Working Together:

Multi-Agency Collaboration and Child Protection on the Anangu Pitantjatjara Yankunytjatjara (APY) Lands

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Improving the lives of vulnerable children
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Executive summary

Child abuse and neglect is a significant problem in Australia as in other countries around the world. The most recent national figures from the Australian Institute of Health and Welfare\(^1\) indicated that 339,454 reports of child abuse and neglect were made to statutory bodies in the different States and Territories for the period 2008-09. Aboriginal and Torres Strait Islander children were significantly over-represented in Australian child protection statistics, with those aged 0-16 years seven and a half times more likely to be the subject of a substantiated report of child maltreatment than other children\(^1\).

The South Australian Department of the Premier and Cabinet (DPC) commissioned this report from the Australian Centre for Child Protection in 2008 in response to recommendations made by the Honourable E.P. Mullighan QC in his Commission of Inquiry into child sexual abuse on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands. The APY Lands is situated in remote North West South Australia and covers an area of some 102,360 square kilometres. It is home to an estimated 2,500 people, 85% of residents are Aboriginal. This report addresses recommendation 10 of the Commission of Inquiry, namely that an independent consultant evaluate the effectiveness of a multidisciplinary team approach for services on the APY Lands to disclose and detect abuse\(^2\). There is a clear consensus of the need for government and non-government agencies to work together to assist individuals and families with multiple and complex needs and to tackle the serious problem of child maltreatment confronting Aboriginal communities - in particular the communities of the APY Lands.

This report addresses recommendation 10 in three parts: 1) a review of recent literature to identify best practice for working in multi-agency/multidisciplinary collaborations; 2) a suggested evaluation framework based on an action research model that could be applied in different communities; and 3) the identification of possible indicators and outcomes that may be used to monitor progress towards a best practice model, with scope to adjust the model according to staff and community input as part of the process evaluation.
Multi-agency collaboration

Multi-agency collaboration is characterised in the literature by strong and highly interdependent relationships which, by utilising multiple sources of expertise, knowledge and resources, focus on solving complex problems\(^3\). The advantages of collaboration are frequently described as a focused application of knowledge and expertise, increased effectiveness of resources, joint commitment to action and the creation of relevant solutions.

Research examining multi-agency practice generally assumes that collaboration is a positive and desirable activity\(^4\). However, evidence in support of the benefits of multi-agency collaboration generally relates to the process of collaboration (ie how well agencies work together or the ‘doing’ of partnerships) rather than its contribution to positive outcomes for children and families. This reflects the difficulties associated with evaluation in complex areas such as child and family welfare. Multi-agency collaboration has been associated with:

- improved flexibility and access to services;
- increased service coordination;
- greater efficiency;
- increased information exchange; and
- greater focus on prevention and early intervention\(^5\) and see\(^6\) for a review.

Due to the scarcity of outcome evaluations of multi-agency collaborations, Layalants and Epstein\(^6\) have called for evaluative research of multi-agency teams which examines outcomes such as the extent to which teams: a) encourage appropriate reporting; b) generate legally acceptable evidence; c) resolve cases in a timely manner and in the best interests of the child victim; and d) respond to the needs of child victims and the potential victims of future maltreatment.

Research highlights that proper preparation is necessary to ensure effective implementation of multi-agency approaches within specific contexts. Recommendations for new multi-agency initiatives highlight the need for planning, drawing on models of
successful collaborations, adequate funding and resources, the use of a participatory research action models to inform implementation and comprehensive evaluation.

**Multi-agency collaboration on the APY Lands**

There are a range of issues related to working with Aboriginal populations and to working in remote communities such as the APY Lands that can make multi-agency practice challenging. Unfortunately, there is very little evidence specific to these contexts that can be used to guide the development of new collaborative initiatives on the Lands. There is however some discussion in the literature about the factors that may assist collaborative practices that can be drawn on to inform multi-agency practice in the APY Lands. These factors include:

**Across agencies;**

- joint ownership of the problem of child sexual abuse and agreement between agencies on shared goals and a common framework, such as a family-centred philosophy;
- shared procedures, protocols and mechanisms for review across agencies, including information sharing guidelines, referral guidelines and evaluation tools;
- inter-agency training to foster better understanding of the role of individual agencies and the context (and constraints) in which they operate;
- possible co-location of services; and
- adequate funding for new initiatives.

**Within agencies;**

- shared commitment to collaborative practices at strategic and operation levels and agreement as to what this entails;
- adequate resourcing for new initiatives (eg staff allocation, staff time and administrative support); and
- provision of in-service training about working in multi-agency teams (including communication skills).

The research also highlights that new multi-agency initiatives will need to ensure teams;
• include members that have been chosen for their commitment to collaborative practices and openness to difference;
• have clear lines of responsibility for team members (both within the team and outside of the team, if applicable);
• have access to high quality supervision and support for team members and to mediation services if required; and
• make opportunities for team building activities.

Evaluation of multi-agency collaboration on the APY Lands

The following points can be drawn from the evaluation literature that are of relevance to an evaluation of multi-agency practice on the APY Lands:

• Planning for evaluation begins with the development of a program logic model ideally incorporating the theory of change and, in complex environments, the contextual factors that are likely to influence implementation and outcomes.
• A program logic model ensures shared understanding of the issue to be addressed, the reasons underlying the choice of strategy to address an issue, how the strategy will be delivered and the expected outcomes. Logic models should be developed and agreed upon by the agencies and stakeholders involved.
• The purpose of the evaluation will determine whether a process evaluation or an outcome evaluation is to be undertaken.
• Participatory action research methodology reflects the iterative process of bringing about change and acknowledges the role of all stakeholders in the process. It is recommended as the appropriate methodology for evaluating multi-agency practice.
• Indicators will be determined by the objectives and outcomes specified in the logic model.
• Data collection methods will be determined by resources, however it is important that a mix of methodologies be used including interviews, checklists, case file analysis and data mining.

In the context of a proposed evaluation framework for multi-agency practice on the APY Lands the aims of a process evaluation (refer Table 1) would be to determine:
• the extent to which collaborative processes have been implemented as intended;
• the extent to which processes are working as intended;
• the strengths and weaknesses of the multi-agency approach; and
• the facilitators and barriers to collaborative practice.

At this stage, the primary aim of an outcome evaluation of multi-agency practice on the APY Lands would be to ascertain if there have been improvements in the disclosure and detection of child sexual abuse (refer Table 2). Following the program logic (Figure 4) short to intermediate outcomes can be examined at the level of:

1. children and non-abusing carer/s
   a. improved satisfaction with response to the disclosure of child sexual abuse

2. agency
   a. improvements in information sharing
   b. evidence of a more coordinated response to the disclosure of child sexual abuse
   c. staff satisfaction with the multi-agency process

3. community
   a. increase in trust and positive perceptions of services/agencies and willingness to engage with them
   b. increased willingness to disclose/report child sexual abuse

4. system
   a. improvements in workforce recruitment and retention
   b. improvement in the reporting and response to child sexual abuse
   c. cost effectiveness of the multi-agency practice relative to alternative approaches
Given the complex nature of the APY Lands it is likely to take a number of years of continuous evaluation feedback and program refinement to achieve the desired outcomes. Initial outcome evaluations may more realistically be directed toward agency outcomes as a first step.

It is recommended that process evaluation be undertaken within the first twelve months of implementation focusing on improvement. An outcome evaluation would be best positioned to take place after this time. It is suggested that a comprehensive outcome evaluation of any new initiatives on the APY Lands is undertaken by an independent consultant.
Purpose of the report

The South Australian Department of the Premier and Cabinet (DPC) commissioned this report from the Australian Centre for Child Protection in 2008, in response to recommendations made by the Honourable E.P. Mullighan QC in his Commission of Inquiry into child sexual abuse on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands2, p.149. More specifically, recommendation 10 arising from the Commission of Inquiry suggested that an independent consultant: “evaluate the effectiveness of a ‘multidisciplinary’ team approach involving Families SA and other service providers on the APY Lands to disclose and detect abuse, after a period of 12 months” 2, p. xxi. In response to the recommendation and with significant funding anticipated to support an implementation strategy for child protection responses on the APY Lands, the South Australian Minister for Aboriginal Affairs and Reconciliation indicated that the government commission the Australian Centre for Child Protection to: “develop a framework for reviewing the effectiveness of all child protection initiatives on the APY Lands”7, p.18. However, the funding for the larger strategy was not obtained and the scope of an evaluation framework was renegotiated.

Substantial consultation was undertaken with senior staff from the Aboriginal Affairs and Reconciliation Division (AARD) of the South Australian Department of the Premier and Cabinet and the South Australian Department of Families and Communities to clarify the scope of the report. At this time, the multidisciplinary approach referred to in recommendation 10 was still in development, making it difficult to conduct a comprehensive evaluation framework around such an approach. Therefore, at a task force meeting held on the 30th April 2009, chaired by AARD and attended by representatives from different government departments to monitor responses to the Mullighan report, it was determined that the report would:

(1) Provide a review of recent literature to identify "best practice" with respect to:
   a. multi-agency/multidisciplinary collaboration generally;
   b. multi-agency/multidisciplinary collaboration and the detection of child abuse generally and child sexual abuse specifically;and
   c. multi-agency/multidisciplinary collaboration and the detection of child sexual abuse specifically;and
c. multi-agency/multidisciplinary collaboration when working with Aboriginal and Torres Strait Islander populations and in remote communities.

(2) Detail an evaluation framework (both process and outcome evaluation) based on an action research model that can be applied in different communities. It was suggested that Ernabella/Pukatja could be an initial setting to employ and modify the framework. Unfortunately, the timing of this report was in advance of planning for new initiatives in this community. The proposed evaluation framework was therefore not specific to any APY Lands community.

(3) Identify possible indicators and outcomes that may be used to identify progress towards a best practice model, with scope to adjust the model based on staff and community input as part of the process evaluation.

**A note about terminology**

The term “multi-agency” has been used in this report in preference to a number of other terms that are used interchangeably in the literature, including: inter-agency, inter-sectoral, inter-organisational, inter-professional and multidisciplinary. The choice of term was in large part arbitrary, although some terms appear to have a more narrow usage, or have more relevance in certain countries. The prefix ‘inter’ (for example relating to relationships between agencies) was avoided as the term would not include issues arising from relationships within agencies (ie ‘intra’-agency). The term multidisciplinary was considered to have a more restricted focus, not necessarily relating to situations where workers cross organisational boundaries, as occurs on the APY Lands. The term multi-professional is more often used by authors writing about children’s services in Britain and would appear to reflect the specific context of services in that country.

**Methodology**

Information for this report was obtained from a number of different sources including recent government documents and reports, internet searches and from information gained from personal contacts. A literature review of multi-agency collaboration was undertaken using social science databases including *Academic Search Premier, PsychInfo* and *Scopus*.
and the following key words: “multi-agency”, “multi-professional”, “inter-agency”, “inter-disciplinary”, “inter-organisational”, “partnerships” and “networking”. These terms were limited by the following search terms: “child protection”, “child welfare” and “social services”. A search of the grey literature was also conducted using Google and Google Scholar focusing on guidelines for multidisciplinary teams in child protection and specific topics such as case conferencing.

Information relating to collaborative efforts with regard to child sexual abuse in Aboriginal communities was largely retrieved from reviews and reports on this specific issue, rather than from studies of effective models and outcomes of collaborative efforts.
Chapter 1  Background

Child abuse and neglect in Aboriginal and Torres Strait Islander communities

Nationally, Aboriginal and Torres Strait Islander children are seven and a half times more likely to be the subject of a substantiated report of child maltreatment than other children aged between 0-16 years\(^1\). In South Australia Aboriginal children are thirteen and a half times more likely to be the subject of a substantiated report than other children (Australian Institute of Health and Welfare, 2010). A statistical analysis of longitudinal child protection data relating to South Australian children born in 1991 showed that when compared to non-Aboriginal children, Aboriginal children were more likely to\(^8,p.3\):

- be the subject of a child protection notification, investigation and substantiation (40% of Aboriginal children receiving a notification had abuse substantiated compared to 24% of non-Aboriginal children);
- be the subject of higher ranked (more serious) notifications of abuse;
- be notified for emotional abuse and neglect;
- have a first notification at a younger age;
- be notified on multiple occasions (see Figure 1); and
- go on to experience an alternative care placement, adolescent at risk intake, emergency financial assistance or young offender order.

Aboriginal girls were more likely than Aboriginal boys and non-Aboriginal children to be the subject of multiple notifications, have a higher number of substantiations, to have a substantiation for emotional and physical abuse and were more likely to go on to experience an adolescent at risk intake. Aboriginal boys were more likely to experience a young offender order than other children\(^8\).
Hirte, Rogers and Wilson\(^8\) also report that comparative analysis of children born in (1991, 1998 and 2002) showed Aboriginal and non-Aboriginal children born in latter years were increasingly more likely to be notified and that the likelihood of Aboriginal children being notified appears to have increased at a higher rate than for non-Aboriginal children.

It is not possible to identify the prevalence or types of maltreatment on the APY Lands. However, figures reported in the Commission of Inquiry into sexual abuse on the APY Lands\(^2\) for the period 2006-7 showed the percentage of notifications made to the Cooper Pedy office (the Families SA office handling most referrals from the Lands), were higher for neglect (58%) and child sexual abuse (17%) than the national averages for that period.

To date there has been little research examining the reasons for the over-representation of Aboriginal and Torres Strait Islander children and families in the child protection system\(^9\). However, it is commonly believed that child maltreatment in Aboriginal and Torres Strait Islander communities is associated with a complexity of factors as is the case in non-Aboriginal and Torres Strait Islander communities\(^10\). While common definitions of child maltreatment locate the cause at the level of the individual (the child’s carer or parent) Stanley, et al\(^10\) make the point that Aboriginal and Torres Strait Islander understanding of child abuse and neglect places greater emphasis on family violence. Family violence in the context of Aboriginal and Torres Strait Islander understanding can mean “the broader

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Figure 1.1: Number of notifications per child by cultural background (Hirte, Rogers, Wilson, 2008, p45).
experience of violence within extended families and inter-generational issues” and can “encompass the community, reflecting the fact that there is not a clear delineation between private and public spheres in many Aboriginal communities” \textsuperscript{10, p3}. According to Stanley, et al\textsuperscript{10, p3}

“...This broad perspective reflects a preference within Indigenous groups for an holistic approach to addressing issues of violence, loss of cultural identity, substance abuse and the needs and rights of Indigenous women and children”.

The issues believed to be associated with Aboriginal and Torres Strait Islander child maltreatment include\textsuperscript{9-11}:

- alcohol & drug abuse;
- family violence;
- pornography;
- overcrowded and inadequate housing;
- socio-economic disadvantage;
- mental health;
- substance abuse;
- spiritual oppression;
- passive welfare;
- racism;
- silence & denial; and
- media Influences.

Many of these factors are seen to be symptoms of deeper underlying factors including the historical and inter-generational legacy of forced removals and cultural assimilation and the associated unresolved trauma and guilt, marginalisation, racism and poverty \textsuperscript{11}.

**Child sexual abuse in Aboriginal and Torres Strait Islander communities**

Child sexual abuse results in significant risks of physical and psychological harm to many children\textsuperscript{12}. Children who have been abused are more likely to experience on-going mental
health problems, to misuse drugs and alcohol, to engage in risky sexual behaviour, to experience health problems and to encounter problems with the law\textsuperscript{13}. It can leave victims with feelings of betrayal of trust, isolation, despair and depression and can result in self-harm and suicide attempts\textsuperscript{14}.

Child sexual abuse is not well understood in Aboriginal and Torres Strait Islander communities and is therefore often undetected and seldom reported\textsuperscript{14}. Official child protection data show that child sexual abuse represents a relatively small proportion of the types of abuse experienced by Aboriginal and Torres Strait Islander children. However, it is estimated that less than 30\% of sexual assaults on children are reported to police and that the rate of reporting is even lower for Aboriginal and Torres Strait Islander children\textsuperscript{10}.

Reporting sexual abuse is difficult for all children, who commonly experience fear, shame, guilt, not being believed, confusion, lack understanding of what they have experienced, or not knowing who to tell. This difficulty is compounded for Aboriginal children who live in complex extended family and community networks that are often geographically isolated, experience poor responses from existing service providers and have a mistrust of the service system in general\textsuperscript{14}.

Child sexual abuse also has a devastating impact on communities. The Aboriginal Child Sexual Assault Taskforce\textsuperscript{13, p48} reports that Aboriginal community members “believed that child sexual assault was a key, underlying factor in the high levels of violence, substance abuse, criminally offending behaviour and mental health issues that many Aboriginal communities are grappling with today”. Because Aboriginal community, family and individuals are closely linked, the impact of disclosure of child sexual abuse can have wide ramifications when the offender is part of the community or family.

The factors believed to contribute to the incidence of child sexual abuse in Aboriginal and Torres Strait Islander communities include\textsuperscript{14}:

- substance abuse;
- social and economic disadvantage;
• exposure to pornography and a sexualised society;
• the ‘normalisation’ of violence (or inter-generational cycle of violence);
• the presence of family violence;
• unresolved trauma and grief;
• breakdown of family and community structures;
• lack of community engagement with the issue;
• lack of support for community-driven solutions; and
• inadequate responses from service providers

The isolation of many Aboriginal and Torres Strait Islander communities gives rise to additional factors that can increase children’s vulnerability to child sexual abuse. These include limited access to health, welfare, education and other services, geographical and social isolation and maintaining confidentiality of service provision in smaller communities. All of these factors can impact on family and individual wellbeing and the ability to cope with stressors when they arise\textsuperscript{15}. Coorey\textsuperscript{15} discusses a range of factors that can increase children’s vulnerability to sexual abuse in Aboriginal and Torres Strait Islander communities situated in rural and remote areas, including:

• no escape and a lack of transport ;
• higher consumption of alcohol and drugs;
• lack of community awareness of child sexual abuse;
• uninformed and unchallenged community attitudes about child sexual abuse due to isolation;
• the reluctance of service providers including police, district officers/family services officers, Aboriginal and Torres Strait Islander Legal Officers, doctors and others to intervene when child sexual assault is reported, due to:
  o knowledge of the offender
  o having a social relationship with them
  o status of the offender in the community
  o failure to take the word of the victim, especially if the victim has been in trouble with the law
The matter being too difficult to deal with
not wanting to be perceived as being racist when the offender is Aboriginal or Torres Strait Islander

- high visibility of services;
- lack of anonymity;
- no one to talk to about the abuse and a great sense of shame if anyone finds out;
- lack of services, or lack of choice of services and service providers;
- lack of counselling to address the trauma of sexual assault. This can result in:
  - children trying to run away
  - children entering adolescence with a multitude of problems
  - children who were abused becoming abusers of other children themselves
  - children drinking, taking drugs and not talking

- lack of trained child sexual assault workers;
- culturally inappropriate services;
- difficulty in attracting appropriate staff;
- staff burnout; and
- inadequate staff training.

The Anangu Pitantjatjara Yankunytjatjara (APY) Lands

The APY Lands is situated in remote North West South Australia and covers an area of over 102,360 square kilometres. It is home to an estimated 2,230 people, 84.5% of residents are Aboriginal\(^\text{16}\). A number of communities are situated on the APY Lands ranging in size from approximately 675 residents at Pukatja (Ernabella)\(^2\) to a number of small homeland groups. Umuwa is the administrative centre, being centrally located to the remaining seven communities on the Lands including Pipalyatjara, Kalka, Murputja Homelands, Amata, Pukatju (Ernabella), Kaltjiti (Fregon), Mimili, Watarru and Iwantja.

The APY Lands communities have a significantly higher proportion of younger people than the overall Australian population. The median age is estimated to be 26 years (ABS), with children aged between 0-14 years constituting 27.4% of the population and 11.7% of the
population being over 55 years of age. Fifty nine per cent of residents in the 2006 census listed Pitjantjatjara as the language spoken at home, 14.3% listed Yankuntjatjara and 18.7% specified English as their main spoken language (compared with 78.5% of the overall Australian population). Median incomes in the APY Lands are significantly lower with a median individual weekly income of $219/week compared with $466/week nationwide. The APY Lands have a significantly larger proportion of single-parent families (30.1% of 15.8% nationwide). The APY Council, the governing body of the APY lands, was formed in 1981 by the passing of the APY Land Rights Act 1981 and includes Ngaanyatjarra Pitjantjatjara Yankunytjatjara (NPY) people who have a long association with the area. The APY Executive Board is the elected authority on the Lands.

**Children on Anangu Pitjantjatjara Yankunytjatjara (APY) Lands Commission of Inquiry**

The Children on Anangu Pitjantjatjara Yankunytjatjara (APY) Lands Commission of Inquiry follows a number of investigations and reports that have been undertaken on the Lands over the past 15 years, either directly or indirectly linked to child welfare (refer Figure 1.2 at the end of this chapter). These investigations have provided a clear consensus that serious problems confront Aboriginal communities and that government and non-government agencies need to work together to address these issues (see Appendix A for more details).

A Commission of Inquiry by E. P. Mullighan, QC was undertaken in November 2004 into allegations of sexual abuse of children in State care in South Australia. At this time, concern was also expressed about the incidence of sexual abuse in Aboriginal communities and remote regions. A report into the sexual abuse of children on the APY Lands was subsequently commissioned and released in April 2008. The report highlighted the very serious problems existing on the Lands contributing to the widespread prevalence of child abuse and neglect. Concerns included high levels of violence, drug and alcohol abuse and poor physical and mental health in the context of poverty, overcrowding and unemployment. Mullighan concluded:

“I heard much evidence about underlying socio-economic factors of welfare, child protection, health, education and the administration of justice....it is clear that
without these key pillars working cohesively, the community cannot effectively provide a safe environment to the children on the lands. All of them must be strengthened to be more effective” 2, p.VI

The Mullighan ² report made close to 50 specific recommendations relating to the problems identified on the Lands. In the welfare and child protection area, recommendations related to the need for additional resources including extra child protection staff and services. Several recommendations related specifically to the need for improved working relationships and processes between agencies working on the Lands.

Recommendation 7 stated:

“That CAMHS and Families SA review the protocols that govern their working relationship with a view to providing better assistance to children who have been, or may have been, sexually abused on the Lands” ², p.143.

Recommendation 10 suggested:

“That a review to evaluate the effectiveness of a ‘multidisciplinary’ team approach involving Families SA and other service providers on the Lands to disclose and detect child sexual abuse be undertaken by an independent consultant after such teams have been in place for 12 months” ², p.145.

Mullighan pointed to the lack of a coordinated multi-agency approach to meet the needs of children on the Lands, arguing:

“It is essential that when there is a mandatory notification, or in some other way Families SA becomes aware that a child on the Lands may have been sexually abused, there must be an immediate response which involves consultation between Families SA, Nganampa, DECS, teachers and SA Police” ², p.146.
Recommendation 12 related to the need for better relationships between government and non-government agencies, suggesting a case management model:

“That Families SA and NPY Women’s Council establish closer cooperation and develop an understanding as to the role which the council is to play in supporting children who have been sexually abused, or are identified as at risk from sexual abuse” 2, p.149.

The Minister for Aboriginal Affairs and Reconciliation responded to the Mullighan report in July 2008 17. This document concurred with the urgent need to secure the safety of communities on the Lands and to restore confidence in child protection services. In particular it agreed with the need for more collaborative working relationships between agencies including greater information sharing and indicated that reviews of processes and guidelines would be, or were already being undertaken 17. A document outlining information-sharing guidelines as part of the government’s Keeping Them Safe program was endorsed by Cabinet in October 2008, providing principles and practices for government agencies and non-government organisations (NGOs) who support children, young people and their families 18. It should be noted that the coverage of such guidelines is restricted to only those agencies and organisations bound by South Australian legislation and policy. Some organisations that deliver services to the APY Lands actually operate from the Northern Territory. Any agreement reached about a coordinated approach on the Lands must outline how such differences in legislation/policies will be resolved.
Figure 1.2 Timeline of activities relevant to multi-agency child protection work on the APY Lands 1995-2010

- 1995: SA Child Abuse Prevention Strategy
- 1996: APIICC & petrol sniffing taskforce
- 1997: Aboriginal Lands Task Force Strategic plan
- 1998: Collins report
- 1999: Aboriginal Lands Task Force Strategic plan
- 2000: COAG framework on indigenous family violence and child protection
- 2001: O'Donoghue & Costello report
- 2002: Thurtell Consulting report
- 2003: Keeping Them Safe reform program
- 2004: Rapid response
- 2005: State Coronial inquest (Chivell)
- 2006: Children on APY Lands: A report into sexual abuse
- 2007: First annual progress report
- 2008: Ministers response
- 2009: Progress on the Land: Update on APY Lands (DCP)
- 2010: Children in State Care Commission of Inquiry
Chapter 2  Multi-Agency Collaboration

Accumulated evidence of the repeated failure of isolated interventions to protect children from abuse and neglect has increased awareness that uncoordinated efforts to tackle child abuse do not effectively address the multiple and complex needs of the families involved. The consequences of poor cooperation can be profound. In Australia and internationally the impetus for developing more integrated service systems often comes from formal inquiries into child deaths. Many of these inquiries highlight poor communication, poor information sharing and limited collaboration between agencies as contributing to serious instances of child abuse\textsuperscript{19-22}. Doss and Idleman\textsuperscript{23}, p676 found that ‘the inability to effectively coordinate the activities of law enforcement agencies, the courts and CPS agencies has proven disastrous when dealing with children who are victims of sexual and physical abuse’.

The pressure created by such unavoidable recognition of this system failure has meant that different approaches are currently being considered. For example, Australian and international research supports the establishment of protective networks (also referred to as child and family safety systems) for vulnerable children and their families\textsuperscript{24,25}. Such networks involve not just different agencies but also community members:

‘It is key to an effective protective network that it must be possible to access help for a child via any entry point. All the components of the current system, lay, legal, civil and voluntary, should be seen as playing important but different and complementary roles in child protection and should operate in a climate of mutual respect. No matter where the first concern is observed or raised, the helping and protecting process should begin immediately’\textsuperscript{25}.

Similarly, the recently released \textit{National Framework for Protecting Australia’s Children}\textsuperscript{26} recognises that all levels of government plus the non-government sector and the broader community need to work together to ensure the safety and wellbeing of Australian children. The National Framework relates specific outcomes to Aboriginal and Torres Strait Islander children: feeling supported and safe in their families and communities (Outcome 5)
and preventing child sexual abuse and providing adequate support for survivors (Outcome 6).

The framework emphasises a commitment to better linking of supports and services so as to avoid duplication, and enable coordinated planning and implementation and better sharing of information and innovation. 26

The above examples reflect a multi-agency view of child welfare. Rather than relying on separate interventions that stem from a system of functionally disparate sectors eg health, police, child protection etc., multi-agency collaboration emphasises the need for relevant agencies to work together to more effectively address complex problems such as child abuse and neglect. 3

**Characteristics of multi-agency collaboration**

Multi-agency collaboration is characterised in the literature by strong and highly interdependent relationships which, by utilising multiple sources of expertise, knowledge and resources, focus on solving complex problems. 3 The advantages of collaboration are frequently described as a focused application of knowledge and expertise, increased effectiveness of resources, joint commitment to action and the creation of relevant solutions.

Horwath and Morrison define collaboration along a continuum ranging from informal and local to formal and whole agency collaboration determined by the level of endeavour e.g communication (individuals from different disciplines talking together), cooperation (low key joint working on a case-by-case basis), coordination (more formalized joint working, but no sanctions for non-compliance), coalition (joint structures sacrificing some autonomy) and integration (organizations merge to create new joint identity) 4, p56. For them the necessary ingredients (whether having a positive or a negative influence) are:

- pre-disposing factors (history of relations);
- mandate (authority);
- membership and leadership;
• shared goals;
• strategic planning;
• machinery (governance);
• systems and structures;
• practicalities (location); and
• process (trust).

Because of the large variations in configuration, function, composition and training, categories have been developed for multi-agency service delivery and child abuse and neglect teams based on their primary functions\(^6\) a description of which can be found in Appendix B.

**Evidence for the effectiveness of multi-agency collaboration**

Research examining multi-agency practice generally assumes that collaboration is a positive and desirable activity\(^4\). However, evidence in support of the benefits of multi-agency collaboration generally relates to the process of collaboration (ie how well agencies work together or the ‘doing’ of partnerships) rather than its contribution to positive outcomes for children and families. That is, change to service delivery is the focus rather than change to the wellbeing of children and their families\(^27-29\). Unfortunately it cannot be assumed that improvements to the ways in which members of a partnership work together or feel about working together, translates to change in outcomes for children and families.

**Service provision**

Research reporting on the process of multi-agency collaboration generally indicates benefits to the organisation or individuals who are participating in the partnerships, such as improved procedures, better relationships between partners and greater clarity of aims and direction\(^30\). Service providers report multi-agency collaboration to be rewarding and stimulating, lead to enhanced communication and trust between workers and to increased knowledge and understanding of other agencies\(^5,29,31,32\).

Multi-agency collaboration has been associated with:

• improved flexibility and access to services;
• increased service coordination;
• greater efficiency;
• increased information exchange; and
• greater focus on prevention and early intervention \(^5\) and see \(^6\) for a review.

Research also shows that multi-agency collaboration can lead to feelings of uncertainty around professional identity, increased levels of scrutiny and the potential for increased workload of individual practitioners as well as of the agencies for which they work \(^5\). There may also be tensions at an organisational level if agencies feel that collaboration threatens their independence or identity \(^4\), \(^6\).

Layants and Epstein \(^6\) undertook a critical review of the research literature examining collaboration within the context of multidisciplinary teams in child welfare and found much strength along with difficulties.

Benefits for agency staff included:

• increased coordination and collaboration between agencies;
• access to a broader range of viewpoints and other professionals;
• increased exchange of information;
• more suspected case reviews with fewer cases being missed;
• more successful resolution of cases;
• less fragmentation and duplication;
• a more positive view of working conditions;
• provision of moral support, confidence and stress reduction; and
• improved relationships with clients.

Clients reported services to be more accessible and less fragmented.

Barriers to team effectiveness included:

• defining shared goals and objectives;
• lack of consensus about theories and ideologies of child abuse and neglect;
• confusion about leadership roles and case ownership;
• turf disputes and power struggles;
• time involved in interdisciplinary decision-making compared to more traditional approaches; and
• diffusion of responsibility.

Client outcomes

There is a distinct lack of research examining outcomes for children receiving coordinated child welfare services. This reflects the difficulties associated with evaluation in complex areas such as child and family welfare. Changes in the wellbeing of children and families may not be attributable to changes in service provision or may not be obvious if evaluations are undertaken in the short, rather than long-term. As well, lack of success in collaborative efforts may be as much a function of inadequate resourcing as poor inter-agency links.

Layalants and Epstein have called for evaluative research of multi-agency teams which examines outcomes of program operations such as the extent to which the teams: a) encourage appropriate reporting; b) generate legally acceptable evidence; c) resolve cases in a timely manner and in the best interests of the child victim; and d) respond to the needs of child victims and the potential victims of future maltreatment.

Features of effective collaboration

While there is limited evidence regarding the effectiveness of multi-agency collaboration and partnerships there is some agreement about the features of effective collaboration. Banks, Dutch and Wang investigated six demonstration sites in the US where a collaborative approach to working with families with co-occurring domestic violence and child maltreatment was trialled to minimise duplication, effectively identify and provide appropriate services, minimise blaming of non-offenders, hold batterers accountable and advocate for all family members. Lessons learnt included that: (1) fundamental, philosophical differences in approaches prompt the emergence of inflammatory topics; (2) the relationships developed, although they were most rewarding of the effort invested, required constant attention; (3) effective and neutral leadership was critical; and (4) the
collection of diverse information was necessary to set priorities and to plan for goal achievement.

Research undertaken by Scott\textsuperscript{34} and colleagues has suggested that child protection practitioners often equate the effectiveness of collaborative activity with the absence of conflict. However a certain level of conflict when undertaking multi-agency collaboration may be both useful and necessary and should be accepted rather than avoided \textsuperscript{34,35}.

Fargason, Barnes, Schneider and Galloway \textsuperscript{36} have outlined a framework that could be used to deal systematically with problems encountered when multiple organisations (e.g., police, courts, child protection agencies, medical professionals) voluntarily interact to deliver services to children who have been sexually abused. It is designed to address common causes of conflict that can arise between individuals and organisations including differences in socialisation and performance expectations, goal incompatibility, task uncertainty and resource limitations. The framework outlines three steps for addressing conflicts. The first step (\textit{problem characterisation}) advocates looking at problems from a systems perspective in order to clarify how the causes of conflict outlined above interact to generate conflict. The second step (\textit{acknowledging relevant goals and interests}) emphasises identifying the relevant goals and interests of the participating organisations and individuals and acknowledging these when attempting to address the problem. The final step (\textit{negotiating solutions}) accentuates the importance of negotiation in the process of decision making.

Scott\textsuperscript{37} also emphasises the importance of understanding the source of tensions underlying conflict before detailing possible solutions. Scott\textsuperscript{37} argues that proper preparation is necessary to ensure effective implementation of a multi-agency approach within a specific context and posits a framework for analysing collaboration at five levels: (1) inter-organisational; (2) intra-organisational; (3) inter-professional; (4) interpersonal; and (5) intra-personal. A detailed discussion of the five levels of analysis can be found in appendix C.
Multi-agency strategies to address child sexual abuse

To date there has been little documentation of effective collaborative strategies in response to child sexual abuse generally or for developing multi-agency teams in remote Aboriginal communities. Two promising multidisciplinary team approaches that have been documented and evaluated may provide some guidance in the development of multi-agency responses to child sexual abuse on the APY Lands. The first approach is the Joint Investigation Response Teams (JIRT) model piloted by the NSW Government in 1996 and subsequently endorsed in 2007 as the preferred model for investigating serious child abuse. The teams originally comprised NSW Police and NSW Department of Community Services (DoCS) officers who jointly investigated child abuse reports, predominantly allegations of sexual abuse, which may have constituted a criminal offence. More recently the teams have been expanded to incorporate NSW Health professionals who work with Police and DOCS as partners in the investigative response. NSW Health professionals undertake medical examinations and provide Sexual Assault Services (SAS) and Physical Abuse and Neglect of Children Services (PANOC) services for children and non-offending parents across rural and metropolitan NSW. NSW Police and DOCS officers are co-located in nine NSW metropolitan areas and share equal responsibility for the operation of the JIRT. In rural areas, although not co-located, the two agencies still work collaboratively to investigate referrals.

The aims of joint investigation as outlined on the JIRT website are to:

- provide a timely and comprehensive investigative process, which minimises delay and promotes information exchange between relevant agencies;
- conduct investigative interviews in an environment that is focussed on the child or young person and promotes their participation;
- enhance the standard of briefs of evidence presented to Court jurisdictions and proceed with charging offenders where appropriate;
- ensure timely access to care and support services throughout the joint investigation process;
- ensure immediate referral to crisis counselling;
- minimise the number of investigative interviews conducted;
use protective intervention to ensure the safety of children and young people;
assess the individual needs of children, young people and families;
support the non-offending parent or carer; and
identify and prosecute offenders.

Cashmore\textsuperscript{38} undertook a formative evaluation of JIRT over an 18 month period beginning in December 1998. The aim of the evaluation was to provide feedback to inform improvements to the model. Outcomes for children and families were not evaluated. At this time JIRT comprised NSW Police and DOCS officers only. The evaluation found that joint investigation:

- provided better collaboration and information sharing between DOCS and NSW Police;
- resulted in more effective investigations and prosecutions; and
- provided better protective intervention, however this was only via prosecution of the alleged offender.

The evaluation identified that following areas as being contentious and in need of attention:

- staffing levels and availability of an after hours response;
- additional realistic training and feedback;
- supervision and support;
- appropriateness and rates of referrals between joint response teams and health services; and
- on-going support for families and children after finalising and investigation.

A summary of the evaluation can be found on the JIRT website:

A recent review of JIRT has included in its recommendations that improvements be made to
“how JIRTs work with Indigenous children, families and communities including how it engages with children during a joint investigation and the broader local Indigenous community in community education and prevention” 39

The second promising multidisciplinary team approach to child sexual abuse is the community based Child Advocacy Centre (CAC). CAC’s, the first of which was founded in the US in 1985, aim to reduce the stress on children and their families created by traditional approaches to the investigation of child sexual abuse allegations and the prosecution of alleged offenders. CAC’s provide centralised, child-friendly settings where forensic interviewers are specially trained to work with children. Within CAC’s multidisciplinary team members, including law enforcement officers, Child Protective Service investigators, prosecutors and mental health and medical professionals, coordinate their activities to assist children and families to obtain medical, therapeutic and advocacy services. CACs have become increasingly popular as a means of responding to reports of child sexual abuse in the US with at least 600 accredited (CACs) operating across the country in 2006. However, until recently the CAC model had not been rigorously evaluated. In 2008 researchers from the University of New Hampshire’s Crimes Against Children Research Centre collected case file data from four prominent Children’s Advocacy Centres (784 cases) and nearby comparison communities (668 cases) 40. Analysis of the case file data together with interview data and site information including policies and protocols showed that CACs provided several advantages over comparison communities including the following:

- investigations of child sexual abuse were more likely to be coordinated and involve police;
- children were more likely to receive referral for forensic medical evaluations and mental health services (based on referrals recorded in agency records);
- children reported feeling less scared during CAC interviews; and
- non-abusive carers reported higher levels of satisfaction with the investigation process including child interviews.

On the other hand, no differences were found between CAC’s and comparison sites on the following measures:
- disclosure of sexual abuse in a forensic interview by children suspected of being sexually abused;
- receipt of mental health services (this is despite the increased likelihood of a child receiving a mental health referral from a CAC); and
- criminal justice variables including filing charges, offender confessions and convictions. Any differences that were noted between CAC communities and comparison communities were believed to be due to the influence of involved and committed police and prosecutors rather than the CAC’s themselves.

**Multi-agency collaboration in remote Aboriginal and Torres Strait Islander communities**

The complexity of issues affecting Aboriginal and Torres Strait Islander populations, particularly in remote communities, suggest that collaborative approaches that address the limitations noted in the literature may be salient for Aboriginal children living in these communities.

However, calls for better coordination or collaboration between agencies to improve services for vulnerable children and families need to take account of the contexts in which these services are to be delivered. Rates of alcohol and drug abuse, poor mental and physical health and violence in communities are seemingly enduring if not worsening aspects of the context of many children’s lives. This section briefly highlights the contextual challenges facing agencies working in the APY Lands, followed by a discussion of possible collaborative strategies to improve the disclosure and detection of child sexual abuse on the Lands and a brief discussion about the factors that might assist multi-agency practice in the APY Lands.

**Working on the APY Lands**

Some of the commonly mentioned challenges encountered by agencies and others working in remote Aboriginal communities are shown in Box 1. These challenges stem from geographic isolation, historic tensions, limited and fragmented service delivery, high staff turnover, the ‘fly in/fly out’ nature of service provision and crisis-driven responses. Understandably, this type of environment can make it very difficult to form sustainable
relationships amongst and between service providers and others responding in cases of child sexual abuse.\textsuperscript{43}
BOX 1 Challenges in working in remote Aboriginal communities

Community

- Linguistic and cultural diversity, the need to observe cultural protocols;
- Community perceptions of child sexual abuse, norms/myths about child sexual abuse for example seeing sex as ‘something that happens anyway’;
- Lack of trusting relationships and limited access to appropriate medical care;
- Children feeling responsible for impacts on perpetrators and families; and
- Negative community attitudes (e.g. fear that social workers ‘will take my children away’) coupled with distrust of government interventions more generally.

Service providers

- ‘Red-tape’ and inability to develop community-driven and creative responses;
- Past history of negative relationship/conflict between some agencies;
- Complex lines of accountability among the number of agencies working on the Lands;
- Tensions between protecting children and allowing community self-determination and independence;
- Expectations to perform duties beyond core roles;
- Fear of working in remote communities where the incidence of violence is higher and those making a notification are likely to be known or suspected;
- Differing work ethics and achieving outcomes for children with significant health and education barriers;
- Lack of a common understanding, language and ‘world models’ between community and service providers;
- Governance difficulties; and
- For Anangu who work as service providers, complex caseloads can be exacerbated by their cultural role in the community and the obligations this entails. Frustration, burn-out and role confusion can occur (particularly when role boundaries are imposed after the fact eg ‘we’ll take over now...’).

To address some of the challenges above the Inquiry report\(^2\) suggested the identification of a ‘lead agency’ or ‘lead professional’ to 1) help clarify the roles and responsibilities of agencies and individuals, 2) drive the collaborative process and 3) provide feedback to the...
professionals involved about the progress of a case. The Inquiry report\textsuperscript{2} suggests that this may potentially be a role for the NPY Women’s Council.

It is also important that the unique challenges faced by key Aboriginal workers are recognised as these workers may be more likely to detect or receive a disclosure of child sexual abuse (and to support the child/their family while awaiting a response) due to their position of trust, respect and ability to provide tangible benefits to communities.

Equally important the provision of regular, supportive supervision to all of those working to detect and respond to child sexual abuse is crucial to the success of any attempt to improve the safety and wellbeing of children on the APY Lands.

**The reporting of child sexual abuse**

Abused children have often learnt from experience not to trust adults. Parents and others may also instil distrust particularly of police and ‘the welfare’ in their children. Disclosure of child sexual abuse is less likely to occur when such distrust of the relevant authorities exists. Even if a disclosure of abuse is made to a trusted adult (to a teacher or health worker for example) the recipient may not be in a position to deal with it appropriately. For any collaborative activity to be effective all those involved must be clear about their roles and responsibilities as well as prepared and supported to carry them out. It is therefore essential to agree upon a clear plan of action regarding how those ‘on the spot’ are expected to respond to a disclosure of child sexual abuse and are properly trained to enable them to follow the agreed procedure and supported in doing so.

Inter-professional sharing of relevant information is a key hurdle to be addressed in the APY lands if the reporting of child sexual abuse is to result in timely and appropriate coordinated action. Relevant existing models of information-sharing policies and protocols such as ‘The South Australian Information Sharing Guidelines for Promoting the Safety and Wellbeing of Children, Young People and their Families’\textsuperscript{18} may be specifically adapted for use on APY Lands. The process of assessing suitability may contribute to the development of agreement among the collaborating parties about when, how and why information-sharing will occur regarding disclosures of child sexual abuse and responses to it.
Community mistrust and denial have been identified as significant barriers to child protection teams working in rural communities. Mistrust is a particular problem for remote area service providers who do not live in the communities in which they work and must overcome being seen as ‘outsiders’. Community trust and confidence may take time to develop and can be negatively impacted by changes in government or agency structures or policies and by frequent staff turn-over. Every review relating to child abuse and neglect in Aboriginal populations has highlighted the importance of community direction and community involvement in initiatives to prevent child sexual abuse. However, it is important to recognise potential for community disillusionment if expectations are raised and not met. A number of strategies have been suggested including:

- the development of community safety plans (NTER Review Board);
- community education; and
- representation on councils and working groups that may make decisions affecting children and families.

Steps, such as employing Aboriginal Community Liaison Officers to work with the police, are being taken to build conditions that promote community trust and confidence in authority. The contributions these Officers are already making on the Lands could be more widely recognised and consideration given to an expansion of their roles. The appointment of more female Aboriginal Community Liaison Officers could perhaps enable Aboriginal women and children greater opportunities to discuss sexual abuse more freely. As access to legal support within remote communities is limited, the police service remains the major gateway to any legal response to the crime of child sexual abuse. Further collaborative efforts that help to lessen distrust of police, especially by Aboriginal women and children, could be encouraged.

Community liaison work may reap greater benefits if workers from all the collaborating agencies are involved so that it is not recognised solely as a police responsibility. By broadening the engagement of agencies in this community-strengthening function the value of the role could be reinforced and amplified. In NSW Local Domestic Violence Liaison
Committees rely on a commitment from a diverse range of workers in a defined area who are concerned with domestic violence. It was observed that the availability and commitment of the individuals involved and the fact that each participant’s employer sanctioned their involvement meant that benefits from such collaboration accrued to both the victims of violence and the agencies concerned. Benefits included better information sharing, greater knowledge about services/people in the network, faster feedback about system problems and better understanding of how different systems work. Victims benefited from improved referral, speedier processes between network members, lessening of stigma etc.

Consultation through the Government Business Manager in Amata could suggest further ways to build sustainable connections within the APY Lands.

**The detection of child sexual abuse**

Improving the systemic detection of child sexual abuse on the APY Lands requires the same thoughtful and consistent application of knowledge acquired from lessons learnt about multi-agency collaboration, particularly the importance of context. The history of the increase in child sexual abuse and corresponding issues relating to its detection on the APY Lands present a specific context for improved collaboration between police and other authorities particularly Families SA. However, as discussed above, the success of effective interventions aimed at preventing violence as well as stopping and punishing abuse will depend on, not just police but among other things, the quality of relationships between agencies and with community members. Investment is necessary to develop such respectful relationships so as to make joint efforts effective.

Regular joint training of those involved in dealing with child sexual abuse on the APY Lands should be a component used to elevate the likelihood of multi-agency collaboration and enhance the skills required to achieve the desired outcomes for children. Such training would focus on developing cultural competency of non-Anangu people regarding work with Anangu people.

The difficulties experienced by anyone unfamiliar with the legal framework can be magnified many times for an Aboriginal child victim of sexual abuse from an isolated community with limited resources. Intervention by the existing services/authorities may not be of a standard
that could be considered totally trustworthy by someone unfamiliar with the language used, the processes involved and the theory/perspective underpinning the actions taken (or not taken). These difficulties can also be experienced by the alleged perpetrator of the abuse and those related to the victim and the perpetrator. A multi-agency collaborative approach may be better able to support those facing involvement in the criminal justice system particularly as a child victim (the main police witness in any legal proceedings). Where resources are limited it may be helpful to explicitly clarify the roles of each agency and identify the expectations of each worker involved in a specific child sexual abuse matter (from receiving an allegation to investigation through to prosecution). Providing appropriate on-going support/s for the child whose safety has been compromised may for example fall on Families SA to organise while the police concentrate on prosecuting.

Factors that may assist multi-agency practice on the APY Lands

As outlined above, there are a range of issues related to working with Aboriginal populations and to working in remote communities such as the APY Lands that can make multi-agency practice challenging. Unfortunately, there is very little evidence specific to these contexts that can be used to guide the development of new collaborative initiatives on the Lands. Further, as discussed earlier, evidence of what constitutes effective multi-agency practice more generally is limited to the process of practice with little literature reporting on outcomes for clients. There is however some discussion in the literature about the factors that may assist collaborative practices that can be drawn on to inform multi-agency practice in the APY Lands. These factors include:

Across agencies:

- joint ownership of the problem of child sexual abuse and agreement between agencies on shared goals and a common framework, such as a family centred philosophy;
- shared procedures, protocols and mechanisms for review across agencies, including information sharing guidelines, referral guidelines and evaluation tools;
- inter-agency training to foster better understanding of the role of individual agencies and the context (and constraints) in which they operate;
- possible co-location of services; and
• adequate funding for new initiatives.

Within agencies:
• shared commitment to collaborative practices at strategic and operation levels and agreement as to what this entails;
• adequate resourcing for new initiatives (eg staff allocation, staff time and administrative support); and
• provision of in-service training about working in multi-agency teams (including communication skills).

The research also highlights that new multi-agency initiatives will need to ensure that teams:
• include members that have been chosen for their commitment to collaborative practices and openness to difference;
• have clear lines of responsibility for team members (both within the team and outside of the team, if applicable);
• have access to high quality supervision and support for team members and to mediation services if required; and
• make opportunities for team building activities.

A series of practical steps identified by the Victorian Department of Human Services in the Document “Towards collaboration: Resources for child protection and family violence services” provide a useful framework for planning collaborative initiatives:

**Step 1:**
The first step involves determining need and identifying whether favourable conditions exist for collaborative efforts to flourish. Questions to be asked may include:

1. What will be the difficulties experienced by children and families if collaboration does not occur?
2. What specific improvements would be achieved through collaboration?
3. What specific outcomes would be achieved for children and families if collaboration occurs?
4. What are the potential cost/benefits from collaborating?

Appendix D shows a brief survey tool⁴⁷ that enables an assessment of the conditions within agencies to determine whether collaboration will be successful.

**Step 2:**
Step 2 involves mapping the range of service sectors and agencies which may be parties to any new initiative who could potentially work together to better support and protect children and families. Figure 2.1 below shows an example of an initial agency map for agencies working on the APY Lands. Further work could be undertaken to complete the map as a collaborative exercise. Additional information may include: programs and people; agencies with more central or peripheral involvement; agencies which need to be more involved in the protection of children.

![Agency mapping example](image)

**Figure 2.1 Agency mapping example**

**Step 3:**
Once the need for collaboration has been identified and there is agreement from key parties to participate, it is necessary to determine how new collaborative activities will be
undertaken. Campbell suggests a number of preliminary stages which may be facilitated by multi-agency working groups:

- discuss perceived aims and purposes of the collaboration;
- exchange information about the agencies;
- workshop issues of concern; and
- establish a process for the conduct of the collaboration:
  - identify venues;
  - roles of participants (do not rely on one person); and
  - formats of meetings.

Step 4:
The final step in preparation for new collaborative initiatives is the development of a protocol or memorandum of understanding which documents outcomes of previous endeavours. The Department of Human Services in Victoria has suggested a template for such a protocol as follows:

1. Who are the collaborating parties?
2. The aims and objectives of collaboration
3. The roles and responsibilities of collaborating parties
4. Referral criteria:
   a. Communication procedures (how to contact each service, expectations in relation to returning calls and other issues);
   b. Expectations in relation to who will be involved, meeting attendance, provision of information and confidentiality;
   c. Joint training initiatives; and
   d. Consultation processes.
5. Conflict resolution mechanisms
6. Protocol and relationships maintenance:
   a. Protocols should be endorsed and signed by senior staff
7. The Protocol should be regularly reviewed (determine the time and process for this).
Conclusion

Multi-agency collaboration while generally considered to be desirable is often difficult to achieve. The barriers to such collaboration exist at both conceptual and pragmatic levels. While many of the difficulties have been widely documented in the literature there has been less attention on how to overcome them. Walsh, Brabeck and Howard outlined a theoretical framework which may be useful for providing a rationale for inter-professional (multi-agency) collaboration. The articulation of such a framework may be necessary as a means of gaining support and engagement from a range of individuals and agencies. Briefly, acceptance and application of the following four principles of human development are seen as the underpinning of the framework:

1. development occurs across the lifespan;
2. development occurs in context (eg social, cultural and historical);
3. development occurs at multiple, integrated levels of organisation (eg biological, psychological and social); and
4. the course of human development can be continually modified thus building resilience in the face of multiple risks and challenges.

At a conference held in Adelaide the following were stated as foundations for improving ways to address child sexual abuse in Aboriginal communities:

- the development of culturally appropriate ways of addressing child sexual abuse;
- services to help in the healing of trauma;
- addressing racism;
- negotiation with Aboriginal community members rather than consultation;
- the provision of allied services such as those for substance misuse; and
- informed debate about community responsibility for child welfare.

Many of these same matters were aired in an earlier investigative report by Coorey. The problems cited in Coorey’s investigation continue to be useful as a guide to specific areas to focus on within a coordinated, multi-agency approach to improving the safety and wellbeing.
of Aboriginal and Torres Strait Islander children particularly those living in remote communities.

The manner in which the process of change towards multi-agency collaboration is handled is, according to Hamblin, Keep and Ask (2001) cited in Horwath and Morrision, as important as any decisions about goals, governance or structures. This suggests that investing in nurturing relationships and building trusted networks is important. Community support and capacity building appears to be key to the success of multi-agency collaborative efforts.

Chaskin identifies four strategies through which capacity can be built: (1) leadership development; (2) organisation development; (3) community organisation and; (4) the fostering of collaborative relationships among institutions and organisations. It is worth stating that multi-agency collaboration may supplement existing community capacity-building investment in the APY Lands.

To date there is little evidence to support or refute the outcomes of multi-agency practices for clients, including child welfare clients. It is therefore imperative that any multi-agency initiatives undertaken on the APY Lands undergo a systematic, on-going and rigorous evaluation process.
Chapter 3 Evaluating Multi-Agency Collaborative Practice on the APY Lands

Recommendation 10 of the Mullighan report indicated the need for an evaluation of the success of a multidisciplinary team approach to the disclosure and detection of child sexual abuse. The following section outlines an evaluation framework for multi-agency collaborative practice on the APY Lands. As the timing of the present report was in advance of planning for new initiatives, the evaluation framework is general in nature with a focus on collaborative practice rather than on individual programs, although the concepts underpinning the framework are easily transferable to program evaluation.

Evaluation

While it is not the intention of this report to provide a review of evaluation procedures, it is necessary to define the purpose of evaluation and the terminology that is commonly used in the evaluation literature. The terms ‘Formative Evaluation’ and ‘Process Evaluation’ are commonly used when the purpose of an evaluation is to ascertain the perceived suitability of the mechanisms employed to deliver a program or service and can include investigation of elements such as collaboration, systems reforms and service integration. The terms ‘Summative Evaluation’ and ‘Outcome Evaluation’ are commonly used when the purpose of an evaluation is to ascertain the degree to which a program or service has achieved its intended effect (e.g., self-sufficient families, healthy children, children are ready for school). Friedman proposes that process and outcome can be thought of in terms of “effort” (how hard did we try?) and “effect” (is anyone better off?). He argues that in assessing effort and effect it is important to consider how much was done (quantity) and how well it was done (the quality of efforts and outcomes). Outcomes can be further defined in terms of short, medium and long term outcomes and also in terms of client, staff and agency outcomes. For the purposes of this evaluation framework, the terms process and outcome will be used in preference to formative and summative.
Evaluation in complex environments

Cohen and Kibel (1993) cited in Julian, Jones and Deyo\textsuperscript{55}, p334 argue that in complex natural environments, less emphasis should be given to questions relating to cause and effect, rather key evaluation questions are better defined in terms of “understanding the environment in which programs are implemented and tracking progress toward the achievement of specific program outcomes”. Julian et al\textsuperscript{55} propose an open systems model of evaluation that recognises that a wide range of coordinated strategies and programs are needed to address local community issues. Within this model individual interventions are viewed as one component of a broader strategy to solve community problems and outcomes of individual programs are considered relative to long term changes in community conditions or indicators of community conditions (impact resulting from the accumulation of outcomes).

Similarly, Solomon\textsuperscript{56} argues that in complex systems such as child and family welfare establishing a model of causation as a basis for outcome evaluation is inappropriate. In these types of environments the relationship between program inputs and outcomes is contingent upon prevailing social conditions or contexts. Therefore rather than pose the traditional evaluation question “do the program activities cause the expected outcomes?” it is more appropriate to ask: “will the causal model function in a given context or under a given set of conditions?” and, more specifically (1) “under what conditions do expected outcomes occur /not occur?” and (2) “based on these results should the theory be revised and the program modified?” \textsuperscript{57, p396}

Program Logic Model

A logic model is widely recognised as a useful evaluation tool that links issues, activities, outcomes and impacts. It provides a graphic representation of a program that illustrates the essential components and expected outcomes of the program and the logical relationship between them\textsuperscript{57}.

It is often recommended that a theory of change be incorporated as part of the logic model. A theory of change articulates “the underlying beliefs and assumptions that guide the
development and implementation of a strategy\textsuperscript{58}, p166. A logic model in which the theory of change is stated is helpful to program planners and evaluators because it\textsuperscript{58}:

- makes the assumptions underlying programs and strategies explicit;
- emphasises change as an iterative process as opposed to a static linear one; and
- ensures that stakeholders have a common understanding of how an issue is to be addressed, the reasons for selecting that particular strategy to address the issue and what the strategy expects to achieve.

These points are particularly salient in situations where stakeholders may conceptualise issues and responses to them differently, as is likely to be the case in multi-agency interventions and where multi-faceted initiatives are required to address a complex social issue\textsuperscript{58}. Development of a theory of change is likely to progress more rapidly where a history of inter-agency collaboration exists that has engendered a level of trust and mutual understanding among agency members\textsuperscript{58}.

Additionally, where contextual issues are likely to have a significant influence on the intended outcomes of a program, it is helpful to introduce context into the logic model. This enables program planners to identify possible facilitators and barriers to the implementation of the program and its intended outcomes. Importantly, context provides a background against which evaluation findings can be better understood.

The NSW government has recently proposed a logic model as a basis for a comprehensive evaluation of program initiatives tackling child sexual assault in Aboriginal communities in NSW. The model is shown in Appendix E and includes reference to the role of integrated service delivery in contributing to improved service outcomes for children and families. It is likely that future reports relating to the completed evaluation should provide a useful template for evaluations of similar initiatives planned for the APY Lands.

Figure 3.1 provides a suggested program logic model for multi-agency collaboration on the APY Lands.
Goal: To improve the disclosure and detection of child sexual abuse on the APY Lands

Theory/Assumption: Multi-agency collaboration will improve the disclosure and detection of child sexual abuse on the APY Lands

Strategy: Implement a multi-disciplinary team approach to disclose and detect child sexual abuse

Context: Factors existing in APY Lands that will impact upon the functioning of a Multi-Agency approach to the disclosure and detection of child sexual abuse (e.g. existing relationships, community attitudes and behaviours, distance, workforce retention)

Activities:
- Develop and implement Governance processes
- Formulate and agree new or revised processes, protocols, roles and responsibilities
- Enable capacity within each participating agency to respond to new processes
  - Funding
  - Sufficient staffing and retention of staff
  - Staff briefing/training on revised procedures and any new skills required
  - Infrastructure (e.g. electronic-notification program)
- Confirm all stakeholders are in agreement and committed to the new approach.

OUTCOMES
(Short or intermediate term results of activities)

Children and Families
- Improved satisfaction with agency responses to disclosure of child sexual abuse

Agencies
- Adoption of protocols and procedures by all agency members
- Improvements in information sharing and identification of children who have been sexually abused
- Evidence of more coordinated/multi agency responses to the detection of child sexual abuse
- Perceived improvement by agency members of agency capability to obtain and respond to disclosures of child sexual abuse

Community
- Increased trust and positive perceptions of services and willingness to engage with them
- Increased willingness to disclose child sexual abuse

System
- Improved workforce recruitment and retention
- Improved reporting and response to child sexual abuse
- Cost effective relative to alternative approaches

IMPLACNTS
(Long term changes in community conditions or indicators of community conditions)
- Improved well-being of children who have experienced child sexual abuse

Figure 3.1. APY Lands multi-agency program logic

Working Together: Multi-Agency Collaboration and Child Protection on the APY Lands
Participatory Action Research

It is suggested that a *participatory action research* model is best suited for the evaluation of multi-agency practice on the APY Lands\textsuperscript{59}. Participatory action research recognises the importance of engaging participants of new initiatives in the research process (rather than as “subjects” of research). Participants are those most invested in the initiative and are in the best position to reflect on the success of activities, to measure progress and where appropriate, to take action to change things.

This is particularly important in Aboriginal and Torres Strait Islander communities who have long been concerned about the means by which research is carried out in their communities by outsiders. Stanley et al\textsuperscript{10} cite the Stronger Families Learning Exchange as good example of efforts to develop a research partnership model built on training community development project teams (Aboriginal and Torres Strait Islander and non-Aboriginal and Torres Strait Islander) to plan and evaluate their work using the principles of action research. The authors also highlight the following statement in the guidelines established by the National Health and Medical Research Council:

“Members of the Aboriginal and Torres Strait Islander community being studied will be offered the opportunity to assist in the research and will be paid for the assistance and the funds to support that assistance are included in the research budget proposal. Specifically Aboriginal and Torres Strait Islander women, as advised by the community, will be involved when research deals with women’s or children’s health issues and the specific cultural and social needs of Aboriginal and Torres Strait Islander men will be similarly recognised” (National Health and Medical Research Council 1991: 6-8).

The process of action research is illustrated in Figure 3.2 below.
Figure 3.2. The Action Research Cycle
Evaluation Framework

Due to the timing of this report being in advance of planning for new initiatives on the Lands, the proposed framework for the evaluation of multi-agency collaboration on the APY Lands (refer Tables 3.1 and 3.2) is not specific to any APY Lands community, rather it is a generic framework that can be tailored to meet the needs of specific communities on the APY Lands. It is worth re-iterating that it is important that the results of any evaluation in a complex environment such as the APY Lands be interpreted within the context of that environment.

Process Evaluation

In the context of a proposed evaluation framework for multi-agency work on the APY Lands the aims of a process evaluation (refer Table 3.1) would be to determine:

- the extent to which collaborative processes have been implemented as intended;
- the extent to which processes are working as intended;
- the strengths and weaknesses of the Multi-agency approach; and
- the facilitators and barriers to collaborative practice.
Table 3.1. Proposed *process evaluation framework* for multi-agency practice on the APY Lands (what was done and how well was it done?)

<table>
<thead>
<tr>
<th>Evaluation Question 1: Have Governance processes been implemented as planned?</th>
<th>What was done?</th>
<th>How well was it done?</th>
<th>Measures (sources of data)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Have collaborators agreed on Governance structure?</td>
<td>Formal decision made and the agreed structure is documented (representation, decision-making etc)</td>
<td>Level of satisfaction with the structure</td>
<td>Signed agreement</td>
</tr>
</tbody>
</table>
| 2. Are systems in place to:  
  a. regularly monitor and record what is going on?  
  b. verify compliance with agreed policies?  
  c. provide for corrective action in cases where policies/protocols have been ignored or misconstrued? | Number and description of systems to:  
  o monitor/ record activities  
  o verify compliance with agreed policies/ protocols  
  o take corrective actions in cases where policies/ protocols have been ignored or misconstrued | % implemented | Documentation |

<table>
<thead>
<tr>
<th>Evaluation Question 2: Has the Multi-Agency approach been implemented as planned?</th>
<th>What was done?</th>
<th>How well was it done?</th>
<th>Measures (sources of data)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Are all processes and protocols in place?</td>
<td>Number and description of processes and protocols.</td>
<td>% of processes protocols and accountabilities in place</td>
<td>Documentation</td>
</tr>
<tr>
<td>4. Has the workforce been informed/consulted about processes and protocols?</td>
<td>Details of consultation, communication approach</td>
<td>% of agency members’ staff aware of revised processes and protocols</td>
<td>Documentation, Survey of staff</td>
</tr>
<tr>
<td>Evaluation question 3: Is the system of Governance working as planned?</td>
<td>What was done?</td>
<td>How well was it done?</td>
<td>Measures (sources of data)</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>8. Has the operation of the governance system been reviewed?</td>
<td>Annual internal discussion</td>
<td>% member’s positive feedback</td>
<td>Member feedback</td>
</tr>
<tr>
<td>9. Have activities been monitored and recorded?</td>
<td></td>
<td></td>
<td>Minutes of meetings</td>
</tr>
<tr>
<td>10. What corrective action has been taken to address cases where policies/protocols have been ignored or misconstrued?</td>
<td></td>
<td></td>
<td>Changes in policies and protocols</td>
</tr>
<tr>
<td>Evaluation question 4: Is the Multi-Agency process working as planned?</td>
<td>What was done?</td>
<td>How well was it?</td>
<td>Measures (sources of data)</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>
| 11. How well do staff understand their roles and those of other agency staff involved in the Multi-agency approach? | • Describe staff/agency roles | • % of staff who have a good understanding of their own and others roles | • Documentation/ case files  
• Interviews with agency staff |
| 12. What collaborative processes and practices are being used and how useful are they? | • Describe the collaborative processes/ practices being used by agency staff | • % of processes and practices deemed useful | • Multi-agency collaboration survey tool developed for use on the APY lands  
• Interviews with agency staff |
| 13. Are resources and procedures to support staff in their roles adequate and appropriate? | • Describe resources and procedures to support staff in their roles (eg staffing levels, supervision and support, administration procedures) | • Level of staff satisfaction with resources and procedures | |
| 14. What are the strengths and weaknesses of the Multi-Agency approach? (Examine in terms of the context of working in the APY Lands as well as more generally) | • How could the Multi-Agency approach be improved and strengthened?  
• What are the factors that support good working relationships between agencies?  
• What factors, if any, inhibit the effectiveness of working relationships between agencies?  
• How can working relationships between agencies be improved?  
• Do relationships support the disclosure and detection of child sexual abuse? | | • Interviews with agency staff  
• Interviews with community members |
Qualitative methodologies are most frequently used to meet the aims of process evaluations and are particularly valuable where resources are limited. The types of qualitative tools that may be used for a process evaluation include semi-structured interviews or focus groups with participating service providers. The number of interviews may be quite small, if funding is limited, however, they should reflect the experiences of all participating agencies. Discussion about what would constitute successful collaboration should precede the development of an interview schedule. The types of questions identified as part of the participatory process may include questions such as:

1. What collaborative activities have taken place?
2. Were these a part of the protocol or MOU?
3. How “successful” have these activities been?
4. What factors have helped collaborative efforts?
5. What has hindered collaboration?
6. Has collaboration changed relations between agencies participating in collaboration? In what ways?
7. Has collaboration improved the process of disclosure and detection of child sexual abuse, or made a difference for families and children more generally?

Information from interviews and focus groups may also be used to undertake a social network analysis, involving the development of a service map of multi-agency relationships. A precise mapping of relationships may more accurately reflect the extent of collaboration than is reported by service providers.

Quantitative methods can also contribute to a process evaluation, but may require more resources in terms of staff time and skills. One type of quantitative information relates to the outputs of collaborative practices, such as the number of meetings held or telephone consultations undertaken. This information may be obtained by asking agencies to keep statistics about such activities, although this adds to workload pressure. Some evaluators have successfully undertaken case file analyses to obtain this level of information.
A number of existing evaluation survey tools, amenable to quantitative analyses, are available that can be used or adapted for the purpose of providing more detailed information about the practice of collaboration. For example the Health, Research and Educational Trust (an American not-for profit organisation) has developed a short scale which aims to provide information about the strength of partnerships. Similarly, the multi-agency team checklist surveys factors relevant to the functioning of multi-agency teams. It should be noted that both tools provide information at a very broad level, reflecting the aggregate practices of partnerships or teams and are directed towards the measurement of inter and intra agency variables. Therefore, where possible, it is preferable to develop a survey tool that is specific to the context of collaboration practice on the APY lands and to the problem of child sexual abuse. Details of the above measures are provided in appendices F and G.
Outcome Evaluation

At this stage, the primary aim of an outcome evaluation of multi-agency practice on the APY Lands would be to ascertain if there have been improvements in the disclosure and detection of child sexual abuse (refer Table 3.2). It would be envisaged that improvements to the wellbeing of children and families who experience child sexual abuse will occur over the longer term and as part of a range of initiatives to address the problem.

Following the program logic, the short to intermediate outcomes can be examined at the level of the:

1. children and non-abusing carer/s;
   a. improved satisfaction with response to the disclosure of child sexual abuse
2. agency;
   a. improvements in information sharing
   b. evidence of a more coordinated response to the disclosure of child sexual abuse
   c. staff satisfaction with the multi-agency process
3. community;
   a. increase in trust and positive perceptions of services/agencies and willingness to engage with them
   b. increased willingness to disclose/report child sexual abuse
4. system;
   a. improvements in workforce recruitment and retention
   b. improvement in the reporting and response to child sexual abuse
   c. cost effectiveness of the Multi-agency approach to child sexual abuse relative to alternative approaches

It is important to take into account the complexity of the APY Lands when measuring progress towards achieving these outcomes. Although referred to as short to medium term, in reality it may take a number of years of continuous evaluation feedback and program refinement to achieve the desired outcomes. Initial outcome evaluations may more realistically be directed toward Agency outcomes as a first step.
Table 3.2. Proposed outcome evaluation framework for multi-agency practice on the APY Lands: (Is anyone better off?)

<table>
<thead>
<tr>
<th>Evaluation question 5: What have been the Agency level outcomes?</th>
<th>What could be measured?</th>
<th>Sources of data</th>
</tr>
</thead>
</table>
| 15. Have there been improvements in information sharing?     | • Increase in the number (and per cent) of cases that have involved information sharing.  
• Staff perceptions of changes in agencies’ capabilities to receive disclosures and detect child sexual abuse | • Log of cases before and after changes  
• Case studies to illustrate new processes  
• Interviews with team members (contrast with experience with previous service delivery) |
| 16. Is there evidence of a more coordinated response to the detection of child sexual abuse? | • The number of cases (and percentage) in which multiple agencies have worked together to respond to disclosures/detection of CSA  
• Collaborative culture  
• Increases in cases resolved in a timely manner and in the best interests of the child  
• Initial increase in child sexual abuse disclosures (Disclosures of sexual abuse are likely to continue to increase in the absence of any other preventative efforts) | • Log of cases before and after changes  
• Case studies to illustrate new processes  
• Staff interviews  
• Multi-agency collaboration survey tool developed for use on the APY lands |
| 17. How satisfied are agency members with the multidisciplinary approach? | • % of staff satisfied with the program  
• % (workload ratio, staff turnover, staff morale)  
• What aspects of the program are staff most satisfied with? What areas would they identify as needing improvement? What are their suggestions for these improvements? | • Interviews  
• Human resources documents (e.g., sick leave, turnover) |
<table>
<thead>
<tr>
<th>Evaluation question 6: What are the outcomes for children and families?</th>
<th>What could be measured?</th>
<th>Sources of data</th>
</tr>
</thead>
</table>
| 18. How satisfied are children and families with the multi-agency approach? | • Children and families willingness to engage with services, proceed with legal action, etc  
• Children and families perceptions of investigation processes | Comparison of case file data over time  
Interviews with non-abusive carers and children (caution should be taken in deciding whether it is appropriate to interview a child as the child is highly likely to be re-traumatised) |
| 19. Does the multi-agency approach eliminate redundancy in interviewing and investigation? | • Number of interviews and other investigative processes undertaken per case | Case file data |
| 20. Has there been an increase in cases resolved in a timely manner and in the best interests of the child? | • Increases in cases resolved in a timely manner and in the best interests of the child | Case file data  
Agency data |
| Evaluation question 7: What are the outcomes for community members? | What could be measured? | Measures (sources of data) |
| 21. Has there been an increase in trust and positive perceptions by community members of services and willingness to engage with them? | • Changes in children and families perceptions of services | • Service data  
• Interviews with community members  
• Services staff interviews |
| 22. Has there been increased willingness by community members to disclose child sexual abuse? | • Changes in the number of disclosures of child sexual abuse by members of the community | • Child protection data  
• Case files  
• Interviews with community members |
<table>
<thead>
<tr>
<th>Evaluation question 8: What are the systems outcomes?</th>
<th>What could be measured?</th>
<th>Measures (sources of data)</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. Have there been improvements in workforce recruitment and retention?</td>
<td>• Changes in staff retention, length of service, turnover, sick leave, time taken to recruit staff</td>
<td>Human resources data</td>
</tr>
</tbody>
</table>
| 24. Has there been an improvement in the reporting and response to child sexual abuse? | • Percentage change over time in  
  - Number of notifications  
  - Number of re-notifications  
  - Number of substantiations  
  - Number of briefs proceeding to prosecution (reasons for briefs not proceeding)  
  - Number of prosecutions  
  - Referrals to health services and other relevant services | Case files  
  • Agency data |
| 25. Are the costs of the program yielding significantly greater benefits to the community when compared with other alternatives? | This would require the services of a health economist | |
Indicators will be determined by the objectives and outcomes specified in the logic model. When considering outcome indicators it is important to recognise that statistics relevant to improvements in the detection and disclosure of child sexual abuse, such as notification and substantiation rates, can not be directly attributed to collaborative activities. For these reasons, administrative data should be supplemented by other forms of outcome measurement. For example, linking administrative data held by Nganampa, Families SA, Police and DECS may prove useful for on-going monitoring of the wellbeing, development and health of children on the Lands.


Data collected in the process of outcome evaluation provides baseline measures against which to measure progress towards desired outcomes over time. Existing data sources (eg, case files, service data, administrative and human resources data) should be identified and surveys and other data collection tools developed where needed (eg staff and client surveys).

Short-term outcomes of new services may be measured using client satisfaction scales. For example, Jones et al. assessed caregiver satisfaction when evaluating the success of Children’s Advocacy Centres (CAC’s) in the USA. The 14 item Investigation Satisfaction Scale used in Jones et al.’s study is a potential model for the development of similar instruments for use on the APY lands (with appropriate acknowledgement). The study also used a purpose developed measure of children’s satisfaction with investigative services, for older children and adolescents. Adaptation of the scales should reflect the specific elements of new initiatives that may be expected to make a difference for children and families. Traditional methodologies such as the use of self-administered questionnaires may need to
be modified to suit the context of the APY Lands and will require consultation with service providers and members of the Indigenous communities.

Client satisfaction scales should always be considered as just one component of a comprehensive evaluation. Evidence of positive satisfaction, on its own, is not sufficient to establish whether a service is effective. There may be factors other than the service itself which influence feedback from clients. It is also important to consider that satisfaction and service usage are inter-related, such that clients who are satisfied are more likely to make use of services and conversely, those that are not satisfied are more likely to not attend services.

The most common methodology used to complete a comprehensive evaluation of longer-term efficacy of new services, is to undertake repeated administration of standarised measures of child and family wellbeing. There are a wide range of standardised tests available however most have been developed in America. For example, the parent-report Child Behavior Checklist (CBCL) internalizing subscale, measuring children’s emotional and behavioural symptoms was used in Jones et al’s evaluation of CAS’s. The following non-standardised, generic measures of family wellbeing may help to inform the development of an appropriate measure of changes in family-wellbeing on the APY Lands over time.

1. The wellbeing indicators used in the Longitudinal Survey of Australian Children, which can be accessed through the following link:
   
   Social Policy Research Paper Number 30 (FaHCSIA)
   

2. There is also the strengths and stressors tracking device which might also be useful for the clinicians:
   

3. The WA Aboriginal Child Health Survey provides a range of Aboriginal family functioning/ wellbeing items:
   
A review of the WA Aboriginal Child Health Survey and other measures of Aboriginal family functioning can be found at the Australian Family Relationships Clearinghouse.


The Baseline Community Profiles of APY Lands, to be compiled on behalf of the Department of Housing, Community Services and Indigenous Affairs (FaHCSIA), may provide some useful contextual information about families in the APY Lands – social determinants of health – eg, employment, education, nutrition as well as some family violence - to ascertain the long term impact of Multi-agency work on child wellbeing.

**Conclusion**

The following points can be drawn from the above discussion that are of relevance to an evaluation of multi-agency practice on the APY Lands:

- Planning for evaluation begins with the development of a program logic model ideally incorporating the theory of change and, in complex environments, the contextual factors that are likely to influence implementation and outcomes.
- A program logic model ensures shared understanding of the issue to be addressed, the reasons underlying the choice of strategy to address an issue, how the strategy will be delivered and the expected outcomes. Logic models should be developed and agreed upon by the agencies and stakeholders involved.
- The purpose of the evaluation will determine whether a process evaluation or an outcome evaluation is to be undertaken.
- Participatory action research methodology reflects the iterative process of bringing about change and acknowledges the role of all stakeholders in the process. It is recommended as the appropriate methodology for evaluating multi-agency practice.
- Indicators will be determined by the objectives and outcomes specified in the logic model.
• Data collection methods will be determined by resources, however it is important that a mix of methodologies be used including interviews, checklists, case file analysis and data mining.

It is recommended that process evaluation be undertaken within the first twelve months of implementation focusing on improvement. An outcome evaluation would be best positioned to take place after this time. It is suggested that a comprehensive outcome evaluation of any new initiatives on the APY Lands is undertaken by an independent consultant. Any evaluation of new collaborative practices would require the formal agreement of all agencies involved and submission of proposals through the appropriate ethical bodies (such as the Department of Families and Communities’ Research Ethics Committee).
References


34. Scott D. Inter-agency collaboration: Why is it so difficult? Can we do it better? Children Australia 1993;18:4-9.


77. Scott D. "Think child, think family": How adult specialist services can support children at risk of abuse and neglect. *Family Matters* 2009;81:37-42.


Appendix A: Government responses to child sexual abuse in Indigenous communities

In recent years, a number of reports have been produced in response to concerns about child sexual abuse in Aboriginal communities across Australia. These reports highlight the significance of the problem of child sexual abuse both in scope, nature and impact and consistently highlight the need for coordinated responses to child sexual abuse (and other forms of child abuse and neglect) which involve communities in their design and implementation. These documents also call more broadly for enhanced prevention efforts, including the need for multi-agency working.

In New South Wales the Aboriginal Child Sexual Assault Taskforce (ACSAT) report “Breaking the Silence: Creating the Future – Addressing Child Sexual Assault in Aboriginal Communities in NSW” was released in July 2006. The Taskforce was established in response to Roundtables on sexual violence in Aboriginal communities conducted in 2001 and 2002. This report noted the results of community consultations that described child sexual abuse as a “huge issue” in New South Wales. It documented the responses of a range of agencies to this problem and described a range of alternative strategies for addressing child sexual abuse in Aboriginal communities. The need for increased inter-agency collaboration was highlighted in the report and this formed a major focus of the Government’s response detailed in the “NSW Interagency Plan to Tackle Child Sexual Assault in Aboriginal Communities 2006-2011”. This plan was based upon the recommendations from the ACSAT report and includes a range of community engagement and inter-agency strategies to tackle child sexual abuse. The results logic and details of the plan can be found in Appendix F. An evaluation of these strategies is currently being commissioned for nine communities in NSW.

In 2007 the “Ampe Akelyernemane Meke Mekarle – Little Children are Sacred” report of the Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse was released. This report carried very similar findings to that of the NSW ACSAT report highlighting the difficulties of service delivery in remote communities and reviewed other multi-agency responses to child sexual abuse. It is also worth noting that the Northern Territory report highlights the lack of evaluation of inter-sectoral initiatives responding to child sexual abuse.

These reports and the subsequent responses to them, have suggested a number of approaches to improve community-focused multi-agency responses to child sexual abuse in Aboriginal communities including joint Investigative Response Teams (JIRTs) and Community Safety Plans. JIRTs involve coordinated approaches from child welfare agencies, police and health professionals.
Such teams have been operating in NSW since 1994 and which have since undergone evaluation and modification.

In 2003 a comprehensive review of the South Australian child protection system was undertaken by Robyn Layton QC, documented in a report titled “Our best investment: A state plan to protect and advance the interests of children”. The Layton report highlighted socio-economic disadvantages that impact on the incidence of child abuse and neglect. It included a chapter focusing on Indigenous children and young people and described the situation on the APY Lands as being “dire”. It recommended that a minimum of 20% of all reform initiatives should be directed to Indigenous children and their families and specifically recommended better sharing of information between government departments in relation to child protection.

In response to the Layton report, the South Australian Government released the “Keeping Them Safe” program to reform child protection services and systems in this state. Collaborative relationships were identified as an important reform priority with a government commitment to build and strengthen partnerships with children and young people, parents and carers, non-government agencies, local Government, Commonwealth Government and the private sector. The Keeping Them Safe reform identified the need for agencies to work across boundaries in the best interests of children and young people, arguing for strong and accountable links between services, portfolios and sectors. Additional funding for the program led to the identification of a number of new priorities, including a renewed commitment to develop effective and culturally appropriate responses to Aboriginal children and young people. Consultations with key stakeholders stressed the importance of agencies working together with Aboriginal communities to implement child protection measures. This new direction renewed commitment to ensuring better connected care for children, through integrated care teams. Consultation showed strong support for a ‘Care Team’ approach.
Appendix B: Forms of multi-agency collaboration

The descriptions of various forms of multi-agency collaboration in the literature appear to relate to differences in the dominant institutional contexts of particular countries. The Every Child Matters website of the UK department for children, schools and families suggests that there are three broad models for delivering services:

- **multi-agency panels** – have a coordinator/chair, membership is a mixture of relevant practitioners who remain employees of their specific agency who meet regularly (or in response to demand) - panel may be supported by a team of key workers who carry out the case and administrative work - focus of practice is often the provision of individual support - assessment and information may be shared.

- **multi-agency teams** – have a dedicated leader, membership is a mixture of relevant practitioners - members are recruited or seconded into team - work is done at individual, group and community levels - often have a shared base and meet regularly.

- **integrated services** – are provided by a range of services with a shared philosophy that are co-located usually in a school - appear cohesive and visible to users - share a management structure - are funded by partner providers - coordinate the work of staff - are covered by an agreement establishing the relationship between the home agency and the multi-agency service.

US examples of multi-agency relationships are described by Layalants and Epstein as:

1. **Treatment Teams**: A group of treatment experts collaborate on the diagnosis and ‘treatment’ of the child or family. This group of service providers shares responsibility with Child Protection Services (CPS) workers for case assessment, diagnosis, treatment, plan development, referral to treatment resources and case follow-up.

2. **Case Consultation Teams**: A group of experts collectively provide opinions and advice regarding child protection cases. The team reviews cases in terms of case management and diagnosis and serves in an advisory capacity to primary case-workers regarding treatment planning and critical decisions. The team also provides technical assistance and support to service providers.
3. **Resource Development or Community Action Teams:** A group of service agency representatives, professional service providers, child advocates and citizens collectively work on local problems associated with child abuse and neglect. On-going planning, coordination of services, community needs, community education and awareness are addressed.

4. **Mixed Model Team:** The combination of two or more of the team functions by a single team or two or more teams with different functions working in a central coordination mechanism.

Some of the common US responses to child sexual abuse are:

- **Multidisciplinary Interview Centres.** Police detectives, Child Protection Service investigators and Assistant District Attorneys meet to interview child victims and to develop pre- and post-interview strategies to coordinate the legal management of child sexual abuse cases.

- **Traditional Hospital-Based and Community-Based Child Abuse Teams.** These review all types of maltreatment in a hospital or local community.

- **Child Advocacy Centres.** These are independent, multidisciplinary programs that aim to facilitate joint investigations of reported child abuse, reduce the trauma of repeated victim interviews and provide child-friendly environments and therapy for victims. Professionals are co-located in a facility and either one of the participating agencies or an independent non-profit organisation administers the team.
Appendix C: Sources of tension arising from inter-agency collaboration

Inter-organisational factors

Cultural differences between organisations

Inter-organisational factors relate both to structural characteristics of the agencies involved in the collaborative process, as well as other more contextual factors that may reflect history of past relationships. Some agencies have historically been based upon providing services to one individual (child or adult) based on one aspect of their needs. It is often the case, however, that individual agencies have families in common. This is especially likely in child sexual abuse cases. A disclosure may be made to a practitioner from one service, other services take responsibility for investigation and court proceedings (if applicable) and children and families may then be referred to additional services for treatment and support.

Jeffreys et al. identify the different timescales which influence agencies’ practice. They give the example of workers in the substance abuse field who view substance abuse as a chronic problem, potentially requiring many years for an individual to relinquish. Relapse is judged to be likely and a situation that must be planned for as part of the journey towards recovery. In contrast, child protection workers are focused on the child’s needs which are immediate and cannot be put ‘on hold’ while adults struggle with their drug and alcohol problems. Tensions can arise, when there is a perceived lack of knowledge or understanding on the part of workers from different agencies of the legal and statutory obligations constraining child protection workers. In their study of interagency collaboration between child protection and mental health services, Darlington, Feeney and Rixson found that child protection workers were frustrated when mental health workers did not understand their overriding obligation to act on a child’s behalf when parent and child needs conflicted.

In the above examples, solutions may be identified which can reduce the extent of tension between agencies. First and foremost is the need for agencies to subscribe to a shared vision of what is to be achieved. This shared vision would require the specification of desired outcomes for children and families, identification of common goals and strategic objectives and an acceptance that problems are jointly owned and therefore must be jointly addressed. Collaboration could be facilitated by the use of a common framework such as a family-centred approach.

Allen and Petr define the features of family-centred practice as: (1) having the family as the unit of attention, (2) allowing the family to participate in decision making and providing opportunities...
for informed choices to be made by the family, (3) having a focus on family strengths including cultural diversity.

The first element emphasises the need for service agencies that have traditionally focused on the individual to instead ‘think family’ \(^{77}\). This makes particular sense when considering that child welfare agencies and substance abuse treatment services are often seeing the same families \(^{73}\). The second element targets the historical tendency of service providers to make decisions on behalf of clients potentially undermining parental authority and responsibility \(^{78}\). The third element is also linked to family participation by recognising the unhelpfulness of ‘blaming’ and the value of using family strengths when problem-solving. The importance of including families is particularly important for Aboriginal families who may have experienced only interventions that ‘do to’ rather than those that ‘do with’ or ‘do for’ \(^{79}\). The need to embrace diversity and to be sensitive to cultural context is a core theme underlying family centred practice.

Walter and Petr \(^{78}\) present a rationale for the adoption of a family centred philosophy as a core values base for inter-agency collaboration, to create the notion of ‘family-centred multi-agency collaboration’. It is important to note that commitment to a shared goal should happen at both strategic and procedural levels \(^{32,74,80}\).

**Differences in procedures/ protocols**

Differences between agencies regarding confidentiality policies and practices or processes for gaining consent relating to the sharing of information can lead to difficulties in communication between agencies which may impede collaborative practice \(^{32}\). Difficulties can also occur when workers perceive a lack of understanding of the legal or other constraints impacting upon their work. This can be a particular problem if workers are not trained in the child protection policies and procedures, have different beliefs about the nature of child abuse and neglect or have different views about the value or interpretation of confidentiality \(^{45,81}\). While it is desirable for workers to learn about the policies of another agency through joint training exercises, it is even more desirable that systems, protocols and procedures be jointly developed to establish shared understandings and commitments to multi-agency working \(^{82,83}\). Such new policies need to be well documented, supported by further training and have clear mechanisms for review \(^{84,85}\).

The South Australian Information Sharing Guidelines for Promoting the Safety and Wellbeing of Children, Young People and their Families \(^{18}\) is a formal protocol guiding all service providers in appropriate information-sharing practice. They summarise legal and practical issues to be considered in the context of consent.
There is some evidence for the value of having clearly defined procedures in place to improve the identification and management of child abuse and neglect. Structured forms, screening checklists and simple flow diagrams have been associated with improvements in the recording of child protection issues and in raising awareness of such issues among workers from agencies other than statutory authorities. A recent evaluation of the NSW Inter-agency Guidelines for Child Protection Intervention was unable to determine whether the guidelines contributed to better inter-agency collaboration. It appeared, however, that workers unfamiliar with the guidelines were less clear about their own and others’ roles and responsibilities in relation to child abuse and were more likely to be dissatisfied with the collaborative process.

**Competition for funding/resources**

Working together can come at a cost for some agencies. Hudson points out that participation in collaborative activity requires a loss of freedom to act independently, as well as an investment of valuable resources (including staff time). Shared responsibility and decision-making may be undermined if a more powerful agency or an agency with greater perceived status takes a ‘lead’ role in a partnership, or has control over funding. Competition for funding can be a source of tension between agencies and can inhibit collaborative practice. At an operational level, strategies to conserve scarce resources may lead to ‘gate-keeping’, whereby agencies resist referrals from other organisations, particularly if matters are ‘resource hungry’ or demanding of staff. Tensions between agencies may also be exacerbated if limited resources mean that one agency cannot respond to all the referrals it may receive. Families SA, for example, ‘triage’ the large number of notifications received as a consequence of mandatory reporting, to ensure that staff only respond to cases judged to require legal intervention. Other service providers may feel frustrated by this perceived inability to protect a child. A lack of feedback to notifiers about the progress and outcomes of investigations has been highlighted in many reports as contributing to feelings of frustration and helplessness. It has been suggested that opening such channels of communication regarding notifications is particularly important if there are issues of safety or reprisal for notifiers.

It is important for agencies to be aware of the potential for conflict arising from structural inter-agency sources. Joint training exercises involving face-to-face contact between workers has been strongly recommended as a way of facilitating better understanding and reducing tension between agencies. It is extremely important for the success of multi-agency collaborative efforts that there...
be a positive regard and mutual respect between workers from different agencies and a commitment to move beyond the past if there is a history of negative interactions.

Multi-agency collaboration can be facilitated by drawing a network map of the organisations involved when targeting child sexual abuse. Answers to the following questions highlight factors underpinning inter-organisational dynamics thus enabling greater understanding of why conflict may happen.

- Who do the organisations define as being the primary client?
- On what aspects of the primary client is each agency focused?
- Which organisations are more dependent on others (e.g., for funding, information, or referrals)?
- Which organisations have more power than others?
- Which organisations are competitors (e.g., for funding or clients)?
- Which organisations have overlapping mandates or roles?
Summary of Inter-Agency Tensions and Possible Solutions

<table>
<thead>
<tr>
<th>Inter-Agency Tensions</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Cultural’ differences between organisations:</td>
<td>Shared vision/goals and joint ownership of the problem at strategic and procedural levels</td>
</tr>
<tr>
<td>• Who is the client?</td>
<td>• ‘Think child, think family’ framework</td>
</tr>
<tr>
<td>• Timeframes of intervention</td>
<td></td>
</tr>
<tr>
<td>Differences in procedures, policies &amp; protocols:</td>
<td>Shared procedures/protocols &amp; mechanisms for review</td>
</tr>
<tr>
<td>• Confidentiality, consent</td>
<td>• Information sharing guidelines</td>
</tr>
<tr>
<td>• Lack of knowledge/understanding of legal constraints</td>
<td>• Referral guidelines</td>
</tr>
<tr>
<td>Competition for funding/ resources:</td>
<td>• Structured forms and checklists</td>
</tr>
<tr>
<td>• Agency power/status</td>
<td></td>
</tr>
<tr>
<td>• ‘Gate-keeping’ or referral thresholds</td>
<td>Network mapping</td>
</tr>
<tr>
<td></td>
<td>Inter-agency training</td>
</tr>
<tr>
<td></td>
<td>Pooled/joint funding</td>
</tr>
</tbody>
</table>

Intra-organisational factors

Intra-organisational tensions are those that arise from factors that are internal to each organisational partner in collaborative endeavours.

Successful multi-agency relationships require strong commitment from management and also workers. Individuals need to be willing to work together and need to be supported by strong leadership which champions the value of collaborative working. Leadership can be at the level of a multi-agency steering committee or management group or by having a key position responsible for liaison within an organisation or having a chosen leader or coordinator for a specific partnership. It is extremely important that commitment from the management of individual organisations translates into adequate resourcing. Front-line workers who are experiencing time pressure when dealing with urgent or core work will be reluctant to commit to the added stress of undertaking collaborative activities. Resourcing should involve the provision of adequate and available funds (preferably equally shared by all organisations in a partnership); appropriate staff allocation, including administrative support; and ensuring that time is made available for staff to attend training sessions, develop and sustain relationships and to participate in collaborative activities such as case meetings.
It is important to be aware of the potential for organisational sub-cultures to use tension to ‘bond’ internal teams, making another organisation into ‘the common enemy’\textsuperscript{35,37}. The best way to manage internal systems dysfunction is at the leadership level, as strong leadership is needed to combat ‘scapegoating’ of other organisations and to put in place other means of generating cohesion. Formal mediation may also have a role to play if inter-organisational discord is entrenched. At a procedural level joint training exercises and successful interactions with individuals from other organisations may also help to dispel negative perceptions. The importance of a positive organisational climate for supporting service providers in work with children and families has been highlighted by research undertaken by Glisson and Hemmelgarn\textsuperscript{90}. These authors found agencies with higher levels of job satisfaction, fairness, role clarity, cooperation and personalisation, together with lower levels of role overload, conflict and emotional exhaustion contributed to improved service delivery and better outcomes for children and families.

There is value in an organisational commitment to evidence-based practice ie, practice which has been shown to be effective in this or other settings for enhancing intra-organisational functioning (as well as individual confidence).

**Summary of Intra-Organisational Tensions and Possible Solutions**

<table>
<thead>
<tr>
<th>Intra-Organisational Tensions</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>The use of tension to bond internal teams against an ‘external enemy’</td>
<td>Strong leadership</td>
</tr>
<tr>
<td>Negative organisational climate</td>
<td>Mediation</td>
</tr>
<tr>
<td>Lack of support at strategic level</td>
<td>Shared commitment from management and front-line workers</td>
</tr>
<tr>
<td>Lack of support at operational level</td>
<td>Adequate resourcing (funding, staff allocation and administrative support)</td>
</tr>
</tbody>
</table>

**Inter-professional factors**

Responsibility for the response to child abuse is typically shared between three professional groups: doctors who provide a paediatric forensic medical evaluation; police officers who evaluate whether
a criminal offence has taken place and whether charges should be laid; and protective workers who identify whether a child is in need of care and protection and whether legal intervention is needed. Others such as health, education and family support services may support children and their families throughout the process of disclosure/detection and the response to child sexual abuse.

Ideally, members of a multi-professional team accept and respect the different skill sets that each brings. In preparation for professional practice students are not often provided with information about the roles or ‘mindsets’ of practitioners in other disciplines. This can lead to problems if one member of a team tries to force others to ‘fit in’ with one set of professional practices and procedures. Principles of collaborative practice, with a particular emphasis on the understanding and acceptance of different ways of working, should be an important part of in-service training programs. Intra-agency and inter-agency training across professional boundaries can also help to break down the barrier of ‘professionalism’.

Inter-professional tension may also be a consequence of subtle differences in styles of communication or decision-making, arising from the application of different knowledge bases. Different perspectives may lead to different tolerances of risk in child protection cases, or in an expectation of how much or what information should be shared with others. Scott, Lindsay and Jackson in a study of child protection case conferences, found health professionals to be more cautious than social welfare professionals about interpretation and speculation, while police officers found the non-directive and consensus-seeking culture of human services to be bewildering and frustrating. While, to some extent, such differences are to be expected, Hudson suggests that it is the scale and intensity of ‘disagreement’ that is most important in determining the success of inter-professional relations. Recognising and openly acknowledging differences is important.

Tensions may arise from differences in perceived status between professions, differences that may relate in part to work requirements for statutory or non-statutory involvement, or voluntary or non-voluntary involvement of clients. Higher status may be afforded on the basis of types of tasks undertaken by some workers, such as those that undertake therapy in contrast to those that provide concrete or material services to families. This may also lead to resentment on the part of those who spend more time with families but who may not have the same decision-making power in case meetings. Service providers in the field of child protection more generally, often have to contend with negative perceptions by others which may lead to feelings of resentment and marginalisation. High turn-over in human services and the difficulties of recruiting staff to work in remote areas may also prevent the development of trusting and effective inter-professional and
multi-agency relationships. This highlights the need for multi-agency relationships to be both formal and informal as they will need to outlast the staff who may be involved at any one time (this is discussed in more detail in the next section).

Summary of Inter-Professional Tensions and Possible Solutions

<table>
<thead>
<tr>
<th>Inter-professional tensions</th>
<th>Possible solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Professionism’:</td>
<td>Acknowledging differences/ valuing diversity</td>
</tr>
<tr>
<td>• Can lock workers in to one set of ideas and procedures</td>
<td>Training about working in a multidisciplinary team</td>
</tr>
<tr>
<td>• Different ways of communicating/ styles of decision-making</td>
<td>Inter-agency training</td>
</tr>
<tr>
<td>Professional hierarchies</td>
<td></td>
</tr>
<tr>
<td>Availability and continuity of service providers</td>
<td></td>
</tr>
</tbody>
</table>

Interpersonal factors

Tomison tracked the collaborative process for children in the child protection system in Victoria. He found that, despite the presence of formal procedures and systems for information sharing, most collaboration between professionals was undertaken at the informal level. That is, the informal contacts developed between workers were more important than formal pathways of communication. The success of collaborative practice, therefore, can be dependent on the quality of inter-personal relationships between professionals.

Reder and Duncan stress the importance of having a ‘communication mindset’. They advocate the need for training in communication skills including sharing information (eg via case notes and telephone messages), planning for encounters and of understanding the broader context of meetings and the potential for information to be misunderstood. Skills training should supplement supervision or mentoring to ensure that communication is of a high standard.

Inter-personal tensions are a particular concern in smaller rural or remote regional settings, where the personal and social life of service providers may overlap with professional and organisational networks (Scott, in press). Previous relationships, if positive, can facilitate collaboration but relationships that are strained will significantly impede the collaborative process. Such problems
need to be addressed directly within a supervisory relationship or may require the services of an external mediator.  

It is important to acknowledge the possible role of client families in feeding interpersonal conflict as families may provide selective information to various professionals who, as a result, may see only part of the picture.  Workers who side with family member or who unite with families against workers from another agency (ie the ‘common enemy’) will weaken collaborative relationships.  A ‘Think child, think family’ framework may bypass the potential to advocate for one family member (the client) ahead of the needs of others in the family. It is also important that processes to check shared understandings amongst service providers are in place during meetings.

**Summary of Interpersonal Tensions and Possible Solutions**

<table>
<thead>
<tr>
<th>Interpersonal tensions</th>
<th>Possible solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor communication (misattribution of meaning)</td>
<td>‘Communication mindset’</td>
</tr>
<tr>
<td>When personal/social difficulties intrude into professional situations</td>
<td>Communication skills training &amp; supervision</td>
</tr>
<tr>
<td>Families feeding discord between workers and agencies</td>
<td>Mediation</td>
</tr>
<tr>
<td></td>
<td>‘Think child, think family’ framework</td>
</tr>
<tr>
<td></td>
<td>Monitor mutual understanding (face-to-face contact)</td>
</tr>
<tr>
<td></td>
<td>Importance of the chairperson</td>
</tr>
</tbody>
</table>

**Intra-personal factors**

Any collaborative relationship is dependent on the characteristics of the people working together. The process of assessing and responding to child maltreatment is typically characterised by strong emotions, particularly anxiety. Strong emotions can interfere with objective thinking and contribute to the presence of interpersonal conflict. Conflict has been found to be most pronounced in situations where service providers felt impotent to protect a child. In such situations there may be an increased tendency to blame others, either as individuals or as an
organisation, for a failure to act. Campbell describes a number of secondary gains arising from intra-personal tensions and from the perpetuation of such tensions, including:

- lack of closure or progress can be attributed to someone else;
- preserves areas of expertise;
- internal bonding (identifying other as ‘the enemy’);
- deflects attention from lack of resources, performance and knowledge; and
- reinforces a personal sense of competence.

Prolonged tension can be damaging for the success of collaborative partnerships. To prevent such negative impacts it is necessary to acknowledge the presence of anxiety, the ways in which it may influence interactions and the longer term consequences for partnerships and families. It is especially important in the field of child welfare that good policies and procedures towards staff care are in place. In particular, high quality and supportive supervision should be readily available to all staff.

As in all relationships, the ways that individuals relate to others in collaborative partnerships may be influenced by their past experiences, as well as their attitudes, beliefs or prejudices. A lack of confidence in skills or knowledge may also prevent an individual from participating equally in the relationship. It is important that members of a multidisciplinary team should be chosen for their positive personal attributes. Foremost is a commitment to collaboration, but it is also necessary that individuals respect and value the different contributions that others may bring (ARACY, 2007; Individually chosen to work in a team also need to be able to successfully negotiate the intra-personal tensions that may arise from feelings of divided loyalty. This may be exacerbated if lines of management are unclear. Loyalty to the team and feelings of mutual trust take time to develop and may be facilitated by shared training or team building activities.

Final mention should be made of the high potential for those workers for whom a significant portion of work is the uncovering of difficult stories relating to the abuse of children, to feel isolated and experience high levels of stress. This can lead to ‘burnout’ a factor contributing to the high turnover of staff in statutory agencies and remote areas more specifically. Regular staff turnover coupled with the appointment of inexperienced or newly qualified replacement staff, has been highlighted as a significant factor contributing to problems in collaborative working and the provision of services to families and children.
## Summary of Intra-Personal Tensions and Possible Solutions

<table>
<thead>
<tr>
<th>Intra-Personal Tensions</th>
<th>Possible Solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underlying anxieties:</td>
<td>Acknowledge anxieties, recognise possible secondary gains</td>
</tr>
<tr>
<td>• Displaced anger/frustration</td>
<td>High quality supervision/ support</td>
</tr>
<tr>
<td>• Lack of knowledge or confidence</td>
<td>Select staff for personal qualities:</td>
</tr>
<tr>
<td>• Secondary gains</td>
<td>• Commitment to collaboration</td>
</tr>
<tr>
<td>Negative attitudes:</td>
<td>• Respect for others</td>
</tr>
<tr>
<td>• Past experience</td>
<td>• Communication skills</td>
</tr>
<tr>
<td>• Stereotypes</td>
<td>Clear lines of responsibility</td>
</tr>
<tr>
<td>Divided loyalties</td>
<td>Team building activities</td>
</tr>
<tr>
<td>Job stress</td>
<td></td>
</tr>
</tbody>
</table>

Working Together: Multi-Agency Collaboration and Child Protection on the APY Lands
Appendix D: Survey tool

From: Towards Collaboration: A resource guide for child protection and family violence services 47

T3 Goals and objectives

Collaboration works best when the intended outcomes and the strategies for achieving them are clearly defined and agreed. It is important that there are specific and limited aims. Projects with general aims such as ‘to cooperate’ do not produce tangible outcomes. It is also important that there is a ‘win’ for all the partners. Following are the agency characteristics, which assist collaboration:

- The need to be conscious of each other’s basis for involvement. For example, community involvement is not gained just through committee meetings, but by joint projects.
- The need for time to establish trust through forums and networks.
- The need for a culture which encourages taking risks and innovation.
- The need for networkers—people who can make the connections.
- The need to develop solutions to address common issues e.g. unmet needs.

Following is a set of statements which will assist when developing collaboration. Score your current position on each continuum:

There is shared recognition that collaboration is needed.

1 2 3 4 5

There is a mandate from government.

1 2 3 4 5

Formal structures exist at a central level and informal networks at a local level.

1 2 3 4 5

There is a shared philosophy of intervention—including a shared value base.

1 2 3 4 5
Organisational policies and procedures to support collaboration are in place.

Multi-agency training is used as a catalyst for collaboration, as well as to generate collaborative skills.

A wide range of appropriate services is/will be a result of the collaboration.

Appropriate quality assurance of processes are/will be engaged in as part of the collaboration.

There is/will be appropriate "staff care" for workers on the ground.
Appendix E: Guidelines for Inter-agency Approach

Interagency guidelines for child protection intervention revised 2005

Interagency approach in practice

<table>
<thead>
<tr>
<th></th>
<th>Recognition</th>
<th>Report</th>
<th>Assessment &amp; Investigation</th>
<th>Protective Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Community Services</td>
<td>Department of Community Services</td>
<td>Department of Community Services</td>
<td>Department of Community Services</td>
<td></td>
</tr>
<tr>
<td>NSW Police Services</td>
<td>NSW Police Services</td>
<td>NSW Police Services</td>
<td>NSW Police Services</td>
<td></td>
</tr>
<tr>
<td>NSW Health</td>
<td>NSW Health</td>
<td>Office of the Ombudsman</td>
<td>Office of the Ombudsman</td>
<td></td>
</tr>
<tr>
<td>Department of Education and Training</td>
<td>Department of Education and Training</td>
<td>Department of Juvenile Justice</td>
<td>Department of Education and Training</td>
<td></td>
</tr>
<tr>
<td>Department of Juvenile Justice</td>
<td>Department of Juvenile Justice</td>
<td></td>
<td>Office of the Director of Public Prosecutions</td>
<td></td>
</tr>
<tr>
<td>Office of the Ombudsman</td>
<td>Office of the Ombudsman</td>
<td></td>
<td>Department of Juvenile Justice</td>
<td></td>
</tr>
</tbody>
</table>
Appendix F: Results Logic Model

From: NSW Government, Aboriginal Child Sexual Assault Inter-agency Plan, Senior Officers Group, 2009, Evaluation of Focus Communities Program, Tender information document

![Results Logic Model Diagram]

Figure 1. Results Logic for the nine communities

Working Together: Multi-Agency Collaboration and Child Protection on the APY Lands
### Appendix G: Health, Research and Educational Trust Checklist


<table>
<thead>
<tr>
<th>FACTOR</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partners share decision-making responsibility.</td>
<td></td>
</tr>
<tr>
<td>Partners represent local nonprofit organizations, businesses, government, and residents.</td>
<td></td>
</tr>
<tr>
<td>There is a high level of trust among partners.</td>
<td></td>
</tr>
<tr>
<td>Roles and responsibilities among partner organizations and individuals are clearly defined.</td>
<td></td>
</tr>
<tr>
<td>Financial and nonfinancial resources have equal weight in determining the distribution of power.</td>
<td></td>
</tr>
<tr>
<td>New members are actively recruited.</td>
<td></td>
</tr>
<tr>
<td>A system of incentives and rewards is in place to recognize and sustain partners' contributions.</td>
<td></td>
</tr>
<tr>
<td>Partnership has an effective mechanism to resolve conflicts among members.</td>
<td></td>
</tr>
<tr>
<td>Participation in assessing needs, identifying existing resources, and solving problems is broad and diverse.</td>
<td></td>
</tr>
<tr>
<td>Partnership has a written financial plan and a clear strategy for obtaining financial resources with identified responsibilities for implementing it.</td>
<td></td>
</tr>
<tr>
<td>Membership in the partnership reflects the diversity of the community's population and organizations.</td>
<td></td>
</tr>
<tr>
<td>FACTOR</td>
<td>SCORE</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Partnership has an effective governance structure.</td>
<td></td>
</tr>
<tr>
<td>Leadership includes high-level, visible leaders.</td>
<td></td>
</tr>
<tr>
<td>Leadership is open to perspectives, viewpoints, and suggestions of all members.</td>
<td></td>
</tr>
<tr>
<td>Staff is accountable to partnership.</td>
<td></td>
</tr>
<tr>
<td>Partnership has clearly articulated goals, strategies, and indicators of progress that provide a sense of direction and consensus among members.</td>
<td></td>
</tr>
<tr>
<td>Learning generated from projects and processes is used to enhance future efforts.</td>
<td></td>
</tr>
<tr>
<td>Partnership has evidence of progress in affecting desired outcomes.</td>
<td></td>
</tr>
<tr>
<td>Partnership has evidence of affecting public policy.</td>
<td></td>
</tr>
<tr>
<td>Partner organizations have changed the way they operate as a result of this partnership.</td>
<td></td>
</tr>
<tr>
<td>Identified issues have improved as a result of this partnership.</td>
<td></td>
</tr>
<tr>
<td>Other issues have been improved indirectly as a result of this partnership.</td>
<td></td>
</tr>
</tbody>
</table>

Aggregate Score: ________________

Overall Partnership Average Score (divide aggregate by 22): ________________
Appendix: Multi-agency team checklist

This checklist is derived from the results of the MATCH project exploring the functioning of multi-agency teams. Team members should complete the checklist individually and teams should then discuss the findings collectively. Results may indicate areas of team function that need to be clarified with stakeholder agencies and/or areas of team function that would benefit from more discussion within the team. Where there is divergence of views within a team, members should consider why this is and whether changes to the way the team operates would facilitate team functioning.

### Domain 1: Structural - systems and management

<table>
<thead>
<tr>
<th>Description</th>
<th>Strongly disagree/ never</th>
<th>Disagree/ sometimes</th>
<th>Agree/ often</th>
<th>Strongly agree/ always</th>
</tr>
</thead>
<tbody>
<tr>
<td>The team has clear objectives that have been agreed by all stakeholder agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The team has clear workable targets that have been agreed by all stakeholding agencies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The team has the authority to make decisions about day-to-day team function (as long as in accord with agreed targets and objectives)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is clarity about line management arrangements for all team members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are clear mechanisms for coordinating the work of team members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clear mechanisms exist to inform part-time team members about what has taken place in their absence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Domain 2: Ideological - sharing and redifusing knowledge/skills/beliefs

<table>
<thead>
<tr>
<th>Description</th>
<th>Strongly disagree/ never</th>
<th>Disagree/ sometimes</th>
<th>Agree/ often</th>
<th>Strongly agree/ always</th>
</tr>
</thead>
<tbody>
<tr>
<td>Different theoretical models are expected within the team</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Different professional groups are accorded equal respect within the team</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Supervision of work is attuned to the needs of the individuals within the team and their various professional backgrounds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The team encourages members to share skills and ideas with each other</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>The team has an awareness of the potential impact of multi-agency working on both professional identity and service users</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Domain 3: Procedural - participation in developing new processes

<table>
<thead>
<tr>
<th>Domain 4: Interprofessional learning through role change</th>
</tr>
</thead>
<tbody>
<tr>
<td>strongly</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

- The team has been able to develop new processes and procedures in order to meet its agreed objectives.
- Team members do not necessarily have to follow the appropriate agency line procedures if the role changes conflict with agreed team objectives.
- Opportunities exist for team members to have time away from the immediate delivery of services in order to reflect on practice and develop new ways of working (e.g. team away days, joint team training events).
- The team engages in joint client-focused activities such as shared assessment and/or consultation with families.
- There are regular opportunities for self-evaluation and joint clients.
- Stakeholding agencies continue to provide ongoing support for the professional development of their new staff in multi-agency teams as well as supporting team development activities.

There are no right answers but teams where most members tend to agree with the statements above are likely to function more efficiently.

This checklist may be reproduced and/or copied for training, audit and research purposes. Taintem: Developing Interprofessional Teams: for Integrated Children's Services by Amings et al. Open University Press 2004, ISBN 0355 231790.
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