

state of israel
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services
for
girls
in distress

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MINISTRY OF LABOUR AND SOCIAL AFFAIRS

SERVICES FOR GIRLS IN DISTRESS

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Services for Girls in Distress

Social service agencies are confronted by the problem of adolescent girls who find difficulty in carrying out the accepted functions of girls in their age bracket and who are also unable to establish stable relationships with their surroundings and with existing service agencies. As a result, they drop out of their studies and jobs, and, as a result of their distress, are exposed to strong family and social pressures. These pressures exacerbate the problems faced by these girls and accelerate the process of their being pushed to the outer fringes of society and beyond, to the state of absolute deterioration. The Service for Girls in Distress was set up in order to cope with the problems these girls face and in order to help these girls emerge from their state of distress. The service is part of the Department of Correctional Services, within the framework of the Service for Youth in Distress.

A. Chief Characteristics of the Target Population

1. Age

The population receiving the care of the service numbers about 2,300 and comprises girls between the ages of 13 and 21 years; 20% of these girls are aged 13 - 15, 45% are aged 16 - 17, 24% are aged 18 - 19, and 11% are 20 years old or more..

2. Behavioural difficulties

Girls in distress can be classified according to the following behavioural categories:

- girls who have not yet become juvenile delinquents, but who are in danger of going astray and reaching a stage of deterioration
- girls who are vagrants, who suffer from sexual neglect, who stay away from home for various periods, or who have dropped out of their studies or

their jobs; this category also includes unmarried mothers and attempted suicides

- girls engaging in prostitution, who are motivated towards changing their situation and who have the ability and emotional strength to achieve this change and to rehabilitate themselves

3. I.Q. Levels

60% of girls in distress have normal I.Q.'s, 30% have marginal I.Q. levels (70-80), 6% suffer from environmental retardation, and 4% have very high I.Q. levels.

Girls who suffer from environmental retardation or have marginal I.Q. levels are not eligible to receive the services of the Ministry's Department of Services for the Mentally Retarded. Girls with marginal or low I.Q.'s are easily exploited by their surroundings (by pimps, by other family members, or by other persons). Such girls are unable to make decisions or plans and are also unable to resist immediate gratification. They very often play the role of "scapegoats" within their own families. When placed outside their homes, such girls, who are not mentally retarded, cannot be placed in institutions for the mentally retarded and must be placed in special frameworks designed for girls in distress. In such frameworks, girls with marginal or low I.Q.'s encounter girls who have similar backgrounds of neglect and distress but who have greater manipulative abilities. Thus a girl with a marginal or low I.Q. is also exploited within such frameworks and is assigned, even with these frameworks, the role of "scapegoat".

4. Emotional disorders

Some girls in distress have normal I.Q.'s but suffer from emotional disorders (such as disorders connected with personality structure, disorders stemming from neglect, primary character disorders, and depression). These disorders do not usually warrant hospitalization, as they stem from pressure and distress within the family and from the girl's process of growing up. Girls with such disorders are not in need of constant psychiatric intervention.

Hospitalization for such girls is rare and is short-term.

5. Family Backgrounds

In most cases, the girl is from an Oriental Jewish family. A very small number of Ashkenazi girls require help. It is an interesting point that of those girls from Oriental Jewish families, the largest group consists of girls from North African - and especially Moroccan - Jewish families.

These are the families that underwent the crisis of immigration to Israel: this crisis led to an undermining of family status within society in general, to an undermining of balance within the family, and to an imbalance in the previously existing distribution of roles within the family. As a result, we can detect three basic models within the families of girls receiving help:

- Families in which the father is still a figure that commands authority in the family. However, because of the transition crisis, the culture shock, and the undermining of his status in general, this authority expresses itself in aggression towards his wife and children and in severe control through the use of violence and force.
- In the second model we see a mother that works outside the home, serves as the breadwinner, and is dominant and aggressive. In such cases, the father's status is very low in the family; he "escapes" through illness or alcohol, or else he, in fact, makes a physical escape and deserts his family.
- In the third model, which is less common, the grown-up brothers take control of the family and the parental figures lose their status. The girl is dominated by her grown-up brothers, whose domination expresses itself in aggression and violence.

These three models have been outlined in their most extreme forms; in reality, they overlap each other. However, the point that must be emphasized is the authoritarian orientation in each of the families, an orientation that expresses itself in the control exercised over the girl through the use of violence and force.

A conflict arises between the authoritarianism expressed in the girl's family and the democratic nature of Israeli society, a society quite different from the authoritarian society in which the girl's parents may themselves have been raised. This conflict is one of the main causes of degeneration among girls in distress.

Most of the girls are from very large - at times also multi-problem - families on the lower or lower-middle socio-economic stratum. The parent's educational background is very meagre, and the father (or the mother, if she works outside the home) is employed in a low-status job.

8% of these families have 1 to 3 children, 39% have 4 to 6, 32% have 7 to 9, 16% have 10 to 12, and 4% have 13 or more children.

Despite the size of most of these families, living quarters are often quite limited. 21% of these families have only 2 rooms, 56% have 3, 16% have 4, 4% have 5, and only 2% have 6 or 7 rooms.

A girl returning home late at night may even find that there is no bed available for her to sleep on.

From a cultural standpoint, differences in fact exist between, on one hand, the culture to which the family was accustomed before arrival in Israel, and, on the other hand, Israeli culture. However, whereas these differences were in the past a source of embarrassment for such girls, we now call attention to these differences and emphasize them, and we seek to replace the girl's alienation and shame with pride in her cultural roots.

6. Failure and Low Self-Esteem

The girl's problem becomes apparent once she reaches adolescence; however the girl already had this problem, although in latent form, at an earlier age. In adolescence, the external symptoms of the problem now become visible and can help us identify the problem. These external symptoms are characteristic of the girl in distress. She is in a state of neglect and is a vagrant. She neither attends school nor works. She finds herself in sharp conflict with her

family and in a state of sexual neglect. (The girl may suffer from gynaecological neglect and there may even be considerable neglect with regard to her general state of health). Among such girls, there are many instances of running away from home, of pregnancies out of wedlock, of venereal disease and of attempted suicides. The social milieu of the girl in distress is of a marginal nature and of a dubious character; she and her friends are perhaps no strangers to drugs or to drug use. We should regard the process of moral degeneration as a continuum, at whose most serious point the girl in distress engages in prostitution and is a drug addict.

The key point in understanding this process of moral degeneration is the low self-esteem of the girl in distress; this low self-esteem has come about during the processes of her growing up and development within three contexts that are of significance to her: her family, her school and her peer group. We know that self-esteem is based on a comparison between achievements and ambitions. From a very early age, the girl in distress encounters failure as far as achievements are concerned. From the age of 5 or 6, which is the age at which compulsory education commences in Israel, she amasses failure upon failure within one very significant context - the classroom.

School is based on the principle of intellectual achievement, and the girl in distress, unable to achieve success in the intellectual field, becomes introverted and internalizes her problem, which thus escapes the notice of others. Her reactions are markedly different from those of a boy with a similar problem: he externalizes his problem, disturbs in class, breaks things, etc., and he is therefore spotted for purposes of treatment.

This process of internalizing the problem and amassing failure upon failure has a simultaneous effect on the contexts of the girl's family and group. The girl's family a priori does not expect any achievements as far as she is concerned; as she "confirms" this attitude in her performance at school, she is given various roles within the family that are substitutes for achievements at school - taking care of her younger brothers at home, household chores, etc. And, in extreme cases, the girl becomes the family's scapegoat. She thus

becomes a social outcast even in the eyes of her own peer group. The informal roles in peer groups are assigned to children that have status and that are achievers; "failures" become marginal figures even within their own peer group.

Thus, the girl's self-image of failure is crystallized. This self-image becomes a sort of "self-fulfilling prophecy." After the girl has been rejected by the school context, she tries her luck in the job market, but without any measure of success. No one has developed in her the ability to persevere, her "frustration threshold" is easily reached, and she has no profession. During this process, the adolescent girl experiences the beginning of physical and sexual development, and she finds for the first time in her life that she has a certain something that others either want or prize. At this point, her descent into the fringes of society and into prostitution is liable to be swift, as the conditions in which she has grown up and the relationships she has lived with while growing up have not instilled in her the habits of making independent decisions and weighing pros and cons, or the ability to postpone gratification and make long-range plans.

7. Running Away from Home

During adolescence, tensions at home generally increase, especially because her parents are afraid that her developing sexuality will be exploited by others: the parents' reaction is to confine her to the home, sometimes through the use of violent methods. This pattern generally guarantees that the girl will try to run away and that the conflict will increase in intensity. The first time that the girl runs away from home signals a critical point in the process of moral degeneration. In most cases, girls in distress return to their homes in a very sorry state (pregnancy, contacts with a social milieu of dubious character, friendly relations with a pimp, drug addiction, venereal disease, etc.).

This first experience is crucial, as it leads to repetitions; it is as if the girl has a compulsive tendency towards destruction and self-inflicted injury. From this point onwards, the girl's level of functioning is like a dizzying

swirl within the vicious circle of distress, a vicious circle that poses difficulties with regard to her rehabilitation and with regard to the treatment intervention involved.

B. Methods of Treatment and Intervention Involved in Work with Girls in Distress

Work with girls in distress aims at trying to change their behaviour patterns, change their negative self-image, and help these girls plan their actions as far as coping with their social environment is concerned. Workers try to achieve these aims by developing the girls' ability to establish stable inter-personal relationships and establish contacts with those authorities and service agencies that can provide these girls with social service care; these relationships and contacts can help in the the rehabilitation of these girls. Since these girls are unable to establish contacts with the various service agencies established by society, workers must go out into the field in order to seek out these girls. In other words, the procedure in such work is based on "reaching out", although some girls are referred to workers by various social service agencies. Only when the individual working with girls in distress is a familiar figure in the community and is prominent in his or her work with these girls, do girls themselves ask him or her for help.

The process of "reaching out" involves the worker's learning about the values, norms and behaviour patterns of these girls. Thus, the worker is able to establish contact with these girls and is better equipped to work with them after initial contact has been made. The basic principle serving as a guideline in this work is to accept the girl as she is, to avoid judging her or applying coercion during treatment. The contact that develops between the girl and the worker serves the girl as a basis for other inter-personal relationships.

Work with girls in distress is carried out in two spheres. The first is the individual sphere; work in this sphere is based on treatment discussions and aims at improving the girl's self-image, developing her ability to make decisions and long-range plans, teaching her proper work habits as a preliminary training for job placement, developing her identity as a woman that sees

male figures in a new and positive light (a positive attitude is usually not present because of the family's poor level of functioning), developing her understanding with regard to sexual matters by examining what the girl already knows about sex, correcting distorted views that stem from prejudices and incorrect attitudes, and providing her with important facts that will help her understand herself, her body and her role as a woman. The work in the individual sphere also involves referral for general medical treatment (the girls' state of health usually suffers from neglect), specialized gynaecological care as well as help in the areas of birth control and pregnancy.

The above aspects appear, with shifts in emphasis, in the second sphere of care - the group sphere. On one hand, activities in this sphere involve working with contexts related to the girl, with her family, with groups of mothers, etc. On the other hand, activities in this sphere involve work with groups of girls in the various functional settings that have been especially established. In social service clubs, for example, opportunities are provided for experiencing things together, for creating the possibility of successful achievement within the framework of club activities, improving the girls' ability to express themselves and developing the girls' sense of belonging. Another type of functional setting combines treatment with vocational training.

Work in both the individual and the group sphere is reflected in the three contexts of treatment: open treatment, intermediary treatment (receiving girls in serious condition at a shelter, planning further treatment - open treatment or treatment outside the home), and treatment outside the home. When the girl is removed from her home, she is generally transferred to a smaller setting - a foster family or a hostel. Treatment within the context of total institutions is provided only in serious cases or in accordance with the requirements of the law.

C. Frameworks for Care Outside the Home

The Service for Girls in Distress is helped in its care of girls outside the home by the following aids:

Foster families: These families take in girls who are in need of parental substitutes.

Shelters: These shelters provide an immediate - albeit temporary - solution and a place to sleep for a certain period of time (usually no more than a month). The shelters are aimed at vagrant or abandoned girls (generally aged 16-19) who do not live in any other set framework. The purpose of the shelter is to protect these girls from any immediate danger to their physical or emotional wellbeing.

The underlying principle is that these girls stay in such shelters for limited and brief periods, before being transferred to a set programme for rehabilitation. There are only four such shelters in Israel. These shelters serve about 100 to 150 girls a year.

About 20% of the girls who come to the shelters have run away from home. About 15% come because of threats made on them by people in their immediate surroundings (outside the family context). About 18% reach the shelter as a result of family conflicts (in such cases, the social worker decides on referral to a shelter). About 10% are unwed expectant mothers. About 7% have been thrown out of the house. The remaining percentage of girls who reach the shelter consist of girls who are awaiting placement or who are vagrants or who face the problem of incest within the family.

While the girl is at the shelter, the social worker in charge of the shelter establishes contact with a person or agency who can take care of the girl. The social worker participates in setting up the girl's rehabilitation programme until it is put into effect, and follows up on the girl's activities for the period of one month after the girl has left the shelter. Volunteers help keep the girls busy while at the shelter.

About 30% of the girls who reach a shelter are sent back home; about 30% are placed in a social service facility or with a foster family, about 5% are placed in a mental hospital; the remaining percentage consists of girls who remain within the

shelter's framework, who are drafted into the army, who live alone and are provided with rental subsidies, or who are placed with relatives.

Total care institutions

These are government institutions that specialize in specific population types and that are equipped with educational, occupational and treatment facilities.

Hostel.

An open institution for girls over 18 years of age.

Population dealt with by hostels - This population comprises girls who no longer need the care provided by total institutions, girls who have a good chance of responding successfully to the required care, but who still lack the knowledge and ability necessary for "standing on their own two feet" and for managing their own affairs in such a manner as to permit them to function independently in the community. These are girls who are in serious conflict with their families and who cannot rely on their families for support and guidance towards independent functioning within a daily framework of work and normal social activity. Some of the girls work and others are in the process of looking for work. They need guidance and encouragement in the proper use and balancing of a budget; all points in this area should be covered, from taking account of all anticipated monthly expenses to learning sensible shopping habits. These girls need permanent figures who will be close to them, who can serve them as an external control system and who will help them adopt norms of independent behaviour.

Purpose of the hostel - The purpose of the hostel is, therefore, to prepare these girls for independent functioning within the community. The hostel accommodates 10-15 girls, the intention being that they will find a job and will contribute part of their salaries to the upkeep of the hostel, e.g. a share in paying for electricity, water, etc. A girl can stay in the hostel for up to one year: she will leave in accordance with her individual ability and the level of her attainments in the area of independent functioning in the community.

The hostel is an integral part of the community in which it is situated. It is designed both to meet the needs of the girls who live there and to be a centre for interest groups and activities open to the girls in the hostel, as well as to the community at large. Among the areas covered by these interest groups include home economics, interior decoration, charm classes, sewing and gymnastics. The hostel staff includes a housemother, a social worker and youth leaders to serve on night shifts.

An additional aid that serves to help the Service for Girls in Distress is the Centre for Diagnosis and Observation - a government centre that diagnoses girls in distress and decides which of the existing frameworks outside the home is best suited for each girl; this decision is based on a period of observation and on information received concerning the girl in question. The centre also supplies the Service for Youth Protection with data on the nature and types of frameworks that exist outside the home and that are required to meet the needs of girls that have been diagnosed.

D. Special projects under the auspices of the Service for Girls in Distress

As an integral part of the therapeutic-individualized casework care provided girls within the framework of our service, two specialized aids have been developed for the care and rehabilitation of these girls.

- a. "Care Clubs" These are aids that serve to solve the problems of adolescence faced by the "marginal teenager" who is on the border between two reference groups and does not belong to either one of them. The clubs also serve to solve problems stemming from overcrowding, lack of privacy for the girl involved, and an unfair distribution of roles in the home (the heavy workload with which the adolescent is burdened prevent her from functioning as a normal teenager). Abnormal marital relations in the home can help develop destructive aggressiveness in the adolescent girl, and she may acquire a negative attitude towards the entire institution of marriage. In the case of broken or one-parent homes, the adolescent girl may develop a feeling that she is incapable of emotion or she may develop a feeling of anger directed towards both or one of her parents.

The objectives of these clubs are:

- to prevent the adolescent girl from reaching a deteriorated state, by keeping her away from the streets and by having her properly use her leisure time
- to develop in her a feeling of belonging as far as the club and group are concerned; to develop her ability to be consistent in these relationships, with the aim being that the girl will transfer these relationships to her natural surroundings
- to increase the adolescent girl's feeling of satisfaction, decreasing her bitterness, and raising her low self-image.
- to help her to understand her problems, to help her to see what part she plays in her problems, and to awaken the girl's motivation towards changing her approach to her problems
- to change her normative behaviour patterns and to awaken her ability to cope with the problems of her immediate surroundings
- to improve her ability to express herself in a group situation on matters that concern her; through this self-expression, it is hoped that she will find out how to change certain situations and that she will reinforce her capacity for living with situations that cannot be changed
- to supply warmth, attention and adult understanding, so that she can feel that she is important and wanted
- to let her experience doing and achieving things that involve responsibility, so that her self-confidence may be strengthened.
- to refer her, when necessary, to community agencies for assistance.

These clubs are open in the afternoons and evenings. The club has a worker who specializes in work with girls in distress. Various activities are held at the club, such as interest groups in arts and crafts and drama. Lectures and discussions

take place on topics connected with family life, sex and so on. Parties are held and group outings are arranged, such as organized trips and going to the theatre.

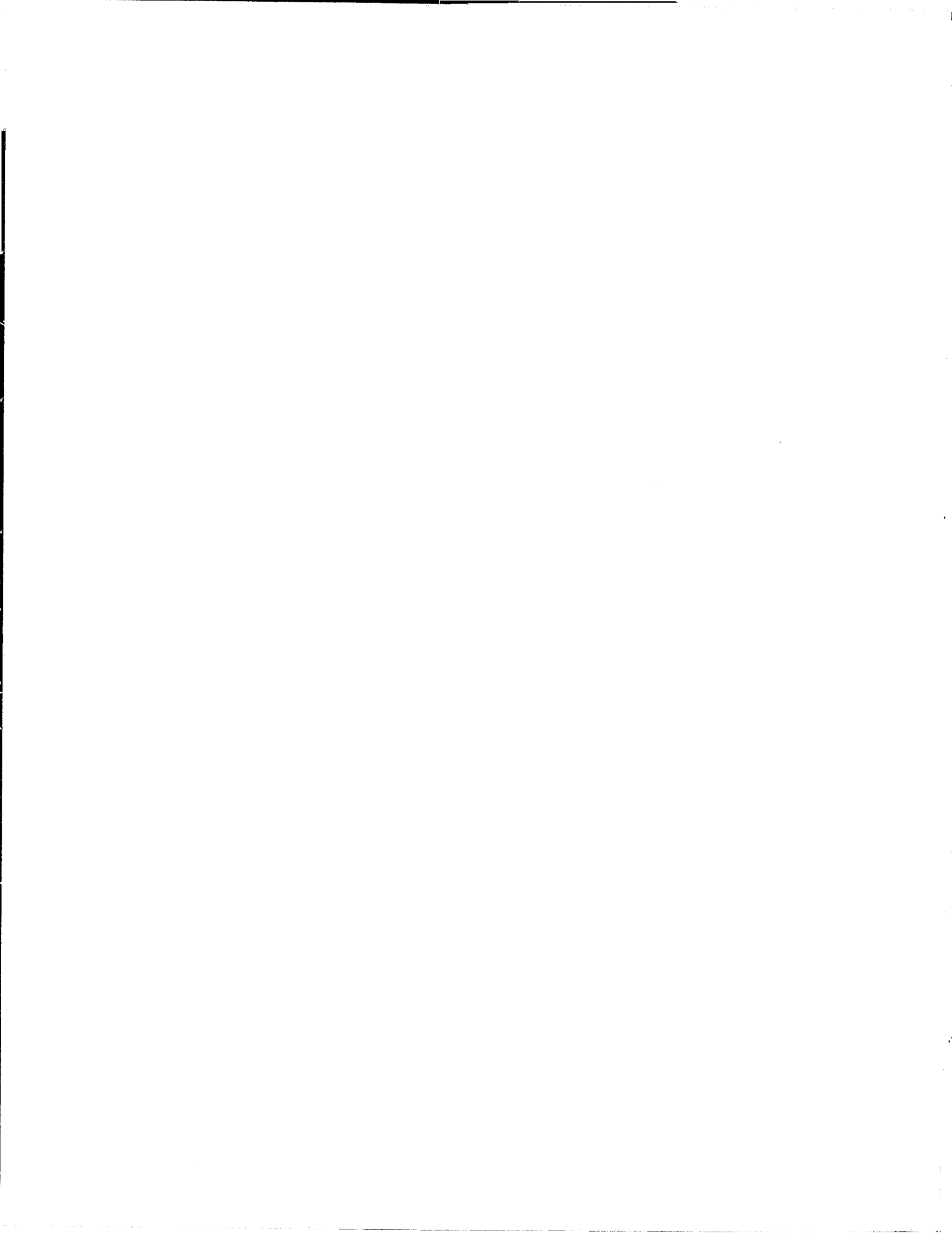
b. Socialization The second project is "Operation Noah" (from the Hebrew abbreviation for "group of girl friends"), which is being carried out in Or Yehuda. This project is run in cooperation with the Service for Youth Rehabilitation. The aim of the project is to socially and vocationally rehabilitate a group of about 10 girls who are under the care of a local social worker specializing in the problems of girls in distress and who have developed motivation towards vocational rehabilitation. The girls involved in the project live in an apartment that has been renovated with the girls' help and in accordance with their tastes; this project gives them a feeling of belonging and a feeling of responsibility for managing their home. With the help of a team comprising a coordinator, a social worker specializing in group work and a vocational teacher, the girls receive the desired rehabilitation care. The project aims at raising the girls' low self-image and at helping them to develop a positive attitude towards their surroundings; the girls acquire a life-style, take charm classes and learn a profession - draughtmanship, secretarial work, etc. - with the help of a vocational teacher. The girls stay in this project no more than 10 months; girls who have acquired a level of professional skill and who are ready, from a social point of view, to go out to work, can leave before the end of 10 months.

E. Vocational Training

Girls in distress have a handicap, although this handicap is neither physical nor emotional. Girls in distress have no vocational alternatives; these girls lack even the most basic schooling and also lack even the most basic requirements for employment in any kind of vocational activity, with the exception of hairstyling or work as a seamstress in a factory. These two vocational activities are not suited to the problems of girls in distress. These girls lack both perseverance and patience. Factory work, based on assembly lines, is boring and demands perseverance. Hairstyling involves being on one's feet for long hours and demands patience. In addition, neither job pays well and

neither job satisfies the various needs of girls in distress.

There is a need for developing different employment opportunities suited to girls who have not completed 8 years of schooling. Proper wages should be given. These girls deserve rehabilitation as much as any other handicapped groups.



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