

helping families  
help themselves



# Goulburn Family Support Service Inc

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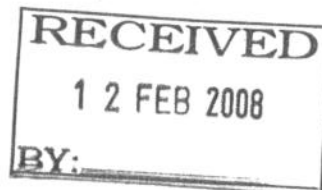
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The Hon James Wood AO, QC  
Commissioner,  
Special Commission of Inquiry into  
Child Protection Services in New South Wales,  
P.O. Box K1026,  
HAYMARKET NSW 1240



Dear Commissioner Wood,

**Re: Submission into Child Protection Services in New South Wales.**

Please accept our submission into Child Protection Services which is broadly focused as you have suggested it might be.

Our community managed agency is funded by DoCS under their Community Service Grants Program. Our agency works with many families who have contact with DoCS and we make the claim that the right sort of help for them is often very difficult to obtain from within the huge bureaucracy that makes up the child protection system.

We will assert that we need to identify the *human face* of child protection, one that is not *'fault based and one that can improve the system'* as you have stated. We stress that adversarial systems divide people, especially families and those working to assist them.



We will introduce our agency practice that comes which from the world-wide Restorative Justice (RJ) movement that primarily asks *"what happened, who has been affected by this, and what needs to happen to make things right"*, in contrast to the criminal justice system that asks, *"what happened, who did it and what punishment needs to be inflicted"*, in anticipation that those punished will reflect and improve behaviours.

The restorative justice movement has central an emotional capacity in its practices, we argue this capacity is required in child protection to heal the harm around the behaviours that impact in the lives of vulnerable families and enable those impacted to move on, in contrast to the rational bureaucratic discourse of DoCS, and adversarial system of our criminal justice response.

Our developing practice had its launch as a result of a domestic violence project which contracted behavioural change consultants in 2000, who were also working with NSW Police culture as a recommendation of the Wood Royal Commission.

The contractors introduced a principles behaviour framework and we moulded this as a behaviour management framework for our small agency and now have established learning environment within a supportive workplace culture.

Whilst we are not experts on the previous Police Royal Commission and outcomes, our agency has developed a practice that is unique and one that has achieved improved results for families to the satisfaction of DoCS thus far, although DoCS have not demonstrated interest in our practice yet.

We are mindful that child protection staff need a supportive environment while working with vulnerable families and building a workplace culture conducive to this would be the first priority towards an improved child protection response and this would be our recommendation.



Our submission will address Terms of Reference 1, V & IX, to discuss:

- Mandatory Reporting as resulting in a "blame / big stick culture" which sees huge DoCS resources being spent on a case sorting exercise, we will recommend that this be modified to a voluntary reporting system, and resources saved be spent on vulnerable families.
- We will introduce a practice that could potentially assist all DoCs families and,
- a recommendation that DoCS culture be reviewed to develop a learning and supportive workplace.

Thankyou for the opportunity to contribute to the enquiry.

Yours faithfully,



Anne Burton,

**Service Co-ordinator.**

**GFSS.**

7<sup>th</sup> February, 2008

encl



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## **SPECIAL COMMISSION OF ENQUIRY INTO CHILD PROTECTION SERVICES IN NEW SOUTH WALES**

### **Executive Summary**

This submission will discuss the system for reporting child abuse and neglect, firstly from within the present mandatory reporting system.

We will then look at the terms abuse and neglect and the significance of a clear definition of same and subsequent relevance to a child protection response from the Department of Community Services.

We will look at our developing practice emerging from a new paradigm based upon an unacknowledged psychological source "The psychology of Affects" as pioneered by Silvan S. Tomkins (1911-1991). We will briefly describe a newly developing practice that is underpinning outcomes for vulnerable families in crisis attending our small agency.

We will make recommendations for the development of a supportive and learning culture for Departmental staff to facilitate a workplace that links theory to practice in an attempt to improve our community response to child abuse and neglect.

Anne Burton,  
**Service Co-ordinator,**  
**GFSS.**

7<sup>th</sup> February, 2008



## **SPECIAL COMMISSION OF INQUIRY INTO CHILD PROTECTION SERVICES IN NSW SOUTH WALES.**

### **TERMS OF REFERENCE**

- 1. The system for reporting child abuse and neglect, including mandatory reporting thresholds and feedback to reporters.**

The practice of **Mandatory reporting** requires critical analysis in terms of its contribution to helping families in need. *Developing Practice, the child youth and family work journal's*, (2002) opinion piece reported outcomes of mandatory reporting.

Contributors suggested a look at the Western Australian example with no mandatory reporting in comparison with NSW, Ainsworth (2002) writes the cost of child protection services as advised by the Productivity Commission “*estimates that in NSW (with mandatory reporting) this represents a figure for 1999/2000 of \$65.86 per child aged 0-16 years per annum and for Western Australia (without mandatory reporting) \$21.22. These figures provide startling evidence about the cost of a mandatory reporting system, even when account is taken of possible calculation of errors and the difficulties of interstate comparisons..... This analysis suggests that mandatory reporting systems are overburdened with notifications, many of which prove to be not substantiated, but which are time consuming and costly. As a result it is likely that mandatory reporting overwhelms services that are supposed to be targeted as the most at-risk children and*



*families who then receive less attention than is needed to prevent continued neglect or abuse. So why would you want it?"*

Conclusions summarised by Tomison's in the same journal (2002), "*It would appear to be more the case that the implementation of mandatory reporting merely exacerbates pre-existing systemic failures and/or reflects a failure to adequately plan...*"

While Cashmore (2002), writes "*that child fatality rates as a result of abuse and neglect were significantly related to the rates of children in poverty but relatively unaffected by the reporting rates... This is further evidence of what we should already know – that children are best protected, and that abuse and neglect can be prevented by overall social investment in supporting children and their families*"

My observation is that DoCS has become a huge sorting mechanism for mandatory reports from reporters ensuring every child at risk concern is registered to ensure against litigation. We have a system based upon fear and blame, and a legal system ready to act. I ask **who has been the major beneficiaries of this system? Would a better proposition be to encourage our community to take responsibility for the care of children and families and request DoCS assistance as necessary as is legislated.**

**A DoCS promotion describing wholesome family behaviours would potentially provide more positive outcomes than the present *all consuming***



**blame based reporting given the projected future levels of demand on the present system?**

### **Neglect within Child Protection**

I would like to draw attention to the assessment process of DoCS, and discuss the issue of neglect more broadly from within current academic research and our own agency research.

Our agency has been developing a practice to respond more holistically to families in crisis for the past eight years. We have developed a practice that has emerged from the Restorative Justice (RJ) movement, but before I describe this, I wish to look more closely at neglect as defined in ***DoCS Policy on Child Neglect (2004)***.

***DoCS Policy***, defines neglect as “a somewhat nebulous concept subject to considerable debate. While there is general agreement that neglect encompasses acts of omission on the part of parents or carers and either impairment of the child’s development or actual harm, there is lack of consensus on the extent to which definitions should be qualified by factors such as social conditions, cultural beliefs, the level of potential or actual harm to the child and the intent of caregivers.” The policy further defines neglect also as physical and supervisory, and continues towards a current definition as: “the continued failure by a parent or caregiver to provide a child with the basic things needed for his or her proper growth and development....these guidelines, for practical purposes,



*describe neglect under physical, medical, supervisory, emotional and educational categories". (2004.pp6).*

In the introduction the policy states; *"it has been proposed that neglect may be the core issue underlying all child maltreatment and it has been found that most cases involved with child protection services contain an element of neglect". (2004.pp5).*

From the above there appears to be little clarity around the definition of neglect. You might well envisage that for an adequate assessment and intervention around neglect which the above identifies as possibly *"the core issue underlying child maltreatment"* an accurate definition would be paramount. I am not critical of DoCS as their definition reflects current research, but because of its importance to an improved child protection response, I would like to propose from our own research (Donald, J. 2004), that neglect is behaviour indicative of poor or harmful or ***neglected relationships***, and that understanding, loving, and nurturing relationships aren't fertile grounds for neglect. It would then follow that strengthening family relationships would be a pretty useful way to counter neglect and abuse. While economic factors can be contributors of neglect, not all neglect can be reduced to conditions of poverty.

I am well aware that all children cannot remain in the care of their parents, but there are many who can and do remain in their families, and these require interventions that can assist in the learning and nurturing of wholesome relationships.



DoCS discussion paper (2005) *“Active engagement: Strategies to increase service participation by vulnerable families”*, discusses the high refusal rates, the high attrition rates and the barriers for families accessing services. One would wonder why this is so, perhaps its because families don't feel that the services provided can really help or are not relevant to their specific situation etc, perhaps families are not asked to tell their story and discover their own solutions to their issues. The paper continues and includes practice guidelines for case workers and recommends strategies like *‘working in partnerships with families’* without describing the *‘how’* of such interventions. The paper then goes on to describe strategies that increase initial uptake of services and practical hints of how to communicate with these families considered useful as a DoCs case worker. The paper concludes stating: *“It is important to make services attractive to families. If they feel threatened or if by attendance, they are labelled as failures, they will feel uncomfortable attending. Other agencies will also not refer to a program unless they see merit in it, so relationships need to be built within the service provider community”*.

The discussion paper while highlighting the need for strong relationships between the family and the case worker and the service provider community, fails to identify the importance of building and maintaining strong relationships within the individual family that will maintain that family unit, for its this environment that supports children upon the conclusion of the intervention. The *‘how to’* remains implicit and nebulous as was the definition of neglect in the first instance.



I am encouraged to read DoCS Research to Practice Notes; *"Parental empathy and child maltreatment"* (2006), which suggests, *"the work of Kilpatrick and Hine has noted that child protection agencies typically focus their attention on acts of abuse (such as physical, sexual) rather than on what is **missing** from the parent-child relationship. These authors suggest the need to direct more attention to the latter given the literature which suggests emotional aspects that are lacking (empathy) may in fact be a precursor to acts of abuse"*. We can see that the research is suggesting a look at the underlying issues around relationships and not merely upon the behaviour that drew attention to the family initially, and that empathy has a role to play in family relationships.

We would assert that an intervention centring on the harmful behaviours as a response, fails to identify what is **missing** or to identify what is needed is to reduce harmful behaviours and build stronger relationships.

## **FAMILY GROUP CONFERENCING**

I now want to now draw your attention to the practice of Restorative Justice and Family Group Conferencing (FGR), and DoCS literature review and Research Report (2006), *"Family group conferencing in a child welfare context"*, which describes positive outcomes by families and case workers in the implementation of conferences for child protection issues which participants describe the fair process of the intervention.

The paper discusses *"Effects on family relationships"*, following a FGC described participants stating that: *"many felt that communication within their family had improved, that family conflict had reduced after the conference, and that children*



*were safer as a result. Some expressed surprise at the level of commitment shown by family members during the conference”.*

The paper also writes, *“conferences that were highly emotionally charged and uncomfortable for participants have in retrospect been rated as valuable by family members. Researchers thus far provides no basis for categorical exclusion of families...there are no types of maltreatment that are especially inappropriate for FGDM (Family Group Decision Making)...and there are not certain types of cases that should be excluded”.* (2006. p5). Potentially suggesting the valid use of this model or new paradigm within the child protection sector.

While the paper introduces the idea of a systemic approach to FGC which concludes *“it may be that only adoption on a large enough scale of the FGC as a paradigm shift can provide the empirical information we need to improve both theory and practice”* (2006.p17). We are encouraged to see the FGC model describes a more explicit process for use with families that is beginning to address what is **‘missing’** from other interventions, but why is this so?

### **What led us to identify the need for the practice?**

As part of our Domestic Violence Safety Planning Project in 2000 we were introduced to the Restorative Justice Conferencing Model and attended training sessions by Terry O’Connell, world renowned expert in Restorative Justice (RJ). At the time we were looking to improve our response to domestic violence as it appeared the response was piecemeal without help for those families who wanted the violence to stop and the relationship to improve. We wanted to create an emotionally safe support system for those impacted by DV. We attended



O'Connell's training and were introduced to the psychology of affects, the hardwiring in our physiology by which we experience our emotional responses and develop our emotional life scripts.

We began using the "Wagga Wagga (Real Justice) scripted conferencing questions" (Appendix 3), with our families presenting and discovered that they began to tell us their story with lots of emotion sharing as well. We were to discover that the underpinning theory of RJ was indeed the psychology of affects, pioneered by Silvan Tomkins (1911 – 1991). Tomkins spent his life developing this theory which was not widely accepted in his lifetime, nor today. We use this affect framework today, to find outcomes to some of the most complex clients cases from domestic violence, sexual abuse, child abuse etc. We hear stories that some have never told before, we take our families through our framework and they begin to understand their emotional responses that precede behaviours. Our research found an explicit practice describing affects, emotions, memories and behaviours, resulted in a new language our families to become more resilient in facing new challenges.

## **EXPLICIT AFFECTIVE PRACTICE**

During our research into Restorative Justice (RJ) practices and processes it became evident that outcomes were pretty amazing as was the emotional capacity of these interventions. We continued to ask why this was so, given our workplace learning culture, we asked what was it specifically about the RJ movement that separated it from other interventions. We found it was pretty



simple, it was the link between an environment that provided an emotional capacity and voice compared with one that did not.

When we were introduced to Tomkins theory of affects by O'Connell in the year 2000 as the underpinning theory of the Restorative Justice movement we found that this movement does not always make this explicit link to Tomkins' theory, but that RJ discusses practices and process such as circles and conferences to attempt a definition.

Out of the RJ movement we have developed a practice that looks at emotions and emotional intelligence and defined this and made this explicit in our practice research and in our practice with our clients, we give our families a new language to discuss emotions and behaviours to work through the issues presenting. Our clients receive information and mentoring around practising new behaviours and gain an understanding of our emotional framework that precedes our behaviours as humans. Our research has looked at the notion of relationships and discovered the glue that binds these can be identified as emotional intelligence or capacity, and empathy as DoCS research on parental empathy and maltreatment suggests Kilpatrick & Hine (2006), and not so much cognitive competence.

Our practice which will be further described below, has an explicit methodology of defining harmful behaviours as separate from the person, identifying them for what they are and their impact on others, and then discovering the underlying issues that fracture relationships. For example we all know that while alcohol abuse can generate its own negative life experiences, the abuse of alcohol does not exist in isolation. There are many causes for substance abuse but universally



these individuals want to take themselves into a place that is better than where they are, we call this a false way of achieving the two positive affects as identified by Tomkins(1911-1991) interest – excitement, enjoyment – joy. Substance abuse is a result of something impeding the individuals experience of the two positive affects and if we as individuals do not take time to reflect on an improved response, we are wired to respond in ways that do not address the negative influence, we '*attack others, attack self, withdraw or avoid*', in avoidance we see behaviours such as "*denial, abusing drugs or alcohol, distraction through thrill-seeking behaviour*" (Nathanson, 1992). We are aware of course that there are physical additions to also deal with but both the emotional issues and fractured relationships and physical addiction require attention for the full recovery of the person.

A further example is the lashing out verbally or physically in a domestic violence situation. We all know that assaulting someone is a crime, but what specifically has a focus upon the act of an assault, to do with the fact that the relationship between two people is tenuous. Our analysis would suggest that an assault is 'attack other' behaviour, resulting from an impediment in achieving the two positive affects within the relationship and is a response in what Nathanson, (1999) describes as the *Compass of Shame*. Behaviours around the compass at the *attack other* pole include "*turning the tables, blaming the victim, lashing out verbally or physically*". The usual sector response to domestic violence centres upon the behaviour or the assault. The criminal justice response centres on a punishment and sometimes an Apprehended Violence Order in anticipation that the violence (behaviour) will stop. Once more the attention is focused upon the behaviour, and not what is **missing** in the relationship as suggested by Kilpatrick



and Hine, (2006). While we all acknowledge that the violent behaviour is totally unacceptable and criminal, we ask how the existing response assists the family, when according to our research and experience the majority of families effected by domestic violence say they want the violence to stop and the relationship to improve. (Burton A. et al, 2000). We do not imagine that there is a quick fix solution for domestic violence however, when the family gets to tell their story and the emotional scripts and behaviours are described to them, then we can report families are better able to make sense of their experience and realistic decisions for the future.

We assert that a response that can look at the '**what's missing**', identify harmful behaviours and their impact on others, and then address underlying issues to improve and maintain stronger wholesome family behaviours and relationships, would strengthen **family structures** that primarily care for children.



## **TERMS OF REFERENCE**

### **V. Professional capacity and professional supervision of the casework and allied staff.**

#### **STAGE ONE**

##### **AGENCY PREPARATION**

As discussed in our introductory letter, we have developed a learning and supportive culture within our workplace from the learning and introduction to the NSW Police Behavioural Change Program. The importance of a supportive workplace culture is fundamental if we are serious about keeping good experienced staff working in child protection. It was Mother Theresa being very strict ensuring her nuns were clothed and fed that ensured they could perform the work with the poor. Similarly in child protection, practitioners are required to be emotionally robust when dealing with the underlying very complex issues presenting.

In 2000 with a funded project to "*develop an ongoing understanding of safety planning to reduce domestic violence*" we needed to establish a supportive environment and to ensure continuation of our learning upon cessation of the project funds.



Behavioural Change Contractors began work with our staff and Initially asked very direct questions regarding our service provision:

*"What do you do? Why do you do that particular thing?  
and How do you know that this makes a difference?"*

We struggled to answer with any clarity; we now know that these questions are very difficult to answer. We have since discovered that most welfare sector responses cannot define their practice explicitly. As one semi-retired psychologist who visited us commented; *"I'm humbled, I have an eclectic practice and this comes to me to assist my clients in all different ways, but I cannot describe how I practice as you have done today"*. We were all quite amazed at his comments.

We now have discovered that we have a very unique explicit practice, and one that has resulted from our new understanding based upon Tomkins' underpinning theory or psychology of affects, who asserts that behaviours are emotion based.

Tomkins, a philosopher and psychologist, drew upon Darwin's work on human emotions, and their research found that all humans displayed similar facial expressions when experiencing affect, for example a smile is a smile whether displayed by and African, an American or an Eskimo. As Tomkins writes in *'The quest for primary motives: Biography and autobiography of an idea'*, that there is *"overwhelming evidence of the universality of facial expression across cultures, amongst neonates, and even in the blind"* (1981 p49).



Tomkins questioned the ideology of psychology and its divisiveness. He writes, *"as a former philosopher and former experimental psychophysicist, I was convinced that personality theory needs to be grounded in a more general theory of the human being (which experimental psychology had addressed, but failed to complete) as well embedded in the broader sociocultural theory. From the outset, I have supposed the person to be a bio-psycho-social entity at the intersect of both more complex higher social systems and lower biological systems"* (1981, p31). We are continuing to learn more about Tomkins' work and participate in a learning group, part of the Silvan Tomkins' Institute, and promote this new psychological paradigm.

A whole of agency approach incorporated this theory into practice within our principles behaviour framework. We argue that our staff can better manage difficult client family situations, because they can better manage their own emotions and understand the usual emotional responses of our client families because of this new knowledge of affects, emotions and behaviours.

Because we have a uniform explicit practice our clinical supervision is pretty much a non confrontational event where we describe how we use the practice and clinical supervision is not so much about the individual practitioner, but about learning and discovering new ways to use the knowledge. This releases us from certain defences that were evident prior to our explicit practice. Our staff are confident in their practice and are supported with learning and clinical supervision to achieve improved family outcomes.



To summarise the first stage of our cultural change program was to enable the agency and staff to work cohesively and have clearly identified behaviours demonstrating this supportive environment, and our principles behaviour framework achieved this. Once staff and the agency were on the same page and understood their own emotions and behaviours then they were better placed to manage the difficult client cases presenting.

The professional capacity of our staff to respond to client need is demonstrated in our client evaluations. (Appendix 1).

## **STAGE TWO**

### **PROFESSIONAL CAPACITY / EXPLICIT AFFECTIVE PRACTICE**

As introduced above we will now briefly discuss our explicit practice.

We work with each person as they present and then engage other members of the family as desired and with the agreement of the presenting client. Each member of the family impacted by inappropriate behaviours is given a session or sessions to *'tell their story'*, and be what we call *'taken through the framework'*.



We then where possible and with agreement, bring the family together. The family having the knowledge of our practice framework can then discuss the issues at hand and discover a new approach to repair relationships towards more wholesome behaviours, or what we have coined a 'new normal'. We say we can help you stay together or separate with dignity, we say we are not in the happiness industry, but the 'fair process' industry as suggested by Kim and Mauborgne (2003), who state *"In all the diverse management contexts we have studied, we have asked people to identify the bedrock elements of fair process. And whether we were working with the senior executives or shop floor employees, the same three mutually reinforcing principles consistently emerged: engagement, explanation and expectation clarity"*. We assert that our Explicit

Affective Practice satisfies the fair process criteria and leads to improved outcomes.

Families may spend a few weeks or months attending weekly sessions as deemed necessary by both the family worker and the client family. We are not saying that all families end up in a happy place, but that they understand how behaviours impact and what they need to do to live in more wholesome relationships.

Our journey from the Restorative Justice Conferencing model has been described in Donald's thesis *"A Policy Framework for a Knowledge Society; Families and Knowledge"*. Also included as Appendix 2, *"From Restorative Justice to an Explicit Affective Practice"*, included for you reference.



We explain the theory to our clients in what we have developed as the "Tools of Life". (Appendix 3). These tools assist those presenting to better understand their emotions, their responses and how better to manage emotions and behaviours and improve communication. Case studies are included as Appendix 4.

Our explicit affective practice information is shared with our client families, this includes firstly allowing the client family to 'tell their story'. We then review their story in light of our "Tools of Life" which they are given to take home, these consist of:

- An explanation of our 9 innate affects and the scripts that each person builds around each affect. There are two positive affects, one neutral and six negative affects.(Tomkins 1911 - 1991)
- An explanation of the affect of shame. "*Shame affect is triggered any time interest or enjoyment is impeded*". (Nathanson, D. 1992)
- A description of the compass of shame as developed by Don Nathanson of the Tomkins Institute.
- The scripted restorative justice questions, to challenge harmful behaviours. (Real Justice 1999) The scripted supplementary restorative justice questions, assisting those harmed tell their story (Real Justice, 1999).



- The Social Discipline Window, (identifying practices of high support and pressure that results in a learning/nurturing environment.(Real Justice 1999).
- Tomkins Blueprint for life: Maximise and mutualise positive affect, mutualise and minimise negative affect, minimise the inhibition of affect and do anything that achieves the above.
- Kelly's Blueprint for the development of healthy bonds, based upon Tomkins' Blueprint. (V. Kelly,1996). (Appendix 3)

## **PROFESSIONAL SUPERVISION**

We are continuing to receive clinical supervision and participate in a learning group supervised by Associate Professor of psychiatry, Susan Leigh Deppe of the Silvan Tomkins Institute via internet conferencing.

In Oct 07, as part of her visit to Australia, Dr Deppe spent a week with us to view our practice first hand. We are all pretty excited about the practice and outcomes for families and we hope to expand and share our practice to assist others provide a pretty clear and explicit methodology when working with families.

## **Results / outcomes for clients**



Results for our clients are improved emotional intelligence and with this client families are better placed to understand their emotional framework and so manage behaviours and improve relationships in the anticipation of living happier lives.

While the Department of Community Services has received detailed annual reports describing our developing practice since 2000, we have had no enquiries from the Department regarding our explicit practice, indeed when questioned by a local DoCS supervisor in 2002, as to why we were using restorative justice with our client families, we suggested that we weren't using RJ specifically but we had developed an innovative practice. The DoCS person suggested that we were not paid to be innovative but to work with families and that all innovation comes from central office, which in hindsight is the behaviour of bureaucracies, innovation from top down, a 'Weberian' analysis.

A certain level of Interest was generated in 2002 which resulted in our service being reviewed by DoCS. DoCS today don't appear to understand how we are achieving our outcomes however they are satisfied with project reports and have continued to fund our Family Support project.

#### **Identified Gaps in research & practice models/frameworks.**

We continue to come up against the sector/establishment dominance of cognitive behaviour therapy, (as Tomkins suggested in his writings). We have identified that an emotional competence within the general community service sector was ad hoc, if part of the formal process at all. It was indeed absent within the



criminal justice system as many victims of crime report; justice might be done but I don't feel any better. While local practitioner psychologists, counsellors and social workers are interested in our work, we find that there is little flexibility for them to embrace a new paradigm from within their respective bureaucracies and

established knowledge base. For example we continue to receive referrals from Probation and Parole for people with anger management counselling. We have anecdotal reports that Probation and Parole while interested in our work they are not able to fund programs that are not cognitive behaviour based. We realise that this is not a reflection of individuals but of overall sector ideology. Over the years we have applied in various submissions for additional funds, having no success.

Because this is a newly developing paradigm we have no local resources from which to draw. Our link to research and support is coming from the Silvan Tomkins Institute, based in Philadelphia PA; of which we are soon to become members.

## **EXPLICIT PRACTICE BENEFITS**

Commissioner Wood's address on 17<sup>th</sup> December 2007 suggested *"any alternative approach to child protection is open for consideration, and we would not want submissions to be constrained to tinkering at the edges of the current system, or to overlook the means by which families in trouble could be supported and assisted so as to avoid becoming subject to the need for care and protection and in particular falling into the cycle of inter-generational abuse and neglect that can so easily become intractable"*.



Our practice development is indeed far from tinkering at the edges; the psychology of affects is a huge paradigm shift from the dominant psychological theories today. Our unique practice is called explicit, because agency practitioners use the same framework, namely "The Tools of Life" and these tools

are shared explicitly with our client families, who take them home and lots of families have the tools on the fridge to refer to when behaviours become challenging to assist families care and nurture their children.

We have found that once knowledge of affects and emotions is acquired then behaviours can be identified for what they are, and then a real dialogue can be had without distraction to resolve issues, it is a way of life for all at Goulburn Family Support Service. We can discuss case supervision with a clear rationale for what we are doing, why we are doing that, and can explain the underpinning theory. Practice linked to theory based upon clear knowledge where biology meets biography.

Our practical experience has led us to believe that the sharing of an explicit practice has many potential benefits for the child protection system as our learning continues.

Our own evaluations report that our families are better placed to respond more appropriately to future life challenges armed with "The Tools of Life" and respond with improved behaviours.

## **TERMS OF REFERENCE IX**



**“The adequacy of resources in the child protection system.”**

This report has focused upon the existing paradigm of child protection identification and response. We need to acknowledge the allocation of early intervention funds into the child protection system that is currently addressing the previously unallocated cases received from the mandatory reporting system.

We applaud the initiative of ‘Brighter Futures’ in an attempt to address the previous gap in service delivery to families, families who were not seen to require an immediate child protection response, and whose cases were previously ‘unallocated’ from the system.

While again we are not critical of the program, we ask that critical analysis of what is happening in this program, “what are they doing, why are they doing that particular thing and how do we know that works”. I am familiar with the Brighter Futures program, and have followed the Departmental decision making process for our local community, our agency is also a potential partner in the delivery of service programs.

Again I suggest that the research around the value of home visiting, one of the key program deliverables, is at best patchy. Conclusions from a literature review on effectiveness of early intervention programs concludes *“Home Visiting: these services are most suited to vulnerable, housebound mothers. Evaluations show modest gains for parents, with few positive effects on children’s development.”* (2005) New South Wales Centre for Parenting Research.



While Holzer J. et al in their discussion on the effectiveness of parent education and home visiting programs conclude *"It was shown that both parent education and home visiting programs can improve parent's knowledge, skills and supports and may be effective in preventing child abuse and neglect. ...parent education and home visiting programs should be seen as part of a comprehensive approach to child maltreatment prevention that includes primary, secondary and tertiary interventions...Arguably, the most effective service provision...targets the*

*'right' intervention to the 'right' audience".* We would then argue that the simple blanket provision of home visiting or parenting programs is not allocating resources wisely or indeed having the knowledge of what these programs explicitly provide for the family towards their specific outcome.

We would argue that early intervention and prevention programs be able to firstly assess the family relationship requirements and barriers to these. From our research we know that we are at our best when we are in supportive relationships, this is true in relationships with our spouse, work colleagues, children and community. We need a framework that allows families to tell their story, identify barriers to relationships, give them tools and knowledge to navigate these barriers towards improved wholesome behaviours and relationships.

We would conclude that there is potentially enough resources to meet the need for a child protection response in the state, but we need to deliver this from within a workplace culture and research that will make a difference.



On a practical level we need to develop a learning and supportive workplace culture, to look at the research and to spend the resources doing what works and purposefully or explicitly do this, as we have found using our explicit affective practice.

### **RECOMMENDATIONS**

- 1. That the mandatory reporting system be replaced with a voluntary reporting system and a family relationship promotion / program, sponsored by DoCS be implemented to educate the community about the child protection and the business of DoCS..***
- 2. The implementation of a Departmental Principles Behaviour framework for DoCS staff, to establish a supportive learning workplace culture, from which to provide the best possible services to vulnerable families requiring help.***
- 3. An improved child protection system with an emphasis upon the development and support of healthy family relationships to be the***



***preferred option for the care and support children, incorporating the learning from the Restorative Justice movement and the research presented within this report.***

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