

**Targeting services to families with
risk factors for child maltreatment :
A community health approach to
preventing violence to children.**

Professor Kevin Browne

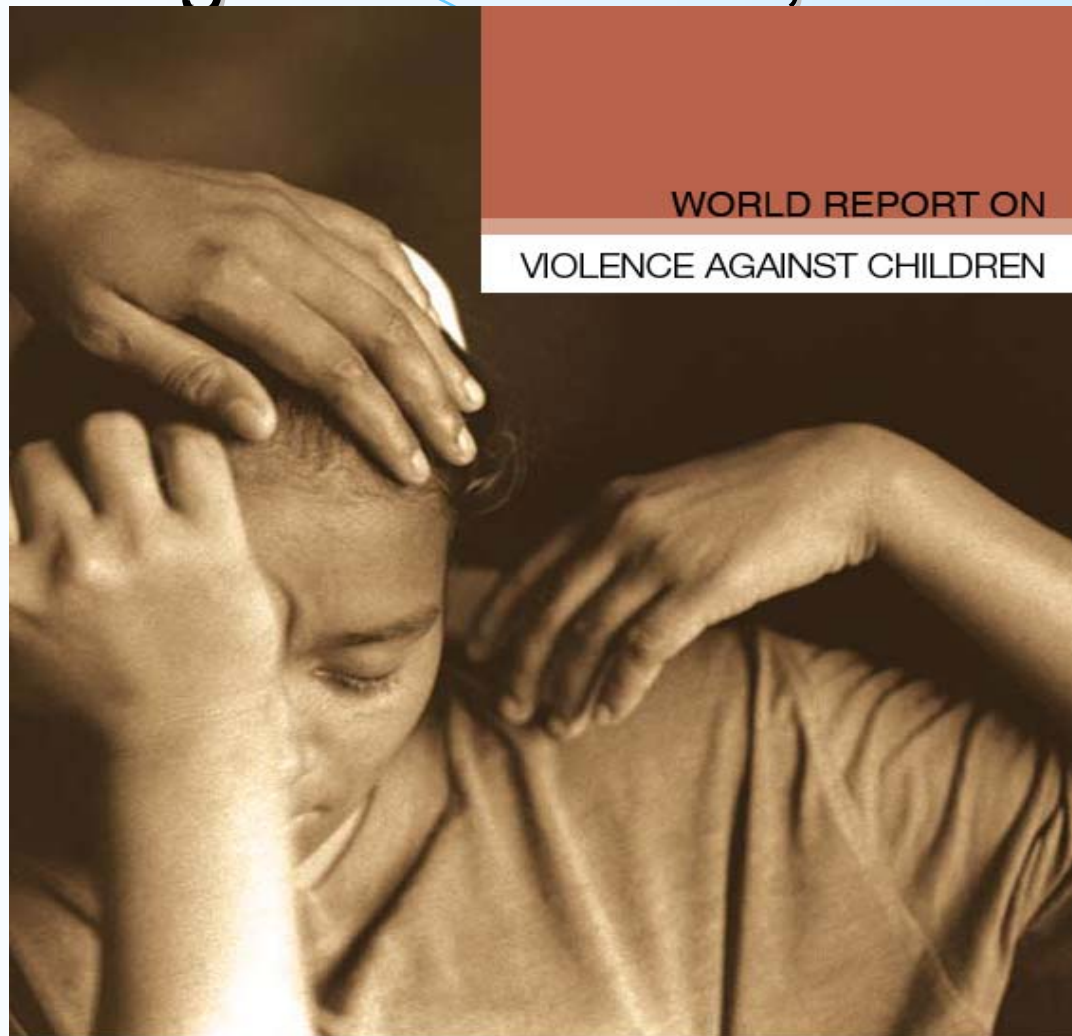
27 Oct 2008 – 30min Keynote Warsaw Conf.

Centre for Investigative and Forensic Psychology

The University of Liverpool

kbrowne@liv.ac.uk

International Concern for Violence Against Children, 2006



Paulo Sérgio Pinheiro
Independent Expert for the United Nations
Secretary-General's Study on Violence against Children

WHO
Collaborating
Centre on
Child Care
And
Protection
2005

World report on violence and health

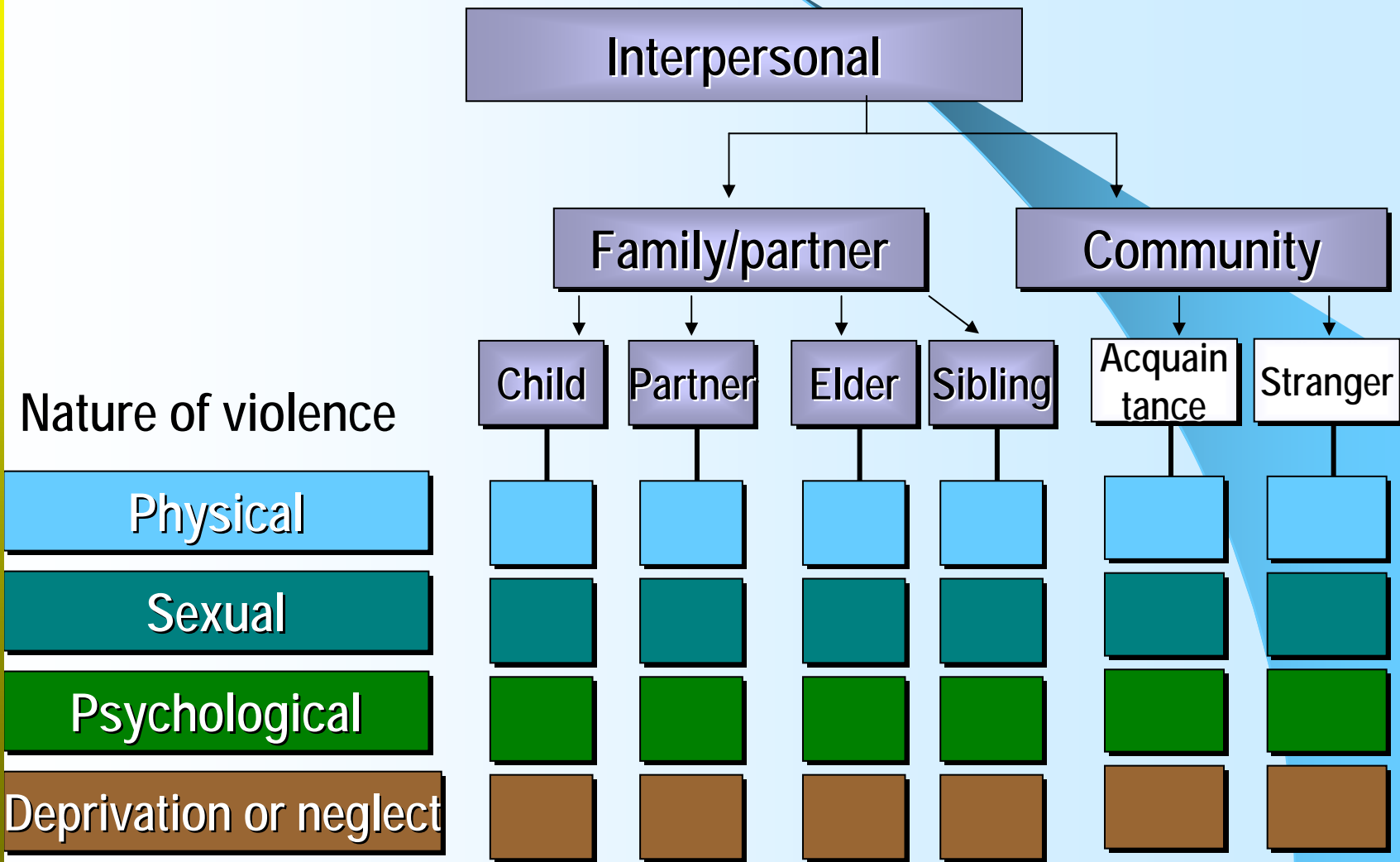


World Health Organization
Geneva

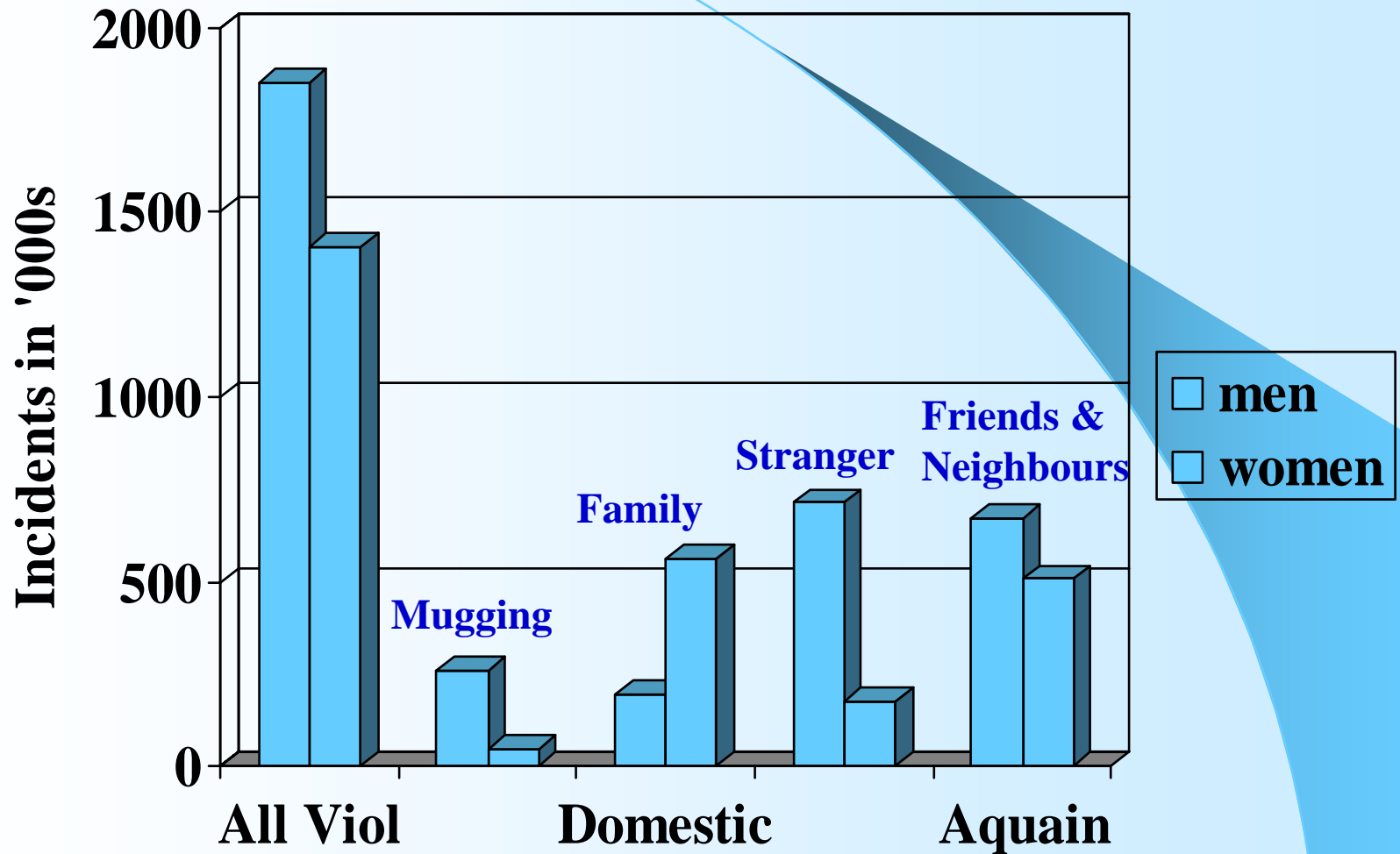
prevention

WHO Interpersonal violence typology

WHO
Collaborating
Centre on
Child Care
And
Protection
2006



UK Number of Violent Crimes Against Men & Women in Crime survey, 1999



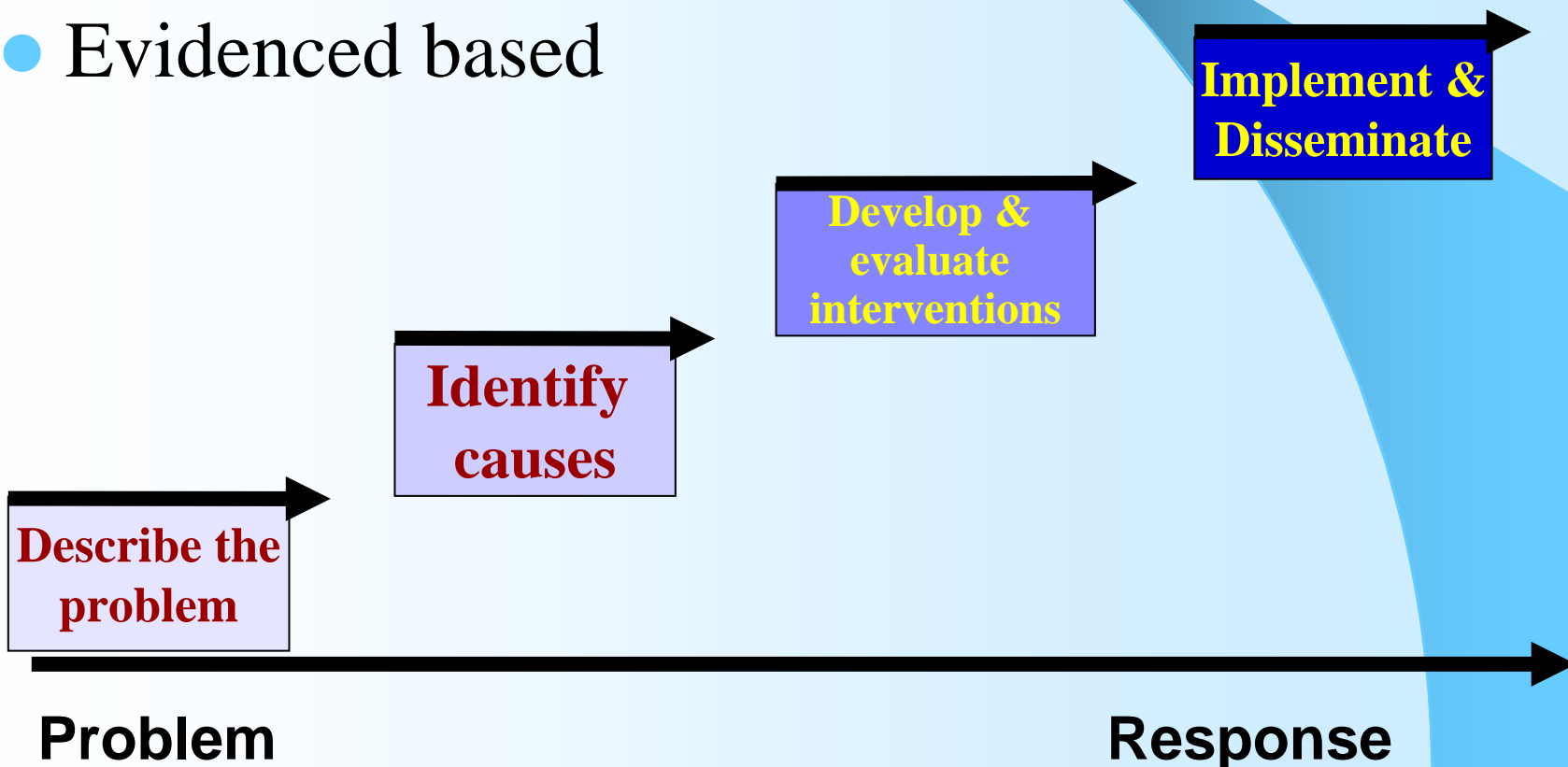
Dangers of Family Violence

Women and Children are more likely to be killed, physically and sexually assaulted, beaten up, kicked, hit, slapped or spanked in their own homes by other family members than anywhere else, or by anyone else in our society.

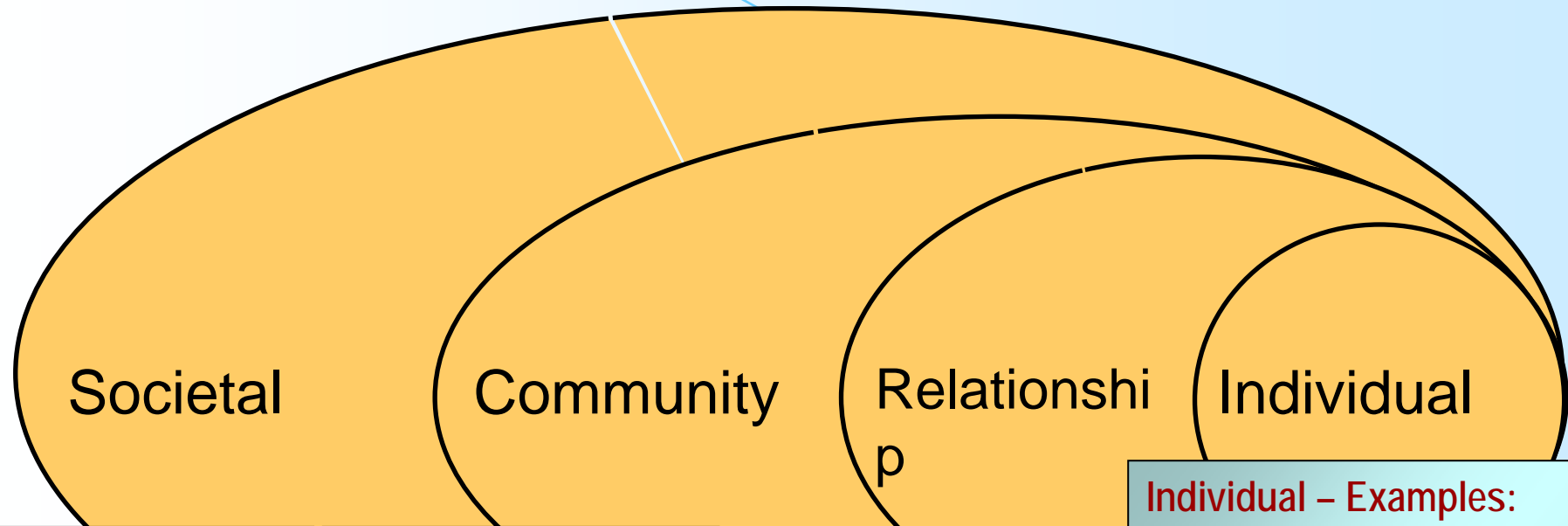
Adapted from R. Gelles (1997) *Intimate Violence in the families* , 3rd Edition, Sage publ. USA.

The Public Health Approach

- Population-based
- Emphasis on primary prevention
- Multidisciplinary and Multi-sectoral
- Evidenced based



Risk factors - ecological model



Societal - Examples:

- Inequalities
- Norms that support violence
- Availability of means
- Weak police/criminal justice
- Alcohol

Community - Examples:

- Concentration of poverty
- High residential mobility
- High unemployment
- Social isolation
- Local illicit drug trade

Relationship - Examples:

- Poor parenting
- Marital conflict
- Friends who engage in violence

Individual - Examples:

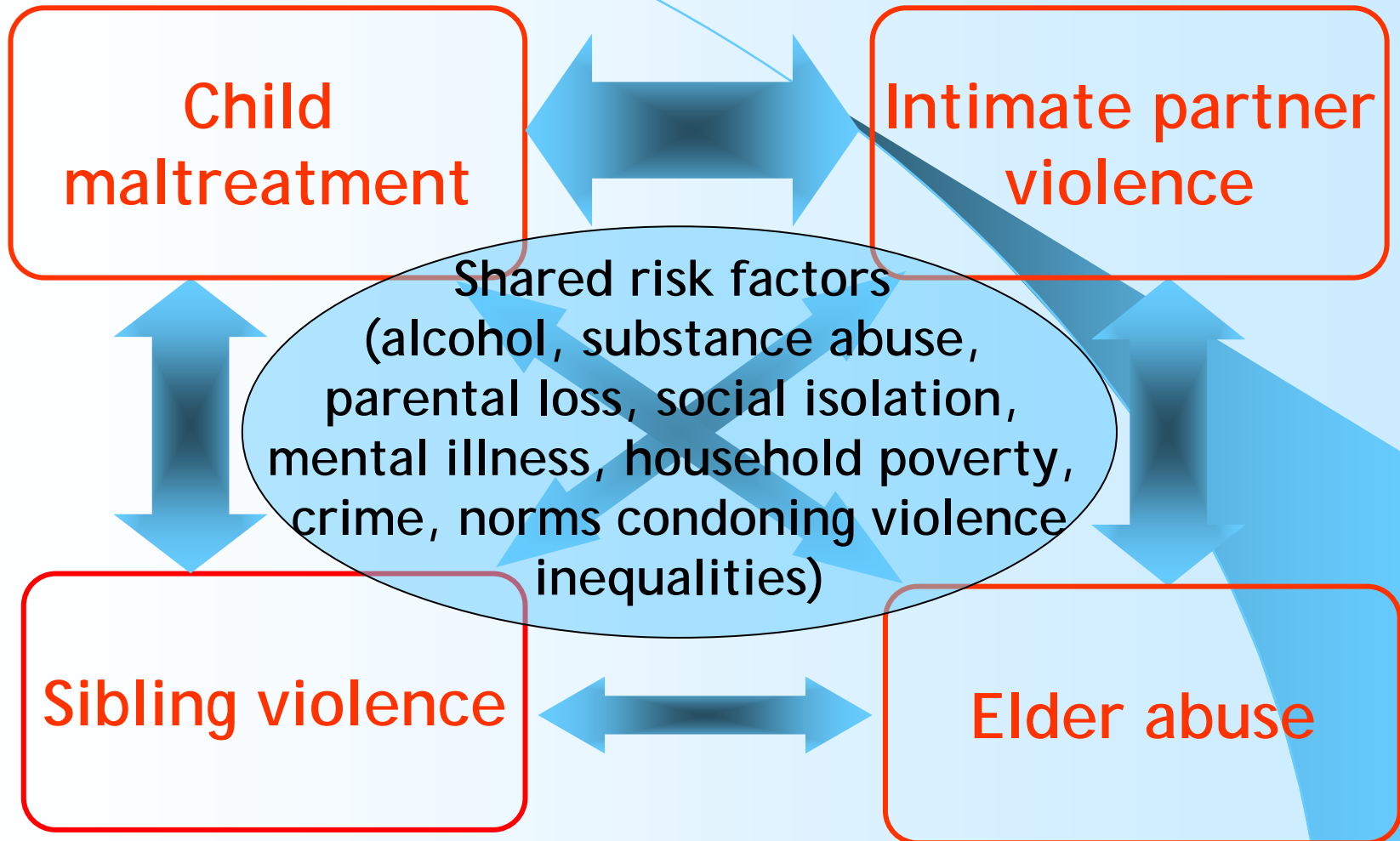
- Demographic factors
- Psychological and personality disorders
- History of violent behaviour
- Experienced abuse

Types of Family Violence

(Browne & Herbert 'Preventing Family Violence' 1997)



Links between types of violence



'I HAVE GOT MY MOTHER'S EYES'



Links between Spouse and Child Abuse

- ✓ D.V often escalates during pregnancy.
- ✓ 80% of children who live in violent families will witness an assault at some time or other (Sinclair, 1985).
- ✓ Children who witness abuse between adults in their home become secondary victims.

- ✓ Strong link between Spouse abuse and child abuse:
- ✓ In 70% of cases of recorded domestic violence children had also been abused (BCC 1999)
- ✓ Walker (1984) - USA - 53%,
- ✓ Browne and Saqi (1988) - UK Community - 52%
- ✓ Browne and Hamilton (1999) – UK Police cases – 46%

Typologies of domestic violent offenders.

Holtzworth-Munroe and Stuart (1994)

There is no reason to suggest that all spouse abusing men are alike.

- Family Only (50%),
- Generally Violent/ Antisocial (25%),
- Dysphoric/ Borderline Personality Disorder(25%).

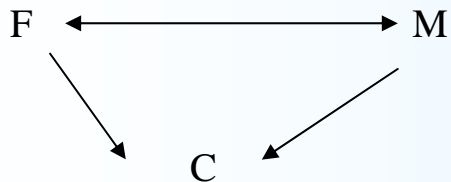
Study of patterns of domestic violence

Lamerton, C., Browne, K., Dixon, L. & Ostapiuk, E. (2006)

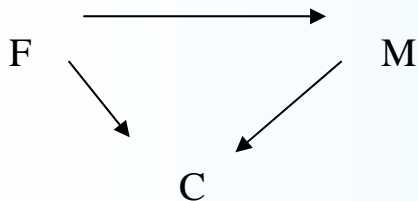
- Sample: 342 parents (240 family cases) assessed for court following allegations of child maltreatment and suitability to parent.
 - 142 (41.5%) parents: families with partner & child maltreatment.
 - 200 (58.5%) parents: families with child maltreatment only.
- Families were classified into family patterns of domestic violence according to the Dixon & Browne (2003) typologies.

Abuse Patterns within Domestic Violent Families

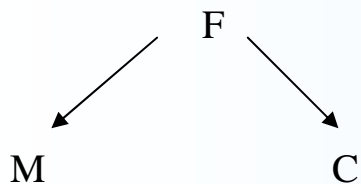
Dixon, L & Browne, K (2003) Aggression and Violent Behavior 8: 107-130.



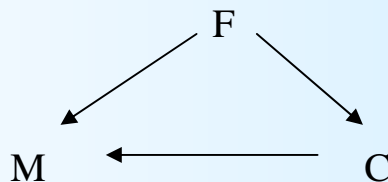
Reciprocal Family Violence - 30%



Hierarchical Family Violence - 46%



Paternal Family Violence - 24%



West Midlands police statistics

(Browne & Hamilton, 1999)

Child maltreatment cases:

- 13% offenders cautioned or charged.
- 17% offenders arrested.
- 64% no further action by police.
- 27% previously referred to the police

Spouse abuse cases:

- 16% offenders cautioned or charged
- 24% offenders arrested
- 72% no further action by police
- 47% previously referred to the police

Reasons for Remaining in a Violent Relationship

- Negative Self Concept
- Learned Helplessness
- Husband Will Reform
- Economic Hardship of Leaving Too Great
- Children Need father
- Can't Cope Alone
- Divorces are Stigmatised
- Difficulties Getting a Job / Meeting New Friends

Parent and family risk factors for child maltreatment

- Parent and family risk factors for child maltreatment occur at above average rates in individuals' with a history of abuse.
- **Parental factors:** anxiety, depression, poor self-esteem, emotional problems, substance abuse, mental illness, poor interpersonal skills and involvement with violent partners
- **Family factors:** poverty or low income, living with step-parents, isolation or a perceived lack of social support, early separation from the mother, young parental age

Child factors associated with increased risk of abuse & neglect

Child characteristics can also be associated with increased risk of maltreatment because they are particularly stressful for parents with a history of abuse who may not have the personal resources to cope with the stress of:

- pregnancy or birth complications
- infants and young children
- a child with special needs (e.g., physical disability)

Families who Maltreat Children Conditional Probabilities from 5-Yr Prospective Study

United Kingdom

(N=14,252)*

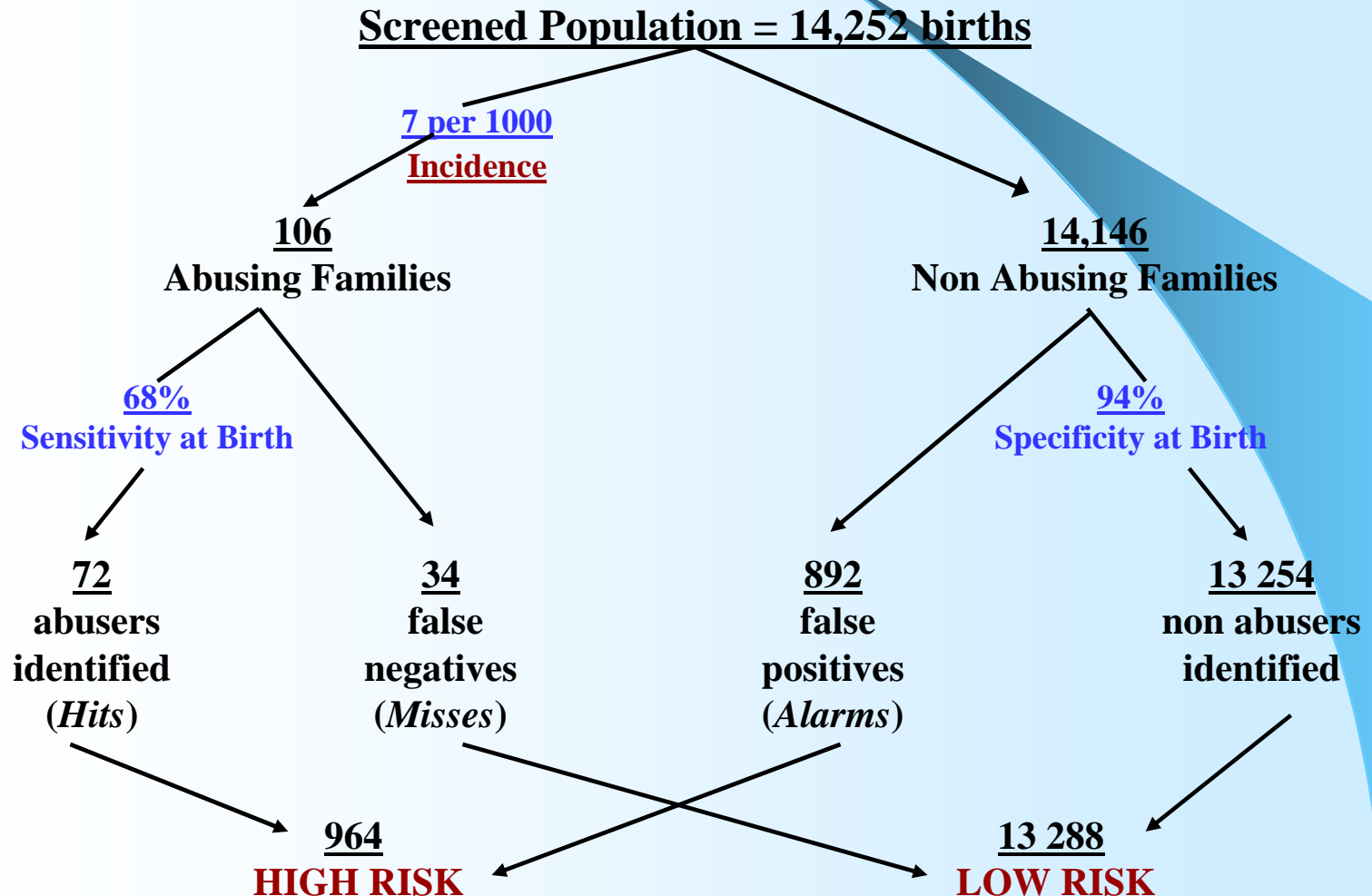
12.4	*Violent Partners
7.0	*Indifferent Parents
5.0	*Single Parent, social isolation/exclusion
3.9	*Socio-Economic Problems
5.2	*Mental Illness, alcohol & drug misuse
7.6	*Parent abused as a Child
2.3	*Infant Premature/Low birth weight
2.8	*Separated at Birth
2.8	*Teenage parent
3.2	Step-Parent
1.6	Less than 18 ms between births
1.9	Disabled Child
0.7	*Parent with a maltreated child under 5 (n=106)

***Shared risk factors between SIDS and Child Maltreatment**

***Browne & Herbert (1997) *Preventing Family Violence* p.120**

Effects of Screening a Population to Predict Child Maltreatment in England

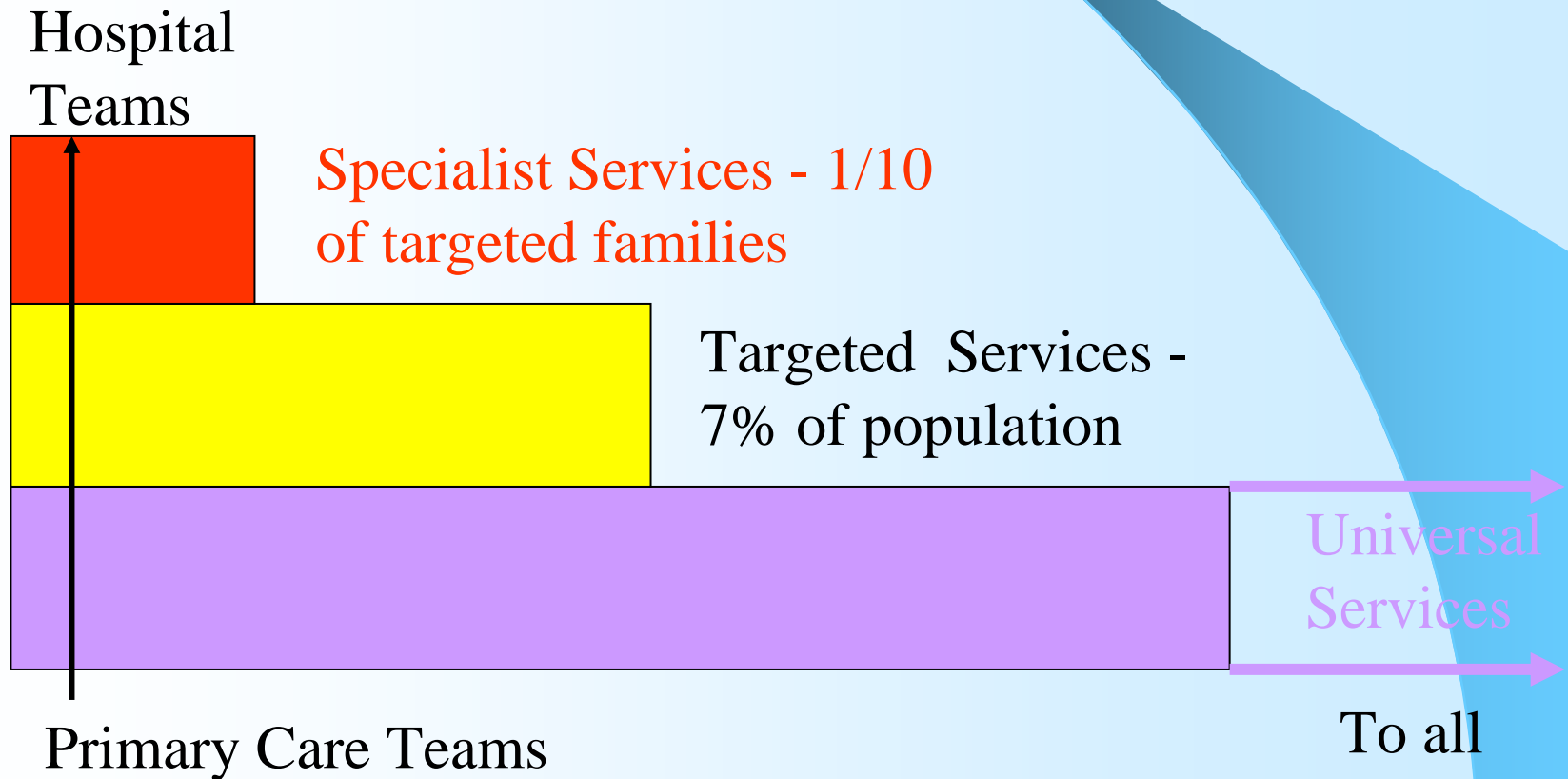
From Browne & Herbert (1997) *Preventing Family Violence* p. 121



Levels of Prevention

- **Primary Prevention** with *Universal Services* offered to the whole population on a routine basis.
- **Secondary Prevention** with *Targeted Services* directed at ‘high risk groups’ and offered intervention before maltreatment.
- **Tertiary Prevention** with *Specialist Services* for treatment of families/institutions where parents/caregivers are maltreating the children. Intervention is offered only after “significant harm” has occurred.

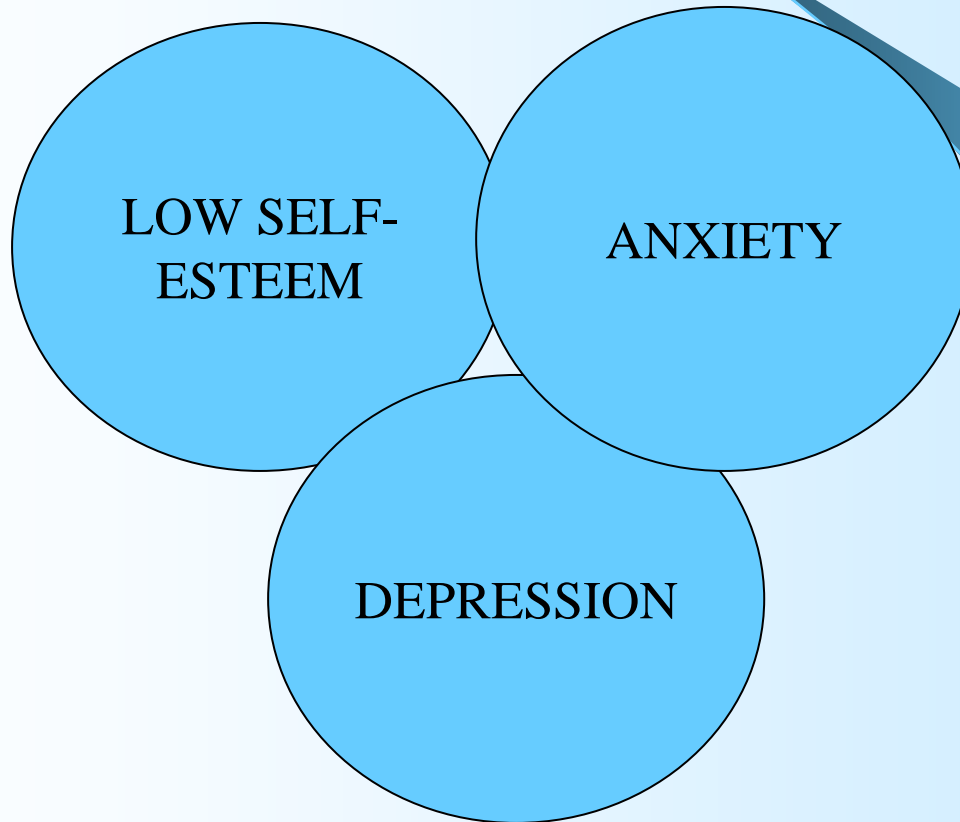
The Build up of Health Services that Children and their Families Receive



Recognise the mental health needs of parents

- The transition to parenthood is a critical period in adult psychological development
- Provide support to parents who unable to cope, by telephone help lines, drop-in centres, community support groups and voluntary visitors
- Low self-esteem, anxiety, depression, alcohol and drug misuse, all strongly influence the quality of parental care and infant attachment

THE INTERRELATIONSHIP OF MENTAL HEALTH PROBLEMS



Self Reported Depression in mothers During the first 12 months post delivery

	Low Risk	High Risk	Abuser
Yes	32.0%	47.9%	63.6%
No	68.0%	52.1%	36.4%

Chi squared = 6.66 (2 df) $p < 0.4$

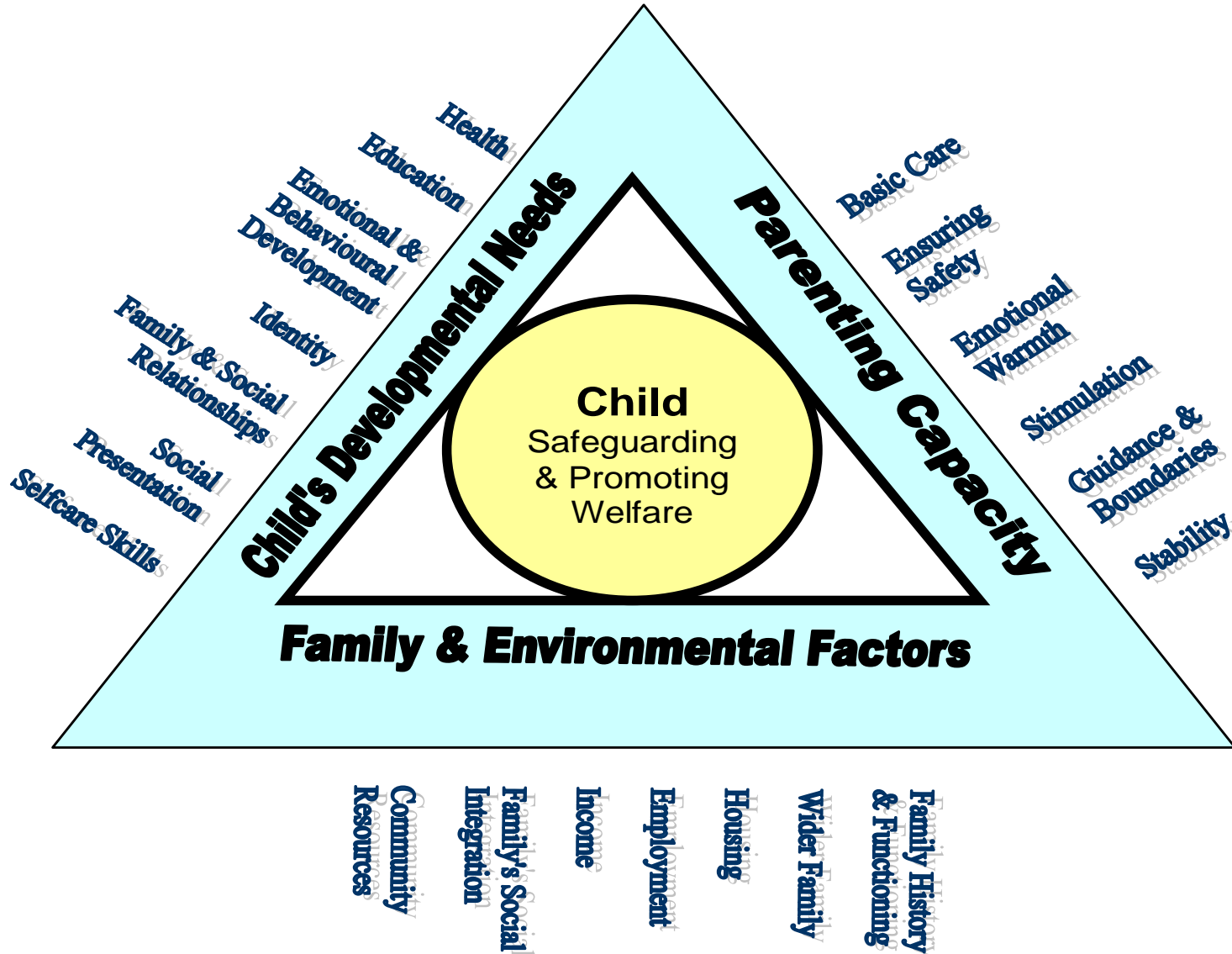
(Browne & Saqi, 1987)

Health Visitors to the Family Home

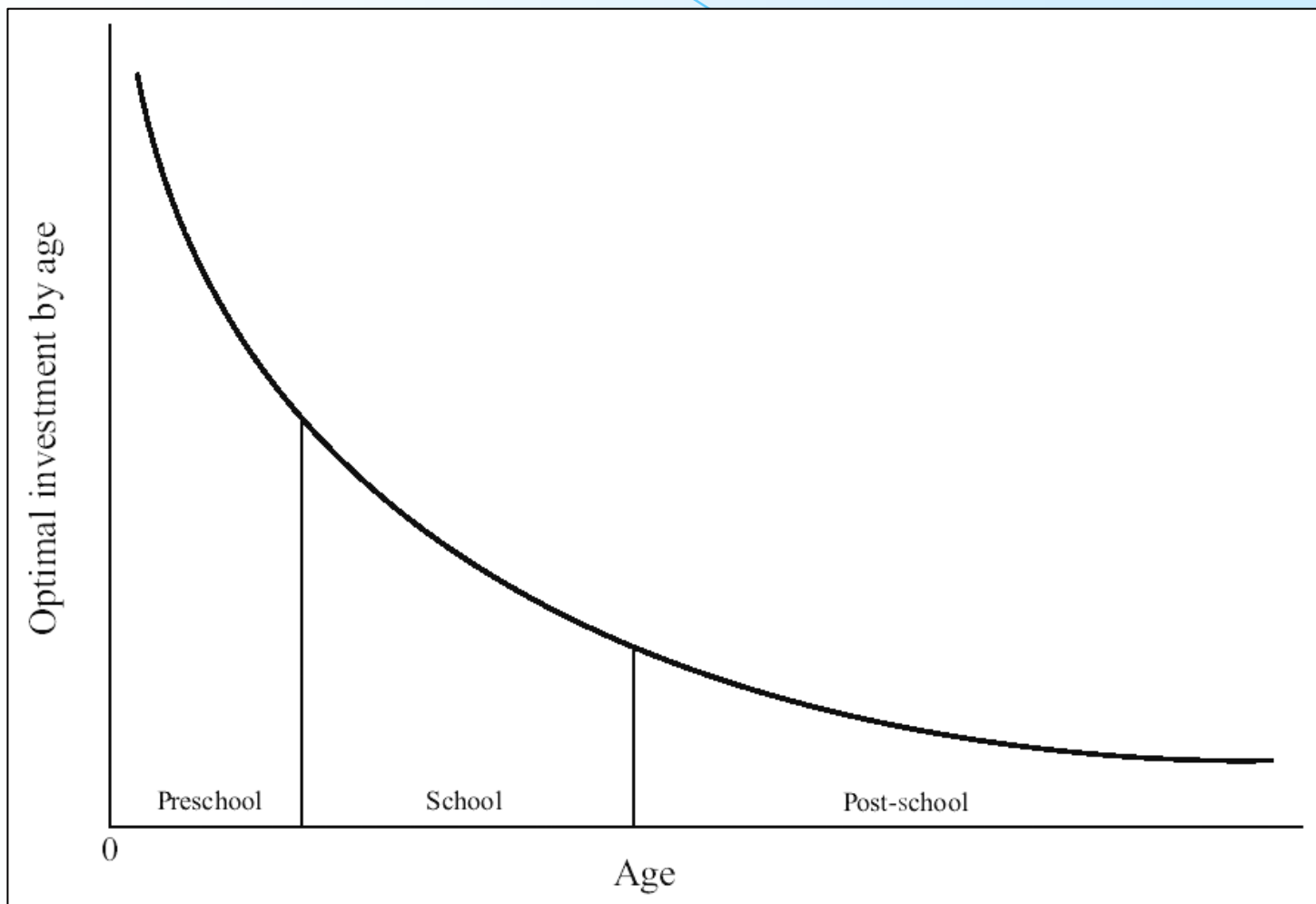
Assess:

1. The level of need in the infant and their families
2. The number of 'Risk Factors' for child abuse and neglect present in families with newborns
3. The perceptions and attributions the parents have for their infant; positive or negative
4. The quality of infant attachment to the parent at 12 months; Secure or Insecure

Framework for the assessment of children and families (Department of Health, 2000)

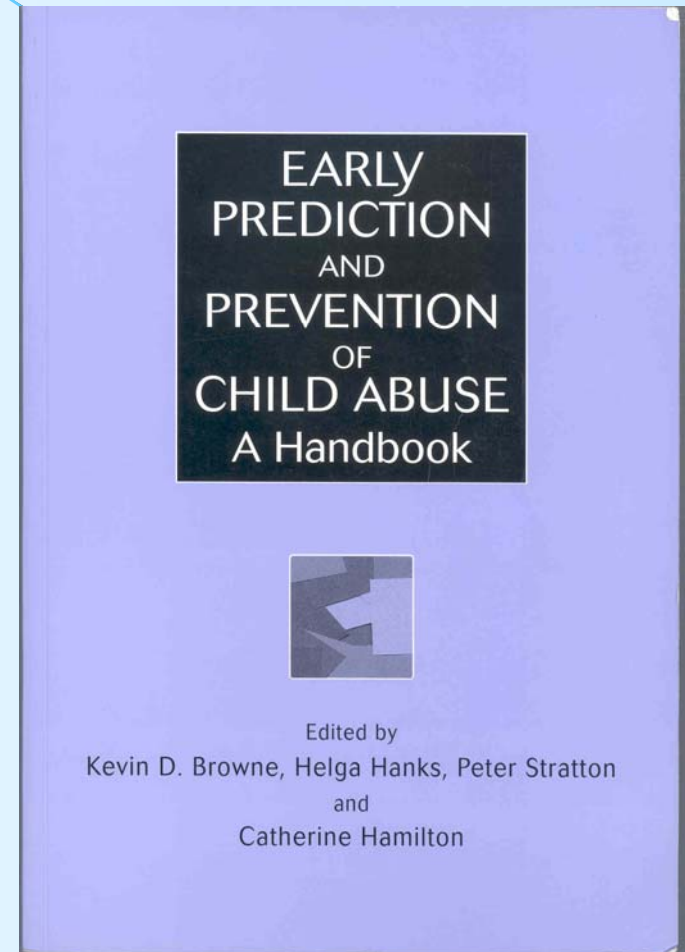
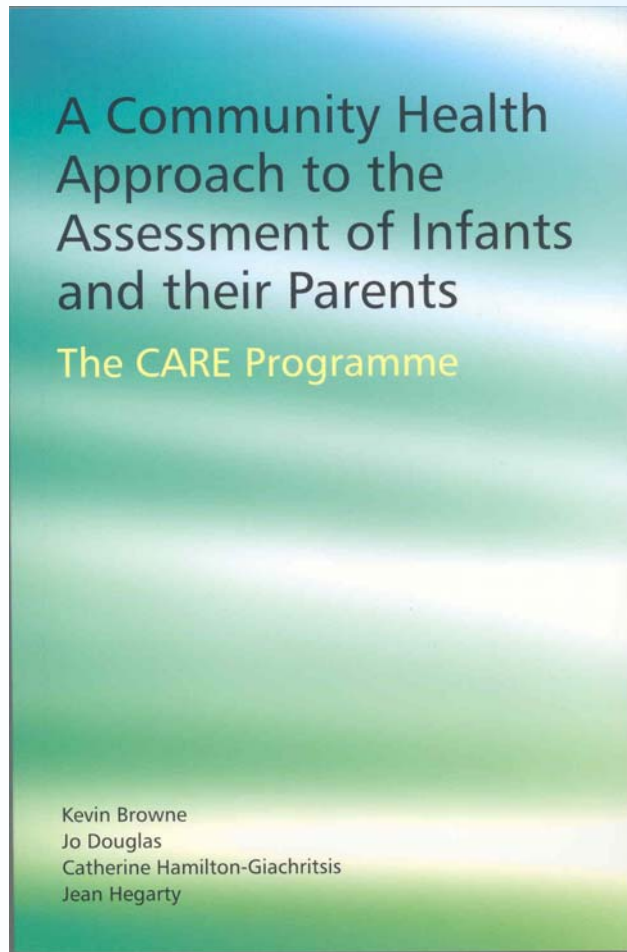


Implication for optimum investment to Reduce Child Maltreatment and Delinquency



Source: J Heckman & D Masterov (2005) Ch 6, *New Wealth for Old Nations: Scotland's Economic Prospects*

Books that support the WHO training and information pack on the prevention of child abuse and neglect



Child Abuse References

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