Enhancing inter-sectoral practice between alcohol and other drug services and the child and family welfare sector

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Presentation Overview

Growing recognition that no one service can meet all clients' needs, with multiple and complex needs.

Inter-sectoral practice or collaboration is seen as one of a number of essential mechanisms to address clients' needs (COAG 2009; Winkworth & White 2010).

Recently, intersectoral resources to support child and family sensitive practice in AOD have been developed.

Inter-sectoral resources can support the development of collaborative practice through:

Developing common language

Clarifying expectations across practice silos
Identifying key players and resources

Disseminating information in relation to policy and practice.

This presentation will discuss child and family sensitive practice and explore some of the processes involved in co-developing resources for sectors with different philosophical orientations, values and perspectives.





Defining Child & Family Sensitive Practice

"... raising awareness of the impact of substance abuse upon families, addressing the needs of families, and seeing the family rather than an individual adult or child - as the unit of intervention.

It necessitates identifying and addressing the needs of adult clients as parents, as well as the needs of their children, as part of treatment and intervention processes, in order to ensure that as parents they are supported and child wellbeing and safety is maintained"

(Battams, Roche, Duvnjak, Trifonoff, & Bywood, 2010).







Child & Family Sensitive Policy & Practice

Goes beyond treatment to consider:

- * Workforce practices
- * Organisational processes and procedures
- * The wider AOD service system
- * Public health, preventative approaches.

Doesn't rely on one particular practice model:

- * Can be built into existing practices
- * Is not and does not replace family therapy.







Children and family members needs

- * Historically, relatively few AOD programs considered the needs and development of children or provided for the care of children whilst parent/s in counselling or treatment programs.
- * Whilst AOD sector well aware of the impact of co-occurring issues on clients - traditionally perceived through the lens of and with interventions focussed on the individual.





Impact

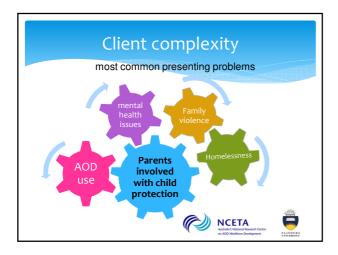
- * Abuse and neglect may cause long term, devastating impacts on children including:
 - * developmental delay
 - * relationship, physical health, behavioural and educational difficulties
 - * serious lifelong mental health issues including problematic AOD use.

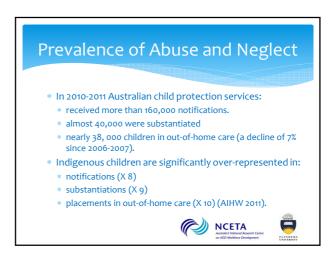






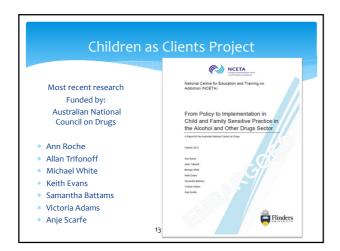
* Growing awareness of impact of clients' AOD use on their family. * A developing body of research and practice highlights the: • importance of relationships between client and family members to treatment outcomes, and the health and wellbeing of their family, particularly children • need to address complex issues by better collaboration across a range of service sectors. * Now increased focus on the interrelationship between AOD, child and family welfare and child protection and family/domestic violence. Reflected in: • national policies related to AOD, the protection and wellbeing of children and family support • development of AOD child and family sensitive practice.



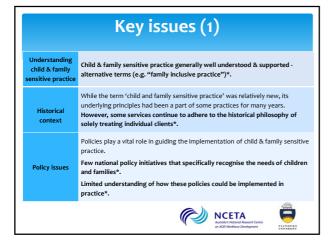


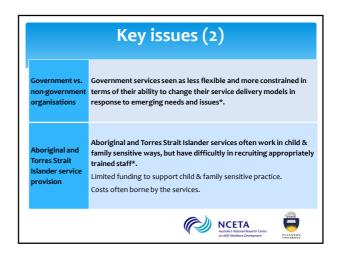


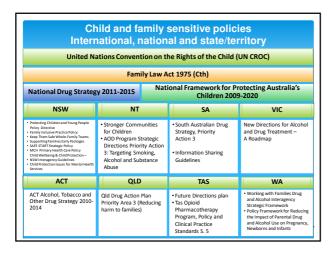






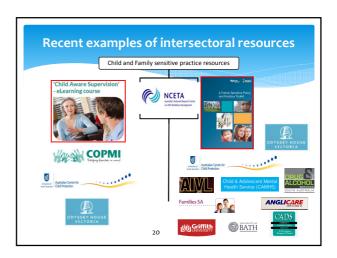






Some Barriers	
Role delineation*	Clinicians often unclear about their responsibility to other family members & whether using a client's family as a motivating factor in treatment is good practice.
Worker confidence*	Many practitioners may lack the necessary skills & confidence to implement child & family sensitive practice.
Training*	Appropriate, funded, accessible & quality training not widely available.
Inter-sectoral barriers	Different values & siloed funding arrangements affect communication & cooperation between sectors.
Gender issues	Women with children may be reluctant to approach services for fear of losing their children.
Perceptions of risk*	Managers of AOD services often reluctant to implement novel practices due to perceived future risks.
Mandatory reporting*	Workers often hesitant to address issues which could result in a mandatory reporting obligation – fear undermining their relationship with the client.
Clinical supervision*	Relevant clinical supervision often not available.









Learnings from Developing intersectoral resources

Critical success factors:

* Key stakeholder engagement

* Funding

* Time

* Patience

* Negotiation

* Evidence – from all the engaged sectors

* Validation of different world views - balance of voices

Conclusion 1. General support for child & family sensitive practice. 2. To support the further implementation of child & family sensitive practice there is a need for: a Improved communication & cooperation within & between sectors Consistent national & jurisdictional policy frameworks that support child & family sensitive practice Appropriate management and organisational support Contractual obligations Training & professional development Clinical supervision Culturally sensitive and appropriate practice. The development of intersectoral resources is one strategy to support change.



