



Child Abuse PREVENTION

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IN THIS ISSUE

Valuing Families in Statutory Practice	1
Child Protection – A New Approach	5
Video and Audio Taped Evidence Project	7
South Australian Integrated Child Protection Model	8
Workshops and Seminars	10
Informit at RMIT	11
Literature Highlights	12
What's New	24

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Valuing Families in Statutory Practice

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The only avenue toward lasting protection of children except the extreme measure of permanently removing them from the home depends on establishing a cooperative relationship between the parent(s) and caseworker. – Weakland and Jordan (1990:53)

No matter what the theoretical model by which one human being attempts to be of help to another, the most potent and dynamic power for influence lies in the relationship. – Pearlman (1972:150)

Working in statutory child protection, there is often a struggle for the balance between safety of the child compared to the privacy of the family. At even greater odds is the inclusion of some family members and other professionals in child protection investigations, and the exclusion of others.

In the author's experience, some of the 'family-based' practice models available in work with statutory child protection cases are problematic when it comes to assessing risk and safety. Moreover, this is particularly the case where in psychotherapeutic interventions, the assumption made by the worker is that the family is 'motivated to solve the problem, when they may not even accept that the problem exists' (Barber 1991:44).

This specifically applies where the roles male/s play in the family under a child protection investigation are not completely known, thus resulting in these males being defined as 'protectors and/or offenders' (Corby 1987). More importantly, what we know from the literature about working with fathers or father substitutes is that very little work was done with these individuals in casework (Corby

1993:65). Furthermore, child protection workers in child death inquiries have been failing to engage fathers in casework and thus modifying their abuse behaviours (Corby 1993).

This paper will attempt to describe a current practice model that the author has found to be relevant for statutory family-based practice.

Over a number of years, there has been significant media attention here in Australia and overseas that has raised awareness of children who are maltreated. The maltreatment of these children by a male father substitute in the household was a major concern (Armytage and Reeves 1990:131).

The most documented and best known child death in Australia where this has occurred is the case of Daniel Valerio. After many months of being exposed to constant physical abuse by his mother's de-facto husband, Daniel's injuries resulted in his death at the age of two years (*Weekend Australian* 1994:22).

What was also significant in this case was that despite the involvement of more than 21 professionals, the abuse continued to occur. Furthermore, while

the focus remained upon the adults in Daniel's life, it left him vulnerable to further abuse. This led to an acceptance of the perpetrator's explanation and rationalisation regarding the injury.

This phenomenon has been referred to as 'professional dangerousness'. Here, three key devices contribute to underreporting of child abuse: the 'rule of optimism', 'natural love' and 'cultural relativism' (Dale et al. 1986; Dingwell et al. 1983). In addition, significant attention has been drawn to the way 'systems' operate in child protection work with families, and how these 'systems' can also impede effective intervention (Morrison 1996; Howe 1992).

Whatever the process taking place in child protection cases, it is inherently difficult for statutory workers to build partnerships with families under investigation. Regardless of this inherent difficulty, the literature also informs statutory social workers that families have responded better to investigations where there is a direct effort to inform and consult the family (DOHSS 1985:30).

Therefore, the challenge is to rethink our work with families in statutory settings. This is because while professionally we may aspire to ideals about 'cooperation and empowerment', when faced with real risk situations for children, we must act from a position of authority' (Scott and O'Neil 1996).

To re-think what we do 'to' rather than 'with' families under investigation from 'welfare', we have to start from the position that working 'in' families requires a more balanced practice. This practice begins from a stance that does not include notions of deficits or shortcomings. Moreover, valuing families in statutory practice would challenge the notion that child abuse is a pathological problem affecting only a few families and which can be scientifically predicted (Parson 1985:185).

Signs of safety

Signs of Safety: A Safety and Solution Oriented Approach to Child Protection Casework (Turnell and Edwards 1995) evolved from Solution Focused Brief Therapy (de Shazer et al. 1988; Berg 1991; Lipchik 1988) and was influenced by the work of Gregory Bateson and Milton Erickson. In Solution Focused Brief Therapy, the focus is on reframing the problem, identifying exceptions to the problem, and duplicating these conditions to facilitate the client to set achievable goals (de Shazer 1988).

As a current practice model in use with statutory work with families,

Signs of Safety seeks to foster a cooperative relationship between workers and families, particularly where the families perceive a threat to remove the child from the home (Scott and O'Neil 1996:viii).

The basic premise of the Signs of Safety approach is 'to balance the equation' by eliciting the family's perspective on competencies, existing safety and goals. Signs of Safety also requests the statutory agency 'to be exact and explicit on its own safety goals' (Turnell and Edwards 1997:3). This is a direct shift from traditional child protection work where the focus was on an accurate and concise 'risk assessment' only.

Signs of Safety does not negate the need for a thorough and sound 'risk assessment' but rather requires the focus to also incorporate a 'safety assessment'. This is likely to enhance a more purposeful relationship between the worker and the family.

Case study

A key question that arises for most social workers in the child protection field is where to after the 'risk assessment'? This is a common question, especially where the investigation of risk has failed to produce enough evidence to warrant the case remaining open. In the absence of a conversation about 'safety' within the context of the family, we ultimately find ourselves with a situation based solely around 'risk'.

The following case study demonstrates the application of the Signs of Safety approach, and will hopefully highlight three of the 'major practice elements: Position, Exceptions and Goals' (Turnell and Edwards 1997:4).

The family consists of a 25-year-old mother, Anne Smith, a 30-year-old father, Bill Smith and their four children Skye (6), Dew (3), George (2) and Adam (7 months). The family can be described as 'blended', with Skye being a child from another relationship. Skye has an older sister who is in the custody of her biological father.

At the time of the referral, the family was residing in a disused commercial building and living mainly in the basement cellar. The building is owned by Mr Smith's mother and has been a major source of conflict for the family as the Shire has declared the building unfit. Regardless of an eviction order, the family so far has been able to stand its ground.

Early one afternoon, statutory workers from the district office received a telephone call from the school principal. The allegation was that Skye had

arrived at school with unexplained physical injuries. Specifically, these were an infected scald burn present on her chest and a bruise above her right eye. The principal requested that the workers visit the school and investigate these injuries. Workers interviewed Skye, who explained that she had spilt hot water down her chest from a kettle while making her mother a cup of coffee one morning. The bruise, caused by Mrs Smith becoming agitated with Skye when she complained that the burn was hurting, was the result of a glass hitting her over the right eye. Additional information was provided by the principal that Skye has often arrived at school in a dirty state, and that Mr and Mrs Smith were unresponsive to the school regarding welfare matters for Skye. This gave the workers the impression that the school had long been anticipating this visit.

Here, then is the beginning of a 'risk assessment'. Careful attention needs to occur at this point, because it is very easy to be overloaded with the saturation of abuse and associated risk factors. Using the Signs of Safety approach, there is a need to look at *exceptions* to the problem. Exception provides the worker with knowledge about 'safety' (that is, when the problem does not occur). In doing this, it assists the statutory worker to approach the family from a more balanced position.

The first key element using Signs of Safety is to hear the story from each family member and to elicit their *position* regarding the abuse or neglect. The *position* refers to 'strongly held beliefs or values that inform the individual regarding the abuse or neglect' (Turnell and Edwards 1997:3). On hearing the complaint, Mr Smith was defensive. He stated his belief that the workers were part of the Shire Council's attempt to evict the family. The workers emphasised that their focus was on the allegations regarding Skye and appreciated his *position* of wanting to keep his family together.

Listening to Mr and Mrs Smith's position, it became evident that the injuries did occur and they were apologetic about the whole event. Without hesitation, Mr Smith took the workers into the basement and showed them just how the injury may have happened and pointed to the kettle on a speaker box. Mr Smith then immediately removed the kettle from the speaker and placed it out of reach.

Mrs Smith said she did not mean to throw the glass at Skye; it was an accident. She explained that while she was trying to feed Adam, Skye had been demanding her attention for a

glass of water. When she tried to pass the glass to Skye it slipped through her hand and caused the injury. Mrs Smith's *position* on the burn was that it was also an accident, and they had treated the injury using a combination of Aloe Vera and Savlon. They did not feel the injury was serious enough to take Skye to a general practitioner, and were keen to treat the wound with natural remedies.

In summary, Mr and Mrs Smith's *position* on the abuse was that it was unacceptable and that normally they would make every effort to ensure their children were safe. In addition, they took steps to dress the wound and they had given some thought to medical attention, but felt it was not necessary.

Hence, a more balanced assessment of risk and safety was already beginning to emerge by simply listening to the family's particular *position* on the abuse or neglect issues. Once a discovery of the position regarding the abuse, it is necessary to look for *exceptions to the abuse or neglect*. In this case, this occurred by listening to what Mr and Mrs Smith said about the times when their behaviour is protective.

It was clear from the dialogue between Mr Smith and the workers that the cellar provided a mix of 'safety' and 'risk'. Mr Smith said he had been living in the cellar despite the council's disapproval. On observation, the cellar did contain potential hazards for small children. This was an agency and council *position*. There were a number of items including an unguarded pot belly stove and a 90 per cent stairwell without a gate at either end.

At this point, workers undertaking a traditional child protection investigation would have exited from the family with a shopping list of 'problems' that would have, in turn, formed a very one-sided and negative view of the family (Berg 1991:23). The family as a result would have also confirmed its suspicions about 'welfare', and limited future opportunities for the agency to intervene other than in a statutory relationship.

Mr Smith said that subsequent to the visit by 'welfare' his children were safe and always supervised by himself or his spouse. Mr Smith had taken pride in his home and was, whenever the workers visited the premises, doing something to improve the living arrangements.

Consequently, there were *exceptions to the abuse*. *Exceptions* in the Signs of Safety approach refers to 'times when the abuse or neglect could have happened but did not occur' (Turnell and Edwards 1995). In taking the time to amplify the *exceptions to the abuse or neglect*, the worker is detailing safety and acknowledging what the family is already doing well. This is a good base for establishing a cooperative relationship between the worker and family.

Discussion

In child protection work, Turnell and Edwards (1997) state that it is common practice for workers to make clear to the family what things in relation to the abuse or neglect will have to stop. Usually, a conversation with the family about *how* the abuse will stop, *what* will happen instead, and *when* both the family

and worker will know, does not occur automatically.

Therefore, goal setting is a central element in the Signs of Safety approach because it provides direction for the case plan, and further underlines the importance of establishing a cooperative relationship between the parents and caseworker. In this case, the workers informed the family that they would need to return to the office. They explained to the family that to form a balanced assessment, they would need to think about all the information. Turnell and Edwards (1995:46) note that 'where workers devoted time to think about the family's situation, the family have appreciated and welcomed their presence'.

The challenge for the workers returning to the family was twofold: first, how to present to the family what the agency wanted in concrete and specific measurable behavioral terms; and second, to establish whether the family's goals overlap with the assessed provision of 'protection and safety'.

A situation where a preoccupation with 'safety' overrides the family's goals can be a pitfall. This is a common process in statutory practice, especially where the basis of the working relationship contains mistrust, thus giving rise to 'defensive practice' (Parson 1985). However, because there has already been a conversation about safety and risk with the family, it is more likely for the worker to avoid the trap of 'defensive practice'.

There were two specific safety goals for the agency regarding the Smith family. These were that the family

NCH INFORMATION SERVICE

JUDY ADAMS

Thank you to all who completed the National Child Protection Clearing House Evaluation Questionnaire sent with the last Newsletter. Responses were uniformly positive, but it was clear that many members, particularly recent members, know mainly about the Clearing House through its publications. The Information/Advisory facility is valued and heavily used by many members.

An information desk is staffed during office hours to answer queries related to child abuse by telephone,

fax, mail, email, or in person. General queries are handled by the Family Information Centre, and requests for more specialised information are referred to the research advisor. Clearing House staff can draw on the extensive resources of the collection and databases, as well as external online and Internet services.

Staff respond to a variety of queries such as: networking – for example, how to get in touch with another professional in a particular field; literature searches; analysis/inter-

pretation of issues; research methodology; procedures; models – for example, intake procedures for child abuse agencies; evaluation issues; client advocacy; and government policy.

The service is free to Clearing House members. To become a member, contact the National Child Protection Clearing House, Australian Institute of Family Studies, 300 Queen Street, Melbourne Victoria 3000 Australia. Phone (03) 9214 7888. Fax (03) 9214 7839. Email: margi@aifs.org.au

move into safe accommodation while the renovations occur for the cellar, and that Skye (and the other children) were not at risk of future abuse. The family's three goals were that they wanted to remain on the premises, keep the family together, and to have their plans to build a house approved by the Shire Council.

After the assessment of risk and safety, which included agency and family goals, the worker made a judgement using the Safety and Context Scale. As child protection work is an emotionally hot practice with many variables, the scale is one way to give the family and worker some space in the process. As a tool, it provides the worker and family with a picture of where things are at present. Furthermore, it is a shared intervention between the family and worker rather than an invisible task done back at the office.

The Signs of Safety assessment for the Smith family was presented to them as a dynamic portrait of where they were currently, and where they would like to be in the future. Having done this, it was possible to rate the *safety* and *context* on a scale where 10 indicated that Skye's safety was certain and 0 where there was certain to be re-abuse. For the Smith family, the safety was a 6 and the context a 7. This scale was of great help to the family and worker, as the guarantee of complete safety would be unrealistic.

What began as a standard investigation of abuse turned into a situation where the worker and family could meet to discuss and negotiate change. This began with discussion on the condition of the dwelling, and the fact that the family invited workers from the district office to return to the building on more than one occasion exemplified the notion of cooperation.

On these visits, it was still necessary to deliver *compliments* and list in concrete and specific terms work still required on the building. Cooperating with the family's goals and not the abuse (Turnell and Edwards 1995:5) was a central feature of each visit. While the worker's role clearly was not as a building inspector, it was still pointed out to the family that there were items that posed a risk to the children.

In addition, Mr Smith, being a builder by trade, was able to show the workers proudly the repairs done to the cellar. Although the family disagreed with the agency's goal of alternate accommodation, with assistance from the in-laws, the family did purchase a caravan to come to a compromise with the agency's goal. Furthermore,

the worker was able to support the family in its submission of plans by writing a letter to the Shire Council, despite the fact that the agency could not provide direct legal assistance.

Moreover, no further reports were received by the agency in relation to the children's welfare. Despite the progress made by the family, it must be highlighted that this family could not be described as a 'success story', even though by using the Signs of Safety approach the child was able to remain at home. Indeed, there were many times where cooperation between the worker and family was tenuous and fraught with dilemmas. This included the substantiation of the abuse and subsequent register of Skye on the Child Protection Services Register.

In conclusion, applying the Signs of Safety approach in statutory casework the main objective is to establish a cooperative relationship. To some extent, this cooperative relationship was achieved between the worker/s and the Smith family by balancing out the 'safety' and 'risk' and looking for *exceptions* to the abuse or neglect.

Rarely in child welfare do we come across 'happy ever after' stories and only time will tell if Signs of Safety was effective for the Smith family.

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CONTRIBUTIONS TO THE NEWSLETTER

We wish to thank contributors to this and previous NCH Newsletters.

The National Child Protection Clearing House welcomes the submission for consideration of short articles (1000-2000 words) on child abuse prevention issues, and news items and details of initiatives, meetings, training courses and so on, for publication in the Newsletter. Publication will be subject to review by the Institute.

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A New Approach to Child Protection

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The ever-increasing demand for child protection services has sparked a debate in Australia, the UK and USA about the best way to target intervention to those children and their families in greatest need.

The move toward a new model of child protection in the UK and Australia (Tomison 1996) is based on an analysis of the current situation that is comprehensive and persuasive, but also somewhat one-dimensional. The author believes that child protection service providers should be cautious in interpreting the 1995 research from the UK with its strong emphasis on children's needs; that developments in the USA concerning safety and risk issues demand equal attention; and that child protection systems will only be enhanced if they embrace all three aspects of children's welfare: danger/safety, risk and needs. Finally, the author outlines the current application of this integrated approach to statutory child protection work in South Australia.

The Problem

Common themes emerging from recent analyses of child protection systems in the 1980s and 1990s are that:

- statutory agencies are 'struggling to cope with ever-increasing numbers of reports of suspected child maltreatment' (Tomison 1996);
- agencies are 'casting the net too wide' (Bullock et al. 1995) and intervening in families where parental behaviour is problematic rather than abusive;
- 'forced to allocate a substantial portion of their limited resources to unfounded reports, child protective agencies are increasingly unable to respond promptly and effectively where children are in real danger', (Besharov 1987);
- the investigative approach to child protection is largely ineffective and inefficient (Gibbons, Conroy and Bell 1995);

- a broader needs-based focus is required to identify and treat really harmful families whose parental behaviour can be characterised by the phrase 'high criticism, low warmth' (Bullock et al. 1995).

Increases in Child Maltreatment Reports

There is no disputing the relentless increase in child maltreatment reports in most jurisdictions in Australia, the UK and the USA. Numerous official records and other studies confirm the gloomy picture of rising notifications and restricted government resources. However, the interpretation of these trends is less clear cut. Has there been an increase in child abuse and neglect? or is the rise in reports due to increased community awareness? No simple answer can be given to these questions, but there are clues.

First, there are signs that the relative reporting of different types of maltreatment is changing. Clearly, the public's perception of child abuse changes over time and reflects the evolution of community values and intermittent public scandals involving avoidable child deaths on the one hand (for example, Maria Colwell in the UK, Daniel Valerio in Melbourne, Elisa Izquierdo in New York), and overintrusive interventions on the other (for example, Cleveland and the Orkneys in the UK, Children of God in Victoria and NSW).

The 1980s saw a dramatic increase in the reporting of child sexual abuse, just as the 'discovery' of the 'battered child syndrome' led to increased reporting of physical abuse in earlier decades. More recently, the growing awareness of the effects of family violence and substance abuse on children has led to increased reporting of neglect and emotional abuse. In South Australia, since 1992, reports of sexual abuse have not increased and physical abuse notifications have risen by 50 per cent, whereas reports of neglect have doubled and those of emotional abuse have risen almost four times.

Second, there is the issue of re-notification and its effect on the overall increase. Departments tend to focus on the number of notifications received in a given period rather than on the number of children being notified, and there may be significant increases in the former without equivalent rises in the latter if sufficient numbers of children are re-notified.

The issue of re-notifications has been documented on both sides of the Atlantic with Gibbons, Conroy and Bell (1995) reporting a 45 per cent re-notification rate in the UK, and English (1994) finding lower but significant re-notification rates of over 30 per cent in the USA.

An unpublished study of re-notifications in South Australia (Gianakakos and Hetherington 1996) revealed that the increase in re-notifications accounted for almost the entire increase in total reports for 1994-96. First time notifications rose by just 2 per cent while re-notifications increased 48 per cent. Moreover, about 20 per cent of total notifications in 1995 were on children who were being reported for at least the fifth time, and this proportion of the total was rising yet more rapidly.

An in-depth analysis of reports received in a two-week period in 1996 with five or more prior notifications (49 in all) revealed the majority were high-risk multiproblem families characterised by substance abuse, intermittent family violence, significant instability and frequent short-term departmental intervention. In this sample, some children had been notified as many as 20 times in the previous five years. Surprisingly perhaps, there was no clear evidence of reports increasing in severity/frequency where the department failed to respond, or becoming less significant when the department intervened significantly. Indeed, the general pattern was one of serious, intractable and complex family problems that were largely immune to intervention. A significant and increasing number of

such families is likely to distort the apparent overall trend in maltreatment.

Casting the Net Too Wide?

Several recent researchers have concluded that statutory child protection services have become overintrusive by investigating families where 'the harmful intent of parents towards their children was not much in evidence; abuse was more a question of failings, negligence or over zealous and inappropriate controls' (Cleaver and Freeman 1995:138).

David Thorpe takes the argument one step further and postulates that child protection has become 'a means by which the private lives of those who struggle to bring up children in difficult conditions are made public and what is made public is more often than not a misrepresentation of what is required' (Thorpe 1994:202).

Gibbons, Conroy and Bell (1995:110) question not only the extent of investigation but also the outcomes of investigations for clients: 'on average some 6 out of every 7 children who entered the system at referral were filtered out of it without needing to be placed on a child protection register. In a high proportion, 44% of those actually investigated, the investigation led to no actions at all. There was no intervention to protect the child ... nor were any other family support services provided'.

The conclusion drawn by the Dartington Social Research Unit in summarising the UK research is that child protection systems should refocus on the issue of children's needs and the cumulative harm to children caused by destructive family environments (for example, high criticism, low warmth) rather than on the investigation of individual incidents of reported abuse (Bullock et al. 1995).

As Tomison (1996) points out, much of the current thinking on child protection advocates a 'family support' framework and aims at 'addressing family problems holistically'. This benign reframing of the task focuses squarely on needs and underplays the other roles of statutory child protection that may conflict with the partnership endeavour. Statutory child protection departments must ensure the safety of children in imminent danger and reduce the risk of future abuse to children, as well as addressing children's and families' needs.

In particular, there are two aspects of the proposed needs-based approach to child protection that require clarification. First, how should the system

distinguish between reports requiring investigation and those requiring support? Second, how can the system ensure consistency (interrater-reliability) between the assessments of workers making such distinctions?

If the uniform investigative response to child abuse reports is problematic, then a differential response to child maltreatment reports is surely the way of the future. However, such a system must operate within a conceptually sound assessment framework that has been researched and/or tested for its reliability and its predictive validity.

An Integrated Approach to Child Protection

Ultimately, the success or failure of a child protection system depends on the level of resources, and its ability to target resources toward children in immediate danger: those at highest risk and those in greatest need. The long and difficult search for accurate assessment frameworks to assist agencies in these tasks may be far from over, but there have been significant developments in the last few years.

At the point of investigation, the safety assessment tool first developed in New York is now being used in several other large USA cities (Chicago, Detroit and Atlanta). Various states also use child needs and family needs assessment tools (Rhode Island and Michigan). A comprehensive child needs assessment framework has recently been adopted widely in the UK for children in alternative care (*The Looking After Children Project*, Ward 1995).

Risk assessment has been on the agenda in North America for a decade and a recent evaluation of the risk assessment models developed during the 1980s concluded: 'although the current level of predictive validity for the models evaluated would not allow for major dependence on them for case decision making, the research on actuarial models, such as those used in Alaska, Alameda County and Vermont, is somewhat encouraging (Lyons, Doueck and Wodarski 1996).

The 'structured decision making' model of child protection (Baird and Caskey 1995), currently adopted in Alaska, Georgia, Michigan and now being introduced in California, is a major advance on previous models as much for its elegant conceptual framework and user-friendliness as for its reliance on the most up-to-date research.

A three-year study on the predictive validity and interrater-reliability of three risk assessment systems is currently being undertaken in the USA and the reliability analysis has been completed. This shows that whereas the consensus risk assessment systems used in California and Washington achieved full agreement (100 per cent) between raters in less than one in six cases, the actuarial model used in Michigan achieved full agreement in almost 60 per cent of cases (Baird 1997).

In addition to developments in risk assessment, there is increasing interest in the USA in differential response models of child protection, including the diversion to community agencies of low-risk reports. Several differential response systems are currently being piloted, but the archetype of these initiatives is the alternative response system started nine years ago in Washington. Research in that state has convinced administrators that there is no significant additional risk involved in diverting low-risk notifications to specially funded community agencies.

'The data indicate that most families entering the system and classified as low risk do have problems, but the vast majority are not confirmed for child abuse/neglect' (English and Aubin 1991).

Whatever the state of the art, there is little doubt that formal assessment frameworks: (1) operationalise good casework practice; (2) provide a consistent basis for classification of cases into risk-related groups and thus, facilitate prioritisation; (3) can effectively serve as a basis of worker training; and (4) can provide more readily accessible information in the case record (Cichinelli 1990).

There is also sufficient research evidence to suggest that without systematic frameworks, social workers are not especially skilled at distinguishing between abusing and non-abusing caregivers (Starr 1987) and are inclined to underestimate the dangers to children in families with whom they have had long-term involvement (Farmer and Owen 1995).

Researchers at the Chapin Hall Center for Children in Chicago (Ross et al. 1996) recently examined decision making on 70 serious child abuse cases by over a hundred child protection workers and 30 'experts'. They concluded that professional decision making in child protection is inconsistent and unreliable: 'Extreme cases are always easy, the test of a decision making process lies in the middle cases. Such families are subject to the

Video & Audio Taped Evidence Project

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The Victoria Police Youth Advisory Unit was established in 1993 to develop, coordinate and integrate police-youth programs and provide advice on police-youth issues. The development of the unit is an acknowledgment of the rights and needs of young people, their need for special care and consideration, and the continued commitment to improving the relationship between police and young people.

The unit's vision statement is: *To live in a community where young people and police have mutual understanding and respect for each other's rights, roles and responsibilities.*

The Video & Audio Taped Evidence Project (VATE) involves the video recording of complainant statements rather than documenting the statement in a written form. The process is available for children or mentally impaired persons who have been witnesses to, or victims of, a sexual offence or an indictable offence involving injury or threat of injury to

a person. The process aims to afford these witnesses better access to the criminal justice system, and reduce the trauma associated with giving evidence.

Legislation allows that this statement may be later admitted as the evidence-in-chief in a court hearing. The witness must still be present to be cross-examined. However, it is possible to conduct this cross-examination via the remote witness facility (closed-circuit connection to a near by room).

Community Policing Squad members are the core group of police officers trained in conducting the statements. Statewide implementation is now complete with 29 permanent interview suites located at Community Policing Squad offices across the State.

The use of the statements as evidence-in-chief is being closely monitored by the VATE Project Team and, to date, four witnesses have had their evidence-in-chief led via video

statements. All trials resulted in convictions. Video statements have been used as evidence at Magistrates' Court hearings, Children's Court (Criminal and Protection matters), Family Court of Australia and Crimes Compensation matters.

The VATE process allows a witness to demonstrate how an offence has occurred when they may not be able to describe the incident in words. It allows for the demeanour and size of the witness to be documented at the time of the complaint, and is an open and accountable method to document the complaint. The necessity for repeated interviewing by various professionals involved in a case is greatly reduced, and it is far quicker to record the evidence by this process.

For further information on police-youth issues contact the Youth Advisory Unit, Level 6, Building A, Victoria Police Centre, 637 Flinders Street, Melbourne Victoria 3005. Phone (03) 9247 6195 or (03) 9247 6191 (VATE Project); Fax (03) 9247 6188.

random draw that determines their caseworker . . . families encountering different workers and experts would be systematically dealt with quite differently.'

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South Australian Integrated Child Protection Model

TIM HEATHERINGTON

Manager Child Protection Reform
Family and Community Services, Adelaide, South Australia

The Department of Human Services in South Australia is currently implementing a major reform of its child protection service based on the introduction of formal assessment instruments and a differential response system.

The reform results from the establishment of a Child Protection Task Force in 1995 whose brief was to analyse existing departmental practice, research best practice and systems developments elsewhere, and make recommendations for improvement. This, in turn, arose from a growing concern among staff and key stakeholders that responses to notifications were inconsistent, and that workload pressures in certain metropolitan districts were generating processes for case screening, prioritising and assessment that were part professional judgement and part resource management. It was considered that these problems were likely to increase unless there were major structural/practice changes. Significantly, the reform was driven by a commitment to improved service delivery rather than by a reaction to any particular child death or media criticism.

Analyses of departmental data conducted in 1996 showed clearly that the situation in South Australia was comparable to that experienced by departments in other Australian States and by those in the USA and UK. The differences were more a matter of degree than kind. It seemed clear, for example, that most departments were facing a reducing capacity to investigate notifications, inconsistent assessments and responses to children in danger or at risk, and rising re-notification rates.

Main Goals of the Reform

The main goals of the reform are:

- to target investigative resources on children in immediate danger or at significant risk, and to provide non-intrusive and non-investigative responses to low risk reports;
- to target departmental intervention in families where abuse has been confirmed to those cases

where children are at high risk of re-abuse;

- to provide case management that focuses on family needs and strengths and clearly identifies the progress made by families in addressing their needs and reducing the risks of re-abuse;
- to introduce brief, user-friendly assessment tools that assist workers in their casework and at the same time provide reliable information to management on the risks to children and needs of families across the state;
- to provide greater consistency in response and decision-making and improved outcomes for children and families.

Output and outcome measurement have been regarded as key features of the reform. A comprehensive survey of child protection intakes was conducted in 1996 to provide baseline data against which the reformed system can be measured. Regular monitoring, review and feedback procedures have been built into the new system.

The major reform to the system embraces the research evidence from the UK, and the latest risk assessment model and differential response systems being developed in the USA. Several fundamental changes are being implemented:

Central Intake System

A central telephone intake team of skilled and experienced social workers was established in April 1997 so all child abuse and neglect reports from across the State are received at one location. The single 24-hour child protection phone number provides easy access to notifiers, especially children and young persons. The team utilises safety assessment and initial risk assessment instruments to ensure consistency and accountability of assessments.

A central Aboriginal consultation and response team – Yaitya Tirramangkotti (Prevention People) – has been co-located with the telephone

intake team. The Aboriginal team advises on the appropriateness of assessments on reported Aboriginal children and families, and ensures that a person with sufficient knowledge of Aboriginal kinship and culture is involved in all investigations from the outset.

Differential Response

To address the problems of over-intrusion, the department is introducing a three-tier response system that differentiates between children in immediate danger (tier 1), children at risk* (tier 2), and children primarily in need where the risk* of future abuse is low (tier 3).

The Central Intake Teams identifies children in danger (tier 1) by using the safety assessment instrument and an immediate response is arranged, usually in conjunction with the specialised police and health units. Departmental standards and quality feedback measures ensure response times are kept to a minimum, and only skilled and experienced workers investigate tier 1 cases.

Tier 2 children are investigated along traditional departmental lines. Transparent processes for investigation and intervention have been introduced, including clearly defined exit points and the provision of written outcomes for all families investigated.

The tier 3 category is a new departure for child protection in Australia in that no visit to the family is made. Instead, the initial response to these cases is to contact the family (usually in writing) and invite them to a meeting to discuss the situation with a social worker.

The emphasis with tier 3 is on problem solving rather than investigating a reported incident. Departmental and family perceptions of the reported concerns are shared and community support sought where necessary. A pilot tier 3 diversionary program similar to Washington State's alternative response system is being developed and will be introduced in 1998.

The department retains the flexibility to adjust its response when developments occur in a family, or new information comes to light that indicates greater risk or safety issues.

Early results from the evaluation of the first six months of operation indicate that the central intake and differential response systems have led to a significant improvement in the proportion of immediate (that is, within 24 hours) responses made to children in danger (tier 1), from 60 per cent in February 1996 to 85 per cent in July–December 1997.

Closer Interagency Cooperation

The introduction of formalised inter-agency strategy discussions and professional case discussions for high-risk cases and children in danger has resulted from internal analysis of the department's procedures, and from the clear findings of the recent UK research (Hallett 1995). These measures, which are being developed in partnership with key staff from the police and health departments, are designed to streamline investigations and enhance critical decision making.

In the majority of tier 1 cases, departmental staff are required to hold three-way strategy discussions (in person or by phone link) with police investigators and child protection professionals from the Health Commission prior to the investigation (unless this jeopardises the child's safety). Participants in the strategy discussion exchange information and views about the report, clarify roles, and plan and coordinate the most effective investigation. Strategy discussions are also held on tier 2 investigations where staff propose to interview children prior to visiting their caregivers/parents.

Safety, Risk and Needs Assessment

As from November 1997, the formal use of standardised assessment instruments in child protection has been included in standard procedures. Safety assessments are completed on all tier 1 and 2 notifications. Risk and Needs assessments are conducted on all cases where abuse has been confirmed.

The safety assessment tool was designed by the New York Department and Albany University 10 years ago and has since been adopted by several other departments. The tool contains 12 case characteristics, and identification of any one of them indicates a child may be in imminent danger.

In South Australia, safety assessment is conducted in two stages: at intake, and after the initial investigative visits. The identification of a safety factor at intake is essentially a trigger for an immediate response. If the full assessment confirms the child is indeed in danger, the worker must then take steps to ensure the child's safety. This includes identifying those situations where the child is only safe because of the department's intervention; thus, providing a mechanism for ensuring continuing involvement in those critical situations.

The risk assessment instrument has been designed in conjunction with the Children's Research Center in Wisconsin. The South Australian instrument is based on extensive research into the characteristics of families where abuse/neglect was confirmed by FACS in 1995 and the link established between those characteristics and subsequent re-notifications of abuse or neglect.

It is, in other words, an actuarial tool for classifying families in terms of the likelihood of re-abuse. Four risk levels are identified: very high, high, moderate and low risk. Although a risk assessment of very high on a particular family does not necessarily mean a child in that family will be re-abused, it does mean the child is 10 times more likely to be re-abused than a child in a family assessed as being low risk. Under the system now being introduced, workers are required to visit families more or less frequently depending on the level of risk that has been assessed.

The system allows for workers' professional judgement to override ratings derived from the instrument, but does not permit workers to ignore key situational indicators (such as severe substance abuse or family violence), or to close high-risk cases without a clear rationale.

Family needs/strengths assessment tools are being used in various USA states and we have drawn on their experience and knowledge in designing our own tool, once again with the help of the Children's Research Center.

'Needs' in this context refers to those family deficits and problems that have a direct bearing on the abuse/neglect suffered by the children in the family. The needs/strengths assessment tool focuses on *family* needs rather than *children's* needs so the behaviour and characteristics of the adults in the family become the focus of intervention, rather than the behaviour and characteristics of the child.

The family needs/strengths assessment tool is used: to establish the

overall level of needs, thus establishing a baseline measurement for the future review of progress; and to identify up to three primary family needs which become the focus of the case management process.

Case Management

For all substantiated cases, a full risk and needs assessment is completed and services are then targeted toward high risk/needs families. Where particular risks and needs have been identified, workers are required to specify the interventions and services necessary to address them as well as the availability of those services.

Re-assessments of risk and family needs/strengths will be conducted every three months and prior to closure so the family's progress and risk level can be monitored.

The system also generates information for supervisors on the level and distribution of children at risk, family needs and resource deficiencies within the department and in the wider community (at team, district centre and State levels).

Conclusion

The new South Australian child protection system aims to provide an integrated solution to the problems facing the department, problems which are currently found in most statutory child protection agencies. The system addresses the safety, risk and needs/strengths of notified children and their families. It provides consistent and reliable initial recording and assessment through the introduction of a central intake system. Most importantly, it targets investigative and intervention resources to serious cases in which children are in immediate danger or at high risk of re-abuse, while providing a less intrusive response to children and families whose priority need is access to welfare services.

Note:

* 'Risk' in this context means 'assessed initial risk'. It refers to the likely risk that the *notified* child will be abused or neglected in the future. This likelihood is determined by the Central Intake Team using their professional judgement and an initial risk assessment tool developed by consensus. The term 'risk assessment' used subsequently is much more specific and refers to the likelihood that an *abused* child will be re-abused within 18 months. This definition is the basis for the research that established the actuarial risk assessment tool. The confusion in terms results from the separate development of the differential response and intervention systems and will be resolved in the future. In this article, I have used 'risk' to reflect assessed initial risk as opposed to risk of re-abuse.



CONFERENCES & EVENTS

4-5 May 1998 Sydney NSW

'Building Partnerships ... From Rhetoric to Reality', 3rd Annual State Conference, NSW Child Protection Council

This conference will feature renowned keynote speaker Dr James Garbarino, popular expert classes, paper and workshop presentations. The aims of the conference include: to illustrate and exemplify practice issues for workers in the field, policy issues, wide-scale social issues influencing child protection practice; to encourage effective prevention and early intervention; and to promote practices that ensure children and families receive holistic and integrated services.

Contact: NSW Child Protection Council, Level 14, 447 Kent Street, Sydney NSW 2000. Phone: Ruth Newman (02) 9286 7278. Fax: (02) 9286 7267. Email: nswcpc@world.net Web: <http://www.acwa.asn.au/CPC/>

8 May 1998 Griffith, ACT

'Creating Safe School Environments'

Sponsored by the Australian Council of State School Organisations (ACSSO), this national conference will focus on the role of the school in creating a safer society. Presentations by parent representatives showcasing successful programs in schools will help participants to develop coordinated and cooperative approaches in which the school, parents and community agencies work together to promote safe and supportive learning environments. This advice will be used by ACSSO to develop strategies to publicise what works, and make recommendations to governments.

Contact: Leeta Bacon, ACSSO, Kent Street, Hughes ACT 2605. Phone: (02) 6282 5150. Fax: (02) 6285 1351.

20-22 May 1998 Brisbane, Qld

'Advocacy-Activism: The Challenge of Challenging Behaviours'

The Child Adolescent Family Welfare Association of Queensland (CAFWAQ) is the peak body for the alternative care and intervention sector of Queensland. As such, it represents the needs and issues faced by organisations that provide services to children and

families who may face separation as a result of abuse or neglect. CAFWAQ has put out a call for papers for the conference, which will target: out-of-home caregivers; alternative care providers; child protection and child abuse workers; family support workers; youth workers; child and family welfare workers; academics; volunteers; and carers. The conference will examine issues arising from challenging behaviours whether these are at client, service or system level. While the conference examines these from the perspective of alternative or out-of-home care services, there will be opportunities for other sector representatives to join the discussions.

Contact: Conference Administration, PO Box 159, Paddington Qld 4064. Phone: (07) 3368 1050. Fax: (07) 3368 1160. Email: cafwaq@ucaqld.com.au

27-30 May 1998 Halifax, Nova Scotia, Canada

'Investing in Care', Eleventh National Child and Youth Care Conference'

The future of services for children and youth in the next century and beyond will depend on the investment made in them now. The conference is intended to encompass all areas of the field of child and youth care including: child day care; early intervention; child life programs; school-based care; residential care; youth services; foster care; child protection; education, health and mental health services directed to children and youth.

Contact: Eleventh National Child and Youth Care Conference, Mount Saint Vincent University, Halifax, NS Canada B3M 2J6. Phone: (902) 457 6587. Fax: (902) 445 3960. Email: Child.Youth.Care.Conference@MSVU.Ca Web: <http://serf.msvu.ca/chys/ncycc.html>

31 May - 3 June 1998 Prince George, BC, Canada

'Children, Families, Communities '98: Protecting Our Future'

In this first national conference on the potential for prevention and challenges of intervention in child maltreatment, professionals, academics and parents will come together to share their thinking, research and experience to integrate concepts of positive parenting with professional

issues of child maltreatment. Canadian perspectives, particularly those relevant to northern and multicultural issues, will be emphasised.

Contact: Children, Families, Communities '98, 7090 Domano Boulevard, Prince George BC V2N 3Z4. Phone: (250) 964 3221. Fax: (250) 964 3942. Email: cfc-conf@unbc.edu Web: http://www.unbc.ca/cwrc_page/confrnce.htm

7-9 June 1998 Winnipeg, Canada

'Stemming the Tide: Expanding Approaches to Risk Reduction for Sexually Abusive Youth', 14th Annual National Adolescent Perpetration Network Conference

Macdonald Youth Services is hosting the conference which is co-sponsored by Kempe Centre, University of Colorado Health Sciences Centre. Macdonald Youth Services is a private, non-profit agency which has been providing treatment and support services to children and families in Manitoba, Canada since 1929. This conference will provide a forum for clinical and research presentations inspiring innovative approaches to the management and treatment of sexually abusive youth.

Contact: Macdonald Youth Services, 175 Mayfair Avenue, Winnipeg, Manitoba, R3L OA1, Canada. Phone: 1 (204) 477 1722. Fax: 1 (204) 284 4431. Email: ingersol@mys.mb.ca Web: <http://www.mys.mb.ca/napn>

7-9 July 1998 Port Moresby, Papua New Guinea

'Child Sexual Abuse, Paedophilia and Sex Tourism'

The National Child Protection Service of Papua New Guinea announces the first national conference on child sexual abuse, paedophilia and sex tourism. The conference will draw on the experiences of local and overseas experts on the investigation and suppression of child sexual abuse to ensure a coordinated approach to the protection of children in the PNG region now and into the next century.

Contact: National Child Protection Services, PO Box 6959, Boroko Papua New Guinea. Phone: Coordinator, Peter Kivori Eki, or Secretary.

21-23 July 1998
Charles Sturt University,
Bathurst NSW

'Celebrating the Journey, Keying into the Future', Family Support Services Association of NSW Annual Conference

It has been 21 years since Family Support Services first began in Australia. This conference will mark this 'coming of age'. Family support has journeyed a long way in the past 21 years, and there has been much to celebrate in the journey. It is essential that services that support families continue to develop into the future in ways that key into the changing context in which families operate. Rapid social change, the continuing squeeze on resources and increasing demands on services are real challenges. This conference will help clarify some key ways to approach these challenges.

Contact: Margaret Mayes, FSSA Conference Administrator, PO Box 45, Concord West NSW 2138. Phone: (02) 9743 6565. Fax: (02) 9743 5841. Email: fssa@world.net

24-26 August 1998
Sydney NSW

'Improving Services for Children, Youth and Families'

As an organisation of child, adolescent and family welfare agencies, the Association of Children's Welfare Agencies (ACWA) works toward improving the quality of services to children and young people who need to live away from their families, or are at risk of coming into care. The 1998 ACWA Conference will: showcase

best practice and innovative programs; bring together colleagues committed to helping children, youth and families; provide a forum for exchange; and create an impetus for change and development.

Contact: Sharyn Low, Conference Organiser, ACWA, Level 2, Central Square, 323 Castlereagh Street, Sydney NSW 2000. Phone: (02) 4572 3079. Fax: (02) 4572 3972. Email: sharyn.low@acwa.asn.au. Web: <http://www.acwa.asn.au/ACWA/Conference98/>

6-10 September 1998
Auckland, NZ

'Protecting Children: Innovation and Inspiration', Twelfth International Congress on Child Abuse and Neglect, The International Society for Prevention of Child Abuse and Neglect

The theme has been chosen to emphasise the new directions that child abuse prevention is taking to deal with what has been termed a crisis in the care of children. The conference mission is to promote the wellbeing of children and prevent abuse and neglect as part of a New Zealand and international strategy to enable our children's healthy development, physically, mentally, socially and spiritually. The conference program will be divided into six subject streams: indigenous peoples; brain development, traumatic experiences and memory; mental health and therapy; prevention, protection and education; social work, medicine and law; child advocacy and children's rights.

Contact: Congress Secretariat, The Conference Company, PO Box 90-040, Auckland, New Zealand. Phone: +64 9 360 1240. Fax: +64 9 360 1242. Email: info@tcc.co.nz Internet: <http://www.nzhealth.co.nz/ispcan98>

8-11 September 1998
New Delhi, India

'World Conference on Family Violence'

Backed by a prestigious international steering committee, People to People Ambassador Programs in conjunction with the YWCA of the USA have developed The World Conference on Family Violence. The heart of the conference will be the working sessions where international experts from diverse professions will share models of programs that have succeeded in addressing family violence in their communities. Through this positive, collaborative effort, practitioners will create a resource of solution-oriented concepts that can be adapted to meet their individual cultural and contextual environments at home. The ultimate goal of this project is to build a network of professionals who can continue to exchange practical, sustainable solutions to family violence long after this conference has ended.

Contact: WCFV Conference Secretariat, People to People Ambassador Programs, Dwight D. Eisenhower Building, 110 South Ferrall Street, Spokane, WA 99202-4800. Phone: (800) 720 6115 within the United States or (509) 534 0430, ext. 465 worldwide. Fax: (509) 534 5245. Email: wcfv@wcfv.org Web: <http://www.wcfv.org>

INFORMIT AT RMIT

Following the success of the *Australian Family Resources on CD-ROM* published in 1994, the Institute of Family Studies is releasing a new up-to-date disk containing a significant collection of resource documents from a number of key Australian organisations working to support children and families. The first edition covered documents published 1990-1993. The second edition will include documents to 1997.

The format is similar to the first edition and comprises a searchable database of citations and abstracts

with attached full text images. The publications contained on the new CD-ROM include journal articles, research and discussion papers, policy submissions, and fact sheets. We have retained and updated the journal titles on the first disk, and included a number of new titles. In addition, there is the full text of the Institute of Family Studies' *Australian Family Profiles*, an important demographic publication.

Publications from the National Child Protection Clearing House (issues and discussion papers on child abuse and neglect, and a

national database of more than 600 programs to prevent abuse) are included on the CD-ROM.

The new Web links section provides a list of the most useful web sites for research and further information on programs. For users who are set up to browse the Internet, clicking on these links will take you straight to the selected sites.

Australian Family Resources on CD-ROM is published by the Australian Institute of Family Studies in association with RMIT Publishing.