

# From the Children's Guardian's Desk in Australia Devising Practice Standards for Aboriginal Out-of-home Care

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## Abstract

*Written from the perspective of The University of Newcastle (Mel Gray) and the former Director (Bruce Valentine) of the Office of the Children's Guardian, in New South Wales Australia, this paper describes a process for devising out-of-home care policies and procedures for Aboriginal agencies offering out-of-home care services in New South Wales under the provisions of the Children and Young Persons (Care and Protection) Act of 1998, which came into effect in December 2000. The Act established the position of Children's Guardian, whose office would, among other things, be responsible for accrediting agencies providing out-of-home care services for children and families in NSW, including Aboriginal out-of-home care agencies. The paper is set against the backdrop of child welfare services in general and out-of-home care in particular, and speculates about the role of practice standards in developing, evaluating and improving out-of-home care service provision and agency practice for children, young people and families in NSW. Of particular importance was the use of a partnership-intensive process in order to arrive at standards that would promote the self-determination of Aboriginal peoples.*

## Introduction

Why do we need practice standards? What and whose purposes do they serve? Is there evidence to suggest that the presence of practice standards effectively improves practice and the quality of services provided? How can one develop uniform practice standards and values that are just and representative of all constituencies in a context of cultural diversity and inequality of opportunity and privilege? This paper cannot answer these profound questions directly, but does describe how we addressed them while devising policies and procedures for out-of-home care for use by Aboriginal agencies offering out-of-home care services in New South Wales. In effect, these *policies and procedures* comprise practice standards because the process involved not only considering why such policies are needed and what they should be, but also how they might be implemented, evaluated and improved over time.

The long range goal of the Office of the Children's Guardian is to improve quality out-of-home care service provision and practice for children, young people, families, agencies, carers, and communities, who are the key stakeholders in out-of-home care. The provision of effective services rests on these stakeholders' inter-related roles and responsibilities *vis a vis* children and their families and the communities in which they live. There is also a strong role for child and youth care advocates who work exclusively to promote the rights and interests of children in care (Banks, 1996; Dalrymple, 2004), since, for the most part, other players involved are primarily responsible for promoting the interests of the system and to ensure accountability to policy makers and funding bodies.

Responsibility for the quality of out-of-home care rests with the New South Wales Office of the Children's Guardian (OCG), which has statutory responsibility for accrediting and monitoring out-of-home care providers, as well as promoting the rights and best interests of children and young people in out-of-home care. Most legislation, including that administered by the OCG, from whose perspective this paper is written, require formal policies, procedures and practices to ensure consistency of decision making, conformity with requirements, and accountability for practice. Generally, it takes professionals with a great deal of skill to negotiate this bureaucratic minefield so as to simultaneously promote the often competing and conflicting interests of all involved. However, in the child welfare sector, and in particular in out-of-home care, we are, to some extent, floundering in the dark. It is a very diverse sector, both in terms of the services provided, the nature of the service providers, and the qualifications and experience of the people who work within it. This is not to deny the tremendous amount of goodwill, noble intentions and practice wisdom that exist. But in these days of economic rationalism, managerialism, shrinking budgets, and political decision making, the child welfare sector has become extremely competitive. It is difficult to facilitate coordination among organizations competing for fairly limited resources where organizational function is often

dictated by the funding attracted rather than an evidence based track record of professional expertise. There are many examples where people and organizations with a proven track record and considerable expertise are constantly hampered in their work by a lack of funding and uncertainty as to the future stability of their services.

Within this broader and poorly coordinated context of child welfare service provision, practice standards can play a role in achieving some sense of coherence by guiding practice towards desired outcomes, such as increased efficiency and effectiveness and quality service provision, without being overly prescriptive. In the context of the project herein described, practice standards were seen as a means to an end rather than an end in themselves. Used in this way, standards are about strengthening the practice of the OCG and out-of-home care agencies, so that collectively each agency's clients and the communities in which they are embedded are strengthened.

Thus, the OCG policies and procedures that form the subject of this paper can be seen as a means for articulating both the 'what' and 'why' of out-of-home care practice. They attempt to articulate both the science and art of practice. Practice standards are best viewed not as laws or regulations, but as guides for best practice which need to be used flexibly lest they become a barrier between the regulators and regulated. A major focus of our effort has been the cultural specificity of the practice standards, such that they should provide a means of connection between agency workers and their clients. The process undertaken in devising these standards valued the worker's, and by implication, the client's experience, and aimed not only to give agencies a voice but also to ensure their ownership of the policies and procedures devised. Ultimately, practice standards should be measures of quality of services, of outcomes of practice, and the extent to which quality is added to the lives of people and to society.

## The Context: Child Welfare Services in New South Wales (NSW)

The background for contemporary child welfare policies in NSW

The child welfare sector in NSW is increasingly being driven by political and economic considerations, as reflected in recent policy changes in the funding framework and specifications. Unfortunately, most child welfare policies are driven by the goal of greater economic efficiency, often at the expense of achieving consistent, ongoing and sustainable services across the

continuum from prevention to early intervention and rehabilitation or family restoration. One indication that political vicissitudes and economic efficiency drives child welfare policy is the considerable variations in interdepartmental collaboration levels of decision making, that is, from central to regional levels, which are common features of recent state and federal policy initiatives (DoCS, 2001).

From the late 19<sup>th</sup> century and up until the 1980s, the majority of child welfare services in NSW were provided by the state. While the state continues to be the sole provider of child protection services and provides approximately eighty percent of out-of-home care services, the remaining twenty percent are provided by a mixture of not-for-profit and for-profit service providers, as are all family support services. In NSW, out-of-home care services, particularly residential care, previously provided by the state, are increasingly being purchased from profit and not-for-profit service providers. In addition, in moving from a community funding model to a purchase-of-service model, the state is no longer funding agencies to identify the need for services and develop suitable responses, thus removing one of the more dynamic features of non-government services — the capacity to quickly adapt to changing needs.

Moreover, changes in funding agreements has resulted in some services, such as family support, being reconstructed as a component of, and subsumed by, the child protection discourse. A good example is the state's *Families First* initiative, with its focus on early childhood development and effective parenting. This program is concerned with prevention and early intervention for children under eight, and falls under the jurisdiction of the Premier's department. In light of the aforementioned broader policy goals, the program's aim is to assist families and children through facilitating a coordinated and accessible network of services and increased opportunities for community support by building on existing services and changing the way in which some services were provided to families and increasing the range of support available to them. However, these programs make no real attempt to address structural problems. The resources and services provided do not enable the development of preventative strategies, not least proper child care to give families better access to employment and training.

There has been growing recognition among researchers, policy makers and practitioners that the prevention of child abuse and neglect requires 'the development of the means to address the societal factors underpinning child maltreatment and family violence' (Tomison & Wise, 1999, p. 1). Of necessity,

this must 'include an assessment of social policy as it pertains to children and young people, and consider the societal perceptions of children and childhood upon which social policy is based' (Tomison, 1997, p. 20). However, this seems to have been ignored, for, as Bryant (2001) notes 'the over-arching social issue for the State Government's *Families First* initiative is a concern about "proper" parenting, which seems to translate to families exercising their own responsibilities, with the underlying philosophy of putting the responsibility for children's outcomes back onto families and individuals, rather than at a societal level' (p. 7). This emphasis upon individual responsibility means that not only are many of the factors associated with child abuse and the entry of children into care not acknowledged, but when children do enter care, the probability of their eventual restoration is diminished. Similar changes have also occurred in the Federal Government, wherein family support services fall under the jurisdiction of the Department of Family and Community Services. The *Family Support* program, while initially intended as an early intervention initiative, is increasingly gravitating towards the child protection end of the spectrum and in the process is losing its preventive focus. This has resulted in an overlap between the *Families First* and *Family Support* programs, both of which seek to assist families who need extra support, while most of the families needing such support are located within the child protection system. Other initiatives, such as the Aboriginal Family Health Strategy, which targets interpersonal violence using a family worker model, are hard to box within any particular service system. For example, on the Far North Coast, *Families First* funds four Aboriginal family support workers to provide a range of services that cannot readily be categorised (Bryant, 2001). Similarly, the *Stronger Families and Communities* strategy with its largely rural focus was launched in 2000, and provided funding over a four-year period for new initiatives aimed at early childhood development and effective parenting. The *Stronger Families and Communities* strategy included the following:

1. Creating a *Stronger Families Fund* focusing on early childhood and effective parenting.
2. *Early Intervention Parenting and Family Relationship Support* for rural and regional communities in particular, to benefit from the provision of more playgroups, family counselling services and accessible family relationship education.
3. *Providing more Flexibility and Choice in Child Care* to provide 'in home' child care.

4. *Commissioning a National Study of Australian Children* including two long-term studies, namely, the Millennium Generation Longitudinal Study (MGLS) to investigate the 'rapid deterioration' in the mental and emotional health of children in Australia and the Longitudinal Study of Australian Children (LSAC) to 'add to the understanding of early childhood development, inform social policy debate, and be used to identify opportunities for early intervention and prevention strategies' (Federal Department of Family and Community Services, 2001, p. 1).
5. *Nurturing Potential Leaders in Local Communities*.
6. *National Volunteers Skills Development Initiative*.
7. *Supporting Local Solutions to Local Problems*, a strategy to build stronger families and communities which is what the government means by 'Social Coalition'.
8. *Running a Communication Strategy* which aims to reinforce the significance of good parenting and strong family relationships (Bryant, 2001).

These strategies need to be seen against the backdrop of the conservative Liberal government's welfare reform policies, where mutual obligation and 'individualist' solutions to social problems feature prominently, and where there are concerns with the growing costs of health care (Argy, 1998). At the end of the continuum from prevention to rehabilitation are the child protection services, which fall under the jurisdiction of the State Department of Community Services (DoCS). The latter is the main provider of out-of-home care services with which this paper is concerned.

An important context for this project is the *Children and Young Persons (Care and Protection) Act 1998* (hereafter referred to as the Act) which came into effect in New South Wales in December 2000. One of the innovations of this Act was the creation of the position of Children's Guardian who, among other things, would be responsible for accrediting designated agencies providing out-of-home care services for children and families in NSW, including Aboriginal<sup>1</sup> out-of-home care agencies.

## Standards to Maximize the Self-Determination of Aboriginal Peoples

### Defining Self-Determination from Aboriginal Perspectives

While the appointment of the Children's Guardian was generally well received, and some positions within the Guardian's office were designated for Aboriginal and Torres Strait Islander staff, some Aboriginal workers expressed concern, suspicion and mistrust over the appointment of a white Children's Guardian. This was seen by these workers as yet another layer of white state bureaucracy that could threaten Aboriginal people caring for their own children. Because Aboriginal children are over represented in the out-of-home care system, constituting 26% of all children in out-of-home care (Department of Community Services, 2003), there had been calls for a black Children's Guardian.

Accordingly, one of the first challenges facing the Children's Guardian was what to do about the over representation of Aboriginal children in the care system, while at the same time responding to the challenge of legitimacy and acceptance within Aboriginal communities. As a consequence, the promotion of Aboriginal self-determination through the accreditation program became a primary goal, along with promoting the care of Aboriginal children by Aboriginal agencies and carers. However, this has proven to be far more difficult than anticipated, as Aboriginal definitions of self-determination differ significantly from the philosophy of liberalism and social work codes of ethics. Within liberalism and social work, self-determination embodies the right of each person to exercise free choice and to act without interference from others (Banks, 2001). In contrast, the Aboriginal concept of self-determination is about the collective right of Aboriginal people to achieve a reasonable standard of living; to be free from the influence of the dominant white society; and to achieve a collective identity, social standing and recognition of their right to do things in an Aboriginal way (Dodson, 2003).

Viewed against the backdrop of international developments in Indigenous child welfare, self-determination is essentially about 'the long-term empowerment of Indigenous peoples' (Libesman, 2004, p. 1). Thus self-determination requires 'government agencies to relinquish some power and to recognise the authority of the Indigenous community or organisation ... (with good partnerships and meaningful) collaboration supported via appropriate legislation' (p. 2). Libesman's (2004) review of the international literature on Indigenous

child welfare draws particular attention to strengths based and healing rather than deficits or problem based approaches, and a whole-of-community rather than an individual family focus. However, much of this literature is hortatory and, as yet, there is a lack of empirical evidence as to the effectiveness of these approaches. In fact, they are being suggested because of the lack of effectiveness of problem, program and family focused approaches in Indigenous communities: 'Indigenous communities have found that conventional individualistic responses to children's well-being do not substantially improve conditions for Indigenous communities and families and that a more holistic community based response is required' (Libesman, 2004, p. 3).

The failure of the state to recognise and promote Aboriginal cultures is a continuing source of frustration and concern for Aboriginal peoples (Nakata, 2003). Not only does it result in the denial of Aboriginal cultures and identities, but it also reinforces and maintains cultural imperialism and oppression [Link-Up (NSW) Aboriginal Corporation & Wilson, 1997]. This is perhaps best articulated by Bessarab (2000) who said that, 'if we are to ... assist Aboriginal families and individuals and communities to obtain their rightful place in Australian society then we have an obligation to acknowledge and use culturally appropriate methods when providing services' (p. 90). Thus practices needed to be promoted that, in the words of Weaver (1999), are not only appropriate but also are part of, and integrated with, the culture. This is particularly so for Aboriginal out-of-home care organizations, as they do not exist in isolation, but are part of, and are integrated with, a local community and reflect the values of that community. In being subject to statutory regulation and the requirements of their respective communities, these organizations are one of the friction points between competing white and black cultural values and requirements, while the staff are caught in the middle, trying to please multiple masters. 'Culturally competent service delivery requires not only the employment of Indigenous staff in support services, but (also) the incorporation of cultural knowledge into the service delivery framework via community engagement and active participation' (Libesman, 2004, p. 2).

### A Partnership-Intensive Process for Developing Culturally-Sensitive Standards

In the absence of a pre-existing framework, the OCG, in consultation with interested stakeholders, designed and implemented an accreditation program, based on the pass/fail model set out in the Act. Central to the program are the *NSW Out-of-Home Care Standards* (OCG, 2003). These began life as the *NSW*

*Standards for Substitute Care Services* which the Minister for Community Services directed were to be used as the basis for the statutory accreditation program, as they had previously been developed in conjunction with the sector and were well accepted.

However, the *NSW Standards for Substitute Care Services* were designed to be used in a voluntary accreditation program which never came into being. Their use has proven to be problematic, even when reframed to reflect the legislative requirements. The original Standards were based on best practice, and were meant to be achieved over time, rather than met on a pass-fail basis. This gradual approach was taken as policy-makers believed that initially few agencies would meet all the standards, while the majority of them would only be able to meet some of the standards and would need considerable time to be able to meet all of them (DoCS, 1998). Moreover, because they were based on best practice, they were not meant to be used as standards against which practice was to be demonstrated, as required in the Act, but rather, as a level of desirable practice that agencies should seek to work towards and achieve. In adapting the *NSW Standards for Substitute Care Services*, previous ideals against which an organization could measure itself and use to set targets for improvement were converted into absolute requirements.

There was confirmation of the view that few existing agencies could meet the *NSW Standards for Substitute Care Services* program. Testing suggested that as many as sixty percent of the organizations, including most Aboriginal agencies at the time of the proclamation of the Act, would either be unable to achieve accreditation or would require longer than the two years provided in the transitional regulation to prepare for accreditation. Faced with the prospect of having agencies which were otherwise providing an adequate level of care having to shut their doors, with all the disruption to carers and children supervised by these agencies, the OCG rethought the whole accreditation program. Using some creative legal interpretations and strategies, the OCG developed a quality improvement program to complement the accreditation program. Together these two programs, which rest on common standards, requirements and objectives, constitute the accreditation and quality improvement programs. In many respects the development of the quality improvement program reflects the original concept and intent of the never-implemented voluntary accreditation program, under which organizations would have progressively improved the quality of their services.

As a result of the changes made, agencies with interim accreditation have the choice of either seeking

accreditation or participating in the quality improvement program until they feel confident of being able to achieve accreditation for three years. The approach taken by the OCG in developing and implementing both programs has been to ensure minimum standards of care are being met while, at the same time, identifying the strengths of each organization and assisting each agency to improve service delivery outcomes. A strengths based approach (Saleebey, 2002), while not ignoring the limitations of agencies, has the benefit of least disruption to services. It also fits in well with a quality improvement model, optimising the services provided to children and young people in care, and avoiding placement disruptions (Trotter, 1999).

In comparison, new service providers that wish to commence providing out-of-home care services are required to undergo accreditation certification. They must be able to demonstrate their capacity to meet the minimum requirements, that is, providing a satisfactory standard of care. It is anticipated that over time these strategies will result in improvements in the quality of care being provided to children and young people in out-of-home care.

In the course of evaluating the initial impact of the quality improvement program, it became apparent that many smaller agencies, and in particular Aboriginal services which relied solely upon government funding, did not have the capacity to engage in quality improvement activities. In addition, and of greater significance, because the criteria that informed both the accreditation and quality improvement programs were 'Anglocentric', neither program sufficiently recognised or promoted Aboriginal cultures, values and practices. As a consequence, they failed to acknowledge the way in which culture shapes practice and the identity of practitioners (Bennett & Zubrzycki, 2003). On review, both programs were also found to be inconsistent with the principle of Aboriginal self-determination set out in the Act.

In discussions with the NSW Aboriginal Child, Family and Community Care Secretariat (AbSec) as to how to reduce the degree of conflict, better facilitate self-determination and improve the lot of Aboriginal children in care, agreement was reached on the need to develop a set of culturally appropriate, but generic, policies and procedures. The policies and procedures needed to be generic, as it was recognised there was not just one Aboriginal culture, but rather a diversity of cultures which shared some commonalities (Gilbert, 2001).

Consequently, expressions of interest were sought from three NSW universities, each of which had a social work program, an Aboriginal studies unit, and a significant Aboriginal student population, to prepare a package of generic accreditation policies and procedures that reflected Aboriginal cultures, values and practices. It was intended that these would provide a vehicle to empower Aboriginal children, parents, carers, workers, and communities. It was also hoped that they would provide a means by which Aboriginal workers could reconcile their identity and professional practice. Central to the project was the promotion of the philosophy of self-determination and the Aboriginal Child Placement Principle through:

- Endorsing and recognising the importance of Aboriginal cultures for all stakeholders.
- Increasing the opportunities for Aboriginal children to be placed within their own communities and cultures.
- Reflecting and making explicit the rights of Aboriginal children, parents, carers, and communities.
- Making the regulation of out-of-home care culturally appropriate and accessible, understandable and transparent to all involved, including children, parents, agency workers, carers, and communities.

The University of Newcastle successfully tendered for this project, committing staff from both the School of Social Sciences and the *Wollotuka* School of Aboriginal Studies, including Aboriginal and Torres Strait Islander postgraduate students to the project. The development of the policies and procedures, which occurred over a twelve month period, was supervised by a steering committee, chaired by the Children's Guardian, comprising representatives of the AbSec, the OCG and the University of Newcastle. It met monthly. During the life of the project, the university collaborated with, and provided regular feedback to, the committee and the agencies for which the policies and procedures were being developed. A major outcome sought was ownership of the policies and procedures by these Aboriginal out-of-home care agencies. Hence, the agencies were consulted as each draft was produced to ensure that the developing document was appropriate for their agency.

The university provided the OCG with a final copy of the policies and procedures, which were then referred to an Aboriginal editor to ensure that language and presentation were culturally appropriate. Following finalisation of the policies and

procedures, a training program will be developed to introduce the material to workers from each Aboriginal out-of-home care agency. Their implementation and effectiveness will then be evaluated and improvements made based on feedback received. In effect, the policies and procedures constitute evolving practice standards to ensure quality out-of-home care for Aboriginal children, families and communities in NSW within the limits of the OCG's capabilities. It is recognised that many of these agencies are under-resourced. However, the OCG has taken a facilitative approach in the hope that devising practice standards in a participatory manner would lead to practice improvements in the Aboriginal out-of-home care sector. While program evaluations are presently underway, it is too early to report on the findings).

## A Continuing Developmental Process

In conclusion, we are not yet in a position to answer all the questions posed at the outset, although we have grappled with them. As we have shown, the international literature on Indigenous child welfare suggests holistic, whole-of-community, healing based approaches due to the failure of individualistic, one size fits all, family based, and programmatic responses in Indigenous communities. This seems to suggest the need for locally based solutions, contrary to the ethos of standards based approaches which, of necessity, result in some form of uniformity or, at least, common standards which all need to attain. Practice standards are needed precisely because care issues, for whatever reason, have progressed beyond the capacity of the local community to manage them without some form of external intervention. This presents a paradox for regulatory bodies charged with the care and protection of children.

The response of the Children's Guardian to this paradox has been to promote the role of the OCG as more than one of accrediting and monitoring of out-of-home care services in NSW in accordance with the regulatory requirements in the *Children and Young Persons (Care and Protection) Act 1998*. In adopting a value-adding approach, OCG staff work with each agency to identify their strengths and weaknesses in relation to the *NSW Out-of-Home Care Standards*. To facilitate this approach, the OCG partnered with numerous stakeholders and developed a range of materials to assist agencies, all of which are published on the OCG website at <http://www.kidsguardian.nsw.gov.au>. The standards and materials are available for public review and use, so that all stakeholders, including the children in care, can be informed and participate. The publicly

available standards guide and inform the accreditation and quality improvement programs, and seek to promote quality care through assisting agencies to prepare for accreditation or to participate in the quality improvement program.

Readers can access the standards on the website listed above. It is of particular note that there are standards developed specifically to maximize the self-determination of Indigenous Peoples, such as the standard that every Indigenous child should have access to a worker from her/his Indigenous background, and that residential care agencies make efforts to recruit staff from Indigenous communities. To further promote Aboriginal self-determination the OCG placed on its website an *Aboriginal Policy Statement* and an *Apology* [for past practices by the state] and *Message of Commitment* [to work with Aboriginal people].

## References

- Argy, F. (1998). *Australia at the crossroads*. St Leonards: Allen & Unwin.
- Banks, S. (1996). Youth work, informal education and professionalism: The issues in the 1990's, *Youth & Policy*, 54, 13-25.
- Banks, S. (2001). *Power ethics (2nd ed.)*. Houndmills: Palgrave.
- Bennett, B., & Zubrzycki, J. (2003). Hearing stories of Australian Aboriginal and Torres Strait Islander social workers: Challenging and educating the system. *Australian Social Work*, 56(1), 61-71.
- Bessarab, D. (2000). Working with Aboriginal families: A cultural approach. In W. Weeks & M. Quinn (Eds.), *Issues facing Australian families: Human services respond (3<sup>rd</sup> ed.)*. Sydney: Pearson.
- Bryant, S. (2001). *Families first: Implications for social work practice in rural community health settings*. Unpublished masters thesis, University of Newcastle, NSW, Australia.
- Children and Young Persons Care and Protection Act. (1998). *New South Wales Consolidated Acts*. (Introduced 2000). [http://www.austlii.edu.au/au/legis/nsw/consol\\_act/](http://www.austlii.edu.au/au/legis/nsw/consol_act/)
- Dalrymple, J. (2004). Developing the concept of professional advocacy: An examination of the role of child and youth advocates in England and Wales. *Journal of Social Work*, 4(2), 179-197.
- Certainly out-of-home care services are part of a continuum of services to children and families, and it is essential that families have access to a range of supportive programs to avoid the need to place children in long term care. However, there are always cases that have progressed to the protection end of the spectrum, and government child welfare agencies bear a responsibility for these children. The OCG is caught in just this dilemma, hence this sincere attempt to develop flexible policy guidelines and practice standards in partnership with Aboriginal out-of-home care service providers. Promoting Aboriginal self-determination through the use of Aboriginal practice standards remains a significant challenge for the OCG. The OCG still has much work to do in reframing a range of requirements to reflect Aboriginal cultures, values and practices, as well as in mediating cultural differences in perception about what constitutes adequate care of Indigenous children.
- Department of Community Services (DoCS). (1998). *NSW standards for substitute care services*. NSW Government, Department of Community Services, ns.
- Department of Community Services (DoCS) (2001). *Purchasing, a partnership model*. <http://www.community.nsw.gov.au> (Retrieved August 24, 2004).
- Department of Community Services (DoCS) (2003). *Out-of-home care quarterly data, July 2002-September 2003*. <http://www.community.nsw.gov.au> (Retrieved July 14, 2004).
- Dodson, M. (2003). The end in the beginning: Re(de)fining Aboriginality. In M. Grossman (Ed.), *Blacklines*. Carlton: Melbourne University Press.
- Federal Department of Family and Community Services (FACS). (2001). *What is the Longitudinal Survey of Australian Children?* <http://www.facs.gov.au/>
- Gilbert, S. (2001). Social work with indigenous Australians. In M. Alston & J. McKinnon (Eds.), *Social work: Fields of practice*. Melbourne: Oxford.
- Libesman, T. (2004). Child welfare approaches for Indigenous communities: International perspectives. *Child Abuse Prevention Issues*, 20, 1-39.
- Link-Up (NSW) Aboriginal Corporation & Wilson, T. (1997). *In the best interests of the child*. Link-Up (NSW) Aboriginal Corporation, ns.

- Nakata, M. (2003). Better. In M. Grossman (Ed.), *Blacklines*. Carlton: Melbourne University Press.
- Office of the Children's Guardian (OCG). (2003). *NSW Out-of-Home Care Standards*. [http://www.kidsguardian.nsw.gov.au/accreditation/acc\\_standards.php](http://www.kidsguardian.nsw.gov.au/accreditation/acc_standards.php) (Retrieved July 16, 2004).
- Saleebey, D. (Ed.). (2002). *The strengths perspective in social work practice* (3<sup>rd</sup> ed.). Boston: Allyn & Bacon.
- Tomison, A. (1997). *Overcoming structural barriers to the prevention of child abuse & neglect - A discussion paper*. NSW Child Protection Council.
- Tomison, A., & Wise, S. (1999). Community-based approaches in preventing child maltreatment: *Issues in Child Abuse Prevention*, 11. National Child Protection Clearinghouse, Australian Institute for Family Studies. <http://www.aifs.gov.au/nch/issues11.html>
- Trotter, C. (1999). *Working with involuntary clients*. St. Leonards: Allen & Unwin.
- Weaver, H. (1999). Indigenous people and the social work profession: Defining culturally competent services. *Social Work*, 44, 203-211.

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**Note:** The views expressed in this article do not reflect the views of anyone save the authors.

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## Footnotes

<sup>1</sup> The legislation refers to Aboriginal and Torres Strait Islander peoples, however, as there are no dedicated Torres Strait Islander services in NSW, only Aboriginal services are referred to. Similarly, while the Act refers to Aboriginal and Torres Strait Islander children and young persons, for the sake of convenience, only Aboriginal children are referred to.