Creating pathways for a greater outreach to children and families affected by child abuse

A therapeutic child protection intervention

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Children who are abused are subject to potentially long-lasting physical and mental health consequences (Perry, 2001), and require high-quality care (Jewkes et al., 2010).
Background

Reported cases enter the child protection system:

- Dept of Safety & Security
  - Police
  - Their primary function is to investigate and gather evidence relating to the child abuse case. They play a very important role in removing children from dangerous situations and enforcing child protection legislation.

- Dept of Justice
  - Magistrates
  - Prosecutors
  - The onus lies on the court to convict and sentence a perpetrator of child abuse. There have been advances in court procedure, which minimise the secondary traumatisation for the child, but this is still at the discretion of the magistrate.

- Dept of Education
  - Educators
  - Since they are continuously in contact with children, they are in the position to identify abuse. It is then their responsibility to report it to the relevant authorities, make the appropriate referral, and support the child through the process.

- Health Care Professionals
  - Medical Practitioners
  - Nurses
  - Health care professionals are required to conduct medical examinations, provide treatment for any resulting medical conditions and possibly testify on behalf of the child.

- Dept of Social Dev. & Welfare Organisations
  - Welfare organisations are responsible for investigating the circumstances of the child’s family, ascertaining the risk to the child, and writing recommendations for court proceedings. They have the authority to remove and place.

• Responsible for ensuring the best interests of the child (Barberton, 2006).
• However, these services alone, are not enough (Budlender & Proudlock, 2013).
Non-governmental organisations (NGOs) have thus become an invaluable source of service delivery within the South African child protection system.

- Insufficient funding
- Innovation
The Teddy Bear Foundation has designed and piloted:

**A SHORT-TERM RESIDENTIAL THERAPEUTIC CHILD PROTECTION PROGRAMME**

**AIM:**
To provide children and caregivers affected by child abuse with a therapeutic process to heal, recover and mitigate the effects of abuse through enhanced caregiver and child psychosocial support.
Intervention

OBJECTIVES:

• To engage a wide range stakeholders providing child protection services.
• To identify children and caregivers who are in need of child protection services.
• To initiate healing and recovery for sexually abused children.
• To develop and monitor safety plans for each child.
• To monitor and evaluate the short-term impact of the programme.
Intervention

A **group-based** therapeutic programme, consisting of 4 full day sessions, which were run over two consecutive weekends.

**SESSION THEMES:**
- Reflection and introspection
- Healing
- Changing patterns
- Support skills for caregivers
- Legal support
Research Methods

Aims
- To explore participants’ experiences of the programme, and
- To evaluate the impact on symptoms of post-traumatic stress

Sample
150 girls (7-18 yrs) and caregivers affected by child abuse were identified and recruited through government and community based support services in Johannesburg, Krugersdorp, Soweto and the East Rand.

Instruments
Intake forms, pre and post-test surveys, open-ended reflection questionnaires, process notes and reports

Analysis
Quantitative: Descriptive statistics
Qualitative: Thematic content analysis
Findings: Pre intervention

- **PTSD**: 26% of children were experiencing severe symptoms of PTSD
- **Relationships**: Poor relationships between parents & caregivers
- **Biggest challenge**: The courts, and their handling of cases

“I was moody and didn’t want to talk to my mother, I felt like she blamed me for what happened and I felt it was my fault.”

“My child was always sad and withdrawn. She did not want to talk to me and I did not know what was going on.”
Findings: Post intervention

- **PTSD**: The number of children experiencing severe symptoms of PTSD dropped to 11%.

- **Relationships**: Improved relationships between parents & caregivers.

- **Trust**: Re-built trust in the system, and promoted support seeking behavior.

  “After these sessions, I feel like I have a closer relationship with my mother...I have more confidence and I broke the silence.”

  “My child disclosed her abuse at these sessions and I can already see a change in her. She is happier and we are now able to talk to each. I understand now what was going on with her.”
Conclusion

This innovative approach to intervention addresses the many challenges of time constraints, financial resources and personnel shortage, but it also helps to keep the therapy very focused.

It appears as madness but it is with a purpose, and the method results in favourable outcomes, creating pathways for a greater outreach to many traumatized child victims and their families.
Thank you!

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