# ENRICHING KNOWLEDGE FOR THE HEALTH MANAGEMENT AND SOCIAL CARE CURRICULUM SERIES – HEALTH AND SOCIAL CARE ISSUES

#### **Learning and Teaching References**

- 1 Personal Needs and Development across Lifespan
- 2 Health and Well-being
- 3 Physical Well-being Healthy Body
- 4 Mental Well-being Healthy Mind
- 5 Social Well-being Inter-personal Relationship
- **6** Healthy Community
- 7 Caring Community
- 8 Ecology and Health
- 9 Building a Healthy City
- 10 Healthcare System
- 11 Social Welfare System
- 12 Medical and Social Care Professions
- 13 Health and Social Care Policies
- 14 Social Care in Action
- 15A Health and Social Care Issue Ageing Population
- 15B Health and Social Care Issue Discrimination
- L5C Health and Social Care Issue Domestic Violence
- 15D Health and Social Care Issue Addiction
- 15E Health and Social Care Issue Poverty

### Domestic Violence

Booklet 15C September 2016

### **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
- 2AStructural issues related to health, social care and personal and social well-being

#### Aims

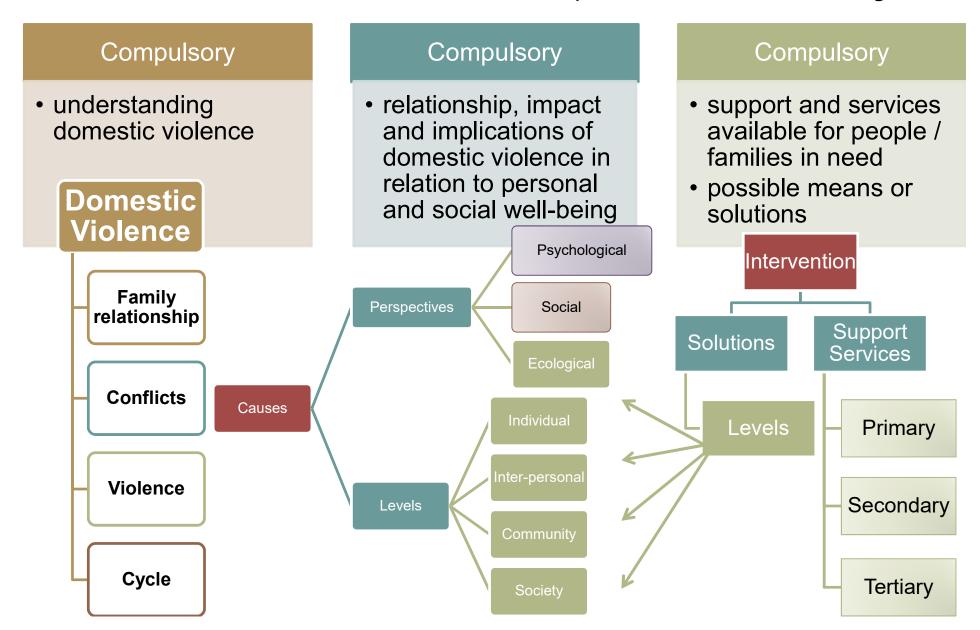
- To analyse the relationship, impact and implications of domestic violence in relation to personal and social well-being
- To identify the support and services available for people / families in need and suggest other possible means or solutions

#### Content

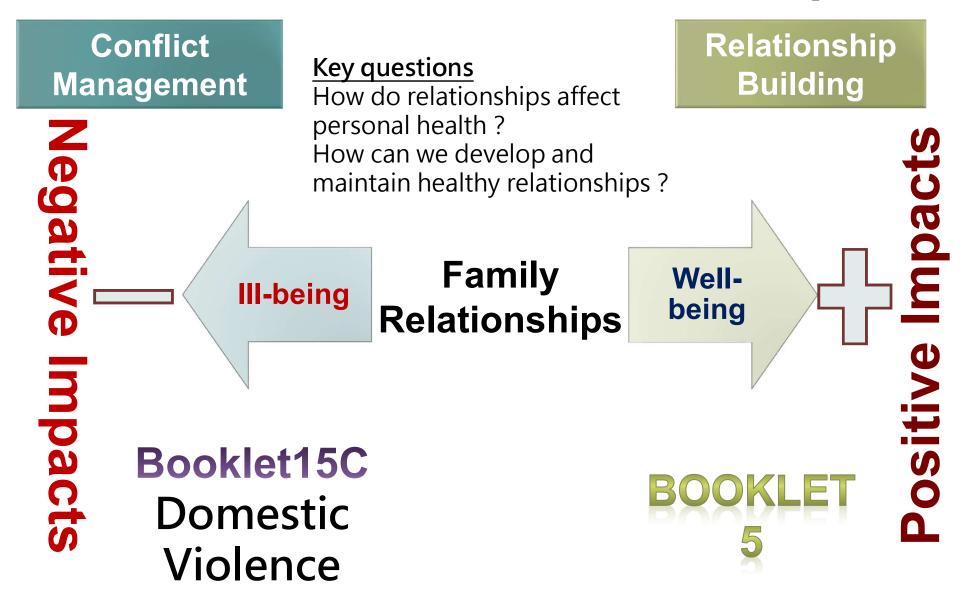
 2A4 - Family problems e.g. Child and elderly abuse, family violence

#### 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**



## Booklet 5.4 Conflict Resolution

	Strategies	Description	ictims •
	Avoiding	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	An individual pursues his own interests at the expense of others	I am the winner and you are the loser.
	Accommodating BUSER	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  Victims
	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

### Calm phase

 the batterer ignores the victim (cold war)

### Tension building phase

 the batterer uses spoken language to humiliate the other side

### Acting-out phase

the batterer punches the victim

### Honeymoon phase

 the batterer apologises to the victim and asks for forgiveness



### 15C.1B Etiology of Domestic Violence

Perspective	Etiology
Psychological	<ul> <li>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)</li> </ul>
	<ul> <li>Violent behavior is the result of accumulated pressure of the abuser. Sources of pressure may include unemployment, difficulty in bringing up children, etc</li> </ul>
Psychosocial	Abuser's behaviour comes from imitation of people around him or the media
Ecological	Social Ecological Model(WHO) 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

### 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

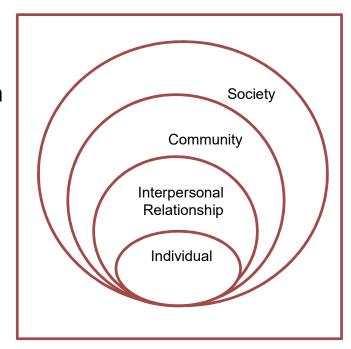
 organizations outside the family, including schools, companies, religious organizations, hospitals and community centres, in which domestic violence can be effectively discovered and intervened

#### 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> <li>Personality and behavioural characteristics of abusers:</li> <li>Low self-esteem, poor control of their impulses, mental problems and display anti-social behavior</li> <li>Inability to cope with stress and difficulties as well as to access social support systems</li> <li>unrealistic expectations about child development - greater irritation and annoyance in response to children's mood and behaviour</li> <li>Prior history of abuse - parents maltreated as children are at higher risk of abusing their own children</li> </ul>	<ul> <li>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</li> <li>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</li> </ul>	<ul> <li>Poverty - communities with high levels of unemployment and concentrated poverty</li> <li>Lack of social networks and/or weak neighbourhood connections</li> <li>Cultural norms for gender roles and parent-child relationship</li> </ul>

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

		Individual		Family	C	ommunity / Society
Elderly Abuse	impold me inc to do circo.  Lac success aw right ser see ind about the control of	pairments of the abused ler person - owing to ental or physical capacity, they are unable communicate their cumstances to others ck of personal resources, ch as financial resources, careness of personal ht, knowledge about rvices or resources for eking help or achieving lependence from the users cial isolation / lack of cial support network cause of loss of friends d other relatives during lerly	•	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	•	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> <li>Low income         /unemployment may         lead to unstable         emotions and increase         the chance of being a         batterer</li> <li>Individuals with family         history of domestic         violence/ mental health         problem may have a         higher chance of being         a batterer</li> <li>Alcohol abuse causing         a loss of control may         increase the chance of         being a batterer</li> </ul>	<ul> <li>Difference in parenting style may lead to conflicts in child rearing</li> <li>Poor marital relationship may lead to more conflicts/ less tolerance</li> </ul>	<ul> <li>Traditional and cultural believe make the victims tolerate the battering</li> <li>Insufficient public awareness of the needs to report battering</li> </ul>

### 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 Of prevention	Goals	Strategies	Examples of Service
Primary	<ul> <li>To arouse public concern on domestic violence</li> <li>To promote family harmony</li> </ul>	<ul> <li>Promotion of community collaboration</li> <li>Changing gender stereotype through education</li> <li>Promotion of family life education</li> </ul>	• Family education service

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

Level Of prevention	Goals	Strategies	Example of Service
Secondary	<ul> <li>To identify risk factors of violence</li> <li>To provide surveillance</li> <li>To provide early identification and intervention</li> </ul>	<ul> <li>Concept of risk management:</li> <li>Developing screening tools for investigating risk factors</li> <li>Early detection of medical practitioner, social worker, teacher and police</li> <li>Providing intervention to</li> </ul>	<ul> <li>Referral service</li> <li>Counseling service</li> </ul>

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

Level Of prevention	Goals	Strategies	Example of Service
Tertiary	<ul> <li>To reduce relapse and casualty of domestic violence</li> </ul>	Medical support	<ul> <li>Accident and Emergency Services</li> </ul>
		<ul><li>Legal assistance</li><li>Police intervention</li><li>Judicial proceeding</li></ul>	<ul> <li>Law enforcement</li> </ul>
		<ul><li>Safety plan formulation</li><li>Emergent settlement</li></ul>	<ul><li>Shelter home</li><li>Crisis     Intervention and     Support Centre</li></ul>
		<ul> <li>Psychotherapy</li> </ul>	<ul> <li>Counseling service</li> </ul>

### 15.3 Multifaceted Intervention

	Individual	Family	Community / Society
Level of intervention	<ul> <li>Addressing individual risk factors, e.g. stress and anger</li> <li>Taking steps to modify individual risk behaviour</li> </ul>	<ul> <li>Relationship building</li> <li>Working to create healthy family environments</li> <li>Providing professional help and support for dysfunctional families</li> </ul>	<ul> <li>Developing community support</li> <li>Building of neighbourhood and community bonds and networks to support families at risk</li> <li>Providing education and campaigns to raise public awareness</li> <li>Addressing gender inequality and adverse cultural attitudes and practices that contribute to violence</li> <li>Legislation to prevent domestic violence</li> </ul>

### **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		al growth (family roles) , family relation, interpersonal relationship, communialth	• • •
Centre	<ul> <li>Services provided</li> <li>Environment and facilities</li> <li>Characteristics of client groups</li> <li>Atmosphere of the centre</li> <li>Job duties of various workers in the unit</li> </ul>	<ul> <li>Clients</li> <li>Needs</li> <li>Views on services</li> <li>Experience of using the services</li> <li>Physical, intellectual, emotional and social aspects of health</li> <li>Family relationship</li> <li>Professionals</li> <li>Duties / division of work</li> <li>Intervention objectives, approaches and skills</li> <li>Work related training programmes / pathways</li> <li>Difficulties related to the jobs</li> </ul>	<ul> <li>Volunteer services can be provided through:</li> <li>Assist in organising family activities</li> <li>Community survey</li> <li>Neighbourhood scheme</li> <li>Sit in / Be an observer in:</li> <li>Workshop on parenting skills</li> <li>Home safety seminar</li> <li>Activities to promote mutual help in community</li> </ul>

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
Elderly Centre (Community		system, ageing population, commur ontrol, residential care, community c	
Support Services)  Hospital / care-and- attention home / day hospital (medical care)	<ul> <li>Environment - elderly friendly community</li> <li>Services provided in the community</li> <li>Treatments provided by OT and/or PT</li> <li>Characteristics of elderly in the community</li> <li>Job duties of various workers in the centre</li> <li>Risk assessment</li> </ul>	<ul> <li>Elderly</li> <li>Physical, intellectual, emotional and social aspects of health</li> <li>Problems or needs: e.g. medication and medical care</li> <li>Living in the community</li> <li>Social support network</li> <li>Carers of Elderly</li> <li>Stress management</li> <li>Care skills and related difficulties</li> <li>Professionals</li> <li>Duties / division of work</li> <li>Work related training programmes / pathways</li> <li>Difficulties related to the jobs</li> <li>Skills to provide care to the elderly</li> </ul>	<ul> <li>Volunteer services can be provided through</li> <li>Home visits</li> <li>Game days with elderly and carers</li> <li>Check-up, such as measurement of blood pressure</li> <li>Community survey to identify the elderly at high risk</li> <li>Sit in to be an observer in:</li> <li>Stress management workshop for carers</li> <li>Treatments provided by OT and/or PT</li> </ul>

#### **Examples of Study Questions for Current Issues of Social Care**

Theme	Child Abuse
Study questions	<ul> <li>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?</li> <li>What are the features of high risk groups of child abuse? Analyse the causes of child abuse at individual, family and societal levels.</li> <li>What is self-esteem? What are the possible effects of abuse towards the self-esteem of a child?</li> <li>How different policy instruments could be used effectively to tackle child abuse?</li> </ul>

#### **Examples of Study Questions for Current Issues of Health Care**

Theme	Elderly Abuse
Study questions	<ul> <li>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.</li> <li>According to the concept of holistic health, discuss the possible health risks to the abused elderly</li> <li>Based on the Action Means for Health Promotion, evaluate and suggest the ways to prevent elderly abuse in Hong Kong.</li> </ul>