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CORRECTIONAL RESEARCH AND DEVELOPMENT
RECHERCHE ET DÉVELOPPEMENT CORRECTIONNELS

Research Brief

CSC Staff Survey of Knowledge and Attitudes Regarding Family Violence

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Research Brief

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CSC STAFF SURVEY OF KNOWLEDGE AND ATTITUDES REGARDING FAMILY VIOLENCE[1]

Research and Statistics Branch

Correctional Service of Canada

October 1994

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[1] This summary is based on a research report submitted by Ekos Research Associates Inc.

CSC STAFF SURVEY OF KNOWLEDGE AND ATTITUDES REGARDING FAMILY VIOLENCE

Study Objectives and Methods

In 1992, a national mail survey of Correctional Service of Canada (CSC) staff was conducted. The purpose of the survey was to examine staff's knowledge and attitudes regarding family violence. Information gathered from the survey was to be used to assist in the development of staff training and educational materials in the area of family violence.

The survey examined: levels of awareness of family violence issues in general and as they relate to offenders; attitudes toward family violence and gender relations; opinions regarding the responsibilities of CSC and its staff in dealing with family violence issues in the offender population; needs for educational programming in this area; and variations in levels of awareness and attitudes, across occupational groups and other background factors.

The survey was administered between July 16 and September 11, 1992. A total of 1,500 CSC staff, representing Atlantic, Quebec, Ontario, Prairies, and Pacific regions, and 13 occupational groups, were randomly selected and mailed questionnaires. Of these, 941 staff completed and returned questionnaires, for an overall response rate of 61.8%. Response rates were consistently strong in each region and employment category, with the exception of Correctional Officers I, of whom only 26.6% returned their completed questionnaire. For the overall sample, survey results are accurate within plus or minus 7.7 percentage points, 19 times out of 20 (see Table 1 and Table 2 for a breakdown of response rates by region and employment category).

Table 1
Response Rates by Region

Region	Mailed	Returned	Response Rate (%)
Atlantic	150	97	64.7
Quebec	456	288	63.2
Ontario	354	187	52.8
Prairies	312	212	67.9
Pacific	228	143	62.7
Total	**1500**	**927**	**61.8**

Table 2
Response Rates by Employment Category

Employment Category	Mailed	Returned	Response Rate (%)
Correctional Officer-I	139	37	26.6
Correctional Officer-II	139	97	69.8
Correctional Supervisor	139	85	61.2
General Labourer/Other	161	95	59.0
Unit Manager	109	67	61.5
Case Management Officer (Community)	138	92	66.7
Case Management Officer (Institution)	138	86	62.3
Instructor	139	105	75.5
Other General Labour/Services	138	92	66.7
Medical Services	138	78	56.5
Psychologist	113	85	75.2
Chaplain	9	8	88.9
Total	**1500**	**927**	**61.8**

Findings

General Understanding of Family Violence

Awareness of family violence issues was assessed by comparing staff's survey responses to current knowledge in this field. Staff members who gave responses supported by current family violence literature were regarded as the most aware.[2] On this basis, staff appeared to have a good general knowledge of family violence issues. However, staff demonstrated comparatively poorer levels of awareness about abuse of the elderly, and about difficulties women may face in leaving abusive relationships.

Psychologists and case management officers appeared to have more knowledge about general family violence issues than instructors, correctional officers and general labourers/others. Some male staff, older staff and those who had been working in their present positions and with CSC for the longest tenures were among the least aware about family violence issues (see Table 3 for breakdown by employment category).

Survey responses indicated that three quarters of the staff had a good understanding of the range of behaviours that can be considered "abuse". However, some behaviours such as sexual assault, physical assault and psychological intimidation, were regarded as clearer examples of abuse than others, such as financial exploitation and deprivation/neglect. The best understanding of abuse was demonstrated by psychologists, medical service providers, case management officers and female staff. The various dimensions of abuse were not as clearly understood by some male staff, correctional officers and instructors.

Respondents were asked to provide estimates of the prevalence of family violence in Canadian society. For the entire survey sample, the average estimates ranged from a low of 18.9% (the estimated percentage of Canadian men who are physically or emotionally abused by their partner) to a high of 62.8% (the estimated percentage of children who are abused in homes where the mother is being abused) and 60.9% (the estimated percentage of female federal offenders who were abused as children). Staff members' estimates indicated that they understood the relative magnitude of the problem in different segments of the

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[2] It is acknowledged that views on the family violence issues addressed in this study may change as more and better research findings become available in this field.

population, and consistent with research[3] in the area, implied that men are more often the abusers and women more typically the abused.

Moreover, on the basis of the best available knowledge,[4] it appeared that staff made reasonable estimates of the percentage of male offenders who are abusive toward family members - their average estimate was 53.3%. Data reported by Dutton and Hart (1992) suggest that between 29% and 58% of male, federal offenders have been abusive to at least one partner. Psychologists and medical service providers, female staff, staff not in a marital or common-law relationship, and staff without children generally gave higher estimates of the prevalence of family violence. Estimates were lower among instructors, male staff, married staff and staff with children.

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3 Russell P. Dobash, R. Emerson Dobash, Margo Wilson, and Martin Daly, "The Myth of Sexual Symmetry in Marital Violence", Social Problems, 39 (1992):71-91.

4 Donald G. Dutton and Stephen D. Hart, "Risk Markers for Family Violence in a Federally Incarcerated Population", International Journal of Law and Psychiatry, 15 (1992):101-112.

Table 3
Variations in Knowledge and Attitudes Regarding Spousal Abuse by Employment Category
(Percent Disagreeing with Statement)

ITEM	CO-I & CO-II	Unit Mngr. & Cor. Sup.	CMO-Inst.	CMO-Comm.	Instr.	Med. Serv.	Psych.	Gen. Lab./[1] Other
Women are seldom abused by their intimate partners during pregnancy	62.7	67.2	77.2	86.7	65.2	87.7	82.4	71.0
There are just as many women who assault their partners as there are men who assault their partners	36.1	40.9	62.5	51.8	23.9	53.5	69.9	42.9
In most cases where an elderly person is physically abused, the abuser is the victims spouse	38.4	41.3	53.4	62.9	49.4	45.6	45.7	48.3
Someone who just pushes or slaps their partner now and again will probably not move on to more serious forms of physical assault later	76.8	85.7	89.2	83.2	69.6	87.2	89.3	76.8
Men who attack the women they live with are often mentally ill	35.5	52.9	62.6	57.7	36.8	62.3	78.8	50.3
It is up to the woman to know when to stop arguing with her partner to avoid being slapped	71.5	82.1	89.4	85.7	57.8	84.4	87.1	77.2
Slapping a partner is more like discipline then like assault	90.2	92.1	100.0	98.9	88.2	96.2	98.8	95.1
Many women provoke their partner to the point that they are likely to be attacked	55.5	63.1	75.0	73.0	49.5	81.6	85.5	60.6
If a person is always jealous, it only means they love their partner a great deal	78.6	75.2	94.2	95.6	75.3	86.8	91.8	75.8
If a woman doesn't want to stay in an abusive relationship, she can always leave the abuser	31.3	34.7	48.2	41.1	23.8	47.4	52.4	29.4

Note: Numbers represent the percentage of respondents in each job category who disagreed with each item. "Disagreed" is defined as a score of 1 or 2 on a 7-point scale ranging from "Completely Disagree" (1) to "Completely Agree" (7).

[1] In all exhibits in this document, "Gen.Lab./Other" refers to CSC staff categorized as General Labourer, Other, or Other General Labour and Services.

Sex Role Attitudes

Respondents' sex role attitudes - their views on the appropriate roles for women and men, particularly in a family context - were related to their awareness and opinions about family violence in that less progressive attitudes were associated with lower levels of family violence knowledge. Overall, most CSC staff supported equal treatment and opportunities for men and women. For example, 92% agreed with the following statement: "If a woman goes out to work, her husband should share housework such as washing dishes, cleaning and cooking."

However, sex role attitudes varied on a number of dimensions. Somewhat more progressive attitudes were held by: women, staff with no children, staff in a common-law relationship, younger staff, staff who had been working for CSC and in their present positions for a comparatively short time, psychologists, case management officers and medical service providers. Less progressive attitudes were held by: some male staff, married staff, staff with children (but not living with them), staff who had been working for CSC and in their present position for a long time, correctional officers and instructors.

Understanding of Family Violence in the Offender Population

Generally, staff had a good understanding of family violence issues as they pertained to offenders. For instance, the vast majority (81.2%) of respondents were aware that offenders who have suffered long-term abuse as children may become abusers as adults, and that offenders who have abused one partner may be at risk for perpetrating abuse against subsequent partners.

However, on some opinion items there was less consensus. For example, there was a wide range of responses to the item: "the kind of women who associate with male offenders know that they might be abused." While one third of respondents disagreed with this statement, one quarter agreed.

Psychologists, medical service providers and case management officers demonstrated a good level of awareness about family violence in the offender population. Awareness levels were somewhat lower among correctional officers.

Perceived Importance of Family Violence Issues for CSC

Approximately 70% of staff believed it is essential "for CSC to deal with family violence issues as they relate to offenders", indicating solid support for the Service's involvement in this area. Support related to family violence was strongest among staff who had been with CSC for a comparatively short time, psychologists and medical service providers. There was somewhat less support among correctional officers and staff who had been with CSC for longer tenures.

Survey respondents also expressed support for family violence programming. A majority agreed that CSC should develop better institutional and community programs to help reduce family violence in offenders' lives (70.6% and 73% respectively). Family violence programming was perceived by 56.3% of staff as warranting priority as a separate programming issue. Additionally, 68.5% of respondents supported the allocation of CSC resources to family violence programming. Table 4 presents staff views by employment category on various statements about family violence programming.

Support for family violence programs was stronger among psychologists, medical service providers and case management officers, as well as staff with comparatively few years of work experience with CSC. Support for programs was weaker among correctional officers and staff who had been working with CSC for the longest tenures.

Staff's Role in Dealing with Family Violence

A majority of respondents (58.8%) felt that it is very important for them to be aware of family violence issues as they relate to their work. Support on this issue was strongest among psychologists, case management officers, staff working in community settings and multi-level institutions, and staff who had been with CSC for a comparatively short time. Less support was expressed by instructors, staff in medium-security institutions, and staff with comparatively long tenures with CSC.

When asked if, in their present position, they had a role to play in helping to reduce family violence in offenders' lives, about one third of staff agreed and about one quarter disagreed. Overall, staff perceived that their most appropriate role was assisting in identifying offenders in need of help, and referring them to sources of help within the institution or in the community.

Table 4
Variations in Attitudes Toward CSC Family Violence Programming by Employment Category
(Percent Agreeing with Statement)

ITEM	CO-I & CO-II	Unit Mngr. & Cor.Sup.	CMO-Inst.	CMO-Comm.	Instr.	Med. Serv.	Psych.	Gen.Lab./ Other
CSC should not devote a lot of resources to family violence programming for offenders because there is very little hope of successfully treating this type of individual	7.8	6.0	1.2	2.2	2.1	0.0	1.2	5.0
Family violence is related to other problems and needs of offenders, and should not be given priority by CSC as a separate issue	14.7	7.3	9.5	3.3	6.2	9.1	6.0	8.4
It is essential that CSC develop better institutional programs to help offenders with problems related to family violence	69.2	76.2	81.4	84.8	77.6	84.4	82.4	77.9
It is essential that CSC develop better community programs to help offenders with problems related to family violence	76.7	84.8	88.4	87.0	71.7	81.6	89.4	79.2

Note: Numbers represent the percentage of respondents in each job category who agreed with each item. "Agreed" is defined as a score of 6 or 7 on a 7-point scale ranging from "Completely Disagree" (1) to "Completely Agree" (7).

As one would expect, opinions on appropriate roles in this area varied as a function of staff members' employment category. Psychologists and case management officers working in the community were most likely to see a role for themselves in reducing family violence, whereas instructors, general labourers/others and correctional officers were least likely. For correctional officers, the most appropriate role was to refer offenders to sources of help within the institution. Psychologists, case management officers and medical management providers saw a broader role for themselves; these staff felt they could help identify and refer offenders in need of help, as well as be directly involved in family violence programming. Case management officers (working in the community) saw themselves as being particularly involved in providing support and guidance to released offenders and their families in the community.

The degree to which staff felt they had a role to play in reducing family violence in offenders' lives also varied as a function of other factors. Staff working in community settings and in multi-level institutions, those working for a comparatively short time, and younger staff were more likely to see a role for themselves in reducing family violence. On the other hand, some respondents working in correctional institutions, in particular maximum-security facilities, those who had been working for a comparatively long time, and older staff were less likely to indicate that they had a strong role to play in this area.

Respondents were asked if they would like to become more involved in helping to reduce family violence in the lives of offenders. Overall, 58.1% of staff agreed that they would like to become involved, and only 7.8% disagreed. Support for greater involvement was strongest among: psychologists, medical service providers, case management officers, staff working in the community, those in minimum or multi-level institutions, younger staff, and those with comparatively fewer years of work experience. These segments of the staff population would therefore provide fertile ground for a growing emphasis on family violence initiatives within CSC. Agreement on this point was somewhat less frequent for instructors, general labourers/others, some staff in medium and maximum-security institutions, older staff, and those with comparatively more employment experience. Table 5 illustrates the percentage of respondents by employment category, work setting and security level, who felt it was important for them to be aware of family violence issues and who wanted to become more involved in this area.

Table 5
Variations in Perceived Importance of and Level of Involvement in Family Violence Issues by Employment Category, Work Setting and Security Level

	How important do you feel it is for you to be aware of family violence issues as they relate to your job?[1]	In my work, I would like to be more involved in helping to reduce family violence in offenders' lives.[2]
Employment Category	**% Important**	**% Agreed**
Correctional Officer-I and II	56.7	62.3
Unit Manager/Correctional Supervisor	58.4	50.0
Case Management Officer (Institution)	75.0	66.3
Case Management Officer (Community)	82.0	75.0
Instructor	39.4	40.2
Medical Services	72.7	70.1
Psychologist	92.9	73.8
Other General Labour/Services	52.8	40.6
Work Setting		
Correctional Institution	60.8	55.2
Community	80.2	69.7
Security Level		
Minimum	64.4	59.8
Medium	55.1	52.5
Maximum	60.8	51.6
Multi-level	73.1	64.6

1 Numbers represent the percentage of respondents in each category who rated this item as important. "Important" is defined as a score of 6 or 7 on a 7-point scale ranging from "Not At All Important" (1) to "Extremely Important" (7).

2 Numbers represent the percentage of respondents in each category who agreed with this item. "Agreed" is defined as a score of 6 or 7 on a 7-point scale ranging from "Completely Disagree (1) to "Completely Agree" (7).

Perceived Need for Family Violence Training

Overall, staff felt a strong need for, and interest in, education and training on family violence. Less than one quarter (23.7%) of staff agreed that their current level of knowledge in this area was adequate for their position. More than three quarters of respondents expressed a strong interest in receiving more information on family violence and in attending a training session on the topic.

Ratings of current knowledge were highest among psychologists and lowest among correctional officers, which is understandable given their respective roles and educational backgrounds. This finding also partly reflects the fact that, among the various employment categories, more psychologists (68%) than any other group had received information on family violence during the six months prior to the survey, and fewer correctional officers (16%) than any other group had received information.

In addition to psychologists, instructors and general labourers/others gave comparatively high ratings of the adequacy of their current level of knowledge for their work. These latter two staff groups also expressed the least interest in information and training on family violence. The greatest interest in information and training on family violence was expressed by medical service providers, case management officers, correctional officers and psychologists. There was also a trend for newer staff to be more interested in education than those who had been working for the longest tenures.

Conclusions

This survey yielded important information on CSC staff's awareness and attitudes regarding family violence. Overall, survey results suggest that CSC staff are quite concerned and knowledgeable about family violence issues, though levels of awareness and interest in training on this topic vary somewhat for certain subgroups of the staff population. Staff members with the most interest in receiving education tend to be those in positions that require an in-depth knowledge of family violence - notably, psychologists, case management officers and medical service providers. However, these staff members were also generally the most knowledgeable. This information should prove useful for the design and targeting of staff educational materials and programs in this crucial area.

The results also indicate that there is strong support among staff for CSC involvement in family violence matters as they affect offenders. In comments made in the survey, staff demonstrated a good understanding of the challenges associated with treating family violent offenders. For instance, respondents noted that for treatment to be successful, it must involve the whole family unit as well as the community - not the offender in isolation. In addition, many comments stressed the need for offenders to take personal responsibility for what they have done as a pre-condition for behaviourial change.

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