

## **Statement by Professor Bob Lonne to the Queensland Child Protection Commission of Inquiry 2012**

1. I make this statement freely and can affirm the following information I provide is true and correct. I make this statement based on my own experiences and my knowledge of the relevant research and knowledge contained within the professional literature and reports by government and others.
2. I am Professor of Social Work and the Discipline Leader of Social Work and Human Services at the School of Public Health and Social Work, Faculty of Health at the Queensland University of Technology (QUT). I was appointed as the foundation Chair in Social Work in 2008. I am the immediate past National President of the Australian Association of Social Workers (AASW) (2005-2011). The AASW is the peak accrediting body for professional social work in Australia.

### Qualifications

3. I hold a Bachelor of Social Work (1981- University of Queensland) and a PhD (2002 - University of South Australia).

### Experience in Child Protection

4. I have practised in the field of statutory child protection in Queensland and Western Australia for over a decade. I have been an academic since 1997 at both QUT and the University of Queensland. I have researched and published widely in the area of child protection including a successful co-authored 2009 text titled 'Reforming Child Protection'. I have provided high level advice to governments in Australia and in Alberta Canada concerning reform agendas and processes. My experience is outlined in Appendix One (attached).
5. In preparing this submission I have drawn upon my personal and academic experiences of the child protection system in Queensland and elsewhere. My approach has been to take a broader systemic view of the issues at question. I will firstly outline the context of the contemporary child protection system and highlight aspects of its history. Following this I will examine in some detail the problems that beset it and then go on to outline options for a successful reform agenda, before briefly concluding.

### The Context of Child Protection in Queensland

6. While the current issues facing the Queensland child protection system are in many ways similar to those confronting other Anglophone countries there are also important differences related to the local history and societal/governmental context. I have included as Appendix Two the submission I made to the 2003 CMC Inquiry into the abuse of foster children in Queensland highlighting sobering aspects that are perhaps as relevant today as they were nine years ago.
7. In putting my views forward for the Inquiry, I wish to make clear that "it is the paradigm that is in question, not the people" (Lonne et al 2009., p. 7). It is frequently the case that if not

for the dedication, compassion and hard work of front line staff, things would be a whole lot worse than they are. That said, the system is in dire need of widespread reform and if this is not forthcoming, must face the prospect of collapse under burgeoning workload demand and an Out of Home Care system that is stretched and highly stressed.

8. Without doubt the implementation of the CMC Inquiry findings had a profound impact on the system – some for the better and some retrograde. First and foremost was the substantial investment by the Government into the statutory system in order to implement the 110 recommendations which were accepted in whole. The annual budget since the CMC has more than tripled and amounts to an investment since 2003 of over \$3.5 billion.
9. Second was the substantially increased investment into the community services that has accompanied this, particularly following the 2010 decision (A/2008/5) by the Queensland Industrial Relations Commission to revalue the Community Services and Crisis Assistance Award. In the current fiscal environment these increases are most likely unsustainable. It remains clear that unless there are significant alterations to the ways in which vulnerable children are protected and their safety and wellbeing assured then the system could well become unworkable, due in large part to the massive and rapid increases in the children coming to the attention of the system and those in Out-of-Home Care.
10. Moreover, many of the other CMC recommendations led to improvement of systemic problems. I am aware that other witnesses, in particular, departmental ones will outline in detail the sorts of initiatives that resulted directly from the recommendations. I have written elsewhere (Lonne & Thomson 2005) of the shortcomings in the Inquiry findings and recommendations including an inadequate challenging of the underpinning ideologies driving the protective intervention system, insufficient accountability, organisational culture characterised by misuse of power, and poor external stakeholder relations.
11. Putting these issues to the side, in general, it is now that case that there is a broad community support for ensuring the safety and wellbeing of children and young people and a preparedness to invest substantial resources into this area. Taken overall, the major positives of the current Queensland system since 2003 include:
  - It is relatively successful in preventing the most egregious forms of abuse to reported children;
  - Generally speaking there are better ‘whole of government’ responses to child abuse and neglect, although we are far from having a ‘joined up’ system;
  - There is a much improved staff support system, particularly for dealing with critical incidents;
  - There has been expansion of the support services through the not-for-profit community-based services, although these remain tightly targeted and for the most part can only be accessed via a child protection investigation and confirmed assessment of high risk;
  - The community education programs are generally well done and successful in promoting enhanced wellbeing and safety; and

- Despite massive increases in workloads for notifications, investigation, assessment and a more than doubling of children under protective orders and in care, the system has not collapsed under its own weight.

12. In April 2009 the Australian Research Alliance for Children and Youth (ARACY 2009) released the Inverting the Pyramid report which chronicled the ‘wicked problems’ which were besetting our child protection systems. Perhaps more importantly, the Council of Australian Governments (COAG 2009) announced the ‘National Framework for Protecting Australia’s Children’, which among other things embraced the need to move toward a more robust early intervention and prevention (public health) model as well as to address a number of other critical aspects of what was seen to be a failing child protection system.

### The Contemporary Problems of Child Protection in Queensland

13. The problems confronting us with our child protection system are for the most part longstanding and entrenched, but some are also more recent in their emergence. To my mind, the most pressing of these is that the system is fundamentally flawed as it is built on a foundation that, in trying to address the fallout from a range of structural issues and causes such as poverty, colonisation of Indigenous peoples, and the marginalisation of particular groups such as those with disabilities and single mothers, the general approach has become overtly:

- Punitive and alienating;
- Legalistic;
- Managerialised;
- Risk-averse; and
- Forensic rather than humane.

14. Over the past two decades in particular, Australia and other Anglophone countries that have embraced these sorts of systemic approaches with their attendant focus on investigation as the primary form of service provided have experienced huge increases in the numbers of notifications of suspected child abuse and neglect. This has been a major issue in Queensland (Australian Institute of Health and Welfare 2012). The massive increases in demand have flowed through to major workload increases, primarily around investigations yet the typical trend is for the proportion of substantiated cases to steadily decrease (Lonne et al 1989). What happens then is that the focus of the system becomes the hunt for incidents of harm, or risk of harm, rather than the provision of help to families and children in need. Essentially the organisational mission and dominant discourse alters over time to emphasise the criticality of ensuring resources are available to meet increasing numbers of reported notifications.

15. The situation has also changed over time with a general trend to broaden definitions of child abuse and neglect in order to not ‘miss’ anything as well as to lower the bar about what point exactly the state should intervene into the private lives of families. A risk averse

approach has tended to increasingly dominate because it meets broader organisational imperatives, including not being vilified by the media due to failure to investigate.

16. The conflation of definitional criteria over time is a major factor in what has become a system overburdened and highly stressed, with an ever increasing remit that amounts to 'net-widening'. A current example of this is the position put forward by some medical claims makers for childhood obesity to be included with the definition of child abuse and neglect. Legislative reform can assist here as it has in NSW following the Wood Inquiry.
17. It is a fact, however, that the incidence of harm evident from our child protection notifications and substantiations, nevertheless remains below what we can tell from our studies of the prevalence of child abuse and neglect within the community. Many abusive events remain hidden from public view. The difficulty here is that many families and children who might otherwise seek help to address abusive behaviour do not do so out of fear of the possible consequences, particularly the breakup of the family.
18. From my experience children who are abused generally do not see their relationship with the person who has done this to be uni-dimensional. Rather, they see it in all its facets, the good and the bad, so to speak. They primarily want the abuse to stop rather than the relationship to be broken. Indeed, many abused and neglected children when they hit adulthood seek to work through the relationship issues and, where possible, make their peace within their family.
19. While the system has been designed to tackle the most serious forms of abuse and neglect and to provide protective interventions to ensure safety and wellbeing it has become unbalanced and offers a single approach to dealing with the diversity that is in evidence regarding the presentation of child abuse and neglect on the one hand, and complex social needs on the other. The national and state data reveal that emotional abuse and neglect have overwhelmingly the highest incidence followed by physical abuse and sexual abuse (AIHW 2012). However, the systemic structures, relationships and policy are geared instead toward physical and sexual abuse responses, arguably likely to be the more serious end of the spectrum of harm to children and young people.
20. The system response then is often mismatched regarding the approach taken and the presenting issues and needs that families and children experience. The result is often angry and alienated parents and children removed on the basis of risk of harm, rather than established injury or harm. The irony can present where there is evidence of a history of cumulative harm that seems largely ignored because the focus of investigations. Furthermore, the use of the Structured Decision Making tools lend themselves to being incident based in their scope rather than being a holistic assessment of the circumstances and facts over time and over a number of abusive and neglectful episodes.
21. Taken as a whole, the protective arrangements have become an ever expanding risk-driven social surveillance system that mainly target vulnerable and disadvantaged groups, through the primary, secondary and tertiary services, and particularly the latter. While it is true that

abuse and neglect are found across the spectrum of society, an analysis of our child protection system data quickly reveals that those parents who are overwhelmingly likely to come into contact with it include:

- Single parents, mostly female;
- Indigenous peoples;
- The socially marginalised;
- The economically disadvantaged;
- Those who have disabilities or whose children have disabilities;
- Those who have mental health issues including drug and alcohol problems;
- Those who experience domestic and family violence; and
- A growing group of care system alumni who have many of the problems above and have their own children subject to departmental scrutiny.

22. Moreover, these people often experience multiple social problems. By and large, they are, in effect, highly needy people from vulnerable groups with a range of complex issues. What the community wants and expects is that struggling families get the sort of help they need when they need it, whereas what we have is a system that investigates allegations of harm or risk of harm, and requires this as the segue to accessing needed services.
23. Rather than offering help, in many cases our system interventions embrace a blaming, adversarial stance that pits parents against children, and the community against people who are experiencing complex and profound life difficulties.
24. The net effect of this is that parents can be left feeling angry, alienated and hostile toward any further intervention or help. They are essentially in a double bind. If they are afraid of having their children removed by the departmental staff then sharing sensitive information about family problems or making admissions about abusive or neglectful behaviours can be a very risky move.
25. On the other hand, if they do not prove to be forthcoming with relevant information, then departmental staff will be likely to act upon incomplete information when making their assessments of risk of harm to the child. Furthermore, for many parents, owning up to needing help can entail significant anxiety and risk to their reputation and family relations. Ironically, such a scenario can mean that parents are less likely to seek help and, thereby, children's wellbeing may be more at risk than it otherwise might have been.
26. In addition, many community-based services that are not part of the from statutory system have been inveigled, sometimes through contractual arrangements with funders, to monitor and report vulnerable children and families. This has increased the suspicion and distrust of some families that their attempts to seek help are likely to result in departmental intervention and that they have nowhere safe and confidential to turn to in times of need.
27. A significant issue within the Queensland child protection system is the overburdened Out-of-Home Care system, which poses a significant risk to the sustainability of the whole

system. The number and rate per thousand children under protective orders and in Out-of-Home Care has more than doubled since the CMC report, and shows no sign of abating. This is also a national trend. Most of this growth has resulted from a massive increase in the over-representation of Indigenous children, despite a wealth of policy and legislative measures to reduce it. These are clearly failing, or at least the corrective frontline practice that was intended to ensue from such measures is.

28. Unfortunately the alternative care policy directions set in the late 1990s advocated a significant swing away from residential care towards foster care at a time when major demographic, economic and social trends indicated that it was increasingly difficult for two parent families to become foster parents, particularly due to rising housing costs and the increase in female employment in the broader workforce. Simply put, it is exceedingly difficult for the average family to become foster parents when one of the parents, usually the female partner, is required at home fulltime to care for the children and keep the household operational. Many of those available to become carers are similar demographically to families from children are removed, and their incomes are generally not high.
29. The end result has been a stressed and stretched Out-of-Home Care system and the redevelopment of the extremely expensive residential care options. That said, in my view, the community should rightly be aghast at the ongoing use of motel-style accommodation for the care of children in departmental alternative care arrangements, notwithstanding the shortage of suitable Out-of-Home Care options such as foster care and kinship care.
30. Frankly, what parent in their right mind, and I include the State here, would seriously suggest that housing children in 24 hour motel-style accommodation with round the clock youth workers was in “the best interests” of children. It beggars belief. That this is happening, to my knowledge, elsewhere in Australia and in Canada is little comfort. It merely reflects the gross systemic failings that are occurring.
31. While it is undoubtedly the case that many children are cared for exceptionally well within our Out-of-Home Care systems, it nonetheless remains the case that the life outcomes for children in care are often quite poor. We know from any number of research studies that there is increasing placement turnover the longer a child is in care and that this is associated with behavioural, psychological and emotional consequences.
32. The CREATE foundation is better placed to represent the voices of children in care and those who have left it. However, we know from the research that children and young people who have been in care have a likelihood that as adults, when compared to others, they will:
  - Have poorer levels of education that result in higher rates of unemployment;
  - Be more likely to experience interpersonal and family relationship difficulties and breakdown;
  - Often have serious mental health issues, which can be compounded by the problems that result from self-medicating through substance abuse;

- Have housing and accommodation issues;
  - If female, have children at a younger age
  - Come into contact with protective authorities concerning their own children, but have a different relationship to the one they had when they were in care themselves; and
  - If male, have a tendency to come in contact with the law and do time for criminal offences and for female.
33. I refer now to my 2003 submission to the CMC Inquiry (Appendix Two) where I outlined (page 4) the issue of the use of power and authority. At the centre of good child protection practice is the worker's ability to form rapport and trusting relationships with parents and children in what are stressful situations for all. If productive change is to occur within family relationships there has to be a change agent, or facilitator, who enables people to realistically evaluate their situation and to make decisions about altering the ways they have thought or behaved in particular situations and relationships. To do this role within the complex tasks of child protection requires high levels of skill and typically requires the right sort of higher education and training.
34. Unfortunately, within Queensland since the CMC inquiry senior leadership figures have publicly put forward the view that just about anyone can do this sort of work, suggesting that policy officers, teachers and nurses or those with 'life experience' can undertake it successfully. One source was reportedly a prior Director-General. I have always been troubled by such curious proposals. We do not normally suggest that teachers make good police officers, or social workers make good nurses, or that mechanics make good brain surgeons and the general public would be horrified at such proposals.
35. Nonetheless, such views have abounded within the department and the result has been a gradual expanding of the 'eligible' qualifications to include a vast array of backgrounds, skills and knowledge as being relevant for this complex work. While I recognise that the department has experienced longstanding and serious problems regarding staff recruitment and, in particular, retention this has been seriously counterproductive for the overall quality of the child protection workforce.
36. It has been compounded by a staff induction and training program that has been overly focused on entry level skills, adherence to departmental procedures and risk averse practice rather than developing high-level professional human services skills and practice.
37. The formal relationships between the Department and universities have to my knowledge been quite variable since the CMC Inquiry. While there is a clear shared interest in the development of an appropriately skilled and educated child protection workforce there have been inadequate forums to bring these two sectors together to work on the longstanding problems.
38. Over the past few years the department has pursued closer relationships with TAFE providers in order to develop pathways into the workforce but this appears to have been associated with a decreased interest in discussions and relationships with the universities. In

my view, this was unwise and fuelled views in the higher education sector that the Queensland Department was wanting to 'dumb down' its workforce and resist any notion that professionally qualified social work and human service graduates were those best placed and suited to firstly help families and children, but then to also monitor, assess and intervene in beneficial ways.

39. Relationships between the Department and external stakeholders typically occur within a significant power imbalance that shapes the nature of the relationships and interactions. This is a reflection of the legislative and fiscal authority, but only partly. The use of power within the Department is an aspect to which many departmental staff appear blind to, or rather, oblivious to the impact it can have on external relations.
40. To an extent, this is a failure of leadership because it has continued for a long time, but it can be a serious hindrance to the formation of the sorts of collaborative relationships and partnerships that are critical to a whole of government and community-wide approach to ensuring children's safety and wellbeing. This power imbalance and associated competitive tendering are problematic for the development of a 'joined up' service delivery system.
41. With respect to the Department's relationships with Indigenous communities, peoples and agencies, I have not seen much evidence of these improving since the CMC Inquiry. While it is correct that the legislation specifically promotes a number of strategies to reduce the over-representation of Indigenous children in the system and to involve communities in case decision making concerning Indigenous children there has nevertheless been a truly astounding increase in Indigenous over-representation since the CMC Inquiry. In fact, much of the increase in children under protective orders and in Out-of-Home Care has been Indigenous children and there is widespread and deep concern in Indigenous communities about this, as well as among others, myself included.
42. We appear to have learned little from the past or from overseas jurisdictions such as New Zealand and Canada. The level of over-representation and its increasing trend raises legitimate questions about whether or not institutional racism is a factor. It is a significant compounding effect on the trans-generational trauma and associated issues of colonisation. It continues to contribute to the breakdown of Aboriginal and Torres Strait Islander families and communities, and to the associated high levels of grief, loss, mental health problems and substance misuse. This situation is getting worse and should be a very high priority within a reformed child protection system.
43. Throughout Queensland, Indigenous services are heavily over-burdened due to the high needs being experienced within communities. Moreover, because of high demand they are often very limited in their ability to assist children and families, and to work closely with the statutory interveners. Without effective on the ground partnerships between the statutory staff and those who work in Indigenous community-based agencies there are reduced opportunities for successful interventions.



44. While it is undoubtedly true that the departmental information systems are significantly better now than they were prior to the CMC Inquiry there is growing concern here, and elsewhere, that the advent of sophisticated Information and Communication Technologies have had the unintended consequence of requiring ever increasing time by harried frontline staff just to navigate and find what they need to know with the use of electronic platforms and databases. Furthermore, the time needed to accurately and reliably record events and developments has become, in some instances, problematic when one considers the foremost need to be engaging and working with parents and children.

#### Options for Future Reforms

45. As a researcher and author in this area I have had opportunity to do considerable thinking about what sorts of reforms are needed and the types of options available to deal with the presenting problems. I would like to briefly outline a range of areas and initiatives that, in my view, require priority attention. They include:

- Structural arrangements for primary, secondary and tertiary prevention;
- Legislative, policy and procedural change;
- Incorporating relationship based practice and introducing an ethical framework for practice;
- Indigenising the child protection system;
- Enhancing system accountability;
- Workforce development; and
- Rebuilding strong communities.

#### *Structural arrangements*

46. I am supportive of the balance struck for structural arrangements outlined in the National Framework for Protecting Australia's Children that advocates for a public health model and has a strong primary and secondary role for the community services sector, with a reduced focus for statutory agencies toward tertiary aspects. The framework places renewed emphasis upon early intervention and prevention programs that are broadly accessible for families and children in need.

47. One of the risks, however, of heading toward this goal is that these services and programs may become part of an extended system for social surveillance. If this were to happen it would, in my mind, be seen by many vulnerable and high need families as something to be wary of and perhaps to avoid.

48. There is, nonetheless, an urgent need for a well integrated system for primary prevention, first response family support that can provide joined up services to those who are vulnerable and in need. As outlined earlier, it is often the case that families where there is a risk of harm to children have experienced a range of social problems including poverty, homelessness, conflicted family relationships, substance misuse, mental health issues, family

and domestic violence and disabilities for the adults or children.

49. They have high complex needs and require the extended provision of supports in order to prevent the situation escalating to the point where statutory interventions become necessary. The people approaching these services are not everyday folk experiencing a temporary problem. These issues were identified in the analysis of the 2012 Victorian Child and Family Services Outcomes Survey (CAFSOS) survey data which I subsequently outline in greater detail.
50. As the 2012 *Report of the Protecting Victoria's Vulnerable Children Inquiry* (Cummins et al., 2012) noted, to provide a comprehensive system for protecting children and safeguarding their wellbeing, an integrated system of government and non-government support services is necessary. Strong collaborative partnerships are the basis of the ChildFIRST system in Victoria and there is good inter-agency communication but not in ways that militate against families accessing the sorts of help they need when they need it.
51. In a recent publication my co-author Bente Kojan and I compared the outcomes of the child protection/welfare systems in Australia and Norway, which have significantly different approaches to early intervention and prevention (Kojan and Lonne 2012). There are critically important differences, with the Norwegian system being geared toward early intervention and prevention, particularly for the younger children. However, the rates of children per thousand in Out-of-Home Care are quite similar, albeit with Australia tending to have younger children in care than is found in Norway. I can elaborate on this if required.
52. A major worry for the local situation is that we are having more and more children come into care as infants and then stay in care long term, the implication being that our system will, unless things change dramatically, grow with many children experiencing multiple placements and the harm that this can cause. For a variety of reasons, children in Out-of-Home Care can have a lot of their 'life and family issues' rise to the surface of their consciousness when they reach adolescence and struggle with issues such as identity.
53. I have been involved in the analysis of a large scale research project, the Child and Family Services Outcomes Survey, which examined a range of outcomes for children and families who received services through the Child Protection, Family Services and Out-of-Home Care systems. Some of the key findings were that the families involved were generally larger, had high residential mobility, and complex needs, including high rates of children with disabilities. Those families who received Family Services for support and assistance reported very high rates of satisfaction with the services provided and attributed these to a range of improvements in their relationships with their children as well as other indicators of health and wellbeing.
54. In comparison, only around half of the child protection families reported similar results. Furthermore, detailed analysis revealed that the nature of the relationship between workers and parents was critical to the success of the interventions. In essence, where skilful workers were able to collaboratively work alongside parents a wide range of improvements in the

children's health and wellbeing resulted. This is also supported by overseas research with which I am familiar. I can elaborate on this should this be required.

55. With respect to the situation in Queensland, a substantial shift in the focus of the system toward early intervention and prevention support services delivered through the community services organisations is urgently required. This must occur in tandem with a re-alignment of the statutory system toward the clearly tertiary interventions, a substantial shift in resources toward the not-for-profit community services sector, and a renewed effort to work toward reunification of children in care with their families and kin.
56. Unless there is substantial and early systemic reform continued increases of the numbers and rates of children under protective orders and in Out-of-Home care will lead to the real possibility that the whole system will face collapse. It is already fiscally unsustainable should current trends continue. Having over 8000 children in care for a population of Queensland's size is unsustainable and, arguably, morally wrong in a civil society.
57. There are positive signs from Alberta Canada that the change management process to achieve such a systemic transformation can be achieved within budget and be successful. The Outcomes Based Service Delivery (OBSD) initiatives that have occurred there over the past few years are a shining example of how profound transformation can occur, but also of the difficulties experienced in achieving this (Lonne 2012).
58. In many ways the child protection systems in Canada and Australia are similar (Lonne et al., 2009), particularly regarding the history of colonisation of Indigenous peoples and the role of the child welfare system in destruction of culture, family and communities. Alberta's child welfare system, with a roughly similar proportion of the population being First Nations peoples, has 60% of its Child Welfare system children being Aboriginal. Through a combination of bottom-up and top-down processes the OBSD reforms have led to substantial reconfiguration of service delivery arrangements and processes within the community-based agencies. Early evaluation results are extremely impressive and the reforms have been rapidly building momentum. There are lessons to be learned for Queensland from these initiatives. I am able to elaborate on this area.

#### *Legislative, policy and procedural change*

59. It should be acknowledged at the outset that there is remarkable consistency in the child protection legislation around Australia, albeit with some differences. Trying to find the answers to the system problems in legislative or policy reform are, to my mind, likely to end in little reward. Overall, the legislation is basically sound, albeit requiring some important modifications and refinements.
60. With regard to this I have found myself increasingly concerned with the legislative changes adopted in Queensland post-CMC as they have arguably been overly influenced and shaped by departmental imperatives to reduce external scrutiny by the Childrens Court and other measures and make it easier for the departmental case-related decisions to be resistant to pressure from outside bodies. I remain to be convinced that this has improved the

protective system or improved the wellbeing of children under protective orders.

61. To my mind, the abolishment or major amendment of mandatory reporting would go a long way to reducing the enormous and unsustainable demand pressure on the statutory system. I understand the political context with relation to these measure but an historical analysis of the notification data shows that these legislative and policy measures have directly led to an overburdened and overwhelmed system (Harries & Clare 2002; Melton 2005). The change by the Queensland Police Service in 2005 regarding automatic referral of domestic violence events to Child Safety is a case in point that led to serious unintended consequences and was ultimately counterproductive to children's interests.
62. Perhaps, more importantly, these measures have redirected the system away from helping people as the first response to instead making investigation of risk of harm as the primary intervention. The 2010 Wood Inquiry in NSW led to an alteration of the legislation to replace a deeply problematic system of receiving child protection notifications to instead reshape the benchmarks and shift practice away from investigation toward the provision of help and support. The AIHW report (2012) evidences the dramatic impacts on notification numbers from these changed arrangements. Without addressing the demand side of the notification system, it will be unlikely that the necessary Queensland reforms will fail.
63. Any subsequent legislative and policy reforms will need to promote the thrust of early intervention and prevention outlined in the National Framework. There is also room to ensure that the legislative principles for statutory intervention do not narrowly prescribe notions such as 'the best interests', which when misapplied in practice have led to some very poor case decision making and, at worst, have been used by frontline staff as an exclusionary dictum of what must happen in particular cases.
64. Statements from child protection staff like "this is in the best interests of the child" can come across as excluding further debate about the issues at stake and what should happen. Essentially, decision making within a 'best interest' framework should entail a logical argument, based on the relevant facts, that depicts a compelling case for action that will promote the safety and wellbeing of a child.
65. Children's long term interests go far beyond immediate safety. In addition, as I indicated earlier, the predominant forms of reported harm are emotional abuse and neglect and, therefore, policy settings and practice guidelines based around removing children who are in immediate physical danger are flawed, the under fives being a general exception because of their increased physical dependency and vulnerability.
66. Policy and practice should reflect the sound principles and specifics of the United Nations Convention on the Rights of the Child, which clearly locates children's rights within a framework of family, cultural and community heritage and responsibility, and does not in a dualistic way pit these against parental rights. The UN convention should be explicitly incorporated into the Queensland legislation so that it forms the foundation of interventions

and practice.

#### *Relationship based and ethical practice*

67. The most critical reform that needs to occur in order to better protect Queensland children is to reshape the system toward professional practice that embraces the centrality of relationship between workers and parents and children, and which operates within a clear ethical framework. I and others have elaborated on this in a recent text (Lonne et al., 2009) but, essentially it entails practitioners in the following:

- Understanding that the foundation of effective social care practice is to form meaningful and trusting relationships with people so that they are able to trust the intervention and work collaboratively on remedial actions;
- Utilising a robust ethical framework that recognises the multiple stakeholders and interests in decision making, while holding the needs and interests of vulnerable people and children as critical to productive outcomes;
- Locating the interests of all parties within the scope of the UN Convention on the Rights of the Child with its attendant emphasis on connections with family, culture and community; and
- Embracing and incorporating a Virtue Ethics approach integrated within the legal and organisational context of practice.

68. People change throughout their lives. When people have multiple life issues they are dealing with, and are involved in events and behaviours that are harmful to vulnerable children, it is critical for them to receive the assistance of skilful and ethical practitioners. Workers should be highly skilled and relate with them in respectful ways that are mindful of the need for power sharing, practical problem solving and educational input, and for sound moral and ethical values to guide practice. These sorts of interactions between professionals and clients can be powerfully transformational.

69. Moreover, such professional approaches lead to better outcomes for children who, for the main part, want to remain connected in meaningful and beneficial relationships with their families. Unfortunately, when practice occurs within a punitive and blaming paradigm, the importance of parents and families to children can be not fully understood by some staff. Perhaps more importantly, children's need for family connections is sometimes not embraced within the practice framework or incorporated into care decisions. Hence, having a workforce skilled in approaches that are respectful and empowering is critical.

#### *Indigenising the child protection system*

70. I and others have said elsewhere that the child protection system has to be indigenised as a key measure to address the increasingly gross over-representation apparent (Lonne in press; Lonne et al., 2012). The numbers and rates per thousand of Aboriginal and Torres Strait Islander children who are now in our child protection systems is greater than that

experienced in the 'Stolen Generation' and it is incumbent upon us as a civil society to redress this.

71. We should no longer continue to promote approaches that do not understand the circumstances of Indigenous children, families and communities as the result of individual parental failings. The consequences of colonisation are a public health crisis and our child protection systems must become part of the solution rather than merely repeating past failed approaches.
72. We should acknowledge and understand that forensic, risk-averse child protection practice has the potential to seriously undermine a community's ability to provide a safe and nurturing environment for children, particularly Indigenous communities whose members have faced the intergenerational impacts of colonisation. Conversely, supporting community-based every-day initiatives builds community capacity and helps to protect children. Reshaping our approaches around building community and family capacities offers us a way forward.
73. We should set a benchmark of at least a third of child protection staff being Indigenous Australians and work steadfastly toward this. This requires an integrated system of financial and other supports to build the skills and qualifications of Aboriginal and Torres Strait Islander peoples. For remote communities, we would do well to examine the delivery of social work courses in Canada where academic staff travel to these communities and deliver the training and educational courses in situ. Their experience has seen a sizeable growth in the numbers and proportions of First Nations people in the child welfare and community services workforce.
74. That said, indigenising the child protection system is not merely about recruiting Indigenous staff. Rather, it involves a fundamental incorporation of Indigenous world views and ideologies into staff and policy understandings about society, cultural connection, family, childhood and child rearing.
75. The realities of colonisation and its profound longstanding and intergenerational effects have to be incorporated into approaches to community development and capacity building for Aboriginal and Torres Strait Islander communities. It means embracing ways other than dominant Anglo-Saxon approaches toward help seeking and building community capacity. Perhaps most importantly, it is about recognising social and economic injustice in the ways society operates and working in ways that build upon Indigenous community strengths to rebuild damaged cultural connections and relationships.
76. This is not to suggest that such approaches entail a supine 'blind eye' orientation to the very real problems that Indigenous peoples face on a day-to-day basis such as unemployment, substance abuse, family violence and housing issues. Successful practitioners work in culturally safe ways within these sorts of real world constraints to assist profoundly marginalised people to turn their lives around. Nonetheless, while workforce training can assist here, an historic increase in the proportions of Indigenous workers remains as a critical

aspect of reform.

77. While legislating a more central and determining role in case-related decision making for Indigenous controlled organisations is required, this must go hand in hand with a deliberate and broadly scoped strategy to build an Indigenous professional workforce in child protection as Canada has embarked upon. Boosted cultural training is no doubt an interim step but it will never suffice for an indigenised workforce. We must recognise and address the issues that arise from having non-Indigenous staff practising in ways that are not culturally safe, an issue for both our health and welfare systems. History has shown us that unless we have a social care workforce that is knowledgeable about colonisation and its impacts, and skilled in relating to Indigenous people, then over-representation is a critical factor.
78. This is a major issue confronting Canadian authorities. For example, in Alberta around 60% of the children in their system are Aboriginal, and Manitoba is nearing 90%. Similar to Australia (but more rapidly), the increases in over-representation in these Canadian systems have occurred over the past decade or so. We must understand that unless we undertake substantive reforms the same scenarios are likely to eventuate here in Queensland.
79. To fail to do these necessary reforms will no doubt lead to increased numbers of Indigenous Queensland children ending up in other correctional and health systems as the consequence. We should recognise that the child protection system has become a gateway for other correctional and health systems and, hence, unless the orientation becomes one of early intervention and prevention, then the longer term outcome is a substantially more costly enterprise for the community to fund. This Inquiry has an opportunity to rethink our approaches to this vexed issue and to re-jig the system to address this injustice.

#### *Enhanced accountability*

80. There is in Queensland a continuing need for the Queensland Civil and Administrative Tribunal (QCAT) to have a pivotal role as a formal accountability mechanism regarding case-related decision making.
81. While I accept that the QCAT role is uncomfortable and, at times, burdensome for the Department, I remain unconvinced that the Childrens Court, or for that matter the Commission for Children and Young People and Child Guardian, have demonstrated a consistent and beneficial role in scrutinising departmental case-related decision making or operations.
82. Accountability for decision making is as an imperative principle for an open, transparent, just and effective child protection system. Frankly, there are enough examples of poor practice in evidence for there to be a requirement for a robust independent accountability process to review case-related decision making. When one considers that the decisions that departmental officers make and the profound impacts these can have on the lives of vulnerable adults and children, it is entirely reasonable for there to be an accessible high

level process to scrutinise and review departmental decision making.

83. Child protection systems are known to present as highly defensive to outside scrutiny and criticism. There are significant real life hindrances to these systems embracing robust feedback. Given the force of media attention and its attendant impacts this is understandable.
84. However, in a systemic sense, this poses the legitimate question as to how exactly the operations and staff can utilise continuous improvement processes and thereby improve service delivery. The history of the Department with regard to research and evaluation processes is a chequered one.
85. While it is true that the Department has funded staff and enabled external researchers to undertake significant doctoral and other evaluative projects, it remains difficult to conclude that the organisation embraces such approaches as core to its everyday business. There are examples of departmentally supported research that did not translate into changed departmental practice. Some have found their departmentally sponsored doctoral findings institutionally ignored.
86. For example, Gillingham (2009, 2011) undertook research into the departmental use of the Structured Decision Making tools in Queensland. A central part of any renewed departmental culture must be an organisational embracing of the need for ongoing research to inform practice. This is a core approach of our health systems but remains marginalised within Queensland's child protection system and is a significant systemic hindrance to the improvement of policy and practice.
87. An evidence-based practice framework was heralded by the introduction of the Structured Decision Making instruments but these, in my view, have been a tragically failed experiment. There are significant shortcomings in their operation which Gillingham (2009, 2011) has identified.
88. Putting aside his finding that the instruments were not used as intended by the developers, they are evidence-based tools which were based on the US experience. This, however, is substantially different to the Australian context with respect to significant factors including the extent of the use of drugs and firearms. In many ways USA research is substantially different to the context experienced in Australia and Queensland.
89. It is important to note that significant systemic reform agendas in the areas of mental health and disability have had at their core a consumer and carer led advocacy process. These reforms have profoundly restructured and reconfigured the approaches to professional health and social care service delivery. There is much to be learned when systems introduce mechanisms to give voice to those who are without power or are marginalised from professional and institutional processes.



90. Their lived experiences can help us to better understand how the systems of care and protection are affecting consumers of services. Some parents have made serious complaints about the ways in which they were treated and how these impacted negatively on themselves and their children. The Victorian CAFSOS study findings add weight to these claims.
91. A fundamental difficulty in child protection is that to a great extent parents, particularly men, have been marginalised from the system decision making and have been frequently demonised as 'wicked' and 'dangerous'. While some parents undoubtedly are dangerous, the overwhelming majority are not, but instead have significant life issues such as mental health problems, housing, substance abuse etc that prove to be great hurdles in their capacity to properly care for their children.
92. A well functioning care system needs to include a consumer advisory mechanism at all levels, that is, case-related decision making and policy and operational levels. Consideration of better and more inclusive processes for parents must be part of a reform agenda. Family conferencing for instance, does not appear to have had the success here in Queensland that it has had in New Zealand.

#### *Workforce development*

93. Along with others I have recently written about the critical importance of workforce development for system reform (Lonne et al., 2012). If system reform is to be successful then the workforce has to not only be informed about the reform issues and requisite strategic directions, but to broadly embrace these.
94. This must entail a range of strategies aimed at both the entry-level staff but also for those who are at more advanced professional and career levels. There is ample research evidence from around the globe that demonstrates the vital role that is played by committed child protection workers. They are the compassionate glue that binds the system into a cohesive whole that provides the necessary guidance and assistance to needy families who need to change in order to provide greater protection for children and ensure their wellbeing.
95. Without committed people on board, reform measures are likely to fail. Hence, it is vital for the Inquiry to pay close attention to the voices of those who have remained working in what are often very difficult organisational and practice situations. That said, because of the work pressures, it can be very difficult for these staff to find the space to sit and reflect about the multi-faceted dynamics at play which shape systemic characteristics and operations, as well as day-to-day practice. This can result in high rates of workforce turnover and low morale being experienced by those who have remained working in the Department despite feeling besieged at times.
96. The oft-failed reforms of the past are ample demonstration of the false-promise of claims of straightforward systemic, legislative and procedural reforms. Introducing practice-based reforms as outlined earlier are much more likely to result in a reshaped child protection

system and outcomes.

97. As outlined earlier, the approaches taken in the past by the Department to recruitment and workforce training have been, generally speaking, characterised by their lack of success in developing a properly qualified and prepared workforce able to work in this difficult and complex social care environment.
98. In my view, taking a broad array of qualifications had led to a workforce that has major shortcomings in its overall ability to deliver the sorts of assessment and therapeutic services that children and parents need to deal with the significant problems they face. Departmental training process, by and large, have been unable to overcome these shortcomings.
99. Closer relationships with universities, and in particular the social work and human service professional course staff are needed to ensure there is a properly trained workforce to meet system needs, both in the department and the broader community services. There is opportunity to change the nature of professional courses including developing qualifications that are aimed at addressing specific sector workforce issues.
100. Suggestions by departmental staff and leadership that the work is not all that complex and only requires people with 'life experience' are a dangerous pipedream that has played out very badly indeed for the children and families with the child protection system.

#### *Rebuilding strong communities*

101. A growing evidence base has emerged about what works within communities to foster children's safety and wellbeing, and it essentially involves facilitating the multiple levels of relationship and connections within neighbourhoods and communities so that people can access help when and where they need it.
102. Gary Melton of the US based Kempe Center for the Prevention and Treatment of Child Abuse and Neglect has written that "To make such assistance easily available and maximally useful, the settings of everyday life – the places where people live, work, study, worship and play – must be organised in ways that facilitate ongoing relationships" (Melton 2010, p.95). Essentially, when the willingness and ability of others around us in our community to offer help is the social glue that vulnerable families need to overcome isolation, and connect them into a web of community social care.
103. Reforming child protection must involve aligning our policies to ensure they encourage natural helping networks and processes, rather than replace them. Unfortunately, despite the rhetoric, statutory child protection agencies have not generally proved themselves to be able to work in embedded ways with communities over the long term.

104. Effectively protecting children is grounded in everyday community processes for social care. Most communities care for children well most of the time. An examination of local neighbourhoods and communities reveals that they are able to care adequately for most children most of the time, and have existing arrangements and processes in place to look after, protect and develop children and young people, albeit predominantly those who come from groups who are socially included.

105. The largely volunteer sports and recreation networks within our communities are testament to this truism. Melton and others' work in the Strong Communities program in the USA is an important reminder to us of the natural capacities that abound when people come together and interact within a web of social care and concern for each other. Successful child protection systems enhance and build on these existing systems and networks rather than seeking to replace them. A revitalised child safety and wellbeing system in Queensland must learn from what works here and overseas and be unafraid of embracing different approaches to those which are currently dominant.

### Conclusion

106. In summary, there are many longstanding issues that beset the Child Protection system in Queensland and the advent of the Commission of Inquiry is a welcome development. In what is a contested social policy environment there are nonetheless substantial areas of consensus about what needs to be fixed up. While there have been some notable and substantial improvements following the 2003 CMC Inquiry, there have also been some significant shortcomings.

107. I have studied past child protection reviews from around the country over the past decade and more and noted that there has been a remarkable consistency in their findings and recommendations (Lonne and Thomson 2005; Lonne et al in press 2011). What is clear is that further proceduralism is counterproductive to the outcomes sought.

108. A comment in the recent Victorian report about the impacts of past inquiries into child protection is both relevant and sobering here (Cummins et al 2012 p. xxviii):

Despite these reviews, and despite increased investment and increased scrutiny over time, the Inquiry has not been able to discern any marked change in Victoria in the incidence and impact of child abuse or neglect or overall outcomes for vulnerable children taken into out-of-home care.

109. The recent Munro review in the UK (Department of Education 2011) and the Victorian Inquiry (Cummins et al 2012) have highlighted that the approaches by professional staff are pivotal to the effectiveness of system interventions. Skilled professional staff are a primary conduit for vulnerable families to address the issues that confront them and to turn their lives around. So too is a properly resourced and accessible community services sector that utilises both non-government and for-profit service providers.

110. Taking the broad view, there are numerous opportunities for continuing the progressive development of the Queensland protective system. While fiscal and other constraints are evident, there is nonetheless a significant and longstanding government investment into our child protection system. Redirecting resources to make better use of them is appropriate. I am available to elaborate on the specifics of this statement and the options available for system reform should this be useful.

A handwritten signature in black ink, appearing to read 'B. Lonne', with a long horizontal stroke extending to the right.

16 August 2012

Professor Bob Lonne

School of Public Health and Social Work

Faculty of Health, Queensland University of Technology.

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## APPENDIX ONE

### CURRICULUM VITAE

**Professor Robert (Bob) Lawrence LONNE, B. Soc Wk. PhD.**

**Email: [b.lonne@qut.edu.au](mailto:b.lonne@qut.edu.au)**

### ACADEMIC QUALIFICATIONS

**Bachelor of Social Work**, University of Queensland, Australia, conferred April 1981.

**Doctor of Philosophy, Ph.D (Social Work)**. University of South Australia (2002).

Rural social care and human service practice is a longstanding research interest of mine, and is an area where I have an established national and international profile. In 2001 I completed my Ph.D. through the Centre for Rural and Remote Area Studies, Whyalla Campus, University of South Australia, the thesis being titled “Retention and adjustment of social workers to rural positions in Australia: Implications for recruitment, support and professional education”. The aim of the research was to increase retention of rural human service professionals. The two-year study was an Australia-wide examination that entailed high-level statistical analysis, and a longitudinal design including time-series analysis, which set it apart from other methodologies used in this area. It was a landmark study that profiled rural and remote Australian social work, in an area where there is little, albeit growing, international research.

The study results had national and international relevance across a number of human services disciplines because it was the world’s first major study of rural social work and entailed a longitudinal examination of the longstanding staff retention problems that beset many agencies across the globe. For example, the Community Services Ministerial Advisory Council and the NSW, Victorian, Queensland and WA state governments all have specific strategies to try to address the problems of rural staff retention. My doctoral study has so far resulted in numerous refereed publications (see Publications section), a keynote address and multiple conference papers (see Conference Papers section). I continue to actively research and publish in relation to rural social care practice, although my outputs in other major research interests child protection and wellbeing, and the social work and human services workforce have increased substantially in the recent past.

### WORK HISTORY

Feb 2008 – current I was appointed as the foundation Professor of Social Work at Queensland University of Technology with responsibility to lead the new Bachelor of Social Work course and the existing Bachelor of Human Services, which have been highly successful. This senior academic role entails the management of the Social Work and Human Services Academic Unit, including 14 academic staff. There is an annual budget of \$2.5m. As well as being responsible for the academic programs, I have had key roles in the marketing and development of new program proposals at the UG and PG levels. I have instituted a number of important change management processes, as well as the development of a Master of Social Work in 2010 which is highly innovative in its use of a blended learning environment. The program has met with large student demand. The social work programs are growing.

I have research higher degree students, who are researching in areas such as domestic violence, foster care, kinship care and child protection systems, mental health and rural social care practice. My primary teaching areas are social work theories and methods, the human services as a social care system, child protection and youth justice. I remain research active and am involved with several interdisciplinary, cross institutional research teams. I am a member of the QUT’s Institute of Health and Biomedical Innovation (IHBI) and the Centre for Child and Youth Research (CCYR).

Nov 2005 – Oct 2011 I was the immediate past National President of the Australian Association of Social Workers, which has over 6000 members and an annual budget of \$4.5m. I was elected

in November 2005, and re-elected in September 2008, finishing my term in Oct 2011. I have successfully led the Association in a range of major review and strategic re-alignments to enable it to operate in what is a complex and fluid environment for Social Work in Australia. I held a diverse range of high-level strategic and operational responsibilities in this position.

The AASW has achieved some major milestones under my direction including solid membership growth, financial stability, re-organisation and restructuring, and re-visioning its rationale and purpose. I am widely acknowledged as successfully leading significant change processes that have helped to reposition and restructure the AASW as well as being in the vanguard of broader systemic changes to re-vision and contemporise the social work profession in the 21<sup>st</sup> century political and societal contexts. Included within this is a major structural and constitutional review that resulted in overwhelming member endorsement for the introduction of a completely re-written constitution and company bylaws. I also oversaw major curriculum review of social work accreditation standards. I have also facilitated the growth in AASW business revenue streams through the development of business operations and successfully seeking large government contracts. I have developed and maintained a large range of positive relationships across a diverse sector. I am also the Elections Officer for the International Federation of Social Workers.

- Feb 2004 – Jan 2008    Lecturer, Level C, School of Social Work and Applied Human Sciences, University of Queensland. Ongoing appointment. I was the Program Director for the Human Services program and the Behavioural Studies programs at Ipswich UQ. I was course coordinator for courses in the Bachelor of Human Services program, and also coordinated undergraduate and post-graduate courses (subjects) in the Social Work program at St Lucia. My primary teaching areas were child protection, youth justice, human services management and practice theories. I supervised a number of post-graduate research students, with details provided below.
- Nov 2000 – Jan 2004    Lecturer, Level B, School of Humanities and Human Services, Queensland University of Technology, Carseldine, Ongoing appointment. I was Coordinator for the Bachelor of Social Science Program and also acted as the Honours and Coursework Post-graduate Degrees Coordinator. I was Unit Co-ordinator for four units, including a core theory and practice methods unit with 110 students, and three practice skills units involving up to 90 students. I also supervised post-graduate research students.
- Jul 1997 – Nov 2000    Lecturer Professional Practice, Level B, School of Human Services, Queensland University of Technology, Carseldine, Ongoing appointment. I was Unit Co-ordinator for three units, including responsibility for the fieldwork program involving 100 students undertaking 500 hr placements in diverse industry locations.
- Mar 1997-Jul 1997    Regional Manager, AO8, Family and Youth Operations, South West Queensland Region, Ipswich, Qld Department of Families, Youth and Community Care. I was responsible for seven Area Offices in SW Brisbane and rural areas with an annual budget of \$8m and approximately 100 staff who delivered services in the child protection and juvenile justice programs.
- Jun 1993-Mar 1997    Manager, AO7, Court Services, Division of Protective Services and Juvenile Justice, QLD Department of Families, Youth and Community Care. Responsible for 20 staff involving state-wide coordination of departmental litigation, service delivery to all State and Federal courts, and training programs for professional staff regarding departmental interventions. Court Services is a 'best practice' unit of the Dept.
- Mar 1991-Jun 1993    Senior Resource Officer (Protective Services), AO6, South West Region, Ipswich, Division of Protective Services and Juvenile Justice, Department of Family Services and Aboriginal and Islander Affairs. Responsible for policy coordination and implementation, including training of professional staff and community education.

Aug 1990-Mar 1991 Team Leader, Central Division, East Country Region, Department for Community Services, WA. Responsible for 20 professional staff and oversight of service delivery standards in juvenile justice and child protection programs.

Other positions include: Senior Social Worker, Children's Protection, Central Division, East Country Region, Department for Community Services, WA; Area Office Supervisor, Children's Services Department, Bundaberg, and Emerald Qld; Psychiatric Social Worker, Mosman Hall Special Hospital, Health Department, Charters Towers, Qld; and Social Worker, Commonwealth Rehabilitation Centre, Townsville, Qld.

### **RELEVANT RESEARCH INTERESTS**

Reform of contemporary child protection systems and the impacts on children, families and practitioners.

Rural communities, social care and social welfare service delivery issues including the recruitment and retention of human service practitioners

Human Services workforce planning and development

Occupational stress in the human services.

Ethical practice within the changing Human Services environment.

The interface between social policy frameworks and human services practice.

### **RELEVANT RESEARCH and GRANT FUNDING**

I have an established track record of inter-disciplinary and cross-institutional research projects. My well-developed group facilitation skills have enabled me to link with researchers from diverse groups and institutions and form into cohesive, successful and productive teams. I am an effective leader and team player. Furthermore, my substantial industry management experience has assisted me to appropriately utilise my superior communication, negotiation and conflict resolution skills to ensure productive and beneficial team processes and outcomes. I have, in collaboration with colleagues, submitted for research and grant funds in the following instances:

- 2012 - Social Research Centre and Dept of Human Services Victoria - Analysis of Early Findings of Child and Family Services Outcomes Survey - **\$27,500.**
- 2011 – Social Research Centre and Dept of Human Services Victoria - Analysis of Early Findings of Child and Family Services Outcomes Survey - **\$15,000.**
- 2012-2014 ARC Discovery Grant application (pending) – ‘Rural communities caring well for children: how community interactions and social connections mediate informal and formal protective responses’ with Prof Karen Francis (CSU), Prof Maria Harries (UWA), A/Prof Lisa Bourke (UniMelb), A/Prof Bronwyn Fredericks (CQU), Dr Mick Adams (QUT) and Prof Gary Melton (University of Colorado USA), \$477,000.
- 2011-2013 ARC Discovery Grant application (unsuccessful) – ‘Rural communities caring well for children: how community interactions and social connections mediate informal and formal protective responses’ with Prof Karen Francis (Monash), A/Prof Maria Harries (UWA), A/Prof Lisa Bourke (UniMelb), Dr Bronwyn Fredericks (QUT), Dr Mick Adams (QUT) and Prof Gary Melton (Clemson Uni USA), \$477,000.
- 2010-11 Goori House Inc – Evaluation of service delivery models and organisational development of this Indigenous alcohol and drug residential treatment program **\$77,000.**
- 2010-11 – ARC Discovery grant application (unsuccessful)- ‘Child abuse and neglect: A mixed method socio-legal study to improve identification’ with Dr Ben Mathews (QUT), Prof Frieda Briggs (UniSA), Dr Chris Goddard (Monash), Prof Stephanie Short (Syd). Funds of \$630,000 were applied for.



- 2010-11 – QHealth Clinical Academic Fellowship Grant, QUT SW&HS in conjunction with Child & Youth Mental Health Service – Research of Youth Mental Health and Family-based Therapies and Capacity Building of Professional Staff - **\$375,000.**
- 2009-10– ARC Discovery grant application (unsuccessful) – ‘Improving the identification of child abuse and neglect: A mixed method socio-legal study’ with Dr Ben Mathews (QUT), Prof Frieda Briggs (UniSA), Dr Chris Goddard (Monash), Prof Stephanie Short (Syd). Funds of \$822,000 were been applied for and the project narrowly missed out, being in the B+ list (within 5% of funding).
- 2008 – Contract research Australian Government Department of Health and Ageing - Encouraging best practice in residential aged care program. Project “Creating Champions for Skin Integrity” \$979,000. Chief Investigator for the evaluation of the project **\$18,664.**
- 2007 Australian Learning and Teaching Institute (ALTC) (formerly Carrick Institute) – Discipline Based Initiatives Scheme - Developing an Integrated National Curriculum for the Education of the Social Work and Human Services Workforce **\$99,000;**
- 2007-8 - Application for International Council For Canadian Studies (ICCS) International Research Linkages (IRL) for *Social Work Education for Rural Practice in Australia and Canada* in collaboration with Dr R. Green (Ballarat) and Dr R. Bodor (UCalgary) - Application successful - **\$10,000;**

### Current Projects

#### *Analysis of Findings of Child and Family Services Outcomes Survey*

This contract research entailed the statistical analysis and preparation of a report for the Social Research Centre and Dept of Human Services Victoria. The data collected was part of a large scale evaluation of the Victorian child protection, family services and out of home care services. We have completed an initial findings report 2011 and the final findings report 2012.

#### *QHealth Clinical Academic Fellowship Grant, QUT SW&HS in conjunction with Child & Youth Mental Health Service*

The result of significant collaboration with CYMHS, this research project involves significant funding of youth mental health and family-based therapies and capacity building of professional staff over a five year period. There are collaborations with international scholars in the area, which involves a focus on evidence-based practice in areas such as eating disorders and other psychiatric illnesses experienced by young people.

### Completed Projects

#### *Analysis of Early Findings of Child and Family Services Outcomes Survey*

This contract research entailed the statistical analysis and preparation of a report for the Social Research Centre and Dept of Human Services Victoria. The data collected was part of a large scale evaluation of the Victorian child protection, family services and out of home care services. The initial findings report was completed Sept 2011.

#### *Simulated learning environments within social work curricula*

This Health Workforce Australia funded project maps and scopes the current use of SLEs within social work education and will identify how emerging digital technologies can be used to enhance curricula. The project entails collaboration with AASW, AHPA and ACHSSW. It has potential to significantly change the ways in which students are taught practice skills and preparation for field education and professional practice. Following the completion of the report, HWA and QUT SW&HS are in discussions about progressing a national initiative for SLE’s within social work and allied health workforce education.

#### *Goori House Program Evaluation*

This project involved the service evaluation of Goori House’s alcohol treatment residential program and management systems and processes, the report being finalised in April 2011. Following this, there have been ongoing discussions and negotiations concerning the establishment of a mutually beneficial relationship between them and QUT SW&HS.

#### *Evaluation of “Creating Champions for Skin Integrity” Project*

This large contract research project was funded (**\$979,000**) by the Australian Government’s Department of Health and Ageing to utilise an action research method in developing successful change management in ten

aged care residential services in regard to the identification, treatment and management of wounds in elderly residents. This is a major health and wellbeing issue for Australia's aged persons in both residential care and community care. I lead the team with responsibility for the overall evaluation of the project and its success in meeting the contracted outcomes and change management processes. The project has been undertaken in 2009-2010, finishing in October this year.

#### *Human Services Workforce and Curriculum Planning*

I recently authored a successful Australian Learning and Teaching (ALTC – formerly Carrick Institute) Discipline Based Initiatives grant in *collaboration with* Prof Karen Healy, University of Queensland. This project mapped nationwide the current Tertiary and TAFE curriculum for social work and the human services, and identified major workforce trends and educational/ training needs, with the primary aim being to commence a process to develop an integrated national curriculum for the sector. The project has significant implications for industry and practitioners, including the development of clearer and more coherent educational and career pathways.

Based on our research findings, I gave written and oral along with my colleague Prof Karen Healy to the Queensland Industrial Relations Commission's 2009 hearing of a re-evaluation case for the Social and Community Services Award (SACS). We were cited >50 times in the QIRC decision which awarded substantial remuneration increases (15-37%) to employees in this vital social care sector. The decision was directly based on our research findings and proposed framework for ensuring workforce development and sustainability in the sector, including attracting higher education and VET students, and rewarding higher qualifications and expertise. Subsequent revaluation of the national community services award by Fair Work Australia was also based on the Queensland precedent and our research.

#### *Contemporary Child Protection Systems*

I have established a major scholarship collaboration with Prof Nigel Parton (U Huddersfield UK), A/ Prof Maria Harries (UWA) and Dr Jane Thomson around systemic analysis of contemporary child protection systems and the outcomes for key stakeholders including children (particularly children in care), parents, staff and community members. We published our first book in 2009 and are currently planning further journal articles and books. We primarily use secondary data sources including Australian Institute of Health and Welfare, reports from judicial and other inquiries, and other relevant studies. Our work has international significance due to the major problems and poor outcomes currently being experienced. These collaborative projects have had an international impact and will lead to further similar projects with other overseas researchers and academics. With the addition of A/Prof Donna McAuliffe (Griffith) we are currently working on a book addressing ethical dimensions of sound child protection practice. I gave oral and written submissions to the Crime and Misconduct Commission of Inquiry into Foster Care in Queensland in 2004, and was cited 7 times in the final report.

#### *Rural communities caring well for children: how community interactions and social connections promote wellbeing, safety and protective responses*

This project developed an ARC Discovery Grant application for 2011 and 2012. I lead the team along with members Prof Karen Francis (nursing Monash), Dr Lisa Bourke (sociology Uni of Melb) and A/Prof Maria Harries (Soc Wk UWA). This project follows on work outlined below on rural social care and existing work on child protection and uses community interaction theory to examine the ways in which communities care well for children and how these can be enhanced through government policy and community initiatives.

#### Current Research Higher Degree Students

PhD - The applicability and refinement of the 'practice domain framework' as a conceptual tool for understanding and guiding social care practice – Ros Darracott, QUT.

PhD – Empowerment through education: A critical approach to social welfare education in Tonga – Kate Saxton, QUT

PhD - An investigation into the nature and extent of sexual behaviour problems in children in out-of-home care, in the Queensland context, and the factors influencing placement stability – Tania Withington, QUT

PhD – ‘Kinship foster care in rural China’ – Hu Yang, QUT.

PhD – ‘Down and out in the bush: Women living with major depression and their experiences of accessing and receiving services and treatment in rural and remote Australia- Stephanie Johnson, QUT.

PhD - “Factors contributing to the development of stress and vicarious trauma risk or resilience in child protection work” Erica Russ through University of Queensland.

#### Completed Postgraduate Research Students

PhD – “Staff Turnover and Domestic Violence Services in South East Queensland Australia”, Debbie Duthie, QUT – 2012.

PhD – A Typology of the Needs of Children in Out of Home Care – UQ - Stuart Redshaw 2008

Professional Doctorate - The Development of a Professional Framework for Practice – QUT 2007 – Judith Oliver

M. Social Work – Research Course “What we think works: Practitioners perspectives of what constitutes effective practice in youth justice case work in Queensland.” UQ - Cathy Phillips 2006.

#### **PUBLICATIONS**

##### Books and Monograph Publications

1. Healy, K. & Lonne, B. (2010). *The Social Work and Human Services Workforce: Report from a National Study of Education, Training and Workforce Needs*, Strawberry Hills, NSW: Australian Learning and Teaching Council.
2. Lonne, B., Parton, N., Thomson, J., & Harries, M. (2009). *Reforming Child Protection*, London, Routledge.
3. Cheers, B., Darracott, R., & Lonne, B. (2007). *Social care practice in rural communities*, Annandale, NSW, Federation Press.

##### Book Chapters

1. Lonne, B. (in press, 2012). ‘Australian Social Work in the 21<sup>st</sup> Millennium – Workforce Trends, Challenges and Opportunities’, in G. Palattiyil, D. Sidhva and M. Chakrabarti *Social Work in a Global Context: Issues, Trends and Challenges*, Routledge London.
2. Lonne, B. & Duke, J. (2008). ‘The Registration of Social Workers’, in M. Connelly & L. Harms (eds.) *Social Work: Contexts and Practice*, pp. 378-392, Oxford University Press.
3. Lonne, B., & Darracott, R. (2006). Social work in rural and remote communities, E. Chui & J. Wilson (eds.) *Best Practice in the Fields of Social Work and Human Services*, Annandale, NSW, Federation Press.
4. Lonne, B. (2003). Social workers and human service practitioners. In M. Dollard, A. Winefield & H. Winefield (eds.) *Occupational stress in the service professions*, (pp. 281-310). London: Taylor and Francis.
5. Lonne, B., McDonald, C., & Fox, T. (2003). Emerging ethical issues in the Human Services: The times they are a changing? In L. Briskman & M. Muetzelfeldt (eds.) *Moving Beyond Managerialism in Human Services*, Melbourne: RMIT Press.
6. Lonne, B., & Cheers, B. (2000). Keeping human service professionals in the bush. In P. Munn & J. Farrin (eds.) *Constructing Alliances Across Rural Communities. Proceedings of the 4<sup>th</sup> National Regional Australia Conference, Vol. 1*. Whyalla, South Australia, University of South Australia Library, pp. 163-170.

##### Refereed Publications

1. Lonne, B., Lantz, S., & Harries, M. (in press, 16 Nov 2011). ‘Workforce development in child protection in Australia: a pathway for successful reform of child protection systems’, *British Journal of Social Work*.
2. Lonne, B. (2012a). ‘Albertan Child Welfare: Opportunities for Better Processes and Outcomes’, *Journal for Services to Children and Families*, Special Edition, Vol 1, 8-17.
3. Kojan, B. & Lonne, B. (2012b) ‘A Comparison of Systems and Outcomes for Safeguarding Children in Australia and Norway’ *Child and Family Social Work*, 17(1), 96-107.

4. Wendt, S., Cheers, B., Francis, K., Lonne, B., & Schiller, W. (in press on line, Feb 21 2011) 'Exploring social workers' personal domains in rural practice' *Journal of Social Work*.
5. Humphreys, C., Bromfield, L., Harries, M., Healy, K., Lonne, B., Mendes, P., McHugh, M., Sheehan, R. (2009). 'Shifting the child protection juggernaut to earlier intervention', *Children Australia*, 34(3), 5-9.
6. Mathews, B., Goddard, C. Lonne, B., Short, S. & Briggs, F. (2009). 'Developments in Australian laws requiring the reporting of suspected child sexual abuse', *Children Australia*, 34(3), 18-23.
7. Russ, E. Lonne, B. & Darlington, Y. (2009). 'Reconceptualising child protection workforce capacity: The place of resilience', *Australian Social Work*, 62(3), 324-338.
8. Lonne, B. (2009) 'Social justice and high-quality human services: Visioning the place of a contemporary professional association', *Australian Social Work*, 62(1), 1-9.
9. Karger, H. & Lonne, B. (2009). 'Unionisation: A necessary strategy to arrest professional decline?', in P. Kurzman and P. Maiden (eds.) *Journal of Workplace Behavioural Health*, 24(1), 21-44, and also published as a text titled *Labour's Contributions to Workplace Human Services*, Haworth.
10. Harries, M., Lonne, B., & Thomson, J. (2007). Protecting Children and Caring for Families: Re-thinking Ethics for Practice, *Communities, Children and Families Australia*, 2(1), 39-48.
11. Murray, M., & Lonne, B. (2006). An innovative use of the web to build graduate team skills, *Teaching in Higher Education*, 11(1), 63-77.
12. Cheers, B., Darracott, R., & Lonne, B. (2005). Domains of rural social work practice, *Rural Society*, 15(3), 234-251.
13. Green, R. & Lonne, B. (2005). "Great lifestyle, pity about the job stress" - Occupational stress in rural human service practice, *Rural Society* 15(3), 252-266.
14. Lonne, B., & Thomson, J. (2005). A Critical Review of Queensland's CMC Inquiry into Abuse of Children in Foster Care: Social Work's Contribution to Reform, *Australian Social Work*, 58(1), 86-99.
15. Bodor, R., Green, R., Lonne, B., & Zapf, MK. (2004). 40 degrees above or below zero: Rural social work and context in Australia and Canada, *Rural Social Work*, 9, 49-59.
16. Lonne, B., & Cheers, B. (2004). Retaining rural workers: An Australian study, *Rural Society*, 14(2), 163-177.
17. Lonne, B., & Cheers, B. (2004). Practitioners Speak - A Balanced Account of Rural Practice, Recruitment and Retention, *Rural Social Work*, 9, 244-254.
18. Lonne, B., McDonald, C., & Fox, T. (2004). Ethical practice in the contemporary human services, *Journal of Social Work* 4(3), 345-367.
19. Fox, T., Lonne, B., & McDonald, C. (2001). Curriculum development for professional ethics in Australian human service university programmes, *The Curriculum Journal*, 12(2), 241-259.
20. Lonne, B., & Cheers, B. (2000). Rural social workers and their jobs: An empirical study. *Australian Social Work*, 53(1). 21-28.
21. Lonne, B., & Cheers, B. (1999). Recruitment, relocation and retention of rural social workers. *Rural Social Work*, 5. Dec. 13-23.
22. Lonne, B. (1999). Evaluation of professional practice for human services students: Issues, trends and initiatives. *International Journal of Practical Experiences in Professional Education Inc. (PEPE)*. 3 (1), 55-76.
23. Clapton, S., Lonne, B., & Theunissen, C. (1999). Multi-victim sexual assault: A case study in rural Australia. *International Child Abuse and Neglect*, 23 (4), 395-404.
24. Lonne, B., Theunissen, C. & Clapton, S. (1997). Child abuse in rural Australia: Explanations and implications. *Rural Society* 7. (1), 3-13.
25. Lonne, B. (1990). Beginning country practice. *Australian Social Work*, 43.(1), 31-39.

#### Non-Refereed Papers

1. Lonne, B. (2008 & 2005). Opinion piece on the merits of state regulation of social work in L. Chenoweth & D. McAuliffe *The Road to Social Work and Human Service Practice: An introductory text*. Thomson Learning.
2. Lonne, B. (2006). Book review of R. Brody, 'Effectively managing human service organisations' (3<sup>rd</sup> edition) (2005) in *Australian Social Work*.
3. Lonne, B. (1998). Book review of T. Watson, 'Sociology, Work and Industry (3<sup>rd</sup> Edition), (1997)' London: Routledge. in *Journal of Applied Social Behaviour*. 4(2), 67-68.

#### Conference and Professional Education Seminar Papers

1. Lonne, B. & Gillespie, K. (2012). *Print Media Portrayal of Child Abuse and Neglect: A National Study*, paper presented to the Family Transitions and Trajectories Conference of Australian Institute of Family Studies, Melbourne Convention Centre 25-27 July 2012.
2. Lonne, B. (2012). *Future Directions for the National Framework for Protecting Australia's Children*, Presentation to the Child Safety Services Senior Practitioners Forum, Warilda Conference Centre, Brisbane, 29 February.
3. Lonne, B. (2012). *Building Social Workers' Cultural Competency: The Australian Experience*, **Keynote Address** to Korea Association of Social Workers Overseas Training for Social Workers Conference, Seoul, South Korea, 12 January.
4. Lonne, B. (2011). *Reforming Child Protection through Outcome-based Services & Evaluation*, presentation to Queensland Child Protection Research Symposium, Griffith University, Brisbane, 25 November.
5. Lonne, B. (2011). *Re-imagining child welfare: Issues, outcomes and reform*, **Keynote address** to Outcomes Based Service Delivery Symposium, Alberta Association of Services for Children and Families and Alberta Center for Child, Family and Community Research, Edmonton, Alberta, 16 November.
6. Lonne, B. & Hateley (2011). *Building a sustainable workforce: Issues, challenges and innovations*, Workforce and innovation: Building future capacity, Family Relationship Services of Australia National Conference, Gold Coast 8-10 November.
7. Lonne, B. (2011). *The Global Agenda: An Australian Perspective*, **Keynote Address** at Crossing Borders, Interdependent Living and Solidarity, Regional IFSW Conference, Waseda University, Tokyo, 15-18 July.
8. Lonne, B. (2011) *Supporting children's rights to protection: People, programs, realities and reforms*, **Keynote Address** presented to the Protecting Children through Family Support, Child & Family Research Conference, June 16/17, 2011 - Aras Moyola, NUI Galway.
9. Lonne, B., & Harries, M. (2010). 'Yes but... no but .... Connecting and collaborating isn't that easy', paper presented at the Australian College of Child and Family Protection Practitioners Conference, Connecting and Collaborating: moving towards holistic approaches when working with children, families and communities, Canberra, 15-17 October 2010.
10. Lonne, B. (2010). *Child protection systems: Pathways to reform*, **keynote address** presented at the Coalition for Change conference, Department of Human Services, Geelong, Victoria, 5-6<sup>th</sup> August.
11. Lonne, B. (2010). *An Australia-wide perspective on workforce issues for social work and the human services*, **keynote address** presented at the Coalition for Change conference, Department of Human Services, Geelong, Victoria, 5-6<sup>th</sup> August.
12. Lonne, B. & Healy, K. (2010). *Current trends and issues in the social work and human services workforce and curriculum: What does the data tell us?* Invited paper presented to the Australian Council of Heads of Schools of Social Work, Launceston, 2-3 February.
13. Lonne, B. & Healy, K. (2009). *Rethinking the child protection paradigm and the application of the 'best interests' principle: Antecedents to systemic reform*, paper presented at the 8<sup>th</sup> ISPCAN Asia-Pacific Regional Conference on Child Abuse and Neglect & APCCAN 2009, 'Child Abuse and Neglect: Looking through the Lens of Prevention', Perth, 15-18 November.
14. Lonne, B. (2009). *Where exactly is social work positioned regarding social inclusion-exclusion agendas? Issues and options for practice*, **Plenary Address** at the 20<sup>th</sup> Asia-Pacific Social Work Conference 'Many voices, many communities, social justice for all', Auckland 11-13 November.
15. Lonne, B. & Healy, K. (2009). *The altered place for social work in the contemporary human services: Workforce and Curriculum Trends and Issues*, paper presented at the 20<sup>th</sup> Asia-Pacific Social Work Conference 'Many voices, many communities, social justice for all', Auckland 11-13 November.
16. Lonne, B. (2009). *Indigenous history, The National Apology, Social Work and the AASW*, public lecture presented at University of Auckland, School of Counselling, Human Services and Social Work, July 15<sup>th</sup>.
17. Lonne, B. (2009). *Re-imagining Child Welfare for the 21<sup>st</sup> Century – Possibilities for Change and Ethical Practice*, public lecture presented at University of Auckland, School of Counselling, Human Services and Social Work, July 15<sup>th</sup>.
18. Lonne, B. & Healy, K. (2009). *The paraprofessionalisation of Australia's Community Services Sector: Analysis of Contemporary Employment Patterns*, paper presented at the Australian Social Policy Conference 'An Inclusive Society? Practicalities and Possibilities' Sydney 8-10<sup>th</sup> July.

19. Lonne, B. & Harries, M. (2009). *Creating Healthy Organisational Communities that Assist Workers to Care for and Protect Vulnerable Children & Families*, workshop presented at the Australian Council for Child and Family Protection Practitioners, 'Quality' conference, Brisbane May 22-24 May 2009.
20. Lonne, B. Karger, H., Chenoweth, L., & Hughes, R. (2009). *The future of the social work profession*, World Social Work Day organised by West Moreton-South Burnett District Social Work Group, Ipswich Hospital.
21. Lonne, B. (2009). *Re-imagining child welfare for the 21st Century - Social Work's Responsibility To Act*, Paper presented to the University of Calgary Faculty of Social Work and public invitees, March 3, Edmonton.
22. Lonne, B. & Healy, K. (2009). *Social work and human services workforce and curriculum planning, Summarised findings*, paper presented to Australian Council of Heads of Schools of Social Work, Sydney, January 29-30.
23. Lonne, B. (2008). *Social Justice and High-Quality Human Services: Visioning the Place of a Contemporary Professional Association*, Norma Parker Address and **Keynote Address** at the Strength in Unity Conference, hosted by Australian Association of Social Workers, Australian Association of Social Work and Welfare Educators and Australian Institute of Welfare and Community Workers at Sydney, NSW, 9-12<sup>th</sup> November 2008.
24. Lonne, B. & Healy, K. (2008). *Social Work and Human Services Curriculum*, at the Strength in Unity Conference, paper at the Strength in Unity conference hosted by Australian Association of Social Workers, Australian Association of Social Work and Welfare Educators and Australian Institute of Welfare and Community Workers at Sydney, NSW, 9-12<sup>th</sup> November 2008.
25. Lonne, B. & Harries, M. (2008). *Reimagining Services for Children and Families*, **Invited Address** presented to senior managers of Families SA, 25<sup>th</sup> Sept, Adelaide.
26. Lonne, B. (2008). *Social Inclusion: Implications for Social Policy and Social Work*, **Invited Address** at the Social Inclusion: Vision into Action Centrelink Rural NSW Social Work Conference, Wagga Wagga NSW, 8-10th Sept 2008.
27. Lonne, B. & Harries, M. (2008). *Ethical Responsiveness: Putting Ethics Centre Stage in Child Protection*, Paper presented at the Australian College of Child and Family Protection Practitioners Conference, Adelaide, SA, 23-25 May 2008.
28. Lonne, B. & Harries, M. (2007). *Re-evaluating the Place of Values and Ethics in the Care and Protection of Children: A Voice from the Wilderness*, Voices Calling for Action, 11<sup>th</sup> Australasian Conference on Child Abuse and Neglect, Gold Coast, Qld Oct-Nov 2007.
29. Lonne, B. (2007). *Ethics, the AASW and Contemporary Social Work Practice in the Restructured State*, **Invited Address**, Alternative Narratives: Investing in Strengths – Centrelink Area South West NSW Social Work Conference at Charles Sturt University (CSU) Bathurst, Oct 2007.
30. Lonne, B. (2007). *Social Work's Place in the Human Services Omelette – Binding and Separating?*, **Key Paper**, Social Work: The Binders, the Separators and the Central Host, AASW Qld-Nth Qld Branch Conference, Yeppoon Oct 2007.
31. Lonne, B. & Peut, J. (2007). *Rural Social Care: Binding and Separating Approaches to Professional Practice*, Social Work: The Binders, the Separators and the Central Host, AASW Qld-Nth Qld Branch Conference, Yeppoon Oct 2007.
32. Lonne, B. Cheers, B. et al (2007) *Disciplinary Divides: Contemporary Rural Social Care*, Beyond the Great Divide 8<sup>th</sup> Biennial Conference - Rural Social Work Action Group, Echuca Victoria. July 2007.
33. Cheers, B., Lonne, B. et al (2007). *Social care practice in rural communities*, 2nd International Conference on Interdisciplinary Social Sciences, Grenada Spain July 2007.
34. Lonne, B. (2007). *The Changing Context of Child Protection*, presentation to the Dept of Child Safety EAP Counsellor's Workshop, May 31<sup>st</sup>, Riverglenn Conference Centre, Brisbane Queensland.
35. Lonne, B. (2006). *The Norma Parker Address*, **Keynote Address** at the United We Stand Conference hosted by Australian Association of Social Workers, Australian Association of Social Work and Welfare Educators, Australian Institute of Welfare and Community Workers and the Society of Professional Social Workers at Fremantle, Western Australia, 19-21<sup>st</sup> November 2006.
36. Lonne, B. & Green, R. (2006). *Concrete walls or permeable boundaries? The future of social work and welfare practice in the 21st Century*, at the United We Stand Conference hosted by Australian Association of Social Workers, Australian Association of Social Work and Welfare Educators, Australian Institute of Welfare and Community Workers and the Society of Professional Social Workers at Fremantle, Western Australia, 19-21<sup>st</sup> November 2006.
37. Lonne, B. (2006). *Rethinking and Reforming Child Protection Systems*, **Keynote Address**, at the International Strengths-Based Strategies Conference, Hyderabad, India, 11-12<sup>th</sup> November 2006.

38. Lonne, B. (2006). *Contemporary Child Protection Systems: Hindering or Helping?*, Presentation at the AASW South Australian Branch Continuing Professional Education Seminar, 30 June 2006, Adelaide.
39. Lonne, B. (2006). *Life in the New Millenium – W(h)ither Social Work?*, Presentation at the AASW South Australian Branch Continuing Professional Education Seminar, 29 June 2006, Adelaide.
40. Lonne, B., Harries, M., & Thomson, J. (2005), Themes and Principles for Reforming Australian Child Protection Systems. International conference for the International Society for Prevention of Child Abuse and Neglect 16-18<sup>th</sup> November 2005, Singapore.
41. Harries, M., Lonne, B., & Thomson, J. (2005), New Frontiers for Child Protection: Shared Lessons across Countries and Continents. International conference for the International Society for Prevention of Child Abuse and Neglect 16-18<sup>th</sup> November 2005, Singapore.
42. Harries, M, Lonne, B, & Thomson, J. (2005). *Beyond Buzzwords: Principles and Themes for Reforming Child Protection Practice*. Centre for Research on Community and Children’s Services, 3<sup>rd</sup> International Research Conference *Challenging Practices*, Mackay, August.
43. Harries, M, Thomson, J, & Lonne, B. (2005). *Coast to coast: New frontiers for child protection in Australia*, Centre for Research on Community and Children’s Services, 3<sup>rd</sup> International Research Conference *Challenging Practices*, Mackay, August.
44. Lonne, B. (2005). *Ethics and values in social welfare practice and the current contested contexts of workplaces*, **Keynote address** at Queensland Community Services and Health Industries Council Skills Development Network, Townsville, June.
45. Lonne, B. (2005). *Worker stress and burnout*, **Keynote address** at Queensland Association of Independent Legal Services Conference, Putting community back into community legal centres, Bribie Island, March.
46. Harries, M, Thomson, J, & Lonne, B, (2004). *Coast to coast: New frontiers for child protection in Australia*, School Seminar and Workshop Series, School of Social Work and Applied Human Sciences, University of Queensland, Brisbane, Dec.
47. Lonne, B, (2004). *The siren calls: W(h)ither social work?* **Keynote address** at the Social Work and Social Policy Alumni & Associates – Social Work Practices Day, Toowoomba, November.
48. Lonne, B. (2004). *It’s a marathon – not a sprint: Zestful antidotes for rebuffing the slings and arrows of contemporary human service practice*. **Keynote address** at the Australian Institute of Welfare and Community Workers Biannual National Conference, Bribie Island, November.
49. Thomson, J., & Lonne, B. (2004). *Social work and real reform of statutory services: A Queensland case study*. Paper presented at the International Federation of Social Work, Global Social Work Conference, Reclaiming Civil Society, Adelaide, Oct 2-5, 2004.
50. Lonne, B., & Green, R. (2004). *In the public eye: Rural human service workers’ personal experiences of their visibility and safety and the impact on job stress* Paper presented at the International Federation of Social Work, Global Social Work Conference, Reclaiming Civil Society, Adelaide, Oct 2-5, 2004.
51. Lonne, B. & Cheers. B. (2003) *Keeping Social Workers in the Bush: Practitioners Speak* Paper presented to the International Conference on Human Services in Rural Communities, Halifax, Nova Scotia, Canada, May 29-30.
52. Bodor, R., Green, R. Lonne. B., & Zapf, M. K. (2003). *Considering the Context of Rural Social Work in Australia and Canada: Variations Other than 40 Degrees Above or 40 Degrees Below*, Paper presented to the International Conference on Human Services in Rural Communities, Halifax, Nova Scotia, Canada, May 29-30.
53. Lonne, B. & Cheers, B. (2003) *What’s rural practice like? Australian Practitioner Perspectives* Paper presented to the National Conference of the Canadian Association of Schools of Social Work, Halifax, Nova Scotia, Canada, June 1-4.
54. Green, R., & Lonne, B. (2003). *Job stress, health and safety for social workers: Positive and negative influences of rural practice contexts*. Paper presented to the National Conference of the Canadian Association of Schools of Social Work, Halifax, Nova Scotia, Canada, June 1-4.
55. Lonne, B. (2002). *Juggling whilst on the highwire: Managing work stress in the rapidly changing human services*. **Keynote Address** to Australian Institute of Welfare and Community Workers Inc ‘Wellskills Conference – Understanding and caring for yourself in the workplace’. Brisbane, Queensland. 23 November 2002.
56. Lonne, B., & Cheers, B. (2001). *Adjusting to rural practice: A national study*. Paper presented to the Australian Association of Social Workers National Conference, Melbourne, Victoria. 23-26 September.
57. McDonald, C., Lonne, B. & Fox, T. (2001) *The impact of managerialism and contractualism on ethical practice in the human services*. Paper presented to the Australian Association of Social Workers National Conference, Melbourne, Victoria. 23-26 September.

58. Lonne, B., & Cheers, B. (2001). *Contemporary thinking and research on rural and remote social care: Implications for practice, recruitment and retention*. **Keynote address** to 'Rural Practice Building Bridges' Rural Social Workers Conference, LaTrobe University Beechworth Victoria. 5-6 July.
59. Lonne, B., McDonald, C., & Fox, T. (2000). *Emerging ethical issues in the human services: The times they are a changing?* Paper presented at the 'Managerialism, contractualism and professionalism in human services' conference, Centre for Citizenship and Human Rights, Deakin University, Melbourne, 20-21 November.
60. Fox, T., Lonne, B., & McDonald, C. (2000). *Human services delivery issues and curriculum development*. Paper presented at the 'Managerialism, contractualism and professionalism in human services' conference, Centre for Citizenship and Human Rights, Deakin University, Melbourne, 20-21 November.
61. Lonne, B., McDonald, C., & Fox, T. (2000). *Ethical practice in the human services: At what price Marketisation?* Paper presented to 'New thinking in welfare and community services – Toward a sustainable future' QCOSS Biennial Conference, Brisbane, 26-27 October.
62. Lonne, B., & Cheers, B. (2000). *Personal and professional adjustment of social workers to rural and remote practice: Implications for improved retention*. Paper presented to the International Conference on Rural Communities and Identities in the Global Millennium, pp. 48-53, Malaspina University-College, Nanaimo, British Columbia, Canada. May 1-5.
63. Lonne, B., & Cheers, B. (2000). *Rural social work in Australia: Recruitment, retention and practice*. '**Distinguished Lecture Series**', paper presented for Faculty of Social Work, University of Calgary, Calgary, Canada. May 8.
64. Lonne, B., & Cheers, B. (2000). *Keeping human service professionals in the bush*. Paper presented to the 4<sup>th</sup> National Regional Australia Conference, 'Constructing Alliances Across Rural Communities'. Whyalla, South Australia, 11-14 April.
65. Lonne, B., & Cheers, B. (1999). *Australian rural social workers and their jobs: Implications and recommendations for recruitment*, Paper presented to the 26<sup>th</sup> National Conference of the AASW, 'Promoting Inclusion – Redressing Exclusion: The Social Work Challenge'. Brisbane, Sept.
66. Cheers, B., & Lonne, B. (1999). *Rural social care practice in Australia*. Paper presented to 4<sup>th</sup> Rural Practice Conference, 'Rural Practice – A Celebration' Rosemary Green & Belinda Coates (Eds). Rural Social Work Action Group: University of Ballarat, Victoria. pp. 35-43. ISBN 0-646-37743-4.
67. Lonne, B. (1999). *Reshaping professional practice experiences for Human Services students at Queensland University of Technology*. Paper presented at Fourth International Cross-faculty Practicum Conference, Christchurch, New Zealand, January 1999 hosted by the Association of Practical Experiences in Professional Education Inc. (PEPE).
68. Lonne, B. (1989). *Rural social work*, paper presented to the 21st National Conference of the AASW, Townsville, North Queensland, July.

### Major Government Reports

1. Lead Author – Findings Report Child and Family Services Outcomes Survey prepared for Social Research Centre and Department of Human Services, Victoria, August 2012.
2. Lead Author – Early Findings Report Child and Family Services Outcomes Survey prepared for Social Research Centre and Department of Human Services, Victoria, September 2011.
3. Lead Author
4. Member of Child Deaths Sub-Committee of Queensland Government Co-ordinating Committee on Child Abuse that presented report on "Child Abuse Deaths", Sept. 1995.
5. Member of Department of Family Services and Aboriginal and Islander Affairs evaluation team and co-author of Treasury Department required "Evaluation of the Protective Services Sub-program Report", presented July 1994.

### CONSULTANCIES

In my academic career to date, I have been involved in a limited number of small consultancies with human service organisations, including:

- Assessor for Australian Learning and Teaching Council (formerly Carrick Institute) grant applications – 2008-current
- Expert witness on child deaths for Queensland Coroner's Court – Murgon May 2007 – current.



- External Child Death Reviewer – Department of Child Safety 2004-7
- Bridges Reconnect – Professional development and supervision 2003
- Mental Health Association Queensland – Professional Development and Staff training 2003
- External reviewer for the Bachelor of Rural Welfare degree program at Ballarat University 2003
- Qld Department of Families – External Child Deaths Review Panel 2002-3
- St Michael’s Home Care, Brisbane – Strategic and operational planning 2001
- Qld Department of Families – Seminar presentation on rural human services practice 2001
- Qld Department of Corrective Services – External academic assessments of staff equivalency for salary progression 2000-2001
- Memorial University of Newfoundland 2001 – Liaison for student on placement

I have been involved on a ‘gratis’ basis with the following government appointment and agencies:

- Ministerially appointed Member of the Queensland Clinical Education and Training Council with QHealth
- Ministerially appointed Member of the national Common Approach to Assessment Referral and Support (CAARS) Evaluation Working Group being undertaken by ARACY and FACHSIA 2011- ;
- A foundation member of the 2010 Queensland National Framework Interdepartmental Working Group (QNFIWG) whose purpose is to drive implementation and reporting on the *National Framework for Protecting Australia’s Children* endorsed by COAG;
- Member of the Allied Health Professional Support National Network which is an advisory panel that consists of key workforce stakeholders 2011-;
- A foundation member of the national FAHCSIA & ARACY Common Approach to Assessment Referral and Support Taskforce (CAARS) to address issues around the wellbeing and safety of children, early intervention and prevention of child abuse and neglect 2009-2012
- Member of the QHealth Allied Health Education Standing Committee examining issues confronting the Health Workforce in Queensland 2009-;
- A foundation member of the national Centrelink Professional Practice Reference Group 2008-
- I gave oral and written submissions to the Crime and Misconduct Commission of Inquiry into Foster Care in Queensland in 2004, and was cited 7 times in the final report.
- Community Services Ministerial Advisory Council 2003 – Providing advice with respect to occupational stress and staff recruitment and retention issues associated with statutory roles.
- Mercy Family Services/ Qld Department of Families – Expert Academic Critical Friend 2002-3. This involves regularly meeting as part of an Action Learning Team that guides the operation and development of an innovative program that was recently funded under “Future Directions” for young parents who are at risk of losing their children.
- Qld Department of Families – The Lighthouse Project on Rural Staffing Issues 2003. My expertise in these issues led to me being invited to act as an academic advisor to the project.
- Guidelines Project: Hepatitis C Educational Guidelines Targeting Young Injectors – Queensland Alcohol and Drug Research and Education Centre 2003. I was on an Industry Reference Group that guided this innovative project which developed guidelines for agencies across the state that have contact with young injecting drug users.
- Interact Counselling – Hillcrest, Brisbane - Strategic and Operational Planning 2002. I acted as a consultant to assist the service to plan for the future and address emerging areas of need.

## **PROFESSIONAL INTERESTS AND ACTIVITIES**

I was the current National President of the Australian Association of Social Workers (elected Nov 2005, Sept 2008) until Oct 2011, which has approximately 6000 members and an annual budget of \$4.5m. During my period as National President the Association has undergone significant change management processes and re-established a sound financial footing and enhanced relevance to members and the profession. Following my implementation of strategic planning and review processes, the AASW is now in a growth and development phase, with a number of significant membership and business ventures being undertaken. Moreover, the AASW enjoys very positive relations with a diverse range of industry and professional stakeholders, both nationally and internationally as a direct consequence of my drive, vision and interpersonal skills.

I was elected as the International Federation of Social Workers Elections Officer at the IFSW Bi-ennial Meeting in Salvador Brazil August 2008. I have very good networks and contacts within the international social work fraternity.

Prior to my election as National President I was the Qld Director, on the National Board (Mar 05- Nov 05). The National Presidency is a senior executive position responsible for leadership and management of the Association, including chairing the National Board and Executive meetings, and along with the Executive Board members, running the Association between Board meetings. It entails significant responsibilities in relation to strategic and operational matters, including the following specific duties and responsibilities:

- Numerous public speaking engagements and presentations around the country and overseas, including media contacts;
- Numerous involvement across a variety of important committees including Chair of Finance Committee and Audit Committee;
- Member of National Mental Health Curriculum Development Committee undertaking \$220K contract for Federal Department of Health and Ageing;
- Member of the Editorial Board of the Australian Social Work professional journal;
- Member of Publications Committee of Australian Association of Social Workers;
- Member of Structural Review Committee and Constitutional Review Committees;
- Member of Reference Group for the Eligibility Review Committee;
- Member of Human Resources Committee;
- Member of Biannual National Conference Committee – Perth November 2006 and Sydney 2008;
- Development of AASW Communication Strategy;
- Consultation with international counterparts and the International Federation of Social Workers, including the Aotearoa and New Zealand Association of Social Workers, British Association of Social Workers, National Association of Social Workers (USA) and Canadian Association of Social Workers.

Other professional interests and involvements I have include:

- Elections Officer, International Federation of Social Workers, 2008-current.
- Editor ‘Communities, Children and Families Australia’ professional journal 2012-current.
- Friend of the International Federation of Social Workers 2006- current.
- Fellow of Australian College of Child and Family Protection Practitioners 2005- current.
- I was a participant in the Australian Government’s 2020 Summit in the rural group, April 2008.
- External research grant reviewer for the UK Economic and Social Research Council 2010-current
- Editorial Committee of ‘Rural Social Work’ professional journal.2000-current.
- Editorial Committee of Communities, Children and Families Australia professional journal – Inaugural year 2006- current.
- Editorial Committee of American Journal of Orthopsychiatry – 2009-current.
- Editorial Committee of Journal of Teaching in Social Work – 2010-current
- Blind referee of journal articles submitted to Rural Social Work and Community Practice, Rural Society, Australian Journal of Social Issues, Australian Social Work, British Journal of Social Work, American Journal of Orthopsychiatry, Asia Pacific Journal of Social Work and Development, and Evidence & Policy journals.
- Member Australian Association of Social Workers 2003-current.
- Member of International Society for the Prevention of Child Abuse and Neglect 2005-current.
- Member of Australian Association of Social Work and Welfare Educators 2005-2009.
- Centre for Social Change Research, Brisbane 2000-2004
- Practical Experiences in Professional Education (PEPE). 1998-2004.
- International Institute for Public Ethics, 2000-2003.

## **MEDIA CONTACTS**

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- (2010) SYN radio 90.7 – social workers in mental health – 20<sup>th</sup> May

- (2009) WIN Television News – Social Worker Shortage hits welfare services – 7 Nov
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- (2008) SBS News – Staff shortages in Child Protection, November
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- (2008) Australian – ‘Child Welfare is not working’: staff shortage, Nov 11.
- (2008) Northern Territory ABC Radio and Radio National – ‘Mandatory reporting of family violence’ 7<sup>th</sup> & 8<sup>th</sup> October.
- (2008) “9am with David and Kim” Channel 10 Chat show interview on children in state care and living in motels, April 16.
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- (2007) ABC Radio 612 – Current problems with the Dept of Child Safety – interview with Madonna King – Oct 1.
- (2007) Weekend Australian – ‘Damaged generation’ – Child protection and children in care and the systemic problems being encountered. - June 22.
- (2007) Weekend Australian – ‘The reward is respect’ - Recruitment and retention of rural social workers – story examining issues affecting rural social work practitioners & other professions – March 10-11.
- (2006) The Advocate – Alberta College of Social Workers – Feature Article Dialogue.
- (2006) RTR FM in Perth (West Australian) – Interview on Breakfast Session on National Conference of AASW-AASWWE-AIWCW-SPSW in Fremantle, WA.
- (2005) ABC Radio Capricornia – Jenny Swan – Juvenile Justice laws and naming offenders 6 June
- (2005) ABC Radio Southern Qld – Belinda Sanders – Juvenile Justice laws and serious crime - 3 June
- (2005) Queensland Times – Rain showers new hope - 13 May
- (2004) Courier Mail – Landing a smack can land you in court - 5 June
- (2004) Today Tonight – Learning right from wrong - 7 Oct
- (2001) Media Release by the Australian Association of Social Workers “Myths about Rural Service Delivery Exposed” 15 May.
- (1999) ABC Radio News. Interviewed about University training of rural social work practitioners 28 Sept.
- (1999) ABC Regional Radio. Interviewed about retention problems for rural social work practitioners 29 Sept.
- (1989) A Current Affair. Interviewed about Multi-victim Sexual Assault in WA (May)
- (1989) ABC Morning Radio. Interviewed about Multi-victim Sexual Assault in WA (May)

## **SENIOR MANAGEMENT ACTING OPPORTUNITIES**

Positions in which I have acted include:

- Director, Youth Justice Branch, Dept. of Families, Youth and Community Care, responsible for development and state-wide coordination of policy and program development of juvenile justice program.

- Manager, Program Development, Youth Justice Branch, Department of Families, Youth and Community Care, responsible for coordination and evaluation of program development for juvenile justice program
- Regional Manager South West Queensland Region, Protective Services and Juvenile Justice, Department of Family Services and Aboriginal and Islander Affairs, QLD, responsible for seven area offices and 100 staff.
- Divisional Manager, Central Division, Department for Community Services, WA, responsible for four district offices and thirty staff.

## **BACKGROUND AND WORK EXPERIENCE**

### Academic Career

Prior to accepting the Chair in Social Work at QUT I was an ongoing Lecturer (level C), School of Social Work and Applied Human Sciences at the University of Queensland, which I took up in February, 2004. I taught across the undergraduate and postgraduate programs in the Social Work, Human Services and Behavioural Studies degrees in areas including crime and youth justice, child abuse and child protection, human services management, and practice theories. I was also supervisor of a number of postgraduate research students in these areas. I consistently received superior student evaluations of my teaching and course (subjects) coordination (>4.5/5.0), with my postgraduate courses being popular and sustainable within current tight fiscal conditions in the tertiary sector. I had a number of postgraduate research students whom I supervised and I have marked several theses. I was an active member of staff and took my leadership responsibilities seriously.

Importantly, I was centrally involved in a number of significant course and curriculum review and development processes, and the subsequent change management needed to successfully implement new program directions. I developed a large number of new courses (subjects) across the undergraduate and postgraduate programs and have been instrumental in developing/ implementing the child protection PG certificate and Human Services UG programs. I had also been closely involved in a number of strategic processes to re-position the school and to ensure further growth and development. Throughout these processes I demonstrated superior abilities to work collaboratively and cooperatively with a range of staff and university stakeholders.

Prior to this position I held a Lecturer (level B) position at the School of Humanities and Human Services, Queensland University of Technology, Carseldine, which I held from July 1997. In this position I was the Course Coordinator for the Bachelor of Social Science. I also had unit (subject) coordination responsibility for a range of units and managed the Professional Practice program for three years, in which time I developed and maintained strong and positive relations with a large number of agencies and industry figures. I also did occasional teaching in other undergraduate and post-graduate units and supervision of post-graduate students.

My teaching has involved lecturing in a number of theoretical and practice areas including:

- The development of theoretical practice frameworks;
- Practice skills and processes such as engagement, needs assessment and referral;
- Theoretical and practice perspectives that shape welfare interventions;
- Contemporary child protection practices;
- The criminal justice system including juvenile justice, The legal system, the legal context of practice and practice issues;
- Practice methods including casework, case management, group work and crisis intervention;
- Program development and management;
- Use of self and relationship skills and reflective practice;
- Conflict resolution and team practice;
- Practice ethics and accountability mechanisms;
- Post-Fordism, Post-Modernism and Human Services industry trends and changes;
- The organisational context of human services practice including organisational culture and change management processes; and

- Professional development strategies including staff supervision.

My teaching and organisational abilities have been rated exceedingly positively in student evaluations of the courses I teach (Mean 4.5-4.8 out of max 5.0). I have actively engaged with UQ and QUT teaching and learning supports to develop my skills, knowledge and strategies. For example, I have regularly attended workshops and seminars on teaching large and small groups, assessment and evaluation techniques, use of information technology and on-line teaching, and post-graduate supervision processes.

The School of Humanities and Human Services undertook a major curriculum review in 2002-3 of the Bachelor of Social Science and I was an active and committed participant in this process, which led to the major changes in the course structure. In 1998-2000 I was an active member of the School review committee that examined the Bachelor of Social Science (Human Services). I undertook research of industry developments and needs, and student feedback. In the expanded curriculum, I developed four new units and participated in the collegial development and refinement of other units. By using my previous industry experience of determining learning needs and curriculum development, I have been able to successfully integrate the units for which I have held responsibility, into a coherent course that met current industry trends and requirements. Students, external stakeholders and reviewers have been very positive about the new curriculum. I have also been an active member of the Faculty Education and Curriculum Committees which oversight and review all proposed curriculum changes in a range of disciplines.

Since taking up my academic positions, I have developed my teaching abilities and participated in a robust program of professional development including a variety of learning and assessment strategies. I have developed from the ground up, and taught, numerous new academic courses including formulating policy and procedures, and enhanced administrative support systems for the organisation of fieldwork placements. I am skilled and experienced in the development of cutting edge teaching and assessment strategies that provide high level professional knowledge and skills, and which are popular with students from a range of disciplines. Closer linkages with industry have been central to the fieldwork program's development and, as a result of my efforts, the School of Humanities and Human Services developed a sophisticated data base which enables regular contact and information sharing with over 300 human services agencies, most of which regularly take on student placements. I presented numerous professional development training workshops to human services professional staff associated with the program.

I conducted a full evaluation of the Professional Practice program in 1998 involving the collection of data from students and agencies via questionnaires and qualitative methods. This resulted in further development of the program and introduction of several industry initiatives including closer research and training links. The evaluation study was presented to the Fourth International Cross-faculty Practicum Conference, Christchurch, New Zealand, January 1999 and was published in an international refereed journal. Details are included in the earlier Publications and Conference Papers sections.

I initiated a successful, collaborative application for a \$22,000 QUT Community Services grant with Dr Judith Burton from the School of Human Services and staff from QUT's Centre for Applied Scholarship in Early Childhood, from the Education Faculty, which provided professional training input and research of the Pratham initiative in India. Pratham is an NGO, which uses innovative community mobilisation strategies to develop localised early childhood education for slum communities in many Indian cities. It commenced in Mumbai in 1995 and now provides early childhood education for over 300,000 children from the poorest communities. The grant provided for QUT Education and Human Services staff to provide training of community volunteers, and evaluation of the program.

### Management and Practice Career

Prior to commencing my academic career, I held senior managerial and practice positions in major state welfare agencies in Queensland and Western Australia. My managerial responsibilities have had a primary focus upon change management issues including the introduction of new information technologies, restructuring of staffing and operations, a refocussing of child protection policy and procedures, legislative amendments to the Juvenile Justice Act and increased public and judicial accountability mechanisms. I have been involved in high-level strategic and operational consultations with other major stakeholders in government and non-government sectors. For example, I have provided high quality advice to senior

departmental executives and Ministers, and significantly contributed to the development of social policies in the juvenile justice and child abuse areas.

In my role as Court Services Manager I was responsible for departmental services to all State and Federal courts as well as providing three- and five-day training workshops for staff, and community education seminars for other stakeholders and the public. I played a primary role in the development of Basic Juvenile Justice Court Skills training of Family Services Officers and the development and delivery of a 3-day Advanced Juvenile Justice Court Skills Training Program for more experienced practitioners and service delivery managers. I was also the primary person involved in the development and delivery of the Basic Child Protection Court Skills training. Over 200 professional participants attended each of these programs. I have also presented three half-day seminars for non-departmental welfare professionals on the legal system and its interface with welfare service delivery.

Other positions I have previously held involved responsibility for the monitoring and evaluation of sub-program policy and practice procedures, and assistance in the development of program and policy initiatives to ensure that policy had a sound practice basis. This involved a significant degree of consultation and negotiation with community groups and non-government organisations, which required the analysis and assessment of community and regional needs and priorities across a broad range of social problems. Co-ordination with other arms of the Department, other government Departments, non-government organisations and community groups was an essential element of the process.

My previous positions have all involved significant contact with Aboriginal communities, and significant persons including elders. I am sensitive to the cultural and systemic issues involved when working with Aboriginal people and agencies. I am familiar with the complexities and difficulties found when assisting Aboriginal communities to address the poverty and disadvantage, which contributes to situations of neglect.

In summary, I started an academic career in 1997 and have formulated and implemented strategies to review curriculum and developed and taught new units. My teaching abilities have significantly progressed as a result of professional development strategies and ongoing student evaluations, which have been exceedingly positive. In a collaborative way, I have been involved in a number of successful grant applications. I have extensive experience in managing the provision of welfare services state wide and to metropolitan, rural and remote communities in both Western Australia and Queensland. My experience includes work with Aboriginal families, child abuse, juvenile justice and the implementation, monitoring, and development of welfare programs for Departmental and non-government welfare organisations, and the development of social policy. I have had substantial acting experience in senior management positions in both Queensland and Western Australia. My academic and professional experience has enabled me to integrate theory and practice, and to assist students to develop contemporary work skills and knowledge. My referees can attest to the aforementioned achievements.

## Appendix Two

This 2003 submission to the CMC Inquiry has had sections highlighted in yellow to allow particular points to stand out.

### **Submission by Dr Robert (Bob) Lonne to the Crime and Misconduct Commission Inquiry into Abuse of Children in Foster Care in Queensland**

#### **Contact Details**

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#### **Author's Background**

My formal qualifications include:

- Bachelor of Social Work from the University of Queensland conferred in 1981; and
- Doctor of Philosophy (Social Work) from the University of South Australia conferred in 2002.

I have held the following academic, managerial and professional positions:

Nov 2000 - present	Lecturer, Level B, School of Humanities and Human Services, Queensland University of Technology, Carseldine, Ongoing appointment. I am Course Coordinator for the Bachelor of Social Science and am currently acting as the Honours and Coursework Post-graduate Degrees Coordinator. I am Unit Coordinator for four units, including core theory and practice methods units. I also supervise post-graduate research students.
Jul 1997 – Nov 2000	Lecturer Professional Practice, Level B, School of Human Services, Queensland University of Technology, Carseldine, Ongoing appointment. I was Unit Coordinator for three units, including responsibility for the fieldwork program involving 100 students undertaking 500 hr placements in diverse industry locations.
Mar 1997-Jul 1997	Regional Manager, AO8, Family and Youth Operations, South West Queensland Region, Ipswich, Qld Department of Families, Youth and Community Care. I was responsible for seven Area Offices in SW Brisbane and rural areas with an annual budget of \$8m and approximately 100 staff who delivered services in the child protection and juvenile justice programs.
Jun 1993-Mar 1997	Manager, AO7, Court Services, Division of Protective Services and Juvenile Justice, QLD Department of Families, Youth and Community Care. Responsible for 20 staff involving state-wide coordination of departmental litigation, service delivery to all State and Federal courts, and training programs for professional staff regarding departmental interventions. Court Services is a 'best practice' unit of the Dept.
Mar 1991-Jun 1993	Senior Resource Officer (Protective Services), AO6, South West Region, Ipswich, Division of Protective Services and Juvenile Justice, Department of Family Services

and Aboriginal and Islander Affairs. Responsible for policy coordination and implementation, including training of professional staff and community education.

Aug 1990-Mar 1991 Team Leader, Central Division, East Country Region, Department for Community Services, WA. Responsible for 20 professional staff and oversight of service delivery standards in juvenile justice and child protection programs.

May 1987-Aug 1990 Senior Social Worker, Children's Protection, Central Division, East Country Region, Department for Community Services, WA;

Other positions include: Area Office Supervisor, Children's Services Department, Bundaberg, and Emerald Qld;  
Psychiatric Social Worker, Mosman Hall Special Hospital, Health Department, Charters Towers, Qld; and  
Social Worker, Commonwealth Rehabilitation Centre, Townsville, Qld.

I have extensive experience in both Queensland and Western Australia in the investigation and assessment of allegations of child abuse. During my professional career I have personally been involved in more than 1000 of these assessments, usually being the senior staff member responsible for the inquiry and any subsequent actions, including many applications for care and protection. I have been the principal investigator in a number of high profile cases including large-scale multi-victim sexual abuse cases, suspected non-accidental child deaths, serious physical abuse and murder-suicide events. I have also been responsible for numerous investigations and assessments of allegations abuse and neglect by foster parents and residential care providers regarding children in care. As many of my official duties have involved the statutory removal of children from their parent's custody and subsequent court based applications for the children's care, I am very familiar with the interface of the law on departmental practice.

This experience was significantly expanded whilst I was the Manager of Court Services, which is the departmental work unit that has responsibility for coordinating legal interventions in all jurisdictions. Furthermore, I have held a number of senior regional program and managerial positions, which have afforded me the opportunity to observe and participate in the diversity of departmental operational matters, with specific responsibilities for monitoring and reviewing practice with respect to child abuse and alternative care functions. My positions have also involved me in departmental reviews of cases where children who have been in contact with the department have died. I am currently a member of the Department of Families (DoF) external Child Deaths Review Panel. Whilst working in the department I was a member of the Child Deaths Sub-Committee of Queensland Government Co-ordinating Committee on Child Abuse that presented a report on "Child Abuse Deaths", Sept. 1995. I was also a member of Department of Family Services and Aboriginal and Islander Affairs evaluation team and co-author of Treasury Department required "Evaluation of the Protective Services Sub-program Report", presented July 1994.

I have co-authored articles in international refereed journals concerning child abuse and related professional practice and policy matters. I have also published and presented papers on areas I have researched including work-related stress, job satisfaction and staff turnover in the human services, and the effects on these of management processes and other organisational and personal factors. My PhD thesis entailed an Australia wide study of recruitment and retention issues for rural social workers, with a particular focus on work stress. As a part of my academic role I teach in areas including human service theoretical frameworks, practice methods such as case management, teamwork, conflict resolution and crisis intervention, as well as organisational culture and change management processes. I also act as an organisational consultant and trainer for both government and non-government human service organisations. With these experiences and knowledge I am able to offer the following information, views and opinions relevant to this inquiry about the effects on departmental practice, and vice versa, of the following areas:

- The organisational structure, cultures and climate;
- The dynamics surrounding the placement of abused and neglected children in situations other than at home care;
- The human resource management, recruitment and training processes and issues;
- Processes, procedures and supports for alternative carers;
- Occupational stress and staff support.



I will finish this statement by suggesting some specific strategies that this inquiry may wish to consider when formulating its recommendations. I am available and willing to clarify and elaborate on any of the statements or points I make by providing an oral statement to the public hearing of this inquiry.

## **The Departmental Organisational Structure, Cultures and Climate**

The organisational structure of the department refers to the configuration and arrangement of responsibilities and work units. It is an important influence on how the department operates as it determines the nature of roles and relationships, and reflects the power relationships and relative importance and status of functions. Organisational culture refers to the values, beliefs, attitudes and ideologies held by different work units and personnel within the department. Staff operationalise their statutory functions in accordance with the guiding legislation, but considerable discretion remains with respect to administrative decision making that is strongly influenced by organisational culture and the customs and practices that result. There are many organisational cultures in the department with front line staff tending to be primarily motivated by practice and client related values, middle management frequently being more concerned with organisational role and functional matters, and senior management usually having an external and politically sensitive orientation.

On the other hand, the organisational climate can be defined as the current environment that influences organisational culture and operations. For example, from my personal knowledge, the organisational climate at present is a highly stressed one, where many staff feel that they are unsupported by the government and held in poor regard by significant stakeholders (eg media) and the general community. A climate of defensiveness and a 'victim' mentality are in evidence in some departmental staff. There is research evidence from overseas that has linked this sort of situation with increased work stress for child welfare workers. **The sensitivity to criticism and defensiveness of the DoF is a longstanding issue that has prevented it from self-reflection and development processes.** Whilst the current administration has adopted a laudable review and action research and development approach, this is limited in its application to a bureaucratic and organisational processes rather than a client-focussed and reflective practice orientation. **The department needs to get to a position where it welcomes criticism as a fundamental part of the ongoing process of reflection and development. At present it remains prone to "bunkering down" under sustained public and media complaint and concern. Whilst this is understandable it cannot, in the longer term, be sustainable or helpful.**

Despite numerous and frequent organisational restructures much of the organisational culture of the DoF remains substantially unchanged. **It is essentially a hierarchy with power and status, and a politically sensitive orientation increasing the further one gets up the ladder. However, in whatever form the structure presents it mirrors the multi-faceted and complex social policy responsibilities of its legislative base.** Servicing a large geographical area that has large and diverse urban, regional, rural and remote populations presents significant difficulties for an organisation that is charged with the responsibility for preventing and protecting all Queensland children from child abuse and neglect. **On the one hand there is a requirement to treat people equally before the law, and on the other hand there is an obligation to ensure that social policy responses are congruent with the localised context and community. Significant organisational and practice tensions result from these imperatives. The history of departmental restructures provides a case in point as it has tended to alternate between centralising bureaucratic and administrative power and relinquishing control to the diverse regions so that service delivery can better respond to local needs, issues and aspirations.**

However, notwithstanding the complexity and fluidity of departmental structural variations there are a number of constants with regard to the departmental culture, many of which stem from its long and chequered history. Community concern about child abuse, and in particular, deaths in charitable orphanages played a major part in the formation of legislated state-based organisations to deal with child welfare. The depression increased societal concern about the plight of children whose parents were not able to satisfactorily care for them. However, this important social policy function was not given a high priority with regard to budgetary allocation until the late 1990s. In fact, in comparison to other states, Queensland fared particularly poorly for decades with respect to the average dollars per citizen spent on welfare related activities. **Historically, governments that have tended to give economic development a higher priority have chronically under funded welfare services. This affects the culture of the DoF because a parsimonious attitude prevails with respect to expenditure on departmental clients, in particular, children in care.**

From its inception the Queensland DoF had a major social control function to deal with the problem of inadequate parenting, which was viewed in very individualistic and moralistic ways. These moralistic attitudes tend to lead to blaming. In short, parents were seen as moral failures when they were not able to

care properly for their children and there was little heed paid to the influences of broader systemic issues and social structures. The end result was that child abuse and neglect tended to be viewed as a problem for the poorer lower classes, and in particular indigenous peoples, rather than their middle and upper class counterparts. The importance of this history is that the department today still carries with it a tendency to adopt an individualistic and moralising approach to the complex social issue of child abuse and neglect.

These attitudes, which are held by many departmental staff, evidence themselves in the (sometimes) judgemental approaches by staff and their resultant conflict with parents who are subject to their attention. Moreover, some senior management can also adopt a blaming attitude when the work done by frontline staff is not seen to be appropriate. Whilst this blaming approach is often clouded in the language of “accountability”, frontline staff frequently perceives it as reflecting a fundamental distrust of them by senior staff. This is an important issue concerning organisational culture as it affects the risk taking involved in child protection practice and influences staff to engage in “defensive social work” and adherence to bureaucratic procedures rather than sound professional practice based on solid assessment of the client family and the risks of abuse. The blaming culture is also evident when staff break the unwritten cultural rule of “don’t embarrass the department”. What this entails is an explicit judgemental attitude being applied to those staff who transgress what is seen as “good practice” and bring about media attention which embarrasses the department. These staff are usually subject to very quick “damage control” management and disciplinary processes which attempt to distance the department from responsibility and instead apportion blame to the individual who is portrayed in a negative light, with no attention given to systemic factors that may have been at play.

The use of power and authority is a fundamental aspect of the social control function of child protection, which can entail significant state intervention to force parents to participate in treatments and may involve the removal of children from their custody. The ways in which departmental staff use their power is a critical element in the development or destruction of collaborative and beneficial relationships with parents that are the cornerstone of optimally effective protective interventions. Put simply, if parents can form a trusting relationship with departmental staff they are usually able to work productively to address the factors that led to abusive or neglectful behaviours and events. On the other hand, if staff poorly exercise their power and authority, parents can be put offside and find it difficult or impossible to establish a trusting working relationship.

The appropriate use of power is fundamental to good child protection interventions. Furthermore, the establishment of effective working relationships is primarily the responsibility of departmental staff, because it is extremely difficult for parents to be trusting when they have so much at stake. Most are fearful of losing their children. Hence, they tend to be very reluctant to fully disclose information about the abuse and other private family matters, fearing that if they disclose they will be subject to criminal charges and lose their children. Being distrustful, they can usually quickly sense if a departmental officer is comfortable and appropriate in their use of power, or is instead prone to adopt a bullying or overly forceful approach. Having someone a lot younger than you who is professionally trained (and likely earning more than you) ordering you around and holding all the Aces can be very unsettling for parents and may prove fatal for developing trust. These factors can significantly affect the nature of the helping relationships. Unfortunately, too many parents experience departmental interventions as being negative and counterproductive to their wellbeing and interests. There is evidence to suggest that following statutory interventions families are likely to experience increased stress and therefore be more likely to abuse their children.

However, the inappropriate use of power and authority by some frontline departmental staff needs to be examined in light of the use of power and authority by those who are more senior in the departmental hierarchy. There is a parallel process within the DoF organisational culture with regard to blaming and the use of power and authority. There is a long history of political authorities exerting their power over what are supposed, under the Westminster system, to be independent administrative functionaries. The abusive use of power by political functionaries and ministerial office staff has been problematic during some administrations, particularly in the mid 1990s, the effects of which are still currently experienced. This inappropriate use of blaming, power and authority has a flow on effect to departmental clients. Put simply, many frontline staff view senior management with distrust and, being fearful of getting out of favour and incurring their displeasure, they acquiesce to the sometimes-inappropriate use of power and blaming. This pattern is often repeated with the relationships between front line staff and departmental clients – a parallel process. Whilst the inappropriate use of blaming, power and authority are often recognised by individual practitioners, too often departmental staff are not aware of its pervasive systemic nature. For example, many non-government funded bodies also perceive that it is difficult for them to challenge departmental power unless they have support from influential political figures.

Relations between the DoF and indigenous communities are complex and often distrustful and conflictual. The Department's history reflects how much it was a social control function for government, often reflecting and reinforcing the racism that led to the widespread destruction of many indigenous communities and families. The reality is that Aboriginal and Torres Strait Islander people have for many years been deprived of the sorts of resources and assistance that others in the community receive. They are disadvantaged across a range of social indicators with the end result being that they have significantly reduced life chances and significantly higher rates of social problems including unemployment, poor health and higher rates of children in care or in custody of government authorities. Whilst departmental practices with respect to working with indigenous communities have improved, this has been a very slow process. Because child protection policy does not highlight the historical and structural issues that affect rates of abuse and neglect, current practice still disproportionately removes indigenous children from their families and their communities. The end result is that relations between indigenous clients and departmental staff are often affected by distancing and mistrust rather than close collaboration.

The use of power and authority is often an issue between departmental staff and foster parents. This is a longstanding organisational cultural issue and reflects the differences between their respective roles, notwithstanding that the two parties are mutually dependent on each other to ensure the best outcomes for children in care. Departmental officers are frequently young, childless females who are tertiary educated and hold considerable power, albeit often not having all the relevant information to enable them to make sound decisions with regard to children in care for whom they hold case management responsibility. On the other hand, foster parents are frequently middle-aged women who may lack formal education but who nevertheless have considerable parenting experience but have little formal power and authority. Significant interpersonal tensions can exist in these sorts of situations and can cloud the decision making about what is in "the best interests of the child". The Family Service Officers (FSOs) can feel that their qualifications, knowledge and skills are not given sufficient respect by foster parents and that their role is undermined by not being given relevant information about the child. Conversely, foster parents can feel like their life experience and more particularly, their intimate knowledge of the child in care, their behaviour, hopes and wishes, are ignored or not given the respect they deserve. This is a significant structural issue as it often contributes to mistrust and apprehension for both parties, which can be important factors at play when departmental staff are required to investigate and assess allegations of abuse, neglect and poor standard care for foster children.

It is also arguable that the adoption of case management models by the department to replace the previous casework practice model has led to an increased systemic emphasis on the social control functions of the department rather than the social care and helping functions that characterise casework. Whilst case management has many advantages over casework such as increased input from clients into decision making processes, and enhanced accountability, monitoring and review, it also tends to be associated with greater use of procedures and more emphasis on "managing" cases rather than helping people. The professional literature identifies this as a major issue for public child welfare systems in Western societies. The influence of case management approaches and cultures should not be underestimated for their influence upon the professional practice of departmental staff. In particular, there is widespread concern over the negative effects of "proceduralism" on practice, that is, the replacement of contextually appropriate and case specific decision making for blind adherence to policies and procedures, which are often adopted as a blunt "risk management" tool. This approach is at loggerheads with the need of most practitioners to exercise professional discretion and autonomy in order to maximise their job and career satisfaction. This issue will be explored in greater depth in the following section.

A problem with case management is that it pushes aside cultures of "therapeutic approaches" and replaces them with a model that implies that all cases, no matter how difficult or complex, can be "managed" and that any required needs of clients which cannot be addressed by departmental staff can be referred on to other agencies. Unfortunately, this approach has many faulty assumptions such as that there are suitable places to refer clients to and that there will be adequate communication and coordination between these agencies and the department. Because of the increasingly tight fiscal constraints that affected the DoF during the mid 1980s until the late 1990's all departmental units that offered therapeutic services were disbanded and staff were dispersed into area offices where it was assumed that the experience and skills would be better utilised. This restructuring and reorientation of service delivery models no doubt contributed to the loss of specialised knowledge, skills and experience within the DoF.

Combined with the advent of case management, these events effectively spelt the demise of a robust culture of qualified and experienced therapeutic assistance to clients. The reality is that there are very few options for treatment in the community, particularly in rural and regional areas, and most of what is available is not offered by government agencies that can provide no fee services. Instead it is largely left to private

practitioners who must charge fees that are out of the reach of many departmental clients or are too expensive for the department to currently fund for a family for the required intervention, which often requires a lengthy therapeutic and change process. It is hardly surprising then that many departmental clients complain that the DoF intervention was not helpful to their family functioning, was extremely stressful, demonstrated inappropriate or excessive use of power and authority, and left them with little in the way of affordable helping strategies. This is an area urgently in need of redress. The end result is that children who might otherwise have been able to return home cannot do so because the parents were not provided, or could not access, the sorts of therapeutic interventions needed to reduce the risk of abuse and neglect to acceptable levels. Hence, many children remain in care because of systemic inadequacies. This would not be so bad if their standard of care and life chances were optimal but, sadly, for many this proves to not be the case.

Another feature of departmental culture that is important to understand is the inherently crisis-driven nature of child protection work and its resultant effects on work practices and relationships. In many cases, people who abuse and neglect their children are in a crisis state or have chaotic lifestyles (eg substance abuse, domestic violence). When authorities intervene to investigate and assess allegations of abuse a heightened state of crisis often results, which paradoxically can increase the risk of further harm. When clients perceive the departmental intervention as threatening they often respond to the situation defensively and aggressively, becoming agitated quickly and frequently issuing threats. This places departmental staff in a difficult position that requires considerable maturity and flexibility to effectively respond to and build a working relationship. Professional training does not always prepare practitioners to deal with these pressures and complexities. It is very stressful work and, whilst some thrive on this, others do not cope as well. Many respond by getting by on the adrenalin rush that can be experienced during or following tense interventions.

However, from a systemic point of view, there can be major implications from regularly dealing with these sorts of pressures and dynamics. What tends to happen is that the area office systems and cultures adapt work practices to enable quick responses to these situations. A 'crisis culture' typifies most area offices and many regional and central offices that deal with high profile cases. Over time the office systems tend to be driven by these incidents rather than respond to them. In short, the office systems tend to go into overdrive with difficult cases, which tend to receive major amounts of staff time and energy until they are resolved and quieten down, whereupon the next complex and stressful case takes over and gets the staff attention and resources. A net effect is that 'quieter' cases or matters of lower priority tend to slip out of sight and not get attended to because the culture is to quickly tend to the crisis and chaotic cases. The staff are drawn into a culture that appreciates crisis work, albeit stressful cases. This is an important process because it directly contributes to a culture that downplays the importance of alternative care and, hence, attending to the needs of children in care and foster placements.

The goal of child protection work is to make 'at risk' children 'safe'. Removal of children from their parents' and caregivers' custody aims to ensure that re-abuse will not occur. However, when the 'crisis culture' kicks in, the temptation is to see removed children as no longer being in crisis, and therefore, not deserving the heightened staff attention and resources. Hence, the office revolves around responding to, and quickly addressing, new cases or ones that generate a lot of heat. The longstanding but not immediate needs of children in care can, and quite often do, end up not getting the attention of crisis driven staff and office systems. An exception is where the foster placement of children in care breaks down and becomes a crisis, therefore demanding immediate attention from departmental staff.

This is not to suggest that staff do not realise that children in care have major physical, emotional, psychological and emotional needs that demand attention (eg grief, anger, despair, rage etc). Rather, it explains why clients do not always have their needs addressed quickly, except when they go into crisis. Turning the crisis culture around is a formidable task, and it may be a better strategy to change the system to better meet the needs of children in care rather than tackle front on the crisis culture because, despite its drawbacks, it also enables many crisis situations to be relatively well addressed despite the chronic underfunding that plagues the DoF. Structural and programmatic changes can partly redress the negative effects of the crisis culture.

Adding to this situation is the relatively low status that fostering and alternative care work has historically had within the DoF. In my experience, it has never been afforded sufficient recognition nor status for the central importance of its function. It is difficult to determine exactly where this belief comes from, but it is unmistakably the case that alternative care is not seen as important as other functions such as child protection and juvenile justice. It is possible that departmental staff, who are often lacking in the knowledge, skills and experience to be able to work and address the complex behavioural problems that abused children often display in foster placements, prefer to work in other areas where they have more to offer. Perhaps it results from children in foster placements being seen as "safe" and therefore not warranting further close



attention. Foster care is seen by some as a remedy for abuse, that is, placement of a child in a loving and caring environment will in itself, over time, remedy the ill-effects of past abuse. This is a false belief system that still has some currency. In either event, whatever its causes, there is a widespread belief system within the DoF that perpetuate alternative care's low status. This results in the area not attracting the best staff.

As a final point, it is important to remember that the crisis nature of the work, the high and increasing demands for service, and the chronic under funding all contribute to making the DoF a difficult, but nevertheless rewarding, place to work. This environment demands that workers who want to be successful and effective must learn how to "cut corners" well. Moreover, besides being able to remain calm in a crisis, they must also quickly acquire the considerable analytical and assessment skills to be able to astutely decide which corners can be cut with relative safety, and which ones can't. This requires higher order decision making skills and quite a bit of luck if significant trouble and heat is to be avoided. For example, if an office receives a high-risk notification of abuse, has a foster placement breaking down, and simultaneously has a matter being taken before the courts, tough decisions have to be made about where the resources will be allocated. In the context described above it becomes easier to appreciate why less urgent matters can be left unattended for lengthy periods, and why seemingly inexplicable decisions to not immediately respond were made by departmental staff.

In summary, the central issues with regard to departmental structure, cultures and climate include:

- The many cultures which exist are influenced by the hierarchical organisational structure and factors such as power, status and sensitivity to political considerations;
- The departmental history of individualistic and moralistic attitudes affects a culture which entails judgemental approaches;
- There is a parallel process whereupon senior management blames service delivery staff who perceive this as mistrust and in turn often approach clients in a blaming way;
- The inappropriate use of power and authority also entails a parallel process between political functionaries and management and staff, and staff and clients;
- A culture of crisis exists within many work units in the department and this, along with the low status afforded to alternative care matters, leads to foster care issues being given a low priority;
- Relations between the DoF and members of indigenous communities are often characterised by distrust and conflict;
- There are significant structural, role and other tensions between departmental staff and foster parents;
- The current case management service delivery model emphasises the social control functions and downplays the helping function, with a therapeutic approach increasingly unlikely;
- A parsimonious attitude is prevalent and affects service delivery; and
- The current departmental climate is severely stressed and somewhat defensive.

## **Human Resource Management, Training and Support**

There is considerable diversity amongst the demographic and professional characteristics of departmental staff. For many years the department has had difficulty recruiting sufficient appropriately trained staff to meet both its needs to replace the high staff turnover it experiences and to get the people it has needed to fill the many new positions created over the recent past. This is a major organisational issue and directly affects the standard of service delivery, sometimes in a severely negative fashion, particularly for rural and remote positions. Furthermore, the effects of continued public scrutiny and negative media attention compounds the recruitment strategies as many potential staff are scared off by the perceptions that it is not a good place or practice field to work in. Without good staff who are well trained and supported, and highly motivated, the department's problems will only worsen.

The primary motivation of most helping professionals for statutory work is because of the moral underpinnings of child protection, that is, protecting and assisting those who are very vulnerable from those who would, knowingly or unknowingly, hurt and exploit them. Whilst money and other material rewards are not unimportant, they tend to be lower order motivators. What matters more to professionally trained social welfare and human service practitioners is the more philanthropic aspects to their work. This is an important consideration because it helps to explain why they put up with the stressful work environments and the conflicted relationships that can occur with some clients. It also helps to explain how the cultures in area offices and amongst front line staff can be at significant variance with the cultures in other areas of the DoF, including amongst senior management.

The variation among staff includes their professional training. Whilst many hold 4 year tertiary training in social work or 3-year degrees in human service practice, not all hold these qualifications, which are specifically geared towards the professional skills and knowledge that this sort of work requires. Departmental staff are also employed with other, more peripheral qualifications and training (eg B Arts) and, hence, may not be particularly well trained in areas such as:

- Professional social welfare assessment processes and techniques;
- The nature and dynamics of child abuse and neglect;
- Child development
- Crisis intervention and other appropriate service delivery models;
- Use of self to help rather than hinder the professional helping and change processes;
- Conflict resolution; and
- Appropriate use of power and authority.

Furthermore, the variation amongst professional qualifications means that there is considerable diversity among the approaches by staff to the central work tasks of receiving and assessing notifications of abuse, investigating, interviewing and assessing the complex information surrounding abusive situations, dealing effectively with grief and loss, effective therapeutic interventions with children and adults, and coordination of multiple interventions. This is not to mention the complexities involved with the guiding legislation and departmental policies. When this is combined with the different values, ideologies and belief systems that practitioners bring to their work, it is not surprising that there are wide variations among approaches to practice and practice standards. These issues, along with the legislative role and responsibilities of departmental staff, have required that there be robust internal training for frontline staff.

Unfortunately the department's internal training processes have a chequered history and have been subject to considerable warranted criticism. For example, when centralised induction training for 6 weeks was provided, many staff did not make it as the crisis ridden area office managers were reluctant or unable to release them for this period. The department has, at times, also been very reluctant to utilise professional educators, preferring instead to use departmental staff who often were not great teachers, had not had sufficient time or expertise to properly prepare, or instead merely recited departmental policy rather than training people in sound professional practice. Hence, far too many staff are not sufficiently well trained in the necessary areas outlined earlier such as professional assessments, crisis intervention and conflict resolution. For a variety of these and additional reasons, the much needed departmental training has largely been unsuccessful or at best, severely hamstrung. This is an area that could bring profound change to departmental practice but remains very under utilised and poorly resourced.

The problems with training for front line staff are mirrored with the training and preparation of staff for the critical roles of team leaders and area office managers. Too often people are thrust too early and ill prepared into these positions because of staff turnover or other consequences of the culture of crisis. Unfortunately, all too often the team leaders, who are those who are in the best position in the department to guide and foster effective practice, and monitor and review work standards, are promoted to the position with little going for them except their own limited practice experiences (often less than 3 years post-graduate experience). They usually have stood out as frontline practitioners and are then rushed into higher positions as necessity dictates. In some instances it can be the "blind leading the blind". Whilst there has been some worthwhile and proactive steps taken by the DoF in the last few years to address the training needs of team leaders and managers, these fall significantly short of what is needed to have the necessary influence on departmental practice. Departmental training tends to be largely haphazard, ill-directed and disorganised with no clear organisational ownership and resourcing of the function by either area office, regional or centralised units. The present system is not the sort of systematic professional and career development process that it needs to be to train and keep committed staff. Whilst good training does occur, it tends to be insufficient to meet state wide needs, localised contextual variations, and be fair and equitable. Too often the staff who really should attend do not because of local workloads or crises that need attending to, because they do not have faith in the quality of the training, or because they fear that it will not meet their own needs and instead be focussed purely on new policy directives.

For all intents and purposes the departmental staff training program relies upon "on the job training", which does have significant positives such as being contextually appropriate and being "needs based". However, too often it also reflects the inadequacies of local area office culture, reinforcing counterproductive practice or the limited visions, approaches and abilities of some area office staff. Moreover, it is not

sufficiently linked to departmental policies, procedures and standards, community wide expectations, and appropriate assessment strategies.

In a similar vein are the training and assessment processes for foster parents and alternative care providers. Although there are some very good programs being conducted, there are also some major shortcomings with the processes and outcomes. For example, the crisis culture outlined earlier leads to the much needed resources in the alternative care area being diverted to areas of higher priority, namely, child protection investigation and assessment. It should also be noted that this has also been a problem for the juvenile justice program, which has also been stripped of resources to deal with the rapidly increasing demand in child protection work. This problem of diverting staff is particularly the case when staff shortages occur. It is likely that limited staff resources will be directed to the crisis oriented child protection area rather than the relatively more sedate, but arguably equally important area of alternative care. Hence, children in care are likely to miss out on contact with their family services officer and hence not always receive adequate review and monitoring of their situation.

During the 1990s the DoF adopted a strategy of funding non-government agencies to take on the task of recruiting, training, assessing and supporting foster carers. Whilst this has had some successes, the whole program has not been able to deliver sufficiently on the outcomes that were originally sought. To be fair, the funding did not quite match the expectations but it needs to be remembered that the funding was nevertheless far more than what the department received for similar functions. Some programs have achieved very little for the substantial sums they were provided whilst other programs have been far more successful and better integrated with departmental service delivery systems. The whole program of external funding of the foster care program is overdue for a vigorous review and evaluation as to its outcomes, merits and continuation.

With respect to their role, functions and tasks, the departmental training tends to be focussed on the front end, namely assessing and training prior to the selection of appropriate carers. Whilst this is understandable and warranted, it is also problematic to a degree. Foster parents usually do not get access to sufficient in-depth training opportunities to address the vexed and complex issues that their role entails including:

- Child development and the impact of abuse and neglect;
- Dealing with grief and loss;
- Developing and maintaining working relationships with foster children's parents;
- Issues stemming from foster child/parental contact;
- Behaviour management strategies;
- Understanding the effects on the family systems of having a foster child;
- Working as part of a professional team;
- Use of self in helping children come to terms with their abuse and family relationships; and
- Caring for children with disabilities, health and other life issues.

The ways in which most foster families persevere with very demanding and challenging care situations is worthy of the highest admiration and acknowledgement. They frequently do not receive the support, guidance and assistance they require and deserve from the equally hard-pressed departmental staff. Their situation is further complicated by the fact that a good many departmental staff do not have the knowledge, skills and experience to offer them the sorts of information and guidance to help them through the difficulties that caring for someone who has been abused entails. Instead, they are often left to their own devices to try to work through the grief, loss, anger, rage, fear, powerlessness etc that many foster children experience as they try to come to terms with their past and their present situation.

Moreover, they are often the unwitting meat in the sandwich with respect to role conflicts inherent in the task of alternative care placements. As outlined earlier, departmental are required to form effective working relationships with parents of abused children in order to assess any progress in therapy or changed behaviour, and the appropriateness of a return of the child to their care. However, they are also dependent on the foster parents for the good care of the child. They know that a good foster placement is a necessary part in helping children who have been abused. However, FSOs, parents and foster parents can come into conflict when plans for a return of the child to home are considered. The differences in their perspectives can be profound. Foster parents deserve and need the support of departmental officers, but so too do the child's parents. This poses real dilemmas for departmental staff and not all of them are able to walk the line of providing support but also keeping the boundaries clear. This is a significant structural and systemic problem. Departmental officers are charged with making decisions that are in the "best interests of the child" yet this is complex and fraught with clashes between the parties over values, beliefs and perceptions. It is

not surprising that this context provides situations where departmental staff and foster parents can become locked into protracted and fierce disputes. These can leave foster parents feeling unsupported and betrayed when decisions that are not in their best interests are made by departmental staff who view the child's best interests differently. There are other ways to structure support and assistance to foster parents than are currently undertaken by the Department. Unfortunately, the structural tensions and conflicts outlined above are largely left unattended despite their potential to create significant heat.

Another area of foster parent support from departmental officers that is frequently problematic is the issue of the nature of the relationships between them. In most cases the relationships are fundamentally collegial and collaborative, with both parties recognising that despite their discrete roles they are nevertheless mutually dependent. However, the power and status is not the same and departmental officers have all the power and little direct information on which to base their decision making, whilst foster parents have a lot of direct information at their disposal but little real power for major decision making. These structural tensions are exacerbated by the sometimes-competitive relationships that can develop over factors such as gender, age, education standard, relative life experiences, approaches to parenting, and personality factors. These relationship dynamics can make the provision of support for foster parents quite problematic, leading to hindrance of the free flow of information between these parties. Thus, departmental staff who hold case management responsibility (and who frequently rotate in these positions) are dependent on receiving reliable and timely information but may often feel "left in the dark" due to relationship tensions.

These relationship dynamics complicate the whole function of alternative care because they can lead to foster parents feeling unsupported and powerless in what should be a collaborative relationship with the DoF. There are numerous issues that they face with the foster children they have in their care including:

- Difficult, challenging and aggressive behaviour;
- Psychological and emotional disturbance resulting from the abuse they experienced and the fractured relationships they have with their parents;
- Emotional instability resulting from problems with the contact foster children have with their parents;
- Extreme behaviour stemming from major issues of grief and loss;
- Poor education achievement with resulting self-esteem issues;
- Social isolation and inability to form satisfactory relationships with other children; and
- Issues resulting from disabilities;

Dealing with these sorts of daily issues is extremely taxing on foster parents and the provision of support and material assistance is imperative if they are to be expected to provide satisfactory standards of care. However, apart from the problems outlined earlier, they are also victims of longstanding cultural values and beliefs within the DoF that expect foster parents to give selflessly of themselves, and to not expect any real entitlements apart from the foster allowance. These parsimonious beliefs, which stem from an individualistic and moralistic ideology, are demonstrated by a reluctance to pay for the sorts of expenses that most children in society have met by their parents as a matter of course. The State, in this regard, is a stingy parent. Whilst departmental policy advocates that foster parents treat all children in their care (including their own) the same, there are not funds provided to make this practicable and possible. Foster parents frequently feel very reluctant to approach the DoF for financial or other assistance to meet the needs of children in their care. The whole alternative care area is run on a "shoe string" although it needs to be acknowledged that the Department has progressively increased the funds available in this area. Nevertheless, there is only around \$1000 per child per annum available to meet the typically high needs of children in care. This is particularly problematic when children first come into care. It is frequently the case that they come into care without much at all in the way of clothes, bedding, school material etc, and foster parents are confronted with the realities of trying to make available the day to day necessities, such as finding sufficient bedding, school clothes, books etc. However, if foster parents make a habit out of regularly approaching the department for these incidentals they can gain a reputation of "only being in it for the money", which of course is incongruent with the expectation that they do fostering for purely philanthropic reasons.

This context helps to partly explain the perceived reluctance by some departmental staff to get too heavily involved in foster care issues, particularly when there is an allegation of abuse – better to let "sleeping dogs lie". There can be significant costs should departmental staff take too close an interest into the standard of care being provided. Firstly, it can lead a protracted conflict between the foster parents, departmental officers and the parents that may preclude, or at least make very difficult, the usual case management processes and procedures. Allegations of abuse can quickly lead to counter-allegations or strong emotions that influence people to "get even". Secondly, it may lead to the need to locate another



foster placement, which may not be readily available. Thirdly, the closer attention may highlight care issues that require considerable support, guidance, assistance and resources, which may or may not be available. Finally, the very act of departmental staff investigating allegations of foster care abuse brings to bear a significant potential for conflict of interest in what is a mutually dependent arrangement that may involve close working relationships. It is little wonder then, that the waters can become very muddy indeed and can lead to the process of investigation and assessment of abuse and standard of care issues being less than optimal, and in the worst case, of serious issues being missed or avoided.

The net result of the issues raised in this section is demonstrated by the poor life outcomes that children in care typically achieve. This, to my mind, is the real evidence of the failure of our State system of child protection and child welfare. Rather than children in care ending up having their life chances improve, the evidence is that far too many of them have the opposite outcome. The system largely leaves them to address their own issues in life, to “pull themselves up by the bootstraps”. However, the realities of being in care become a lifelong legacy they have to survive. The evidence of this includes:

- Significant emotional and psychological trauma;
- Difficulties in forming lasting attachments and relationships, often with violence evident;
- Fractured and hostile relationships with their families and people in authority;
- Poor educational outcomes that affect employment options;
- Higher rates of offending;
- Higher rates of substance abuse; and
- Higher rates of their own children coming into state care, which is perhaps the final tragedy.

Whilst it has to be acknowledged that in the recent past there have been programs funded to provide counselling to ex-children in care (eg After Care Resource Centre), these are not funded sufficiently to meet the growing demand that is evident. Much more needs to be done to redress a child protection system that in some key areas has quite poor outcomes for those it is mandated to serve.

It should be noted that the DoF has made some concerted efforts to address the human resource, training and support issues noted above. In particular, the current “learning organisation” approach is laudable. However, many of the issues remain problematic. With respect to human resource management, training and support, the following issues are evident:

- Because of recruitment issues the DoF has a diversity of staff that leads to a variety of practice approaches, with many staff not appropriately trained to do the job;
- Departmental training systems are haphazard and do not enable the front line staff to rapidly acquire the skills and knowledge necessary to change departmental service delivery practices;
- The training processes for Team Leaders and Area Office Managers are also problematic, with an over reliance on “on the job training” and rushing people into these positions before they have acquired sufficient practice experience and wisdom;
- Human resource management practices have contributed to an unstable staff and high staff turnover;
- Foster parent training and support processes are not sufficient to address the needs of the role or children in care;
- Significant role conflicts affect staff/foster parent relationships and limit the capacity of departmental officers to provide support to foster parents and to investigate and assess allegations of abuse or inappropriate care; and
- A parsimonious approach to funding has severely affected the ability of children in care to have their multiple physical, psychological, emotional and social needs met, which in turn contributes to their significantly poorer life chances and outcomes.

### **Workplace Stress and its Management**

With all the systemic, resource, organisational, management, practice and relationship issues outlined above, it is not hard to see why there are profound workplace stress issues confronting the DoF. The available research and professional literature indicate that severe workplace stress affects around 10-20% of human service practitioners, with the rest experiencing high stress but also enjoying high job satisfaction. Hence, it is important not to overstate the size of the problem, but to recognise it as a significant problem that has big implications for welfare organisations and practitioners. Unfortunately, there is a strong relationship between work stress and job turnover, and the DoF has evidenced a high level of staff turnover for more than a

decade. It is a compounding problem because high staff turnover also affects recruitment because potential applicants get to hear about the problems in the work environment. This leads to difficulties in recruiting suitably trained and experienced staff, which means that positions remain unfilled for long periods. This, in turn, leads to increased stress on staff who remain and have to try to cope with covering these unfilled positions and dealing with the increased workloads.

The other human resource management issues that abound in the DoF impact the work stress situation. Firstly, there are large numbers of staff “acting” in higher positions, many of whom wait inordinately long and anxiety-provoking periods of time to be appointed. Moreover, there is a constant fluidity of staff moving in and out of key positions leading to inefficiency. Secondly, there is a large proportion of front line and other service delivery staff that are on short-term contracts that are usually frequently renewed and extended. This practice keeps many staff on tenterhooks regarding their employment situation and leads to decreased organisational commitment. Thirdly, with respect to FSOs there is a blend of centralised recruitment mixed with localised appointment processes that tend to make the whole task of staff selection lengthy, convoluted and confusing, especially for applicants. It should be noted that these sorts of longstanding problems exist to a greater or lesser extent across the public sector. Nevertheless, they are significant contributors to the difficulties the DoF faces and their resolution would provide a necessary foundation of staff stability which can aid the change management processes needed to bring about better practices and a more professionally based culture.

What is clear from the Australian and overseas research is that the contributing factors to work stress are organisational and structural factors, rather than personal characteristics. Workplace factors that are associated with increased work stress include lack of role clarity, decreased worker autonomy, high caseloads and workload, the nature of child protection work, and supervisor leadership styles that emphasise outcome-oriented expectations regarding duties and responsibilities rather than autonomy and flexibility. Research has identified that work stress can be moderated by organisational, professional and personal supports that require, most importantly, an organisational recognition of the problems and a preparedness and ability to redress them.

The problem for DoF is not that the high levels go unrecognised as to the damaging effects they cause. Whilst the systemic nature of the problem is recognised, all too often responsibility for addressing it is directed to local work units, and those who are directly adversely affected by work stress. Affected individuals can tend to be blamed for their own predicament and labelled as not being able to “cut the mustard”. There are few, if any, systemic responses adopted to address it such as:

- Reviewing role descriptions and engaging staff in processes to ensure greater role clarity;
- Ensuring adequate resources are available to meet the workload;
- Establishing and maintaining an organisational climate and culture that deals openly with work stressors and burnout and does not individualise or label those staff who experience these phenomena;
- Having a well-established system of supervision or consultation including peer support processes, case conferences etc. which helps workers to increase self-awareness and to address the stress they experience by setting reasonable boundaries and limits on these;
- Providing regular and appropriate training and professional development opportunities; and
- Facilitating teamwork that is mutually supportive, accepting and non-judgemental.

It is unfortunate, to say the least, that those who are best placed to provide professional and personal support to frontline staff are often those who are most stressed themselves, namely, the Team Leaders. This critical position has become swamped with high and complex workloads and vastly overloaded with expectations to direct, guide, monitor and review practice standards, as well as be a key decision maker in providing protection for children at risk. Despite the previously inadequate remuneration level being redressed by the DoF, there remains a significant problem in staffing these positions with properly qualified, trained and experienced staff who can provide support and management to frontline staff. The increased management function for Area Office Managers has arguably seen this position drift from its important leadership and professional practice functions to become more of a systems-based monitoring function. Simply put, managers are all too often taken up with making strategic and operational management plans, reviewing outputs and outcomes, addressing human resource issues, attending to case management matters that require their attention, and meeting the demands of senior and regional management for information about high-profile cases. There is little time left to do other tasks.

With regard to work stress and its management within the DoF, the following conclusions can be reached:

- Whilst not ignoring the high levels of job satisfaction that exist in the DoF, it is fair to say that the job stress experienced is a significant problem for many staff and contributes to the unacceptably high staff turnover that occurs;
- The major factors influencing this work stress are structural and organisational ones and there is need for increased focus on these sorts of strategies rather than the present over reliance on individual responses; and
- Key front line positions such as Team Leaders need to be specifically targeted with strategies and support systems to reduce their work stressors.

### **Possible Remedial Strategies for Consideration**

Before strategies are outlined to address the problems identified in this submission, it is important to also outline the many very positive initiatives and practices that the DoF has embraced. Whilst the inquiry has been initially established after concerns were raised about incidents of departmental practice, it should be noted nevertheless that the DoF has made significant strides in trying to address the issues that it confronts. The current management, along with previous managements, have been tireless in trying to resolve the longstanding issues that beset the organisation. The people who staff and manage the DoF are overwhelmingly committed, caring and hardworking and have endeavoured to bring about the best for departmental clients despite the significant limitations they encounter. Unfortunately, poor practice occurs despite their best endeavours.

The whole nature of child protection and alternative care practice is riven with conflicts and tensions about what is best practice. The needs are great and the finances limited. Whilst there is general agreement about the principles of sound practice, how these are best applied to particular cases and contexts is prone to differences in opinion and emphasis. Hence, there are legitimate disagreements about what is the best way to proceed with different issues and cases. This said, respective administrations have inevitably engaged in organisational restructures to lead their desired changes to culture and practice. As a result, many staff have grown wearisome of continual organisational upheaval, and there is a good case to say that any further changes need to be fully examined as to their effects, both intended and unintended, and the issues that arise in their implementation. **There is a general consensus in the DoF about the need for further change, but the nature of the change requires much communication, collaboration and negotiation before it will be successful. The answer to the DoF's situation is not merely to throw money at quick fix solutions. This would create new issues. The problems are longstanding and need timely rather than rushed remedies and whilst extra resources are necessary, it is imperative to spend funds in a targeted, deliberate and purposeful manner.** Based on the facts, conclusions and opinions outlined in this submission I would suggest that a start be made with the following strategies:

- A alterations to HR practices to curtail the over use of short term contracts for departmental staff and to address other causes of staff instability and turnover;
- Development of a range of organisational strategies to reduce problematic levels of work stress;
- The implementation of a robust, integrated and professionally based training program for all service delivery staff that address both initial knowledge and skills requirements as well as ongoing professional and organisational development needs;
- The creation of a distinct organisational entity and structure for the alternative care program functions as distinct from the child protection functions;
- A restructuring of area offices with a view to strengthening and delineating alternative care service delivery and foster care support, and the development of a capacity to provide effective prevention, early intervention and treatment options for client families. This restructuring needs to attend to contextual variations in the structure rather than a "one size fits all approach";
- A review and evaluation of the outcomes of non-government alternative care services in order to determine suitable and successful service delivery models;
- Consideration of the role of an independent person to act as a "child's representative" in all case review and decision making processes so that departmental processes and procedures are examined as they take place rather than by audits after the fact;
- An expansion and development of the foster care training and support services to ensure they are able to facilitate appropriate care standards and accessible support for care providers to enable them to properly deal with behavioural issues, grief and loss etc;

- Substantially increased funding to enable the provision of appropriate supports, treatments and facilities for children in care of the department; and
- The development of a systematic approach to the client-focussed evaluation of departmental services and the ongoing development of protective and support systems for departmental clients.

In conclusion I would like to state that there are many good works, which the DoF achieves that go unsung and unnoticed by the broad community. Its requirement to respect the privacy and confidentiality of its vulnerable clients means that it is particularly hamstrung when there are public attacks on its actions. This public inquiry, I trust, will enable a fuller examination of departmental processes and services to be undertaken and for both the good and the bad to reach the light of day. This is a necessity if public faith in our child protection system is to be restored. I am hopeful that the process will lead to an open process of reflection and deliberation of the options available so that government can better serve the people by addressing the problems that are identified. A process of searching for scape goats followed by a societal blood letting would be counterproductive indeed. The systemic focus of this inquiry lends great optimism to our endeavours to find solutions to the complex problems that beset the DoF. It is a necessary and credible approach to adopt in order to be helpful rather than a hindrance.