

The Interaction of Members, Volunteers and Professionals in the Self Help Group: Parents Anonymous, Australia

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This paper traces the development of Parents Anonymous in Australia. It was found that it was not possible to simply transfer the American system into the Australian context.

The major feature of the Australian PA is the highly suc-

cessful telephone and home visiting service. In contrast, the groups have been successful for only short periods and in only few cases.

The reasons for these differences are described with reference to

- (i) the wider social context of both government and public awareness of child abuse.
- (ii) the changing nature of the interaction between professionals and members, and the need to distinguish between "deprofessionalisation" and "laissez-faire".
- (iii) the changing nature of the distinction between volunteers and members and the developing awareness of the symbiotic nature of giving and receiving help.

The Introduction of Parents Anonymous in Australia

The Australian version of Parents Anonymous was begun by two mothers who independently complained to their social worker about a TV episode of a police series which features child abuse. These mothers were put in touch with each other, contacted the daily papers, were given immediate publicity, and so an inaugural meeting was held. This story is typical of the self help concept: Both mothers had problems with child abuse and they were the people to initiate the publicity. The value of this experience in the personal growth and development of these mothers cannot be underrated. (M. Liddell, interviewing Gail, 1976)

Behind the self help concept, however, lay the professional system. The mothers had spoken to their social worker soon after the return of the Chief Medical Social Worker for the Royal Childrens' Hospital, Melbourne, from the United States where she investigated the work of Dr Kempe and Parents Anonymous. (K. E. Dawe, 1973) It was the social worker who showed the two mothers how to contact the media and facilitated the practicalities of running the inaugural meeting in July 1973.

This interaction between the people seeking help and people with knowledge to offer is also a part of the American system, specified by the roles of the Buddies and Sponsors, and by the acknowledged support of Jolly K's psychiatric social worker (PA Procedures and Concepts Manual). Indeed, the Board of Directors of the American PA in 1973 contained four people with social work qualifications, three with legal backgrounds, a doctor, three nurses and five PA members. The members represented less than one third of the Board of Directors.

In contrast to this substantial involvement of the professional in the U.S.A. system, the inaugural meeting consisted of 12 people of whom there was one social worker acting in the role of sponsor, and one member with academic qualifications in psychology. The others had no experience of public relations, social work organization, psychological or sociological theory. An advisory panel was not formed until the requirements of the Hospitals and Charities Commission enforced this, and this panel still remains in an advisory, not a directive role.

The immediate task that the inaugural committee set itself was to establish PA groups along the lines of the American system, and to begin a programme of enlightened education of the public.

Within the first 18 months, several attempts to begin these groups had been undertaken. In each case the same thing happened — at the initial meeting about half the people who had said that they badly needed a group and intended being present actually appeared. At the next meeting this number would drop again, and by the third or fourth meeting the numbers would drop so low that group meeting would not be viable. In contrast to the failures of the group system, the telephone service was being used with such frequency that those members whose phone numbers had been publicised by the media were having to cope with a new set of

family problems. Committee membership dropped to an alarmingly low level, and with the failure of the group system there were no new members available to replace the resigned positions.

The group system, undertaken always according to the Procedures and Concepts Manual with a sponsor, was the system that failed. The telephone system, begun and continued in a state of urgency and with no initial training or professional expertise in immediate reach, was the system that succeeded. At face value, this looks like an argument against professional involvement. That this is a superficial judgement becomes obvious as we further examine the history of PA.

The lack of professional support was not entirely due to neglect or suspicion of the relevant professions towards PA. In fact the early membership showed marked hostility towards professional people. People who contacted PA did so, in many cases, because they were either too afraid to contact a professional person, or because their experiences with professionals had not been satisfying. It is not surprising then, that hostility and suspicion existed.

Given this climate, the role of the volunteer was more compatible with the fears and expectations of the members, and therefore became a critically important part of the Australian PA. These volunteers were usually older, motherly people with a sympathetic attitude to the plight of the younger mothers. Although in the early days of PA they had no formal training, they were able to provide the benefits of their own learning experiences with their families. The successful role of the Australian "Buddy" also helps to explain the success of the telephone service, since it was frequently the Buddy who came into the PA member's home to mind the children so that the member could deal with a call. Alternatively, the volunteer would visit a home or provide child minding in an emergency when a member was not available

for this task.

By the end of 1974, PA in Australia consisted basically of a group of five committed members, all of whom were being confronted with the emotional exhaustion that comes from constant crisis intervention, and a feeling of isolation created by lack of recognition and/or suspicion by both government and social welfare bodies. At this point the organization almost collapsed. Its revival was based upon increased interest and action by both professional and volunteer workers.

The Effect of Community Recognition

Parents Anonymous became an established and viable organization by achieving recognition in three spheres:

- (i) with the general public through favourable media exposure.
- (ii) with social welfare agencies via personal contact between these agencies and PA members. This was facilitated by supportive statements from social workers connected with PA in the early days.
- (iii) with government agencies, again via personal contact, and followed by the presentation of submissions on the nature of child abuse as seen by PA and also requesting money to further this work.

The renewal of PA centred on the recommendations of the paper "An Evaluation of Self-help Groups with particular reference to Parents Anonymous" (D. S. Taylor, 1975). This paper analysed the concept of self help and its applications within the social and psychological constraints of typical PA members. The recommendations fell into three sections:

- (i) employment of a Director
- (ii) the establishing of working parties in conjunction with experts in the fields of fundraising, public relations, group development, counselling, leadership training, research

programmes.

- (iii) a paradigm for the gradual establishing of new groups.

The paper promoted discussion not only amongst members, but more importantly amongst the social work professions. The concept of a director was rapidly discarded as being contrary to the nature of the self help group. The concept of working parties was redefined as an advisory committee whose role was to supply more than a list of impressive patrons. The advisory committee included people with prominent medical, legal and social work standing. They began to meet regularly with the PA committee members. The resultant exchange of information and ideas in both directions also served to lessen considerably the previous hostility and fear of professional people.

One important result of this exchange of information was the recognition by Melbourne Family Care Organization of the need for professional support along the lines of the discarded "director" but retaining the self help concept. Consequently a grant was given to PA to employ a part time social worker who would be responsible to the PA Committee (NOT the advisory committee). This generous grant was a significant sign of genuine, as distinct from patronising, recognition. Advertisements were placed in the press and applicants interviewed. However, it was obvious that there was a conflict between the experience and maturity required of a social worker in child abuse, and the time required to meet the needs of PA, and the amount of money available. The upshot of the ensuing discussions was that no social worker was employed, but that the money was used to establish a centrally located office, and provide the salary for a secretary. This job was undertaken by the PA secretary, who was then able to afford child minding facilities and time to develop the necessary administrative procedures for an organization which was becoming known on a national scale.

It also allowed the committee members to travel to country districts to support and advise on the setting up of new groups.

It is apparent that the success of the self help system depends on the ability of the organization to accept the fluidity necessary to change according to circumstances, and also on the dependence on practical help from other bodies. It was fortunate that Melbourne Family Care Organization gave their grant in such a way that the committee was able to adapt. Had the grant been tied to the concepts of well meaning professionals, the self help system would have been unable to adjust to the new and developing needs.

Meanwhile, child abuse in Victoria was being studied by the Child Maltreatment Workshops organized by the Victorian Department of Health (Report, 1976). These workshops gathered a wide variety of professionals interested in the problem. Participation in these workshops by PA together with the presentation of submissions to the Victorian Government Child Care Enquiry and to the Federal Government Royal Commission on Human Relations (Report, 1978) meant that Parents Anonymous became widely known and respected to the point that social workers began to refer their clients to PA.

Another offshoot of official interest in child abuse was the film "Do I Have to Kill my Child" written by one of the Commissioners, Anne Deveson. This film was shown on television and had an immediate and marked impact on the community. Parents Anonymous and the Children's Protection Society were suddenly flooded with both requests for assistance, and with offers for assistance. This led to another major stage in the growth of PA.

Adjusting the Role of the Volunteer: Their Organization and Training

The sudden influx of volunteers following Anne Deveson's film re-

quired a radical reappraisal of the role of volunteers within the self help system, as well as serious consideration for their organization and training.

By 1977, the official membership of Parents Anonymous remained low. The influx of requests for assistance, as before, was seldom followed by active participation. Similarly, the influx of offers to help dropped radically from well over 100 people to a core group of 15 women. The informal relationship between buddies and members was no longer viable given the relative size of the two groups. The growth of official interest in child abuse also suggested that this might be backed up with monetary support. Consequently a submission was prepared and successfully presented to the Social Welfare Department for a part-time volunteer co-ordinator. The subsequent employment of the volunteer co-ordinator is interesting in the light of previous discussion outlining the difficulties involved in employing a social worker. It is a reflection again of the changes in needs of PA and the importance of being able to adapt to these changes.

The new influx of volunteers was seen initially as being able to provide assistance along the lines of the old concept of "working parties". They were organized into a separate group with meetings independent of the PA committee, but with a committee member present. It was a basic tenet from the start that volunteers were to undertake tasks **at the request** of the PA committee. Again the self help system took priority. The volunteers were clearly to act for the committee and not as an independent unit.

In fact, the volunteers have taken up the same roles that the earlier buddies took, i.e. child minding and home visiting. In these two areas the need is so great that the volunteer does not have time to worry about lack of confidence and/or experience. Requests for the

volunteers to set up a fund-raising group were met by a marked lack of response. It seems that people who volunteer to assist with child abuse are interested in the personal and emotional issues between mothers and children. PA has had more success in the search for funds by contacting service organizations specifically set up for raising money for charity. Public relations activities have always been successfully handled by PA members, and this continues to be true. Both the media and the professions show more interest in personally oriented stories than in cold statistics or academic theories. Counselling, leadership training and research programmes are currently being considered by the volunteer co-ordinator. She sees her task primarily as providing support for the volunteers, and is actively engaged in this area.

Volunteers have not shown interest in supporting group work, nor has this been encouraged unless the volunteer is prepared to undertake extensive training programmes available from other organizations. This means that the problem of establishing viable groups still remains. The history of groups still follows the pattern described earlier, with exceptions in those cases where an outstanding sponsor supports the group. This difficulty is compounded by the use of similar groups by other social welfare agencies. In many cases these agencies are reluctant to allow their over-worked personnel to commit themselves specifically to child abuse when this is so frequently a symptom of more basic problems. On the other hand, there is the marked reluctance by people to commit themselves specifically to a confession of child abuse by joining a PA group. It is still difficult for a person to speak out on this subject. The telephone service preserves anonymity with even greater security than an anonymous group.

The volunteer in PA has a unique role defined by the nature of PA

itself. Fear and suspicion of professionals will remain an inevitable part of the nature of PA amongst new members simply because members are people who wish to preserve their anonymity. There are a number of alternative courses of action open to child abusers seeking help, but in all cases (except where the decision is to continue to hide the problem) these alternatives require contact with professionals and consequent loss of anonymity. Given this fear and suspicion, and the need for practical support for PA members, the volunteer has the opportunity of providing care and support which is not available to the professional. However, the problems of overcommitment and emotional exhaustion that are typical of the helping professions, must also be faced by the volunteers — particularly since the volunteer is unable to hide behind an office desk or return at 5.30 pm to a silent home phone. But the very feature that creates the problem, i.e. being potentially always “on call” also means that the volunteer is available at hours when the professional is unavailable. Similarly, the lack of knowledge of sociological or psychological theory can mean that the volunteer acts with spontaneity appropriate to the occasion, or it can mean that the volunteer is stuck for ideas and solutions when ideas and solutions are being sought, or it can mean the well-meaning proffering of advice when self help is required.

The training of volunteers requires that the fine line between spontaneity and informed action is recognised.

The sorts of issues that the volunteers need to confront are non-judgemental attitudes, over-involvement, confidentiality, acceptance (e.g. of maltreatment, incest), ethics, growth versus smothering, listening and empathy, moral conflicts, dealing with the other person's distress, dealing with own distress and relaxation techniques. This last issue involves training in

the basis of the simple techniques of massage, muscular relaxation and mental relaxation. It is not yet a standard part of volunteer training, but when it has been suggested, the idea is greeted with considerable enthusiasm.

The volunteer, then, is no longer acting differently to the member. In stead, she spends her time visiting homes and undertaking child minding as the members do for each other. Thus the distinction between the volunteer and the member is becoming blurred. The lack of new membership due to the failure of the group system has meant that “volunteers” are becoming involved on the PA committee. This does not mean that the self help concept is being lost. On the contrary, those volunteers who have been happy to accept committee positions have done so because they have either had their own problems of child abuse, or they have been able to afford the counselling or child minding necessary to reduce their own problems. Not only are the functions of the volunteer and member fusing, but the definitions of each are becoming blurred. This means that both committee members and volunteers seek and require similar training experiences in such areas as confidentiality, the art of listening, self-awareness and knowledge of community resources.

A Note on “Deprofessionalisation”

Parallel to the blurring of the distinction between members and volunteers are the movements of the helping professions towards deprofessionalisation and community psychology, in which the emphasis is away from the “ought to” attitude and towards the “how to” or consultative attitude. This does not mean that the professional social worker can afford to simply sit back and “let them do it

themselves”. Hopefully the training of the social worker means that she has skills to offer that the volunteers and members wish to acquire. These are the practical “how to” skills, i.e. how to contact the media, how to keep a set of records, how to prepare a submission, how to handle hostility from an insensitive public, how to use the Directory of Social Services, etc. In turn the volunteer and member with their untutored spontaneity are able to offer insights with the capacity to enhance and humanise the social worker's task.

It is evident in the history of Parents Anonymous in Australia, that success has occurred when mutual respect has predominated in the interactions between members, volunteers and professionals. From this respect comes the recognition that each person has something to offer, and from each person there is something to be learned. This is not a situation of “laissez-faire” which is the chief danger of the deprofessionalization movement, but a situation of dynamic interchange of giving and receiving help at all levels.



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