

# Working with Children, Young People and their Family

A practice philosophy guide



10/1/2012  
Updated March 2013

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This document aims to provide practice guidance to Family Workers at FamilyCare and utilises a range of guides and resources

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## WORKING WITH CHILDREN, YOUNG PEOPLE AND THEIR FAMILIES

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In working with children, young people and their families, staff should at all times be cognisant of client's rights as documented in the Client Rights and Responsibilities Charter. A key component of these rights is the right to be free from abuse, neglect, exploitation and preventable injury. How to apply these rights is documented in the FamilyCare Freedom from Abuse and Neglect policy and procedures. Employee's obligations and expectations are documented under Empowerment section of the Code of Conduct.

Establishing effective working relationships so that there can be a shared understanding of goals and a shared commitment to supporting the child, young person and/ family to realise those goals is a key factor in achieving sustainable goal outcomes. Apart of this process is the family worker creating an environment that is conducive to the child or young person and/or their family actively working to achieve change.

Developing open, honest and positive relationships between the child or young person, their family and workers is important for:

- Productive two way communication;
- Facilitating the child, young person and family's active participation in decision making, goal setting and case planning;
- Promoting trust between the child or young person, family and worker;
- Genuine contribution and a greater sense of control by the child or young person and/or their family;
- Maximising accountability of workers and organisations.

The family worker aims to:

- Create a positive, collaborative, effective working relationship between the worker, child or young person and family to ensure the best interests of the child or young person;
- Ensure the family understands and provides feedback on what is happening in circumstances that can often be challenging and distressing;
- Ensure the family has opportunities to build on their capacity to address issues in relation to providing care and protection to their children and young people;
- Enhance social inclusion within the family structure.

## GOOD PRACTICE POINTS

*Adequate planning and preparation are a foundation for positive outcomes.*

### BEST INTEREST CASE PRACTICE MODEL (FRAMEWORK)

FamilyCare Integrated Family Services (IFS) utilises the Best Interests Case Practice Model to provide a foundation for working with children, including the unborn child, young people and families. It aims to reflect the new case practice directions arising from the *Children, Youth and Families Act 2005 (CYFA)* and the *Child Wellbeing and Safety Act 2005*.

IFS will work collaboratively with other professionals involved with the family, using the Best Interests Case Practice Model (2008). The model is designed to inform and support professional practice in family services, child protection and placement and support services, the model aims to achieve successful outcomes for children and their families.

Effective practice requires good working relationships between services, working in partnership with the family wherever possible – where the child's best interests are at the centre, The Best Interest Case Model is based on sound professional judgement, a culture that is committed to reflective practice and respectful partnerships with the family and other services providers.

The objectives of the Best Interests Framework are as follows:

- To create a shared understanding, a common language and a consistent approach to ensuring the best interests of vulnerable children, youth and their families across the three core work functions involved with vulnerable children, youth and their families, namely:
  - assessment - which informs;
  - planning - which guides;
  - action - that benefits the child.
- To assist family services, child protection and placement services to respond to a child's needs for safety, stability and development, in coherent and holistic ways that recognise and strengthen the links between a child and family and their local community resources.
- To give the needs and interests of Aboriginal children and their families appropriate attention and prominence and drive the development of more coherent, integrated and culturally aware service responses.
  - To provide a shared framework for reviewing the outcomes of our work with a child and their family.
  - Consistent with the Victorian Government outcomes framework, provide a basis for evaluating the effectiveness of child and family support services in protecting and promoting the best interests of vulnerable children and families.

*(The Best interests case practice model – summary guide 2010)*

## FAMILY WORK

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It is important to maintain a relationship with the child or young person and their family while they are involved with Integrated Family Services.

The child or young person and their family may go through a series of stages, including assessment, planning, service delivery, monitoring and review. During each stage the worker should endeavour to ensure effective relationships are maintained.

Strategies that will enhance ongoing engagement include:

- Being clear about the worker's role and the role of other organisations;
- Promoting collaboration between organisations servicing the family to minimise duplication and the potential for excessive or conflicting demands being placed on the family;
- Being clear about what the child or young person and their family's rights are;
- Keeping appointments and returning phone calls;
- Maintaining good records and confirming with the child or young person and their family any agreements made and that the records accurately reflect what was said and agreed to at the meeting;
- Promoting ongoing discussion with the child or young person and their family;
- Remembering that the worker and the family have a common and shared interest in wanting what is best for the child;
- Being clear about the issues that are negotiable and non-negotiable, particularly in statutory child protection cases;
- If there is a need for a worker change, it should be a coordinated transition undertaken with the child and their family.

Engagement in a child wellbeing context is based on best-practice principles that should underpin the actions to improve the safety, welfare and well-being of a particular child or young person.

Early intervention in the life of a child or young person who is experiencing difficulties has been shown to improve longer term outcomes. This can mean intervening early with emerging issues and/or early in the development of the child or young person.

All Family Work activity should be:

- Child-centred and family-focused;
- Strength-based;
- Participatory, with every opportunity provided for the child or young person and their family to be involved and contribute;
- Based on clear and appropriate communication;
- Encouraging and supporting self-determination and participation for Aboriginal children, young people and families as much as possible;
- Inclusive, non-discriminatory and considerate of relevant aspects of culture and language;
- Collaborative between the child or young person, their family and organisations providing support services.

## BEING CHILD-CENTRED AND FAMILY-FOCUSED

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Adopting a child-centred approach means that the safety, welfare and wellbeing of a child or young person is the paramount consideration in any family services work. Assessment, planning and delivery of services should be based on the needs of the child or young person.

Adopting a child-centred approach to engagement in a family work context is designed to:

- Place the best interests of the child or young person at the centre of any decisions;
- Ensure a positive, trusting relationship is developed between the child or young person and the worker;
- Promote participation of the child or young person in decision making and issues that concern them when appropriate;
- Emphasise that the aim of services is to improve the safety, welfare and wellbeing of the child or young person;
- Ensure that the needs of the child or young person are not overlooked when addressing the concerns or issues of the parents and/or family;
- Child-centred and family-focused approaches are not mutually exclusive. While the former refers to placing the needs of the child or young person at the heart of any decision, being family-focused recognises that the issues and needs of parents and/or carers will impact on the child;
- Adopting a family-focused approach aims to ensure the worker assesses and responds to issues affecting a family's capacity to care for and protect their children. It also aims to ensure that the child or young person's needs and welfare are considered within the context of their family.

The family-focused approach:

- Recognises that the constant in the lives of most children and young people is their family and that most children and young people are better off when living safely within their own family;
- Provides the best opportunity to enhance a family's capacity to feel empowered and make positive changes;
- Recognises that the family is integral to improving the safety, welfare and wellbeing of the child or young person;
- Ensures that services are coordinated around the family's needs;
- Ensures that relevant organisations are involved in the assessment, planning and delivery of services;
- Reduces the likelihood of families being caught up in a repetitive cycle of assessment and referrals.

## WHAT DOES BEING CHILD-CENTRED AND FAMILY FOCUSED MEAN?

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Adopting a child-centred and family focused approach is not only important in terms of enhancing the realisation of positive outcomes, but will improve the chances of effectively engaging children, young people and their families.

The following principles underpin child centred practice:

Special attention should be given at every opportunity to link families with very young children to services and supports to strengthen their physical, cognitive and social functioning.

Assessment of children and young people should take account of their developmental level across a range of spectrums, including; health, education, identity, family and social relationships, social presentation, emotional and behavioural development and self-care.

Children and young people should be provided with direct and indirect opportunities to express, clarify and communicate their feelings and wishes. To facilitate this, the assistance of an adult whom they trust, who provides regular emotional and practical support and who is likely to have continuous involvement with them may be required. It is important that workers are aware of and understand how children and young people are impacted by any intervention.

Knowledge, expertise and relevant information should be actively shared, where appropriate, between workers who are involved with children and young people at each stage of case management and an ongoing dialogue should be established which includes feedback about critical decisions.

All interventions should as far as possible seek to create and strengthen the positive everyday networks which surround children and young people.

Interventions involving young people should recognise the importance of the young person developing a sense of self and that it may not be appropriate for the family to be involved in the resolution of adolescent issues, unless those issues place the adolescent at risk.

Adopting a family focused practice means:

- Being inclusive and involving the mother, father, grandparents, extended family, kin and friends (where appropriate and relevant) and encouraging active participation;
- Recognising and considering the role of the broader community;
- Getting to know the family and what their strengths, needs and goals are;
- Understanding the child or young person's position in the family in relation to other family members;
- Developing case plans based on the appraisal of the family's needs and strengths;
- That there is two-way communication between the family and worker, especially in regards to decision-making, where possible.



## FATHER INCLUSIVE PRACTICE

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Father-inclusive practice aims to value and support men in their role as fathers, actively encourage their participation in programs, and ensure they are appropriately and equally considered in all aspects of service delivery.

Father inclusive practice occurs when the needs of father (biological and social) are responded to through the planning, development and delivery of services.

It recognises families as a system and acknowledges a balance between the needs of fathers and family as a whole

The substantial evidence that involving fathers:

- a) With infants and children can improve children's wellbeing;
- b) In children's care is supported by considerations of equity;
- c) Is considered appropriate by practitioners within family-related services;  
and that:
- d) Fathers are important to the achievement of national goals and targets for families, places the onus on services aiming to support families to demonstrate progress in including fathers.

The participation and inclusion of fathers in services provided by organisations is not only beneficial for the fathers themselves but it also has positive implications for their current or ex-partners, and most importantly for their children.

Increased involvement of fathers in parenting can also result in increased opportunities for partners to balance parenting with other areas of their lives, such as work, education and social activities. Partners may also have a greater sense of self-worth due to the higher satisfaction in their relationship with their partner.

Perhaps the most important benefit of father-inclusive practice is the enormous rewards this has for children.

Positive and consistent father-child interaction brings the support and protection needed to increase social, emotional and cognitive development. Children often have an increased sense of wellbeing, a clearer sense of their identity and greater resilience to adversity.

Put simply, father-inclusive practice strengthens and supports families and is vitally important for the community as a whole.

At the same time, it should be recognised that the realignment of services that have traditionally focused on women and children to be father-inclusive will be an ongoing and multilayered task. A strengths-based approach can be applied to practitioners, emphasising their capabilities and intelligence as they develop a more inclusive and effective support system for families as well as to the fathers (and mothers) involved.



## ADOPTING A STRENGTHS-BASED APPROACH

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A strengths-based approach operates on the assumption that all people, even if they are experiencing problems, have some strengths and resources from which they can draw on to make positive change. A deficit-based approach, which focuses on what is wrong, can overlook valuable skills and experiences a family has. It can also reduce a family's motivation to actively engage with services and impair the likelihood of positive change for children.

A strengths-based approach does not ignore problems and always holds the safety of the child or young person as paramount. It focuses on utilising personal strengths to inform strategies to support individuals.

### A strengths-based approach:

- Adopts a holistic approach to working with a child or young person and their family by focussing on the strengths, resources and capabilities of the child, young person and their family, not on the deficits;
- Does not ignore the reasons why an organisation has become involved, but provides a balanced assessment of issues by looking at the whole picture, including the problems, skills and resources available to the child, young person and family;
- Contributes to addressing the power imbalance between a worker, the child and their family by emphasising the child or young person and their family's strengths and how they can be used to improve their situation;
- Should be a collaborative approach involving all relevant organisations, where required;
- A strengths-based approach recognizes fathers' aspirations for their children's wellbeing and the experience, knowledge and skills that they contribute to this wellbeing. It also acknowledges that many fathers have unrealised capacity to contribute positively to their children and that services have a role in inviting fathers to work towards change both in their own family role and with other fathers and men.

## HOW DO I ADOPT A STRENGTHS-BASED APPROACH?

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*Being strength-based requires a different way of looking at children, young people and families. They are more than just their “problems” and their capacities, talents, competencies, possibilities, visions, values and hopes need to be identified and utilised (Saleebey, 1996).*

When adopting a strengths-based approach the following points may provide assistance:

- Try to identify what a child, young person or family is doing well or what personal resources they may have as these “strengths” could influence the identification of appropriate services or supports;
- Ask the child, young person or family what they believe their strengths are;
- Use positive language when engaging as the right words and language can be empowering.

Utilise strength-based skills, such as:

- Allow the child, young person or their family to tell their story without interruption;
- Highlight strengths;
- Explore and addressing structural and personal constraints;
- Identify significant people who can support the child and/or family;
- Develop a picture of the future and establishing realistic goals;
- Actively identifying and measuring change and progress;
- Identify achievable steps and strategies;
- Celebrate successes.

## INDICATORS OF SUCCESS OR PROGRESS

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- Communication is open and information is being exchanged between the worker and the child or young person and/or their family;
- Appointments are kept both by the worker and by the family;
- Ideas are being generated on ways to address issues or possible programs and activities that could help;
- The child or young person and/or their family listens, considers suggestions and may make their own suggestions;
- The child or young person and/or their family take responsibility for following up on agreed actions;
- The family is keeping the worker updated on their progress and advises of changes in circumstances (including contact details and personal information).

## ENCOURAGING PARTICIPATION

Participation is an essential aspect of the engagement process. Participation is about ensuring the child or young person and their family have a voice and are listened to when it comes to decision making and considering appropriate services. It also involves providing the child or young person and their family with the confidence and skills to effectively participate.

Active engagement encourages and facilitates participation. It gives a child or young person and their family a say in important decisions concerning them and allows their views to be heard and taken seriously. Wherever possible, practical effect should be given to the ideas and suggestions of a child, young person and their family's ideas and suggestions.

There are five key elements to achieving effective participation:

- Making participation part of an organisation's culture;
- Involving children, young people and families in decision-making;
- Requiring adults to adapt to a child or young person's way of working;
- Promoting strong relationships between children and workers;
- Recognising that participation rewards children, families and organisations.

Whenever a child or young person is able to form their own views on a matter concerning their safety, welfare and well-being, they should be given an opportunity to express those views freely and those views are to be given due weight in accordance with the child or young person's developmental capacity and circumstances.

- Giving children and young people a say about what is important to them;
- Allowing a child or young person to contribute to and 'own' decisions that are made about their lives;
- Increasing the self-confidence and skills of children and young people;
- Empowering children and young people;
- Helping protect children and young people;
- Giving adults the opportunity to show respect for the views of children and young people;
- Acting as a catalyst for the wider participation of all parties involved;
- Leading to more accurate and relevant decisions for the child or young person and, therefore, improving the quality of decision making for the organisation.

Disabilities, such as serious emotional disturbance, developmental, psychiatric, serious medical, serious physical or perceptual impairment can affect the ability to participate effectively, at age or developmentally appropriate levels.

A disability may affect a child or young person in the following ways:

- It can affect speech or communication;
- It may be difficult to express needs;
- It can effect capacity for self-assertion;
- It can limit opportunities for development of self-confidence, wellbeing and self-direction;
- It may present as challenging behaviours;
- It can take longer to learn things and absorb information;

- It may require education and training adapted to the level of understanding and development;
- It may make the person vulnerable to suggestion;
- It may give a false impression of understanding;
- It may make it difficult to adapt to new environments and situations.

### PROMOTING ACTIVE PARTICIPATION

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There are a number of strategies that can be used to facilitate the active participation of the child, young person and family.

These include:

- Attempting to minimise any concerns or mistrust, especially if the worker is from a government organisation and there are cultural or historical issues associated with government involvement.
- Communicating clearly, explaining the reason why the organisation is involved, what the worker's role is and what the process will be. It is also important to discuss what the child or young person and their family can do.
- Listening to the child or young person and their family.
- Being aware of how body language, clothing, language, use of forms, tools and the physical environment can impact upon engagement.
- Recognising that language, behaviour and dress may impose a barrier to the engagement and participation of clients from a particular culture.
- If working with a hearing impaired person who uses Australian Sign Language (AUSLAN) as their primary communication it is important to use professional interpreters accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI).

### COMMUNICATING CLEARLY TO PROMOTE PARTICIPATION

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There can be many different situations where a person has additional communication needs such as disability, language differences, age or developmental stage, literacy skills, etc. Such situations can:

- Make reading and writing difficult;
- Be a challenge understanding questions, abstract concepts or instructions;
- Be difficult comprehending numbers and other measures such as money, time and dates;
- Make communication over the phone difficult;
- Create greater dependency on family or carers and limit the support network;
- Be difficult to plan ahead.

Building a trusting relationship with a child, young person or family members, especially with people with additional communication needs, is critical.

Strategies to ensure that participation is meaningful include:

- Involving a support person or advocate, especially in cases where the usual support person is a person of concern for the child or young person's wellbeing and protection;
- Using signers and interpreters, as well as Braille based material;
- The use of appropriate aids, such as communication boards and books, symbols, photographs and e-communication technology to ensure the necessary information is available;
- Ensuring transport and other mobility resources are available;
- Arranging meetings and discussions in accessible locations;
- Keeping personal information confidential, as far as possible;
- Awareness of the relationship between the person with a disability and the worker.

Any contact with the child or young person and/or family and between organisations must utilise clear communication.

Effective communication recognises that different approaches and strategies may be required when working with an adult, child or young person.

It is important to be sensitive to the role of both verbal and non-verbal cues in seeking to communicate successfully with children, young people and families.

Effective communication recognises the inherent inequality in the relationship between a worker, the child or young person and their family. Being clear at the start of engagement about the purpose and parameters of a worker's involvement, their expectations, as well as those of the child or young person and their family, the strategies to be used and the expected outcomes are essential first steps in good communication.

Where there is resistance, reduce the potential for conflict by modifying engagement strategies, without compromising the objective of engagement.

Purposeful and focused communication reduces stress and anxiety for the child, young person, their family and the worker. It can lead to a more productive working relationship and can also increase the likelihood of active engagement.

Where communication is difficult, particularly with families resistant to services, a worker may need additional support. This can take the form of debriefings and supervision with line managers or colleagues with particular expertise.

Minimise the use of formal language, jargon and acronyms in communicating with children, young people and their families.

## WHAT IS EFFECTIVE COMMUNICATION?

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For communication to be effective it must be:

- Open and honest;
- Positive and focused on identifying strengths;
- Non-judgmental;
- Respectful of the people involved and of their culture, faith and ideals;
- Aware of strengths and positive attributes;
- Understanding of any special needs and circumstances, such as literacy skills or a disability;
- Able to incorporate the use of interpreters and translation of material, when required;
- Jargon free and appropriate for the person's abilities and understanding;
- Aware of body language and eye contact and how these can be used to establish a rapport and put a person at ease, or used inappropriately to intimidate and control;
- Cognisant that appearance and style of dress are a part of communication and need to be respectful.

Communicating with a child or young person requires a greater awareness of:

- The worker's role in the child or young person's life and the impact that can have on the child or young person's world;
- The need to listen and understand the view of the child or young person;
- The style of communication needed for different age ranges;
- The language used, and the importance of avoiding jargon;
- The environment where it is taking place;
- Cultural considerations;
- Not judging the child, young person or family members;
- The use of different media in communicating e.g. SMS and email;
- The support required to allow the child or young person to be part of decision-making;
- The need to provide opportunities for the child or young person to have their say.

## CONFIDENTIALITY AND PRIVACY

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FamilyCare regards confidentiality and privacy as a high priority. Clients deserve the right to speak openly and honestly and know that their private information will be respected and recorded appropriately.

All clients are handed a copy of our confidentiality agreement and are made aware that the only reason we would break confidentiality is if we felt the client or their family were at risk of harm or if we were legally required to do so.

In order to speak to outside agencies that are involved with families, we need to seek the consent of the client. This is done by requesting the client to sign consent to exchange information forms which is kept on the client file and provided to other agencies when required.

As mentioned in the privacy statement, clients are able to access their private information upon request.

## CLIENT GRIEVANCE PROCEDURE

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The written grievance procedure is provided to clients at the first home visit and is to be verbally explained to ensure the clients understands the process.

The grievance procedure states “if you believe in some way the service you are receiving is not meeting your expectations you have the right to say so. Firstly, please try to discuss the matter with your worker, however if this is not successful contact FamilyCare to discuss the matter or write to the service manager who will endeavour to resolve the matter, if this is unsuccessful the complaint will be passed onto the CEO.

At the introductory meeting with a family/individual the following documents must be discussed and explained to the client – confidentiality, privacy, and grievance, have your say and advocacy.

**It is a requirement to make a written record of the discussion.** The written record is to be contained within the first contact case note i.e. first home visit or office visit.

For example:

*“The writer explained and provided the FamilyCare confidentiality, privacy, client rights and responsibilities and grievance procedure documents to “CLIENT – insert clients names”. The writer also explained and provided to “CLIENT – insert clients names” with the Family Agreement document as asked that s/he/they read over the information provided today and return the Family Agreement document signed at the next contact with the writer. The writer encouraged “CLIENT – insert clients names” to feel free to ask any questions regarding the information at the next contact after they have had an opportunity to read the information more thoroughly.”*



### ENGAGING ABORIGINAL CHILDREN, YOUNG PEOPLE, FAMILIES AND COMMUNITIES

Aboriginal culture and communities are diverse and there are many different nations, tribes and groups. In view of this workers need to find ways of working and communicating that meet the needs of specific individuals and communities that a service is provided in.

Communicating with Aboriginal people requires a sensitivity and understanding of the role of the family and community. Cultural and historical factors also need to be acknowledged by anyone who works closely with Aboriginal people and an understanding of how these factors have shaped and influenced the community's social and emotional wellbeing.

- Aboriginal people are to participate in the care and protection of their children and young persons with as much self-determination as possible;
- Programs and strategies that promote self-determination should be implemented for Aboriginal people;
- Aboriginal families, kinship groups, communities and organisations are to be given the opportunity to participate in decisions made concerning the placement of their children and young persons and in other significant decisions that concern their children and young persons;
- Aboriginal children and young people should, where possible, be placed with a member of their extended family or kinship group, as recognised by the community to which the child or young person belongs;
- When an Aboriginal child or young person cannot be placed with extended family or kinship group, they should be placed with an Aboriginal carer with connections to the community of which the child or young person belongs;
- If an Aboriginal child or young person is to be placed with non-Aboriginal carers contact with their community and culture must be maintained.

With over 500 different Aboriginal nations and tribal groups across Australia, all with distinct histories and languages, a generic 'one size' interpretation of Aboriginal culture should be avoided.

Local specific cultural knowledge and understanding is a key element of effective and positive engagement with Aboriginal people. Each Aboriginal community usually has its own protocols which provide guidance on standards of behaviour, respect and knowledge that need to be recognised, valued and taken into consideration when commencing work within the community.

Most local Aboriginal organisations run cultural awareness training sessions. These sessions can provide an understanding of the historical and socio-cultural factors that have shaped parenting practices in Aboriginal societies, which is a critical aspect of working with Aboriginal families and communities.

- If Aboriginal people are not included, respected and valued as equal partners in the process the outcomes will be flawed;
- Aboriginal communities are diverse and complex and there are many different nations, tribes and language groups and they should not be treated as a homogenous group of people. Local cultural values, protocols and ways of doing business must be respected;

- Workers should undertake Aboriginal cultural training and maintain their understanding of Aboriginal history and culture through ongoing supervision and/or by accessing additional training and expertise;
- Establishing relationships with relevant, local Aboriginal organisations and service providers is very important and will facilitate collaborative working.

Some practical ways to enhance the effectiveness of engaging Aboriginal children, young people and families include:

- Allocating an Aboriginal worker to the case;
- If the worker is non-Aboriginal organise to have an Aboriginal worker attend the first and subsequent meetings, if relevant and appropriate;
- Consulting with relevant Aboriginal workers, organisations and community members, noting that 'having a chat' with one Aboriginal worker may not be enough;
- Ensuring that all stakeholders are kept in the loop (especially the child, young person and family) and how they know why the worker is involved and understand the process;
- Understanding the family network and involve kin, where appropriate;
- Being upfront, honest and transparent to avoid mistrust;
- Holding and demonstrating high expectations and plans for success;
- Recognising that what may seem cultural may not be and that a child's welfare and wellbeing is the paramount concern and takes precedence over cultural concerns;
- Understanding that seeking advice about 'cultural norms and ways of doing business' is different from discussing the appropriateness of actions and services;
- Never using the acronym ATSI to describe Aboriginal and Torres Strait Islander people or communities, use Aboriginal and/or Torres Strait Islander.

### ENGAGING REFUGEE AND MIGRANT CHILDREN, YOUNG PEOPLE AND FAMILIES

It is important that a “one size fits all” approach is not adopted when engaging refugee and migrant families. It is important to recognise the multifaceted nature of identity and experiences and incorporate this into practice. Twenty four per cent of the NSW population was born overseas and there are over 130 religious affiliations. As well, twenty per cent of the population speaks a language other than English at home, so the need for cultural sensitivity and awareness is very important (Australian Census 2006).

“Cultural diversity” assumes that every interaction involves a negotiation of values, cultures, assumptions, experiences i.e. all dimensions of diversity. The term “culture” is not just about ethnicity and is inclusive of us all i.e. we all have and belong to a culture. Working with refugee and migrant families requires an understanding of their unique needs, being culturally sensitive and not imposing ethnocentric values.

Central to successful engagement is communication and language services. Many refugees and migrants don't have the language skills to communicate effectively in English and may not be aware that they can ask for an interpreter.

Refugee and migrant families can feel misunderstood if workers see their cultural practices as being inappropriate. This in turn can result in families becoming defensive and resistant to accepting services.

Workers need to beware of making judgments based on their own values and cultural norms. Mislabelling parent behaviour that may be culturally appropriate can cause additional trauma and social harm. On the other hand it is important that workers do not overlook child maltreatment or perceive it to be a normative cultural practice as no culture condones child abuse or neglect. Workers need to remain objective by regularly assessing the child or young person's safety, welfare and wellbeing. Workers should also be mindful of the potential of over-identification with a parent or caregiver.

Differing cultural values and practices, and the worker's understanding of these, can lead to problems for the child, young person, family and worker.

Examples include:

- willingness (or reluctance) to reveal personal information;
- wary or mistrustful response to ‘authority’ figures, including workers;
- a different understanding of the role of government in a family's life;
- body language, especially lack of eye contact (direct eye contact is seen as aggressive in many cultures);
- understanding of what is good parenting and differing roles within families, including expectations and responsibilities placed on children and young people;
- interpretation of what is considered ‘harm’ to a child, noting that behaviours suspected of causing harm should not be minimised or dismissed on cultural grounds.

Refugees from countries where there has been war, civil unrest, abuse of power, torture and victimisation may require particular attention, because of trauma and fear of dealing with governments. In some cases they may also wish to distance themselves from the culture of their country of origin due to their experiences or may revert back to, or adopt, older traditional cultural practices.

## WORKING WITH REFUGEE AND MIGRANT CHILDREN, YOUNG PEOPLE AND FAMILIES

Being culturally competent can greatly assist workers in ensuring responsive, appropriate and equitable outcomes. This requires workers to be aware and acquire necessary knowledge and skills.

Awareness involves the recognition of one's own preconceptions as well as the socio-political issues that confront children, young people and families from refugee and migrant backgrounds.

This requires:

- Acknowledgement of the impact of ethnicity and culture on personal attitudes and value systems;
- Taking those factors into account when working with refugee and migrant children, young people and families;
- Recognising the limits of personal cultural competence and seeking ongoing supervision and/or additional training and expertise from both internal and external sources;
- Understanding the role that culture and ethnicity play in the socio-psychological and economic development of children and young people;
- Recognising that a child or young persons 'culture' is a source of strength and a resource that should be built upon.

*Knowledge* involves the acquisition of factual information about different cultural groups.

Workers should:

- Understand the child, young person or family's community profile, such as their country's history, population, ethnic groups, religion, history of migration and settlement in Australia, traditions, beliefs and attitudes;
- Understand the impact of migration/settlement history and experience upon social/psychological status;
- Research and recognise the roles of family members and social hierarchies, values and beliefs in the client's culture while recognising diversity within cultural groups.

*Skills and Action* involves putting awareness and knowledge into action by making relevant and appropriate decisions to maximise equitable and just outcomes.

Workers should endeavour to:

- Be responsive to contextual variables of nationality, ethnicity, religion, language and of age, gender, place of residence;
- Be able to ask and seek out information from children, young people and families in an open, transparent and respectful way;
- Ensure that cultural competencies are integrated into assessment and work practices.

Practical implications for working with refugee and migrant children, young people and families include:

- Demonstrating awareness of how acculturative stress may underlie or contribute to immigrant's cultural context and challenges in Australia;

- Being aware of and celebrating cultural differences and acknowledging human sameness;
- Being aware of and acknowledging that perceived and actual racism and discrimination can be a significant stressor for refugee and migrant families;
- Remaining mindful of how intergenerational conflict can give rise to challenges such as culture clashes and role reversals between children and their carers;
- Being clear and upfront with refugee and migrant children, young people and families about who you are, the organisation you work for and what your role is;
- Being sensitive to the fact that refugee and migrant children, young people and families will view your role through the lens of their past experiences;
- Helping refugee and migrant families understand the role, practices and policies of your organisation and others that may be involved through an interpreter and where possible, leaving behind information pamphlets in their language;
- Letting refugee and migrant families know that all matters are kept confidential, unless disclosure is required by law;
- Providing translated pamphlets and information about services available in the local community;
- Being responsive to the intonations of refugee and migrant accents and not assuming that a person needs an interpreter;
- Being aware that a person's proficiency with English, where it is learnt as a second language, can deteriorate in stressful situations;
- Recognising that speaking English with broken syntax is not the solution to overcoming language barriers;
- Workers should use a NAATI accredited interpreter, where necessary and possible. A support person should not be used to interpret unless they are NAATI accredited;
- Telephone interpreters are available through the Translating and Interpreting Service and can be accessed nationwide 24 hours a day, 7 days per week on **131 450**

### WORKING COLLABORATIVELY

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Adopting a collaborative, integrated approach is fundamental to engagement in a child wellbeing context.

If there is more than one organisation that needs, or is involved it is important that best endeavours are made to ensure a coordinated approach. This ideally would occur before engagement, as part of the assessment and planning stages.

There also needs to be sufficient flexibility so that organisations can become involved at the various stages, where appropriate.

#### Working collaboratively means:

In the context of engagement, collaboration can mean different things. From a child or young person's perspective collaboration means not just focusing on them, but including their family and wider community and other organisations they may have contact with, where relevant. This approach recognises that the needs of the parents or carers impact on the safety, welfare and wellbeing of the child or young person. It also recognises that

the participation and involvement of the family and community may be integral to achieving desired outcomes.

Collaboration also refers to relevant organisations working together to address the needs of the child or young person and their family. A range of complex and often chronic factors characterise many of the families coming into contact with the child protection system, such as low income, unemployment, substance abuse, limited social supports, imprisonment, domestic violence, and mental health issues. Accordingly, there may be a need for a number of different service supports, provided by a range of organisations and workers.

In addition, this may not be the first time a family has been assessed or received services to address concerns relating to the safety, welfare and wellbeing of their children or young people.

That is why it is so important for organisations to identify other services involved, communicate and work together to address the needs of the family. This should occur at all stages, including assessment, case planning and case management. Organisations also need to acknowledge and learn from previous and current involvement with the child and their family by sharing this learning with other organisations where it can assist.

It is important to collaborate before engaging with the family so as to obtain a holistic view of the family and to avoid a child, young person or their family having to repeat their story. Naturally, this should be balanced with the need for timely intervention and the need to hear firsthand perspectives.

### Working collaboratively may include:

- Identifying other organisations who are working, or have worked with the child or young person or their family;
- Liaising with relevant organisations;
- Sharing information;
- Advising and providing feedback to other workers and organisations that have a responsibility for the child or young person;
- Developing a knowledge of other organisation's policies and practices;
- Advising the child, young person and their family of the collaborative approach;
- Examining opportunities to minimise impact on the child or young person and family and maximise achievement of outcomes, including all aspects of case management (assessment, case planning, implementation, monitoring and review);
- Discussing whether a 'key worker/organisation' is required, who could be the key contact and would be responsible for overseeing the joint approach;
- Considering whether protocols and agreements may maximise effective collaboration;
- Using the dispute resolution model to resolve any interagency differences.



## WHEN ENGAGEMENT IS DIFFICULT OR NOT WORKING

The process of engagement and what works, and what doesn't, will vary because each person and their circumstances are different. Importantly, the way engagement is approached and likelihood of success can be different for voluntary clients compared with involuntary clients.

Workers should note the difference between “failing to engage” and “disengaging”. The former refers to situations where a child, young person or their family appears unwilling to engage with services or is openly opposed to organisational involvement. “Disengagement” refers to situations where a family has engaged but at some stage starts to avoid, or “step-away” from the service, worker or organisation.

Vulnerable children, young people and families may be more receptive to intervention where they have sought assistance or have experienced or witnessed the benefits of receiving a service. Engagement is also easier where the decision to participate has been made by the family.

Working with involuntary clients, such as within the statutory child protection system, can present different challenges that can be overcome through effective communication as the majority of families want to do what is best for their children.

In all cases, it is important to highlight the benefits to children, young people and families of engaging with service providers. If a family can understand the merit of a service, more active engagement may occur. If they feel inadequate, stressed or threatened by the service, or cannot see its practical benefits they are more likely to avoid participating.

There are a variety of reasons for families wanting to avoid a service, poorly engaging with a service, disengaging over time, or refusing a service. Families may also have different responses to different services or change over time in their response to services. Service ‘fatigue’ is not uncommon, particularly in families with complex needs.

Whilst most reasons behind families failing to engage or disengaging from services are innocuous, workers need to be vigilant and actively work with families to overcome barriers.

*Any persistent displays of avoidant, hostile or resistant behaviour should be taken very seriously. Research consistently shows that this behaviour can be a predictive factor for fatal child abuse and neglect (Chance & Scannapieco, 2002).*

*The ‘Beyond Blame’ project in the United Kingdom examined 35 cases where children had died as a result of abuse or neglect and it was noted that there was avoidance of services by parents in over half of the cases (Reder, Duncan & Gray, 1993).*

These deaths suggest that when engaging with vulnerable children, young people and families, it is important that all children and young people in a family are sighted by the worker, and where possible, spoken with, particularly where the worker feels intimidated by a parent who is aggressive, abusive or resistant to organisational involvement.

### Why a family may not want to engage

There can be a number of reasons why a family may not want to engage and it is important that workers are aware of these factors. They include:

- Lack of trust in the ‘system’, the worker or organisation, which could be due to previous bad experiences with government or authority figures;
- No, limited or distorted understanding of what child and young person safety, welfare and wellbeing is and why the organisation is involved;



- Preference to engage in other activities instead of casework driven tasks, particularly if engaging children and young people;
- Logistics of the service including program or activity costs, transport, hours of operation and child care availability;
- Cultural considerations, such as language barriers and lack of confidence in speaking or understanding English fluently;
- Concerns about being stigmatised by a worker or a service;
- Appropriate engagement strategies have not been employed from the outset.

*It is important to be aware that where participation is involuntary, i.e. those engaged in the statutory child protection system; there may be a distinction between compliant behaviour (i.e. going through the motions) and engagement or full participation (Yatchmenoff, 2005).*

### What does a failure to engage or disengaging look like?

Families who display evasive or resistant behaviour can be challenging to work with. Examples of this type of behaviour include:

- Avoiding home visits (often cancelling at the last minute) or not appearing to be home (curtains drawn and not responding to telephone calls or knocks on the door);
- Children failing to attend school or child care;
- Parents not attending appointments, in particular prearranged meetings that involve the assessment of themselves or the children;
- Repeated excuses why the worker cannot see the child or young person, for example “they are at their grandparents” or are “sleeping”.

If a family begins to disengage it may be indicative of a broader issue such as:

- An alcohol or drug misuse relapse;
- Non-compliance with medication or other treatment plan;
- A change in family dynamics;
- A change in life circumstance.

### Methods to improve engagement

There are a number of common strategies that could be used to improve engagement. They include:

- Re-evaluating your engagement strategy and communication techniques;
- Identifying how engagement could be improved, by reflecting on what has not worked and concentrating on what may work;
- Using strengths-based approaches to identify even small signs of positive engagement with a view to building ‘successes’;
- Discussing the issues/concerns with the child, young person and/or family and identifying solutions together;
- Discussing the issues/concerns with your supervisor, manager and/or colleagues;
- Debriefing with your supervisor during supervision.

## CASEWORK

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Casework is a direct service provided by workers to child/ren and families who require support and assistance to resolve issues and overcome barriers. Case work is to be provided in a way that enables family services to meet the Family Service Standards and standards for service delivery.

Casework practice includes:

- Assessment of needs;
- Establishing objectives and goals;
- Development of a child and family action plan;
- Ongoing engagement;
- Ongoing assessment;
- Implementation of the plan;
- Monitoring and review;
- Case closure.

The case worker aims to work with the client to strengthen the client's capacities and ability to deal with issues and to cope more effectively in their own environment by offering support and education, problem solving, advocacy etc.

It is the case workers responsibility to arrange dates and times to meet with the families on their case allocation list. The dates and times need to be mutually agreeable and based on the needs of the child/ren and family. Some clients require more intensive support whilst others may require less intensive monitoring for a short period prior to closure.

The level of direct contact will vary depending on the service being provided which may include in-home support, office visits, phone calls, letters, etc.

Case work operates as a cyclical process of goal setting, intervention, monitoring and reassessment in response to the changing needs of children, young people and their families.

## EVALUATION

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Evaluation should be client centred and an ongoing process from the beginning of the case management process to the end.

Evaluation that comes at the end of a process is often too late.

How does a client benefit when, at the end of the case management process, we say it didn't work?

Ongoing evaluation is much more positive. It helps both client and worker to learn from what they are doing, celebrate what has been going well and correct what has been going poorly.

If the evaluation process is implemented from the start you will at some point develop an evaluative sense. That is, some part of you will always be monitoring your interactions with clients in an unobtrusive and constructive way.