

Research in Brief



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Protective Services as a Response to Abuse and Violence

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Introduction

Abuse and violence against weaker members of society have long persisted throughout the history of humanity. Over time, however, the emergence and spread of the modern notion of human rights brought changes in public awareness that led to increased intervention in abuse and violence cases. Child abuse, elder abuse and domestic violence, once considered family matters, are increasingly viewed as issues in need of state intervention, thanks in part also to recent media reports that brought to light some grave cases of abuse. This brief looks at social services—both social welfare services and protective services—that are in place to respond to abuse and violence, and discusses what should be done to improve the delivery of these services.

The need for intervention in abuse cases

The term 'abuse' refers to physical abuse, sexual abuse, financial or material abuse and exploitation, involuntary isolation and confinement, and various forms of psychological abuse¹⁾ The World Health

1) Fawcett, B., & Waugh, F. (Eds). (2008). Addressing violence, abuse and oppression: Debates and challenges. Routledge.



Organization defines violence as the "intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community that either results in or has a high likelihood of resulting in injury, death, psychological harm."

Abuse and violence cases stem from a relationship of unbalanced power. As such, people who are socially vulnerable or socially isolated tend to be at higher risk of becoming victims of abuse and violence.³ Violence against weaker groups and individuals, as it likely arises from a relationship of uneven power, can be long-lasting. Helping victims escape abuse situations and have their human rights protected would require interventions in situations of power imbalance and penalizing abuse perpetrators.

Intervention in abuse is grounded in the principle that people's safety and rights must be protected. The concept of abuse has been defined and redefined time and again in keeping with changes in social norms and culture. In the meantime, social awareness has been raised of the need for state intervention in abuse, as people have become increasingly concerned about the quality of life and human rights. For example, the importance of state intervention in violence against children, older persons, people with disabilities and women has been emphasized by various international human rights frameworks including the "Convention on the Rights of the Child", the "Madrid International Plan of Action on Ageing", the "Convention on the Rights of Persons with Disabilities", and the "Declaration on the Elimination of Violence against Women."

In light of how persistent an impact an act of abuse can have on the victim both physically and mentally, the importance of state intervention is evident. Victims of childhood abuse are reported to suffer long-term from physical and emotional distress. Also, childhood exposure to abuse and violence has been found to be associated with having difficulties in transition to adulthood and with an increased risk of committing delinquency or engaging in anti-social behavior. Abuse and violence are prone to transmission, circulation and recurrence. For this reason, it is important to implement active intervention for the treatment of abuse victims. As cultural and social norms condoning violence can in fact engender new violence, preventing violence requires social action.



Protective services responding to abuse and violence

Public measures against violence have improved along with changes in institutions and norms. Amid a wide range of social changes—the broadening of the notion of human rights, the advancement of feminist movement, and the advancement of child advocacy, to mention just a few—abuse and violence against the weaker in society have become increasingly recognized as more of a social concern than an

²⁾ World Health Organization; WHO. (2002). World report on violence and health: summary. Geneva: World Health Organization

³⁾ Brown, H. (2004). Violence against Vulnerable Groups. Council of Europe: Mosqueda, L., Burnight, K., Gironda, M. W., Moore, A. A., Robinson, J., & Olsen, B. (2016). The abuse intervention model: A pragmatic approach to intervention for elder mistreatment. Journal of the American Geriatrics Society, 64(9), 1879–1883.

⁴⁾ Kwon, H. & Jang, J. (2003). Adolescent sexual abuse victims' self-harming behaviors and perceptions of sexual abuse. Korean Journal of Psychology, 8(1), pp. 35-47.

⁵⁾ Children's Bureau. (2016). Intergenerational patterns of child maltreatment. Issue Brief, 201608, 1-19.

⁶⁾ World Health Organization; WHO. (2009). Changing cultural and social norms that support violence. Geneva: World Health Organization.



individual problem.

Social actions against abuse and violence can be referred to as either protective measures or protective services. Social welfare services that are designed to respond to abuse and violence are referred to as protective services. Protective services against abuse and violence emphasize the importance of public intervention in providing protection for the victim. Unlike other social welfare services, protective services may continue until the safety of the person concerned is confirmed. In the case of child abuse, for instance, as it is the criminal justice system that, in the victim's stead, initiates and oversees the process of prosecution, the victim has little control over decisions concerning professional interventions. Also, in the context of child abuse, parental rights to self-determination can be restricted in some cases.

Public interventions in abuse and violence should be implemented both ex ante and ex post. Protective services include emergency support, support in long-term remedial treatment for victims, ex ante measures for groups at high risk of abuse, measures of preventing violence recidivism, and preventive education programs aimed at bringing changes to community awareness and perception regarding abuse and violence. Preventive services can thus be targeted to victims and their families, perpetrators, and communities.

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Knowledge and skills that professionals in preventive services need

Human service professionals who deal with violence-related problems need to have skills with which to control violence and a well-rounded understanding of the nature of violence. It is essential that human service providers are equipped with an understanding of the characteristics of the victim, be it a child, an older adult, a disabled person, or a woman. To effectively intervene in violence situations and take actions to help the victim requires a process of assessment and judgement. In this process, it is essential that the service provider have the ability to recognize and identify cases involving violence. Human service professionals also need to be knowledgeable about detecting signs of abuse, what regulations and legal procedures to follow in the investigation process and what actions to take in response.

Well-trained service providers should be able to lead traumatized and stigmatized victims of violence to recovery. It is critical therefore that protective service providers have first-hand knowledge of various ways of providing support, including providing assistance for decision-making on the part of the victim and linking the victim's needs, especially when they are complex, to outside expertise and resources.¹¹⁾

⁷⁾ Meysen, T & Grafe, N. (2019). Protection and self-determination, in: Hagenmann-White et al. (eds.). (2019). Interventions against child abuse and violence against women: Ethics and culture in practice and policy (pp. 134–150). Verlag Barbara Budrich.

⁸⁾ Hanlon, M. (2008). Men and violence, in: Fawcett, B. & Waugh, F. (Eds.). (2008). Addressing violence, abuse and oppression: Debates and challenges (pp. 17-24). Routledge.

⁹⁾ Banks, D., Landsverk, J., & Wang, K. (2008). Changing policy and practice in the child welfare system through collaborative efforts to identify and respond effectively to family violence. Journal of Interpersonal Violence, 23(7), 903_932.

¹⁰⁾ Hagemann-White, C. (2019). Redress, rights, and responsibilities-Institutional frameworks of domestic violence intervention in four countries, in: Hagemann-White et al. (Eds.). (2019). Interventions against child abuse and violence against women: Ethics and culture in practice and policy (pp. 134–150). Verlag Barbara Budrich.

¹¹⁾ Healey, L., Connoly, M., & Humphreys, C. (2018). A collaborative practice framework for child protection and specialist domestic and family violence services: Bridging the research and practice divide. Australian Social Work, 71(2), 228–237.



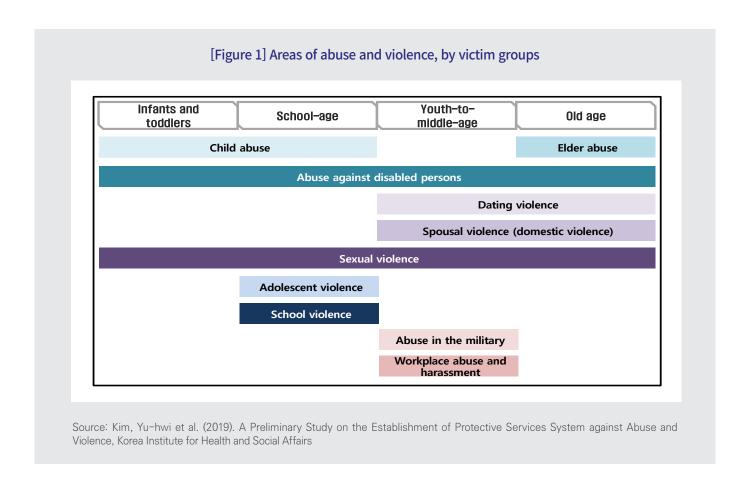


Korea's system of protective services against abuse and violence

Protective services are classified into different categories depending on the group affected and the type of violence involved. Accordingly, these services differ in the level of intervention.

The areas of abuse that require public interventions are categorized, as illustrated in Figure 1, according to the group affected, the type of violence involved, and the place where the act of violence takes place. The needs for public interventions in the areas of abuse are grounded in the hierarchical relations that are assumed to exist between victims and perpetrators, in the context of which the former are characterized as dependent and vulnerable.

The extent to and way in which intervention should be implemented vary across the different categories of abuse and violence. Protective services are provided to assist victims of different types of abuse and violence—child abuse, elder abuse, abuse against the disabled, sexual violence, domestic violence, etc. Each of these areas has its own legal basis, based on which support and interventions are delivered to protect the victim's human rights. On the other hand, however, there are no services provided at the social level as regards violence in workplaces and military settings, where incidents of harassment and bullying occur in the structure of hierarchical relations.





Children should be provided with protection so that they can grow happily and safely. Older adults and people with disabilities are more likely than the rest of the population to be vulnerable or dependent in families, residential facilities and communities. Abuse against children, elderly individuals, and people with disabilities therefore should be tackled at the social level with social welfare measures.

Cases of abuse against older adults are reported to local elderly protection agencies or advocacy agencies, which then investigate the reported cases, investigate and determine the damage caused, and follow up with steps to protect the victims involved. These protection agencies provide such recovery services as psychological rehabilitation, medical services, and legal assistance. They also link victims to outside services, provide abuse prevention education, and conduct community-based abuse prevention programs.

In the case of child abuse, however, the responsibility for case investigation, which until recently was in the hands of protection agencies, has been handed over to local governments in an effort to strengthen public interventions in the protection of children, following the amendment made in October last year to the Child Welfare Act.

Protective services concerning abuse and violence against children, older adults and people with disabilities are provided at protection agencies—local and central—and local protection shelters.

As of 2020, there were 67 child protection agencies, 34 elderly protection agencies and 18 advocacy agencies for people with disabilities, which, taken together, do not suffice to provide all the protective services in demand. The protective services that are intended for children, older adults and disabled people, target not just the victim, but also his or her family, the perpetrator, and the community. However, the local-level protective service capacities as they stand are insufficient to meet any needs beyond the victim's. The usual advocacy agency for persons with disabilities, staffed as it is with a team of only four members (a head, two counseling service practitioner, and an administrative assistant), does not have enough capacity to deliver all the services for which it is responsible in its designated area.

[Table 1] Protective services for different areas of abuse and violence

	Child abuse	Elder abuse	Abuse of the disabled	Sexual violence	Domestic violence
	By the type of victim			By the type of violence	
As of 2019	41,389 received cases; 38,380 alleged abuse cases	16,071 received cases; 5,243 abuse cases	4,376 received cases 1,923 alleged abuse cases	20,771 counseling cases (via Line 1366)	206,886 counseling cases (via Line 1366)
	Child Welfare Act	Welfare of Senior Citizens Act	Act on Welfare of Persons with Disabilities	Sexual Violence Prevention and Victims Protection Act	Act on the Prevention of Domestic Violence and Protection, etc. of Victims
Service delivery agencies	Local governments; National Center for the Rights of the Child; Child protection agencies; shelters for abused children	Elder protection agencies; shelters for abused elders	Advocacy agencies for persons with disabilities; shelters for disabled victims of abuse	Haebaraggi Centers; Women's Hotline 1366; counseling centers for victims of sexual violence; shelters for victims of sexual violence	Women's Hotline 1366; domestic violence counseling centers; shelters for victims of domestic violence



	-Child protection agencies receive child abuse reports; conduct on-site investigation; provide emergency protection; provide counseling and education for the victim, his or her family, and the perpetrator; provide follow-up services for the families of victims; set up and operate incident determination committees and hold case staff meetings -Shelters provide abused children with protection, living assistance, counseling, treatment, education, emotional support, welfare services, etc.	-Elder protection agencies receive elder abuse reports; conduct on-site investigation; set up and operate incident determination committees and hold case staff meetings; provide services to abused elders (counseling, welfare services, medical services and information), follow-up case management; provide education on elder abuse prevention and elder human rights -Shelters provide abused elders with protection, meals, professional counseling, treatment programs, health care allowance, etc.	-Advocacy agencies receive reports of abuse against persons with disabilities; conduct on-side investigation and emergency responses; provide victims with protection, recovery treatment, counseling, follow-up services; deliver services designed to prevent abuse against people with disabilities -Shelters provide protection, emotional support, counseling, referral services, welfare assistance, etc.	-Haebaraggi Centers provide counseling services and assistance in health care, legal matters and psychological therapy -Women's Hotline 1366 receives calls from victims and provide them with emergency assistance, emergency rescue and protection -Counseling centers receive reports of sexual assaults, dating abuse, and stalking; provide counseling, referral services, health care; provide accompaniment services for victims called on to testify; call on legal aid organizations for assistance; provide sexual abuse prevention programs -Protection shelters provide victims with room and board' counseling, education, self-reliance support, job information, court accompaniment services, legal assistance, etc.	-Women's Hotline 1366 Center receives calls, provides emergency assistance, etc. -Domestic violence counseling centers receive reports of cases of domestic violence, dating violence, stalking etc.; provide a temporary shelter for victims and their families; provide referral to health care providers, protection facilities, and legal aid organizations -Shelters for victims of domestic violence provide room and board, counseling, treatment, and assistance in health care; provide assistance in investigations and trials; provide referrals to other services when necessary; coordinate with legal aid organizations; assist in the schooling of the victim's children
No. of protection service agencies	(As of 2019) 67 child protection agencies; 73 shelters for abused children	(As of 2019) 34 local elder protection agencies; 19 shelters for abused elders	(As of June 2020) 18 local advocacy agencies for persons with disabilities; (as of January 2019) 17 shelters for disabled victims of abuse	(As of January 2020) 14 Haebaraggi Centers; 18 Women's Hotline 1366 Centers; 168 counseling centers for victims of sexual violence; 32 shelters for victims of sexual violence	(As of January 2020) 18 Women's Hotline 1366 Centers; 208 domestic violence counseling centers; 66 shelters for victims of domestic violence

Sources: Kim, Yu-hwi et al. (2019). A Preliminary Study on the Establishment of Protective Services System against Abuse and Violence, Korea Institute for Health and Social Affairs; 2019 Child Abuse Statistics (2020), Ministry of Health and Welfare; 2020 Status of Senior Welfare Facilities (2020), Ministry of Health and Welfare; 2019 Report of Elder Abuse (2020), Ministry of Health and Welfare/ Central Elder Protection Agency; 2019 Report of Abuse against Persons with Disabilities (2020), Ministry of Health and Welfare/ Central Advocacy Agency for Persons with Disabilities; 2019 Report on the Status of Abuse against Persons with Disabilities (2020), Ministry of Health and Welfare; 2020 Operational Guidelines for Projects on the Promotion of the Rights and Interests of Women and Children, Ministry of Gender Equality and Family; 2019 Report of Initial Support in Cases of Abuse against Women (2020), Women's Human Rights Institute of Korea

Cases of sexual and domestic violence are mostly gender-based, the effective response to which requires public interventions. Social support and protection need to be provided, especially for victims of sexual violence by a family member or relative and for victims who are minors or intellectually disabled. In the case of domestic violence, which in the context of family is highly likely associated with economic subordination and dependency, it is necessary to assist victims with social security interventions.

The mechanism of response to spousal violence is composed of Women's Hotline 1366 centers,



counseling offices, protection facilities and Haebaragi Centers. The agency that oversees matters concerning sexual and domestic violence is the Ministry of Gender Equality and Family. The ministry conducts projects designed to assist victims and prevent violence against women. Women's Hotline 1366 centers serve as gateways for victims of domestic violence, sexual violence and sexual trafficking, providing them with initial counseling, emergency protection, emergency shelters and service linkages. The counseling centers provide support for victims of sexual or domestic violence, and administer projects aimed at preventing violence against women. Haebaraggi Centers assist victims with a comprehensive set of services including counseling, psychological therapies, medical support, and investigative services and legal support. The need for protective services is more acute in victims of spousal violence, an area where only a small fraction of reported incidents lead to charges. For this reason, service provider agencies provide assistance at the request of victims (of spousal violence) and their children, irrespective of judicial procedure.

Schools have in place a system of responses to violence against school children. As stated in the Act on the Prevention of and Countermeasures against Violence in Schools, school violence includes "any action committed against students inside or outside of school premises resulting in a physical or mental injury, or damage to property through a battery, assault, confinement, threat, kidnapping, abduction, defamation, [and] insult." When an incident of violence occurs involving students, responsible school officials should take a series of interventions, including initial response actions, investigation, and making decisions about what further actions to take and at what levels. The school ensures that, where necessary, victims of school violence are linked to various providers of protective services, including youth counseling centers, School Violence SOS Assistance Units, mental health centers, and counseling professionals.

Concluding remarks

As discussed above, for each of the categories of abuse—child abuse, elder abuse, abuse of disabled persons, sexual violence, and spousal violence—there is an established system of protection services. However, there has been no shared perspective that defines a common basis for protection services as a whole. There is a pronounced need for a broadly-shared common approach to abuse cases and also for a common direction in which protection services should be headed. A set of common standards should be set on the responsibilities and duties of protective services as a specialized form of social welfare services. In addition, it is crucial that protective service workers, as they investigate and make decisions about allegations of abuse and take actions, are given sufficient authority to plan and execute interventions. There is a need also for a clearly laid out set of rules which protective service workers are expected to abide by as they investigate allegations, make decisions and take actions.

Both emergency support and long-term assistance should be strengthened for victims of abuse and violence. Provision of follow-up support is important especially in cases where the harm done to the victim is severe, or where the victim is highly dependent, financially or otherwise, on the perpetrator.



When it comes to child abuse, it is extremely important to take actions forthwith at any signs of abuse, as has been made evident by some recent high-profile incidents. It has been pointed out that despite the increasing incidence of child abuse, Korea lacks shelters for abused children. Local protection facilities should be made more accessible to victims of child abuse, and the services they provide need further improvement.

In the current circumstances where both workforce and financial resources are insufficient even to meet the needs of victims, interventions targeting abuse perpetrators have not been provided to a sufficient extent. The government should increase its support for the recovery of victims of abuse and for the prevention of recurrence of abuse, for which interventions targeting offenders are essential. It may be worthwhile to make reference to some of the approaches taken in this regard in the US, notably Texas' Alternative Response and the New York State's Family Assessment Response. Also, interventions that protective service providers could impose on abuse perpetrators need to become more binding and broadened in selection.

Local protective service agencies, operating thinly staffed, are unable to deliver all the services for which they are responsible. The workload can be burdensome especially for elder protection agencies and advocacy agencies for disabled persons, as their tasks also include case investigations. The current working conditions of protection service agencies are in such a state as to make it difficult to strengthen the capacity of existing personnel or to attract competent new recruits. In this regard, a long-term plan should be set to increase protective service workers and improve their professional capabilities.