural believe make the victims tolerate the battering • Insufficient public awareness of the needs to report battering

Impacts on Holistic Health (e.g. elderly abuse)

Physical

- Death or physical injuries due to physical abuse
- Complications or degeneration due to the neglect

Social

- Social withdrawal due to the feeling of shame or unwilling to disclose family problems to others
- Poor social relationships within or outside the family due to the family conflicts

Mental

- Physical or any forms of abuse are stressors
- Low self-image and self-esteem due to the loss of control or being victimized
- Negative emotional health status or depression or due to the unhealthy relationships with the abusers

15C.3 Support and Services Available for Individuals and Families

Level <i>Of prevention</i>	Goals	Strategies	Examples of Service
Primary	<ul style="list-style-type: none"> • To arouse public concern on domestic violence • To promote family harmony 	<ul style="list-style-type: none"> • Promotion of community collaboration • Changing gender stereotype through education • Promotion of family life education 	<ul style="list-style-type: none"> • Family education service

15C.3 Support and Services Available for Individuals and Families

Level <i>Of prevention</i>	Goals	Strategies	Example of Service
Secondary	<ul style="list-style-type: none"> • To identify risk factors of violence • To provide surveillance • To provide early identification and intervention 	<p>Concept of risk management :</p> <ul style="list-style-type: none"> • Developing screening tools for investigating risk factors • Early detection of medical practitioner, social worker, teacher and police • Providing intervention to avoid deterioration 	<ul style="list-style-type: none"> • Referral service • Counseling service

15C.3 Support and Services Available for Individuals and Families

Level <i>Of prevention</i>	Goals	Strategies	Example of Service
Tertiary	<ul style="list-style-type: none"> To reduce relapse and casualty of domestic violence 	<ul style="list-style-type: none"> Medical support 	<ul style="list-style-type: none"> Accident and Emergency Services
		<ul style="list-style-type: none"> Legal assistance Police intervention Judicial proceeding 	<ul style="list-style-type: none"> Law enforcement
		<ul style="list-style-type: none"> Safety plan formulation Emergent settlement 	<ul style="list-style-type: none"> Shelter home Crisis Intervention and Support Centre
		<ul style="list-style-type: none"> Psychotherapy 	<ul style="list-style-type: none"> Counseling service

15.3 Multifaceted Intervention

	Individual	Family	Community / Society
Level of intervention	<ul style="list-style-type: none"> • Addressing individual risk factors, e.g. stress and anger • Taking steps to modify individual risk behaviour 	<ul style="list-style-type: none"> • Relationship building • Working to create healthy family environments • Providing professional help and support for dysfunctional families 	<ul style="list-style-type: none"> • Developing community support <ul style="list-style-type: none"> ▣ Building of neighbourhood and community bonds and networks to support families at risk ▣ Providing education and campaigns to raise public awareness • Addressing gender inequality and adverse cultural attitudes and practices that contribute to violence • Legislation to prevent domestic violence

Elective Part (Domestic Violence)

Extended Study on Health Promotion and Health Maintenance Services

- Promotion of Home Safety (Neglect – child abuse)
- Rehabilitation and medical care for elderly in the community

Extended Study on Community and Social Care Services

- Crisis Intervention Service
- Integrated Family Service

Current Issues of Health and Social Care

- Legislation on domestic violence
- Family tragedies

Examples of Field Learning Activities for Extended Study on Community and Social Care Services : Integrated Family Service

Setting	Observation	Interview	Service / Activity
Integrated Family Service Centre	<p>Key concepts :personal growth (family roles) , family relationship, family problems, social welfare system, interpersonal relationship, communication among family members, holistic health</p> <ul style="list-style-type: none"> • Services provided • Environment and facilities • Characteristics of client groups • Atmosphere of the centre • Job duties of various workers in the unit 	<p><u>Clients</u></p> <ul style="list-style-type: none"> • Needs • Views on services • Experience of using the services • Physical, intellectual, emotional and social aspects of health • Family relationship <p><u>Professionals</u></p> <ul style="list-style-type: none"> • Duties / division of work • Intervention objectives, approaches and skills • Work related training programmes / pathways • Difficulties related to the jobs 	<p>Volunteer services can be provided through:</p> <ul style="list-style-type: none"> • Assist in organising family activities • Community survey • Neighbourhood scheme <p>Sit in / Be an observer in:</p> <ul style="list-style-type: none"> • Workshop on parenting skills • Home safety seminar • Activities to promote mutual help in community

Examples of Field Learning Activities for Extended Study on Health Promotion and Health Maintenance Services : **Rehabilitation and Medical Care for Elderly in the Community (Prevention of Elderly Abuse)**

Setting	Observation	Interview	Service / Activity
<p>Elderly Centre (Community Support Services)</p> <p>Hospital / care-and-attention home / day hospital (medical care)</p>	<p>Key concepts: health care system, ageing population, community care, eating habits, health literacy, infection control, residential care, community care, medical care, social support network</p> <ul style="list-style-type: none"> • Environment - elderly friendly community • Services provided in the community • Treatments provided by OT and/or PT • Characteristics of elderly in the community • Job duties of various workers in the centre • Risk assessment 	<p><u>Elderly</u></p> <ul style="list-style-type: none"> • Physical, intellectual, emotional and social aspects of health • Problems or needs: e.g. medication and medical care • Living in the community • Social support network <p><u>Carers of Elderly</u></p> <ul style="list-style-type: none"> • Stress management • Care skills and related difficulties <p><u>Professionals</u></p> <ul style="list-style-type: none"> • Duties / division of work • Work related training programmes / pathways • Difficulties related to the jobs • Skills to provide care to the elderly 	<p>Volunteer services can be provided through</p> <ul style="list-style-type: none"> • Home visits • Game days with elderly and carers • Check-up , such as measurement of blood pressure • Community survey to identify the elderly at high risk <p>Sit in to be an observer in:</p> <ul style="list-style-type: none"> • Stress management workshop for carers • Treatments provided by OT and/or PT

Examples of Study Questions for Current Issues of Social Care

Theme	Child Abuse
Study questions	<ul style="list-style-type: none"> • Which type(s) of parenting styles is/are at a higher risk for child abuse? What are the common types of child abuse in Hong Kong? • What are the features of high risk groups of child abuse? Analyse the causes of child abuse at individual, family and societal levels. • What is self-esteem? What are the possible effects of abuse towards the self-esteem of a child? • How different policy instruments could be used effectively to tackle child abuse?

Examples of Study Questions for Current Issues of Health Care

Theme	Elderly Abuse
Study questions	<ul style="list-style-type: none"> • The elderly are considered to be a group which is vulnerable to domestic violence. Analyse the factors leading to this phenomenon at individual, family and community levels. • According to the concept of holistic health, discuss the possible health risks to the abused elderly • Based on the Action Means for Health Promotion, evaluate and suggest the ways to prevent elderly abuse in Hong Kong.