

CHAPTER 6

GUIDELINES FOR SOCIAL WORKERS RENDERING SERVICES CONCERNING CHILD ABUSE

6.1 INTRODUCTION

Social work service delivery in child abuse needs to be enhanced with a view of reducing the rate of child abuse, which is increasing on a daily basis. Social work service delivery in child abuse cases can be enhanced through the formulation of guidelines for social workers. This chapter focuses on the formulation of guidelines for social workers rendering services in child abuse cases, on the basis of the theory empirical research and the researcher's practical experience.

6.2 SOCIAL WORK GUIDELINES CONCERNING CHILD ABUSE

Information on the theoretical orientation of child abuse, its causes and impact, has been discussed in detail in Chapter two to three, while information of social worker service delivery in child abuse has been discussed in Chapter four and will not be repeated in this Chapter. For detailed information on child abuse and social worker service delivery, the reader can utilize these chapters.

Guidelines, which have been formulated, are as follows:

The social workers rendering services concerning child abuse need to be knowledgeable of the nature of child abuse and social work functions employed in rendering services concerning child abuse. These aspects are discussed below:

6.2.1 Knowledge of the nature of child abuse

Social workers need to know the following aspects of child abuse:

6.2.1.1 The definition of child abuse

Child abuse refers to the physical or mental injury, sexual abuse or negligent maltreatment of a child under the age of eighteen in which the child's health or welfare is harmed or threatened.

Knowledge of this definition will enhance the social worker's service delivery, as it will serve as their basic point of departure.

6.2.1.2 The child abusers

Children can be abused by a variety of people, including; strangers, school teachers, parent-biological, stepparents or adoptive parents, family relatives-uncles or grandparents. It appears as if the children's stepfathers are the highest abusers in number, followed by the children's mothers, relatives, fathers and then strangers. This knowledge can help the social workers in planning their intervention and they should focus on all the possible child abusers in their service rendering, e.g. in the prevention of child abuse.

6.2.1.3 The types of child abuse

There are various types of child abuse which can be experienced by children.

The following is a guideline for the types of child abuse:

- Physical abuse which refers to any non-accidental action that causes physical injury to child.
- Sexual abuse which refers to contacts between the child and an adult whereby the child is being used for sexual stimulation of the adult.
- Emotional abuse which refers to the failure to provide an emotionally satisfying environment in which the child can thrive and develop.
- Neglect which refers to failure to provide the child with the necessities of life which are deemed essential for developing a child's physical, intellectual and emotional capacities.

The findings of this study indicated that physical abuse is experienced by the highest

number of children, followed by sexual abuse, neglect and then emotional abuse. This might be attributed to the point that the symptoms of physical abuse are easily identifiable as compared to e.g. emotional abuse. However, the social workers need to focus on all the types of child abuse disregarding the rates as experienced.

- **The nature of physical abuse**

The following is a guideline for the nature of physical abuse. Physical abuse includes the following:

- Injuries which can be located on any part of the child's body, e.g. on the face, head or body, depending on the abuse;
- burns which can show the following patterns:
 - * cigarette burns ;
 - * burns on the buttocks; or
 - * contact burns from being pressed to a hot source such as a stove.
- poisoning whereby a variety of drugs or household substances are used;
- suffocation whereby children are smothered in terms of placing a hand, a pillow or any item over the child's mouth and nose until he dies;

According to this study injuries were experienced by the highest number of children, followed by poisoning and then suffocation. Burns are not experienced. Although burns are not experienced, it is a need that social workers should focus on it .

- **The nature of sexual abuse**

The following is a guideline for the nature of sexual abuse:

- Sexual contacts of intimate parts, e.g. the penis, vagina, anus or pelvic-area;
- fondling of either the abuser or the abused;
- oral genital contact;
- sexual intercourse;
- anal intercourse;
- interfemoral in which the penis is placed between the child's legs; and
- sexual assault which includes rape.

This study indicated that sexual intercourse has been experienced by the highest number of children, followed by oral genital contacts, fondling and sexual contacts of intimate parts. Anal intercourse and interfemoral are not experienced.

It is necessary that the social workers focus on all the types of sexual abuse disregarding whether it is experienced or not.

- **The nature of emotional abuse**

The following is the guideline for the nature of emotional abuse:

- Rejection which refers to behaviours that constitute abandonment;
- isolating whereby the child is cut off from normal social experiences;
- ignoring whereby the child is deprived of stimulation for emotional development;
- terrorising whereby the child receives extreme punishment; and
- corrupting in which the child is encouraged to engage in antisocial behaviour.

According to the findings of this study rejection, ignorance, corruption and isolation are noticed while terrorising is not noticed.

Social work service rendering concerning child abuse should focus on all the types of emotional abuse even on those which are not noticed due to the point that it is difficult to notice emotional abuse.

- **The nature of neglect**

The following is a guideline for the nature of neglect:

- Poor nutrition in which the child receives inadequate food;
- lack of love whereby the child is not given the attention of a caring relationship;
- lack of protection meaning that the child is predisposed to accidents;
- lack of supervision in which young children are left unsupervised for longer

periods;

- inadequate shelter whereby the child is housed in an unsafe house;
- lack of clothing whereby a child wear ill-fitting clothes;
- lack of medical treatment in which the parent fails to provide care for the child's medical problems;
- poor hygiene whereby the child is unwashed; and
- educational neglect in which the parent fails to ascertain the child's attendance in school.

The findings of this study indicated that lack of nutrition, inadequate shelter, lack of clothing and medical neglect have been experienced. While educational neglect, lack of love, lack of protection and lack of supervision were not experienced. The social workers need to focus on all these types of neglect and to confirm whether the situation is neglect or poverty.

6.2.1.4 The symptoms of the types of child abuse

Each type of child abuse has its own symptoms according to which it can be identified. There are both physical and behavioural symptoms.

- Physical symptoms of physical abuse

Physically abused children can show bruising and lacerations. It appears as if bruising and lacerations are being noticed as physical symptoms of physical abuse. It is therefore necessary for social workers to focus on bruising and lacerations in their service rendering concerning child abuse. This can enhance their service rendering.

- Behavioural symptoms of physical abuse

The following is a guideline for the behavioural symptoms of physical abuse:

- Fear of physical contact;
- temper tantrums;
- withdrawal;
- craving for attention;

- wearing long sleeved clothing;
- overly aggressive;
- sleepy in class;
- fearful of parents;
- arriving early at school; and
- excessive school absence.

According to this study the following behavioural symptoms of physical abuse are experienced: fear of physical contact, temper tantrums, fearful of parents, over aggressiveness and excessive school absence, while craving for attention, wearing long sleeved clothes, sleepy in class, withdrawal and arriving early at school are not experienced. Although all the symptoms are not noticed all the symptoms should be considered in service delivery.

- **Physical symptoms of sexual abuse**

The following is a guideline for the physical symptoms of sexual abuse:

- Pregnancy at an early age;
- bruises of external genitalia;
- bleeding from external genitalia;
- swollen cervix;
- red vagina;
- the presence of semen;
- torn bloody garments;
- the presence of sexually transmitted diseases;
- vaginal discharge; and
- complaints of difficulty in urination.

This study indicated that the following physical symptoms of sexual abuse are noticed: pregnancy at an early age, bruises of external genitalia, red vagina, presence of semen, presence of sexually transmitted diseases and complaints of difficulty in urination. Bleeding from the external genitalia, swollen cervix, torn bloody garments and vaginal discharge are not noticed. The social workers should focus on all these symptoms in cooperation with the medical staff for effective service rendering concerning child abuse.

- **Behavioural symptoms of sexual abuse**

The following is a guideline for the behavioural symptoms of sexual abuse:

- Poor peer relationships;
- prostitution;
- comments that the child was assaulted;
- substance abuse;
- irregular school attendance;
- engaging in delinquent acts;
- sleep disturbance; and
- suicide attempts.

The following behavioural symptoms of sexual abuse are found to be noticed: poor peer relationships, substance abuse, irregular school attendance and sleep disturbances while prostitution, comments that the child has been assaulted, engaging in delinquent acts and suicide attempts are not noticed.

- **Physical symptoms of neglect**

The following is a guideline for the physical symptoms of neglect:

- Abandonment;
- poor personal hygiene;
- inadequate clothing;
- absence of needed medical care; and
- being hungry.

Inadequate clothing and absence of medical care are noticed while abandonment, poor personal hygiene and being hungry are not noticed. It should be determined whether a symptom such as inadequate clothing amounts to neglect or to poverty as this symptom can be indicating either neglect or poverty.

- **Behavioural symptoms of neglect**

The following is a guideline for the behavioural symptoms of neglect:

- Falling asleep in school;
- begging for food;
- irregular school attendance;
- use of drugs;
- engaging in delinquent acts; and
- failing to thrive as an infant.

This study indicated that begging for food and irregular school attendance are noticed while falling asleep at school, use of drugs, engaging in delinquent acts and failing to thrive as an infant are not noticed. However the social workers need to focus attention on all the behavioural symptoms of neglect for effective service rendering concerning child abuse.

6.2.1.5 The causes of child abuse

Child abuse is caused by a variety of factors which can be classified under different models. The following is a guideline for the causes of child abuse:

- The psychodynamic model which attributes the causes of child abuse to parental inadequate psychological functioning and understanding of parental roles. This model includes the following causal factors:
 - * Lack of mothering imprint;
 - * excessive expectations towards the child;
 - * parental role reversal;
 - * scapegoating;
 - * immature parents; and
 - * mental illness.

- The learning model which attributes child abuse to the lack of learning certain skills to employ when interacting with children, e.g. child rearing skills.

- The environmental model which take account of external factors as causing child abuse. This model includes the following factors;
 - * Occupational stress;
 - * poor education;
 - * poverty;
 - * alcohol abuse;
 - * drug abuse;

 - * overcrowding;
 - * poor housing;
 - * unemployment; and
 - * social isolation.

- The biosocial model which considers the causes of child abuse from the standpoint of child factors such as the inferior health status of the child or child handicap.

- The psychosocial system model which regards child abuse as resulting from a combination of various stress factors, e.g. the interaction of the psychodynamic and environmental factors.

The following factors from different models has been indicated as the main and contributory causes of child abuse:

- Lack of mothering imprints;
- excessive expectations from the child;
- parental role reversal;
- scapegoating;
- immature parents;
- mental illness;
- lack of child rearing skills;
- poverty;
- poor education;
- occupational stress;
- alcohol abuse; and

- drug abuse.

Lack of social skills, inferior health status and overcrowding are not indicated as the causes of child abuse. Although all the factors are not indicated as the causes of child abuse in this study, the social workers rendering services concerning child abuse should focus on all these factors for effective service rendering.

6.2.1.6 The impact of child abuse on the abused child

Child abuse can have various negative effects on the abused child. The following is a guideline for the negative impact of child abuse on the abused child

- Psychological ;
- Behavioural;
- cognitive; and
- personality effects.

According to the findings of this study child abuse has all the negative effects as mentioned above, on the abused child, as a result the impact of child abuse should be the main focal aspect in rendering services concerning child abuse.

6.3 SOCIAL WORK FUNCTIONS IN SERVICE RENDERING CONCERNING CHILD ABUSE

Social workers rendering services concerning child abuse need to know that there are specific functions which are performed to manage child abuse. Such functions are as follows:

- Identification;
- investigation;
- intervention; and
- prevention.

A discussion of these functions as guidelines for social work service delivery concerning child abuse is given below;

6.3.1 Identification

Child abuse must be identified before intervention of any kind can be rendered. Identification includes interviewing people involved in child abuse, e.g. the child, parents, all the adults in the home and witnesses with a view of understanding the situation.

The following is a guideline for what the social workers should do when interviewing the parents. They should:

- Select interviews appropriate to the situation;
- conduct the interview in private;
- tell the parents why the interview is taking place;
- be direct, honest and professional;
- tell the parents that the interview is confidential;
- reassure the parents of the support of the program;
- tell the parents if a report has been made or will be made; and
- advise them of the worker's legal responsibilities to report.

The social workers should not:

- Try to prove abuse or neglect by accusations or demands;
- display horror, anger, or disapproval of parents, child or situation;
- focus on family matters unrelated to the specific situation; and
- place blame on the parents or child.

When interviewing the child who can understand the interview, the social workers should:

- Make sure the interviewer is someone the child trusts;
- conduct the interview in private;
- sit next to the child, not across the table or desk;
- tell the child that the interview is confidential;
- conduct the interview in the language that the child understands;
- ask the child to clarify words or terms that are not understood; and

- tell the child of any future action that will be required.

The social workers should not:

- Allow the child to feel in trouble or at fault;
- criticise the child's choice of words or language;
- suggest answers to the child;
- probe or press for answers which the child is not willing to give;
- display horror, shock or disapproval of parents, child or the situation;
- force the child to remove clothing;
- conduct the interview in a group of interviewers; and
- leave the child alone with a stranger.

According to the findings of the study identification as a function of child abuse is performed when rendering services concerning child abuse. The performance of this function should be encouraged as it forms the basis of service delivery concerning child abuse.

6.3.2 Investigation

Investigation focuses on the assessment of the abused child, the parents, and the circumstances surrounding the abuse with the aim of planning intervention to solve the problem in question. Social workers who are doing assessment are required to have knowledge of family dynamics, human development and environmental factors for making decisions regarding intervention and of each type of abuse, i.e. physical, sexual, emotional and neglect in terms of having its own different character and dynamic pattern.

The following is a guideline for the issues which should be explored:

- Determining the degree of risk to the child in making decisions to allow him to remain in the abusive situation.
- Special considerations should be taken into account in decision making, namely: e.g. in the case of physically abusive parents, the major emphasis is on the parents' reaction to the injuries incurred. The following are important: the family's attitude towards corporal punishment and the role this may have

played in the injury, the ease with which the parents lose control of their behaviour and the amount of stress required to trigger this and the role of the non-abusive spouse in abuse.

In cases of neglect, the social worker first needs to know what caused the parents to neglect their children. He/she must try to discover which needs of the parents caused them to turn away from the child. Secondly, it is also important to know which needs of the parent interfere with nurturing the child, and lastly a distinction between environmental stress and psychological stress must be made.

In cases of emotional abuse, professionals agree that there must be an action or series of actions or omissions by the parents that can be shown to have caused emotional harm or injury. Qualified mental health professionals can only determine the cause and extent of injury.

An assessment of sexually abusive parents must evolve from considerations of very complex issues of both parents such as relationship with the abused child, e.g. is he/she a stepchild or not, interaction between the parent and the child and/or type of housing in which they are accommodated.

In assessing an abused child focus should be on the child's role in the parent/child interaction that resulted in abusive or neglected actions and on the extent of harm to the child. This data is basic for treatment planning. Individual variations in data obtained generally reflect the age of the child. With the age factor in mind, the social worker surveys the psychosocial functioning of the children relative to their own development, to their family and to the particular abusive incident. There are several core issues when assessing children as well as special issues relevant to particular age groups as discussed below:

The special issues of infancy are the degree of attachment between parent or parent surrogate and the child and developmental delays. Physically abused infants as well as neglected infants often demonstrate failure to thrive and show developmental delays.

In evaluating the pre-school child, it is important to note whether the child is a problem child, i.e. a child whose developmental delay manifests in provocative behaviour, such as rigidity, negativism and hyperactivity. These children often

become targets of abuse or neglect. Normal developmental tasks of this period such as separation and toilet training can over stress the inadequate parent, resulting in abuse. Precocious separation or hyper maturity is sometimes secondary to abuse and neglect and may mask a significant lack of depth in interpersonal relations.

Latency or school age children who presented developmental delays or personality traits such as difficult toilet training and negativity in their pre-school period may now manifest refusal to attend school. At this stage problems such as school failure, poor peer relations and cranky behaviour at home play a role in abuse. Childhood depression is another prevalent result of abuse and neglect. The social worker is dealing with children at this age who may defend the parent out of fear of loyalty and may be guarded.

Adolescents are more likely to report abuse or neglect than younger children either to the school authority, police or social workers. These adolescents want help but not at the expense of alienating parents or destroying the family. They are more subject to guilt feelings about the effects of the report on their parents. Changing their minds or their stories regarding abuse manifests this ambivalence. The adolescent may be out of control and actually be of an age to victimise the parents but whatever the provocation for parental abuse, the abusing parent is also out of control.

The function of investigation is performed in service rendering concerning child abuse as indicated by the findings of the study. The performance of this function should be enhanced as it is necessary for planning intervention.

6.3.3 Intervention

Intervention is defined as professional behaviour of a social worker to bring about change in the person-environment situation to achieve the objectives of the agreement of co-operation, which has been entered into with the client, e.g. the parents.

The goal of intervention with such parents is to assist them to deal with a range of problems associated with child abuse. Various methods of intervention that can be used in service delivery concerning child abuse has been identified as follows;

- Social work with the individual;
- social work with the family;
- social work with the group;
- social work with the community;
- social work research; and
- an integrated application of these methods.

Social workers who are rendering services concerning child abuse can choose among these intervention methods or integrate them in consideration with the specific case being dealt with.

The following is a guideline for the employment of the methods of intervention in rendering services concerning child abuse;

6.3.3.1 Social work with the individual

The New Dictionary of Social Work (1995:8) define social work with the individual as a method of social work aiming primarily at helping individuals on a person-by-person basis to attain the fullest degree of social functioning. Social work with the individual in child abuse cases encompasses a broad range of intervention aimed at restoring, maintaining and enhancing the individual's personal and social functioning. The following is a guideline for the benefits of employing social work with the individual for parents:

- To enhance their ego functioning, particularly in the areas of impulse control and judgement;
- to acquire better coping skills;
- to develop the self-esteem and empathy that are so essential to good parenting;
- to improve role functioning and interpersonal relationships;
- to learn better child management techniques;
- to develop more realistic and age appropriate expectations of children;
- to modify long-standing behaviour patterns;
- to compensate for early developmental arrests;
- to gain greater self-awareness; and
- to improve relationships with the community .

Social workers involved with individuals in rendering services concerning child abuse can employ various intervention approaches which are mostly employed in rendering services concerning child abuse.

The following is a guideline for approaches which can be employed:

- Problem solving;
- behaviour modification;
- cognitive restructuring;
- ego-psychology; and
- crisis intervention.

These approaches overlap and must be used flexibly with the individuals involved. A choice can be made among these approaches. A discussion of the above given approaches follows below:

- **Problem solving**

The basic assumption of this approach is that human existence is a continual problem solving process. This approach is aimed at helping the person to solve whatever problems he cannot solve at the present moment and the by-product is that he will be able to solve future problems.

The major emphasis of the problem solving approach is the training of parents in problem solving skills following specific steps. The following is a guideline for the steps to be followed:

- Identifying the problem of child abuse;
- generating alternative solutions to solve the problem;
- exploring the consequences of each proposed alternative;
- choosing the best plan and implementing it; and
- evaluating the outcomes of the plan and its relevance with similar future situations of child abuse.

The findings of this study indicated that the problem solving approach is being

employed with the parents when rendering services concerning child abuse. The employment of this approach should also be employed with any person who is involved in child abuse, e.g. the child as victim, the abuser or child's family.

- **Behaviour modification**

The behaviour modification approach is predicated on a theoretical proposition that maladaptive behaviour is learned and can be unlearned under controlled situations.

Child abuse is argued to be the result of inadequately or inappropriately learned parenting behaviour and much intervention with parents/caregivers of abused children had led to the contemporary approaches to training parents/caregivers in developing more effective parenting strategies.

Intervention focuses on observable behaviour, the context in which these behaviours occur, with the objective of modifying the behavioural interchanges among persons in the target system. Focus is on the individual child who has been abused, the identification of child abuse, the antecedents to child abuse and the consequences that followed the occurrence of child abuse.

An assessment of the child's behaviour in its context relative to the parent's directives and responses to that behaviour is done. Intervention therefore focus on the training of parents to modify the manner in which they gave instructions to their children and the enhancement of the parent's skills in child management.

This intervention can affect the parent's attitudes towards their children positively and produce positive changes in the behaviour of siblings of the abused child as parents will generalise their new skills to the siblings.

Different techniques of intervention may be employed for various behavioural objectives, namely:

- Direct instruction, role-playing or modelling can be used to train parents in parenting skills; and
- relaxation training or communication exercises can be used for the development of social skills, reduction of stress, assertiveness training or anger control training.

Behaviour changes achieved are maintained after termination through strategies such as cognitive testing regarding the level of understanding which the individuals have concerning the processes by which they have acquired their new skills. Follow-up is made at predetermined intervals focussing on identifying any regression in the acquired behavioural skills (Furniss et al, 1994:869; Lutzker et al, 1994:69 and Brunk, 1997:180).

According to the findings of this study the behaviour modification approach is being employed when rendering services concerning child abuse. The employment of this approach should be encouraged to continue as child abuse can be seen as negative behaviour which is learned and can be unlearned.

- **Cognitive restructuring**

According to authors such as Fennel (1992:129), Vondracek (1995:120) and Palmer (1996:77) the cognitive restructuring approach focuses on changing the incorrect thought patterns, beliefs and attitudes of the clients which it is believed to lead to lasting behaviour change.

Child abuse is addressed in terms of incorrect premises and a proneness to distorted imaginable experiences, which lead to incorrect emotions and responses to external events. One of the features which is common to the acts of abuse is the underlying emotion of anger. Anger is therefore the most evident parental response to what is seen as the child's provocative behaviour. The aims of the cognitive restructuring approach is therefore to alleviate parental anger in the face of perceived provocation by children, and to improve child management skills.

The following is a guideline for skills which parents can learn:

- Desirable coping skills to cope with provocation;
- the ability to give a less negative meaning to the provoking child, e.g. taking provocation as unintentional;
- relaxation techniques to have the means to alleviate the intense pressure of provocation towards immediate and impulsive action engendered by the physiological arousal accompanying the experience of anger; and

- problem solving entailing more effective ways of preventing and ameliorating perceived provocations than impulsive actions.

It appears as if the cognitive restructuring approach is not employed on a regular basis in rendering services concerning child abuse. This can have a negative impact on service delivery as child abuse is mostly perpetrated by parental anger which can be dealt with by the employment of the cognitive restructuring approach.

- **Ego psychology**

Authors such as Goldstein (1995:42) and Vondracek (1995:12) agree that ego psychology deals with the relationship of personality to reality with the basic goal of supporting and strengthening the clients' ego so that they can function and cope more effectively with their problem areas. The following is a guideline for the aims of ego psychology in service rendering concerning child abuse with parents:

- Helping parents function more comfortably in their role as parents;
- better control of behaviour and feelings;
- improving parent-child, and other interpersonal relationships;
- developing better coping skills when problems arises;
- remedying early parental developmental defects that may be part of the pattern of child abuse;
- acquiring of greater understanding of the children's needs; and
- learning better ways of managing the children's needs.

Ego psychology can be provided through the provision of information, advice and direction and can focus on the following aspects:

- Child development;
- child rearing techniques;
- special problems; and
- parents' needs.

The findings of this study showed that ego psychology is employed on a regular basis when rendering services concerning child abuse. The employment of this approach should be encouraged to continue and to include all the role players in

child abuse with a view of supporting their ego and helping them to function and cope more effectively with their problem areas.

- **Crisis intervention**

Crisis intervention is defined by the New Dictionary of Social Work (1995:16) as an approach in social work which is directed towards the restoration and promotion of the social functioning of individuals who experience a crisis as a result of an unexpected and disruptive event and who do not have the problem-solving abilities and resources to cope with the increased level of tension and anxiety.

The following is a guideline for the aims of crisis intervention:

- Ending the abuse through the removal of the abuser or the victim of abuse from the abusive situation;
- helping the victim to deal with his emotions;
- strengthening the parents' ability to protect the child; and
- assisting the abuser, victim and other family members to establish appropriate role boundaries.

According to the findings of this study crisis intervention is not employed on a regular basis in rendering services concerning child abuse, which can have a negative impact to service rendering concerning child abuse as child abuse is regarded as a crisis which needs intervention through crisis intervention. Social workers rendering services concerning child abuse need to employ crisis intervention in order to render effective services concerning child abuse.

6.3.3.2 Social work with the family

The New Dictionary of Social Work (1995:25) define social work with the family as the treatment of a client involving all the members of the family in interaction, in an effort to change the problem behaviours with a view of promoting the client's and the family's social functioning.

In service delivery concerning child abuse, the entire family system including the abused child, non abused siblings and parents is affected by the abuse of a child and is seen together by the social worker. The family is thus seen as a unit of attention

and intervention will address the family as a whole. The following advantages can be achieved by seeing the family as a unit:

- The social worker can assess family interactions and the roles family members take
- with one another;
- the family's interaction can help the parents to learn to communicate more directly;
- to solve problems jointly, and to empathise with other family members including the abused child; and
- the family can learn and experiment with more effective child management techniques.

Social work with the family focuses on two goals regarding child abuse, namely:

- Support of adaptive functioning whereby the social worker can support instances of good child rearing practices on the part of parents that could help prevent or modify the abuse of the child, e.g. helping the child to do homework rather than blaming the child for not doing homework.
- Help in problem solving in which parents are taught to solve problems.

In abusive families, members are often not able to solve problems but instead become frustrated, angry and abusive. Parents usually attack the child when he made a mistake. The social worker can help the family to listen to one another instead of attacking each other. The family is helped to solve the problem together by following the steps of the problem solving model.

The following is a guideline for the steps to be followed in the problem solving approach:

- Identifying the problem, e.g. child abuse;
- generating alternative solutions to solve the problem;
- exploring the consequences of the proposed alternatives;
- choosing the best plan and implementing it;
- evaluating the outcomes of the plan and its relevance to similar future situations of child abuse;
- overt behavioural change whereby the social worker intervenes directly when abusive parental behaviour occurs, e.g. a mother who hits her child in

frustration might be helped to remove herself from the child's presence when she begins to feel angry. The parent might also be helped to talk to the child rather than striking her; and

- modification of systemic family processes, e.g. communication, interpersonal relationships and structure. In some instances, problems among the other family members, such as a marital conflict e.g. anger, that is displaced on the child can result in child abuse. In this case, the social worker can encourage the parents to attend to their conflict to improve their marital relationship.

The findings of this study indicates that social work with the family is performed on a regular basis when rendering services concerning child abuse. For effective service rendering concerning child abuse social work with the family should be integrated with the other methods of intervention.

6.3.3.3 Social work with group

Social work with the group involves an alliance of people who are brought together to work on a common task, to use the group experience for support and mutual aid, for educational purposes or to effect personality change. Social work with the group thus involves different types of groups that have distinctive though sometimes overlapping goals ranging from those that are supportive to those that are educational.

Social work with the group is an effective approach in rendering services concerning child abuse as has been shown to be effective in its ability to provide the following:

- The opportunity for nurturance, resocialization and relating to others;
- powerful experiences in being accepted;
- the development of better communication and other interpersonal skills;
- the atmosphere in which to develop increased empathy for others, new values, attitudes and behaviour; and
- support networks that diminish the individual's sense of isolation and enhance their ability to take or offer help.

The following is a guideline for the issues on which to focus when employing social work with the group:

- Isolation;
- feelings of hopelessness;
- interpersonal problems;
- poor socialization skills;
- poor parenting;
- poor child management skills;
- low self-esteem; and
- poor ego functioning in key areas such as impulse control.

The following is a guideline of the skills which the parents can be taught when employing social work with the group:

- To discipline effectively through reasonable punishments;
- setting the limits of disciplining their children;
- the particular needs of their children;
- to give approval, affection and attention to their children; and
- not to be overly giving in such a way that their resentment builds up when the child does not return or appreciate their self sacrifice.

The findings of this study showed that social work with the group is not employed which may be due to lack of skills of social workers in this regard. It is necessary that social workers rendering services concerning child abuse employ social work with the group which may be of assistance in covering a broader scope in service delivery concerning child abuse.

6.3.3.4 Social work with the community

Lombard (1991:72) define social work with the community as a method of social work based on a scientific process which is directed towards achieving one or more of the following objectives:

- To satisfy the broad needs of the community and to create and maintain a balance between the needs and the resources in the community;
- to provide the community with the opportunity to exploit its strengths and

- potential knowledge and skills and to develop these, in order not only to be able to deal with social problems and needs but also to prevent them; and
- to effect change in the community, in group relations and the distribution of decision-making powers.

Social work with the community can offer services to abusive or potentially abusive families and increasingly rely on a broad range of community services to render services to these families to achieve the above mentioned objectives.

The following is a guideline of programs which can be rendered:

- Prenatal support;
- education for parents;
- early and periodic childhood screening;
- social skills training such as coping skills in times of problems; e.g. child abuse or communication skills;
- mutual aid programs;
- neighbourhood support groups;
- family support services focussing on family planning, child care or crisis care; and
- public awareness campaigns on child abuse.

The following is a guideline for the functions to be performed by social workers employing social work with the community:

- Establish linkages between the people and community resources concerned with child abuse. This occurs where people are not aware of the resources available to them e.g. child crisis centres.
- Facilitating interactions between the people with resources. This is applicable in cases where the existing resources cannot be used by the people because of problems with regard to these resources, e.g. unavailability of funds for clients. It is therefore the social worker's function to improve interaction between the clients and the resources.

The results of this study showed that social work with the community is not employed which might be due to lack of skills in using this method. The employment of social work with the community is necessary for service rendering concerning child abuse either alone or integrated with the other methods which can contribute to the

reduction of the social workers' high case loads.

6.3.3.5 Social work research

De Vos (1998:19) defines social work research as a scientific inquiry about a social work problem that provides an answer contributing to an increase in the body of generalisable knowledge about social work concerns. This definition implies that social work research investigates a social work problem and in the process also adds to the general underlying body of scientific knowledge available to the profession. Most research which is conducted in social work is "applied" research which aims at developing, implementing and evaluating intervention strategies. Social work research should thus focus on research which yields results that can further develop their practice and wisdom necessary for intervention and problem solving (De Vos, 1998:248).

A process of research consisting of different stages and steps can be followed. In following the process, a social worker can choose between a qualitative or quantitative research approach or can choose a combination of the two approaches (De Vos, 1998:38).

The following is a guideline for the steps to be followed in the quantitative approach in rendering services concerning child abuse:

- Selection of a research problem, e.g. child abuse;
- formulating questions or hypotheses;
- formulating a research design, e.g. an exploratory research design;
- collecting data, e.g. by means of interviews schedules;
- analysing data; and
- writing the research report.

It appears as if social work research is employed in rendering services concerning child abuse. This method should be integrated with the other methods for effective service delivery concerning child abuse.

6.3.3.6 The application of social work methods by means of an integrated approach

An integrated approach of social work methods refers to uniting the various methods of practice from which social work is made up, e.g. social work with the individual, family, group, community and research (Goldstein, 1994:22, Welsh, 1995:99 and De Villiers, 1996:81). The integrated approach does not detract from the individual character of the methods but aims at achieving the same goal as that which the social work profession is aiming at with each respective method. The purpose of an integrated approach is to be helpful to people as individuals, families, groups or communities.

A social worker can begin with individuals or families who have a problem or need and formulates a plan to meet the need or resolve the problem based on an assessment of the situation. Intervention may be directed to different systems, e.g. individual, family, group or community or to the relationships among them to resolve the problem, e.g. child abuse as discussed in this chapter under social work with the individual, the family, group, community and research.

It is clear that an integration of the methods is not employed as shown by the results of the study, which might contribute to ineffective service rendering concerning child abuse. The integration of the methods is a necessity in service rendering concerning child abuse as it can involve one client throughout intervention who can also benefit from all the integrated methods.

6.3.4 Prevention

Prevention is defined by the New Dictionary of Social Work (1995:46) as a process aimed at minimising and eliminating the impact of conditions that may lead to social malfunctioning, e.g. child abuse. Prevention can be offered at three levels, namely: primary, secondary and tertiary.

6.3.4.1 Primary prevention of child abuse

Primary prevention seeks to affect factors that contribute to the appearance of child abuse. It refers to efforts aimed at positively influencing parents/caregivers before

abuse occurs. Primary prevention thus concerns itself with reducing the incidence of new cases of child abuse before it starts. Usually these operate at the societal level through public awareness campaigns and advocacy groups and are then realised by social, legal and educational processes of change.

The following is a guideline for actions in the primary prevention of child abuse:

- Elimination of the norms that legitimate and glorify child abuse in the society and family, such as the use of violence as a form of media entertainment;
- reducing violence-provoking stress created by society, such as poverty and inequality;
- incorporation of families into a network of kin and community, to reduce isolation;
- changing the sexist character of society by educational development; and
- breaking the cycle of child abuse in the family by teaching alternatives to child abuse as a way of controlling children.

Social workers are devoting more time and resources to high-risk populations. These are guidelines for high-risk factors to be considered:

- Low birth weight pre term infants;
- children of adolescent parents;
- handicapped and special needs children;
- children of mentally retarded parents;
- children of substance abusers;
- children of parents who were abused as children; and
- children of parents with few or inadequate support systems, i.e. family, friends or neighbours (Richard, 1991:170).

According to the results of this study primary prevention is done. The social workers need to know that children may belong to more than one of these population groups with the risk factor increasing as group membership increases when they focus on the high-risk factors according to populations.

6.3.4.2 Secondary prevention of child abuse

Secondary prevention of child abuse involves the identification of potential child abusers and treating them before child abuse can take place. It is thus a before the fact technique in its timing which attempts to direct services towards specific parents identified as having a high potential for experiencing child abuse (McMurtry, 1995:42).

The purpose of secondary prevention of child abuse is to avert the onset of child abuse.

Barton & Schmidt (1990:175) stress the importance of parent education courses as an effective technique of secondary prevention of child abuse. This view is supported by Hawkings (1993:197) who recommends a training program for parents and prospective parents which will improve the quality of child-rearing and prevent the development of child abuse. The following is a guideline for the aspects which the programs can teach parents:

- Nurturing;
- the needs of children at different stages;
- how parents respond to those needs;
- good parenting skills;
- family planning;
- stress management;
- conflict management;
- child development;
- health;
- personal growth; and
- the warning signs of their own potential to abuse the child.

The findings of this study indicated that secondary prevention is done with a view of reducing the number of potential abusers. This can contribute to effective service rendering concerning child abuse.

6.3.4.3 Tertiary prevention of child abuse

Tertiary prevention of child abuse refers to the services offered to families after child abuse has occurred. It is therefore a reactive intervention aimed at preventing an

abused child from being further abused. Prevention here focuses on keeping the families from developing abusive cycles in which children are repeatedly abused.

Tertiary prevention is rendered by the provision of treatment to the abusive families. The following is a guideline for treatment goals:

- Stopping the abuse;
- improving parental functioning;
- reducing frustration, stress and conflict within the family and the environment; and
- developing conflict management skills.

According to the findings of this study tertiary prevention is done with a view to preventing the repeated abuse of children.

6.4 SUMMARY

6.4.1 Guidelines for social workers rendering services concerning child abuse are necessary for enhancing service delivery.

6.4.2 Guidelines has been formulated and focused on the following aspects:

- The nature of child abuse which included the following:
 - * The definition of child abuse;
- * the child abusers;
 - * the types of child abuse;
 - * the nature of the types of child abuse;
 - * the symptoms of the types of child abuse;
 - * the causes of child abuse; and
 - * the impact of child abuse on the abused child.
- Social work service rendering concerning child abuse which included the following:
 - * Social work functions performed in rendering services concerning child

abuse, namely:

- ** Identification;
- ** investigation;
- ** intervention; and
- ** prevention on the primary, secondary and tertiary levels.

* Social work methods employed during intervention, namely:

- ** Social work with the individual;
- ** social work with the family;
- ** social work with the group;
- ** social work with the community;
- ** social work research; and
- ** an integrated application of these methods.

* Social work approaches, namely:

- ** Problem solving;
- ** behaviour modification;
- ** cognitive restructuring;
- ** ego psychology; and
- ** crisis intervention.

CHAPTER 7

GENERAL SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

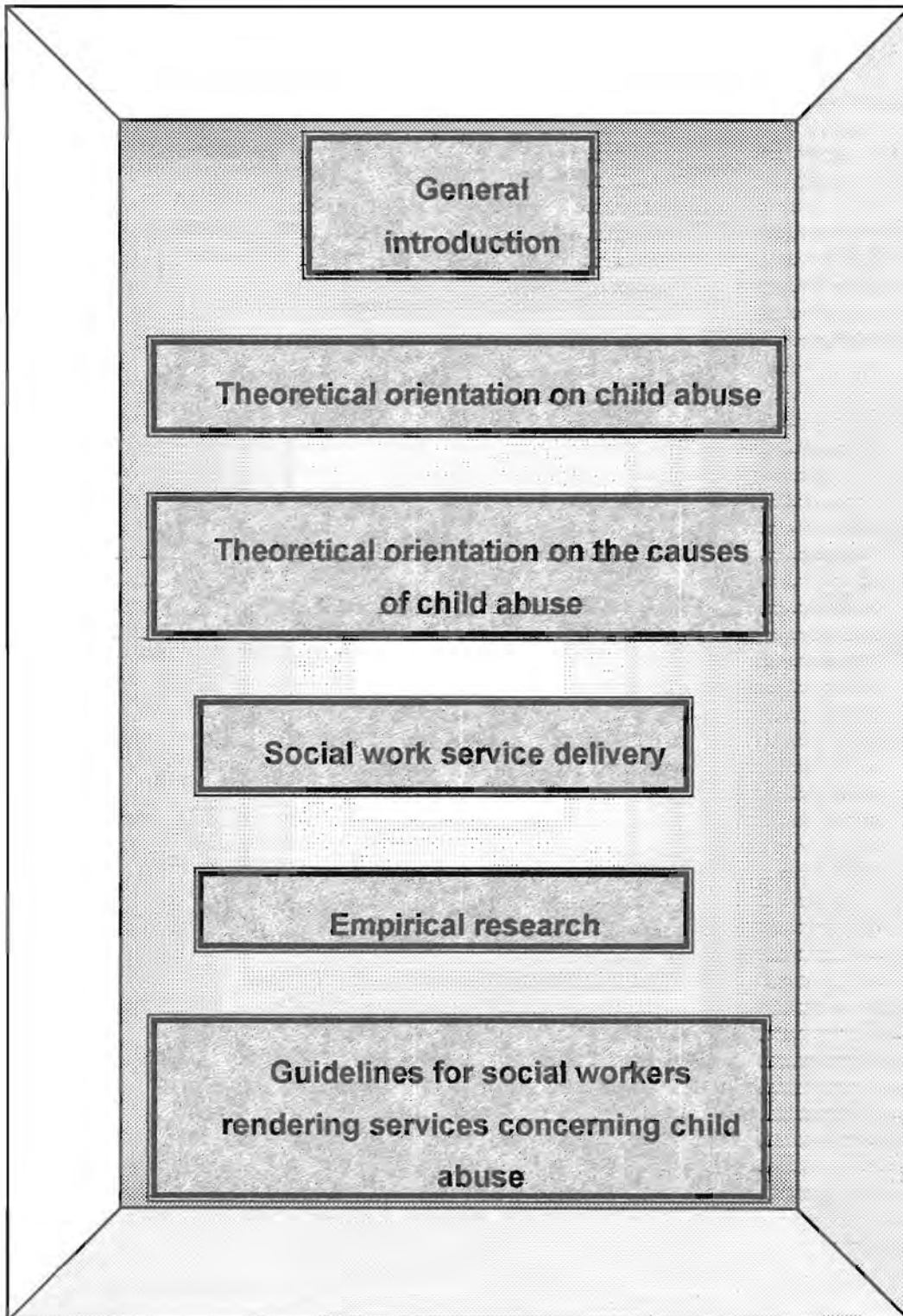
7.1 INTRODUCTION

The phenomenon of child abuse occurs worldwide and draws widespread attention within modern urban and rural societies on its prevalence. Child abuse is therefore a problem for all communities as children of all ages from all social and economic classes fall victim to this insidious crime. Children are being physically, sexually and emotionally abused and also neglected which is against their rights.

The rate of child abuse is escalating on a daily basis and is therefore attracting the attention of the helping professions, particularly social workers who are supposed to render social work services, but lack guidelines. This study covered a broad range of factors related to the types, nature, causes, symptoms and the impact of child abuse and the nature of social work services rendered by social workers concerning child abuse.

The primary focus of this chapter is to highlight the themes of the study by means of a summary, conclusions and recommendations. The major themes of this study are schematically represented in figure 51 below:

Figure 51: Major Themes



7.2 GENERAL INTRODUCTION

7.2.1 Summary

Chapter one provided an introduction to the study. This chapter included the following: the motivation for the choice of the subject, problem formulation, aims and objectives of the study, the questions asked, research approach, type of research, research design, research procedure and strategy, the pilot study which included literature study, consultation with experts, feasibility of the study and pilot test of questionnaires, description of the research population, sampling, sampling method, ethical issues, definition of key concepts, problems encountered and the overview of the contents of the study.

- The aim of the study

The aim of this study was to formulate guidelines for social workers rendering services concerning child abuse.

This aim was met by means of the study.

- The objectives of the study

The objectives of the study included:

- * Objective 1: To gather information about the types, causes, symptoms and impact of child abuse among black children in the North West Province.
- * Objective 2: To gather information about the nature of services rendered by social workers concerning child abuse.
- * Objective 3: To gather information about the methods employed by social workers rendering services concerning child abuse.
- * Objective 4: To gather information about the approaches employed by social workers rendering services concerning child abuse.
- * Objective 5: To formulate guidelines for social workers rendering services concerning child abuse based on the gathered information.

These objectives were achieved in this study.

- **The questions for this study**

The questions for this study were formulated as follows:

- * Question 1: What are the types of child abuse that occur in the North West Province?
- * Question 2: What are the causes of child abuse in the North West Province?
- * Question 3: Which symptoms of child abuse are enough to identify an abused child?
- * Question 4: What is the impact of child abuse on the abused child?
- * Question 5: What is the nature of social work services rendered by social workers concerning child abuse?
- * Question 6: Which methods are employed by social workers in their service rendering concerning child abuse?
- * Question 7: Which approaches are being employed by social workers in their service rendering concerning child abuse?

These questions were answered by the findings of the study.

7.2.2 Conclusions

Social work literature and existing research on child abuse in the North West Province is scarce, as a result, there is no existing guidance for the current research. Therefore literature and research studies from South Africa, England and the United States of America were relied upon.

The rate of child abuse is growing on a daily basis as reflected by the number of child abuse cases handled by social workers between the years 1995 – 1999.

Since the study was the first to be conducted in the North West Province, an exploratory design was utilised.

The Department of Health and Developmental Social Welfare focuses on service delivery to families, including families of abused children. Social workers employ a variety of methods and approaches in their intervention are dependent upon the clients' problem areas and needs. It is therefore important for social workers to employ a variety of methods and approaches for effective service rendering

concerning child abuse.

This study can hopefully make a contribution to the social work profession concerning child abuse in terms of the formulation of guidelines for social workers rendering services concerning child abuse.

7.2.3 Recommendations

- Further research need to be conducted on child abuse and social work service rendering concerning child abuse, to increase literature on child abuse in the North West Province, and focus on the abused child as this research focused on the parents/caregivers of abused children.
- The rate of child abuse needs to be reduced by any strategy, e.g. through the provision of information to children regarding child abuse, community lectures, etc.
- The community should be informed about the symptoms of the different types of child abuse. This will enable them to be able to identify an abused child as early as possible and to report it to the authorities.

This chapter fulfilled part of the aim of the study: to formulate guidelines for social workers rendering services concerning child abuse. It also fulfilled part of the first objective: to gather information about the types, causes, symptoms and impact of child abuse.

7.3 THEORETICAL ORIENTATION OF CHILD ABUSE

7.3.1 Summary

Chapter two focused on the theoretical orientation of child abuse, which included the following aspects:

- The rights of children whereby the violation is regarded as child abuse.
- The types of child abuse whereby four types were determined, namely: physical abuse, sexual abuse, emotional abuse and neglect. Physical abuse is the highest type which have been experienced, followed by sexual abuse, neglect and then emotional abuse.

- The nature of the types of child abuse were determined, together with both physical and behavioural symptoms as discussed below:

- * **The nature of physical abuse**

Physical abuse included injuries, poisoning and suffocation.

- * Physical symptoms of physical abuse:
 - Bruising and lacerations were noticed as physical symptoms of physical abuse.
- * Behavioural symptoms of physical abuse which were noticed included the following:
 - Fear of physical contact,
 - temper tantrums;
 - fearful of parents;
 - over aggressiveness; and
 - excessive school absence.
- * Behavioural symptoms of physical abuse which were not noticed included the following:
 - Craving for attention;
 - wearing long sleeved clothes;
 - withdrawal;
 - sleepy in class; and
 - arriving early at school.

- * **The nature of sexual abuse**

The following sexual abuse were noticed:

- Sexual contact of intimate parts;
- fondling;
- oral contact; and
- sexual intercourse.

Anal intercourse and interfemoral were not noticed.

- * Physical symptoms of sexual abuse noticed by the majority of

parents/caregivers.

The majority of parents/caregivers noticed the following physical symptoms of sexual abuse:

- Pregnancy at an early age;
- bruises of external genitalia;
- red vagina;
- presence of semen;
- presence of sexually transmitted diseases; and
- bleeding from the external genitalia.

Swollen cervix, torn bloody undergarments, vaginal discharge and complaints of difficulty in urinating, were not noticed by parents/caregivers.

* **Behavioural symptoms of sexual abuse**

The majority of parents/caregivers noticed the following behavioural symptoms of sexual abuse:

- Poor peer relation;
- substance abuse;
- irregular school attendance; and
- sleep disturbance.

All the parents/caregivers did not notice the following behavioural symptoms of sexual abuse:

- Prostitution;
- comments that the child was assaulted;
- engaging in delinquent acts; and
- suicide attempts.

* **The nature of emotional abuse**

The following types of emotional abuse were noticed:

- Rejection;
- ignorance;
- corruption;
- isolation; and
- insults.

All the parents/caregivers did not notice terrorising, deprivation and accusations.

* **The nature of neglect**

The following types of neglect were noticed:

- Lack of nutrition;
- inadequate shelter;
- medical neglect; and
- lack of clothing.

The following types of neglect were not noticed:

- lack of love;
- educational neglect;
- lack of protection;
- lack of supervision;
- poor personal hygiene; and
- absence of medical care.

This chapter fulfilled part of objective 1 which is: to gather information on the types, causes, symptoms and impact of child abuse.

7.3.2 Conclusion

- There are four types of child abuse in the North West Province – Moretele District namely: physical abuse, which is the highest in occurrence, followed by sexual abuse, neglect and then emotional abuse.
- Each type of child abuse has its own physical and behavioural symptoms.

7.3.3 Recommendations

- The four types of child abuse should be recognised as the types of child abuse, which is being experienced by black children in the North West Province – Moretele District.
- Attempts must be made to reduce the rate of these types of abuse, which may be achieved by e.g. social work service delivery through different intervention methods and approaches, e.g. research, community work, group

work, individual attention or an integration of these methods.

- Community involvement is also recommended.

7.4 THEORETICAL ORIENTATION ON THE CAUSES AND IMPACT OF CHILD ABUSE

7.4.1 Summary

Chapter three focuses on the causes and impact of child abuse. The following factors were indicated by the majority of the parents/caregivers as the main causes of child abuse:

- Lack of mothering imprints;
- excessive expectations towards the child;
- parental role reversal;
- scapegoating;
- immature parents;
- mental illness;
- lack of child rearing skills;
- poverty;
- poor education;
- occupational stress;
- alcohol abuse; and
- drug abuse.

The following factors were indicated by the minority of the parents/caregivers as the contributory causes of child abuse:

- Lack of mothering imprints;
- excessive expectations towards the child;
- parental role reversal;
- scapegoating;
- immature parents;
- mental illness;
- lack of child rearing skills;
- poverty;
- poor education;
- occupational stress;
- alcohol abuse; and

- drug abuse.

The following factors were indicated by the majority of parents/caregivers as not being the causes of child abuse:

- Lack of social skills;
- inferior health status; and
- overcrowding.

The impact of child abuse on the abused child.

- The majority of the parents/caregivers indicated that child abuse had both behavioural and psychological impacts on the abused children.
- The minority of the parents/caregivers indicated that child abuse had cognitive and personality impacts on the abused children.

Child abuse therefore has the following impacts on the abused children:

- Behavioural, psychological, personality and cognitive.

7.4.2 Conclusions

Child abuse is caused by a variety of factors, which can be classified under different models, namely: the psychodynamic, learning and environmental models:

- Under the psychodynamic model the following factors were indicated as the main and contributory causes:
 - Lack of mothering imprints;
 - excessive expectations toward the child;
 - parental role reversal;
 - scapegoating;
 - immature parents; and
 - mental illness.

Child abuse is therefore caused by the parents/caregivers inadequate functioning and understanding of parental roles.

- Under the learning model, the lack of child rearing skills was indicated as the main and contributory cause.

Child abuse is therefore caused by the lack of learning certain skills to employ when interacting with children.

- Under the environmental model the following factors were indicated as the main and contributory causes:
 - Occupational stress;
 - poor education;
 - poverty;
 - alcohol abuse; and
 - drug abuse.

7.4.3. Recommendations

- Community projects for parents/caregivers should be established and focus on the causal factors of child abuse with the aim of reducing its occurrence and reoccurrence.
- The following strategies should be implemented:
 - Groups should be formed which will help parents to develop the following:
 - Knowledge of parenting;
 - their roles as parents;
 - child development
 - the needs of children at different stages;
 - disciplining a child;
 - problem solving;
 - the rights of children;
 - violence against children;
 - conflict management; and
 - the availability of numerous community resources which can be used in times of need, e.g. hospitals, psychologists, social workers, police members and priests.

This chapter fulfilled part of the aim of the study: to formulate guidelines for social workers rendering services concerning child abuse. The chapter also fulfilled part of objective 1: to gather information about the types, causes, symptoms and impact of child abuse.

7.5 SOCIAL WORK SERVICE RENDERING CONCERNING CHILD ABUSE

7.5.1 Summary

Chapter four focused on social work service rendering concerning child abuse and fulfilled the aim of the study: to formulate guidelines for social workers rendering services concerning child abuse and the following objectives:

- Objective 2: to gather information about the nature of services rendered by the social workers concerning child abuse.
- Objective 3: to gather information about the methods employed by social workers rendering services concerning child abuse.
- Objective 4: to gather information about the approaches employed by social workers rendering services concerning child abuse.
- Objective 5: to formulate guidelines for social workers rendering services concerning child abuse based on the gathered information.

- The majority of social workers indicated that they perform the following social work functions:
 - Identification;
 - investigation;
 - intervention; and
 - prevention.

- The majority of social workers indicated that they always employ the following social work methods in their service delivery:
 - Social work with the individual;
 - social work with the family; and
 - social work research.

- The majority of social workers indicated that they never employ the following methods in their service delivery:
 - Social work with the group;
 - social work with the community; and
 - an integrated application of the methods.

- The majority of social workers indicated that they always employ the following approaches in their service delivery:
 - Problem solving; and
 - Ego psychology.

- The majority of social workers indicated that they never employ behaviour modification and crisis intervention in their service delivery.

- The majority of social workers indicated that they do employ cognitive restructuring some of the time in their service delivery.

- All the social workers are offering primary prevention services. The majority of social workers indicated that they do consider the following factors in the primary prevention of child abuse:
 - Children of adolescent parents;
 - children of mentally retarded parents;
 - children of substance abusers; and
 - children of parents who were abused as children.

- The majority of social workers indicated that they do not consider the following factors in the primary prevention of child abuse:
 - Low birth weight;
 - children with special needs; and
 - children of few support systems.

- All the social workers are offering secondary prevention of child abuse in terms of the identification of potential child abusers.

- The majority of social workers indicated that they focus on the following aspects:
 - Nurturing;
 - good parenting skills;
 - family planning;
 - stress management; and
 - health.

- The majority of social workers indicated that they do not focus on the following factors:

- The needs of children at different stages; and
- child development.

- The majority of social workers indicated that they focus on the following goals after child abuse has occurred.
 - Stopping the abuse;
 - improving parental functioning;
 - reducing stress;
 - development of conflict management skills; and
 - improvement of self-esteem.

- The majority of social workers indicated that they do not focus on the improvement of intimacy in their prevention services after child abuse has occurred.

7.5.2 Conclusions

- The following four functions of social work are being performed by social workers in their service rendering concerning child abuse:
 - Identification;
 - investigation;
 - intervention; and
 - prevention.

- The following social work methods are always employed by the social workers in their service rendering concerning child abuse:
 - Social work with the individual;
 - social work with the family; and
 - social work research.

- The following methods are never employed by the social workers in their service rendering concerning child abuse:
 - Social work with the group;
 - social work with the community; and
 - an integrated application of the methods.

- The following approaches are always employed by social workers in service rendering concerning child abuse:
 - Problem solving; and
 - ego psychology.

- Cognitive restructuring is being employed by social workers some of the time in their service rendering concerning child abuse.

- The following approaches are never employed by social workers in their service rendering concerning child abuse:
 - behaviour modification; and
 - crisis intervention.

- Prevention of child abuse is offered on three levels namely: primary -, secondary- and tertiary prevention.
- Primary prevention is being offered by all the social workers in their service delivery.

- The following factors are being considered by social workers in the primary prevention of child abuse:
 - Children of mentally retarded parents;
 - children of adolescent parents;
 - children of substance abusers; and
 - children of parents who were abused as children.

- The following factors are not being considered by social workers in their primary prevention of child abuse:
 - Low birth weight;
 - children with special needs; and
 - children of few support systems.

- Secondary prevention of child abuse is being offered by social workers. Focus is on the following aspects:
 - Nurturing;
 - good parenting skills;
 - family planning;
 - stress management; and

- health.
- Social workers do not focus on the following aspects in their secondary prevention of child abuse:
 - The needs of children at different stages; and
 - child development.
- Tertiary prevention is being offered by social workers in their service delivery. Focus is on the following goals:
 - Stopping the abuse;
 - improving parental functioning;
 - reducing stress;
 - development of conflict management skills; and
 - improvement of self-esteem.
- Social workers do not focus on the improvement of intimacy in the tertiary prevention of child abuse.

7.5.3 Recommendations

- Social work service delivery in child abuse should be rendered in terms of all the methods of social work namely:
 - Social work with the individual;
 - social work with the family;
 - social work with the group;
 - social work with the community;
 - social work research; and
 - an integrated application of these methods.

This will lead to effective intervention.

- A variety of approaches in social work should be employed for effective intervention in child abuse, e.g.
 - Problem solving;
 - ego psychology;
 - behaviour modification;
 - crisis intervention; or

- cognitive restructuring.
- Prevention should be given on all the three levels: namely: primary, secondary and tertiary.
- In primary prevention all the factors which may be preventive to child abuse should be considered, e.g.
 - Children of adolescent parents;
 - children of substance abusers;
 - children of mentally retarded parents;
 - children of parents who were abused as children;
 - low birth weight children;
 - children with special needs; and/or
 - children of few support systems.
- In secondary prevention focus should be on potential factors which may cause child abuse, e.g.
 - Nurturing;
 - good parenting skills;
 - family planning;
 - stress management; and
 - health.
- In tertiary prevention focus should be on goals to be achieved after child abuse has occurred, e.g.:
 - Stopping the abuse;
 - improving parental functioning;
 - reducing stress;
 - development of conflict management skills; and
 - improvement of self-esteem.

7.6.GUIDELINES FOR SOCIAL WORKERS RENDERING SERVICES CONCERNING CHILD ABUSE CASES

8.6.1 Summary

Chapter six focuses on the formulation of guidelines for social workers rendering services concerning child abuse cases. This chapter fulfilled the aim of the study which is to formulate guidelines for social workers rendering services concerning child abuse.

Guidelines, which were formulated, focused on the following aspects:

- The nature of child abuse;
- the functions to be performed by social workers;
- the methods to be employed by social workers; and
- the approaches to be employed by social workers.

7.6.2 Conclusions

- Social workers need to have knowledge of the nature of child abuse before they can render their services. This knowledge should entail the following aspects:
 - The types, causes, symptoms and impact of child abuse; and
 - the nature of social work services to employ in child abuse cases, in terms of the following aspects:
 - Their functioning in service delivery;
 - the methods to employ; and
 - the approaches to employ.
- Taking these guidelines into consideration can enhance the social workers' service rendering concerning child abuse.

7.7 THE AIMS, OBJECTIVES AND QUESTIONS OF THE STUDY

The following discussion focuses on the following aspects:

- The achievement of the aim of the study;
- the achievement of the objectives of the study;
- the answering of the questions of the study; and
- the formulation of the hypothesis for future research.

7.7.1 The achievement of the aim of the study

- The aim of the study, which is to formulate guidelines for social workers rendering services concerning child abuse, has been achieved.
- This aim was achieved through the following:
 - The theory on child abuse in chapter two and three;
 - the theory on social work service rendering concerning child abuse in chapter four;
 - the empirical research in chapter five; and
 - the practical experience of the researcher in chapter five.
- The researcher strongly feels that these guidelines are essential in enhancing social workers' service delivery and that they should be adapted to suit individual client's situations.

7.7.2 Objectives of the study

- The following objectives of the study were achieved:
 - Objective 1: to gather information about the types, causes, symptoms and impact of child abuse among black children in the North West Province – Moretele District.

This objective was achieved as discussed in chapter five of this thesis. Information on the types, causes, symptoms and impact of child abuse was gathered.

- Objective 2: to gather information about the nature of services rendered by social workers concerning child abuse.

This objective was achieved as discussed in chapter five of this thesis. Information on the nature of services rendered by social workers concerning child abuse was gathered.

- Objective 3: to gather information about the methods employed by social workers rendering services concerning child abuse.

This objective was achieved as discussed in chapter five of this thesis. Information on the methods employed by social workers in child abuse cases was gathered.

- Objective 4: to gather information about the approaches employed by social workers' rendering services concerning child abuse.

This objective was achieved as discussed in chapter five of this thesis. Information on the approaches employed by social workers rendering services concerning child abuse was gathered.

- Objective 5: to formulate guidelines for social workers rendering services concerning child abuse.

This objective was achieved as discussed in chapter two to seven. Guidelines were formulated as discussed in chapter seven, on the basis of information in chapter two to six.

7.7.3 The questions of the study

All the questions of the study were satisfactorily answered as discussed below:

- Question 1: What are the types of child abuse that occur in the North West Province?

This question was answered by the empirical research as discussed in chapter five of this thesis. Four types of child abuse has been determined namely: neglect, physical, sexual and emotional abuse.

- Question 2: What are the causes of child abuse in the North West Province?

This question was answered by the empirical research as discussed in chapter five of this thesis. Various causes of child abuse were determined.

- Question 3: Which are the symptoms of child abuse that are enough to identify an abused child?

This question was answered by the empirical research as discussed in chapter five of this thesis. Various symptoms of child abuse were determined.

- Question 4: What is the impact of child abuse on the abused child?

This question was answered by the empirical research as discussed in chapter five of this thesis. Child abuse is found to be having the following impact on the abused child namely: behavioural, psychological, personality and cognitive impacts.

- Question 5: What is the nature of social work services rendered by social workers concerning child abuse?

This question was answered by the empirical research as discussed in chapter five of this thesis. The nature of social work services rendered was determined.

- Question 6: Which methods are being employed by social workers in their service rendering concerning child abuse?

This question was answered by the empirical research as discussed in chapter five of this thesis. The different social work methods employed by social workers were determined.

- Question 7: Which approaches are being employed by social workers in their service rendering concerning child abuse?

This question was answered by the empirical research as discussed in chapter six of this thesis. The different social work approaches employed by social workers were determined.

Guidelines for social workers rendering social work services concerning child abuse were therefore formulated.

7.8 FUTURE RESEARCH

As this research was an exploratory one, with the main reasons of formulating specific hypothesis for future research, such hypothesis has been formulated as discussed below:

- Future research focusing on child abuse, e.g. on the abused child as a victim, on the abuser or on the parents of the abused children should be conducted.
- As this study focused only on the parents/caregivers whose children have been abused and on the formulation of guidelines for social workers in this area, the following hypothesis are formulated:

* Hypothesis 1:

If parents are able to identify the symptoms of child abuse then the rate of child abuse will drop.

* Hypothesis 2:

If parents are involved in social work service rendering concerning child abuse, then child abuse can be prevented.

* Hypothesis 3:

If guidelines for service rendering concerning child abuse are formulated for social workers and are being used properly, then their service rendering can improve.

7.9 CLOSING STATEMENT

Child abuse is a serious problem area, which occur world wide, and its rate is rising on a daily basis. This phenomenon of child abuse attracts the helping professionals such as social workers with the aim of reducing its rate. Various types of child abuse occur with various causes, symptoms and impacts, which requires those who are involved, e.g. social workers to be knowledgeable about these aspects.

Social workers who render services concerning child abuse need to have guidelines, which will enhance their service rendering in this area.

This study provides social workers with guidelines concerning service rendering in child abuse, which can enrich their service rendering, and be of benefit to social workers, their profession and their clients.