Working with Women Who Experienced Family Violence: An Assessment of the Thai Social Welfare System

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An assessment of the social welfare system for women who experienced family violence is a part of Violence Against Women Networks with financial support from Health Systems Research Institute (HSRI). The study examined the social welfare service system covering both governmental and non-governmental organizations provided for women who experienced family violence to assess the social welfare service system including philosophy, operating process, practitioners, and clients; to assess the potentials and limitations of the system; and to generate policy recommendations. The author used a phenomenological paradigm of inquiry and qualitative research methods. The agencies involved in this research included the Emergency Homes for Children and Families, Child Welfare Protection Division, Department of Public Welfare, Kredtrakarn Protection and Occupational Development Center (commonly known as Kredtrakarn Home), Center for the Protection of Children Rights Foundation (CPCR), the Emergency Homes of the Association for the Promotion of the Status of Women under the Royal Patronage of H.R.H. Princess Soamsawali, and Friends of Women’s Foundation (FOW).

1. Introduction

The word “social welfare” has many meanings. A broader meaning of social welfare embraces at least 7 elements of “state of well-being” a person in any society should obtain. They are (1) health, (2) education, (3) housing/shelter, (4) income maintenance/employment/labor welfare, (5) social security, (6) social services, and (7) recreation. Using a narrower definition, social welfare can also refer to sets of action, projects, programs, plans or policies that aim to

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encourage people’s well-being. In this study, social welfare covers only programs and services provided by government and non-government organizations to assist women who have suffered from domestic violence.

The word “violence to women” means violence stemming from the power relations between males and females that usually reflects the inequalities of females. Women at every age, from a fetus in the womb through old age can experience violence of one form or another. This study, however, included women who were physically abused within their families and who contacted government or non-government agencies for assistance. For example, some began by phoning an agency to consult about legal aspects when they decided to divorce their husbands, and met with a counselor with whom they then discussed additional issues or concerns. Other respondents were instead referred to social welfare providers by other agencies or individuals such as police officers, politicians, doctors, and teachers.

2. The Study

The primary objective of the study is to examine, from the perspectives of social welfare providers and clients, the social welfare service system (covering both GOs and NGOs) provided to women who experienced family violence. Other objectives include assessing the social welfare service system including philosophy, operating process, practitioners, and clients, identifying the potentials and limitations of the system, and generating policy recommendations. The researcher used qualitative research methods. The phenomenological paradigm of inquiry provided the philosophical underpinning for this study.

The researcher used a multiple method approach including in-depth interviews, participant observations, focused group discussions, case studies, and documentary evidence. The agencies involved were Emergency Home for Children and Families, Child
Welfare Protection Division, Department of Public Welfare, Kredtrakarn Protection and Occupational Development Center or commonly known as Kredtrakarn Home, Center for the Protection of Children Rights Foundation (CPCR), Association for the Promotion of the Status of Women, Friends of Women Foundation (FOW). The research participants included social workers, psychologists and other professionals as well as women who had experienced violence and had received services from one or more social welfare agencies.

3. Historical background of the social welfare system

Domestic violence in Thailand is a significant issue but still is not part of broad public awareness. Women battered by their husbands or partners, in particular, were often hidden from public view because the perception of normal family life was idealized as a site of love peace and happiness. Most Thais believe that family violence exists in Thai society only in cases where men have personality disorders or suffer from severe emotional and mental problems. In addition, if the women are perceived as unable to function as proper housewives, the violence may be seen as deserved.

In 1981 (B.E. 2524) a woman who worked in a construction site killed her husband because he got drunk and invited his drunk friends to rape her. In defending herself, she stabbed her husband to death. A women’s group called “Friends of Women” (FOW) assisted in her legal defense at the criminal court. This well-publicized case helped to launch campaigns against domestic violence. The Friends of Women group later became “the Friends of Women’s Foundation.” In 1982 (B.E. 2525) a second non-governmental organization named “the Association for the Promotion of the Status of Women under the Royal Patronage of H.R.H. Princess Soamsawali” established an emergency home with basic services for women suffering from family violence. More than 20 years later, this emergency home is still in operation. Among those in need of an emergency home, 20 percent are abused women. According to the emergency home’s
2001 (B.E. 2544) annual report, 117 abused women resided in the home, and received assistance.

The FOW also opened Ban Thanom-Rak, a convalescence home providing mental and social rehabilitation services for girls and women who were sexually abused. Unfortunately, Ban Thanom-Rak was closed within 3 years due to lack of funding. In 1985 (B.E. 2528) a third group, the “Foundation of Women” set up a temporary home for women suffering from family violence. During 1986 to 1991 (B.E. 2529-2533) the Foundation of Women launched a public campaign emphasizing the long-term social effects of family violence to challenge the widespread perception of family violence as a private issue only. The foundation designed seminars for various professions and agencies using data gathered from the temporary it had provided. They tried to seek alternative means to solve the problem. The outcomes from the seminars contributed to policy and planning drafts that eventually became the National Plan for Eliminating Violence to Children and Women 2000.

However, the Foundation of Women’s temporary home was terminated in 1991 (B.E. 2533). At that time the Foundation also broadened its mission by including attention to the elimination of violence against children and women in rural areas. They emphasized training rural village volunteers in four provinces from the North and the Northeast regions. The volunteers were intended to be an intermediate resource to help girls and women with violence. Altogether the foundation has trained rural volunteers in 5 provinces in the North region including ethnic groups in the high-lands.

In the government sector, services for women who experienced family violence were located in a number of agencies such as the Child Welfare Protection Division, the Child and Youth Welfare Division, the Occupational Assistance Division, Department of Public Welfare, Ministry of Labour and Social Welfare, the Office of Social Welfare, BMA, and government hospitals.

The Child Welfare Protection Division, Department of Public Welfare (DPW) operates 9 Emergency Homes for Children
and Family situated in 9 provinces: Bangkok, Chon Buri, Chiang Mai, Phuket, Narathiwat, Nakhon Sawan, Ubon Rajchathani, Udon Thani, and Songkhla. These 9 emergency homes operate as 24 hour emergency shelters, preliminarily assisting children and family members who are abused and are unable to stay at their own home. They usually are referred by the police, the hospitals, and NGOs. In 2001 (B.E.2544), the 9 emergency homes provided services to 3,385 children and families, classified as 334 unmarried pregnant mothers; 1,579 babies, street children and children with behavioral difficulties; and 1,472 adults (DPW 2001 Annual Report).

The Occupational Assistance Division, DPW, provides 4 Centers for Women Protection and Assistance in 4 provinces: Nonthaburi, Nakhon Rajchasima, Pitsanuloke, and Surat Thani. The centers are to assist and protect women with a variety of difficulties such as abuse, unwanted pregnancy, and children with behavioral difficulties. The centers provide shelter, food, medicine, mental rehabilitation, and other social assistance according to the clients’ needs and problems. In 2001 (B.E.2544) the 4 centers provided services to 669 disadvantaged women. DPW provided counseling and hotline services for 167 additional women who reported spousal abuse, sexual exploitation, unwanted pregnancies or other problems. Finally, DPW disseminated educational information monthly to women and the public at large. In 2001 (B.E.2544) this activity reached 3,871 persons.

As part of the Bureaucratic Reform of the present government led by Prime Minister Thaksin Shinawatra, in October 2002 the Ministry of Labour and Social Welfare was divided into two ministries: Ministry of Labour and Ministry of Social Development and Human Security since October 3, 2002. The administration of DPW has also been restructured. The agencies mentioned above still operate as usual but under the auspices of Bureau of Anti-Trafficking in Women and Children, Ministry of Social Development and Human Security.
4. Patriarchy: A root cause of family violence

Patriarchy refers to the ability of men to control the laws and institutions of society combined with men’s superior status (Richmond-Abbott, 1992, p. 19). Disparities in power and prestige between men and women still characterizes modern Thai society. Women have little presence and power in the productive realm, while the patriarchal or domestic mode of production is structured by male dominance and female subordination. Various ideologies and beliefs about women’s nature obstruct their attempts to participate in the public sphere. Although developments such as women leaving home and entering into the public economy and labor market exist, customs and taboos rooted in beliefs about women’s proper role in the household remain strong. Men continue to dominate economic, social, and political life, and the patriarchy persists because the dominant group possesses the power to control social institutions. Economic policy, education policy, social welfare policy, and laws are tools for consolidating male domination. Men and women, boys and girls continue to be socialized to accept prevailing stereotypes. Only a few women have challenged the consolidated patriarchy, and women who experience domestic violence are especially powerless because of this influence of patriarchy. Empowerment and emancipation approaches are necessary to implement so that women are able to redefine and cope with this situation.

5. Private and Public Sphere

The private sphere is the household or domestic arena which is set aside from the public arena of paid work. The public sphere is the site for social, economic, and political interactions outside the household or domestic arena (Richmond-Abbott, 1992, p. 399). The private/public sphere dichotomy establishes largely exclusive and gender-specific spaces for men and women. Women have been
socially constructed as suitable for the household or domestic arena (i.e., private activities) and unsuitable for the social economic and political arena outside the household (i.e., the public sphere). The disproportionate confinement of women within the private sphere associates with women’s subordination. The women’s movement has analyzed this private/public dualism, basing analyses on the power relations inherent in the private/public dichotomy that perpetuates patriarchy as well as family violence. Personal problems are not simply private, distinctive experiences but instead are part of a social phenomenon that can be subjected to political analysis. Family violence is essentially construed as one aspect of patriarchal privacy in the household. Such analysis of any private family violence therefore is necessary to focus public and political attention on matters such as dysfunctions within the hetero-patriarchal family structures.

6. Overview of social welfare service system for women subjected to family violence

The social welfare service provided for women who experienced violence included 4 areas of activities: (1) Primary prevention, (2) Protection of women’s rights, (3) Build-up and development of social immunization, and (4) Rehabilitation and assistance.

Primary prevention. The activities aim to prevent abuse through identifying and publicizing risk factors for domestic violence. The NGOs more eagerly pushed the prevention programs within the targeted communities. They launched community campaigns and proactively moved into the communities where they also assisted their client base of abused children and women. They emphasized community awareness and knowledge about how to prevent abuse as well as creating problem-solving models to address occurrences of abuse. Their field staff members collaborated with community leaders, teachers, other professionals and volunteers especially on
tasks related to surveillance. Many NGOs initiated outreach projects as well. For example the Association for the Promotion of the Status of Women, launched 3 projects: the “community against violence” project, the “men/women united against violence” project, and the “promotion of reproductive rights” project.

As one example of a GO effort, the Bangkok Metropolitan Administration (BMA) recently established “the Directing Center for Children, Women, the Elderly and the Disadvantaged of the BMA” in June 2003. This center is designed to work on three levels-BMA, District, and Community. The purpose of the center is to provide welfare services and protect the rights of children, women, the elderly, and the disadvantaged covering all 50 districts of BMA. The objectives are (1) to formulate measurements and create mechanisms to promote and support the operations of agencies under BMA; (2) to develop and promote quality of life and security of children, women, the elderly, and the disadvantaged; (3) to promote capacity building for civil rights protection, particularly among children, women, the elderly, and the disadvantaged; (4) to encourage collaboration among governmental, non-governmental, and international organizations in the prevention and suppression of trafficking in children and women; (5) to strengthen the cooperation networks both in policy and operation levels among BMA agencies, other governmental organizations, non-governmental organizations, international organizations, and communities; and (6) to establish funds to support the effectiveness and efficiency of BMA operations to children, women, the elderly, and the disadvantaged.

BMA also projected that the community’s directing centers for children, women, the elderly, and the disadvantaged would extend to cover all 50 districts in Bangkok by the year 2006 (B.E. 2549). These community centers are anticipated to have reception units for violence cases, surveillance systems and procedures on violence, and community volunteers in violence surveillance. The centers are also expected to offer lessons for developing and strengthening cooperation among GOs, NGOs, business firms and commu-
nities as well as provide greater knowledge of the learning process for people in communities to understand and recognize children’s rights and related laws. This project is sponsored by UNICEF.

These findings show that there is an increasing trend among GOs and NGOs toward emphasizing preliminary prevention of family violence, and that this movement has been based in cooperative efforts among GOs, NGOs and International organizations.

**Protection of the women’s rights.** The protection of women’s rights evidently is different in scope and focus among the agencies involved. Some agencies mention only legal protections such as bringing suit in court, advocating for clients in legal cases and so on. By contrast, a number of agencies offer protections for women that embrace not only legal services but also shelter/accommodation, psychosocial counseling, and medical treatment. The aim of protecting clients’ is to prevent women from subsequent abuse. An interdisciplinary team is always involved in the protection of the women. Generally the interdisciplinary team includes professionals such as pediatricians, obstetric-gynecologists, psychiatrists, police, attorneys, lawyers, judges, psychologists, social workers and community volunteers.

Activities involved in the protection of clients are (1) reception/in-taking new cases of women who are violated, (2) fact finding, (3) preliminary counseling, (4) collecting evidence, (5) referring for medical treatment if necessary, (6) referring for psychotherapy if necessary, (7) home visits to clients and family for collecting more data, (8) cooperation with interdisciplinary staff, (9) legal assistance, (10) cooperation with lawyers, (11) family assistance, (12) short-term/long-term assistance such as awarding funds for education or occupational training.

**Development of social immunization.** The agencies’ activities related to development of social immunization overlapped to some extent with prevention activities and also empowerment activities which will be discussed later. In fact, most of the GOs and NGOs have not specifically labeled any of their activities as ones
concerned with social immunization. However if we interpret social immunization broadly and flexibly the relevant activities can be identified. For instance, in networks among BMA agencies a project called “Strengthening family relationships” is provided for families in general. The project is intended to strengthen families and stop potential cycles of family violence. Moreover, at a meeting to draft “the standards for social workers in the health field of BMA” the participants agreed that “community action” was one of the most important goals. They anticipated that community action would develop the potential of people in the community to recognize abuse in their midst and address community problems including domestic violence.

Rehabilitation and assistance. In general this activity begins with preliminary or emergency treatment. For instance, women were physically injured would be referred to the hospital. Later, social workers were called in to conduct preliminary fact finding, interviewing and to provide counseling at the same time. During the interview process, the social workers could also create rapport and warm relationships with their clients. As the clients felt confident and trusted the social workers they would disclose and discuss their accounts of abuse. The counselors encouraged clients to express their emotions and tried to help clients change any “self-blaming” tendencies by introducing techniques to redefine the situation and empower the women. For example, counselors helped clients understand that they were not the only ones in society who were abused. Additionally, counselors noted that many abused women later became strong as they created a new life and adopted new beliefs. This empowerment process was conducted in a very careful and delicate way, since clients in crisis should not be unduly pushed. The social workers and counselors noted that some clients took longer periods of time than others to overcome their pain and traumatic feelings.

Once the counseling process was well underway, social workers and counselors begin educating clients, through individual
and group discussions, about knowledge and important life skills. In the group process, women who had formerly been abused and had received assistance were most effective in supporting the new clients and sharing emotions. On some occasions, lawyers were invited to attend group meeting and suggest important legal assistance. Vocational training and job search assistance were also provided to the women through networking of the agencies.

7. Assessment of the social welfare service system for women affected by family violence

Philosophy underpinning the system. Personnel in NGOs believed that they held a little stronger and deeper commitment to the women’s rights than individuals representing in government agencies. Yet, little differences between NGOs and GOs were found and these did not seem to negatively influence the cooperation among them. However, the absence of a philosophical underpinning appeared to cause significant obstacles to women’s access to the service system.

The most important philosophical issue which affected the social welfare system was the accepted notion of an appropriate polarization of “private versus public” that existed within the patriarchal or male-dominated environments of GOs, NGOs, and overall society. The adherence to privacy constructed in male dominant culture appeared to generate at least 4 significant walls that separated abused women from social service providers who could help.
Figure 1: Walls that separate abused women from social welfare services

Wall 4: Practitioners shared the myth that abuse is a relationship problem and should be handled privately within the family.

Wall 3: Neighbors, community member with an "it's not my business" attitude.

Wall 2: Dependence on husband reinforces powerlessness and perceptions of no alternatives.

Wall 1: Woman feels powerless.

The first wall of privacy is constructed and may be reinforced by the women themselves. Abused women might be concerned with their children’s future, and often they also had low confidence and low self-esteem. When the women identified themselves as the cause of the domestic violence, they thought they deserved to be abused. Complex patterns of affection and bonding among family members also reinforced this first wall, since an abusive husband may still love his wife or children. Abusive events tend to happen in cycles and are not everyday occurrences. Due to the above factors, some women are very hesitant to seek assistance from neighbors, community or related agencies. If women still love their abusive husbands they do not want to harm them.

The second wall that must be overcome is the inequality of economic and social structure of the country reproduced within the family structure that affects women’s decision-making. These power relations disadvantage women in every area of daily life,
as women in general have lower standards of living, earn lower wages, and receive less welfare and less social security than men. Women’s work as mothers, care takers and home makers are assigned no economic value, relegating women to economically dependent and inferior positions. Even in the face of abuse, it is difficult to escape the abusive situation.

The third wall is erected by neighbors in the community who believe it is not their business to intervene to help a wife of a friend. Since family disputes are common in all families, those who are not family members believe they should avoid interfering in other families’ affairs. Some also believe that the wife is the property of her husband, and that the husband must be free to manage his property as he sees fit. Therefore intervention between a husband and wife who were fighting would mean nothing but an attempt to concern with other peoples’ personal belongings.

The fourth wall is erected and maintained by many practitioners within the social service network, particularly the police force with its root in male dominant culture. Beliefs in the myth of violence as an inevitable family affair were pervasive among police personnel as well as some other professions. Therefore some abused women who broke through the first 3 walls felt discouraged when they encountered these practitioners and sensed their attitudes.

As they systematically reinforce each other, these four walls are almost insurmountable for a weary abused woman. Women who came to agencies for assistance were primarily women who could overcome all the obstacles by herself. It is likely that a large number of women sadly sit behind the 4 great walls without any help. Some of them might turn to physically fighting back and, in extremely cases, kill the abuser, as many researchers have pointed out.

Operating process. The point of entry or the gateway to the service system was different for abused children. In the case of abused children neighbors were more willing to call the police or NGOs for help. The practitioners also took the child abuse cases more seriously than cases of violence against women. The women in this
study mostly walked in or called the agency by themselves. In the example discussed earlier, women may phone FOW to ask about the legal process of divorce or other issues. During their subsequent meeting with a staff member, they also disclosed the domestic violence events.

However, if an abused woman came to the police by herself, she might receive less attention. When social workers or psychologists from related agencies accompanied clients, they always got better cooperation.

With respect to effective information sources, a number of women got agencies’ telephone numbers from the yellow pages. Some even got them from the message on the camphor sag (an insect repellent) they bought from a convenience store. Some identified the agencies from television and radio programs. The social workers and other professionals in the networks also referred them to the agencies. The topics of the first contacts with social welfare agencies were not necessarily domestic violence related but instead varied from legal advice about divorce through occupational assistance.

Before deciding to contact the agencies, the abused women more or less identified the influences relevant to the obstacle walls that were discussed above. The extent of their suffering was enough to make them destroy the walls and seek a way out. Once they made the decision to destroy the walls, a message on camphor sag or a yellow pages entry was sufficient to seek help and survival in the public sphere. However, the agencies’ personnel must clearly understand the influences of the four walls constraining the situations of women who experience domestic violence.

With regard to collaboration among women’s agencies, there has been a positive trend toward a progressive direction. Particularly when compared with the former study on “Coordinations among government and private agencies in services for the orphan, the disabled and the street children 1988 (B.E.2531)” by Nontapattamadul et al., the collaborations and coordinations have
been greatly improved. At that time, middle managers who did not recognize the importance of cooperation were largely responsible for difficulties in coordination efforts. They tended to avoid connection with non-governmental organizations, and some even felt a loss of face or shame associated with asking for NGO assistance. However, the results of this study were contrary to the previous findings. Now, the GOs and NGOs were able to share responsibility in a very close and positive manner. The staff members, both GOs and NGOs, held positive attitudes toward each other. Their skills in tolerating differences of ideas and approaches have markedly improved, and they have made unprecedented attempts to learn from each other.

The findings also verify that the working procedures reflected the “client centered approach.” Social workers, psychologists, lawyers and other professionals avoided making decisions for clients. Instead, they listened to the clients, suggested some alternatives, and let clients make decisions for themselves. For instance, when providing legal advice to women, in cases where the evidence was very sound and sufficient to bring a law suit against the husband, the interdisciplinary staff chose to refrain in situations where the woman still loved her husband and refused to take legal proceedings against him. Social workers accepted that many clients returned to their husbands. In some cases, after a suitable period of time a follow up revealed that the couple were able to adjust to each other well with the client suffering no further abuse.

Assisting an abused woman actually served as encouragement for the client to challenge and redefine the structure of power relations for her self. Practitioners tried to promote these opportunities for empowerment. Retrospective review of many cases in this study showed that the process of empowerment also helped clients to improve social skills. The essence of the working process was the women themselves changed the structure of power relations surrounding them. Women might begin this process individually by building up their bravery to resist their husband and practitioners
provided further empowerment opportunities to share their stories of abuse with group members.

Postmodernists maintain that societal structures are socially constructed. Consequently, an abused woman can construct her own structure of power relationships. Her confidence and determination redefine power relationships and create a new structure that provides space to stand freely. She empowers herself and overcomes obstacles to her “freedom from fear and freedom from want.”

Practitioners. The agencies shared common purposes in assisting women who had experienced domestic violence. DPW for instance has two major policies: (1) child and youth protection, and (2) protection and assistance for women. Government policies were grounded in related laws and regulations such as the Revolutionary Decree No. 294 issue dated 27 November 1972 (B.E.2515) concerning child and youth protection and assistance. However, this law will be replaced with the Child Welfare Protection Law in the near future. The Prevention and Suppression of Prostitution Act 1996 (B.E.2539) also provides a legal basis for protecting and assisting women who experienced domestic violence.

Among NGOs, the assistance and protection objectives covered many areas such as the emergency home sponsored by the Association for the Promotion of the Status of Women. In addition to addressing family violence, this project offers additional services to address unwanted pregnancies, broken homes, HIV infection and AIDS, and a range of physical and mental problems.

Government agencies were funded mostly through the public budget. International agencies such as IOM and UNICEF sponsored some GO projects. Some local NGOs provided human resources to the GOs, such as CPCR, which helped create therapeutic activities for the DPW emergency home and helped organize the BMA family relationships project.

Clients. The abused women who participated in this study came from a range of socio-economic backgrounds. Many of them have a bachelor degree and one woman knows English very well and
taught her friends in an English class. Another woman came from a wealthy family, which was no protection from domestic violence. Moreover, her famous surname exacerbated her troubles due to her fears of reporting the abuse and the police refusal to deal with her case when they recognized her surname.

At first, most of the clients looked down upon themselves. They described their fates from a deterministic viewpoint. They blamed themselves for being bad enough to cause their husbands to have affairs with other women. Those homemakers with no income had to depend on their husband's finances. Being an abused woman was hidden within the male-dominated culture. Therefore, the only way to prevent her from repeated abuse and to avoid such aggressive reactions as homicide, is to empower her to challenge the power of the male-dominated culture. The abused woman must be able to recognize her human values and dignity, overcome the difficulties, become strong, and gain self-reliance in every area.

Emancipating an abused woman from family violence leads to remarkable changes in the quality and the reshaping of a life. Once a woman decided to contact related agencies, this constituted an announcement that she would not tolerate violence any more. She wanted to change her life and was willing to destroy the walls of privacy and enter into the public space to accomplish the changes. She was ready to challenge and change power relations, and the social workers and interdisciplinary teams would help strengthen her capacity to change the environment that had produced her pain and suffering.

Providing social welfare services for women who experienced family violence essentially is empowering women to reconstruct new identities. At the same time it is a process of encouraging women to redefine a new life for themselves. It is doubtful whether the agency personnel recognized that the essence of their helping process was actually nothing less than fostering the reconstruction of new identities and redefining the meaning of women’s lives. This deeper understanding is worthwhile and can contribute to the future
development of the service system.

8. Potentials and limitations of the system

Potentials. The government agencies involved are also under bureaucratic reform that emphasizes greater decentralization and devolution. This atmosphere has resulted in greater openness of government agencies. Most GOs have moved from traditional bureaucracy toward professional bureaucracy under which high levels of collaboration and coordination are possible. The NGOs mostly remained as a significant alternative in nature but increased their professional development activities. Even greater emphasis on networking mechanisms can potentially improve the system.

Another factor affecting potentials of the system is the relative strength of the social movement in the area of children’s rights and women’s rights. This movement has played a significant role in policy development, and public support of children’s rights and women’s rights is now increasing. Evidence of this increased support includes the 1996 (B.E.2539) law increasing maternity leave to 90 days and the Criminal Procedure Amendment Act (No. 20) 1999 (B.E. 2542). This positive policy environment fosters the capacity to build related organizations.

9. Policy recommendations

The policy recommendations are as follows:
(1) Continuous and assiduous campaigning to increase the awareness and understanding of family violence among the public,
(2) Integrating the concepts of gender relations and awareness of family violence into every level of the national education curriculum,
(3) Emphasizing the same concepts and awareness in education and professional development curricula for social
welfare providers and related professionals,
(4) Accelerating the empowerment of communities to conduct social surveillance and prevent family violence at the local level,
(5) Encouraging a cooperative learning environment among related agencies in order to uplift the progress and advancement of social surveillance, violence prevention, and assistance to women,
(6) Supporting the development and provision of one-stop social welfare services for women affected by family violence,
(7) Restructuring the country’s social insurance and social assistance schemes in order to respond more appropriately and effectively to women’s needs and problems, and
(8) Employing previously abused women as para-professional workers in related agencies to effectively assist clients in need of help.

10. Conclusion

The agencies involved have realized that myths are the major obstructions to women’s accessing the social welfare service system. The myths such as “Privacy against Publicity” existed not only among people in general but also among some of the professional practitioners involved. These practitioners, the police in particular, are in a position to help prevent women from being repeatedly abused, but they over-look the incident because of their neglect in accordance with the dominance of privacy rights over public and professional concerns. Collaboration among related agencies covering both GOs and NGOs progressed moderately when compared with the former study. GO practitioners gained more positive attitudes towards collaboration with any NGO while NGO workers felt an open-wider opportunities GO officials arranged for them had improved.
Regarding the service coverage, lots of abused women in the family have been left without any assistance because of the unawareness of the problem among neighbors and related professions. In addition, the women felt powerless by the myths and self-blaming attitudes. The existing welfare service is able to respond to the women problems appropriately in the cases where they have access to the service system. However, the major obstacle is that they were unable to reach the gate of the system.

References


