



2199

QUESTIONNAIRE RESPONSES ON CHILD ABUSE PRACTICE
WITHIN BARNARDO'S

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Child Abuse Practice Development Group
1989

INTRODUCTION

- 1.1 The Child Abuse Practice Development Group first met in May 1989.

The initial brief was shaped by Mike Jarman's direction in establishing the group "to inform service delivery by the greater utilisation of the skill and knowledge we already possess, coupled by what we can learn from external practice".

- 1.2 As a first step - the group considered it appropriate to assess the current experience of practising in the field of child abuse within and across the Organisation.

Given the extensiveness of practice/practice management experience in the membership of the group - it was possible at an early stage to put forward a series of potential areas of issue which the Organisation would wish to examine and address.

These might be broadly defined into:-

1. Training issues
2. Interagency issues
3. The resourcing and support of practitioners
4. Practice issues (skill and knowledge) related to specific client focus.

- 1.3 While these areas were broadly defined for the purposes of reference and enquiry, there was an awareness that the Organisations effectiveness or otherwise in child care practice related to child abuse, results from a complex interaction of all these areas.

- 1.4 The first task of the C.A.P.D.G. was, using these areas, to ask Practitioners and Project Leaders directly to reflect issues of policy and practice which had an impact on child care/child abuse work within their Project.

- 1.5 The response from Projects would act as a check that the C.A.P.D.G. was mirroring real issues within the experience of the Organisation and addressing matters of relevance.

- 1.6 An additional benefit of contact with all Projects would be a sense of inclusion for other staff beyond the membership of the Group and a potential raising of awareness of issues pertaining to child abuse across the Organisation.



- 1.7 To achieve the required feedback from Projects a questionnaire was devised with the guidance of advice of Research And Development Section and forwarded to all Projects within the Organisation.
- 1.8 While factual/statistical information was required in the questionnaire, questions were mainly of the nature to draw descriptive answers about "working in the field of child abuse within Barnardo's".
- 1.9 The material resulting from the questionnaire responses had been drawn together in a similar manner.
- The content is descriptive of policy/practice issues and concerns of those delivering services to children and families within the context of child abuse.
- 1.10 These are the areas which the C.A.P.D.G. would endorse as requiring further consideration by the Organisation. Such considerations may take the form of debate/decision making by Senior Management, further practice development activity by a group or groupings within the Organisation, or Divisional response.
- 1.11 The intention of the paper is to reflect to the Organisation in a broad sense its current state of play, themes and issues in relation to child abuse, and to seek direction in the addressing of these matters.
- 1.12 The areas outlined are not in any order of priority.

THEMES/ISSUES

2.1 In collation of the questionnaires patterns of experience, concern and themes emerged - which fell broadly into four areas.

1. Practice/care for clients.
2. Training - knowledge and skill development.
3. Caring for and resourcing staff.
4. Definition of Agency role and function.

The same issues were addressed repeatedly under all these headings, bringing a different but interdependent perspective each time.

At the conclusion of each area a number of points for consideration have been highlighted.

These are not exhaustive - others will arise in the reading of the summary in different forums.

3 AGENCY ROLE/FUNCTION

3.1 Barnardo's is a voluntary child body practising in the field of child abuse.

Our voluntary status has implications for - the credibility of our contribution, relationship and communication with statutory and other bodies, decision making, risk sharing, power and lack of it, roles assumed or assigned, our confidence, and our relationship with parents and children.

Staff work wearing the mantle of the Organisation's role, function and status, and had much to say in their questionnaire responses about the impact of this role on their practice.

3.2 Lack of credibility in the eyes of the Statutory Sector was very frequently made reference to.

Quote "The problem is of being taken seriously as a Voluntary Agency - particularly by those with statutory responsibilities. Included in this is the difficulty of being allowed to have a role".

Quote "There is difficulty in our views receiving weight at Case Conferences".

3.3 If lack of credibility is a problem - lack of clarity is an even greater one. An overwhelming percentage of Projects commented on role confusion, problems with boundaries, decision making processes, allocation of responsibilities, and who was accountable for what.

3.4 While Projects reflected a sense of lack of credibility they also complained that some Statutory Bodies literally left them holding the baby and the risk. Projects felt they were being used as "safe places" to police and detect abuse.

Some responses expressed anger at being simply viewed in this role.

Quote "Are we just policing and gathering information?"

A further set of comments related to the frequent lack of information shared by the Statutory Body with the Project. This often left the Projects in a vulnerable position.

3.5 Projects also voiced two additional difficulties - under-reaction by the Statutory Body - and overreaction. Several Projects referred to having to accumulate extensive evidence to persuade Statutory Bodies to protect children. Other Projects reflected the opposite problem - and there were references to the dangers of: **Quote** "Not hearing or seeing because of the fear of overreaction".

3.6 Every major child abuse inquiry to date has pointed to lack of interagency co-operation, lack of clarity of role, failure of communication systems, lack of recorded accountability, unshared information and inter-professional rivalries as factors resulting in the failure to protect a child.

From the perspective of the content of the questionnaires, we cannot assume an improvement in relation to these factors in the professional environment within which we work.

3.7 The implication for the Organisation - borne out by the content of the questionnaires, is that our own processes must achieve clarity and must be explicit.

We must agree and record work roles and levels of accountability with referrers.

This includes stating clearly in writing not only what we can do but what we can't do.

We must state and record our expectations in relation to information, and involvement in risk sharing and decision making.

Communication channels must be agreed and recorded.

Recording of indicators and continuous assessment of risk, communication with referrers must become integral to our practice.

We must learn to accept our limitations and say "no" when the risk is too high or the relationship with the referrer inadequate to sustain the sharing of risk.

- 3.8 Good communication, good recording, thorough liaison, are the elements which make up the backbone of child abuse work. They require time, space, and resources.

Resources include administrative support and many Projects referred to an under-estimation of the amount of clerical support to sustain the level of recording required by Statutory Bodies and necessary to practice.

- 3.9 While responses pointed to interagency relationships as a major difficulty in achieving sound practice - this should not lead us to believe that all inhibiting factors are external.

- 3.10 The number of questionnaires which made reference to the need for guidelines and procedures made it clear that all Projects have either not fully encompassed the Organisation's procedures, or have not been given the opportunity to. It would seem important that both Management and Staff take on board procedures together.

- 3.11 In participating in Case Conferences and Court - our staff are reliant totally on their professional assessment and child care experience. At times our professional stance can be in conflict with the Statutory Body.

Additional specialist consultative advice and separate legal representation can be important resources at such times. Both cost money.

- 3.12 We are an Organisation who have clearly made explicit and active commitment to partnership with parents.

This brings particular challenges to our staff, who hold the tensions of child protection, parent participation, and parent empowerment.

These tensions are crystallised in amongst other areas, the practice of open recording.

There is every indication from the questionnaires that staff struggle to and do achieve good practice within the context of child protection and partnership. However - there were a number of references in the questionnaires which can be best described as "looking for a lead" from the National body. Such a clarity of lead is probably impossible - but it is important that this organisational dilemma is recorded as part of staff's concerns.

- 3.13 There are also advantages, according to the questionnaires, of being a Voluntary Child Care Organisation in the field of abuse.

We approach child protection from the broad perspective of Child and Family Care. Staff viewed this as distinctive to Barnardo's and important to them.

- 3.14 At no point in the information collected did staff question the relevance of appropriateness of Barnardo's involvement in child abuse work.

It was clear that they saw the Organisation's contribution as valuable.

However, they also made it clear that we cannot engage in this work in a half baked fashion.

POINTS FOR FURTHER CONSIDERATION

- 3.15 Staff are raising a number of issues about our profile in the field of child abuse.

Essentially the identified projected is of a 'Child Care' Agency engaged with child abuse as one element of our organisational identity. We view this as distinctive from Statutory Bodies and the N.S.P.C.C.

Child protection is the bottom line - but staff juggle a number of organisational principles - open access, parent participation. There are further confusions with different Projects taking different theoretical stances depending on the focus on the work e.g. community development.

Many questionnaires called for an Organisation Statement on philosophy and approach in this area.

There is perhaps a need for earlier debate at Senior Management level as to how the Organisation will identify itself in this field.

3.16 Projects working in this area should have in place clear statements and systems which are used in interagency work to define decision making, sharing of risk, accountability, philosophy and approaches of Project communication mechanisms.

TRAINING

- 4.1 Almost all Project responses across all Divisions stressed the need for additional training immput or varying nature.
- 4.2 Respondents indicated that at a basic level there was a need for blanket 'awareness' training for all workers, practitioners and ancillary staff, regardless of the focus of the Project, or incidence of abuse.
- 4.3 There should be a level of awareness in the Organisation not only related to identification of abuse in children, but in relation to adult survivors with whom we work and potential perpetrators, including the awareness of the vulnerability of staff who have themselves been abused.
- 4.4 Such basic awareness training requires to address directly with staff their values and attitudes, and own experiences especially their attitudes towards sexuality in relation to child sexual abuse.
- 4.5 A substantial number of Projects were identifying a need for basic knowledge and skills training - "indicators of phyiscal/emotional/sexual abuse" and indicators in "family background".
- 4.6 The overall impression from the questionnaire responses in relation to training was that a working knowledge of Barnardo's Child Abuse Procedures is not prevalent.
- The conclusion drawn by the C.A.P.D.G. in collation of the material is that the 'procedures' are viewed in the main as a procedural/policy document - rather than a dynamic tool of the practice process. There is a clear training need here - which many Projects were calling for. It is insufficient for a member of staff to have had sight of the procedure - there is a need to equip the member of staff to use the guidance appropriately.
- 4.7 The third level of training need reflected in responses relates to specialised training and skill development for practitioners and supervisors of practice.

Areas Raised Included:-

- (a) Assessment skills related to:-
emotional abuse,
physical abuse,
sexual abuse
 - (b) Child Sexual Abuse - Treatment issues for:-
child victims,
adult survivors,
child/teenage perpetrators,
adult abusers
 - (c) Work with children/young people with learning difficulties:-
presentation of indicators,
communication issues,
sexuality issues,
protection issues
 - (d) Communicating with children:-
finding approaches which are:-
age appropriate,
reading the child's communication,
working with pre-verbal children,
working with the "wounded child within",
teenage and adult victims - working with the child/adult survivor
 - (e) Foster families:-
training in assessment of "safe" families,
training for fosterparents
 - (f) Training for those supervising practitioners working with child abuse:-
the stresses/emotions that the work enkindles,
the link back to the workers own family experiences and possible traumas,
the balance needed between the amount of child abuse work/ other activities.
 - (g) Collation and presentation of evidence.
- 4.8 In addition to describing a need for Organisation/Divisional strategy in relation to the above three levels of training - there were three other points made with sufficient consistency to warrant inclusion in this summary.

4.9 Child abuse work frequently takes place within a set of interagency/interprofessional boundaries and relationships. Training which is inclusive of other Agencies and professionals is viewed as particularly advantageous.

4.10 Alongside the role of training is equipping practitioners - respondents ranked the importance of accessibility to "the expert consultant" - who was readily available to bring additional support/professional knowledge to project teams/individual practitioners at critical points - the practice process.

4.11 What became apparent from questionnaires, on the positive side, was a wealth of knowledge and skill already existent in some Projects based on tested experience.

This resource could be harnessed for broader use within training - but would require organisational approaches to facilitate, e.g. cross Project/cross Divisional sharing. Training and supporting practitioners to train others, recognition of the deficit to Project if staff resources are being used more broadly.

4.12 Quotes For Project Teams

"One difficulty the team faced was defining what constitutes abuse and bringing together our personal interpretations ..."

"... with child abuse being identified increasingly, why hasn't there been an increase of any incidence in our work? Is it due to it not being detected through lack of experience/knowledge? Is it more difficult to communicate with our young people (with severe learning difficulties) and pick up their cues?"

"Work with the families and individuals who are coping with the impact of sexual abuse in particular involves sophisticated practice skills. Barnardo's could support the development of this work with realistic financial resources for good external training. Current levels in this Division are woefully inadequate".

"Working with abuse has promoted an increased awareness and interest, raised consciousness and highlighted vulnerability as sometimes division of staff pointed towards bad practice and inconsistency. However, the issue has made us aware of the need for team building and training".

"How do we address issues of abuse with volunteers without frightening them off?"

"Local multi-disciplinary training has been particularly beneficial in establishing networks".

"We have a commitment to sharing our experience and learning from other agencies. However, this in turn puts extra pressure on resources or leaves us unable to become involved in sharing because of existing limited resources"

POINTS FOR CONSIDERATION

4.13

- (a) The Organisation require a national child care training strategy statement which will give guidance and direction to Divisional Management and staff training and development sections for divisional implementation.
- (b) Such a strategy should incorporate selectively the three levels of training already outlined, but basic awareness training should be the minimal level for all Projects and Divisional Management Teams.
- (c) Where possible an interagency/interprofessional approach should be included as part of the strategy.
- (d) Divisions should tap into existent experience within and across Divisions by supporting and freeing these resources. A training resource directory would facilitate this approach.
- (e) The Open University Child Abuse Training Material already being used in some Divisions, would provide an excellent basic framework around which a training strategy could be built.
- (f) It would appear that many Projects have not 'owned' the organisations procedural guidelines and this must be addressed as part of a training strategy.

4.14

Some specialist Projects have developed knowledge and skill to a level where basic training is no longer adequate.

Staff are working at the boundaries of knowledge - e.g. in relation to teenage perpetrators and the re-patterning of abuse.

The Organisation should consider how it can keep these staff to the forefront of developing knowledge and skill - e.g. national seminars, international training inputs.

- 4.15. Any training strategy should consider the use of C.H.I.A.C.- a computerised information package - including differential assessment factors and indicators, child care legislation and up to date research sources.

This material is currently available in one Division where a training strategy is being discussed for its use and a monitoring system established.

- 4.16 The role of "Consultant Expert" as a resource should be given further consideration as a staff development tool as well as a staff support resource.

5. CARING FOR STAFF

5.1 Staff skill, time, energy and commitment are the critical elements underpinning the Organisation's practice in child abuse.

Our maintenance and management of these resources must be a primary consideration for the Organisation if we are to deliver satisfactory professional practice.

Organisational structure, policy and process require to be both effective and relevant in underpinning the work of staff.

5.2 The care and resourcing of staff was an area of major comment in all questionnaire responses. The issues raised give the Organisation nationally, and Divisions locally an opportunity to check out both the relevance and effectiveness of organisational support.

5.3 Working with child abuse costs staff dearly. Child sexual abuse has a particular impact.

"Stress, anxiety, fear, helplessness, stretched to the limit, pressure, personal cost, feeling unskilled, feeling inexperienced, tired, hopeless, frustrated, impact on own life", were all words and phrases used again and again in responses.

5.4 Staff have difficulty switching off and carry the impact home. Particular concern was raised about both the short and long term effects on staff of working in the field of sexual abuse.

Quote "we are too aware of the issues and see them everywhere".

Quote "we wear sexual abuse tinted glasses - the problem is taking them off".

5.5 The lack of "balance of work" in many projects brings its own pressures and a frequent number of references were made to this problem.

Quote "we have found it difficult to generate referrals where the problems are not all so acute. The chronic nature of referrals has an effect on staff".

Once Projects are viewed as "expert" referrals tend to be targeted by referring agencies towards the risk end of the continuum.

- 5.6 A sense of powerlessness was frequently expressed about the role of working in a voluntary agency. There were two types of pressure here, statutory bodies either left Projects monitoring risk with no support, leaving Projects feeling overloaded and accountable - or statutory bodies took decisions and actions out of the hands of the Project - leaving the Project feeling powerless and frustrated.
- Quote** "we are more often than not left in the position of monitoring cases - in the absence of sufficient social work and personnel".

This double stress of working with risk and working with the complexity and tensions of interagency relationships seems to have a particularly draining effect on staff.

- 5.7 An additional factor here, frequently referred to, related to the dilemma of erring on the side of protection and caution, or living with the burden of risk to protect families from overreaction by statutory bodies. The issue of "system abuse" received frequent comment.

Quote "much energy goes into ensuring balanced responses to reported suspicions".

- 5.8 There were also references to a sense of guilt and failure - when workers were unable to protect a child.

Quote "Where do you go and what do you do if you feel that a child is being emotionally abused - but nothing can be proved and the child is taken away from the Project by a parent?"

- 5.9 Some pressures relate to our organisational culture. Staff feel unhappy about saying "No" - about being unable to respond on every occasion - of accepting their own limitations.

Quote "Not assuming that we are the right resource for every family because we need the numbers and assume we can be all things to all people".

- 5.10 There are pressures relating to the values involved in partnership with parents. Staff cannot hide behind the statutory role, and are torn in several directions.

Quote "At the centre we carry a dual role - we identify the abuse and put investigation into motion. We then support the family through the procedure, then we help to devise and formulate the plans for the families future. Unlike many of the other professionals involved in the investigation, we have to continue working with the family".

Role ambiguity is recognised as a major factor in stress and this was reflected in many comments in the questionnaire responses.

- 5.11 There is also a related stress factor her reflective of the nature of current practice. Staff are working with children who are at risk or abused, with adult survivors of child abuse, and potential and known perpetrators, both children and adults.

This places very high demands in practice terms, but the shifting from one focus to another often in the context of one family - does appear to have a particularly detrimental effect on the emotional wellbeing and energy of staff.

- 5.12 Questionnaires also indicated that balancing organisational priorities, such as occupancy, places additional pressure on child abuse work.

Child abuse work requires concentrated time and a high level of staff resources. This is true in relation to detection, monitoring, disclosure and repair work.

Family placement workers in particular were facing a difficult choice between concentrating their efforts on finding families or expanding that energy on the inevitable disclosure work once young people were placed - in order to prevent the placement disrupting.

There were definite statements in the questionnaires that we are not always correctly estimating the time, space and staff resources required for this work.

- 5.13 While sexual abuse is a different area for all staff - male staff appear to be under particular pressures.

This was particularly emphasised by residential projects where male staff are vulnerable to allegations.

The stress of dealing with allegations and also managing sexualised behaviour was represented in the questionnaires.

However - where Projects adopt a strong bias towards the feminist theory of abuse men can be very isolated and have a strong sense of guilt.

5.14 Increased awareness, it would seem, does not automatically lead to a reduced level of anxiety. On first reading it was the Projects for people with a mental handicap, the Y.T.S. schemes, and some community youth schemes which reflected the lowest levels of stress in relation to this area of work.

These were also the Projects voicing the lowest level of awareness, but in some instances an uneasiness about this.

5.15 It is important to remember that while the above sources of stress, uncertainty, or frustration are described singly, they do not occur singly and their effect is accumulative.

5.16 Despite the many negatives expressed - staff consistently expressed a high level of commitment to this area of work and a sense that there was ways to reduce stress, and overcome difficulties.

There were also many references to "feeling more confident" on the basis of increased experience and learning what supports to build in, problems to avoid.

5.17 Where staff were expressing more confidence - they frequently related this to the critical importance of "Teamwork".

Training as a team, spending time on team development, and establishing team support all paid off in terms of the health of the Project.

5.18 Staff were also more positive when time and space was specifically given to consideration of their maintenance, opportunity to offload, explore fears, share feelings.

"Time and space" were words used again and again in responses.

The message was clearly stated - time and focus on support is not a luxury but a necessity.

Unfuelled, unmaintained machinery does not produce and breaks down.

Time and space needs to be calculated into working times.

- 5.19 Supervision rated high as a vehicle for the maintenance and direction of staff. Questionnaire responses reflected that supervision must deal with practice, skill development but also address the individual's personal values and feelings relevant to the work.
- 5.20 In addition to supervision - many responses indicated a need for specific counselling to be made available to staff when they needed it.
- 5.21 A number of Projects use the advice of outside consultants and viewed this specialist support as invaluable.
- 5.22 Staff expressed insecurity when they were unclear about procedures, their role, and communication with other agencies.
- It would be true to say that the overall impression from questionnaires was that the majority of staff are not familiar with the Organisation's child abuse procedures - and were continuing to seek the security of "guidelines".
- It would seem that complete familiarisation with the procedures, very clear recording and agreed written contracts of work with other agencies would go far to relieve insecurities.
- 5.23 In response to the question "What lessons?" one Project replied "that it is all right to ask management for support, that it is not seen as not coping or failing".
- Management awareness of and willingness to share risk is very important.
- 5.24 Equally important is management acknowledgement of the stresses involved in the work context of child abuse. A failure to manage is a way which is responsive to these stresses results in alienation and is dangerous.
- 5.25 The key elements for management to consider in this instance would seem to be clear systems and procedures, relevant and responsive maintenance of staff which is given proper time and space, consideration of the real demands of the work in estimating resources, and when making organisational decisions.

POINTS FOR CONSIDERATION

- 5.26. The delivery of effective services to children, adults, and families within the context of abuse is as much a matter of good management and relevant systems as it is a matter of good practice.
- 5.27 The Organisation needs to address how it assures itself that adequate supervision, support and identification of stress levels are in place. This has particular implications for the role of Assistant Divisional Directors.
- 5.28. The Organisation should consider the use of interagency working contracts in relation to the sharing of risk - to define clearly decision making, communication, access to information, levels of responsibility where such matters are made explicit against so many uncertainties there is an improved sense of security for staff and clearer accountability within the Organisation.
- 5.29. There is a clear need for access to counselling for staff who are in distress/stress arising from practice in this field, for whatever reason.
- Nigel Bennett's paper on counselling (July 4C's) covers this more fully and provides a basis to establish such a facility within the Organisation.
- 5.30 Similarly the use of team facilitators - or outside Consultants should be considered the norm in such work rather than exceptional.

PRACTICE/CARE FOR CLIENTS

6

- 6.1. The extensive range of issues identified within this area arose at least in part due to the wide diversity of work within the Organisation and what appear to very variable levels of involvement or even awareness of child abuse in some of our work.

WHO IS THE CLIENT?

- 6.2. One issue identified is that some Projects are not working solely with young children who are being abused or at risk of abuse, but also teenage survivors, teenage perpetrators, adult survivors, adult perpetrators. An under fives project/family project can be working with several members of the same family, all fitting one or other of the above categories. Fostercare projects are frequently faced with a similar range of client need in the one family/foster family.

Projects, it would seem, look for one guiding principle - in balancing the resultant confusion - this principle is child protection.

Staff energies are seriously strained in attempting to balance the needs of the child/family/adult within a framework of openness and parent participation.

INFORMATION/RECORDING/OPEN ACCESS

- 6.3. The importance of information in child abuse work, and the frequent paucity of such information was reflected in many questionnaires.
- Appropriate and full information is not automatically shared by many statutory authorities.
- 6.4. What to record, when and why was an area about which some projects were reflecting a need for guidance.
- 6.5. Some projects were only beginning to identify the implications in relation to records being a matter of 'evidence' as well as a tool of practice and were questioning their own practice in relation to this, for example in relation to the kind of detailed recording necessary for cumulative evidence.
- 6.6. Responses threw up numerous questions about the conflicts involved in a partnership with parents, and open access.
- 6.7. The overall impression from questionnaires was of clarification and guidance being sought as opposed to confidence in asserting a right to information and clear practice approaches in collection and use of information in the total child abuse process.

CONFIDENTIALITY

- 6.8 Comments were made by several Projects working with adolescents who wished to disclose abuse, but wanted the information kept confidential. The Project Staff then face the dilemma of having to make it clear to the young person (under 17 years) that they must forward such information to the Local Authority. The dilemma is heightened for staff in balancing procedural needs/the investigative process and the possibility of system abuse with the needs of the young person.

INVESTIGATION/TREATMENT

- 6.9 Several Projects commented on the impression that disclosure and investigation appeared to be given more importance than the treatment and follow up needs of the child/family. Staff expressed frustration as often it was to them that the child had first disclosed abuse but the subsequent process of investigation was usually taken out of their hands by the Local Authority.

When the Project then needs to continue working with the child and family treatment resources are not always available.

- 6.10 In general questionnaires reflected a balancing of practice experience and skill towards disclosure and detection as opposed to repair and future protection.

This is a reflection of the current stage of development in the field of child abuse, but one which must be addressed within the Organisation if we are to progress in practice.

COMMUNICATION WITH CHILDREN

- 6.11 There was a surprising range of responses which could be grouped together under the heading "communication with children".

Projects obviously viewed this as a key element in practice.

At one end of the spectrum were pockets of experience and expertise - but at the same time several projects were reflecting a lack of confidence in methods of communication verbal or otherwise and fears of missing indicators and messages from children.

- 6.12 One particular area of concern arose from questionnaires completed by projects working in the field of mental handicap. Practitioners described themselves as at a loss without specialised knowledge and skill particularly in relation to sexual abuse.

- 6.13 There were frequent references to the lack of time and space to communicate, observe, and assess properly.

INTERAGENCY WORK

- 6.14 Although the need for 'working contracts' is clearly stated in the Organisation's Child Abuse Procedures - the existence of such contracts was not underated in any of the questionnaire responses. many of the issues raised about decision making, risk sharing, role confusion, indicates a lack of any explicit mechanisms in many projects to hold together an interagency plan for any child or family.

The impact of dysfunctional interagency working was cited again and again as having a detrimental and destructive impact on practice.

RESOURCES

- 6.15 Many responses made the point that child abuse practice - from gathering evidence, to disclosure work, to assessment/ investigation, interagency communication treatment counselling, recording etc was demanding in terms of time and space, and the span of such work which any one worker can manage at any one time. Added to this is the intensity of supervision required, the emotional impact on staff and consequence recovery space needed.

This work is not "cost effective" in any sense of the word, time, staff resources, personal cost.

Some questionnaires indicated that the organisation had difficulty reconciling the above with other organisational issues such as child staff ratios and occupancy levels.

QUOTES FROM PROJECT TEAMS

- 6.16 "We have more adults disclose past abuse ... than workers having cause for concern of children and young people".

"The staff team raised the issues. I just try to keep in the saddle while they drive the horse".

"All workers must wear sexual abuse tinted glasses all the time ...".

"... we are concerned about emotional abuse of children as being the most common and widespread form of abuse and the least written and talked about....."

"...we try to meet all the needs of vulnerable clients... we need to acknowledge and accept our own limitations".

"We have found it difficult to generate referrals where the problems are not so acute".

"The better we become at identifying and dealing with abuse ... the more work seems to have come our way".

POINTS FOR CONSIDERATION

- 16.17 There is considerable variation in involvement in awareness of child abuse across the organisation.
- 16.18 A number of projects in the field of mental handicap were reporting a lack of practice experience and an unease about knowledge and skill to address such matters.
- 16.19 Community development projects and Y.T.P schemes similarly expressed a lack of awareness and involvement.
- 16.20 Projects wish to improve practice in "use of information", and to achieve a general clarity in relation to the balancing of child protection/open access/parent participation.
- 16.21 Practice development relates not only to children but to adult survivors and teenage perpetrators.
- 16.22 Projects wish to improve 'communication' and assessment skills in relation to children of all ages.
- 16.23 The issue of young adults wishing to disclose and seeking reassurance on confidentiality is one currently taxing staff in residential and fostercare.
- 16.24 Clear and explicit mechanisms for interagency work is critical and is not in place.
- 16.25 Further development work is needed towards treatment/repair/long term protection, particularly for projects specialising in child abuse.

Table Two - Numbers and Percentages of Children Where Abuse Has Been Known

Type of Project	Age					Total No-%	Ranking
	0-5 No-%	6-11 No-%	12-17 No-%	18-21 No-%	22+ No-%		
1. Residential MH	0-0%	1-1%	2-1%	1-2%	0-0%	4	0.5% (9)
2. Respite MH	0-0%	0-0%	1-0.5%	0-0%	0-0%	1	0.1% (11)
3. Community MH	6-2%	13-10%	15-8%	4-7%	1-1%	39	5% (7)
4. Disturbed	2-1%	1-1%	34-17%	12-22%	18-18%	67	9% (5)
Adolescents (Res. & After Care)	5-2%	57-43%	32-16%	1-2%	0-0%	95	13% (3)
5. Family Placement	193-77%	12-9%	4-2%	12-22%	54-53%	275	37% (1)
6. Preschool	1-05%	1-1%	40-20%	2-4%	0-0%	44	6.1% (6)
7. IT & YTS	1-05%	3-2%	4-2.1%	0-0%	0-0%	8	1.2% (8)
8. Church & Community	0-0%	0-0%	2-1%	0-0%	0-0%	2	0.2% (10)
9. Schools+CHES	18-7%	22-17%	22-11%	5-9%	9-9%	76	10% (4)
10. Conciliation	25-10%	22-17%	41-21%	17-31%	21-20%	126	17% (2)
11. Other							
Total	251 (100%)	132 (100%)	197 (100%)	54 (100%)	103 (100%)	737	100%

NB rounded to

nearest whole number