### ACCAN Tiaki 2015

14th Australasian Conference on Child Abuse and Neglect

Aotearoa/New Zealand

Cultural responsiveness in a multi-agency world





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#### **WELCOME**



#### Kia ora koutou!

Welcome to the 14th Australasian Conference on Child Abuse and Neglect (ACCAN 2015), organised by the Australian Institute of Criminology in partnership with the New Zealand Ministry of Social Development. ACCAN is held on a biennial basis in centres around Australasia.

The over-arching theme of this year's Conference is Cultural responsiveness in a multi-agency world. This recognises the complexities of child abuse and neglect and the need to engage across sectors, agencies and professions to best prevent and address child maltreatment. Equally importantly, current systems to address child abuse and neglect must evolve further to work effectively and in culturally responsive ways with Indigenous people and those of other culturally and linguistically diverse backgrounds.

In the case of Aotearoa New Zealand, and Australia, that means developing more effective and cultually responsive practices when working with Tangata Whenua (people of the land), and Aboriginal and Torres Straits Islander people.

As you will see and hear, ACCAN 2015 provides a contemporary conversation between practitioners, researchers, policy makers and others from New Zealand, Australia and internationally. The presentations incorporated into the program reflect the willingness of more

than 200 presenters to discuss cross-disciplinary and cross-agency engagement to promote child and family wellbeing, and to effectively ensure the protection of vulnerable and maltreated children.

The Conference will examine and discuss effective child abuse prevention systems and explore innovations in prevention and intervention – from community-based, community-led programs to Indigenous initiatives and practices, therapeutic health and family interventions, statutory child protection services and criminal justice responses.

There is a focus on the development of a 'shared understanding' between those of different professional backgrounds, cultures and geographical locations, and identifying approaches and solutions that may be adapted and used across different communities. We are sure you will leave ACCAN inspired, better informed, and considering new ideas as they relate to your research or practice.

The organisers of ACCAN would like to thank all the contributors to the development of this event and we invite you to enjoy a warm Aotearoa New Zealand welcome and a fulfilling and stimulating conference.

Ngā mihi nui

#### **Dr Adam Tomison**

Director, Australian Institute of Criminology
Executive Councillor, International Society for
the Prevention of Child Abuse and Neglect
Board Director, National Association for the
Prevention of Child Abuse and Neglect
White Ribbon Ambassador

#### **Paul Nixon**

Chief Social Worker
Child Youth and Family
Ministry of Social Development
Aotearoa New Zealand

# ACCAN Tiaki 2015

#### Tiaki

The Māori concept of Tiaki, in this context inferring Tiaki Mokopuna, has been chosen as a symbol for this conference.

Tiaki Mokopuna is a Tangata Whenua (Māori) indigenous cultural principle that asserts the collective roles, responsibilities and obligations to care for, make safe, protect and support our children and young people within healthy families (Eruera, King, Ruwhiu et. al, 2006).

The principle is founded in customary beliefs and when applied within the whānau (family) context, has the transformative potential to guide and strengthen strategies for ensuring the care and safety of our children and young people.

A rectangular shape has been used to provide a borderline for the kupu (word) Tiaki. The rectangle is a familiar and trusted shape, suggesting stability and honesty. From a Māori cultural perspective the rectangular shape Tapawhā (four sides) also aligns with a wellbeing framework for Māori health called Te Whare Tapawhā – the four sides of a house (Durie, 1994).

In relation to Tiaki Mokopuna, it is all four sides or dimensions of their wellbeing that need addressing – their family dynamics, physical, mental and spiritual needs – in order for them to flourish.

#### About the AIC

The Australian Institute of Criminology (AIC) is Australia's national research and knowledge centre on crime and justice. Founded over 40 years ago, the Institute seeks to promote justice and reduce crime by conducting and funding criminological research, generating a crime and justice evidence base and disseminating research findings to inform policy and practice.

www.aic.gov.au

#### About the New Zealand Ministry of Social Development

The Ministry of Social Development (MSD) is New Zealand's largest government department with over 10,000 staff serving communities nationwide.

#### MSD provide:

- care and protection of vulnerable children and young people
- income support and superannuation services
- community funding
- social policy
- student allowances and loans
- social housing services.

MSD work closely with other agencies, advisory and industry groups, communities and iwi to make a positive and lasting difference in the lives of New Zealanders.

www.msd.govt.nz

## SCIENTIFIC PROGRAM COMMITTEE



The Scientific Program of the Conference was designed to meet the specific needs of the Australasian child protection sector. The Program incorporates presentations, symposiums and workshops across a diverse range of areas including child protection service responses, policing and the courts, health and welfare therapeutic interventions, emerging issues in child abuse and neglect, and child protection policy and practice reform.

**Dr Adam Tomison** (Co-chair), Director, Australian Institute of Criminology

**Paul Nixon** (Co-chair), Chief Social Worker, Child, Youth and Family New Zealand

**Prof Fiona Arney**, Director, Australian Centre for Child Protection, University of South Australia

**A/Prof Nicola Atwool**, Department of Sociology, Gender and Social Work, University of Otago New Zealand

**Hayley Boxall**, Senior Research Analyst, Australian Institute of Criminology

**Rawiri Brell**, Deputy Secretary Early Learning, Parents and Whānau, Ministry of Education New Zealand

**Denise Fox-Evatt**, Practice Leader, Child, Youth and Family New Zealand

**Dr Patrick Kelly**, Paediatrician, Starship Hospital New Zealand

**A/Prof Ian Lambie**, School of Psychology, University of Auckland New Zealand

**Prof Morag McArthur**, Director, Institute for Child Protection Studies, Australian Catholic University

**Annette Michaux**, Director, Social Policy and Strategy, Parenting Research Centre

**Mike Munnelly**, General Manager Child and Family Services, Barnardos New Zealand

**Julian Pocock**, Director, Public Policy, Berry St Victoria

**Dr Shanti Raman**, Community Paediatrician, South Western Sydney Local Health District; Consultant Community Paediatrician; Maari Ma Health Aboriginal Corporation Broken Hill; Senior Lecturer University of New South Wales and University of Sydney

**Dr Leland Ruwhiu**, Principal Advisor Māori, Child, Youth and Family New Zealand

**Teresa Scott**, President, National Assoc for the Prevention of Child Abuse and Neglect (NAPCAN), Lecturer, School of Human Services and Social Work, Griffith University

A/Prof Rosemary Sheehan AM, Co-ordinator, Higher Degrees by Research Programme, Department of Social Work, Faculty of Medicine, Nursing and Health Sciences, Monash University

**Dr Stephanie Taplin**, Associate Director, ACU Institute of Child Protection Studies

**Patrick Tidmarsh**, Specialist Forensic Interview Advisor, Specialist Development Unit - Sexual Offences and Child Abuse Investigations Teams, Victoria Police

**Prof Clare Tilbury**, Life Without Barriers Carol Peltola Research Chair, School of Human Services and Social Work, Griffith University

**Superintendent David Trappitt**, Assistant Commissioner Prevention (Acting), New Zealand Police

**Dr Russell Wills**, New Zealand Children's Commissioner; Paediatrician, Hawke's Bay District Health Board

#### Welcome

#### from the Vulnerable Children's Board

Tēnā koutou katoa, welcome to Aotearoa New Zealand and the 14th Australasian Conference on Child Abuse and Neglect

We are very pleased to be partnering with the Australian Institute of Criminology to host ACCAN 2015.

The conference theme is 'Cultural responsiveness in a multi-agency world'. As Chair of the Vulnerable Children's Board and Chief Executive of the Ministry of Social Development, I believe this captures perfectly the current and future direction of child protection services in this country.

On 1 July last year, the New Zealand Government passed the Vulnerable Children Act 2014 into law.

This was the most significant reform to child protection and the prevention of abuse and neglect since the 1989 Children, Young Persons and Their Families Act.

The new Act recognises that one agency cannot be solely responsible for meeting the many and complex needs of at-risk children and young people.

What is significant about this piece of legislation is that shared responsibility and collaborative action across the government social services sector in New Zealand has been passed into law. It also provides a solid platform of accountability and monitoring never before seen in social welfare in this country.

The Vulnerable Children's Board is made up of Chief Executives from the Ministries of Social Development, Health, Education, Justice, Police, Business, Innovation and Employment, and Te Puni Kökiri.

All are tasked with creating an environment where staff are encouraged and empowered to work across multiple agencies. This includes sharing information, working together to engage with children and their families from all cultures, and contributing to children's safety and wellbeing in ways that haven't happened before.

The Act also signals a real shift in the way we understand and respond to the needs of children, young people and their families/whānau.

It acknowledges the whole child. It recognises the need to know and understand what daily life is like for every child we are involved with - things like who they live with, what their culture is, how they're doing at school and what their worries, dreams and aspirations are. It also acknowledges the key role whānau, hapū and iwi play in children's wellbeing.

It is only when we know a child in this way that we can provide targeted services to meet their often many and complex needs.

Multi-agency work has begun, but we still have a way to go. It will take involvement across government, NGOs and the community, working together, to make a difference.

I'm very pleased to welcome you here to discuss how we can all contribute to creating a bright, safe future for our children.

Ngā mihi nui Brendan Boyle Chief Executive Ministry of Social Development Chair of the Vulnerable Children's Board

New Zealand Government



#### **KEYNOTE SPEAKERS**

Address: Vaaifetu – guardianship of stars – our children, families and practitioners. Pacific practices of vaaifetu in health and statutory social work (Co-Presenter)



Dr Teuila Percival (NZ), Consultant Paediatrician, KidzFirst Children's Hospital

Sunday 29 March 5:45 pm - 6:15 pm



Dr Teuila Percival is a Consultant Paediatrician working at KidzFirst Children's Hospital. She is also a Senior Lecturer and Director of Pacific Health at the School of Population Health, University of Auckland.

Dr Percival has particular interests in child health, child abuse and neglect, Pacific people's health and inequalities. Her clinical work includes general paediatrics and child protection. Dr Percival's research projects include Pacific child obesity treatment, traditional Pacific pathways to sexual violence prevention, Pacific children with disabilities and the development of digital storytelling to promote health in the Pacific.

In addition to clinical and University work, she has worked in the community for over a decade and is currently Chair of South Seas Healthcare Trust and a trustee of Alliance Health Plus. She set up South Seas Kids, the first comprehensive Pacific Well Child service in New Zealand and Kids-In Action, one of the first community based child obesity programs in Auckland. She is Director of TAHA, the Pacific Well Mother and Infant Service.

Dr Percival also works extensively in the Pacific region. She led the Pacific Child Health Indicator Project which focused on measuring progress in maternal and child health in the Pacific Islands. She has also undertaken project work in Climate Change and Health in Tuvalu, Tonga, Samoa and Niue.

Dr Percival is Samoan, a mother of three and grandmother of one. She is married to John McEnteer, of Ngāti Maru Hauraki.

# Address: Vaaifetu – guardianship of stars – our children, families and practitioners. Pacific practices of vaaifetu in health and statutory social work (Co-Presenter)



Karanina Sumeo (NZ), Principal Pacific Advisor, Child, Youth and Family

Sunday 29 March 5:45 pm - 6:15 pm



Karanina Sumeo is the Principal Pacific Advisor to Child, Youth and Family at the Ministry of Social Development (New Zealand). She has a public sector background in education, health and children protection, in policy, contract management and as a social work practitioner.

She has been a research consultant on projects in the Pacific on human rights and the impact of the global financial crisis.

Karanina has also sat on boards for the Auckland Restorative Justice Trust and the Fountain of Knowledge Trust in relation to services in restorative justice and early childhood education. Karanina is a present board member of the SAFE Network Inc which works with sexual offenders in Aotearoa New Zealand.

Karanina is the proud mother of two daughters and a son of Samoan, Irish and New Zealand descent.

### Address: Exercising care: Families, risk and responsibility





Professor Kate Morris (UK), Director, Centre for Social Work, University of Nottingham

Monday 30 March 10:00 am - 11:00 am

Professor Kate Morris is a qualified social worker who worked extensively in care and protection before moving into social work education and research. She was a founder member of the group that developed the use of family decision making in the UK, and has continued to research and write about family participation.

In 2009 she led the literature review that informed the UK government's 'Think Family' policy stream and in 2012 led a unique study of family involvement in serious case reviews.

She is currently working with the Family Rights Group and Professor Brid Featherstone to develop a new alliance between families and practitioners that seeks to challenge and change policy and practice responses to highly vulnerable families.

Kate is chair of the UK Social Work Education Committee and sits on the Professional Assembly of the College of Social Work.

## Address: Nā Te Rauroha, nā Te Rangiātea i tuku iho ... Tiaki mokopuna Actioning Transformative States of Māori Child Welfare in New Zealand (Co-Presenter)



Moana Eruera (NZ), Principal Advisor Māori, Child, Youth and Family

Monday 30 March 1:45 pm - 2:45 pm

Moana Eruera, M. Phil (Social Work), Registered Social Worker NZ, MANZASW, Tangata Whenua Social Worker Association (TWASWA)

He uri tenei nō Ngāpuhi nui tonu, nō Ngāti Ruanui, nō Ngāti Rangiwewehi.

Moana has more than 25 years experience in social and community work and iwi projects. She has published a number of articles and reports on Indigenous social work and research. Her working career and vision has been spent committed to mokopuna/child safety and wellbeing, social work and social justice, human rights and the development of Māori and Indigenous people.

Moana is of Ngāpuhi, Ngāti Ruanui, Ngāti Rangiwewehi whakapapa and Scottish/Irish descent lines. She is the eldest of three girls, proud mother of two boys (and many other whānau she cares for) an active member of her whānau, hapū and iwi.



## Address: Nā Te Rauroha, nā Te Rangiātea i tuku iho ... Tiaki mokopuna Actioning Transformative States of Māori Child Welfare in New Zealand (Co-Presenter)



Dr Leland A Ruwhiu (NZ), Principal Advisor Māori, Child, Youth and Family

Monday 30 March 1:45 pm - 2:45 pm

Dr Leland A Ruwhiu, PhD. Social Policy & Social Work, BSW (Hons), MANZASW, Registered Social Worker New Zealand, foundation member of Tangata Whenua Social Worker Association (TWASWA) & Tangata Whenua Voices in Social Work (TWVISW).

He whakairo whakapapa o ngā iwi – Ngāpuhi, Ngāti Porou, Ngāti Kahungūnu, Ngāi Tahu ki Mohaka.

31 years of carving out a critical voice for Indigenous social work in Aotearoa, has been balanced by raising a whānau and maintaining a lived experience in all aspects of wellbeing – a theorist, a poet, a writer/researcher, innovator, a thinker and most of all a practitioner.

Leland is of Ngāpuhi, Ngāti Porou, Ngāti Kahungūnu and Ngāi Tahu ki Mohaka iwi/tribal descent. He is the eldest son of Pirihi Te Ohaki Ruwhiu and Waikaraka Emily (nee Pere). Married to Nicky Haeata-Ruwhiu – parents to five sons, one daughter. Koro/Kuia to five mokopuna.

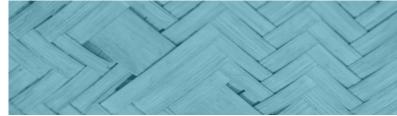


#### Address: Child-centred multi-agency practice: Challenges for change (Co-Presenter)



Dr Patrick Kelly (NZ), University of Auckland and Clinical Director of Te Pugruruhau

Monday 30 March 2:45 pm - 3:45 pm



Dr Patrick Kelly is a Paediatrician, a Clinical Senior Lecturer in the Faculty of Medical and Health Sciences at the University of Auckland and Clinical Director of Te Puaruruhau (the Auckland District Health Board Child Protection Team). This is based in Puawaitahi, Australasia's first multi-agency child advocacy centre. Dr Kelly has been involved in multi-disciplinary child protection practice, service development, teaching and research for 20 years.

Dr Kelly was Chair of the Child Protection Special Interest Group of the Paediatric Society of New Zealand for 13 years, and was a founding member of the National Child Mortality Review Committee and the Family Violence Death Review Committee.

### Address: Child-centred multi-agency practice: Challenges for change (Co-Presenter)





Nicola Atwool (NZ), Associate Professor, University of Otago

Monday 30 March 2:45 pm - 3:45 pm

Nicola Atwool is an Associate Professor in the social work program at the University of Otago. Prior to her return at the beginning of 2012 she spent six years as a Principal Advisor in the Office of the Children's Commissioner. She previously worked at the University of Otago as a lecturer and senior lecturer in the social work program from 1994 to 2005. Nicola has also maintained a close relationship with the Children's Issues Centre during her time at the University.

Nicola has professional qualifications in social work and child and adolescent psychotherapy and was employed in a variety of roles by what is now Child, Youth and Family for nearly 20 years before taking up an academic position. Her research interests include the social construction of childhood and adolescence, attachment theory, resilience, the impact of trauma on children and young people, the experience of children in care and social work intervention with children, young people and their families.

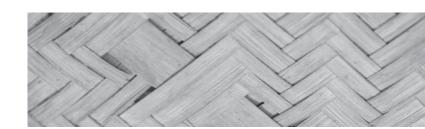
Nicola is committed to bridging the worlds of academia, policy and practice.



Justice Peter McClellan AM (AUS), Chair of the Royal Commission into Institutional Responses to Child Sexual Abuse

Tuesday 31 March 9:30 am - 10:30 am

Justice Peter McClellan AM is a Judge of Appeal in New South Wales. Prior to this, Justice McClellan was the Chief Judge at Common Law of the Supreme Court of New South Wales, having been appointed to that position in 2005. Before that appointment, he held judicial and other appointments including Judge of the Supreme Court of New South Wales, Chief Judge of the Land and Environment Court of New South Wales, Chairman of the Sydney Water Inquiry and Assistant Commissioner at the Independent Commission Against Corruption. Justice McClellan was admitted to practice law in 1974 and appointed Queen's Counsel in 1985. Justice McClellan became a Member of the Order of Australia (AM) in 2011 for services to the judiciary through the Supreme Court of NSW, to environmental law, and to legal education.



### Address: Lessons from the Long Run: Lessons learned in the 25 year LONGSCAN study



Dr Desmond Runyan (US), Executive Director, Kempe Center

Tuesday 31 March 1:15 pm - 2:15 pm

Dr Desmond Runyan is the Jack and Viki Thompson Professor of Paediatrics at the University of Colorado and Executive Director of The Kempe Center for the Prevention and Treatment of Child Abuse and Neglect. He joined the Colorado faculty in 2011 after 32 years at the University of North Carolina.

Dr Runyan served as Chair of Social Medicine from 1999 to 2007. He completed his MD degree and a pediatric residency at the University of Minnesota and a doctorate in public health at the Robert Wood Johnson Clinical Scholars Program at the University of North Carolina.

Dr Runyan has researched child abuse for over 30 years while maintaining a clinical practice evaluating possible child abuse victims. He co-founded a comprehensive child abuse centre and has been appointed to the initial new sub-board of child abuse pediatrics at the American Board of Pediatrics.

Dr Runyan's research has addressed the identification and consequences of child abuse and neglect including specific patterns of abuse such as shaken baby syndrome and Munchausen Syndrome By Proxy.

In 1989 he began the longest multi-site prospective study of the consequences of child abuse; LONGSCAN is now 21 years old. This is a prospective study of 1354 children in five states who either were reported for maltreatment or who were judged to be at very high risk of maltreatment.

Dr Runyan has worked with International Clinical Epidemiology Network medical school faculty in Egypt, India, the Philippines, Brazil, and Chile to increase child abuse knowledge among medical schools internationally. With collaboration for Drs Adam Zolotor at UNC, Michael Dunne at the Queensland University of Technology, and 120 other scientists from 40 countries, a new set of instruments has been developed to measure child abuse and neglect.



### Address: Hard-earned lessons: The history and future of child protection in New Zealand



Dr Russell Wills (NZ), Children's Commissioner

Wednesday 1 April 9:10 am - 10:10 am



Dr Russell Wills is a community and general paediatrician at Hawke's Bay District Health Board in Hastings and was appointed as Children's Commissioner in July 2011.

He trained in medicine in Otago and did his paediatric training in Hampshire and Australia including community paediatric training and a Master of Public Health degree in Brisbane.

Russell was National Paediatrician for Plunket, a Senior Lecturer at the Wellington School of Medicine and a Community Paediatrician at Wellington Hospital from 1999–2001. He has been a general and community paediatrician at Hawke's Bay Hospital in Hastings since August 2001, recently as Head of Department and Clinical Director until taking up the current appointment.

Russell has led a number of programs in family violence intervention and intersectoral community interventions for children and young people. He has held leadership roles in community paediatrics with the Paediatric Society of New Zealand and the Royal Australasian College of Physicians, and has contributed to publications, national guidelines and projects on autism, family violence, child abuse and medical aspects of children in Child, Youth and Family care.

He lives in Hawke's Bay and is married with two adolescent sons.

#### **HIGHLIGHT EVENTS**

#### Mihi Whakatau - Sunday

A brief informal welcome to open the session, ensure our visitors are settled, and acknowledge key dignitaries who are present.

Date: Sunday 29 March Time: 1:15 pm – 1:30 pm Venue: Pre-Function Room

Please refrain from eating or drinking during the mihi whakatau.

#### Conference Opening – Sunday

Address from His Excellency, Lt Gen The Rt Hon Sir Jerry Mateparae, Governor-General of New Zealand

**Date:** Sunday 29 March **Time:** 5:15 pm – 5:45 pm **Venue:** Rendezvous Ballroom

#### Pacific Session – Sunday

Date: Sunday 29 March Time: 5:45 pm – 6:15 pm Venue: Rendezvous Ballroom

#### Conference Reception

- Sunday

**Date:** Sunday 29 March **Time:** 6:15 pm – 8:00 pm **Venue:** Pre-Function Room and Tasman Ballroom



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A AOTEARDA

#### Pōwhiri – Monday

A formal welcome for all visitors to the conference. This welcome is more structured than the mihi whakatau. As a visitor, you will congregate outside of the main conference hall to be collectively led in to the room. You will be guided through the powhiri by local staff who will be able to answer any questions you have.

Date: Monday 30 March
Time: 8:45 am – 9:45 am
Venue: Rendezvous Ballroom

Please ensure you are congregated outside the

Rendezvous Ballroom by 8:40am.



# Munashe

#### **Networking Reception** – Monday

Join us after the concluding sessions on day two to relax and network after a long day. Be entertained by West Auckland artist, Munashe. Munashe is a young Zimbabwean lyricist and producer who has already released his first record, opened for New Zealand reggae legends Katchafire and released his debut mixtape 1st Impression.

**Date:** Monday 30 March **Time:** 5:45 pm – 8:00 pm **Venue:** Atrium Lounge

#### Social Program – Tuesday

A varied social program for the Tuesday night (31 March) has been organised so that conference delegates can experience some Auckland magic.

#### Including:

Waiheke Wine Tour and Dinner Auckland City Harbour Cruise and Dinner New Zealand Cultural Experience

**Date:** Tuesday 31 March **Time:** 6:00 pm – open end

Venue: Various

(for delegates who have already

registered online)

#### Whakawātea – Wednesday

A brief process to conclude the conference and allow the acknowledgement of conference delegates, speakers, organisers and others.

Date: Wednesday 1 April Time: 3:30 pm – 4:00 pm Venue: Rendezvous Ballroom

#### **GENERAL INFORMATION**



#### Banking

The following branches are located closest to the hotel.

AN7

270 Queen Street, Auckland 1010

Westpac

229 Queen St, Auckland, 1010

There are several ATMs located within walking distance to the hotel.

#### **Business** centre

The Rendezvous Business Centre features five meeting spaces which include three boardrooms for 10 people and two boardrooms for four people. These rooms can be hired for the full day or on an hourly basis.

#### Car parking

The Rendezvous Hotel Self Car Park entrance is located off Mayoral Drive, next to the left of the main hotel driveway. Cost of self-parking for guests staying in house is NZ\$20.00 & valet parking is available for a fee of NZ\$40.00. The conference rate for delegates not staying in house is NZ\$15.00.

Nearby parking options include Civic Car Park across the road (299 Queen Street, entry at Greys Ave and Mayoral Drive) and Wilson Parking (89 Greys Avenue, near Mayoral drive corner).

#### Catering

Afternoon tea will be provided on the Sunday in the Pre-Function Room.

Morning, afternoon tea and lunch will be served from Monday to Wednesday to registered conference delegates only in the Atrium and Pre-Function Rooms.

Seating will be available in the Straits Cafe which is located in the lobby.

Canapés will be served to registered delegates during the Conference Reception on Sunday and the Networking Reception on Monday.

#### Concierge

The concierge is located at hotel reception and reception staff will be happy to help with your enquiries.

#### Dietary requests

Vegetarian, gluten free and dairy free meals will be provided for delegates who requested them in their registration. The meals will be made available in the main areas. Please see the waiting staff if you have any queries about the food provided.

#### **Dress**

Smart casual/business attire is suggested for conference sessions and social functions. As conference rooms may vary in temperature, it is advised you wear layers for comfort.

# ACCAN Tiaki 2015

#### Internet access

Free wireless internet access is provided for the duration of the conference. Delegates will be given a wireless code on site.

#### Liability disclaimer

In the event of industrial disruption or other unforeseen circumstances, the conference organisers accept no responsibility for loss of monies incurred by delegates. The organising committee and conference organisers accept no liability for injuries, losses of whatever nature incurred by participants and/or accompanying persons, nor for loss or damage to their luggage and/or personal belongings.

#### Luggage storage

Facilities for luggage storage will be made available on Wednesday 1 April. Please do not take luggage into the session rooms. Please note that the organisers do not accept any responsibility for luggage left in storage.

#### Name badges

Please wear your name badges at all times. Your name badge will provide access to all conference sessions and conference catering.

#### No smoking policy

Delegates should be aware that smoking is not allowed in public buildings and many hotels and restaurants throughout New Zealand, including the conference venue.

#### Photography

A photographer will be present throughout the conference taking photos of delegates and speakers. Please make yourself known to registration if you do not agree to have your photo used.

#### Poster displays

Poster presentations will be on display for the duration of the conference. Please refer to the program for a list of posters. A poster session will be held during lunch on Tuesday to ask authors questions.

#### Registration desk opening hours

The registration and information desk opening hours are as follows:

Pre-Function Room

 Sunday 29 March
 12:30 pm - 6:00 pm

 Monday 30 March
 7:30 am - 5:30 pm

 Tuesday 31 March
 7:00 am - 5:00 pm

 Wednesday 1 April
 7:00 am - 3:00 pm

#### **GENERAL INFORMATION**



#### Session recording

All keynote speakers (that provide approval) will be professionally recorded. The sessions will be available on CriminologyTV (www. youtube.com/criminologyTV) after the conference.

#### Social media

The below twitter hash-tag and handle will be used during the ACCAN 2015 conference. #ACCAN 2015 @AlCriminology

#### Speakers' preparation

The speakers' preparation room is located in the Boardroom and will be open during the following times:

 Sunday
 1:00 pm - 4:30 pm

 Monday
 8:30 am - 5:30 pm

 Tuesday
 7:00 am - 5:00 pm

 Wednesday
 7:00 am - 2:00 pm

The speakers' preparation room will be available for all presenters to provide USBs with their presentations to the AV technicians. Please ensure you arrive at the speakers' preparation room no later than 30 minutes prior to your session.

Macbooks: Presentations created on a Macbook are not compatible with PC laptops or Microsoft PowerPoint, however should you wish to provide your own Macbook, direct connection into the projection system is possible. If you do intend to bring your own Macbook please ensure you let the conference organiser know in advance and supply your mac–VGA adaptor. You will also

need to check in at speakers' preparation as per the above instructions.

Video Presentations: Should you wish to play any videos during your presentation please ensure you check in at the speakers' preparation room with your video on USB, with plenty of time, so they can be tested. This includes any videos embedded in the PowerPoint presentation.

Web Based Presentations including Prezi: Should you wish to use Prezi or any other web based presentation it is essential you let speakers' preparation technician know. If you are using Prezi please ensure you supply the downloaded app version of your presentation upon arrival to the speakers' preparation room.

\*\*\*The AIC would like to place your presentation on our website after the conference. Please let the technician at speakers' preparation know if you DO NOT give permission, and it will be deleted from the system at the conclusion of the conference. \*\*\*

#### **Transport**

#### **Buses**

The LINK bus services operate:

Mon to Fri: Every 10–15 mins from 6:30 am to 11:00 pm

Saturdays: Every 15 minutes from 6:30 am to 11:00 pm

Sundays & public holidays: Every 15 minutes from 7:00 am to 11:00 pm

Cost: Approximately NZ\$2.00 cash fare for travel within the City LINK and Inner LINK or purchase an AT HOP prepaid card.

# ACCAN Tiaki 2015

Airport express buses to and from the city centre run often and prices start from NZ\$16. The nearest station to the hotel is located on Queen Street near Auckland Town Hall. Travel time between the city and airport takes between 45 minutes and an hour. Please allow extra time for travel during peak times.

More information can be found on the https://at.govt.nz/bus-train-ferry/ website.

#### **Taxis**

The hotel is able to order you a taxi upon request; however you can also catch a taxi from designated taxi ranks, the closest one to the hotel operates at all times and is located at 100 Mayoral Drive.

A taxi from the hotel into the airport will cost between NZ\$50 to NZ\$100 and get you there within one hour depending on the traffic.

Taxi fares are calculated according to the distance and duration of the journey, and will vary based on the number of people and time of travel. Additional charges apply if you travel on some public holidays, late at night, travel with five or more people or pay with credit or debit card.

#### Connect with the AIC and stay up-to-date during the event.



flickr

flickr.com/photos/aicriminology

facebook.com/australianinstituteofcriminology



You Tube

youtube.com/criminologyTV



au.linkedin.com/company/australian-institute-of-criminology

#### **VENUE**



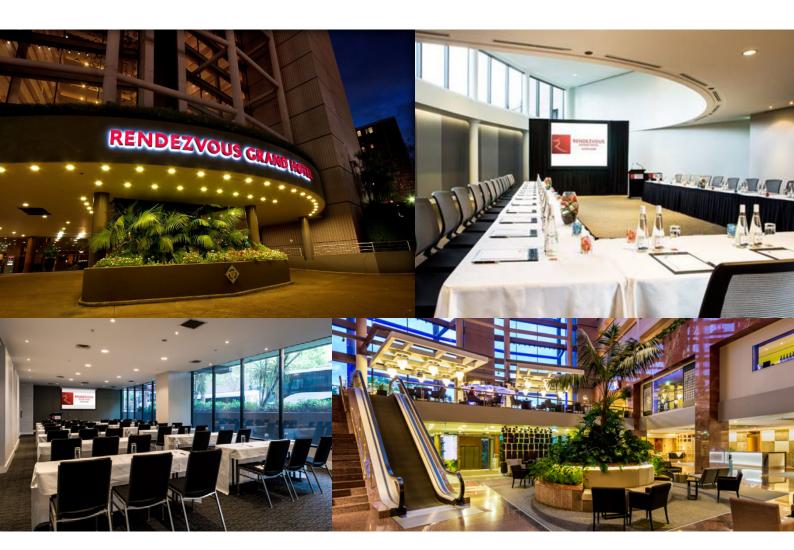
#### Rendezvous Hotel Auckland

The Rendezvous Hotel Auckland is conveniently located in the centre of the city close to Viaduct Harbour and some of New Zealand's finest dining, shopping and entertainment venues. Auckland Airport is only 30–45 minutes by taxi from Rendezvous Hotel, and public transport is easily accessible from the hotel. There is an on-site taxi rank to help you get to where you are going in a hurry, and undercover parking is available for hotel guests.

#### Address:

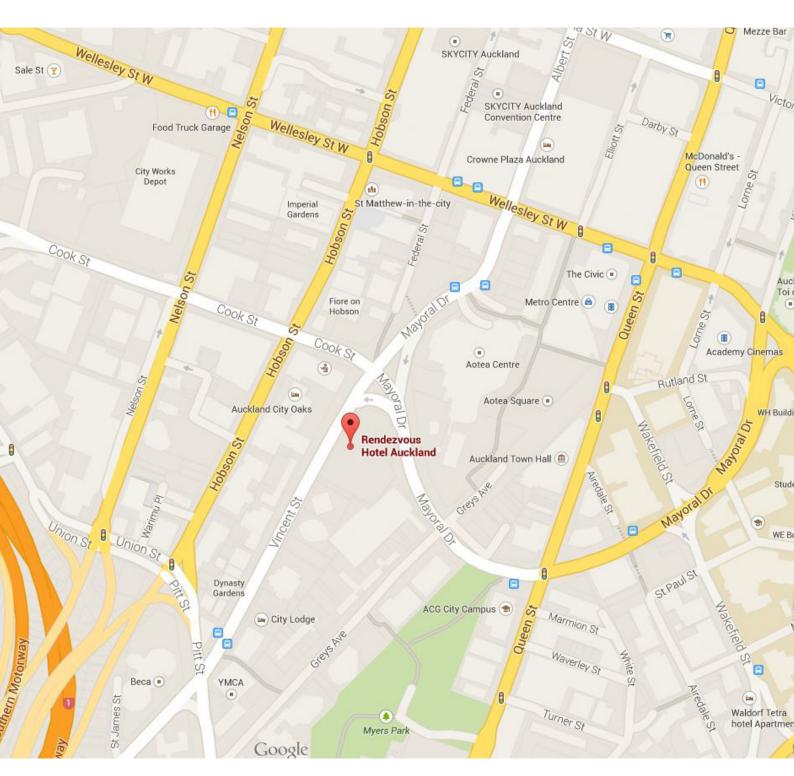
Rendezvous Hotel Auckland 71 Mayoral Drive, Cnr Vincent Street Auckland 1010 NEW ZEALAND

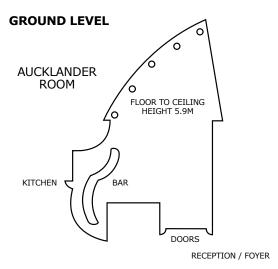
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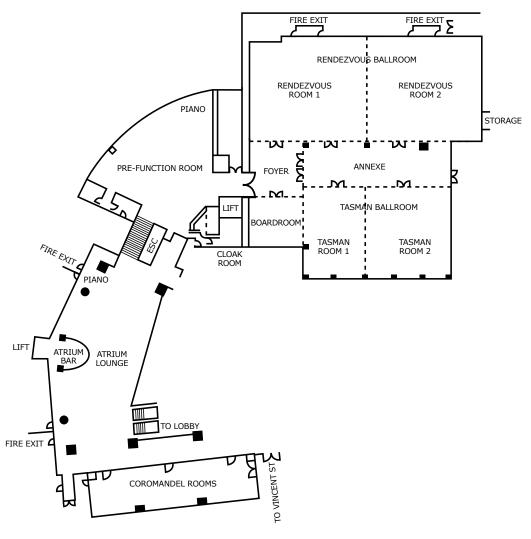
# ACCAN Tiaki 2015

#### Area map

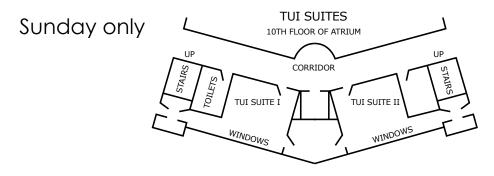




**LEVEL 1** 



**LEVEL 10** 



## listen to those often not given a voice:

## Children, young people, vulnerable families and disadvantaged communities.

Including the voices of vulnerable people in research about issues affecting them is both crucial and valuable. It can also be challenging, and needs to be undertaken appropriately and with sensitivity.

The Institute of Child Protection Studies engages directly with children, young people, families and communities, to conduct research about issues that affect them.

We use specially designed tools and mixed-methods strategies to directly access the views of hard-to-reach children, families and communities, who are active participants throughout our research process:

planning and design, implementation, analysis and presentation.



Examples of our current projects include contact between children in out-of-home care and their birth parents; how children experience safety in institutions; and refugee communities and social connectedness.

We welcome opportunities to collaborate.

#### www.acu.edu.au/icps

The Institute of Child Protection Studies is part of the Learning Sciences Institute Australia, in the Faculty of Education and Arts, Australian Catholic University.







# ACCAN Program 2015

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Sunday

Sunday, 29 March 2015	arch 2015	Rendezvous 1	Rendezvous 2	Tasman Room 1	Tasman Room 2	Tui Suite 2 (10th Floor)	Aucklander Room (Ground Level)
12:30 pm - 1:15 pm	Conference Regi	Conference Registration (Pre-Function Room)					
1:15 pm - 1:30 pm	Welcome for Sun	Welcome for Sunday delegates: Mihi Whakatau (Pre-Function Room)	au (Pre-Function Room)				
		Supporting siblings	Whole of community approaches			Preventing child sexual abuse	
		Paper	Paper	Workshop	Workshop	Paper	Workshop
1:30 pm - 2:00 pm	Presentations	Communities of care: Supporting siblings <b>Tracie Shipton</b> , Dingwall Trust	Safeguarding children: Every day matters, empowering a whole community Willow Duffy, Safeguarding Children Initiative (SCI)			Sexual violence prevention education: Some messages from research  Dr Eileen Oak, Massey University	
		Paper	Paper	:		Paper	
2:00 pm - 2:30 pm	Presentations	Giving sorrow words: The experience of siblings separated in care  Trish McCluskey, Berry  Street	E Tu Whānau: Inspiring positive change, creating a different future for our tamariki and mokopuna Darrin Haimona, Māori Reference Group on Family Violence	Office of the Children's Commissioner's Monitoring Framework: Taking a child-centred approach to assessing the quality of social work practice within Child,	Care and protection from an immigrant and refugee perspective	Professional recommendations for prevention approaches to child sexual abuse prevention in Australia <b>Dr Georgia Babatsikos</b> , Deakin University	What are we are all worried about and why we all have a part to play
		Paper	Paper	and residences	& Multicultural Consultant	Paper	Kay, Child, Youth and Family
2:30 pm - 3:00 pm	Presentations	Hoki ki te Rito - Oranga Whānau: Supporting whānau relationships <b>Lynaire Doherty</b> , Ohomairangi Trust	Best practice models for programmes to promote positive parenting and prevent family violence within culturally and linguistically diverse communities in New Zealand Jennifer Janif. Community Investment, Ministry of Social Development	Liz Milley, sadar naywara & Awhina Buchanan, Office of the Children's Commissioner		Holistic approaches to child sexual abuse: Trends and needs <b>Dr Georgia Babatsikos</b> , Deakin University	
3:00 pm - 3:30 pm	Afternoon Tea (P	Affernoon Tea (Pre-Function Room)					

		Working effectively with children	Innovations in culturally secure practice			Statutory child protection practice	
		Paper	Paper	Symposia	Workshop	Paper	Workshop
3:30 pm - 4:00 pm	Presentations	'Can you hear me?': How a holistic and culturally responsive approach incorporates the voice of children who have a disability and/or mental health issue  Susanne Llopis, Community Living	Whānau Ora: A new joumey Merepeka Raukawa- Tait,Te Pou Matakana	Achieving change: Evolution of a multi- agency response to child protection and family violence Miranda Ritchle, Health Networks Ltd; Kati Wilson, Auckland District Health	Trauma informed multi-	Practice First  Kate Alexander, NSW  Department of Family and  Community Services	
		Paper	Paper	Board; <b>Dr Patrick Kelly</b> , Starship Children's	Learnings for professionals	Paper	Engaging with children and
4:00 pm - 4:30 pm	Presentations	Ensuring the best fit: Therapeutic intervention with an 'alienated' child  Debbie Watkin, Child, Youth & Family	Manaaki Tangata: A baby's imprint Carole Tana-Tepania, Mangere East Family Service Centre	Hospital: <b>Dr Russell Wills</b> , Office of Children's Commissioner; <b>Julie Arthur</b> , Hawke's Bay District Health Board; <b>Jenny Humphries</b> ,	working with survivors of childhood sexual abuse and trauma  Kit Baigent, Jo Walker  & Megan Krakouer, knowmore legal services	Re conceptualising the child protection system – An ecological approach Dr Folina Hardy, Australian Association of Social Workers	young people in care Sarah Astron & Tracie Shipton, Dingwall Trust
		Paper	Paper	Southern District Health Board; <b>Rebecca Young</b> ,		Paper	
4:30 pm - 5:00 pm	Presentations	Home-based early learning for children in foster care Sally Moffatt, Footsteps Education Ltd	Tamanui (A Māori Parenting Resource) <b>Kerry-Leigh Dougali</b> , Naku Enei Tamariki Inc.	Auckland District Health Board; Kate Williams, Child, Youth and Family & Chris Bush, Cluster 8		The alignment of culture and practice to achieve positive outcomes for children and families Chris Boyle, Social Worker	
5:15 pm - 5:45 pm	Conference Ope	ening Address: His Excellency	, Lt Gen The Rt Hon Sir Jerry M	Conference Opening Address; His Excellency, Lt Gen The Rt Hon Sir Jerry Mateparae, Governor-General of New Zealand (Rendezvous Ballroom)	of New Zealand (Rendezvo	us Ballroom)	
5:45 pm - 6:15 pm	Keynote	Pacifica Session - Vaaifetu – guardianship of stars KidzFirst Children's Hospital and <b>Karanina Sumeo</b> ,		– our children, families and practitioners: Pacific Child, Youth and Family (Rendezvous Ballroom)	ers: Pacific practices of vao Ballroom)	– our children, families and practitioners: Pacific practices of vaaitetu in health and statutory social work. <b>Dr Teulla Percival</b> , Child, Youth and Family (Rendezvous Ballroom)	cial work. <b>Dr Teuila Percival</b> ,
6:15 pm - 8:00 pm	Conference Rec	Conference Reception (Pre-Function Room/Tasman Ballroom)	asman Ballroom)				



# ACCAN Program 2015

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## londay

Monday, 30 March 2015	larch 2015	Rendezvous 1	Rendezvous 2	Tasman Room 1	Tasman Room 2	Coromandel Room	Aucklander Room (Ground Level)
7:30 am - 8:45 am	Conference Reg	Conference Registration (Pre-Function Room)					
8:45 am - 9:45 am	Full Conference	Full Conference Welcome Ceremony: Pōwhiri	15				
9:45 am - 10:00 am	Conference Intro	oduction; <b>Dr Adam Tomison</b> ,	Director, Australian Institute o	Conference Introduction: <b>Dr Adam Tomison</b> , Director, Australian Institute of Criminology (Rendezvous Ballroom)	allroom)		
10:00 am - 11:00 am	Keynote	Exercising care: Families, risk	and responsibility. <b>Professor</b>	Exercising care: Families, risk and responsibility. <b>Professor Kate Morris</b> , University of Nottingham (Rendezvous Ballroom)	ngham (Rendezvous Ballroo	m)	
11:00 am - 11:30 am	Morning Tea (At	Morning Tea (Atrium Lounge/Pre-Function Room)	om)				
		Family violence		Use of technology in practice		Reforming out of home care	Managing the risk of suicide
		Paper	Symposia	Paper	Workshop	Paper	Paper
11:30 am - 12:00 pm	Presentations	In defence: The presence of children during intimate partner violence and the likelihood of retaliation Prof Janet Fanslow, University of Auckland		An innovative approach to an out of home care community of practice: Utilising new technologies <b>Dr Belinda Mayfield</b> , Life Without Barriers		Reforming foster care in Australia: A process of developing a new model of carer support, education and payments Anita Pell, Berry Street	Managing suicide risk in the child welfare population: The Towards Wellbeing Programme Kirsty Louden, Clinical Advisoy Services Aotearoa
		Paper		Paper		Paper	Paper
12:00 pm - 12:30 pm	Presentations	Fatal family violence in New Zealand: Children as victims and witnesses <b>Prof Dawn Elder</b> , University of Otago, Wellington	Te Whare Maramatanga o Te Tai Tokerau - The place of learning/change/ growth in Te Tai Tokerau Lorinda Harding & Trevor Wi-Kaitaia, Child, Youth and Family	Profile 4 Potential Michael Moses, Child, Youth and Family	Transition from care to independence (TCI) - in ME NZ context  Amee Nicholson, Dingwall Trust & Ben Lummis, Youth Horizons Trust	Reforming out of home care through implementing effective models of therapeutic care: Establishing benchmarks for success  Janise Mitchell, Australian Childhood Foundation	Managing suicide risk in a residential setting <b>Denise Tapper</b> , Child, Youth and Family
		Paper		Paper		Paper	
12:30 pm - 1:00 pm	Presentations	Ngā Vaka o Kāiga Tapu Pacific community Ieadership in further addressing family violence Liz Tanielu, Ministry of Social Development		TIKA: When psychology meets technology <b>Rehina Rolleston</b> , TeamTika Ltd		Residential care: Transitioning well - disrupting the paradigm Mary McKinnon, Life Without Barriers	
1:00 pm - 1:45 pm	Lunch (Atrium Le	Lunch (Atrium Lounge/Pre-Function Room)					
1:45 pm - 2:45 pm	Keynote	Nã Te Rauroha, nã Te Rangiãtea i tuku ihoTiaki Child, Youth and Family (Rendezvous Ballroom)		una Actioning Transformative	States of Māori Child Welfar	mokopuna Actioning Transformative States of Māori Child Welfare in New Zealand. Moana Eruera and Dr Leland Ruwhiu,	ra and Dr Leland Ruwhiu,

3:45 pm - 4:15 pm	Afternoon Tea (	Afternoon Tea (Atrium Lounge/Pre-Function Room)	Room)				
		Children's voices		Pregnancy and parenting		Assessment	Evidence and data
		Paper	Symposia	Paper	Workshop	Paper	Paper
4:15 pm - 4:45 pm	Presentations	Rethinking the adultachild relationship: What happens when adults and children converse?  Marityn Casley, Griffith University		Remnants of empire, beginnings of life: An exploration of caing for vulnerable pregnant Indigenous women in New Zealand, USA, Canada and Australia Emma Searle, Royal Hospital for Women		Improving the clinical assessment of acute presentations of child maltreatment using a quality and child rights framework  Dr Paul Hotton, South Western Sydney Local Health District	Mandatory reporting of child sexual abuse: 10 year trends from a national Australian study across reporter groups and different legal frameworks  Prof Ben Mathews,  Queensland University of Technology
		Paper		Paper	Collaboration: Better ways of working together	Paper	Paper
4:45 pm - 5:15 pm	Presentations	RAIN CLOUD TOOL: Using visual imagery to create focus on the impact for children of adult behaviour in the context of child protection Judy Greer, Child, Youth and Family	'Culture without wairua has no movement' <b>Charles Hohaia</b> & <b>Puawai</b> <b>Ka Solo</b> , Te Waka Whaanui	At-risk pregnant women: Under surveillance, coerced, passively engaged or actively engaged? Rosa Flaherty, NNSW & MNC LHD	to improve outcomes for children and young people with high and complex needs  Gilbert Azuela, Bernadette  Anne & Nathan Church, High and Complex Needs Unit, Child, Youth and	Assess, plan, implement and review: Getting to the heart of Child, Youth and Family's social work practice  Kiri Alexander, Child, Youth and Family	Building a more responsive Australian child protection data collection <b>Tim Beard</b> , Australian Institute of Health and Welfare
		Paper		Paper	Family	Paper	Paper
5:15 pm - 5:45 pm	Presentations	Love not labels: The power of the care experienced voice Duncan Dunlop & Tony McDonald, Who Cares?		'Risking it all' or 'Prevention of Fetal Alcohol Spectrum Disorder: a cultural perspective in Aotearoa' Rose Hawkins, Child, Youth and Family		Introducing'Ripple': An app for assessing how vulnerable kids are doing right now Gregory Nicolau, Australian Childhood Trauma Group	Listening to children's experiences of emotional and psychological abuse: Considerations for child protection and mental health services  Dr Joe Tucci, Australian Childhood Foundation
5:45 pm - 8:00 pm	Networking Rec	Networking Reception (Atrium Lounge/Pre-Function Room)	unction Room)				

Child-centred multi-agency practice: Challenges for change. Dr Patrick Kelly, University of Auckland and Nicola Atwool, University of Otago



# ACCAN Program 2015

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**Tuesday** 

Tuesday, 31 March 2015	Narch 2015	Rendezvous 1	Rendezvous 2	Tasman Room 1	Tasman Room 2	Coromandel Room	Aucklander Room (Ground Level)
		Obesity as medical neglect		Out of home care		Parenting and family support	Research
		Paper	Symposia	Paper	Workshop	Paper	Paper
7:30 am - 8:00 am	Presentations	Child protection, medical neglect and obesity: A single centre experience <b>Dr Alice Johnson</b> , Princess Margaret Hospital for Children	Griffith Youth Forensic Service: Showcasing	What qualifies excellent foster care <b>Ursula Elisara</b> , Immerse - Fostering Hope	Heart of the matter. Transitioning from state	'The Lakes Way' Lauren James, Lakes District Health Board	Violence against children in UAE Society: Social protection strategic framework  Dr Fakir Al Gharaibeh, University of Sharjah
		Paper	practice and research with Indigenous youth,	Paper	care requires more than	Paper	Paper
8:00 am - 8:30 am	Presentations	When does obesity constitute medical neglect? <b>Prof Graham Vimpani</b> , Kaleidoscope - Children, Young People & Families	sexual violence & abuse Sue Rayment-McHugh, Dimity Adams & Troy Allard, Griffith University	Relationships matter? Multiple perspectives on children's attachment experiences in group home settings  Andrea Greer (Tan), Child, Youth and Family	simply meeting material needs <b>Amee Nicholson</b> , Dingwall Trust	Bringing up great kids - Outcomes of a mindful and reflecting parenting program Janise Mitchell, Australian Childhood Foundation	Analysis of informed consent and confidentiality on child safety in the context of online research with women experiencing intimate partner violence  Becky Allenby, Auckland University of Technology
9:00 am - 9:10 am	Tuesday Confer	Tuesday Conference Introduction: Brendan Boyle, Chief Executive,		Ministry of Social Development (Rendezvous Ballroom)	dezvous Ballroom)		
9:10 am - 9:30 am	Tuesday Openir	Tuesday Opening Address: <b>Hon Anne Tolley</b> , Minister for Social Development (Rendezvous Ballroom)	Ainister for Social Developme	nt (Rendezvous Ballroom)			
9:30 am - 10:30 am	Keynote	Justice Peter McClellan, Roy	al Commission into Institution	Justice Peter McClellan, Royal Commission into Institutional Responses to Child Sexual Abuse (Rendezvous Ballroom)	Abuse (Rendezvous Ballroon	(μ	
10:30 am - 11:00 am	Morning Tea (At	Morning Tea (Atrium Lounge/Pre-Function Room)	ma)				

		Family support in First Nations communities		Out of home care: Contact with family	Forensic interviewing and the courts	Child safe organisations	Putting children at the centre of practice
		Paper	Symposia	Paper	Paper	Paper	Paper
11:00 am - 11:30 am	Presentations	It takes a villagean experiment in working across disciplines for better outcomes. The story of Te Korowai Mokopuna  Christine Olsen, Barnardos New Zealand		Developing partnerships between sectors and family members to support parents and family to have better relationships with their children in out of home care.  Jessica Cocks, Life Without Barriers	The application of best- practice investigative interview protocols to Australian Aboriginal children Gemma Hamilton, Deakin University	Workforce Safety Checking under the Vulnerable Children Act 2014 Alice Greer, New Zealand Police	Restorative governance: Transforming our thinking in how we approach cultural responsiveness in a multiagency world Mary Ivec, Australian National University
		Paper		Paper	Paper	Paper	Paper
11:30 am - 12:00 pm	Presentations	Whakamana Whānau (Enabling Whānau) <b>Pam McCann</b> , Family Works Hawke's Bay	The Children's Action Plan: Working together differently for vulnerable children Sue Mackwell, Jacqui Moynihan & Lianne Egli, Children's Action Plan	kContact: Keeping contact between parents and children in care: A protocol to trial a practice enhancement intervention for children in long-term care and their parents Tracey Bullen, Institute of Child Protection Studies Australian Catholic University	The truth, the whole truth and nothing but the truth: Preparing parents to give evidence in court Nicki Wickham, Sydney Children's Hospital	Constructing a child protection policy to support a safeguarding children culture in organisations and institutions  Dr Joe Tucci, Australian Childhood Foundation	Children moving ahead: Developing community collaborations to help children affected by violence Tina Guido, The Alannah and Madeline Foundation
		Paper		Paper	Paper	Paper	Paper
12:00 pm - 12:30 pm	Presentations	Tihei Mauri Ora: Connectedness <b>Mere Wallace</b> , Hokitika Health Centre		Documenting birth family contact visits: Quality issues <b>Rejani Rajan</b> , University of Western Sydney	Responding to child sexual abuse cases in the Children's Court of Victoria: Study findings on a problem-solving approach  Dr. Rosemary Sheehan, Monash University	A partnership approach to developing a child-safe organisation: A case study Janise Mitchell, Australian Childhood Foundation	Putting children and families at the centre: How can we effectively utilise integrated child and family services to reach the families who most need them, early enough to prevent or reduce known developmental and safety risk factors?  Anne Hollonds, NSW Domestic and Family Violence Council
12:30 pm - 1:15 pm	Lunch and Poste	Lunch and Poster Presentations (Atrium Lounge/Pre-Function Room)	ge/Pre-Function Room)				
1:15 pm - 2:15 pm	Keynote	Lessons from the Long Run: Lessons learned in the		25 year LONGSCAN study. <b>Dr Desmond Runyan</b> , Kempe Center (Rendezvous Ballroom)	and Runyan, Kempe Center (	Rendezvous Ballroom)	
2:15 pm - 2:45 pm	Panel	Vulnerable Children's Board – Old Partners, New A Development. <b>Peter Hughes</b> , Ministry of Education.	1– <i>Old Partners,</i> New Accour , Ministry of Education. <b>Chai</b>	ccountabilities: Agencies Working Together for New Ze. <b>Chai Chuah</b> , Ministry of Health. (Rendezvous Ballroom)	ogether for New Zealand's M ndezvous Ballroom)	Vulnerable Children's Board – Old Partners, New Accountabilities: Agencies Working Together for New Zealand's Most Vulnerable Children. <b>Brendan Boyle</b> , Ministry of Social Development. <b>Peter Hughes</b> , Ministry of Education. <b>Chai Chuah</b> , Ministry of Health. (Rendezvous Ballroom)	dan Boyle, Ministry of Social

I Room Aucklander Room (Ground Level)		trauma child and eds	Workshop	nt rope: ocial work balance uckland Board		inded:  He aha aif Say whatf Engaging cross-culturally with reluctant adolescents and their families  Kiritapu Murray & Deb Smith, Te Poutama Arahi Rangatahi, Barnardos New Zealand		actions: socual vustralian inology		iren of ital illness tion itua Raki
Coromandel Room		The impact of trauma and balancing child and parent needs	Paper	Walking the tight rope: Women's health social work maintaining the balance Linda Haultain, Auckland District Health Board	Paper	The Sphere Model: Assessing the impact of trauma Nicki Weld, Stand Children Services	Paper	Thoughts and actions: Parents as secondary victims of child sexual assault Georgina Fuller, Australian Institute of Criminology	Paper	COPMIA: Children of parents with mental illness and or addiction Anna Nelson, Matua Raki
Tasman Room 2			Workshop			'Words from the young' (Workshop about youth suicide and the way youth and adults interact) The RAID Movement				
Tasman Room 1		Issues in protecting Aboriginal and Torres Strait Islander children	Paper	Indigenous child welfare: A contradiction in terms? <b>Sue Anne Hunter</b> , Victorian Aboriginal Child Care Agency	Paper	Understanding overrepresentation of Indigenous children in child welfare data: An application of the Drake risk and bias models <b>Dr Pauline Gulliver</b> , University of Auckland	Paper	Developmental health and wellbeing of Australian Aboriginal children in out-of-home care: Are we making a difference?  Dr Shanti Ramanm, South Western Sydney Local Health District	Paper	An Aboriginal voice in child protection matters in the Northern Territory  Pip Martin, North Australian Aboriginal Justice Agency
Rendezvous 2	(oom)		Symposia		New frontiers in multi- agency practice	Dr Patrick Kelly, Starship Children's Hospital; Rachel Stevenson, Fred Seymour, University of Auckland; Kathy Lowe, Laurel Webb, Auckland District Health Board' Karadee Morden, Shine; Cheryl Stones, Child,	Youth and Family & <b>Neil Hilton</b> , New Zealand Police			
Rendezvous 1	Affernoon Tea (Atrium Lounge/Pre-Function Room)	Attitudes to child maltreatment and recurrence of harm	Paper	Tolerating violence against children: Mapping changes in Australian community attitudes about child abuse and child protection over the past decade  Dr Joe Tucci, Australian Childhood Foundation	Paper	It's 'our' problem, not just 'theirs': Changing perceptions for a community response Raema Merchant, Eastern Institute of Technology	Paper	The extent of repeat involvement with child protection: A review of the literature Olivia Octoman.  Australian Centre for Child Protection	Paper	A systems approach to understanding child protection recurrence <b>Brian Jenkins</b> , Griffith University
Narch 2015	Afternoon Tea (A			Presentations		Presentations		Presentations		Presentations
Tuesday, 31 March 2015	2:45 pm - 3:15 pm			3:15 pm - 3:45 pm		3:45 pm - 4:15 pm		4:15 pm - 4:45 pm		4:45 pm - 5:15 pm



# ACCAN Program 2015

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# Wednesday

Wednesday, 1 April 2015	sday, 2015	Rendezvous 1	Rendezvous 2	Tasman Room 1	Tasman Room 2	Coromandel Room	Aucklander Room (Ground Level)
		Therapeutic intervention	Issues of ethnicity	Preventing sexual abuse		Less thought about: Impacts of family relationships on children	Whole of community approaches
		Paper	Paper		Workshop	Paper	Paper
7:30 am - 8:00 am	Presentations	Indigenous experiences of the New Zealand Family Group Conference Paora Moyle, Moaintheroom Consulting	Researching the role of ethnicity in child protection decision-making: How does it impact on risk perceptions and intervention models?  Emily Keddell, University of Otago		Applying a police prevention approach to child abuse and neglect	Neither seen nor heard: Where do children of prisoners sit within policy and practice in New Zealand? Dr Julie Lawrence, University of Otago	The legacy of aversive parenting: Predictors of preparents' attitudes toward endorsement of physical discipline with children Abby McCann, Psychologist
		Paper	Paper	Paper	Detective Senior Sergeants Neil Holden,	Paper	Paper
8:00 am - 8:30 am	Presentations	Does international evidence-based model Functional Family Therapy work for New Zealand Young People and families?  Dr Charles Heywood, Youth Horizons	Ethnicity and child exploitation material <b>Dr Tony Krone</b> , University of Canberra	Creating a holistic approach to child sexual abuse prevention Melanie Calvesbert, Wellington Sexual Abuse Help Foundation	Natasha Allan & Colin Higson, New Zealand Police	A tolerance to violence: Addressing the context of apprehended violence orders against young people Dr Natalie Scerra, UnitingCare Children, Young People & Families	Best practice in support and training of caregivers raising children with histories of abuse and neglect Bernice Gabriel, Child, Adolescent and Family Service
9:00 am - 9:10 am	Wednesday Cor	Wednesday Conference Introduction: <b>Dr Adam Tomison</b> , Director, Australian Institute of Criminology (Rendezvous Ballroom)	um Tomison, Director, Australic	an Institute of Criminology (Re	ndezvous Ballroom)		
9:10 am - 10:10 am	Keynote	Hard-eamed lessons: The his	tory and future of child protec	ction in New Zealand. <b>Dr Russ</b>	ell Wills, Children's Commiss	Hard-eamed lessons: The history and future of child protection in New Zealand. Dr Russell Wills, Children's Commissioner, New Zealand (Rendezvous Ballroom)	ous Ballroom)
10:10 am - 10:45 am	Moming Tea (At	Moming Tea (Atrium Lounge/Pre-Function Room)	om)				

Wednesday, 1 April 2015	day, 2015	Rendezvous 1	Rendezvous 2	Tasman Room 1	Tasman Room 2	Coromandel Room	Aucklander Room (Ground Level)
		Child protection system reform		Out of home care		Trauma-informed therapeutic responses	From victim to young offender
		Paper	Panel	Paper	Workshop	Paper	Paper
10:45 am - 11:15 am	Presentations	Implementing child welfare reform: What role can inquiries and commissions play in the reform landscape?  Annette Michaux.  Parenting Research Centre		Ensuring every child and young person in out-of-home care has access to education  Denise Kotsikas,  Department of Education and Early Childhood  Development		Doing what we say: Responding to the evidence about the early years Joanna Bock, Berry Street	Victim furned offender in a sample of New Zealand adolescents with harmful sexual behaviour: What's the relationship?
		Paper		Paper	\$ 6 -	Paper	Paper
11:15 am - 11:45 am	Presentations	Protecting Australia's children: Recent developments in national systems design and implementation  Stella Conroy, Families Australia	Perspectives on sentencing in child sexual abuse cases  Prof Arie Freiberg, Monash University, Dr Karen Gelb, Karen Gelb Consulting & Hurch Donnelly Indicid	The role of the supervising social worker in promoting outcomes for fostered children through culturally responsive supervision and support.  Mariesa Williams, Key Assets	Vagitetiu - A Pacific practice framework for statutory social work Karanina Sumeo, Nora Liutai, Sifa Moala, Audrey Talima, Anahila Lose Kanongata'a-Suisuiki, Lois Puleiku, Maria Efini-	Not in Isolation: The importance of relationships in healing childhood trauma  Michelle Taylor, Blossomtree Psychology	Home alone? Neglect as a major push factor into Hong Kong's underworld <b>Prof Wing Chui,</b> City University of Hong Kong
			Commission of New South	Paper	Senia Sefo-Godinet, Lisa	Paper	Paper
11:45 am - 12:15 pm	Presentations			Service engagement and young people with complex needs leaving out-of-home care in South Australia Catia Malvaso, University of Adelaide	Manju Verma, Child, Youth and Family	Changing systems, changing brains: Becoming trauma informed within and beyond the walls of residential care in Aotearoa. Reflections on integrating the Neurosequential Model of Therapeutics into a multiagency team context.  Sean Iwomey, Child, Youth and Family	Youth resolutions meetings  - Innovative approaches to multi-agency and inter- professional working together with mokopuna, children and young people in our community, Nicola Windle, Child, Youth and Family
12:15 pm - 1:00 pm	Lunch (Atrium L	Lunch (Atrium Lounge/Pre-Function Room)	s accompany of the second	Lunch (Atrium Lounge/Pre-Function Room) Position Statement Funch - Presidentificions Responding to the Oballeans of Child Protection Detection Protection Statement Funch Sustrained of Physicians (Pendesyans 1)	O aciacleristical and aciacleristical	Cyrebaed) sasicianded to exelle	10 11

		Developing culturally safe approaches		Partnership in action		Responses to offending	Systemic therapeutic responses
		Paper	Symposia	Paper	Workshop	Paper	Paper
1:00 pm - 1:30 pm	Presentations	Cultural safety and child protection: Family violence prevention legal services protecting children in Aboriginal communities  Antoinette Braybrook, Aboriginal Family Violence Prevention Legal Service	Eliminating physical punishment: Progress, challenges and where	Mokopuna Māori: Te Hokinga Mai (Reunifying Māori Children in Care Drift) Jonelle McNeill, Child, Youth and Family	Reinvigorating family	The Good Way model: A responsive therapeutic approach for young people with cognitive or learning difficulties who have behaved abusively to others Lesley Ayland, WellStop	Te Ara Taiohi - Pathway for Youth, A joint initiative between Child Youth and Family and Te Hou Ora Whanau Services in Dunedin Andrea Lemm, Child, Youth and Family
		Paper	Dr Anne Smith, University	Paper	group conferencing: Aligning practice with the	Paper	Paper
1:30 pm - 2:00 pm	Presentations	Preparing for culturally responsive schooling: Initial teacher educators into the fray  Dr Greg Vass, University of New South Wales	or Oragos, <b>Dr an Hassali.</b> Auckland University of Technology; <b>Dr Julie</b> Lawrence, University of Oragos Deborah Morris-Travers, UNICEF; <b>Dr Bernadette Saunders,</b> Monash University & Beth	Avondale Co-location Model: Government and NGO sectors Barbara Thomson, Child, Youth and Family	Dave Wood, Andrea Nichols, Peter McIntosh, Joanne Setefano, Thomas Hohaia, Child, Youth and Family	Stockholm Syndrome and grooming: Is it the same or is it different? The social work practice implications <b>Dr Shirley Jülich</b> , Massey University	Initial feedback on Mauri Toa Rangatahi, The Power of Youth: A bi-cultural, multi-agency intervention to reduce reoffending by young people Zoey Caldwell, Department of Corrections
		Paper		Paper		Paper	Paper
2:00 pm - 2:30 pm	Presentations	Boss of my body <b>Richard Wells</b> , LDAG Inc		Puawaitahi in practice <b>Dr Meera Raithatha</b> ,  Auckland District Health  Board		Creating a fence and closing the gaps: Engaging with men who are violent Jolene Salmond, Barnardos New Zealand	Sustainable change: Stronger families, effective networks, better outcomes  Veronica Watt, Child, Youth and Family
2:30 pm - 3:00 pm	Afternoon Tea (	Affernoon Tea (Atrium Lounge/Pre-Function Room)	(oom)				
3:00 pm - 3:30 pm	Panel	Pulling the threads together: Where to next? Chair,	Where to next? Chair, Paul N	Paul Nixon, Child, Youth and Family (Rendezvous Ballroom)	v (Rendezvous Ballroom)		
3:30 pm - 4:00 pm	Closing	Traditional Mãori Closing Ceremony; Whakawātea	remony: Whakawātea				

# **POSTER ABSTRACTS**



## Child aware approaches: Promoting local action and community solutions to enhance child safety and wellbeing in Australia

#### Stella Conroy, Deputy CEO, Families Australia

The Child Aware Local Initiative aims to promote and embed Child Aware principles and practices in organisations, communities, businesses and governments in order to address risk factors for child abuse and neglect. It builds on Child Aware principles and promising practices to harness collaborative efforts in local communities for improving the safety and wellbeing of Australian children. The long term vision is that 'Australia's children and young people are safe and well.' The Australian Government has provided funding for Child Aware Local Initiative partners to work in eight community sites; one in each State and Territory. Each site will have a lead community agency and be supported by Families Australia and the Australian Centre for Child Protection to develop locally-based, innovative solutions for children and their families to address early signs of vulnerability. Action research and learning tools will be will be used to record progress and contribute to mapping the journey for each locality. These tools will also be helpful in reporting enabling and disabling factors, as well as other characteristics which could support the scaling up the Child Aware Local Initiative in other communities across Australia. The initiative is supported by Australia's national, state and territory governments who are working closely with community sector leaders and academics. By March 2015, Families Australia anticipates that certain elements of the action research undertaken will have commenced generating reportable trends for local community action plans for early prevention and intervention strategies to promote child safety and wellbeing.

## A geography of hope: Bridging social distance in the child protection landscape

# Mary Ivec, Researcher, Australian National University

Multiple routes exist for building the engagement necessary across regulatory networks, statutory authorities and community centered, informal networks which keep children safe. This poster provides an overview of various international models of engagement, support and advocacy services for parents, families, children and young people who have contact with child protection systems. The examples encompass social work (support) and child protection (control) systems - the basic dimensions for a responsive regulatory and restorative justice approach. The examples show a promising and hopeful restorative imagination and a responsive regulatory approach which can transform our current thinking about how our systems and institutions can better serve our children.

# ACCAN Tiaki 2015

# Smarter schools for vulnerable children

#### Gregory Nicolau, CEO, Australian Childhood Trauma Group

Simone Beyfus

Aim: To deliver a Smarter Schools Program as a coordinated response to the challenges that school communities face when one of the children has difficult behaviours and complex needs.

Background: The Smarter Schools Program staff work within a school environment to achieve academic, developmental and social outcomes for all students. Our services add value to the work currently being undertaken in addressing social emotional land learning needs of students, along with the support needs of school staff and parents. It benefits the whole school environment, even thought it may target children with challenging behaviours and/or complex needs. The Program assists the leaders, teachers, support staff, students and community to meet the needs of particular students which benefits the whole school community. Secondary Consultation Professional development Student development Psychological assessment and

counselling It includes the Positive Choices Program encourages positive practice which encourage good behaviour choices. The program employs a preventative approach to behaviour management with the objective of minimising problematic behaviours throughout the whole school environment.

Results: Research was conducted into the effects of the Smarter Schools Program in three primary schools in Australia. Whilst there was negligible improvement in the behaviour of the children with complex needs and challenging behaviours, there was real improvement in the capacity of adults to interpret behaviour and respond effectively to it.

Conclusion: The Smarter Schools Program provides an opportunity to work together with school staff, parents, and children to provide a 'blitz-like' response. The result is schools draw down on a range of interventions as needed, including counselling, secondary consultations, assessments, reflective sessions and group work. Most importantly the key adults are given an understanding of what happens to a child's brain when they have experienced child abuse or neglect. With everybody operating off a trauma-informed platform the Smarter Schools Program achieves incremental and sustainable improvement for all to see.

# **ABSTRACTS**



In alphabetical order of Lead Presenter

# Violence against children in UAE Society: Social protection strategic framework

# Dr. Fakir Al Gharaibeh, Associate Professor, University of Sharjah

Violence in the education setting both feeds and is fed by violence in society as a whole. The quality education that is the right of every child offer children the opportunity to cultivate their creative talents and critical thinking, gain life skills, develop social relations and grow with dignity as individuals. More than a billion children around the world attend school. Many of these children enjoy their right to be taught in a safe and welcoming environment which encourages learning, personal development and social skills. For many others however, schooling and family do not guarantee such opportunities. The research aims to investigate the nature and scope of kinds and features of violence against children (Citizens and Residents) in UAE society and develop a Social Protection Strategic Framework to deal with this issue. In addition, it aims to identify the perpetrators and the awareness level of various child helplines in the country, with the objective of developing beneficial intervention and protection plans for children in the UAE.

To achieve the above objectives, this study adopted the concept of abuse against children, according to the International Society for the Prevention of Child Abuse and Neglect (ICAST) tool which is approved by the World Health Organization. This tool includes four main categories of abuse of a child—neglect, physical abuse, psychological or moral abuse at home and school. A cluster sample size of 4,111 from both Emirati and resident children were selected from private schools in all seven emirates; 50.6 percent were male students and 49.4 percent were female. Ages ranged between 10–18 years old and from grade 5 to 12. The study based on findings suggested a Social Protection Strategic Framework be used as a frame of reference to join efforts of all child protection institutions in the UAE, with a number of recommendations for the preparation of various programs aimed at different segments in order to protect and prevent children from all forms of abuse.

Presentation Time: Tuesday 31 March 2015 7:30 am

### Practice First

# Kate Alexander, Executive Director & Debbie Cornale, Director Practice Standards, NSW Department of Family and Community Services

Practice First is an innovative model of working with families, built on Principles of Practice that emphasise the importance of relationship-based practices, a strong appreciation of context and a culture that shares decision making and supports family work. Practice First is now operational in 45 percent of NSW offices. Early data suggests the model has made a positive impact on re-reporting rates and entries to care. The model is currently being evaluated.

The presentation will describe the NSW experience of work to change the culture of child protection practice. It will focus openly on lessons learned and the (at times) up and down journey of change. It will consider the impact of group supervision and describe the elements that have been essential in helping practitioners, from more of an overly forensic culture to one that honours relationship- based practice as the most effective way to keep children safe.

Presentation Time: Sunday 29 March 2015 3:30 pm

## Assess, Plan, Implement and Review (APIR): Getting to the heart of Child, Youth and Family's social work practice

#### Kiri Alexander, Senior Advisor, Child, Youth and Family, & Jonelle Crawford, Senior Advisor, Child, Youth and Family

Assess, Plan, Implement and Review (APIR) is a long-term strategic change program that will transform New Zealand's statutory service from the current, narrower focus of ensuring children and young people's safety/protection to a more comprehensive, collaborative service response which is underpinned by strong family, community and multi-agency partnerships.

Child, Youth and Family started the journey in 2012 by implementing a multi-agency health and education assessment process (Gateway), followed in 2013 by a comprehensive, child-centred social work assessment framework (Tuituia). The next step is to strengthen the links between assessment and planning, and improve



how plans are developed, implemented and reviewed. The overall objectives of APIR are to:

- ensure every child or young person involved in intervention with Child, Youth and Family has a single, integrated plan that is informed by assessment, actively implemented and reviewed
- improve the quality of social work practice in assessment, planning, implementation and review activities to provide the best possible service for vulnerable children and young people and contribute to improved outcomes
- more effectively engage with children, young people and their families in a transparent and strengths-based way
- enable a systematic approach to planning, implementation and review practice which builds on Tuituia and improves the quality of decision making.

We will outline our progress to date, including our engagement with cross-agency partners, children and young people and families, and our approach to testing practice elements of a single, integrated plan. We will present our progress on the development of an IT tool which will support the practice we want to see, before concluding with an overview of what remains to bring APIR to fruition.

Presentation Time: Monday 30 March 2015 4:45 pm

Analysis of informed consent and confidentiality on child safety in the context of online research with women experiencing intimate partner violence

#### Becky Allenby, Researcher, AUT University

Jane Koziol-McLain, PhD, RN, Kate Diesfeld, JD, Shyamala Nada-Raja, PhD, Terry Dobbs, MA, Denise Wilson, PhD, RN

Researchers have legal obligations to maintain participant confidentiality. Simultaneously, researchers have a duty of care. These obligations are well documented for research with vulnerable women and research with children. What is less clear is how child safety is managed when research is conducted with their mothers. Given the significant overlap between men's violence against female partners and child abuse and neglect, and increasing child protection advocacy and policy, it is timely to conduct an analysis

on child safety in the context of research with women experiencing intimate partner violence (IPV).

In obtaining informed consent, researchers disclose limits of confidentiality. Prevailing discourses for women experiencing IPV are those of disempowerment, and particularly for Indigenous women, of children being taken into care. As such, acknowledging the limits of confidentiality during informed consent has implications for whether potential participants will engage in research. Those who feel most disempowered or whose children are at most risk may systematically not engage in the research process.

This presentation will explore safety, informed consent and confidentiality, taking into account legislation, ethical principles and research considerations. The complexity of the issues will be illustrated using the isafe study, an online trial of a safety decision aid conducted in New Zealand with women experiencing IPV. This issue is salient to isafe as 44 percent of participants reported they have one or more children living in their home that they are responsible for. This analysis will inform the isafe study and future research and champion child safety in family violence research.

Presentation Time: Tuesday 31 March 2015 8:00 am

# Engaging with children and young people in care

#### Sarah Ashton, Projects Manager & Tracie Shipton, Director, Dingwall Trust

This thought-provoking workshop will present what children and young people in care need from the adults that work with them—in their own words. A range of young people who have experienced fostercare will share their experience of what works, what doesn't and what help they need from adults to make fostercare a better experience. With space for reflection and discussion on practice implications and challenges, this interactive workshop will provide a fresh focus on working with children and young people in care.

Presentation Time: Sunday 29 March 2015 3:30 pm



The Good Way model: A responsive therapeutic approach for young people with cognitive or learning difficulties who have behaved abusively to others

#### Lesley Ayland, CEO, WellStop

The Good Way model was developed from the experiences and understandings of adolescents with intellectual disabilities, or cognitive or learning difficulties, who were attending treatment for harmful sexual behaviour. It moves away from 'trickle-down' or 'dumbed-down' models of therapy originally developed for mainstream adults. The Good Way model provides a framework and language for clients to discuss sensitive and difficult issues in a safe way, including ways they may have been harmed or abused themselves. Therapy is creative and responsive to the client and family's culture, faith, circumstances and values. The aim is for clients, in conjunction with their family and other support people, to understand the harm they have caused and to be involved in appropriate reparation, to build resilience, learn new skills, resolve problems and mistakes, and to develop a good life where their needs are met without harming others. A qualitative evaluation of the Good Way model has found that adolescent clients and their parents remember and use the language and concepts post-treatment to describe behaviour and feelings in a wide range of situations. An outcome-based evaluation study is currently underway.

The presentation will be active and fun, involving games, role-plays, pair and small group activities to introduce participants to the way the model is used clinically. By the end of the presentation, participants should have a sense of how to work with clients using the model. Session plan—Development of the Good Way Model; theoretical and research base of the model; introduction to the language and the six components of the model; practice of three of the main components—Good Side/Bad Side, Good Way/Bad Way and Good House/Bad House; conclusion and discussion.

Presentation Time: Wednesday 1 April 2015 1:00 pm

Collaboration: Better ways of working together to improve outcomes for children and young people with high and complex needs

Gilbert Azuela, Team Leader Professional Practice; Bernadette Anne, HCN Manager & Nathan Church, HCN Business Analyst, Ministry of Social Development - High & Complex Needs Unit

The High and Complex Needs (HCN) unit was established in 2001 to support aspects of the High and Complex Needs Interagency Strategy of the New Zealand Government. The Ministries of Health, Education and Social Development formed the intersectoral collaboration. This strategy was designed to enhance collaboration across sectors and address serious service gaps and shortfalls. Since its inception, the existence of the HCN unit has continued to be relevant in addressing the needs of children and young people with high and complex needs. The HCN Unit is keen to share their experience of multi-agency working and to contribute to the developing practice of collaboration across the multi-agency world for the benefit of children and young people with high and complex needs.

This workshop aims to:

- Illustrate the central composite of the HCN interagency collaboration, governance and operational process as an integral element of a multi-agency approach
- Advocate for the commitment to advancing evidence-based practice in supporting, developing and implementing interagency plans
- Demonstrate the importance of outcome measurement for children and young people with high and complex needs through effective intersectoral collaboration
- Showcase the significant technological operational advancements of the HCN's database, Te Kete Tauawhi
- Share HCN's vision of moving forward on how multi-agency collaboration improves outcomes for children and young people with high and complex needs

This workshop uses shared presentations from various professionals within the HCN arena, who will discuss their professional experiences of multi-agency collaboration and the impact on the outcomes for children and young people with high and complex needs. This workshop provides an opportunity for presenters and conference

participants to exchange practice ideas in a guided conversational way through group discussion.

Presentation Time: Monday 30 March 2015 4:15 pm

# Professional recommendations for prevention approaches to child sexual abuse prevention in Australia

#### Dr Georgia Babatsikos, Lecturer, Deakin University

In this session, the findings of research conducted in Australia with 19 professionals working and researching in the field of child sexual abuse will be presented. Interviews were conducted in person, over the phone and using Facetime from September to December 2013. Participants included prevention educators, researchers, police/court personnel, child protection workers, policy and program developers, treatment service providers and faith institution personnel. Participants were asked about their experience with child sexual abuse (including prevention) and recommendations for child sexual abuse prevention programming in Australia.

The results showed a number of important findings, including the need for national collaboration and policy setting, developing programs beyond those targeting children, more culturally diverse programs, more program needs assessment and evaluation, more communication between prevention education providers across the country and more advocacy at the national level, to ensure the enforcement of standards protecting children from child sexual abuse. Recommendations will be made based on the findings, including the establishment of a formal national network specifically around child sexual abuse prevention, national planning and policy development, further research to understand the types of child sexual abuse prevention programs currently being carried out in Australia, sharing of research findings on effective programs and the implementation of community planning approaches specifically for child sexual abuse prevention.

Presentation Time: Sunday 29 March 2015 2:00 pm

# Holistic approaches to child sexual abuse: Trends and needs

#### Dr Georgia Babatsikos, Lecturer, Deakin University

Scott Jacobs

In this interactive session, participants who work directly or indirectly in the field of child sexual abuse prevention (primary, secondary, tertiary) or have an interest in this field will discuss holistic approaches to child sexual abuse prevention. Recent research conducted by presenter Babatsikos in 2013 with professionals and researchers working in the field of child sexual abuse around Australia has revealed the need for expansion of current programs beyond school-based programs to more community-based approaches, more culturally sensitive programs, advocacy for national policies and strategies, and more communication among programs in order to share practice and research ideas.

The presentation will be used to discuss with participants ideas for progressing child sexual abuse prevention efforts in Australia and New Zealand more holistically by discussing key themes, including:

- Developing programs beyond education programs for children in schools
- Community planning approaches to child sexual abuse prevention
- Providing culturally sensitive and competent programs
- Integration of child sexual abuse into broader or other topical programs (eg alcohol prevention services or child safety programs) versus providing specific targeted child sexual abuse prevention topics
- Advocating for national policies, strategies and frameworks
- Developing professional communication networks for those working in the field and conducting research on the topic of child sexual abuse

Participants will be provided with an overview of research and program information on each of the above topics and then be provided with the opportunity to discuss current experiences, trends and best practices. Opportunities for in depth discussion and networking, with possibilities for future collaboration and networking, will occur.

Presentation Time: Sunday 29 March 2015 2:30 pm



## Trauma informed multidisciplinary legal practice: Learnings for professionals working with survivors of childhood sexual abuse and trauma

#### Kit Baigent, Lawyer; Jo Walker, Social Worker & Megan Krakouer, Aboriginal Engagement Advisor, knowmore legal service

Thea Deakin-Greenwood and Prue Gregory

Working with survivors of trauma presents services with the dual challenge of providing trauma-informed, appropriate, high-quality services to communities, as well as managing and preventing vicarious trauma of workers and frontline staff. A culturally responsive, multi-disciplinary approach to trauma survivors is crucial. This workshop profiles a new trauma-informed service which has been established to work with people engaging with (and navigating the Royal Commission into Institutional Responses to Child Sexual Abuse) knowmore legal services.

knowmore is a national service with offices in four states and is unique in Australia and possibly the world as a trauma-informed service providing free legal advice and assistance, information, counselling support and referral via an advice line and face to face services in key outreach locations. As a new service, knowmore has learned much in the first 18 months of operation, learnings worth reflecting on and sharing—especially for services and professions engaged in the provision of specialist trauma informed and culturally appropriate services to survivors of childhood trauma. This workshop will look at key learnings to date, including:

- Why we put the rule book on the shelf and center our services around individual client needs
- Why it is necessary to draw on cultural knowledge of our Aboriginal and Torres Strait Islander Liaison Advisors in order to engage appropriately and effectively with diverse client groups
- How the service has transformed from being reactive to strategically planned
- Why flexibility is key
- Why the best of intentions can go pear-shaped and how we have incorporated reflective practice into our work and learned from our mistakes.

We will also explore the benefits and keys learnings of multi-agency collaboration and the strengths and challenges of operating within a multi-disciplinary environment, including:

- Establishing partnerships with key agencies in order to streamline service provision
- Using multi-disciplinary skills and knowledge to provide trauma-focused services to our clients
- Assisting clients to access mainstream justice processes which serve as a form of therapeutic jurisprudence
- Learning from mistakes, listening to key stakeholder and incorporating client feedback in order to ensure constant improvements to service provision.
- This workshop will also look at effective social and policy changes brought about by the Royal Commission, including:
- The positive changes that institutions are already implementing to address child protection
- Appropriate redress and compensation schemes being established or revisited
- Changing police and prosecution attitudes to prosecuting child sexual abuse

and importantly,

 How appropriate service provision can affect and improve community awareness and recognition of the extent of the problem.

This workshop will also encourage other services to share their learnings and knowledge to ensure that our collective knowledge is strengthened from the experience of many.

Presentation Time: Sunday 29 March 2015 3:30 pm

### Building a more responsive Australian child protection data collection

#### Tim Beard, Head, Child Welfare and Prisoner Health Unit & Arianne Schlumpp, Senior Data Analyst, Australian Institute of Health and Welfare

Over the past few years, the Australian Institute of Health and Welfare (AIHW) has worked with all Australian jurisdictions to develop a new Child Protection National Minimum Dataset (CP NMDS) for reporting on child protection. This NMDS, launched in 2013, replaces the existing collection of aggregated data and for the first time, provides access to data at the child (unit record) level.

The establishment of a national unit record data collection is a significant milestone, considerably improving the analytical power available for national reporting and research. It provides a more comprehensive and accurate picture of children within the statutory child protection system in Australia than

has been previously available. The implementation of the CP NMDS positions Australia alongside only a handful of other countries with access to this type of national resource to support the monitoring of child protection programs and policies.

This presentation provides an overview of the scope and content of the new NMDS and summarises findings from the latest national data on child protection, including new national analyses relating to unique counts of children requiring protection, socioeconomic status, co-occurring abuse types and enhanced carer information. The presentation will also highlight work being undertaken across a number of related projects at the national level to improve the national evidence base and build on the implementation of the CP NMDS. This includes current and potential future data linkage work, focusing on gaining a better understanding of the experiences and outcomes of children using data from multiple sectors.

Presentation Time: Monday 30 March 2015 4:45 pm

## Doing what we say: Responding to the evidence about the early years

# Joanna Bock, Statewide Manager Early Years, Berry Street

Berry Street in Victoria, Australia is one of the largest and oldest independent child and family welfare organisations in the state. For over 130 years, Berry Street has worked at the 'hard' end of the welfare system, offering residential and home-based care and crisis intervention for women and children experiencing family violence. Since 2002, when the organisation developed a therapeutic program for children in and on the edge of care, the organisation has developed expertise in therapeutic interventions that address the impact of dislocation, trauma and impaired attachment. In view of the mounting evidence from research about brain development in the early years, Berry Street has taken the initiative to harness its expertise and explore early intervention and prevention programs with targeted communities where vulnerability is defined not only through inter-generational disadvantage but where vulnerability is associated with new arrivals to Australia. All too often, refugee-background children's first encounters with the Australian welfare system are encounters with Child Protection.

Early Learning is Fun [ELF] is an initiative that aims to reduce the incidence of reports about refugee

background communities to Child Protection and to increase the engagement and sense of entitlement experienced by those communities to universal early years services, with a particular emphasis on the transition from early years programs to pre-school and school. The presentation will describe the ELF initiative and report on the outcomes as contained in the evaluation of ELF conducted by the Centre for Community Child Health, Murdoch Children's Research Institute Royal Children's Hospital.

Presentation Time: Wednesday 1 April 2015 10:45 am

# The alignment of culture and practice to achieve positive outcomes for children and families

#### Chris Boyle & Susan Gill, Social Worker

It is widely known that statutory child protection services across Australia continue to face significant challenges. The most critical include—shortage of appropriately qualified staff, retention of frontline staff, worker inexperience, finite resources, rapid change and complex social problems. Solutions to these challenges are not simple and require careful thought and action. However, reducing their impact can be achieved by building a strong culture that supports the delivery of quality practice and services to children and their families. Developing a style of leadership that can drive and achieve a positive culture has its own significant challenges and tertiary child protection services employ people from a diverse range of professional backgrounds which lends itself to wide variation in the way child protection assessments and interventions are delivered. The Case Discussion Format is an ecological model and was designed out of a need to simplify the complexities in child protection. It allows for critical reflection on both the information provided and the worker's own framework for practice. The Format provides analysis across key areas in assessments, including history, abuse and neglect types, harm, safety and risk with a goal to minimise errors in decision making. The Format also provides a high level of accountability and the effective targeting of intervention strategies to address the child protection concerns through an assessment of parental capacity. The paper will provide an insight into how culture and practice are interlinked and when aligned, combine to maximise effort towards the realisation of the organisation's vision for positive outcomes for children, families and the community.

Presentation Time: Sunday 29 March 2015 4:30 pm



# Cultural safety and child protection: Family violence prevention legal services protecting children in Aboriginal communities

#### Antoinette Braybrook, Chief Executive Officer, Aboriginal Family Violence Prevention Legal Service

In Australia, family violence is the key driver for the removal of Aboriginal children from their families. In Victoria, new evidence indicates that family violence was a driver in over 90 percent of Aboriginal children entering out-of-home care. Aboriginal Family Violence Prevention and Legal Services (FVPLS Victoria) sees the devastating impact that family violence has on Aboriginal women, children and communities every day. In Victoria, expanding definitions of emotional abuse to include witnessing of family violence may have led to an increase in child protection notifications.

This paper explores how cultural and community experiences of Aboriginal child removal in Australia can inform cross-agency responses to child protection in the context of family violence. The speaker will also present the service model of FVPLS Victoria, which has provided holistic, culturally safe legal assistance, early intervention and prevention to Aboriginal victims/survivors of family violence for over 12 years. These services bring our staff into daily contact with clients involved with, or impacted by, the child protection and out-of-home care system in Victoria. FVPLS Victoria takes an integrated approach to service delivery, maintaining a strong presence in Aboriginal communities and working with Aboriginal and mainstream organisations to support our clients' needs. In addition to legal advice and representation on child protection matters, FVPLS Victoria works with child protection and other agencies to protect the cultural ties and identity of Aboriginal children.

Presentation Time: Wednesday 1 April 2015 1:00 pm

kContact: Keeping contact between parents and children in care: A protocol to trial a practice enhancement intervention for children in long term care and their parents

Dr Tracey Bullen, Project Manager & Dr Stephanie Taplin, Associate Director, Institute of Child Protection Studies, Australian Catholic University

Professor Morag McArthur, Professor Cathy Humphreys and Dr Margaret Kertesz

The research on contact between parents and children in out-of-home care (OOHC) has found that support to manage quality contact between children and their parents is an ongoing unmet need, particularly when contact is supervised. Evidence suggests good-quality contact can improve outcomes for children. Contact visits can be improved if individuals involved are provided with adequate support and resources. However, poorly planned contact can be harmful, especially if there is a history of maltreatment or if contact is distressing for children.

During its second stage, a three year ARC Linkage study being conducted by ACU and the University of Melbourne will trial an enhanced practice model of delivering contact between children in care and their parents. This trial aims to reduce contact-related child distress and improves children's behaviour relating to contact, improves children's relationships with their birth parents and increases the proportion of visits attended during the follow-up period.

This paper presents the development and design of the kContact Practice Enhancement Intervention. The study is a cluster randomised control trial involving 10 agency partners in the Australian Capital Territory and Victoria, with sites paired by size and by type of care. This targeted intervention draws on the evidence from contact programs identified in a systematic literature review and from consultations with practitioners, and focuses on preparing and supporting parents for contact visits. The trial findings will further inform the development of evidence-based guidelines for contact between children in OOHC and their parents.

Presentation Time: Tuesday 31 March 2015 11:30 am

## Initial feedback on Mauri Toa Rangatahi, The Power of Youth: A bi-cultural, multiagency intervention to reduce reoffending by young people

# Zoey Caldwell, Principal Advisor – Youth & Louisa Webster, Senior Psychologist, Department of Corrections

The Department of Corrections has a long and successful history of delivering therapeutic criminogenic rehabilitative programs to people with an offending history. As part of our program of work designed to create lasting change, we have developed a new community therapeutic program aimed at young people under the age of 20 years, with a medium risk of reoffending. The program, Mauri Toa Rangatahi, translated means the strength or power of youth.

Mauri Toa Rangatahi aligns with our other medium-intensity programs by using a bi-cultural framework. Similar programs for adults take the form of group work; however, Mauri Toa Rangatahi utilises individual support and whānau/family engagement sessions, alongside therapeutic group work. Mauri Toa Rangatahi is underpinned by evidenced-based international practice models and incorporates Indigenous therapeutic frameworks. It has been developed as a specific response to the overrepresentation of our Indigenous population. Mauri Toa Rangatahi is delivered in conjunction with a range of other agencies to provide a wrap around support that increases program engagement and provides sustainable support beyond the completion of the program.

With the first round of programs being delivered late 2014, it is too early to present any effectiveness data. Instead, this presentation will take a qualitative look at the program's effectiveness by presenting staff and young people's view on the structure, with a particular focus on the Indigenous frameworks, whānau engagement and multi-agency supports, and considers learnings for future groups...

Presentation Time: Wednesday 1 April 2015 1:30 pm

# Creating a holistic approach to child sexual abuse prevention

#### Melanie Calvesbert, Client Service Coordinator, Wellington Sexual Abuse HELP Foundation

Creating a holistic approach to child sexual abuse prevention, connecting disparate approaches using the 'Twelve Points of Focus for Prevention Action' matrix

Melanie Calvesbert has extensive experience in responding to child sexual abuse, as well as in prevention. She is interested in further developing ways in which adults in the community can be empowered to keep children safe. She recently took a study tour to Stop it Now! in the United Kingdom and United States, and is particularly interested in the community matrix developed by Smallbone, Marshall and Wortley. This matrix categorises prevention efforts into primary, secondary and tertiary (with further sub-categorisations).

In New Zealand, activities have largely focused on secondary and tertiary efforts, helping to identify abuse and take appropriate action. Primary prevention efforts currently focus on educating children; however, in no other area of life are children expected to take responsibility for their own safety to the extent that they are with sexual abuse. Primary prevention efforts that focus on educating adults to help us keep children safe are needed. This is not a one size fits all strategy but must be tailored for different communities. Melanie will use Smallbone et. al.'s matrix to discuss work that is being done in New Zealand and to highlight current gaps. Prevention strategies will have failed if all they have done is to increase people's fear. Prevention work must be empowering for it to be effective. We believe that sexual abuse is preventable, not inevitable.

Presentation Time: Wednesday 1 April 2015 8:00 am



# Rethinking the adult-child relationship: What happens when adults and children converse?

#### Marilyn Casley, Lecturer, Griffith University

Relationships between adults and children have changed over time and contexts. As a result of rapid changes in contemporary society and the introduction of the children's rights perspective, the way adult–child relationships are viewed requires different ways of thinking. This paper will discuss the stories and preliminary findings of a PhD project exploring the impact of adult–child conversations on adult–child relationships.

Using Narrative Inquiry Methodology, the stories of four alumni students from the Bachelor of Child and Family Studies (Griffith University, Australia) and three children (aged 5, 7 and 9 years) were collected to enquire into what happens when adults and children converse, and how that impacts on their relationship. Questions that came to mind for this enquiry included:

- In relationships with children, do we [adults] listen and hear what children have to tell us?
- As adults, are we listening to children with the intention of changing our views?
- In doing so, can we distinguish between what children value in their experiences from what the adult values?
- What needs to occur in order to achieve reciprocity of respect and lessen the power differentials that exist between adults and children?
- And finally, what are the implications for practice and policymakers?

It is proposed that in order to develop pedagogical understandings of how adults work with children, consideration needs to be given to the way adults think about children and are in conversation with them.

Presentation Time: Monday 30 March 2015 4:15 pm

# Home alone? Neglect as a major push factor into Hong Kong's underworld

# Professor Wing Chui, Professor, City University of Hong Kong

Yujing Fun

This study looked at the association between different types of child abuse and youth delinquency in Hong Kong. The study comprised 169 at-risk youth's aged between 12 and 24 years (M=16.87, SD=2.54) from a disadvantaged public housing estate. The Child Abuse and Trau-ma Scale was administered to obtain data on use of punishment in the home, sexual abuse, neglect and general child abuse. Chi-square analyses were first used to determine whether gender played a role in the type of abuse inflicted. Afterwards, chi-square and regression analyses were employed to investigate how different forms of child abuse contributed to involvement in delinquent youth groups and triad gangs, and to committing acts of theft or violence. The results showed that all forms of child abuse pushed Hong Kong youth to seek out delinquent youth groups; however, neglect was arguably the most devastating form of maltreatment. Neglect was the only item significantly linked to violent behavior (p<0.001) and theft (p=0.001) and was the major factor tying child abuse to delinquency. Females were also more likely to be neglected than males, which explains why there was almost no difference between males and females in violence and theft. Neglect was also the only type of abuse linked to triad involvement. As triad involvement has been shown to be a major component for delinquency, we argue this as the main connection between neglect and youth delinquency in Hong Kong.

Presentation Time: Wednesday 1 April 2015 11:15 am

Developing partnerships between sectors and family members to support parents and family to have better relationships with their children in out of home care

# Jessica Cocks, National Practice Advisor Family Support and Out of Home Care, Life Without Barriers

Lynette Stoker

A group of practitioners and managers from several human service NGOs in the Hunter Valley of New South Wales (now known as Family Inclusion Strategies Hunter or FISH) formed to improve family inclusion in the lives of children in out-of-home care and to explore how parents and family could contribute to improved care of their children through relationships and partnership. The group asked the question 'How can we support parents and family to have better relationships with their children in care?' The group held a practice forum to consider this question in-depth, including hearing from the experiences of parents with children in out-of-home care and providing practitioners with the opportunity to learn from parents. Ideas and plans were then developed for further work. This paper explores:

- The process of developing FISH and planning the forum
- The reframing of parents as experts in their own experience and as partners in the care and support of children in care
- The emerging role of parents of children in care in FISH and the discourse of out-of-home care
- The important link between family relationships and improved outcomes for children and young people in out-of-home care
- The ongoing work of FISH that has grown from the forum, including continuing development of partnerships among NGOs, parents and family, the university sector and researchers.

The paper is relevant to many of the conference themes including cross-sector partnership, engaging community in child and family support, and the statutory child protection and care systems.

Presentation Time: Tuesday 31 March 2015 11:00 am

# Protecting Australia's children: Recent developments in national systems design and implementation

#### Stella Conroy, Deputy CEO, Families Australia

Brian Babington

The National Framework for Protecting Australia's Children 2009-2020 is Australia's first ever plan of action to tackle child abuse and neglect. It is innovative in several respects. First, it is based on a public health model under which greater emphasis will be placed on prevention efforts that seek to address the underlying causes and precedents of child abuse and neglect. Second, it has been designed and implemented through a close collaboration between federal, state and territory governments and non-government and academic sectors. Third, it aims to improve national consistency in approaches to address child abuse and neglect, including through the development of national standards and a national research agenda. Fourth, it explicitly privileges local initiatives that seek to enhance child safety and wellbeing. It does this principally via the national Child Aware initiative which encompasses the Child Aware Approaches Conference, the Child Aware Principles and Guidelines, and the Child Aware Local Initiative under which select local communities are encouraged to devise local plans of action. Finally, the National Framework strongly encourages integration of service delivery to vulnerable or 'at risk' families and children through greater sharing of knowledge and understanding between adult and child-related services.

The paper will discuss plans for the next National Framework action plan and the vital importance of building on knowledge and goodwill generated so far and to continue to strengthen partnerships and linkages between and across government and NGO sectors.

Presentation Time: Wednesday 1 April 2015 11:15 am



## Hoki ki te Rito – Oranga Whānau: Supporting whānau relationships

#### Lynaire Doherty, Ohomairangi Trust

Parenting programs have been shown to improve children's relationships with their parents/caregivers and reduce problem behaviours; however, little research has focused on outcomes for Indigenous families. Hoki ki te Rito – Öranga Whānau was adapted from Mellow Parenting and is a 14 week program using attachment theory and cognitive behavioural methods to promote change and improve parent—child interaction. Video feedback and group dynamics are key techniques employed throughout the group-based intervention.

AlM: to evaluate the acceptability and effectiveness of Hoki ki te Rito/Mellow Parenting program for Māori and Pacific parents in New Zealand.

PARTICIPANTS: 32 fathers, 48 mothers—mainly Māori and Pacific and their children 0–5 years, attended seven groups in Counties Manukau.

MAIN OUTCOME MEASURES: Parents' self-reported own competence, stress and wellbeing, and children's development and behaviour, and coded videos of parent child interactions on home videos. Focus groups were held towards the end of each program.

RESULTS: Parents attending Hoki ki te Rito parenting program reported a significant increase in their own wellbeing, their ability to cope with their parenting role/children's behaviours, their feelings of self-esteem and adequacy their children's social skills. Children's problem behaviours reduced. Positive effects were maintained at three and 12 month follow up. Qualitative data showed extremely positive responses to the program resources, content and process.

CONCLUSIONS: Evidence is clear for the effectiveness and acceptability of Hoki ki te Rito – Õranga Whānau parenting progam. This result may be seen as a significant step in increasing appropriate service provision for Māori and Pacific families.

Presentation Time: Sunday 29 March 2015 2:30 pm

# Tamanui (A Maori Parenting Resource)

#### Kerry-Leigh Dougall, Manager, Naku Enei Tamariki Inc.

We present Tamanui, a Maori for Maori parenting We present Tamanui, a Maori for Maori parenting resource developed to support and unleash whanau potential, aspirations and dreams. Tamanui is the story of a child's world from conception through to eight years of age, told through the eyes of a child. 'How will you raise me' is one of the key themes throughout. The use of traditional practices in child rearing through subtle positive messages is inherent throughout this 11 minute short film. The resource Tamanui has been built on approaches that enhance the mauri of whanau Maori, unleash their inherent potential and support the knowledge that has been passed down through whakapapa me nga tupuna. Some examples of enhancing the mauri, mana and tapu of whanau include the following topics weaved throughout the resource— Whakapapa Pokapu Karakia Pito whenua Haputanga Moemoea Korero awhi Kainga haumaru. This resource is used by kaimahi in a proactive positive way, kaimahi watch Tamanui with the whanau and support honest open conversations to occur. The feedback from whanau has been very positive and has supported the growth, understanding and development of whanau, including reconnecting with whakapapa, traditional beliefs and behaviour. Based on the knowledge that services for Maori work best when they are designed and presented by Maori, this presentation will—Promote Tamanui; provide information on the importance of an Indigenous perspective in development, design and delivery; and include parents' feedback on what they found valuable.

Presentation Time: Sunday 29 March 2015 4:30 pm

## Safeguarding children: Every day matters, empowering a whole community

# Willow Duffy, Practice Leader, Safeguarding Children Initiative (SCI)

The Safeguarding Children Initiative (SCI) champions community education as a vital tool in tackling child abuse and neglect. SCI is a registered charity and regional initiative in The Top of the South, New Zealand. It is the brainchild of four professionals with backgrounds in child protection and began in 2011 in Whakatu/Nelson. Early intervention via tikanga and whakaaroa

(way of doing things and thinking), is promoted as producing the best outcomes for children and young people. Using a public health approach, SCI provides a free community education program run on the principles of collaboration and inclusion. All ethnicities and cultures are embraced and we have Maori representation on our board and a Kaumatua (Maori elder) has joined our organisation. Seminars are taken to the heart of communities including rural areas and main centres. Community members sit side by side with professionals from a range of sectors. The charity has trained more than 3,500 people since its inception in 2011, demonstrating a huge appetite for the education we provide. Fear of being wrong is the number one reason given by delegates for failing to act on suspected child abuse. We ask the question 'What if you are right?' and give them the tools and support to act when necessary. Rates of intervention and early intervention have increased disproportionately in our region since we began. Our experience tells us that given the opportunity, communities want to come together to protect children and promoting behavioural change towards a common goal works.

Presentation Time: Sunday 29 March 2015 1:30 pm

# Love not labels: The power of the care experienced voice

# Duncan Dunlop, Chief Executive Officer & Tony McDonald, Care Experienced Ambassador, Who Cares? Scotland

In Scotland over the last 2  $\frac{1}{2}$  years the care-experienced identity has been liberated. Children to young adults have claimed their care identity and with it they have made a significant impact on themselves and the care system. By sharing their life-stories and reflecting on what their needs were while in care, they succeeded in increasing the care leaving age to 21. This is progress that will improve the life-chances of future care generations.

This presentation charts how this transformation occurred and demonstrates its most powerful driver – the care experienced voice owning its identity. The central hypothesis is that by including the care experienced voice in determining children and young people's own care journeys, we access a different perspective on what they need. Their voice has made it clear that firstly, in all cultural contexts, a quality care system must be based on long-term loving relationships. Secondly, we need to eradicate the stigma and discrimination that is felt when young people are placed and labelled within a care system.

In Scotland an increase in the care leaving age is only the first step towards the goal of forging a loving and stigma-free care system. The presentation will end highlighting how much more we can and will all do.

Presentation Time: Monday 30 March 2015 5:15 pm

# Fatal family violence in New Zealand: Children as victims and witnesses

#### Professor Dawn Elder, Professor of Paediatrics, Child Health, University of Otago, Wellington

Smith R, Wilson D, Tolmie J. for the Family Violence Death Review Committee (NZ)

Background: The Family Violence Death Review Committee was established in 2008 to advise the Health Quality Safety Commission on how to reduce the number of family violence deaths in New Zealand. The Committee's fourth report presented deaths from 2009 to 2012 and the impact of these deaths on surviving children in affected families was considered.

Methods: The Committee uses a two-tier review process. Tier one data is a standardised set for all family violence deaths. From these data, specific deaths are selected for in-depth review by a multidisciplinary panel.

Results: From 2009–2012, there were 126 family violence deaths, 63 intimate partner (IPV) deaths, 37 child (CAN) deaths and 26 intrafamilial violence deaths. Maori and Pacific children were 5.5 and 4.8 times (respectively) more likely to die than children of other ethnicities. There were 17 in-depth reviews undertaken. Nineteen children died due to inflicted injury, 11 after filicide-suicide, four were neonaticides and three died after neglectful supervision. There were 237 surviving children affected by the IPV and CAN deaths. Seventy-seven children were present at the time of the adult or child death in their family.

Conclusions: Agency reviews of family violence deaths appropriately focus on the factors leading to the death of index victims but fail to acknowledge the many surviving children affected by each death. We recommend processes be put in place after a family violence death to ensure all surviving children are assessed in regard to their mental and physical health needs, as well as their safety.

Presentation Time: Monday 30 March 2015 12:00 pm



# What qualifies excellent foster care

#### Ursula Elisara, Financial Director/Foster Mum, Immerse - Fostering Hope

On 7 November this year, my husband George and I won the national 'Excellence in Foster Care Award', with the ceremony held at Government House in Wellington: http://auckland.scoop.co.nz/2014/11/auckland-couple-receives-excellence-in-foster-care-award/

We were also the family who featured on Prime and Sky News on that same day 7 November 2014 around the awards. I would like to suggest a Workshop presentation on the topic of 'What qualifies Excellent Foster Care?' delivered by myself. I would talk to the wraparound approach, interventions and support networks we have used in dealing with traumatised/foster children and why we have gained such incredible outcomes for the 19 CYF children we have had in our care over the past 12 years (alongside our 3 biological children). You can do further research on me at www.immerse.org.nz as well as the article that featured in the Herald on Sunday earlier this year http://www.nzherald.co.nz/lifestyle/news/ article.cfm?c\_id=6&objectid=11216684. I have plenty of experience in public speaking and presenting, so I feel confident that I could produce something of value for the conference.

Presentation Time: Tuesday 31 March 2015 7:30 am

# In defence: The presence of children during intimate partner violence and the likelihood of retaliation

# Associate Professor Janet Fanslow, Senior Lecturer, School of Population Health

Pauline Gulliver, Robyn Dixon, Irene Allyo

We explored women's use of physical violence in the context of experiencing intimate partner violence (IPV). Data were drawn from a cross-sectional household survey conducted using a population-based cluster sampling scheme. Multinomial logistic regression was used to identify factors associated with women's use of physical violence against their partners when they were being physically hurt. Of the 843 women who had experienced physical IPV, 64 percent fought back. Maori women and women under 25 years of age were more likely to hit back. When controlling for age and ethnicity, women whose children were present during the violence were more likely to hit back more than

once or twice. Women's use of violence more than once or twice was associated with experience of severe IPV and IPV that had 'a lot of effect' on their mental health. Because the woman's violence occurred within the context of her own victimisation, she is unlikely to cease her own use of violence until her partner's violence towards her stops. Fighting back may increase women's vulnerability, as the male partner may respond with an escalation of his violence. Treatment is required for the physical and psychological injuries suffered, and assurance that her children are safe. There is a need for increased efforts to integrate and coordinate policies and services responding to abused women and their children, and provide appropriate organisational support and safety. Fragmentation limits the ability of these services to provide adequate safety to all survivors of violence in a family.

Presentation Time: Monday 30 March 2015 11:30 am

## At-risk pregnant women: Under surveillance, coerced, passively engaged or actively engaged?

# Rosa Flaherty, Manager Child Protection, NNSW & MNC LHD

Jurisdictions worldwide have laws and processes in place whereby prenatal harm information can be shared between health and statutory child protection services. This legislation and policy base enables the monitoring and surveillance of this population under unborn child high-risk birth alerts.

This presentation provides an analysis of the conceptualisations of pregnant women who are atrisk during pregnancy due to living in circumstances where there are serious health and social risk factors; for example, experiencing domestic violence, substance use, unmanaged mental health issues, or homelessness while pregnant. The presentation aims to demonstrate the impact of four dominant discourses on the pathway of the at-risk pregnant woman through the prenatal service system and explores the use of the high-risk birth alert in connecting at-risk women to helping services prior to the birth of their baby.

Evidence obtained via a systematic literature review was examined. Conceptualisation of the at-risk pregnant woman could make a predictive contribution to the pathway of the at-risk pregnant woman through the prenatal service system. These findings have implications for government, service providers, communities and most importantly, the women who are the subject of

unborn child protection alerts. This analysis provides child welfare and health governments with information that supports the alignment of health and social care service delivery to at-risk pregnant women with an active engagement approach.

Presentation Time: Monday 30 March 2015 4:45 pm

# Perspectives on sentencing in child sexual abuse cases

#### Emeritus Professor Arie Freiberg, Professor, Monash University; Dr Karen Gelb, Director, Karen Gelb Consulting & Hugh Donnelly, Director, Research and Sentencing, Judicial Commission of New South Wales

This symposium brings together three papers which examine sentencing in child sexual abuse cases that have been produced from research prepared for the Australian Royal Commission on Child Sexual Abuse in Institutional Contexts. They are part of a larger study of sentencing issues which explores aspects of sentencing including relevant sentencing factors, principles and practices as well as a number of ancillary orders or sanctions.

- 1. Paper: Organisational criminal responsibility for child sexual abuse The criminal law is primarily focused on the responsibility of the individual charged with an offence. It rarely addresses the broader causes of crime. Strategies that focus upon excising deviant offenders from an otherwise 'healthy' institution are likely to be ineffective because a focus on individual motivations may divert attention from the systemic forces that produce crime and there is evidence that institutional factors may contribute those child sexual abuse offences. This paper examines approaches to holding organisations involved in, or associated with, child sexual abuse, criminally responsible. It examines issues such as the legal status of the institutions sought to be held liable, principles of vicarious and direct criminal liability, existing and possible offences relating to organisational negligence and organisational complicity in, or failure to report, child sexual assault offences. It also argues sanctions should address the institutional failings that contributed to the offending behaviour of individuals.
- 2. Paper: Public perceptions of sex offenders. Extensive research has shown that, when asked simplistic, abstract questions about sentencing, most people respond that it is 'too lenient'. But studies that have delved more deeply into people's responses have found that this result must be heavily qualified. Indeed, people's punitive beliefs are strongly linked with the myths and misconceptions that they hold about crime and justice. For sexual offences, the myths and misconceptions are arguably even more pronounced and public opinion about sex

offenders and the appropriate criminal justice responses to them is among the most punitive. The discussion will include an examination of perceptions of specific policy responses to sexual offending (such as sex offender registration and notification laws). The paper also reviews public perceptions of the seriousness of sexual offending and considers some of the underlying drivers of people's perceptions, including the widespread misconceptions that prevail about sex offenders themselves.

3. Paper: Sentencing in historical child sexual assault cases. Sentencing for this category of offences has become one of the most difficult judicial tasks. There is a common law rule in Australia that where sentencing practice has moved adversely against an offender since the commission of the offence, the court must punish the offender by reference to sentencing principles and practices as they existed when the offence was committed. Sexual abuse offenders are commonly convicted many years after the offence has occurred and the rule explains why sentences imposed in historic child sexual assault cases are generally low by contemporary standards. This paper will explore the problems faced by contemporary courts of identifying both past sentencing practices and tariffs for historical child sexual assault offences.

Presentation Time: Wednesday 1 April 2015 10:45 am

### Thoughts and actions: Parents as secondary victims of child sexual assault

# Georgina Fuller, Research Analyst, Australian Institute of Criminology

Parents, family members and friends play a vital role in the support of primary victims of child sexual assault (CSA). However, these individual's ability to provide effective support may be compromised if they themselves are struggling with vicarious or secondary trauma as a result of the crime.

This paper explores how the thoughts and feelings of secondary victims affect the actions they take to support the primary victim. Using information from the Australian Institutes of Criminology's qualitative Database of Victimisation Experiences, the impact on the parents of victims of CSA is explored. This exploration highlights how parents' reactions to the assault can lead to negative or unsupportive behaviours such as withdrawal, anger or overprotectiveness. The implications for parents and victims, as well as service delivery, are discussed.

Presentation Time: Tuesday 31 March 2015 4:15 pm



## Best practice in support and training of caregivers raising children with histories of abuse and neglect

Bernice Gabriel, Senior Psychologist, Child, Adolescent and Family Service, Hawkes Bay District Health Board & Lisa Harrington, Practice Leader, Child, Youth and Family

Mental health needs of children in care and foster placement breakdowns are of significant global concern. These children commonly have severe developmental, behavioural and mental health problems but many do not receive appropriate mental health services. Caregivers report high stress and a lack of acknowledgement of the burden of care, involvement in decision-making and sharing of information. They have unmet needs for support and training to manage children's behavioural and emotional difficulties, and find it difficult to develop attachments to children who are detached, avoidant, resistant or indiscriminately affectionate. Caregiver training and support is a vital component of mental health interventions for children in care. Arising from a clinical need, the Fostering Security Caregiver Training Programme was developed at the Hawkes Bay DHB in early 2009. The program is jointly facilitated by the Child, Adolescent and Family Service and Child, Youth and Family in Hawkes Bay, Christchurch and West Auckland.

The Fostering Security program aims to:

- 1. Inform caregivers about the physical, psychological and developmental impact of trauma, abuse, neglect and loss
- 2. Develop caregiver self-reflective capacity to understand and manage their own responses to the child's behaviour
- 3. Support caregivers to better understand and manage the child's behaviours and mood
- 4. Facilitate an integrated approach to caregiver support between mental health and child welfare services and
- 5. Establish a support group for caregivers

The long-term aim of the program and subsequent support is the development of secure and organised caregiver–child attachments and the prevention of placement breakdown. This presentation summarises the current literature on foster parent training programs, describes the Fostering Security Programme and outlines results from a PhD study analysing the mechanisms

of change in the Fostering Security Programme. Results indicate that the program is associated with improvements in caregiver confidence, relational frustration, attachment relationship, communication, involvement, discipline practices and attributions about the child's behaviour. Improvements in children's behaviour was seen at home and at school through the course of the program.

Presentation Time: Wednesday 1 April 2015 8:00 am

### Workforce Safety Checking under the Vulnerable Children Act 2014

#### Alice Greer, Programme Manager, New Zealand Police

Richard D'Ath,

The Vulnerable Children Act (the Act) came into force in 2014. Part 3 of the Act, 'Children's Worker Safety Checking' regulations are under development, with the date of commencement yet to be determined. Safety Checking is aimed at reducing the risk of harm to children by requiring employers to undertake preemployment safety checks and by putting in place a statutory barrier for certain people who are deemed to be unsuitable to work with children. The Children's Action Plan Directorate has responsibility for overseeing the implementation of the Act, for regulations for the safety checking requirements and for an exemptions process for the statutory barring scheme. NZ Police are an important partner for all employers of children's workers, as they provide the police vetting, which is likely to be a mandatory element of a safety check.

Alice Greer is the Programme Manager for the NZ Police Vetting Service and is responsible for implementing safety checking for the NZ Police 'Children's Workforce' and for changes to the police vetting systems and processes to ensure compliance with the Act. Alice will provide insight into the drivers for safety checking and employer's responsibilities, and discuss the expected four elements of a safety check including police vetting. She will give an outline of the changes to the Police Vetting Service for the implementation of the children's workforce safety checking regulations and answer your questions on the process of obtaining a police vet. Alice will also discuss the role of clear employer expectations in creating cultures of protection.

Presentation Time: Tuesday 31 March 2015 11:00 am

# Relationships matter? Multiple perspectives on children's attachment experiences in group home settings

# Andrea Greer (Tan), Family Engagement Worker, Child, Youth and Family

Children who are admitted into residential care often have a history of abuse, neglect, experienced trauma and have had multiple failed placements. Caring for these children can be challenging due to their complex behavioural issues. Using an attachment framework and the evidence base of neuroscience, this study looks at what works for children with a history of trauma. This study explores what matters to children living in residential group homes through hearing the voices of eight children residing in three group homes in New Zealand

Using semi-structured, in-depth interviews, children were interviewed regarding their experience of care and the importance of relationships within group homes. In order to gain multiple perspectives on this topic, eight parents or guardians of children were interviewed and focus group discussions were held with staff members from the three group homes. The findings from this study and knowledge from neuroscience indicates that children in residential care need to experience relationships as a secure base in order to heal from their traumatic experiences. This research recommends the importance of relationship-based interventions and trauma-informed practice while working with children in residential care settings.

Presentation Time: Tuesday 31 March 2015 8:00 am

# RAIN CLOUD TOOL: Using visual imagery to create focus on the impact for children of adult behaviour in the context of child protection

# Judy Greer, Supervisor, Child, Youth and Family

This presentation will show how to use the Rain Cloud tool. This tool is used to focus the family on the impact on the child of the behaviours and dynamics in the family. The presentation will show how plans can be developed that actually have the child at the centre. It will also show how the tool can be highly personalised to individual family culture, capacity or language. A large body of research indicates that visual imagery helps better understanding and remembering information, and that visual imagery is powerful. The Rain Cloud uses this power to focus planning to improve the child's situation by moving on from the adult issues to focus on how these issues impact on the child and the child's experience of the family behaviours and dynamics. This tool is a way to develop understanding of how children are affected in the short and the long term, to progress insight and empathy without blame, and to experience the child's voice through his/her observed behaviour and ways of coping. The tool can then develop a safety umbrella (plan). 'One child, one plan' which establishes how the components of the plan will make difference for the child. The change in the child's situation is the measure of the plan's effectiveness. This tool has been used successfully in whanau Hui, in staff supervision, in consults, in Family Group Conferences and with individual family members. It contributes to Tuituia assessments. It has also been positively used with young people and children themselves.

Presentation Time: Monday 30 March 2015 4:45 pm



## Children moving ahead: Developing community collaborations to help children affected by violence

# Tina Guido, Program Manager, The Alannah and Madeline Foundation

Children Ahead is an initiative of The Alannah and Madeline Foundation developed with RMIT University to assist children and youth affected by violence. It aims to aid recovery, reduce the risks of poor outcomes, increase protective factors and build resilience. The program's uniqueness lies in its child focus, long-term and holistic work that addresses health, education, emotional wellbeing, community connections, healthy relationships and social skills. Culturally sensitive practice is delivered to a client group that includes Indigenous Australians, refugees, asylum-seekers and varied migrant groups. Key people in the child's life are close partners in the program, creating new 'circles of support'. Through linkages and brokerage for items such as tutoring and books, and sports and recreation, children build their potential. This helps them 'fit in,' make friendships and community connections. Parents are supported to create safe, stable and nurturing environments. Qualified social workers make weekly outreach visits to the child at school, ensuring a space that is safe, comfortable, private. Embedding ourselves in the school environment helps accessibility and regularity of appointments, and builds valuable relationships. The program was externally evaluated this year by PriceWaterhouseCooper and found to 'align with best practice principles, both locally and overseas' and 'that coordination with other parties was a key strength'. Feedback reveals that children connect better with school, peers and family, and academic results improve. This is an ongoing benefit to child, family and community. We expect long-term evaluations to reveal that it provides substantial costbenefits to society by breaking the cycle of violence.

Presentation Time: Tuesday 31 March 2015 11:30 am

Understanding overrepresentation of indigenous children in child welfare data: An application of the Drake risk and bias models

#### Dr Pauline Gulliver, Research Fellow, University of Auckland

Fiona Cram, Moira Wilson, Rissa Ota

There is growing interest in linking child welfare data with data from health and other administrative systems for research and program evaluation, and improved decision making. However, overrepresentation of Indigenous people in administratively recorded child abuse and neglect (CA/N) is an international phenomenon. The aim of this investigation was to build an understanding of the high representation of Māori children in administratively sourced measures of CA/N, by following and extending a model developed in the United States by Brett Drake and colleagues. Variations in observed rate ratios within groups of infant mortality and birth outcomes considered as possible proxies for actual CA/N rate ratios leave open a range of interpretations. We were unable to either confirm or rule out the possibility of referral bias or discriminatory practices within the child welfare system. As linked administrative data are increasingly used for research and evaluation, and considered for use in supporting decision making, there is a need for awareness of the uncertainties about the extent to which they provide an accurate reflection of the real distribution of exposure to risk and experience of harm. System-related factors and service gaps that reach beyond the child welfare system and inequities that have deep historic and structural roots all potentially contribute to administratively recorded CA/N. We recommend a multi-strand preventive approach that addresses a wide range of potential drivers, including material hardship and access to services, and builds the evidence base about what works for Māori.

Presentation Time: Tuesday 31 March 2015 3:45 pm



# E Tu Whānau: Inspiring positive change, creating a different future for our tamariki and mokopuna

#### Darrin Haimona, Board Chair & Katie Murray, Board Member, Maori Reference Group on Family Violence

Over the last six years, E Tu Whānau has been evolving within Te Ao Māori. E Tu Whānau is a Māori-designed and led response to address family violence; it is strengthsbased and community owned. E Tu Whānau represents a new and innovative way forward—the kaupapa is driven by Māori and grounded in tikanga and traditional Māori values that promote strength and wellbeing within whānau—aroha, whanaungatanga, mana manaaki, kōrero awhi, whakapapa. E Tu Whānau recognises that these are protective factors for Māori—they made us strong in the past and will help shape a bright future for our tamariki and mokopuna. E Tu Whānau focuses on community-level prevention within an authentic and culturally responsive context. This approach grew from the recognition that past approaches had not worked for Māori and that something different was neededsomething that belonged to Māori, something that would reach whānau and inspire real change. E Tu Whānau has been endorsed by Māori leaders as a way forward and it is fuelling a groundswell of action and change within whānau and communities across the country. E Tu Whānau is not a program and it is not prescriptive. İwi, hapū, whānau, NGOs, prisons, marae, churches, schools and many others are using the ETu Whānau kaupapa and values in different ways to support their work and encourage positive change. E Tu Whānau supports actions and behaviours that uphold tikanga and Māori values in a way that is relevant today and acknowledges that family violence is not traditional for Māori.

Presentation Time: Sunday 29 March 2015 2:00 pm

## The application of bestpractice investigative interview protocols to Australian Aboriginal children

# Gemma Hamilton, PhD Student, Deakin University

Prof Martine Powell, Dr Sonja Brubacher

Despite the heterogeneity of Australian Aboriginal peoples, certain styles of relating are shared and are markedly different to the communication styles of non-Aboriginal peoples. These differences may affect the suitability of current investigative interview protocols for Australian Aboriginal children. This study aimed to qualitatively evaluate the applicability of an investigative interview protocol to Australian Aboriginal children and examined how it could be modified to better suit the communication styles in many Aboriginal communities. A diverse group of 28 participants who had expertise in Aboriginal language and culture, as well as an understanding of the child investigative interview process, partook in an in-depth semi-structured interview where they were prompted to reflect on Aboriginal language and culture with reference to a best-practice interview protocol (in the context of sexual assault investigation). Thematic analysis revealed overall support for the narrative-based structure of the interview protocol when eliciting information from Aboriginal children. A number of concerns also emerged and these largely related to the syntax and vocabulary within the protocol, as well as the methods of building rapport with the child. Directions for future research and potential modifications to investigative interview protocols to better suit Aboriginal children are discussed.

Presentation Time: Tuesday 31 March 2015 11:00 am



### Te Whare Maramatanga o Te Tai Tokerau – The place of learning/change/growth in Te Tai Tokerau

# Lorinda Harding & Trevor Wi-Kaitaia, Site Manager, Child, Youth and Family

Trudy Brown, Juliet Erihe, Aroha Tahere

A unique aspect of the demographic of Te Tai Tokerau (Northland) region is substantial Maori representation. Te Whare Mohiotanga o Te Tai Tokerau represents a regional approach for effective engagement with whanau, hapū and iwi. As a core part of Maori culture, the whare tupuna (ancestral meeting house) is significant to Te Ao Maori (the Maori world). Constructed to connect with the ancestral roots of local whanau and hapū, the whare tupuna is a place of gathering, learning, ceremony and leadership (mohiotanga). Conceptually local sites represent the pillars (pou) supporting the whare tupuna. Practice located in sites are the decorated walls (kowhaiwhai) between the pou and the regional office is the roof and backbone (tahuhu) binding the kaupapa.

The practice (kaupapa) of local sites and cultural development of Child, Youth and Family staff in Te Tai Tokerau, embraces aspects of mohiotanga. In the Kaipara site, social workers have drawn on the whakapapa of Tane Mahuta, the oldest and largest Kauri in the Waipoua forest and a local taonga for the Kaipara and the Te Roaroa people, to create a practice framework that incorporates the guiding principles of Child, Youth and Family's Indigenous and bicultural principled strategic framework for working with Maori. Te Kauri O Kaipara provides whanau with a framework to recognise and understand the nature and source of their strengths and vulnerabilities. This is woven into the kaupapa of hui a whanau and family group conferences, capturing the hearts and minds of our whanau; providing a platform of trust from which to build change for our mokopuna.

Our presentation details our regional approach for effective engagement with and responsiveness to Maori, highlighting one local Indigenous framework, its conception and development, and its application in daily practice.

Presentation Time: Monday 30 March 2015 11:30 am

# Re conceptualising the child protection system – An ecological approach

#### Dr Fotina Hardy, President, QLD Branch AASW, Australian Association of Social Workers, Chris Boyle & Susan Gill, Social Worker

Contemporary thinking about child protection systems views the responses to children and families through a 'whole system' approach that shares responsibilities to ensure children and families receive services and support in a seamless and timely manner. Child abuse and neglect does not occur in isolation, rather, in contexts. Indicators such as the significant increase in the rates of reporting to child protection authorities and the projected growth of children entering out of home care, particularly in regards to Aboriginal or Torres Strait Islander children in Australia, suggest the need to urgently embrace change.

The authors have developed a Conceptual Model that reflects a paradiam shift that re-conceptualises the child protection system into one that works with child, family and community as one. It is a non-stigmatising system that addresses the needs of children and families at every opportunity, that provides supports to children and families at the intensity required and that shares responsibilities and not shifts them. The model recognises the current and apparent growing gap that exists between those voluntary families who access supports willingly and independently, and those families who are resistant, afraid, or lack access. Yet it is the latter group of families that are overrepresented in the statutory authorities system and whose children experience multiple and complex needs and are at higher risk of entering the out-of-home care system. Parents have told us that they value accessible services to support them in times of stress. The Conceptual Model attempts to rebalance our response to families and children.

Presentation Time: Sunday 29 March 2015 4:00 pm



# What are we all worried about and why we all have a part to play

#### Charlotte Harris, Senior Advisor, Office of the Chief Social Worker & Bronwyn Kay, Regional Practice Advisor, Child, Youth and Family

This workshop explores the circumstances for children and young people involved in statutory care or protection services and the argument for closer interagency responses. We will use Child, Youth and Family data and real case material to examine the complexity of circumstances for children and young people who are involved with child protection.

Looking beyond the label of 'maltreatment' participants will be presented with a detailed picture of the nature and prevalence of concerns for children, young people and their families resulting in assessments, interventions and out-of-home care decisions. The argument is made that given these findings, any involvement with families by Child, Youth and Family is more likely to be successful when an 'interagency care or protection plan' approach is taken (whether that be for assessment or intervention).

Working in small groups, participants will be able to explore anonymous case information. Using this material, they will be able to consider how 'interagency plans' could be developed to either assess or address the concerns, alongside the family. Participants will be given the opportunity to discuss the tensions and challenges of the cases and share their thoughts on how an interagency approach to care or protections plans could look in the future, or even if such an approach is required.

Presentation Time: Sunday 29 March 2015 1:30 pm

## Walking the tight rope: Women's health social work maintaining the balance

#### Linda Haultain, Allied Health Director, Auckland District Health Board

Shireen Moodley, Hannah Frost

Keeping children in the centre of clinical practice has long been the mantra of child protection practitioners and is enshrined in the *Children*, Young Persons and their Families Act 1989. The principle that the welfare

and interests of the child is paramount is incontestable; however, how this translates into day to day social work practice is open to multiple interpretations. The actual critical practices that could be described as 'best practice' have emerged from PhD research, clinical audit and critically reflective conversations.

The intention is to challenge the dominant descriptions of child-centred practice by illustrating an alternative. Our description of relationally based, culturally informed, multi-agency early intervention services for pregnant women achieves positive outcomes for vulnerable infants by keeping women at the centre of clinical practice. In a tertiary women's health context in Aotearoa New Zealand, where many of our clients identify as Maori or Pacificia, our challenge is to maintain women's engagement in maternity care, while also addressing significant child protection concerns. This is often experienced by Women's Health Social Workers as a tightrope balance. It is this balance, and how we maintain it in practice, that we will describe.

Presentation Time: Tuesday 31 March 2015 3:15 pm

## 'Risking it all' or 'Prevention of Fetal Alcohol Spectrum Disorder: A cultural perspective in Aotearoa'

# Rose Hawkins, Regional Disability Advisor & Danny Thompson, Project Specialist, Child Youth and Family

This presentation is an exposition of a Fetal Alcohol Spectrum Disorder (FASD) DVD education and prevention tool. This tool was developed by an interagency group who all have interests in prevention and/or management of FASD. Because this is an Aotearoa/New Zealand resource, a strong Maori cultural aspect was included.

Like thalidomide, alcohol is a well-known teratogen. Inutero alcohol exposure can cause primary effects such as brain and other organ damage, with lifelong impacts. Secondary effects can include exclusion from school, development of mental health conditions, offending and difficulties gaining and retaining employment. Children with FASD are at risk of spending time in outof-home care, often interacting with the child care and protection system. FASD affects children regardless of culture and ethnicity.

Child protection agencies, youth justice agencies and organisations and individuals working with child abuse and family violence all have an interest in understanding and opportunities for contribution towards prevention of



FASD. Participants at this presentation will see sections of this prevention tool and hear how key Maori aspects of whanau, whakapapa and tapu were incorporated into the FASD prevention message to improve cultural relevance.

Presentation Time: Monday 30 March 2015 5:15 pm

### Does international evidence based model Functional Family Therapy work for New Zealand young people and families?

# Dr Charles Heywood, Research Leader, Youth Horizons

Youth Horizons has set out to implement international best practice evidence based interventions to address the needs of young people with severe conduct problems, while making a strong commitment to embarking on a bicultural journey, embracing diversity and striving to better meet the needs of young Māori. Functional Family Therapy (FFT), a well-established evidence based model, aims to address the needs of young people presenting with severe behavioural difficulties including youth offending. A careful process of cultural due diligence suggested FFT would also be suitable for Māori whānau. This pilot study examined FFT delivered by the first team established in Auckland, to the families of 59 young people referred by Child, Youth and Family. The aim was to ascertain whether FFT in New Zealand was achieving similar results in as those achieved internationally.

Half of the group identified as Māori, allowing outcomes for Māori to be reviewed. The study suggests that the FFT program delivered by Youth Horizons is effective in reducing conduct problems for young people of all ethnicities and that the benefits of the intervention are largely maintained at follow up. While the study identified some differences in results comparing Māori and non-Māori, these were not statistically significant. Three-quarters of parents were highly satisfied with FFT and Māori whānau also expressed a high level of satisfaction with the cultural appropriateness of the intervention. The study achieved similar outcomes to those obtained by FFT and other comparable interventions overseas, supporting the decision to expand this intervention to address conduct problems in other parts of New Zealand. Future directions of the model in New Zealand and for Māori rangatahi are

Presentation Time: Wednesday 1 April 2015 8:00 am

# 'Culture without wairua has no movement'

#### Charles Hohaia & Puawai Ka Solo, Director, Te Waka Whaanui

We believe a cultural response founded on principles of mutual respect, reverence and honour is an important starting point to successfully engaging with any whanau. This type of engagement provides whanau a sense of acknowledgement and value for who they are, rather than defining them by the pathologies that prompted the involvement of external agencies in their lives. Over time, some whanau have become acutely sensitive to this type of labelling and categorisation, which tends to reflect the 'cultural heritage' of training institutions steeped in the history of social science, with little regard or appreciation towards the subject's world view.

The danger in whanau being treated by disciplines that do not recognise cultural beliefs and values as intrinsic components to their healing processes, is the continued rejection of interventions by well-intended government and community agencies. It can also be a hindrance to communication and/or physical contact with its representatives. In order to combat this rejection, some governments and agencies at present have made attempts to implement various culturally responsive strategies, whether through legislation, other forms of legal processes or programs.

While there have been some gains, there continues to be a great deal of concern by government agencies regarding the state of many whanau still vulnerable to further risks or secondary trauma. Our experience has shown, while working alongside agencies and whanau, that the utilisation of a cultural framework embedded in 'Te Ao Wairua' is more likely to maintain, strengthen and enhance the engagement and relationship process. The Wairua process transcends all cultures and if used consistently will shift the focus from short-term interventions and approaches, to more sustainable healing methods and healthy whanau. Working within a Wairua paradigm will also enable people to view and interpret the landscape from the whanau perspective as they learn to develop and apply those cultural instruments and/or elements necessary to engage with whanau in a more meaningful way.

Drawing from a Maori world view, our presentation will provide an overview of historical traditions, current research findings and practical knowledge that inform the application of Wairua in environments where competing and/or differing ideologies exist. When ideologies are imposed through processes that give little regard or recognition to participants' world views, a master/servant relationship is created. This is in stark contrast to the belief in 'Ma tou rourou ma toku rourou, ka ora ai t e iwi' (With your contribution and my contribution we will all progress). We also intend to demonstrate that knowledge and experience drawn from a subject's cultural and traditional past is necessary



in understanding the value of Wairua and the various domains in which Wairua operates or manifests itself. For many, whanau these domains can offer hope, purpose and meaning to their lives. In addition, we will describe the positive outcomes and benefits that can be realized when Wairua is at the forefront of any engagement between whanau and various agencies.

Presentation Time: Monday 30 March 2015 4:15 pm

# Applying a police prevention approach to child abuse and neglect

Detective Senior Sergeant Neil Holden, New Zealand Police; Detective Senior Sergeant Natasha Allan, National Coordinator of Child Protection, National Sexual Violence & Child Protection Team, National Criminal Investigations Group, Police National Headquarters & Detective Senior Sergeant Colin Higson, District Child Protection Coordinator, New Zealand Police

Police Child Protection Teams (CPTs) are committed to drive the New Zealand Police Prevention First Strategy. The strategy places prevention at the forefront and people at the centre. While the strategy has targets of reducing reported crime, along with referrals to the Justice Sector, they are at odds with a desire to address the underreported reality of child maltreatment.

In following Prevention First, police pursue three components, which are ensuring deployment will beat demand, understand and respond to the drivers of crime, and ensure prevention and the needs of victims are paramount. These are significant in the CPT multi-agency approach in responding to child abuse, although police need to also ask 'how could 'we' (as police) have prevented this child abuse case I am now working on?'

This education-based workshop will discuss:

- A national overview of how CPTs operate within a multi-agency approach in New Zealand
- Understanding where and why child abuse arises from a police perspective
- Primary, secondary and tertiary opportunities for prevention. Currently, police are focused on more of a tertiary response style (eg prevention through arrest), but there is recognition of a need to utilise more secondary and then primary prevention opportunities

 How police collaborate and work with partners in both a response and prevention model.

The discussion will also address the effect this model of operation has in terms of helping or hindering those at the centre of maltreatment. The alignment of the prevention approach to the three key components of the Prevention First strategy will be discussed through a district lens. Case studies will be used to illustrate the key points throughout the workshop. While the topic is broad and complex, there are common aspects, drivers, triggers and risks that police see—especially those at the lower end of serious. The workshop is intended to build awareness of the issues faced and the approach taken and create discussion and ongoing dialogue as to how this approach can operate successfully.

Presentation Time: Wednesday 1 April 2015 7:30 am

Putting children and families at the centre: How can we effectively utilise integrated child and family services to reach the families who most need them, early enough to prevent or reduce known developmental and safety risk factors?

#### Anne Hollonds, Policy and Strategy Consultant, NSW Domestic and Family Violence Council

Like many countries, Australia is facing funding shortages and looking for new solutions to growing health, mental health and social welfare costs, including child protection and criminal justice systems. Research points to the life-course social, health and economic benefits of investment in prevention and early intervention for vulnerable children in the early years of life.

Findings will be presented from a 2015 report on the implementation in Australia of the rapidly growing service system of integrated child and family centres, based on the concept of a 'one-stop-shop' providing health, education and social services. The extent to which research evidence is being utilised in the implementation of these services, and emerging evidence of outcomes, will be discussed.

The presentation will link prevention research, policy and practice to examine the lessons learned to date.



The different service models and outcomes frameworks in use will be explained and evidence about the policy barriers to collaboration and integration will be discussed. Systemic problems faced by services seeking to provide interdisciplinary prevention and early intervention, and innovative solutions will be examined. International and national research and practice examples will be outlined, with recommendations for scalable service models based on emerging evidence. This presentation will be of interest to researchers, policymakers, practitioners. and government, and philanthropic funders who are interested in evidence 'what works' to improve wellbeing and safety for children.

Presentation Time: Tuesday 31 March 2015 12:00 pm

Findings: In the time period, 192 children were referred for acute assessment. Most (72%) were female, 146 (76%) referrals were for sexual abuse, 37 (19%) were for physical abuse, the rest were for neglect. A minority (10%) were referred by doctors; most were referred by child protection services. Twenty-five cases were found to be not suspicious for maltreatment; the rest had medical findings and health concerns. Most assessments were multidisciplinary and protocol based; half were not able to be followed up. One-third were performed after hours.

Conclusion: This audit provides valuable information on acute CM presentations and identifies strengths and weaknesses in current assessment processes.

Presentation Time: Monday 30 March 2015 4:15 pm

# Improving the clinical assessment of acute presentations of child maltreatment using a quality and child rights framework

#### Dr Paul Hotton, Fellow- Child Protection & Dr Shanti Raman, Community Paediatrician-Child Protection, South Western Sydney Local Health District

Rosemary Isaacs, Catherine Dunn

Background: There is a strong evidence -base for medical examination in the assessment of child maltreatment (CM). South Western Sydney (SWS) has a large metropolitan population with many vulnerable subgroups. There is little known about the health and social outcomes for children following assessment for acute CM.

Objectives: We aimed to describe acute presentations of CM in SWS to one unique hospital service during 2013–14, identify health and social outcomes for children following medical assessment and determine if the cases fulfil established minimal standards for clinical assessment of CM.

Methods: We gathered available data from the acute child protection database and hospital records, on all children 16 years of age referred for assessment between January 2013 and October 2014. We performed simple descriptive analysis on the data. We measured the assessment, report writing and follow up against established criteria for minimum standards for acute CM assessments and a child rights framework.

# Indigenous child welfare: A contradiction in terms?

#### Sue-Anne Hunter & Carlina Black, Manager, Social Policy and Research, Victorian Aboriginal Child Care Agency

As the largest Aboriginal child and family welfare service in Victoria, Australia, the Victorian Aboriginal Child Care Agency (VACCA) believes that Aboriginal culture offers the answers to many issues faced by Aboriginal children and families. For us, cultural excellence means never giving up on our children, keeping them connected to their communities and offering them the best service and support. Our experience has shown that identity, being connected to community and culture are powerful underpinnings of resilience for children, especially those who have experienced trauma.

This presentation highlights VACCA's work in

- · embedding culture for children we work with
- Indigenous healing practices
- increasing cultural understanding across the Victorian child welfare sector

We offer cultural activities and programs for children and our community, such as Aboriginal Children's Cultural Festival, cultural camps in country, possum skin cloak making, excursions to see country, song writing and singing, and Aboriginal Children's Day and NAIDOC week events. Our work around increasing the awareness in our sector and wider community about the importance of culture for Aboriginal children is highlighted by our work to embed cultural competence as a key workforce capability for all who work with Aboriginal children and families, including non-Aboriginal carers of Aboriginal children. We have produced the 'Aboriginal Cultural Competence



Framework' for the Department of Human Services (DHS), the 'Cultural Partnerships Handbook', 'This is Forever Business: A Framework for Maintaining and Restoring Cultural Safety in Aboriginal Victoria and are currently producing a culturally informed Addendum to the DHS standards.

Presentation Time: Tuesday 31 March 2015 3:15 pm

## Restorative governance: Transforming our thinking in how we approach cultural responsiveness in a multiagency world

# Mary Ivec, Researcher, Australian National University

Power and governance lie at the heart of cultural responsiveness in a multi-agency world. Child protection, courts, police and community organisations are all 'authorities' with their individual 'cultures' who set their own 'rules' through their respective institutions, systems and professions. Each has a slightly different lens and most likely applies different standards to what it means to be a 'good' or 'bad' parent. Each holds more or less power in the regulatory relationship in relation to the others. The court has more power than the statutory authority, the statutory authority holds more power than the community organisation working with a family. All play a role in influencing (regulating) each other and steering each other's actions—they are 'hostages of each other'. The child and family, meant to be 'at the centre' are often not seen or heard—they are simply meant to 'follow the rules' set by others. Authoritarian regulation, which disempowers, dehumanises and stigmatises families and those working to assist them to be better parents, is what Australian data show. Spaces for conversations at a 'safe table' between all parties are hard to find. Yet models of more restorative approaches to governance in child protection, which empower and elicit responsibility in all players involved, do exist. Some of these models will be explored in the context of responsive regulation and restorative justice theories, including the role of service charters and parent peer advocates.

Presentation Time: Tuesday 31 March 2015 11:00 am

### 'The Lakes Way'

#### Lauren James, Pou Whakarite, Lakes District Health Board

This presentation explains the cultural component of the Lakes Family Violence Intervention Program. It articulates the importance of reducing stigmatisation when undertaking routing Family Violence Screening with Maori and their whanau. The program seeks to provide an awareness of how social prejudice can impact on the way we work with Maori. The Lakes way also has a strong focus on the Treaty of Waitangi and in particular, how practitioners can apply the three principles in the practice. Surveys internally with staff who have attended this program and external auditing have commended the cultural component of the Lakes FVIP Program. The presentation reaffirms the importance of reducing the stigma of Family Violence and Child Abuse as a Maori issue and a commitment that the Treaty of Waitangi and the three principles are a safe way to practice.

Presentation Time: Tuesday 31 March 2015 7:30 am

Best practice models for programmes to promote positive parenting and prevent family violence within culturally and linguistically diverse communities in New Zealand

Jenny Janif, Community Investment Advisor, Community Investment- Ministry of Social Development & Felipe Forero, Board Member, Auckland Latin American Community

Auckland has the highest percentage of residents born overseas and is home to increasing numbers of culturally and linguistically diverse community members. E Tu Whānau is a strengths-based initiative facilitated by the Ministry of Social Development and includes a focus on support for Culturally and Linguistically Diverse (CALD) background communities. It builds on the strengths in those communities to support safe, healthy families and successful settlement. CALD families face many



settlement challenges including unemployment, health and mental health issues, intergenerational conflict, family breakdown including partner violence and elder abuse, and youth identity issues.

A key feature of the ETu Whānau work with CALD communities is early intervention programs to support positive parenting and family violence awareness programs . These programs are designed and facilitated by the communities themselves in collaboration with a range of professionals from social, education, health, human rights, police and non-government organisations. In these instances, collaboration is the critical factor for success. The programs include interpreters and facilitators, they support leadership development and they help to build community capacity and capability. The immediate effects of these prevention programs are increased knowledge and confidence with respect to family safety, maintaining a healthy and harmonious family, New Zealand laws and responsibilities, and protecting the rights of women and children. Additional outcomes include reducing levels of social isolation, increased coping skills and strengthened protective factors, new strategies for positive parenting, reduced family violence, and improved health and wellbeingall of which foster and contribute to positive long-term settlement outcomes.

Presentation Time: Sunday 29 March 2015 2:30 pm

## A systems approach to understanding child protection recurrence

# Brian Jenkins, PhD Candidate, Griffith University

There is a tendency for families who have exited child protection systems to re-enter those systems over time. For families, repeated child protection involvement is experienced as invasive, stressful and stigmatising. For child protection authorities, repeated reports and investigations are an expensive and inefficient way of assessing need and delivering services. Importantly, repeat child protection involvement may indicate that children are experiencing recurrent or ongoing need that is not being adequately and sustainably addressed.

While research in the Australian context is limited, research in other jurisdictions has identified a range of socio-demographic and case criteria associated with recurrence. Research focused on families is important; however, the role that the child protection system plays in generating patterns of recurrence is also critically important but relatively under-researched. While the role of the statutory child protection authority is critical, a systems approach to understanding recurrence

demands a broader perspective that encompasses both the administrative and political arms of government, the media and the broader culture.

The current study uses administrative data from the Queensland child protection system to chart the extent and nature of recurrence in the state. Parallels and differences between Queensland and comparable jurisdictions are made across recurrence patterns, family characteristics and case criteria. These findings help to understand the nature of recurrence in the state, but also raise questions about the role that modern risk-based child protections systems have in generating patterns of recurrence.

Presentation Time: Tuesday 31 March 2015 4:45 pm

# Child protection, medical neglect and obesity: A single centre experience

#### Dr Alice Johnson, Consultant Paediatrician, Child Protection Unit, PMH, Perth

Elizabeth Sorensen, Lana Bell

Introduction: There is increasing recognition of the rising prevalence of obesity and the need for health services to adapt accordingly. In situations where standard approaches have been unsuccessful and parents are unable to address the medical needs of their morbidly obese children or adolescents, referral to child protection services may occur. We reviewed cases referred to our hospital Child Protection Unit (CPU) to assess the effect of subsequent intervention.

Methods: Case review of all children and adolescents referred, between 2008 and 2014, to the CPU at Princess Margaret Hospital, Perth due to possible medical nealect related to obesity.

Results: 15 children and adolescents (8 females) were referred, median (range) age 5 (2–14) years, with a median (range) BMI of 32.8 (25.7–61.5) kg/m2. Thirteen were referred on to state child protection services, four of whom were placed in out-of-home care. Multiple interventions were employed including intensive in home support programs, parenting programs, physiotherapy, dietary and psychology programs. Of the nine subjects remaining in their parents' care, one lost weight and the other eight continue to gain weight. Of the four placed in out of home care, one has lost weight, one continues to gain weight and two have only recently been placed and their outcome remains to be assessed.

Conclusion: In this single centre case series of children and adolescents with morbid obesity, intervention from



child protection services appears to have minimal impact on weight management. The effect of out of home care remains to be determined.

Presentation Time: Tuesday 31 March 2015 7:30 am

# Stockholm Syndrome and grooming: Is it the same or is it different? The social work practice implications

# Dr Shirley Jülich & Dr Eileen Oak, Senior Lecturer, Massey University

This paper examines the similarities and differences between the phenomenon known as Stockholm Syndrome and the process of grooming children and adolescents in child sexual abuse cases. It argues that in terms of power dynamics, the exploitation of vulnerability and the use of opportunity, they share similarities. Beginning with an overview of Stockholm Syndrome, it examines how this exploitation occurs and how the subliminal messages are used to secure in the mind of the hostage a sense of voluntary participation. This is not dissimilar to the experiences of some victims of child sexual abuse. It then interrogates the debates on Stockholm Syndrome and the literature on paedophile grooming to ask the question what we can learn from these similarities and differences and to consider what the social work practice implications are.

Presentation Time: Wednesday 1 April 2015 1:30 pm

Researching the role of ethnicity in child protection decision-making: How does it impact on risk perceptions and intervention models?

Emily Keddell, Senior Lecturer, University of Otago; Philip Gillingham, Senior Research Fellow & Debby Lynch, Senior Lecturer, University of Queensland

A number of studies have highlighted the influence of ethnicity on decision-making processes in child protection social work. These studies show that ethnicity

can be an important variable that affects practice responses and intersects with inequality, risk perceptions, assessment frameworks and perceptions of children's needs to produce decision outcomes. The result of these complex interactions can be variability in case decision outcomes for children from different ethnic groups. While this variability is considered negative if it reflects stereotyping, discrimination, 'universalist' approaches, or blindness to structural oppression, variability in decision outcomes may also reflect positive attempts to utilise culturally appropriate practice models. This presentation outlines existing research in this area and considers various research methods that can be used to understand this aspect of decision-making variability, with a view to developing a more nuanced appreciation of the role of ethnicity in case decision outcomes.

Presentation Time: Wednesday 1 April 2015 7:30 am

## New frontiers in multiagency practice

Dr Patrick Kelly, Paediatrician Clinical
Director Te Puaruruhau Starship Childrens
Hospital, Auckland DHB; Rachel Stevenson,
Doctoral student in Clinical Psychology,
University of Auckland; Kathy Lowe, Nurse
Specialist, Auckland District Health Board;
Karadee Morden, Family Violence
Coordinator, SHINE; Professor Fred Seymour,
University of Auckland; Laurel Webb, Child
Protection Co-ordinator, Auckland District
Health Board; Cheryl Stones, Liaison Practice
Leader, Auckland District Health Board &
Detective Sergeant Neil Hilton, New Zealand
Police

This symposium comprises four oral papers on different aspects of the challenges of multi-agency collaboration, as seen from the perspective of staff who have moved out of their organisational comfort zones into a shared multi-agency space. The papers all relate to challenges that have been recognised within Puawaitahi—a multi-agency centre established in central Auckland in November 2002. This co-located the Starship Hospital child protection team in the same building with the Auckland District Health Board (ADHB) Sexual Health Services adolescent sexual assault service, the ADHB Family Violence Team, the Auckland City Police child protection team, the Forensic Video Unit and specialist psychologists from Child Youth and Family Services. This symposium is in addition to a separate Puawaitahi oral paper presentation, which will illustrate how Puawaitahi



actually functions in daily practice by following the progress of a single case of child physical abuse from first presentation to final outcome.

In the four papers in this symposium:

- Rachel Stevenson (DClin Psy student, University of Auckland) will present the results of the first pilot evaluation of the Puawaitahi model of interagency practice and discuss plans for further and more comprehensive evaluation.
- Kathy Lowe (Nurse Specialist) and Karadee Morden (SHINE) will present how the ADHB and a nongovernmental community organisation work together in the context of Puawaitahi to train ADHB staff to screen and intervene effectively in family violence and to support and empower women and children.
- Professor Fred Seymour (Department of Clinical Pyschology, University of Auckland) will present findings of a research project in Puawaitahi to identify factors that influence psychological health and therapy uptake in children and young people who experience abuse.
- Laurel Webb (ADHB Child Protection Co-ordinator), Cheryl Stones (Child Youth and Family ADHB Liaison Practice Leader) and Detective Sergeant Neil Hilton (Auckland City Police) will present work to develop a guideline for multi-agency practice when children are coming to harm through neglect of medical care.

There will be a panel at the end involving all the presenters and other available staff from Puawaitahi to respond to questions from the audience on the papers presented or any other aspects of multi-agency practice in Puawaitahi

Presentation Time: Tuesday 31 March 2015 3:15 pm

Office of the Children
Commissioner's Monitoring
Framework: Taking a child
centred approach to
assessing the quality of
social work practice within
Child, Youth and Family sites
and residences

Liz Kinley, Manager Monitoring and Investigations; Dr Sarah Hayward, Principal Advisor & Awhina Buchanan, Senior Advisor, Office of the Children's Commissioner

Audrey Trotman, Brian Gardner

The Office of the Children's Commissioner has a statutory role in monitoring the policies and practices of Child, Youth and Family. The Office delivers on this commitment through undertaking visits to sites and residencies to monitor the quality of care being provided for our most vulnerable children and young people. Previously, our monitoring activity primarily focused on the views and perceptions of adults and on assessing and improving social work practice associated with a specific site or residence. As a result, we were not as well positioned to advocate as effectively for young people in care as we wanted to be or for our findings to support system-level improvements. In response to New Zealand's increasingly complex care and protection environment and the changes in the sector arising from the implementation of the Children's Action Plan, we developed a new framework and approach to our monitoring work. Our new framework puts the voices of children and young people at the centre of our work and allows us to identify improvements at the system and sector level, as well as at the site or residence level. This fun and interactive workshop will give participants an overview of our new framework and an opportunity to consider what 'well placed' and 'transformational' social work practice looks like through the eyes of children and young people. Participants will get to take away ideas and tools that they can use when they are engaging with young people around their own work.

Presentation Time: Sunday 29 March 2015 1:30 pm

# Ensuring every child and young person in out-of-home care has access to education

Denise Kotsikas, Manager – Youth Pathways and Transition; Bianca Wiedemann, Manager – Health, Wellbeing and Engagement & Robyn Bourke, Manager – Access, Participation and Performance, Department of Education and Training

Anthony Raitman

Children and young people who have been removed from their families and living in out-of-home care face educational disadvantage. These children mostly come from lower income backgrounds and about one in six come from Aboriginal families.

The Out-of-Home Care Partnering Agreement between the Victorian Departments of Human Services and Education and Early Childhood Development, and the Catholic and Independent school sectors, aims to provide increased levels of responsiveness to the educational needs of children in out-of-home care. For these expectations to be met, these children must be actually enrolled in school. The North Eastern Victoria Region undertook to ensure that every child and young person in out-of-home care in the region was enrolled in school. Over two months, these children and young people were identified and enrolled at Oakwood School, which specialises in re-engaging vulnerable young people. Enrolment in school secured access to the combined funding for each student, ensuring flexibility to provide individualised support for each student.

The collective effort to address the complex needs of this cohort and an acknowledgement of a shared responsibility of government departments and service providers, illustrates the potential of a coordinated, locally based response to providing positive educational outcomes. Work is underway to embed this approach in the region in an ongoing capacity, extend the current model and inform broader system wide initiatives to improve educational and developmental outcomes for vulnerable children and young people who are placed in out-of-home care.

Presentation Time: Wednesday 1 April 2015 10:45 am

# Ethnicity and child exploitation material

# Dr Tony Krone, Associate Professor, University of Canberra

Dr Jenny Cartwright, Dr Russell G Smith, Dr Adam Tomison, Dr Alice Hutchings, Sarah Macgregor

Consistent with a number of similar studies, a recent exploratory study of Australian online child exploitation material (CEM) offenders found that the majority of offenders were Caucasian. However, the study also found that a number of offenders were identified as being Indigenous or from other ethnic groups. In addition, the image collections of offenders portrayed a range of ethnic backgrounds for perpetrators and child victims. This paper explores the significance of offender and victim ethnicity in CEM offending and the possible implications for child protection and law enforcement.

Presentation Time: Wednesday 1 April 2015 8:00 am

# Victim turned offender in a sample of New Zealand adolescents with harmful sexual behaviour: What's the relationship?

# lan Lambie, Clinical Psychologist, Department of Psychology, University of Auckland

Julia Ioane

Childhood abuse and trauma are recognised as one possible cause of offending behaviour in adolescents with harmful sexual behaviour. Findings from a national study of adolescents with harmful sexual behaviours will be presented, as well as a study that focused on the severity of childhood victimisation, symptoms of childhood trauma and its potential link with offending behaviour as adolescents. The relationship between victimisation experiences and offending behaviour was explored and analysed. The findings of this study will provide further discussion as to how we work with this challenging and vulnerable population. These findings, along with implications for clinical practice, will be presented.

Presentation Time: Wednesday 1 April 2015 10:45 am



## Neither seen nor heard: Where do children of prisoners sit within policy and practice in New Zealand?

# Dr Julie Lawrence, Research Fellow, University of Otago

Nicola Liebergreen

Over 20,000 children in New Zealand have a parent incarcerated at any one time. An emerging body of literature indicates that children of incarcerated parents in New Zealand face a range of challenges that are often unrecognised and unresolved. This paper utilises data gathered from qualitative interviews with 13 children and their mothers (n=13) to explore how children are conceptualised in the context of parental imprisonment and the way in which they are largely unaccounted for in current policy and practice.

Previous research evidence suggests that children appear to either not be considered in the policy arena, or are seen merely as an extension of the imprisoned adult. Areas of policy and practice discussed in this paper include the lack of cohesive policy guiding police actions during parental arrest in the presence of children and discussion of policy and practice relating to children's experiences of visiting their incarcerated parent.

Presentation Time: Wednesday 1 April 2015 7:30 am

Te Ara Taiohi - Pathway for youth: A joint initiative between Child, Youth and Family and Te Hou Ora Whanau Services in Dunedin

Andrea Lemm, Social Work Supervisor; Jason Jewiss, Practice Leader, Child, Youth and Family & Karini Wallace, Social Worker, Te Hou Ora Whanau Services Dunedin

Terri-Lee Nyman

The CYF Dunedin site want our young people engaged in meaningful activities and having strong connections

to their family and community. To achieve this, it was identified that we required an intensive support program for young people under Care and Protection who were at risk of falling into crime, disengaging from education, drug dependency, disconnection from their culture and potentially being placed in CYF care.

The Youth Team partnered with Te Hou Ora who were already successfully providing services to youth and families of Maori ethnicity, but not exclusively Maori. Together, we developed an intensive individualised support program for young people. In consultation with local Kaumatua, the program was named 'Te Ara Taiohi —Pathway for Youth'. The aim of the program is to build a village around each young person, increase their mauri and bring out their mana. The program provides a holistic approach that focuses on the young person and their whanau by rebuilding and strengthening relationships, working collaboratively with the best agencies and services for the family, providing therapeutic activities, teaching valuable life skills, making education and training a priority, and strengthening cultural/spiritual identity. Every program is 'tailormade' so that both the young person and their whanau's needs, strengths and abilities are taken into account. This initiative is an example of a collaborative multi-agency approach to provide a culturally responsive intervention for young people.

Presentation Time: Wednesday 1 April 2015 1:00 pm

'Can you hear me?' – How a holistic and culturally responsive approach incorporates the voice of children who have a disability and/or mental health issue

# Susanne Llopis, Disability Liaison Professional, Community Living

The effects on children who are exposed to abuse and neglect are well understood. When a child and or the parents have a disability and/or mental health issue, the effects are even greater. This interactive presentation will explore the additional needs of these children and their family/whanau, the role of social workers, teachers and other professionals involved. An integrated child-centred approach will be applied to demonstrate how best to meet the needs of these children by using a holistic approach, which examines the family strengths, areas of difficulties and stress inside and outside the family system.

By looking at the complexity of the family system, it acknowledges the importance of social services working together collaboratively in a multidisciplinary setting with cultural responsiveness in order to facilitate changes within the family system that are sustainable.

Presentation Time: Sunday 29 March 2015 3:30 pm

# Managing suicide risk in the child welfare population: The Towards Wellbeing Programme

#### Kirsty Louden, Clinical Manager, Clinical Advisory Services Aotearoa CASA & Linda Nolan, Senior Advisor, Child, Youth and Family

The Towards Well-being Suicide Consultation and Monitoring Programme (TWB) is a national suicide prevention program for Child, Youth and Family Services (CYF), New Zealand's welfare organisation. Provided by Clinical Advisory Services Aoteoroa (CASA), it is an evidence-based and practice-informed program that aims to reduce the high risk of suicide within the CYF population. The Child Youth and Family population is a highly vulnerable group for mental health concerns and suicidal behaviours. TWB works with CYF social workers in the identification, assessment and management of young people at risk of suicide. Through a consultation and monitoring model, clinical expertise and advice is provided to frontline social workers working with youth presenting with suicidal behaviours. The program has now been operating for 10 years and has developed over that time to fit with developments in CYF and to ensure fit with best practice.

An overview of the program will be provided with a focus on:

- 1) The efficiency of the consultation and monitoring model
- 2) How the program encourages collaboration between those working with the young person and takes into account the many aspects of a young person's wellbeing
- 3) Developments over time and how the program fulfils CYF goals under the New Zealand Suicide Prevention action plan.

Presentation Time: Monday 30 March 2015 11:30 am

# Transition from care to independence (TCI) - in the NZ context

#### Ben Lummis, Practice Leader, Youth Horizons Trust & Amee Nicholson, Manager, Dingwall Trust

Young people in the general population are staying for longer periods of time within family environments, while vulnerable young people leaving care are expected to live independently and become fully functioning members of society at 17 years of age. Generally speaking, compared with the general population, young people in the care system have experienced significant trauma, grief or loss in their lives, have had less success within the education system, have inadequate family/whanau networks or support, have greater mental health problems, less resilience to risk, are less confident and significantly lacking in the skills required to live independently.

There is currently no clear or coherent national mandate for agencies to support children leaving care. In Auckland however, there has been a TCI program that looks to serve the needs of those transitioning from care with a goal of independence. The service, which is delivered by two agencies—namely Dingwall Trust and Youth Horizons Trust—provides one-on-one support to care leavers, working with them on transition plans, encompassing many facets of their personalised journey to adulthood. TCI works with young people from a wide range of cultures—Maori, Pacific, European as well as youth cultures such as youth offenders, youth in care and youth at risk.

Maori youth are overrepresented among young people transitioning from care to independence in the Auckland region. The TCI program looks at the benefits of an individualised multi-agency approach that supports young people to make their own connections and networks within the community, ultimately decreasing young people's dependency on TCI and building self-resilience and independence. This workshop looks at how we all can move towards appropriate planning and support for care leavers and highlight and explore the outcomes of TCI. Our goal is to ensure that care leavers can access appropriate services to live independent and prosocial lives in Aotearoa NZ.

Presentation Time: Monday 30 March 2015 11:30 am



# The Children's Action Plan: Working together differently for vulnerable children

#### Sue Mackwell, National Children's Director; Jacqui Moynihan, Children's Team Director & Lianne Egli, Regional Children's Director, Children's Action Plan Directorate

Working together through locally led Children's Teams to provide a better future for our vulnerable children is at the heart of the Children's Action Plan. Children's Teams work with vulnerable children and their families/whānau, bringing together the services and supports they need. It is a different way of working to create a connected community of government agencies, iwi, NGOs (health, education, disability and social sectors) and family/ whānau, which can better and earlier identify, support and protect vulnerable children. This symposia will provide attendees with an understanding of how Children's Teams work, the establishment process, how Children's Teams are transforming the way we work together and how they are making a real difference in their communities to improve outcomes for vulnerable children.

Presentation Time: Tuesday 31 March 2015 11:00 am

## Service engagement and young people with complex needs leaving out-of-home care in South Australia

#### Catia Malvaso, PhD Candidate and Research Assistant, University of Adelaide

A/Prof Paul Delfabbro

Leaving statutory out-of-home care can be a difficult time for many young people; however, it is recognised that there is a significant population of young people who find this transition very difficult because they have complex needs that cannot be addressed by conventional leaving care services.

This project aimed to examine the problems faced by young people with complex needs leaving out-of-home care. The principal components included:

- A detailed literature review of the leaving care literature and material concerning complex needs
- A summary and review of national and international

services or programs to assist young people leaving care

 A qualitative investigation of issues relating to complexity and the factors that facilitate or hinder effective service delivery.

This presentation will focus primarily on the qualitative component and the conclusions drawn from the project. The qualitative study involved a semi-structured interview with respondents drawn from both the government and non-government sector. Using thematic analysis, responses were organised according to four main themes:

- Challenges and needs of vulnerable populations leaving care
- Current leaving care services and preparation
- Best strategies for service engagement
- Enhancing policy and practice

The research indicated that young people leaving care would be better served by changes at different levels—from the broader legislation to the structure and operation of the welfare system and the way in which young people are engaged at an individual level.

Presentation Time: Wednesday 1 April 2015 11:45 am

# An Aboriginal voice in child protection matters in the Northern Territory

#### Pip Martin, Managing Solicitor Civil Law, North Australian Aboriginal Justice Agency

The North Australian Aboriginal Justice Agency (NAAJA) provides high-quality, culturally proficient legal services to Aboriginal people in the Top End of the Northern Territory. Our child protection practice is a busy and dynamic area of our service. We represent Aboriginal parents and other family carers, without losing sight of the best interests of the children. Too often, decisions about Aboriginal children are being made without providing adequate support to families and without reference to children's cultural wellbeing.

NAAJA is a strong voice for Aboriginal families in the child protection process. This paper will provide an overview of the child protection system in the Northern Territory and the barriers Aboriginal families face in getting access to justice within that system. Aboriginal peoples' economic and social disadvantage, exacerbated in the Northern Territory by remoteness, language, literacy and educational levels, affects their participation in child protection proceedings. Further, the structure of the NT child protection process itself and the absence of any provision for mediation,



disproportionately affects Aboriginal people. This paper will discuss NAAJA's child protection work and how we try to help our clients overcome some of these barriers.

Presentation Time: Tuesday 31 March 2015 4:45 pm

Mandatory reporting of child sexual abuse: 10 year trends from a national Australian study across reporter groups and different legal frameworks

# Associate Professor Ben Mathews, Associate Professor, QUT

Leah Bromfield, Kerryann Walsh, Graham Vimpani, Sandra Coe

To improve detection of child sexual abuse, many jurisdictions have enacted mandatory reporting laws requiring selected persons to report suspected cases. In Australia, State laws apply to different reporter groups (e.g. police, teachers). Before this study, little evidence existed about key aspects of reporting practice, including: the number of reports made by different reporter groups; the outcomes of these reports; how these trends vary over time; and the effect of introducing a reporting duty on reporting practices and case identification.

This paper sheds light on these questions by analysing numbers and outcomes of reports of suspected child sexual abuse by different reporter groups in each Australian jurisdiction over the 10 year period 2003-12. Four questions are explored:

- 1. Do reporter groups differ in the number of reports made?
- 2. Do reporter groups differ in the outcome of their reports?
- 3. Do reporting trends change over time for reporter groups within and across jurisdictions?
- 4. Is the introduction of a legislative reporting duty associated with changes in numbers and outcomes of reports?

For each Australian State and Territory, government data was accessed, collated and analysed. Legal analysis in each jurisdiction identified the absence, or presence and nature of a legislative reporting duty, including

which groups were mandated reporters. Trend profiling identified annual report numbers, and outcomes after assessment by child protection agencies, for each mandated reporter group, and for nonmandated reporters. Trends in reporting practices and outcomes for different reporter groups, annually and over time, were identified using univariate descriptive statistics.

Presentation Time: Monday 30 March 2015 4:15 pm

## An innovative approach to an out of home care community of practice: Utilising new technologies

# Dr Belinda Mayfield, National Practice Leader, Life Without Barriers

Caseworkers face a range of challenges in trying to keep abreast of current research and in connecting with colleagues to share and learn from practice experiences. These challenges are often further compounded for caseworkers in rural and remote communities working in small, geographically isolated teams.

This presentation will provide information about an innovative approach to respond to these challenges, implemented by Life Without Barriers, which is a large not for profit service provider with more than 3,500 staff, in more than 250 communities across Australia and New Zealand. The approach is based on social learning theory and the concept of Communities of Practice as a process of collective learning by a group working in a shared practice domain. However, rather than relying only on face-to-face forums, workers involved in the delivery of out-of-home care programs are participating utilising video conferencing units in 13 sites and a large number of video telephones. The bimonthly Communities of Practice are recorded and available by podcast, and a discussion board to share practice resources and to encourage 'dialogue' with peers has also been established. Agendas for each session are collaboratively developed and include:

- A research presentation on key practice topics
- Sharing good practice examples, celebrating what we are doing well and discussing solutions to common practice issues.

The Communities of Practice is one of a number of strategies Life Without Barriers is developing to support an evidence informed practice culture and to strengthen peer connections to deliver sustainable quality programs.

Presentation Time: Monday 30 March 2015 11:30 am



# Care and protection from an immigrant and refugee perspective

## Petronilla Mazai, Diversity & Multicultural Consultant

This abstract presents a multistage framework to broaden the lens through which child welfare professionals can view immigrant and refugee families and their children from a holistic and collectivist views rather solely focusing values at odds with 'child-centred' philosophies of child protection, which creates tension between the right to equal protection from harm and the right for respect in cultural differences in parenting and family functioning.

Child abuse in our multicultural society is a national crisis. As a nation, our approach to manage this societal crisis has been challenging due to cultural variations among families and children. Consideration of ethno-cultural factors, which considers sociocultural perspective on child abuse from ethnic perspective, is warranted if we are to effectively prevent child abuse and neglect. Social stresses experienced by migrants and refugees along a continuum from emigration and migration, to arrival and adjustment to a new culture and to the sociocultural and economic conditions are other factors to understand migrants and refugees child-rearing styles.

By better understanding rearing patterns, families' experience in migration, reasons for leaving their home country, experiences in transit and reception and resettlement experiences in New Zealand, child welfare professionals are better equipped to assess their needs and provide effective prevention, protection, permanency and family preservation services. Understanding the social, economic, cultural factors that interact to lead to child abuse in one distinctive ethnocultural group is crucial if we are to develop effective holism framework/approaches to the protection of migrant and refugee children and families. Specifically, the approach attempts to tie in different parts of the migration process into a conceptual whole, thus focusing solely on resilience and strengths of immigrant's families and children in the context of child rearing practices to facilitate family preservation.

- To have a better understanding of the relationship between ethnicity and child maltreatment from a cultural view and be able to 'unpack' and examine the specific practices/values that may influence rates of child maltreatment.
- To best understand how ethnicity and culture could be related to child maltreatment, taking into consideration factors that uniquely characterise 'the migrant context'.

 Having an understanding of lack of awareness of child protection laws and systems, economic disadvantage and fear of authority, and that cultural competency is separable from cultural awareness and cultural sensitivity, and also different from addressing language barriers.

PLAN/OVERVIEW 1. Energiser Activity 2. Introduction 3. Brainstorming in groups about migration and its challenges when raising children in a different country 4. Feedback to main group 5. Groups are given a scenario/case study and try to make sense regarding child protection views versus immigrant/ refugees perspectives 6. Facilitator feeds into the feedback and present factors to consider when working with immigrants and refugees involved in care and protection 7. Role play practise carrying out a psychosocial assessment for a certain child who has been abused 8. Wrap up with a debate discussing the importance of having immigrants and refugees in New Zealand and the need to understand historical, social context and child rearing patterns to contribute to positive outcomes.

Presentation Time: Sunday 29 March 2015 1:30 pm

The legacy of aversive parenting: Predictors of preparents' attitudes toward endorsement of physical discipline with children

Abby McCann, Psychologist & Dr Aileen M Pidgeon, Assistant Professor Psychology, Faculty of Society and Design, Bond University

Amy Bannatyne

Violence against children, in its many forms, has been identified as a major public health issue in today's society and has been the topic of many international forums and policies. Research has shown that parental attitudes that are supportive of physical punishment are a significant predictor for its use with children. The current study aimed to examine the degree to which pre-parent participants' endorsement of harsh physical discipline in hypothetical child-behaviour scenarios is explained by their childhood history of physical discipline, attributional style, child expectations and affective state.

Assessment was undertaken via questionnaire method on a sample of 129 pre-parents, 82.3 percent being between the ages of 18 and 22 years. Childhood history



of physical discipline and anger-justifying attributions were found to have significant associations with endorsement of physical discipline in the hypothetical parenting scenarios. Considerations of the interpretation of these results for empirical and clinical utility are offered, and implications of the results for primary and secondary prevention programs and future research are discussed.

Presentation Time: Wednesday 1 April 2015 7:30 am

## Whakamana Whanau (Enabling Whanau)

### Pam McCann, Service Manager, Family Works Hawke's Bay

In this presentation, Family Works Hawke's Bay (FWHB) will demonstrate the way in which services evolve and develop in response to whanau participation and feedback. We will tell how a Tauiwi and Maori organisation are contracted to deliver family violence services to Maori in Hawke's Bay. Commencing in 2011, Whakamana Whanau offered family violence social work services. The service has evolved into a suite of services whose design and development has been strongly influenced by the client group. Through whakawhanaungatanga and the building of authentic therapeutic relationships, we have experienced transformation not only for whanau we are here to serve but also as a service. The development involves whanau and key stakeholders. A continuous improvement approach of planning, implementing, monitoring, review and reflection, with its inherent action learning process, has seen Whakamana Whanau evolve. This has been possible because of the highly skilled staff and the frameworks put in place to monitor and evaluate progress across our services. This monitoring and evaluation includes engaging with key stakeholders, wider whanau groups and other agencies working with whanau. The results reported demonstrate the real value of client and stakeholder participation in action review processes. An evaluation conducted in 2014 validates the importance of a client directed approach not only to service delivery, but also to service and program development. The journey for this service is not over.

The presentation tells of the client-directed group programs that developed from client feedback, the testing and the ongoing review of the program. This approach has our team working to develop a further program which we will begin delivering in Term 2 next year. The ongoing journey of collaboration on design, development and implementation ensures that what we do is relevant and appropriate to our clients' needs.

Presentation Time: Tuesday 31 March 2015 11:30 am

# Giving sorrow words: The experience of siblings separated in care

### Trish McCluskey, Director, Gippsland, Berry Street

Siblings appear to be forgotten relationships—overlooked and underestimated in the lives of children in out-of-home care. This presentation discusses the reported feelings of siblings separated in care, argues that their rights need to be better protected by legislation and discusses the role that attachment theory can play in better understanding the needs of children in care.

Presentation Time: Sunday 29 March 2015 2:00 pm

### Residential care: Transitioning well - disrupting the paradigm

### Mary McKinnon, Director of Practice and Service Excellence, Life Without Barriers

Outcomes for many young people exiting residential out of home care (OOHC) are unquestionably poor. It is suggested that there is a tension in the OOHC system caused by a disconnect between policy expectation—that residential care is short-term/temporary—and the reality that these young people are spending lengthy time in residential care with many aging out. This is exacerbated by:

- Attendant funding that reflects the policy, with few financial incentives for assisting with the transition to independent living during and post relocation
- Residential interventions that are defined themselves by the short-term policy position.

Consequently, the complex needs of these young people are consigned to the 'too hard basket' or addressed piecemeal. The result is disconnected young people, who display little of the characteristics necessary to live well.

Life Without Barriers (LWB) has sought to disrupt this paradigm through piloting the Youth Advocacy Program (YAP), an evidence-based, wraparound service. YAP utilises an individualised, culturally responsive plan built around the interconnected needs and strengths of each young person. A paid Advocate assists the young person to have a voice and mobilises formal and



informal supports within the young person's community to build a sustainable 'family' (biological or otherwise) around them. YAP fosters hopefulness, connection and resilience. Importantly, YAP is working with young people through their transition to independence, restoration or supported living. Early signs are promising. Prof Clare Tilbury, LWB Carol Peltola Research Chair, School of Human Services and Social Work, Griffith University is undertaking the evaluation.

Presentation Time: Monday 30 March 2015 12:30 pm

### Mokopuna Maori - Te Hokinga Mai (Reunifying Maori children in care drift)

### Jonelle McNeill, Site Manager, Child, Youth and Family & Deeann Wolferstan, Manager, Te Whare Ruruhau o Meri

Manurewa is a vibrant, working-class community in South Auckland, which has lots of challenges, with many whānau experiencing health, social and educational needs. The Child, Youth and Family site is a large office, with over 1,600 children assessed as requiring a safety assessment in the past financial year. In December 2013, we had 193 children in care. Seventy-three percent of the children were mokopuna Maori and over 60 of these mokopuna were identified as in care-drift (with no permanent-care goal). We entered into a partnership with Te Whareruruhau o Meri (kaupapa Maori community agency) at the same time the site moved to dedicated duty and care teams, with one team especially dedicated to these 60 mokopuna Maori. The point of difference for this team would be the addition of working with Te Whareruruhau to provide expertise researching/rangahau and using hui a whanau to identify and locate family/whanau, and commence the whanau caregiver assessment process with the goal of connecting mokopuna Maori with their whanau, hapu and iwi. There has been a journey within the two agencies—aligning the Ministry's care practices with the kaupapa Māori framework (Te Kawa o Te Marae) to ensure that the focus remains firmly on the mokopuna.

The presentation provides an overview of the state and community partnership, including an explanation of the cultural paradigm (in the context of the history of Māori in the 'Welfare System') and follows a case study of an eight year old mokopuna (with significant developmental needs) through his journey returning home (te hokinga mai). The presentation identifies the importance of working within a Maori paradigm and to align with the Indigenous and Bicultural Framework (OCSW) to achieve transformational change for mokopuna Maori out of the care system.

This model intrinsically weaves Maori cultural markers into the process of whanau reunification and cultural connectedness.

Presentation Time: Wednesday 1 April 2015 1:00 pm

### It's "our" problem, not just "theirs": Changing perceptions for a community response

### Raema Merchant, Lecturer, Eastern Institute of Technology

This paper explores and discusses some of the perceptions that the community has towards the perpetrators and victims of child abuse and neglect. It also considers the power the media and social media have to reframe and influence societal attitudes and public perceptions. Within society today, there is a part of the community who has an ingrained and deeprooted perception that child abuse and neglect are problems of Indigenous peoples of low socioeconomic status. These views are frequently seen in newspaper articles and social media sites that point towards an ongoing perception that child abuse is not a problem that affects them. Only 'other' people abuse children. This negative attitude has the potential to fuel public responses that are potentially harmful to children at risk of maltreatment. This may generate marginalisation and disempowerment of vulnerable children and families, and create financial and social blocks to addressing the issue. It may also hinder identification of abuse of children who are not perceived as fitting the 'poor and brown' stereotype.

Professionals working within social services are acutely aware of the responsibility of the community to report, monitor and respond to incidents of child abuse and neglect. Statutory and non-statutory organisations are better able to address child abuse with the support of community and iwi groups. The paper will look at ways in which public perceptions towards child abuse and neglect may be transformed through a better understanding of the role that the whole community must play.

Presentation Time: Tuesday 31 March 2015 3:45 pm



# Implementing child welfare reform: What role can inquiries and commissions play in the reform landscape?

### Annette Michaux, Director Social Policy and Strategy & Kate Spalding, Senior Policy Analyst, Parenting Research Centre

Inquiries into child welfare are regular features of the political and policy landscape in many western countries. Usually, these inquiries produce recommendations that are submitted to the commissioning body to consider. What happens to inquiry recommendations? The PRC was contracted by the Royal Commission into Institutional Responses to Child Sexual Abuse to study the implementation of nearly 300 recommendations from 67 Australian inquiries. The study was undertaken to inform The Royal Commission in its efforts to avoid duplication and in its consideration of the adequacy of changes to laws, policies, systems and practices over time. This study was conducted using a mixed methods design, including data collection in the form of written comments received by the Royal Commission from Australian governments, as well as accompanying documentation, verification of legislative changes, surveying senior government staff and conducting semi-structured interviews with stakeholders involved in previous policy

This paper will draw together some of the findings of the study and comment on facilitators of successful implementation of inquiry-led reform. The presentation will feature the following:

- The findings of a systematic scoping review, which identified 17 previous implementation evaluations and messages about barriers and facilitators to inquiry-led reform in Australia
- Comments on the literature on the determinants of public policy implementation, including implementation science, in relation to this evaluation
- The methodology used for assessing the extent of implementation of inquiry-led reform, including the limitations
- Discussion of some of the available findings of the evaluation relevant to large-scale system change and jurisdiction-wide policy implementation

Reforming out of home care through implementing effective models of therapeutic care: Establishing benchmarks for success

### Janise Mitchell, Deputy CEO, Australian Childhood Foundation

Joe Tucci, Chris Goddard

Children who enter child protection systems and require placement in out-of-home care invariably present with significant abuse-related trauma. This trauma is often evidenced in a range of complex behaviours and relationship difficulties, leading to entrenched trajectories of placement breakdown and instability. The Australian Childhood Foundation, in partnership with foster care and residential providers, run a number of national programs that seek to achieve improved outcomes for children through the provision of safe, contained and specifically recruited, trained and supported home-based and residential placements.

This paper draws together evaluation outcomes of these programs and the outcomes of a review of current research on therapeutic models of out-of-home care. It proposes a series of benchmarks, which if implemented and resourced will address the barriers in accessing and maintaining appropriate placements for these children. Specifically, the paper will describe the key elements required to

- develop ongoing capacity for carers to understand and respond to children who have experienced abuse-related trauma
- recruit and accredit appropriate carers for this critical role
- ensure effective collaborative practice between carers and education, health and welfare professionals
- reduce placement instability
- promote improved relational, health and developmental outcomes for looked after children and young people.

Presentation Time: Monday 30 March 2015 12:00 pm

Presentation Time: Wednesday 1 April 2015 10:45 am



### Bringing up great kids: Outcomes of a mindful and reflective parenting program

### Janise Mitchell, Deputy CEO, Australian Childhood Foundation

Pat Jewell

There are a number of parenting programs that aim to support improvements in parental capacity to meet the needs of children. The programs with the highest profile have focused on building parenting skills drawing from cognitive behavioural or social learning models, with particular emphasis on responding to and managing the behaviour of children. While a stated outcome in the majority of programs, a minority of them actually explore and resource the extent to which relationships between parents and children are attuned, positive and nurturing. Almost all of the programs as they are implemented in Australia are tied into regimes of training, supervision and certification. While important, these elements of program delivery can also represent significant hurdles to widespread implementation in child and family welfare services, as they

- are cost prohibitive
- are not easily adapted or tailored to meet the specific needs of populations that are serviced by this sector
- require levels of qualification and experience in facilitators not readily found in this sector
- are based on adherence to philosophical parameters and program logic which are not shared by potential facilitators of the program

Bringing Up Great Kids was developed by the Australian Childhood Foundation to offer a unique alternative in the range of parenting programs currently offered in Australia. It draws from the evidence base about the importance of attachment narratives and the increasing recognition of the role of mindful practices in positive mental health and well being outcomes. Using the analogy of 'open source software' where the code is made available to collaborators to study, change and share, Bringing Up Great Kids provides its program resources free of charge to potential facilitators to adapt, tailor and collaborate with the Australian Childhood Foundation in their evolution and implementation. Quality assurance is achieved through regular low cost training to facilitators as well as online community forums to build knowledge, confidence and skills in the approach.

This paper describes the elements of the program and presents the outcomes achieved over the past five years, including the collaboration with Aboriginal agencies to re-imagine it as a culturally located resource.

Presentation Time: Tuesday 31 March 2015 8:00 am

# A partnership approach to developing a child safe organisation: A case study

## Janise Mitchell, Deputy CEO, Australian Childhood Foundation & Melinda Crole, Executive Manager, YMCA Australia

Despite long-standing evidence pointing to the abuse of children and young people within the context of organisations it has, until recently, been largely ignored and remains poorly understood. The Royal Commission into Institutional Responses to Child Sexual Abuse has identified a range of factors within organisations that can increase the risk of abuse and exploitation of children. These include:

- An organisational culture that does not consider the needs of children, lacks transparency, or discourages staff and volunteers from raising concerns
- Poor screening, recruitment and induction processes
- Limited or no supervision, monitoring and training of staff and volunteers
- Lack of awareness of staff and volunteers to the possibility of abuse in organisations
- Lack of knowledge of staff and volunteers around identification of child abuse
- Lack clear guidelines and processes for reporting. This paper presents the learning from a three year partnership between the YMCA and the Australian Childhood Foundation in implementing the Safeguarding Children Accreditation Program across 625 sites nationally in which 15 million children and young people participate in a YMCA activity each year. The insights from how to undertake such complex policy analysis and development within a federated organisational structure is described in detail.

Presentation Time: Tuesday 31 March 2015 12:00 pm



### Home-based early learning for children in foster care

## Sally Moffatt, Director Education & Training & Dr Sarah Te One, Researcher, Footsteps Education Ltd

Dr Judith Loveridge, Terry Dobbs

This presentation will introduce the Footsteps program that provides learning in the home for children who have experienced adversity and it will discuss an emerging evaluation of the program. The purposes of the emergent research are:

- To develop an independent research base about home-based early education services for young children in foster care
- To provide a research base for decisions that aims to strengthen an integrated approach to supporting young children in foster care and ensure positive outcomes for foster children and caregivers.

The research has been designed to answer the following questions:

- Are vulnerable children's educational needs being met in a home-based environment?
- What are effective practices, tools and processes for caregivers and educators to ensure positive outcomes for these children?
- What areas of professional practice can be improved?
- What are the particular strengths and weaknesses of collaborative wrap-around services?
- How can an integrated approach with the whānau and community of these children be strengthened?
- What in particular is the value of home-based early children education for children in foster care?

The research will be conducted over three years, through narrative case studies that create a picture of the whole experience over time. Data will be gathered and generated from 12 case study children, with data collected from the child, caregivers, kaiako, social workers and other professionals who may be involved. It is hoped that this research will provide evidence to assist government decision-making about future funding for vulnerable children.

Presentation Time: Sunday 29 March 2015 4:30 pm

### Profile 4 Potential

## Michael Moses, Employment Coordinator & Tukunui Nicholson, Te Au rere a te Tonga Youth Justice Residence, Child, Youth and Family

The Profile 4 Potential is a self-determining, four-staged, strength-based, residential model of practice currently being piloted within Child Youth and Family Residential Services. First proposed by Professor Mason Durie, this model aims to identify areas of hidden potential within Maori young people and deliver specific interventions aimed at growing and flourishing those areas of potential. Through the utilisation of IPAD technology, this model of practice gives the young person the power of self-determination. Based on the areas of potential they identify, the young person can tailor their residential experience to best meet their own individualised needs by having an achievable action plan. Success is measured on how the young person and their whanau reports growth in their area(s) of potential. Second, through the creation of a culturally safe space and strict adherence to Maori fundamental beliefs and principles, the young person can openly express their own views within the context of their whanau, hapu and iwi. By creating a plan to develop the potential, it also provides us with another opportunity to transition young people post residence into community sports teams, arts courses and music groups creating new circles of pro social networks aimed at reducing the likelihood of reoffending. Delivered by Michael Moses and Tukunui Nicholson, members of the Residential Maori Leadership Group, Te Ngahere Tautoko, this oral paper aims to give greater context around the Profile 4 Potential and demonstrate the important role of utilising strength based practice while working within a culturally safe space to achieve better outcomes for Maori young people within residential care.

Presentation Time: Monday 30 March 2015 12:00 pm



### Indigenous experiences of the New Zealand Family Group Confernce

### Paora Crawford Moyle, Social Work Supervisor, Moaintheroom Consulting

How Empowering is the Family Group Conference for Indigenous New Zealanders Presented by Paora Crawford Moyle. Māori experiences of the family group conference (FGC) are being overlooked through generalising Māori into the mainstream mix of research and ministerial reports. Māori are 15 percent of the population, half of the total families who participate in FGCs and two-thirds of children in the care of the state. If we are to understand this disproportionate participation, then it makes good sense to directly engage with Māori about how they experience the FGC.

This paper will present a selection of findings from a MSW research project, together with preliminary findings from a current PhD project. The MSW research explored the FGC views of very experienced Māori practitioners. The PhD research explored whānau Māori experiences of the FGC. Findings showed that participants viewed the practices within FGCs as biased, demonstrating a lack of cultural competence and contributing to significant barriers that whānau Māori face in FGC practice.

For both projects, the principle methodology was Māori-centred using qualitative tools. Informal individual, semi-structured interviews were the main information collection method. A thematic analysis of participants' experiences was undertaken. Social work clinical practice requires findings that make researchers and policy advisors aware of the range of drivers and explanations for Māori overrepresentation in the youth justice and care and protection systems. Only research that directly engages with Māori, such as this project, will provide valid findings towards this goal.

Presentation Time: Wednesday 1 April 2015 7:30 am

### He aha ai? Say what? Engaging cross-culturally with reluctant adolescents and their families.

### Kiritapu Murray, Clincian, Barnardos NZ & Deb Smith, Social Worker, Te Poutama Ārahi Rangatahi

The Boy, with his eyes that didn't match his mouth, his socks that didn't match each other and his memories that were mismatched more than everything else combined. The Boy. The boy who scowled, grumbled, and groaned; who hissed, punched, and growled. The Boy, who no one could put their finger on what was wrong with, who was never quite right, who never seemed to fit. That may be how you see him, or how he thinks you do. The Boy, who had fought for his survival, who could not recognise or trust the foreign invitations to engage, who held strong to genetic memories of tikanga that his current circumstances may have confused. He is gorgeous and capable, and terrified of the world, but most terrified of showing his fear. The boy whose tears were stuck behind a dam of shame, of loneliness, of fear and loathing. I recognise him because he could be one of mine. The Boy has hope running through his veins; he just needs a bit of help to feel it for himself. You are neither friend or family, you probably will not be a lifelong connection or source of support, so how do you engage meaningfully with the young person and their wider family, and what do you both do to sabotage the relationship? Working with involuntary or resistant clients can be extremely challenging especially when they are from a different cultural background to your own, or to the perceived culture of the agency you work within. Young people and their families want to do what is best for them and their children, but are often at a loss as to how to engage effectively. At Te Poutama Arahi Rangatahi, a specialist residential treatment facility located in Christchurch, run by Barnardos New Zealand and established to provide residential treatment for young men aged between 12-17 years who have engaged in harmful sexual behaviour, we effectively engage with the majority of even our most reluctant families and young people including through family therapy, group therapy and family input into residential, academic and therapeutic services. We would like to share with you some of the tools we use and knowledge we have gained by engaging with these families and the other professionals and agencies who support them. This interactive presentation will share both best practice models and practical applications that may be utilised in your work with traumatised and disenfranchised whanau.

Presentation Time: Tuesday 31 March 2015 3:15 pm

## COPMIA: Children of parents with mental illness and or addiction

### Anna Nelson, Programme Lead, Matua Raki & Dr Bronwyn Dunnachie, Senior Advisor, The Werry Centre

The effects of familial mental distress, problematic substance use and/or problem gambling on children are complex and varied. There are, however, a number of recognised ways in which these issues can potentially impact on the wellbeing of children. There can be harmful effects in relation to poor attachment, family dynamics, neglect and risk of violence, as well as an increased likelihood that children may develop their own mental health distress or addiction-related problems, as children or in later life. Children who are neglected or abused are likely to have poorer physical, intellectual, social and emotional outcomes, and are more likely to be placed into care and protection outside of their home. Parental mental distress, problematic substance use and/or problem gambling is however not incompatible with being a good parent and many families experiencing these difficulties have great strengths and resiliency. There is, however, significant potential for early intervention to build on the strengths and resiliency of children who may experience difficulties as a result of their parent, family or whānau's circumstances and to intervene before potential problems arise. It is clear that many mental health, emotional and behavioural problems can be prevented before they begin if we are able to intervene early in the lives of children who may be at risk. Adult mental health and addiction services are ideally positioned to be able to intervene early with service users who are parents and their children. Many professionals working in these areas, however, report a lack of confidence and knowledge about working with parents, families, whānau and children in a family and whānau inclusive way. New Zealand's Ministry of Health has tasked New Zealand's mental health and addiction workforce centres with writing a COPMIA implementation plan that will provide clear guidance regarding future COPMIA workforce development initiatives.

Presentation Time: Tuesday 31 March 2015 4:45 pm

### Heart of the matter: Transitioning from state care requires more than simply meeting material needs

#### Amee Nicholson, Manager, Dingwall Trust

This workshop seeks to explore what is required in practice to actually prepare kids for life outside of state support. Until kids feel connected, valued and have an increased sense of self-worth, a bunch of independent skills do little to motivate them to actively engage in making positive life choices. Kids transitioning from state care have typically experienced trauma, multiple placements, a fractured education and disrupted attachment, subsequently leaving them ill prepared for independent life overnight. As we know, the cost to the state of exiting underprepared youth into the world is significant. The right interventions at the right time go some way to influence our care leavers trajectory. Launch Care to Interdependence have developed a model of practice and approach that seeks to address underlying issues, which in turn lead to better material outcomes. This model highlights the importance of ensuring there is service capacity for building and maintaining relationships with the young people. The journey that took us to this conclusion will be explored in detail and recommendations made to enhance effective transitions practice.

Presentation Time: Tuesday 31 March 2015 7:30 am

# Introducing...'Ripple' - An app for assessing how vulnerable kids are doing right now

### Gregory Nicolau, CEO, Australian Childhood Trauma Group

Aim: The Challenge: How might we ensure the care teams of a children with a history of child abuse are able to stay connected and measure the incremental changes in their wellbeing in real time while implementing therapeutic interventions that create an environment of healing?

Background: After 30 years working with children who have experienced trauma, Gregory Nicolau, CEO and Consultant Psychologist, Australian Childhood Trauma Group realised that for interventions to be effective, the child has to be at the centre of the therapeutic work.



He believed that if we could see how infants, children and young people are travelling on a number of developmental parameters, in real time, then we could pick the best time to try new things and ensure timely and effective interventions. However, he also realised that very often the adults (Care Teams) charged with the responsibility to create a healing environment are restricted in their ability to stay connected and informed about the child's progress. Thus was born RIPPLE™ Ripple™ is an innovative benchmarking tool that allows predetermined measurables to be assessed and tracked over time. Ripple™ can be utilised by an individual or team to appraise the wellbeing of a person, group or organisation and real time notifications and alerts provide critical information that may be actioned more immediately when necessary.

Presentation Time: Monday 30 March 2015 5:15 pm

## Sexual violence prevention education: Some messages from research

### Dr Eileen Oak & Dr Shirley Jülich, Senior Lecturer, Massey University

This paper presents an overview of the international research and literature on sexual violence prevention education (SVPE) in schools. Drawing upon international concepts on primary prevention, it interrogates existing models of SVPE to argue that current provision is inadequate in addressing and preventing sexual violence due to the lack of holistic and integrated curricula frameworks. It argues that unless sexual violence is addressed on all levels, such education will not render primary prevention. It draws on what works in international literature and uses this to consider the social work practice implications of developing holistic, primary prevention sexual violence prevention education in schools.

Presentation Time: Sunday 29 March 2015 1:30 pm

# The extent of repeat involvement with child protection: A review of the literature

### Olivia Octoman, PhD Student, Australian Centre for Child Protection

A/Prof Leah Bromfield, Prof Fiona Arney

Repeat involvement with child protection is a widespread and significant problem in Australia. Nationally in 2012–13, approximately 90,000 more notifications of child abuse and neglect were recorded than children who these notifications relate to. This indicates that some children are the subject of multiple child abuse and neglect notifications; however, the number of children subject to multiple notifications is unknown. This paper aims to establish an estimate of the proportion of children who are the subject of repeat involvement with child protection. A systematic literature search will be conducted to identify studies that have the potential to detect children who have multiple child protection reports. This search will seek primary studies of child protection data that in design are longitudinal or have follow-up periods. An initial scoping search highlighted that repeat involvement with child protection is prevalent within various Australian and American jurisdictions, with between 2.7 percent and 67 percent of children reported to child protection two or more times within varying study periods. This paper will discuss the prevalence, proportion and the methods used to identify children who are reported to child protection multiple times. Repeat involvement with child protection is a prevalent and significant problem. A small population of children constitute a large proportion of child protection cases, which has clear implications for demand management and child protection practice. This paper will provide a better understanding of the extent of the problem, which will aid the development of evidence-based approaches to assisting these children that are most at risk.

Presentation Time: Tuesday 31 March 2015 4:15 pm

# It takes a village ... an experiment in working across disciplines for better outcomes

### Christine Olsen, Operations Manager Upper North & Manu Joyce, Service Manager Auckland Central/South, Barnardos NZ

Barnardos had a vision to create a collaborative approach with wraparound services for whānau and communities. With Barnardos unique blend of social service expertise and early childhood education, we are able to provide universal, targeted and restorative services that ensure we are responsive to children and whanau. The scoping of the project was underpinned by The White Paper for Vulnerable Children and focused on meeting the aspirations of vulnerable families and communities. By placing social workers in Barnardos' Early Learning Centres, Te Korowai Mokopuna is attempting to find alternative and creative ways to reach and engage vulnerable families who would not traditionally seek support from a social service. Each centre has a whanau room, which is being developed into a resource hub where parents can access advice, advocacy, support and education. The communities where the project is operating have a high mix of cultures with varying needs and high deprivation. By providing responsive, tailored, wraparound support and outreach with social, educational and health issues that arise, the project seeks to ensure that children living in vulnerable families have their needs met, are able to participate in their local community and fulfil their potential, thus reducing disengagement and barriers to moving out of poverty. The project aims to ensure children involved are safe, learning and really valued in their family and community. This presentation will illustrate the journey of the project and demonstrate how social workers within an early childhood setting make a difference to whānau engagement. We will share the narratives of some involved on the impact of the Korowai Project from their perspectives.

Presentation Time: Tuesday 31 March 2015 11:00 am

### Reforming foster care in Australia: A process of developing a new model of carer support, education and payments

### Anita Pell, Senior Advisor, Home Based Care, Berry Street Victoria

Australia, like many countries, is experiencing major difficulties attracting and retaining foster carers. The number of children coming into out-of-home care in Australia is increasing, with children in care presenting with more challenging behaviours and special needs and at the same time, carer numbers are decreasing. These factors give rise to the question as to whether the system of volunteer fostering is viable, or should consideration be given to a more professional approach to fostering? Berry Street, a large nongovernment agency in Victoria, Australia, proposes a model of professional therapeutic care—Reforming Foster Care In Australia: A new Model of Carer Support Education and Payments. This presentation will outline the various components of the therapeutic model, emphasising the enhanced role of foster carers as more pivotal members of the care team, including changes to carer remuneration, training, support and professional development. We will discuss how through a process of acknowledging practice challenges in this area, we progressed to policy development and advocacy for change.

Presentation Time: Monday 30 March 2015 11:30 am



# 'Words from the young' (Workshop about youth suicide and the way youth and adults interact)

#### The RAID Movement

We are The RAID Movement, here to present unique and relevant youth perspectives in order to enlighten older generations of the struggles experienced by young people in this generation. We are a youth suicide awareness initiative and our motto that we follow with integrity is 'Life Over Everything'.

We will utilise Spoken Word (rap poetry) to convey eyeopening messages based around youth issues such as bullying, depression and mental health—all of which culminate and result in the loss of innocent youth to the epidemic of suicide. After performing our pieces and presenting more information about the day-to-day operations of The RAID Movement, the workshop will take place.

We hope to draw those participating into a deep thinking space, which will allow them to step in to the shoes of a young person, so to speak. Therefore, creating a deeper understanding between youth and adults interacting together.

Presentation Time: Tuesday 31 March 2015 3:15 pm

### Puawaitahi in practice

Dr Meera Raithatha, Paediatrician; Claudine Hutchings, Social Work Practice Supervisor, Te Puaruruhau – ADHB; Detective Darrell Watt, Child Protection Team, New Zealand Police & Annette Vete-Pia, Kaiatawhai, He Kamaka Waiora

Puawaitahi will present an oral paper to demonstrate how a multi-agency service can work together. This will be illustrated by working through the management of one actual complex case of inflicted injury in a young child. Puawaitahi, which means 'blossoming in unity' is a multi-agency service located in a single building at 99 Grafton Road, central Auckland. The service has been in operation since November 2002. It includes a Multi-Disciplinary Team from Starship Children's Hospital made up of nurse specialists, paediatricians and social workers and known as Te Puaruruhau ('Sheltering the bud'); the ADHB Child Youth and Family Liaison Social

Work Practice Leader; the ADHB Family Violence Team; the Auckland City Police Child Protection Team (eight Detectives); the Evidential Video Unit for central, west and north Auckland (managed jointly by the Police and Child Youth and Family) and the Specialist Services Unit of Child Youth and Family (clinical psychology and psychotherapy).

Our presentation will follow the case from initial referral to final outcome, including some insight into how formal interagency discussions take place. We will talk about the referral process, multi-disciplinary and multi-agency allocation meetings, multi-agency case conferencing, whanau hui, multi-agency discharge planning and the assessment and interview of older siblings. We will show the relationship to the Gateway clinic and other services. We will weave through and highlight points for reflection of culturally respectful response to families. We hope to show how cross-cultural processes and how responding to the needs and differences of this particular family had a part to play in the final outcome. This promises to be a practical and informative presentation with opportunity for discussion, reflection and ideas for innovative ways of workina.

Presentation Time: Wednesday 1 April 2015 2:00 pm

## Documenting birth family contact visits: Quality issues

### Rejani Rajan, Student, University of Western Sydney

Dr Stephanie Taplin, Dr Terrance Sloan

Birth family contact (BFC) visit is a relatively unchartered research area. Most literature focuses predominantly on the experience of children in long-term OOHC and some reference to BFC visits. Research showed mixed results in relation to visitation with birth family and restoration; with some documenting disturbances in placement stability. In New South Wales, BFC visit is promoted for children in the interim care of the Minister in order to assist with restoration, to maintain positive relationship with parents, to retain a sense of connectivity with the pre-placement community\ and to preserve their identity.

The aim of this paper is to identify if BFC visit reports capture these information to facilitate decision making. For this purpose, the researchers have conducted document analysis of a small sample of contact visit observational reports and meeting records documented in the CS client database supplied by the CS Data Management Team. The researchers came across several data quality issues including incorrect, incomplete and inconsistent data entries in both



CS meeting records and contact visit observational report completed by contact supervisors. Additionally, there were qualitative differences in the information entered within and across reports. These allude to a training need for contact supervisors to understand the importance of documenting significant information when supervising face-to-face contact visits. A uniform contact supervision format is required to facilitate similar information entry by contact supervisors and training to use the format, which the researchers propose here.

Presentation Time: Tuesday 31 March 2015 12:00 pm

Results and Conclusions: Of children reviewed, most were getting speech pathology intervention, a third were getting occupational therapy and psychological intervention. The majority of children had improved in their developmental health. Identified risk and resilience factors related to child, carer and home characteristics; some were not amenable to change. Caseworkers and therapists identified elements of good practice from a trauma-informed and culturally respectful perspective and challenges delivering such a service in a large metropolitan area.

Presentation Time: Tuesday 31 March 2015 4:15 pm

# Developmental health and wellbeing of Australian Aboriginal children in out-of-home care: Are we making a difference?

Dr Shanti Raman, Community Paediatrician-Child Protection, South Western Sydney Local Health District & Stephanie Ruston, Senior Clinician, Clinic Coordinator, KARI Aboriginal Resources Inc

Paul Hotton, Sarah Irwin, Phuong Tran, Casey Ralph

Background: Children in out-of-homecare (OOHC) have well-documented health and developmental needs. We have previously established that urban Aboriginal (Indigenous) children in care have unmet health and intervention needs. In metropolitan Sydney, KARI an Aboriginal community organisation, provides culturally respectful scaffolding and support to Indigenous children in OOHC including multi-disciplinary clinical assessment and intervention.

Aim: We wanted to determine the health and developmental needs of a subset of children in OOHC with KARI, who had been in stable care for at least a year. We wanted to identify child, carer and intervention characteristics that contributed to children doing well. We also wanted to identify enablers and barriers to providing culturally competent intervention using a trauma-informed lens.

Methods: We identified 26 children who had been in stable care with KARI for 12 months. We compared clinical measures and outcomes for these children with results from previous audits. We identified risk and resilience factors in home and school functioning for each child. We also identified enablers and barriers to culturally competent intervention by interviewing therapists and caseworkers.

### Whānau Ora: A new journey

#### Merepeka Raukawa-Tait, Chair of Te Pou Matakana, Te Pou Matakana

Whānau Ora is the process that allows whānau to solve their own problems, but with help and support. Whānau Ora is not a specific program or a service. Whānau Ora empowers whānau as a whole rather than focusing separately on individual family members and their problems. At its heart are New Zealand families who have been empowered to transform their own futures by taking control of their lives. We believe that whānau themselves hold the key to planning their own future, whatever that might look like. We know our whānau are no strangers to family violence and child abuse. Nevertheless we do see their future as positive and living free from violence.

We work alongside whānau to understand what they need to be successful and work with Whānau Ora Partners to meet those whānau needs. We work to create a climate of change and growth so that all whānau can enjoy good health, experience economic wellbeing, be knowledgeable and well informed, culturally secure, resilient, self-managing and able to participate fully in the Māori world and in the wider society. Central to this is a home free from domestic violence and child abuse. Whānau Ora is a journey, not a destination, and is unique for all whānau. Te Pou Matakana will walk beside whānau on this journey. We know that what we do is not just for today, but for tomorrow, so we operate with a view to the future—for future generations of whānau.

Presentation Time: Sunday 29 March 2015 3:30 pm



### Griffith Youth Forensic Service: Showcasing practice and research with Indigenous youth sexual violence and abuse

### Sue Rayment-McHugh, Clinical Leader; Dimity Adams, Clinical Consultant & Dr Troy Allard, Research Leader, Griffith University

Griffith Youth Forensic Service (GYFS) is a Queensland Government-funded program that provides specialist psychological assessment and treatment services on a statewide basis for young people adjudicated for serious sexual offences and their families and communities. GYFS has received over 400 referrals from Queensland courts since it commenced operation in 2001. GYFS operates as part of a broader program of research and practice at Griffith University, focused on better understanding and responding to youth sexual violence and abuse (YSVA). This collaboration involves clinical practitioners and researchers working closely together, to promote applied research collaborations and enhance clinical practice. One outcome of this collaboration has been the GYFS-Neighbourhoods Project, an Australian Federal Government-funded program that is developing, implementing and evaluating YSVA prevention initiatives in two Australian Indigenous communities.

This symposium will include two presentations that highlight the transition from tertiary to primary and secondary prevention activities. The first presentation will outline the GYFS tertiary practice model for assessment and treatment of youth sexual offenders, with a particular focus on its application with Australian Indigenous youth and their families. The second presentation will focus on primary and secondary prevention activities being undertaken in two Indigenous communities, which have been informed by this clinical work. Clinical concerns in these two communities triggered a systematic investigation of the extent and nature of YSVA issues in these communities and highlighted the need for community-level prevention. Informed by this research, the GYFS Neighbourhoods Project developed place-based prevention models that were designed specifically for each context and that are being evaluated using the 'realist' evaluation framework. The development and evaluation of these prevention models will be the focus of the second presentation.

Paper One: Responding to YSVA: A field-based practice model that 'closes the gap' on sexual recidivism among Indigenous and non-Indigenous youth by

Dimity Adams, Sue Rayment-McHugh, Troy Allard and Stephen Smallbone

Research shows that Australian Indigenous youth have higher rates of sexual recidivism than their non-Indigenous peers, even when specialist treatment is provided. This presentation will report the findings from a study that evaluated the impact of treatment provided by GYFS for Indigenous youth sex offenders. By contrast with previous research findings, this study indicated no difference in sex offending recidivism rates between Indigenous and non-Indigenous offenders. The core components of the GYFS model therefore appear to be well suited to reducing sex offence-related recidivism by Indigenous youth. This assessment and treatment model will be discussed, highlighting the importance of context and community engagement.

Paper Two: GYFS Neighbourhoods Project: The Development of Place-Based Models to Prevent YSVA by Sue Rayment-McHugh, Stephen Smallbone, Anna Stewart, Troy Allard, Dimity Adams

In this presentation, the approach used to develop, implement and evaluate prevention models to address YSVA in two communities will be outlined. Building on established partnerships between local community members, practitioners and researchers, a problemsolving approach was used to identify locally tailored solutions appropriate to each context. How these initiatives are being implemented and evaluated, using 'realist' evaluation methods will be discussed.

Presentation Time: Tuesday 31 March 2015 7:30 am

### Achieving change: Evolution of a multi-agency response to child protection and family violence

Miranda Ritchie, National Violence
Intervention Programme Manager for DHBs,
Health Networks Ltd; Kati Wilson, National
Co-ordinator Shaken Baby Prevention
Programme, Auckland District Health Board;
Dr Patrick Kelly, Paediatrician Clinical
Director Te Puaruruhau, Starship Children's
Hospital; Dr Russell Wills, Childrens
Commissioner & Paediatrician, Office of
Children's Commissioner & HBDHB; Julie



Arthur, Midwifery Director, Hawke's Bay
District Health Board; Jenny Humphries,
Midwifery Director, Southern District Health
Board; Rebecca Young, Nurse Specialist Te
Puaruruhau Gateway Co-ordinator/Health
Assessor, Auckland District Health Board;
Kate Williams, Child, Youth and Family & Chris
Bush, Gateway Coordinator, Cluster 8
Resource Teachers of Learning and
Behaviour

Helen Fraser, LLB.; Dr Catherine Topham, MB., ChB.; Professor Jane Koziol-McLain, Ph.D., RN., FCNA(NZ),.

New Zealand is the only country with a nationallyconsistent, multi-agency, comprehensive approach to early identification of family violence within the health system. The system evolved from the release of a national Family Violence Intervention Guideline (FVIG) that led to training clinicians in child protection and routine questioning for partner abuse. The program has since evolved and now includes multi-agency intensive case management of pregnant women who are identified with vulnerabilities, a national child protection alert system, shaken baby prevention and multidisciplinary assessments of children in care. The program is a multi-agency collaboration in all regions and underpinned by national standards and quality assurance. The Ministry of Health (MoH) Violence Intervention Programme (VIP), implemented in all 20 District Health Boards (DHBs) in New Zealand, uses a multifaceted approach to implement the FVIG. The VIP supports and funds DHBs to implement the guidelines, with templates for policies, position profiles and referrals, posters, cue cards, training, technical advisors and quality improvement tools including a national evaluation.

The VIP is closely aligned to national strategies for vulnerable children and requires interagency collaboration and quality improvement activities. The National Child Protection Alert System (CPAS) allows DHBs to share known child protection information nationally. The CPAS is being incrementally implemented in DHBs as they establish the required infrastructure. Fifteen of the 20 DHB are now approved; it is expected all will be approved by June 2015. The Shaken Baby Prevention Programme (SBPP) aims to provide effective, simple and consistent education about infant crying, the harm caused by shaking and advice on what parents can do if they are feeling stressed and where they can go for help. Thirteen of the 20 DHBs are now implementing the program; it is expected all will be implementing SBPP by December 2015.

Children and young people removed into the care of the State by Child, Youth and Family (CYF) are vulnerable to multiple adverse outcomes. The Gateway assessment process developed by CYF, MoH, Ministry

of Education and leading clinicians involves gathering information from multiple agencies, a comprehensive face-to-face assessment of the child or young person by specialist child and youth health professionals, and the development of a multi-agency care plan. Gateway Assessments aim is to ensure that all health and education needs are identified and addressed as soon as possible after children enter state care. Maternity Care, Wellbeing and Child Protection Groups (MCWCPG) are DHB-facilitated, multi-agency, multidisciplinary groups that share information about pregnant women with multiple vulnerabilities and jointly plan and implement multi-agency safety plans aimed at ensuring safety of mother and child through the antenatal and perinatal periods through to six weeks postnatal age. Agencies typically include midwifery, police, CYF, addictions, mental health, maternity social work and relevant NGOs. National terms of reference ensure consistently high standards of practice. Fourteen of 20 DHBs currently have MCWCPG. This session brings together clinicians involved in all aspects of the program to discuss their origins, how they link together, the lessons learned and future directions.

Presentation Time: Sunday 29 March 2015 3:30 pm

### TIKA: When psychology meets technology

#### Rehina Rolleston, Clinical Psychologist, TeamTika Ltd

One of the difficulties facing practitioners, particularly within statutory organisations, is how to engage and capture the interest of the young person or adult to not only agree to participate in an intervention but to maintain their engagement once started. An intervention can be anything from counselling, attending school or programs, to reporting to the Social Worker. Another difficulty is getting accurate information about their behaviour between the times the practitioner sees them to better inform the intervention and case management. Current methods don't really cut it. It's time to think outside of the square and use current technology.

The mobile phone is the most widely used piece of technology with our clients. Thus, it makes sense to capitalise on their familiarity with the mobile phone as a medium through which to engage them in interventions. Tika is a newly invented and patented mobile app ready for trialling. It has a world-recognised, cross-cultural psychological model built into it and aims to change a client's behaviour through helping the client make their individualised change plan, operating in real time in the real world, training whanau, friends and/or



community support services when and how to intervene, and streaming encrypted to-the-minute information for effective case management. Tika provides an alternative to future behavioural interventions and case management, and is well suited to clients who are to complete or meet specific conditions required with an organisation's involvement.

Presentation Time: Monday 30 March 2015 12:30 pm

## Creating a fence and closing the gaps: Engaging with men who are violent

#### Jolene Salmond, Team Leader, Barnardos NZ

Family Violence is present in many child abuse and neglect cases and the long-term ramifications for children from witnessing or being a victim of family violence are well known. It continues to be a major area of concern for government and communities, and is regularly highlighted in the media as a blight on Aotearoa's international reputation. RSRT FV is a service delivered by Barnardos and was developed in collaboration with Te Kahui Hauora o Ngāti Koata Trust, Nelson Tasman Pasifika Trust and Relationships Aotearoa and is funded by Family and Community Services Direct Service Funding. We have formed a unique relationship with Nelson Police Family Violence Unit and offers engagement, intervention and connection to services for all male recipients of Police Safety Orders. While there is a pathway for all genders and ethnicities to receive support a focus of the service has been to engage with men, with attention being given to the needs of Māori and Pasifika. We have worked hard to offer a culturally responsive intervention, which is mobile and responsive to the needs of our client group. This includes phone calls, text messaging and home visits (some unannounced) to promote a high level of engagement. Assessments are focused on family violence history and the underlying causal issues. Safety plans are developed to support a reduction in recidivism. Through the development of this initiative, much has been learned about multiagency collaboration, the need for flexibility in service development and in the importance of relationships.

Presentation Time: Wednesday 1 April 2015 2:00 pm

### A tolerance to violence: Addressing the context of apprehended violence orders against young people

### Dr Natalie Scerra, Principal Researcher, UnitingCare Children, Young People & Families

The use of Apprehended Violence Orders (AVOs) against children and young people has been an emergent issue over the past few years. This paper draws on focus groups with youth workers who are trying to negotiate a context where they are working with young people who are subject to an AVO. It is argued that the issuing of AVOs occurs without adequate considerations to the environment within which the behaviours are occurring. One of the key themes emerging from this research is the impact of exposure to violence at different levels in the lived environment, be this within the home, between peers, or in the general community. This exposure leads young people to have a high level of acceptance and tolerance to the use and experience of violence. This was particularly apparent in programs working with a large number of Aboriginal and CALD

This paper will argue that traditional criminal justice responses to young people's violent and challenging behaviours do not appropriately address the complex issues contributing to this behaviour. It will argue that the use of AVOs against young people by a system that doesn't consider or attempt to ameliorate the impacts that their family and community context may have on their violent behaviour, can set young people up to fail and further entrench a culture of violence acceptance. The paper will explore alternative approaches which address causal factors within the family or community.

Presentation Time: Wednesday 1 April 2015 8:00 am

Remnants of empire, beginnings of life: An exploration of caring for vulnerable pregnant Indigenous women in New Zealand, USA, Canada and Australia

### Emma Searle, Senior Social Worker, Malabar Midwives - Royal Hospital for Women

In NSW Australia Aboriginal families are significantly overrepresented with regards to families with child protection involvement. Similarly non-Aboriginal health and welfare practitioners are overrepresented in terms of professionals making decisions about the care and protection needs of these families. Confronted by this difficult reality within her social work practice in a large urban maternity hospital Emma applied for and was awarded a Churchill Fellowship in 2013 to study culturally competent ways of engaging urban pregnant Indigenous women with identified child protection issues within a mainstream hospital environment. Emma will present examples of both the challenges and hope from her Fellowship travels to urban settings in New Zealand, USA and Canada.

Presentation Time: Monday 30 March 2015 4:15 pm

Responding to child sexual abuse cases in the Children's Court of Victoria: Study findings on a problemsolving approach

### Dr Rosemary Sheehan, Associate Professor, Monash University

Child sexual abuse cases present our Children's Courts with distinctive challenges. The highly conflictual nature of child sexual abuse cases means they do not lend themselves to the usual court processes. With this in mind, the Children's Court in Victoria introduced a specialist list in February 2013 dedicated to sexual abuse allegations (known as the 'D' List), with two Magistrates with expertise in the area of sexual abuse assigned to hear and case manage all matters referred to the list.

This paper examines the operation of this approach, a unique example of a court-guided response to the management of child protection matters. The paper presents the findings of the formal evaluation, the nature of the cases presented and what stakeholders found effective about such a problem-solving approach to the adjudication of child sexual abuse matters. It was clear that the specialist list offers better management of the cases in terms of number of hearings and reducing delay (and including a continuity of legal representation for children and adult parties); agreement on issues for the Court to consider and what assessments are needed to assist this; and a greater understanding about what is needed to manage this group of cases. It offers more effective outcomes for children, especially around reunification with their parents and is a material demonstration of the multi-disciplinary contributions that are necessary to resolve child welfare disputes about children. This coordinated process enabled Magistrates to draw on the expertise of welfare and other professionals delivers real benefits to the Court, the Court system and to the families and children.

Presentation Time: Tuesday 31 March 2015 12:00 pm

## Communities of care: Supporting siblings

### Tracie Shipton, Director, Dingwall Trust

This presentation will present the work of a community residential care provider and look at the place of larger institutions in meeting the varying needs of children in out-of-home care. With a particular focus on the needs of large sibling groups, this presentation will explore the benefits and challenges of keeping siblings together when they enter care. Incorporating feedback from children and young people in care at Dingwall Trust, this workshop will provide an insight into life within a large community residential care facility.

Presentation Time: Sunday 29 March 2015 1:30 pm



# Eliminating physical punishment: Progress, challenges and where-to-next?

Dr Anne B Smith, Emeritus Professor, University of Otago; Dr Ian Hassall, Research Associate, Auckland University of Technology; Dr Julie Lawrence, Research Fellow, University of Otago; Deborah Morris-Travers, National Advocacy Manager, UNICEF; Dr Bernadette Saunders, Senior Lecturer and Research, Monash University & Beth Wood, Retired child advocate, UNICEF (formerly)

Until 30 years ago punishing children physically was protected in law almost universally, but currently 42 countries have banned it. New Zealand was the first country in the English-speaking world to remove the defence of 'reasonable force' in 2007. This symposium includes four papers that examine progress towards eliminating physical punishment in Australia and New Zealand, the challenges still to be overcome, and pathways forward. Deborah Morris-Travers from UNICEF will act as a discussant.

Current progress and obstacles in Australia, Presenter: Bernadette Saunders. Twenty-five years on from its ratification of UNCRC, many Australians still defend the use of corporal punishment as 'reasonable chastisement' or 'lawful correction' of their children. UN Committees have periodically condemned Australian governments for not outlawing the physical punishment of children in all settings. This paper will explore Australia's progress toward abolition, its lack of respect for children's rights, and the obstacles to law reform, drawing on a recent content analysis of media coverage of the physical punishment debate, since the Royal Australasian College of Physicians released their policy statement in July 2013 recommending prohibition.

New Zealand, the Region and Progress in Eliminating Physical Punishment, Presenters: Beth Wood and Ian Hassall. Most European countries and several South America and African countries have abolished physical punishment, but in our region (Central Asia, South East Asia and the Pacific), only New Zealand has banned it in all settings. Since the 2007 law reform there has been a significant shift away from support for the use of physical punishment with children. But support for the new law lags behind attitudes about the use of physical punishment. We revisit the factors that enabled the law change, those that that challenged efforts to achieve reform in New Zealand, and some that still challenge us, to recommend a way forward.

Recent Research on Parental Attitudes to Disciplinary Methods, Presenter: Julie Lawrence. Since the change in legislation, there is limited knowledge about the strategies New Zealand parents use in guiding their pre school children to behave appropriately. Utilizing data from an ongoing longitudinal study (n= 802), this paper presents the prevalence of strategies used by families when their children are 6, 12, 18, 24 and 42 months old. The presentation also explores the influences on their discipline practices, the strategies they experienced in their childhood but, subsequently avoid in the parenting of their own children, and the reasons for this avoidance (such as law, own experiences, research).

Changing the Parenting Culture, Presenter: Anne Smith. While the abolition of physical punishment in 2007 was one important step in changing the culture that it is okay to physically punish children, we lost an opportunity to provide education and support for changing parental culture. Children's right to a violence-free upbringing should be given much more attention, and greater efforts made to give parents access to alternative evidence-based positive parenting education. The positive parenting research will be summarised, and arguments made in favour of increasing its visibility along with children's rights education, to meet the views of proponents head on, rather than ignoring them.

Presentation Time: Wednesday 1 April 2015 1:00 pm

### Vaaifetu – A Pacific practice framework for statutory social work

Karanina Sumeo, Principal Advisor Pacific; Nora Liutai, Project Manager, Pacific Strategy; Sifa Moala, Youth Justice Coordinator; Audrey Talima, Differential Response Coordinator; Anahila Lose Kanongata'a-Suisuiki, Site Manager; Loisi Puleiku, Acting Youth Justice Supervisor & Maria Tetini-Luatutu, Youth Justice Manager, Child, Youth and Family

The integration of Pacific cultural values and concepts into statutory social work practice is an important step forward for Aotearoa New Zealand, where the population of some Pacific nations are higher than in their lands of origin. This also supports the core principles of the Children, Young Persons, and Their Families Act 1989 that emphasise the significance of the child's unique identity and relationship with kin. Many Pacific people settled in Aotearoa searching for educational and economic opportunities; others were displaced as

a result of climate change or political disruption. Almost two thirds of Pacific people now living in Aotearoa were born here. Some live with social, economic, cultural and political disadvantages that directly impact the care and prosperity of their children. Life outside the homelands has also contributed to the rapid loss of indigenous languages, families becoming dispersed or disconnected from collective supports, and a weakening of collective unity, agency and responsibility that traditionally sustained vulnerable members. Some Pacific agencies and community structures that form part of the support net now face challenges beyond their capability and capacity, but are important agencies of influence and partners in achieving outcomes for vulnerable children and families. The session will provide an opportunity to share with conference participants about "Vaaifetu", a Pacific practice framework developed by Child Youth and Family (CYF). Vaaifetu combines cultural concepts, human rights principles and social work practice to enhance outcomes for children and their families. The framework was developed in recognition of the strong influence of culture on a child's identity, definition of family, decision making, values, expectations, perceptions, practitioner behaviour, organisations, resourcing, and responses of minority communities to state intervention. The development of the framework was assisted by field evidence that illustrated the need for broader thinking about quality practice, ethnic approaches, the application of legislation, and outcomes. Vaaifetu thus targets both Pacific and non-Pacific stakeholders as potential users.

This workshop on Vaaifetu will encourage reciprocal exchange on the framework and the ethnic approaches within it. The presenters are keen to learn from participants about any comparable frameworks that focus on enhancing the quality of statutory social work with and outcomes for, minority cultural groups. Presenters are also interested in thoughts on the transferrable value of Vaaifetu to non-statutory social work. The workshop will be delivered in two phases. The first part is a presentation of the Vaaifetu framework by the Key presenter, including discussion. The second part consitutes separate and simultaneous workshops delivered by Co-presenters on 6 of the ethnic specific approaches within Vaaifetu. These approaches are: Cook Islands, Fijian and Indo-Fijian, Niuean, Samoan and Tongan. These workshops will be led by the CYF practitioners that developed the approaches, around two presenters per group. The ethnic specific nature of the session will provide the opportunity for dialogue in indigenous Pacific languages. This may enable and encourage engagement and participation from people from Pacific communities.

Presentation Time: Wednesday 1 April 2015 10:45 am

### Manaaki Tangata: A baby's imprint

## Carole Tana-Tepania, Service Manager & Joseph Niuia-Tofa, SWIS Team Leader, Mangere East Family Service Centre

Heidi Lomiwes, Natasha Pokino

Twenty one years ago a baby was found abandoned outside on a bench in a local historical homestead. This was the motivation behind the development of a Family Service Centre and the movement of Manaaki Tangata. Current social work practice is filled with challenges and opportunities from a micro-macro level and vice versa. How do we manage the complex needs and relationships that arise in all points of engagement with clients, colleagues, other external agencies and government institutions? Manaaki Tangata as a movement is a conceptual framework that can be applied to the challenges and opportunities in social work practice today. Manaaki Tangata is an innovative and reflexive approach towards practitioners, teams, multi-agency and inter-professional relationships from a South Auckland community perspective. We define Manaaki Tangata as a way of 'being' in a professional setting. We will present how Manaaki Tangata is currently in action through storytelling.

Presentation Time: Sunday 29 March 2015 4:00 pm

### Ngā Vaka o Kāiga Tapu Pacific community leadership in further addressing family violence

### Liz Tanielu, National Director Pasefika, Ministry of Social Development

Nga Vaka o Kāiga Tapu 'the sailing vessels of sacred families' (Nga Vaka) is a conceptual framework for addressing family violence in seven Pacific communities in Aotearoa: Samoa, Cook Islands, Tonga, Niue, Tokelau, Fiji and Tuvalu. A framework for Kiribati community is currently being developed. Nga Vaka defines and explains meanings of family including the relationship between family members, violence and key concepts and principles that promote family wellbeing for the seven ethnic specific communities. Nga Vaka is currently being used to inform the development of training programs and models of practice to assist ethnic specific practitioners and services providers and non-Pacific practitioners working with Pacific families affected by family violence. Nga Vaka is a strengths-based

### **T** ABSTRACTS

approach. This approach begins with the premise that wellbeing, peace and harmony are states that all Pacific peoples aspire to, and that core aspects of culture are significant in maintaining and restoring wellbeing to families. Nga Vaka is a living document and the first of its kind.

Presentation Time: Monday 30 March 2015 12:30 pm

### Managing suicide risk in a residential setting

### Denise Tapper, Manager Clinical Services, Child, Youth and Family & Nikki Coleman, Clinical Advisor. CASA

Jane Parsons, Kirsty Dempster-Rivett, Rachel Moriarty, Kirsty Louden

Aotearoa New Zealand has eight residences for children and adolescents within the youth justice and care and protection systems. Children and young people within these settings have increased risk factors for suicidal and self-harm behaviours including adverse life conditions such as exposure to trauma, the context of institutional settings, disabilities, low educational achievement, and mental health conditions. Exposure to potential triggers for suicidal behaviour such as relationship losses and conflicts, legal/ disciplinary proceedings, and suicidal behavior of other youth are also associated with this population. Additionally, factors known to be protective against suicidal behaviours are often reduced for this population such as good self-esteem, satisfaction and purpose in life, family support, and positive educational experiences. Staff within residences who come from a range of professional backgrounds (from youth workers to social work case leaders) therefore have the challenging tasks of identifying, assessing and managing suicidal behaviours of young people in their residences. Educational programs for residential staff aimed at increasing recognition and understanding regarding selfharm and suicidal behaviors are recommended as one part of assisting with this.

This presentation will outline the development and delivery of training for the eight Child Youth and Family residences in Aotearoa. These were delivered by clinicians from Clinical Advisory Services Aotearoa who are also involved with delivery of a more general suicide prevention program with young people in Child Youth and Family (The TWB programme). Initial evaluation of the training and next steps will also be presented.

Presentation Time: Monday 30 March 2015 12:00 pm

# Not in isolation: The importance of relationships in healing childhood trauma

### Michelle Taylor, Director & Clinical Psychologist, Blossomtree Psychology

Theoretical advances suggest that trauma experienced during pregnancy, infancy and early childhood impacts the development and organisation of key neural networks in the brain. Infants and children who experience trauma and/or neglect during periods of rapid brain growth and organisation often have lasting neurodevelopmental insults as a result. While they will display the behavioural challenges that we so readily see, many of these children will also have difficulties in functions mediated by neural networks in lower parts of the brain. Often, these clients are unable to benefit initially from traditional talking therapies because they are fundamentally too dysregulated to be able to attend, reflect and think clearly. To be more neurodevelopmentally informed and respectful in trauma treatment and effective in healing, it makes sense to reorganise and regulate these key neural networks from lower parts of the brain to prepare them to benefit optimally from traditional treatments. Principles from neuroscience and neurodevelopment suggest that activities to promote and develop sensory integration and self-regulation capacities now form the foundations of trauma treatment, in particular complex developmental trauma. In 2014 as recipient of the Creswick Foundation Fellowship, Michelle Taylor spent nine weeks visiting five ChildTrauma Academy (CTA) Neurosequential Model of Therapeutics Flagship sites and met with two CTA Fellows in the United States and Canada. This Creswick Foundation Fellowship set out to explore the application of neurodevelopmentally informed interventions in the treatment of childhood trauma. In this presentation Michelle will overview her observations; specifically outlining the variety of creative, sensory and experiential based interventions witnessed in treatment of child clients at these centres, for example, animal assisted therapy, neurofeedback and sensory dosing and breaks. Consideration will be given to the importance of the provision of missed developmental opportunities, including examples of such and ways to think about scheduling intervention for reparation of child trauma. The major reflections, implications and conclusions drawn as a result of the Fellowship will be outlined, specifically highlighting the imperative role of organisational safety coupled with co-regulatory and attuned relationships in the healing of childhood trauma.

Presentation Time: Wednesday 1 April 2015 11:15 am



### Avondale Co-location Model - Government and NGO sectors

### Barbara Thomson, Operations Manager, Child, Youth & Family & Senior Sergeant Scott Leonard, District Family Violence Coordinator, New Zealand Police

Police, Child, Youth & Family (CYF) and Non-Government Agencies (NGOs) have sought to find a methodology whereby the appropriate services can be delivered promptly following family violence incidents. To effect this, agencies share information, triage each case and determine which agencies are best to provide the support and guidance required. Co-location at the Avondale Police Station of a social worker from CYF and SHINE, alongside the Family Safety Team and the Police Family Violence Team, has resulted in the ability to provide appropriate services to families, usually within 24 hours, Monday to Friday. Co-location also provides hot-seat opportunities for other agencies, such as Corrections. Information is provided from the NGO sector and joint visits can be readily provided. Considerations are able to be made regarding the cultural needs of the various client groups. Frequently, swift follow-up by the NGO sector prevents the need for statutory intervention. This reduces the work required in the triaging process for the CYF National Contact Centre and local sites, and enables redeployment of Police time from administrative to front-line duties. Staff safety is also enhanced by information sharing as potential hazards can be identified and managed. The Avondale location presently provides services across three CYF sites. This has been found to promote collegial support between sites, Government and NGOs involved. With a view to the establishment of Children's Teams, it is highly desirable that local agencies have opportunities such as this to become proficient in working together.

Presentation Time: Wednesday 1 April 2015 1:30 pm

# Listening to children's experiences of emotional and psychological abuse: Considerations for child protection and mental health services

### Dr Joe Tucci, CEO, Australian Childhood Foundation

Chris Goddard

The study of the emotional and psychological abuse The study of the emotional and psychological abuse of children is in its fourth decade. In its early stages, it was predicted to become the key organising concept for understanding and responding to all forms of child maltreatment. Yet research interest in the topic has remained low. In particular, there have been very few studies that have analysed the experiences of emotional and psychological abuse from the perspectives of children and young people. This paper presents the findings of in depth interviews with 14 children and young people who were living in out of home care as a result of statutory action to protect them from further experiences of emotional and psychological abuse. In discussing the findings, the paper analyses the following specific themes: the language and constructs that children and young people used to define emotional and psychological abuse; the ways that children and young people described abusive family dynamics; what children believe is helpful and not helpful in responding to emotional and psychological abuse; childrens' recommendations for improving services aimed at helping them and preventing abuse. The implications for practices within child protection and out of home care systems are explored.

Presentation Time: Monday 30 March 2015 5:15 pm



Constructing a child protection policy to support a safeguarding children culture in organisations and institutions

### Dr Joe Tucci, CEO & Janise Mitchell, Deputy CEO, Australian Childhood Foundation

Thousands of hours of evidence of trauma, pain and culpability presented to the current Royal Commission into Institutional Responses to Child Sexual Abuse have left no doubt that organisations have always been and continue to be responsible for enacting a culture that ensures that their own staff and volunteers do not harm, abuse or exploit children who are involved directly or indirectly with the activities or services provided by the organisation. In the past six years, through its Safeguarding Children Accreditation Program, the Australian Childhood Foundation has worked with more than 100 organisations nationally and internationally to strengthen their capacity to protect children and young people. Our experience has highlighted that substantial confusion exists about how to construct a child protection policy that frames the expectations and responsibilities of individuals who work, volunteer or use the services/activities of an organisation. In this paper, the authors offer a blueprint for considering the critical elements of a child protection policy that organisations can use to evaluate and possibly reconfigure or formulate their own. The paper outlines the function of the child protection policy in an organisation; the principles for constructing the policy; and, an example of content for a child protection policy. The authors conclude that if constructed with heart and sensitivity, a child protection policy can shape and define the very narrative about what the organisation stands for in relation to the safety of children and the responsibilities of adults to fulfilling the rights of children and young people more broadly.

Presentation Time: Tuesday 31 March 2015 11:30 am

Tolerating violence against children: Mapping changes in Australian community attitudes about child abuse and child protection over the past decade

### Dr Joe Tucci, CEO, Australian Childhood Foundation

Janise Mitchell

Ecological approaches to the prevention of child abuse argue in favour of strengthening community commitment to children. Yet, there is a paucity of research which seeks to understand public attitudes about violence against children. This paper presents a summary of a series of three major population based attitudinal surveys undertaken over the past ten years in Australia. Using nationally representative samples, the studies have sought to assess the degree to which child abuse is considered a community concern; gauge the accuracy of public knowledge about the extent, nature and impact of child abuse; understand the community preparedness to support changes to laws in relation to the physical punishment of children; and, track community attitudes about the challenges facing children in relation to child abuse and child protection. The paper concludes with recommendations about the nature of public education campaigns required to help generate a greater societal motivation to supporting efforts to protect children from abuse and family violence.

Presentation Time: Tuesday 31 March 2015 3:15 pm



Changing systems, changing brains: Becoming trauma informed within and beyond the walls of residential care in Aotearoa. Reflections on integrating the Neurosequential Model of Therapeutics into a multiagency team context

### Sean Twomey, Team Leader Clinical Practice, Puketai Care and Protection Residence, Child, Youth and Family & Jan Stevens, Assistant Principal, Kingslea School

Puketai is an eight bed Care and Protection secure residential care unit, in Dunedin that provides therapeutic care for children (boys and girls) ages 8 – 16 who are in the custody of the Chief Executive of the Ministry of Social Development. A child's journey into our care is one of multiple placement and school breakdowns, academic lag, chronic and early onset maltreatment, multiple diagnoses, high risk behaviours, unmet health needs, cultural dislocation, and painful family/ whanau bonds. Typically multiple services are involved and their responses can be uncoordinated and fragmented. Our children are square pegs to every service's round hole. Our children have highly complex and individual needs, but they all share a common trauma history characterised by 'overwhelming disempowerment'.

At Puketai we have embarked on a journey to become increasingly trauma informed, through a whole brain based approach to clinical problem solving, integrating the Neurosequential Model of Therapeutics (NMT) into our practice. NMT is a web based assessment, intervention and training package developed by Dr Bruce Perry (Author of The Boy who was raised as a Dog and Born for Love) and colleagues at the Child Trauma Academy. NMT is an evidence based approach that has enabled our team to appreciate how each child's history has impacted on their brain development and function. Through an NMT lens we are able to coordinate interventions to match each adult's role and intervention to the developmental need of each child's brain across settings. Our work occurs within a multi-agency context. I want to share our story of the obstacles and opportunities to integrating NMT into a Multi-agency Team(s). I want to show how we have changed systems, and changed brains and improved outcomes for our children.

Presentation Time: Wednesday 1 April 2015 11:45 am

# Preparing for culturally responsive schooling: Initial teacher educators into the fray

### Dr Greg Vass, Lecturer, University of New South Wales

In this paper, I report on initial findings from my 'culturally responsive schooling project', a study involving initial teacher educators as they prepared for, undertook, and then reflected on, their practicum experiences. The project was motivated by concerns regarding the deleterious effects for Indigenous learners that are associated with recently introduced education policies in Australia. Research has already highlighted the worry that these initiatives may be actively contributing to further disengaging some students from schooling, hence they may be directly responsible for sustaining ongoing inequalities and concerns with the welfare of many young learners. Culturally responsive schooling (CRS) is an approach that can help redress many of these worries because it centrally locates the experiences of learners as an influential dimension that helps explain engagement and achievement. Said another way, CRS actively cares for the wellbeing of young people as students and as people, and finding ways of better preparing teachers to be successful culturally responsive pedagogues is an undertaking that requires urgent attention. This paper reflects on the significance of further challenges however, as the study exposes systemic concerns that have far-reaching effects. While the participants were enthusiastic in their efforts to put into practice CRS, they often encountered a level of resistance from 'gate-keepers' in the form of supervising teachers who all too frequently encouraged them to move away from CRS. The paper then, is seeking to engage in a conversation with, and learn from, a wider community of people that are actively contributing to culturally responsive practices.

Presentation Time: Wednesday 1 April 2015 1:30 pm



### When does obesity constitute medical neglect?

Professor Graham Vimpani, Clinical Chair, Kaleidoscope - Children, Young People's and Families Health Services & Jenny Marshall, Manager Child Protection and Wellbeing, NSW Kids and Families

Wendy Thompson

The prevalence of morbid obesity is increasing in many industrialised countries. Parents struggle with managing children who refuse to engage in exercise or comply with dietary restrictions. Few believe that morbid obesity is a potentially fatal condition. AA was a 10 year old boy from a high risk family who died from the complications of morbid obesity in regional NSW. He first presented aged eight years with obstructive sleep apnoea. Both parents were serious substance misusers (heroin and methamphetamine) receiving treatment from the health service's drug and alcohol program. Their associated health problems and beliefs interfered with their capacity to comply with treatment recommendations. Several notifications to the statutory child protection agency were made over the last two years of his life by Health Mandatory Reporters but the case was one of 70% of accepted "risk of harm" cases that failed to get allocated for investigation because of "competing priorities". His treating team were unaware of what action was taken by the statutory authority following their report. He saw no-one in the treating team for the last 11 months of his life. Following his death, an Ombudsman's review as well as a Coroner's inquest occurred. Several systems issues were identified and a range of recommendations were made addressing interagency collaboration, training needs and improved case management. The case highlights the need for all children's clinicians to have an understanding of the way in which they can engage with child protection systems to further the safety and wellbeing of vulnerable children.

Presentation Time: Tuesday 31 March 2015 8:00 am

Old partners, new accountabilities: Agencies working together for New Zealand's most vulnerable children

The Vulnerable Children's Board, Brendan Boyle, Chief Executive, Ministry of Social Development; Peter Hughes, Secretary for Education, Ministry of Education & Chai Chuah, Chief Executive, Ministry of Health

The Vulnerable Children's Board (VCB) is a new statutory body designed to support government agencies sharing responsibility for results for vulnerable children. The Vulnerable Children Act 2014 is built on the assumption that the best results come from agencies working together and collectively seeing the needs of children in a more holistic and integrated way. The Board is accountable to Ministers to produce a single national integrated plan for vulnerable children. This means the VCB leading a vision for change and sharing a set of priorities. The work is predicated on cooperation, new cross departmental accountabilities, improved information sharing, the coordination of services, integration of practice approaches and a shared data set on children's needs, risks and outcomes. The Children's Action Plan is the embodiment of these changes with the creation of Children's Teams, new approaches to data analytics, improved information sharing agreements, an interagency strategy for children in care and a shared outcomes framework. This presentation will describe the work of the Board and how they will lead change and work together to improve results for children.

Presentation Time: Tuesday 31 March 2015 2:15 pm

### Tihei Mauri Ora: Connectedness

Mere Wallace, Social Worker (MANZSWA), Hokitika Health Centre, West Coast District Health Board

Given the increasing diversity of how we work across multiagencies, multilayered frameworks, hubs and collectives "there is a lack of a simple response to practice where the shared vision is about wellness and wellbeing for all peoples" (Rev Maori Marsden) The purpose of this presentation is to stimulate discussion of how a cultural framework can be integrated into current



and new practices. This is about story telling which is currently appropriate as our histories are conveyed orally through stories, waiata and events. Connectedness is about linking these mediums to the present day in a way that leads and connects theories, thoughts and notions to positive outcomes when turned into practice By looking back we have an imagined world view of the people of that time. We try to reconstruct the positive outcomes that they reached when they integrated Te Ao Tawhito (the old world) with Te Ao Hurihuri (the changing world) Tihei Mauri ora is often heard in speech making, it signals how light came into the world when Tane separated his parents Papatuanuku and Rangi nui (like a new born baby who is taken out of the darkness into the light during birthing). The story teller enables the listener to come out of the night of conflict into the day of peace and resolution meaning they are discovering new or old concepts used in a different way. The real voyage of discovery consists not in seeking new landscapes but in having new eyes (Bushe and Kassum 2005) Darkness and light have a lot to do with being connected. Collectives of people from different agencies come together often to work with clients, they are all in the dark about the issues until shared information connects them to the client. All will not know what each agency does what their kaupapa is, what their kawa and tikanga is. Only when we understand some of these things will we come into the light of new understandings and wisdom. For the client they are in darkness because the mutilayered facets of the collectives and hubs know their agency roles and values and the clients are yet to know. Ma Ihowa Koutou e tiaki e nga wa katoa.

Presentation Time: Tuesday 31 March 2015 12:00 pm

### Ensuring the best fit: Therapeutic intervention with an 'alienated' child

### Debbie Watkin, Psychologist, Child Youth and Family

Transitions equal change, and change equals stress. There is anxiety about the unknown. This is particularly relevant for children with a history of maltreatment. But when the ten year old child being transitioned has an Autistic Spectrum Disorder (ASD), is Muslim and needs to move school, community and mosque, is alienated from, anxious and indeed fearful of his mother who he has been ordered by the Family Courts to now live with, the transition process required a collaborative, scaffolded and coordinated multi-agency approach involving professionals, advisors, family and the local community. The brain of children with ASD is considered less flexible than other brains. When it is fixated on something that it finds enjoyable or entrenched, it has a hard time "flexing" to allow for new tasks or information to come

in. Consistency, patience and attunement to the child's individual religious, cultural and complex special needs were therefore essential in the transition process for this child transition process, particularly regarding the pace for introducing incremental steps of change.

This oral presentation will detail a multi-agency approach that resulted in a child with special emotional and cultural child successfully transitioned from his father to his mother's care; an approach that accommodated and integrated masjid and madrasa, halal not haram, special class and mainstream, visuals and social stories, echolalia and repetition, respect for the judicial process, and the need to maintain connections and relationships while fostering new ones. This case study recognizes the complexities of child abuse and related need to engage across sectors, agencies, technology and professions to accommodate and support the process of working in a cross-cultural context. This presentation will encourage practitioners working with children with complex emotional and cultural needs to consider an integrated, holistic multi-agency approach to meet the child's emotional, social, psychological and cultural needs.

Presentation Time: Sunday 29 March 2015 4:00 pm

### Sustainable change: Stronger families, effective networks, better outcomes

### Veronica Watt & Justin Douglas, Clinical Supervisor, Child, Youth and Family

Claire Brothers

Multisystemic therapy (MST) was developed in North America and has an established evidence base of over 30 years. This licensed treatment program was established in Aotearoa/ New Zealand in 2001 and adopted by Child Youth and Family, initially as a pilot in 2003, as RYOP- the Reducing Youth Offending Programme. Theoretically underpinned by Bronfenbrenner's ecological model, MST was developed to address youth offending and antisocial behaviour and has subsequently developed treatment adaptations (variant specialist areas include problem sexual behaviour, child abuse and neglect and substance misuse). The program provides an intensive home-based treatment of approximately 20 weeks' duration that focuses on the index young person and as many components of their wider systems (family, school, peers, community) as it is able to access and influence. Families/ whanau co-create specific goals and desired outcomes with their therapist and multiagency network. Collaborative respectful working that tackles individual, family and multi-agency barriers and promotes sustainable change and strong functional networks is crucial for treatment success and reducing



negative substantive outcomes. This paper considers the uniqueness of the Aotearoa/New Zealand context, in particular working in a bicultural practice framework while adhering to stringent quality assurance and licensing conditions. The two Auckland RYOP MST teams are comprised of multicultural therapists from diverse professional and personal backgrounds, often working across difference, with regular multimodal clinical supervision. Maori, the Tangata Whenua, are significantly overrepresented in the client group-approximately 60 per cent of all referrals received. A case study is presented here of work with a young Maori man and his family where his needs and multiple stressors were identified and significant improvements noted through building internal and external strengths and resources in a culturally defined practice framework. Wider application and practice lessons are considered.

Presentation Time: Wednesday 1 April 2015 2:00 pm

## The Sphere Model - assessing the impact of trauma

### Nicki Weld, National Social Work Advisor, Stand Children Services

This paper will present a simple model (sphere) to explore the impacts of relational trauma on children and adults along with a template to help with assessment. Developed from a whole of person approach, the sphere model helps identify what areas of wellbeing have been most impacted on by trauma and also where strengths may be present. This enables more specific and targeted intervention plans to be developed to assist with recovery from relational trauma and support overall well-being.

Presentation Time: Tuesday 31 March 2015 3:45 pm

### Boss Of My Body

### Richard Wells, Sergeant & Jennifer O'Mullane, Executive Office, LDAG Inc

The Boss of My Body DVD is the result of initiatives put in place after it was identified that there had been an increase in over-sexualised behaviour, substance abuse and antisocial behaviour amongst children within Burringurrah Community. The Skills for Life protective

behaviours program was intensified and students began talking and sharing ideas directly reflecting the core understandings of – you can talk to someone about anything no matter what it is, and everyone has the right to feel safe all of the time. The Boss of My Body DVD was created as a way for the children to share what they had learnt about being the boss of their bodies with other at-risk children. The project has been promoted with the help of organisations such as Local Drug Action Groups Inc. (LDAG Inc.). LDAG Inc. is a volunteer community-based organisation, which aims to prevent and reduce alcohol and other drug-related harms by using the principles of community development (supporting and resourcing community to respond to negative health and social behaviours identified often by government organisations) to support and facilitate the initiation of 'community-action'. 'Boss of my Body' has received numerous awards within Australia and is a leading example of how grass roots projects can bring about real change in at-risk communities. The Boss of My Body DVD can be viewed online here: http://vimeo. com/59970144

Presentation Time: Wednesday 1 April 2015 2:00 pm

# The truth, the whole truth and nothing but the truth: Preparing parents to give evidence in court

Nicki Wickham, Group Work Coordinator, Child Protection Unit & Lori Stanmore, Senior Health Clinician, Joint Investigation Response Team, Sydney Children's Hospital

Children and their non-offending parents face many challenges and obstacles as they navigate the child protection, forensic and justice systems following the disclosure of child sexual assault. In addition to the trauma of abuse, disclosure may be the beginning of a process which, despite its aim of providing assistance, support and justice, in fact may add to the trauma of the abuse. The role of a Joint Investigation Response Team (JIRT) Senior Health Clinician (SHC) was introduced in 2011 - bringing a sole health practitioner at a management level to every JIRT office in NSW (23). This role aims to facilitate the reduction in trauma for child victims and their non-offending parents in the investigative phase, improve interagency collaboration and information sharing across three distinct government agencies – Police, FACS and Health. In NSW once abuse has been substantiated by an investigation



children are referred by the JIRT SHC to the Child Protection Unit or Sexual Assault Services for counselling. Due to an increase in matters proceeding criminally, our JIRT SHC and the CPU Group work coordinator have been able to introduce a collaborative group work component to court preparation. We plan to discuss how this collaborative approach to court preparation and support benefits the clients of our service who are facing the challenges of the criminal court system.

Presentation Time: Tuesday 31 March 2015 11:30 am

The role of the supervising social worker in promoting outcomes for fostered children through culturally responsive supervision and support

### Mariesa Williams, Senior Practitioner; Angie Simpson, Director & Holly Nahu, Supervising Social Worker, Key Assets

When placed in foster families, children who have experienced trauma from abuse and neglect frequently behave in ways that challenge and exhaust their foster carers skills and resources. Without support, foster carers experience failure, end the placement and the child moves on again. Studies indicate that foster carers who have a positive relationship with their Supervising Social Worker can and do work through serious crises with a fostered child. Oftentimes, because the carer has safely met the child's need through the crisis, this is the time when a healthy attachment begins in their relationship. Evidence from both practice and research demonstrates that the right support at the right time is a significant contributor in preventing foster placement breakdowns and a significant factor in foster carer retention. Bringing together their knowledge of Te Whare Tapa Wha and Key Assets Team Parenting model, Mariesa and Holly present their experience of drawing on best practice to support carers through the good times and through the crises. Mariesa and Holly will talk about how they support foster carers to be culturally aware, working with them to develop the skills and resilience needed to meet the needs of fostered children and not give up. This presentation will include videos of foster carers sharing their stories. They talk honestly about the emotional challenges of fostering, the support they need and the encouraging outcomes their fostered children and young people have achieved because their carers, with the backing of their Supervising Social Worker, refused to give up.

Presentation Time: Wednesday 1 April 2015 11:15 am

Youth resolutions meetings: Innovative approaches to multi-agency and interprofessional working together with mokopuna, children and young people in our community

### Nicola Windle, Practice Leader - Clendon, Child, Youth and Family

Youth crime is often symptomatic of a wider family dysfunction. A key strand of the YCAP plan is Partnering with communities to reduce youth crime. At a local level in the Clendon/Manurewa area a gap was identified in service delivery and assessment of need. Police actions and interventions have not always included consideration of previous care and protection history. An interagency plan was developed to address this based on the following:

- 1. An awareness that a number of families involved with Police Youth Aid do not come to the attention of CYF.
- 2. Police do not always have full information about factors impacting on offending behavior.
- 3. CYF have access to a range of NGO providers that could support a broader pro-social change.
- 4. Information sharing enhances robust decision making, and
- 5. the knowledge that younger siblings in a family group are also at risk of engaging in antisocial/criminogenic behavior.

To address both care and protection and youth justice issues, a weekly meeting between CYF and Police Youth Aid was organised. This has enhanced our joint responsiveness to Young People and their families. Alternative Action plans are strengthened with referrals to culturally appropriate services, and sharing information about trauma histories for Young People has changed the intervention pathway to include referral to services like ACC and SWiS. Pregnant mothers are referred earlier to antenatal services, vulnerable infants trigger a referral for community support, and new Reports of Concern are generated when risk factors are identified.

This initiative is still evolving and is making a significant contribution to delivering the Government's Better Public Services (BPS) target of reducing youth crime, and the wider BPS goals of reducing offending and victimisation rates. The presentation will provide an



overview of the YCAP plan, youth offending statistics for a diverse and challenging community, a summary of key literature, and up to three case studies that illustrate how the meeting has enhanced the effectiveness of the intervention

Presentation Time: Wednesday 1 April 2015 11:45 am

# Reinvigorating family group conferencing: Aligning practice with the promise

Dave Wood, Lead Advisor, Reinvigorating FGCs Project; Andrea Nichols, Principal Advisor, Office of the Chief Social Worker; Peter McIntosh, Lead Advisor, Reinvigorating FGCs Project; Joanne Setefano, Kaiwhakatara, Senior Advisor & Thomas Hohaia, Kai Whakatara / Senior Advisor Counties / Manukau Operations, Reinvigorating FGCs Project, Child, Youth and Family

Family Group Conferencing, introduced in New Zealand in 1989, has received world-wide acclaim and been adopted in many jurisdictions. Family Group Conferencing was born out of a response to Maori grievances around institutional racism in social policy and practices and the disproportionate representation of their mokopuna (children and young people) in both the care and protection and youth justice systems. Enshrined in legislation, family group conferencing was to be the process whereby families would be empowered to fully participate in decision making in statutory processes relating to mokopuna, alternatives to state care would be supported, families and communities resourced to care for their own and the numbers of mokopuna in care and offending would significantly reduce. After 20 plus years of backslapping and high fiving we have had to have a hard look at how the approach has been delivering on its promise. Our record in terms of child abuse and neglect and over representation of Maori in terms of children in care and youth offending has been found wanting. There had been a loss of government and public confidence in Family Group Conferencing. A series of nationwide consultations told us that overall people love the FGC, but the process had become bureaucratically driven. The Chief Social Worker reported to the Minister in 2012 and a strategy has been developed to reinvigorate Family Group Conferencing.

Objective: This workshop will provide participants with an overview of the Reinvigorating Family Group Conferencing Strategy, describe the key strands of the strategy and then provide an interactive exploration of two of the key strands

- the creation of a set of Practice Standards and
- the creation of a new role, the Kaiwhakatara, to champion the alignment of Family Group Conferencing practice with the Standards.

We will share the journey to date, what we are learning, and our hopes for the future.

Format: A presentation of the Reinvigorating Strategy, the Family Group Conferencing Practice Standards and the role of Kaiwhakatara will be followd by the story of the implementation journey so far. The third presentation component is an interactive session with Kaiwhakatara who will share their experiences.

Presentation Time: Wednesday 1 April 2015 1:00 pm

### **NOTES**

