







Australian Centre for Child Protection

Professionals Protecting Children

Child Protection and Nursing and Midwifery Education Curriculum Standards







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Foreword

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Standards for child wellbeing and child protection content in Australian nursing and midwifery courses are urgently required. There is deep concern within our society about child abuse and neglect. With more than 30,000 children in State care, more than double that of a decade ago, and escalating referrals to overwhelmed statutory child protection systems across Australia, there is a moral imperative to act. We must work together to prevent child abuse and neglect and to improve our response when it occurs.

Our knowledge about the problem is rapidly growing but the gap between what we know and what we do is large. We now understand that child maltreatment is relatively common, and that it can have very serious consequences in terms of the immediate suffering of children and the long-term effects on adult physical and mental health, including impairing the parenting of the next generation. Health, education and social service professions all have a major role to play in improving our capacity to prevent and respond to child abuse and neglect yet professional education on child protection in all these sectors in Australia has been seriously deficient.

With the release by the Council of Australian Governments of the National Framework for Protecting Australia's Children (COAG 2009), there is now an obligation on all professions in Australia to examine how well they are preparing their graduates to protect children and how well they work together in delivering services to children and families.

Through the Professionals Protecting Children initiative of the Australian Centre for Child Protection, we have worked in close partnership with professions to map the content of current curricula and to develop and implement curriculum standards on child protection suited to their profession. The Council of Deans of Nursing and Midwifery has been very supportive from the very beginning of this endeavour.

Nurses and midwives have a vital and distinctive role in combating child maltreatment. They are in a unique position to address some of the key risk factors and strengthen some of the key protective factors related to child abuse and neglect. Reducing situational stressors during pregnancy, nurturing parent-infant attachment, increasing social support for vulnerable families, identifying and ameliorating the impact of parental chronic illness, substance dependence and mental health problems on parenting capacity, are all key elements in addressing child abuse and neglect. Irrespective of whether the child or the parent is the primary focus, or whether the setting is acute or primary care, nurses and midwives have the potential to make an enormous difference to the lives of the most vulnerable children in our society.

The Centre for Midwifery, Child and Family Health at the University of Technology Sydney is to be commended for their leadership in developing these standards for midwifery and nursing education. Without the commitment and knowledge of Dr Carolyn Briggs and Dr Denise Ryan this project would not have been possible. We would also like to thank Professor Caroline Homer for her continuing contribution whilst overseas.

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It has been a truly collaborative undertaking and the individuals and organisations listed below generously provided their expertise and most valuable advice as members of the External Advisory Committee for this project:

Australian Nursing and Midwifery Council: Dr Di Kidgell

Australian College of Midwives: Ms Louise Everitt

Australian Association of Maternal, Child and Family Health Nurses: Ms Pam Murphy

Council of Children's Nurses: Ms Karen Rankin

Australian College of Children and Young People's Nurses: Dr Jennifer Fraser

Australian Association for the Wellbeing of Children in Health Care: Dr Sue Packer

Congress of Aboriginal and Torres Strait Islander Nurses: Ms Robyn Coulthar

Australian and New Zealand Council of Deans of Nursing and Midwifery: Dr Bev Copnell

The College of Nursing: Ms Sue Mapletoft

Australian College of Neonatal Nurses: Dr Trudi Mannix

Institute for Child Protection, Australian Catholic University: Associate Professor Morag McArthur

Australian Centre for Child Protection: Professor Dorothy Scott

I wish to express my deep gratitude to all of those who have supported this project and my sincere hope that these standards will be embraced by midwifery and nursing educators to the benefit of the most vulnerable children in Australia.

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Introduction

The development of recommended curriculum standards for Australian pre-registration and postgraduate programs in nursing and midwifery was undertaken by the Centre for Midwifery, Child and Family Health at the University of Technology Sydney on behalf of the Australian Centre for Child Protection. The project aimed to equip graduates with the knowledge and skills to enhance child wellbeing and prevent, identify and respond to child abuse and neglect.

The project takes a rights-based, primary health care approach to nurturing and protecting children that is supported with reference to legislation, policy frameworks, academic literature on nurses' and midwives' education in relation to child protection, contemporary professional practice and Australian nursing and midwifery education standards. The approach aims to support educators in incorporating and highlighting, within existing curriculum on health and well-being across the age continuum, content that is relevant to and explicitly linked with nurturing and protecting children.

The approach is articulated in the Literature Review for this project. The Review found that child protection is increasingly understood, both in Australia and internationally, as including but exceeding protection from harm and encompasses the aim of promoting the fulfilment of the child's potential. This approach depends greatly on the ability of all health professionals, but particularly those involved in primary health care, having an understanding, willingness and ability to identify child abuse, to recognise vulnerable families and individuals and to intervene as and when appropriate. The Review further found that appropriate intervention involves an understanding of risk factors for child abuse and the social determinants of health; reporting (including mandatory reporting in some states and territories) and referral processes; interprofessional and interpersonal communication and collaboration; knowledge of appropriate support services; and an understanding of human rights and in particular of the rights of the child. These elements provide a platform for taking a longer-term, indeed lifespan, approach to child protection that complements and corresponds with the increasing emphasis on primary health care.

Whilst all health professionals accept their professional responsibility to identify when children may be at risk of harm or neglect, nurses and midwives closely involved with child rearing families are more likely to be in situations where knowledge and skills around child protection are needed. They may be the first point of contact for these families with the health care system. They must be able to recognise both protective and risk factors for child abuse and neglect, assess the vulnerability of needy families, and know when to intervene. Their professional education should enable them to communicate effectively with families, plan and provide nursing and midwifery care, and collaborate with other professionals to provide adequate supports for the child and family.

To encourage child protection education for nurses and midwives the curriculum standards provide principles relating to the inclusion of relevant content in curricula, expected teaching and learning outcomes, benchmarks to evaluate progress, and an appendix of electronic resources.

Curriculum Standards

The Curriculum Standards for nurturing and protecting children developed for this project have adopted as their organising principle the four key elements of the 'Framework for Mental Health in Pre-Registration Nursing' from the Australian report released in 2008, called *Mental Health in Pre-Registration Nursing Courses*. With minor modifications to suit the needs of the present project, this Framework has been chosen as the organising principle for the standards as it expresses and establishes:

- the underpinning values and principles guiding the development of the standards;
- the expectations in terms of graduate outcomes and curriculum content that are mapped to the ANMC National Competency Standards; and
- benchmarks for inclusion of child protection content that can be used by accrediting bodies, universities and government.

The advantage of this Framework is that it offers a range of support to curriculum developers, going beyond simply identifying the competency standards that students should meet on exiting a course of study. It provides a clear logic and context for the Curriculum Standards, together with detailed support for curriculum developers both in shaping curriculum content and in identifying graduate outcomes. It also provides a model for meeting external requirements for curricula.

As they relate to content on the nurturing and protection of children in pre- and post-registration nursing and midwifery curricula, the four key elements of the Curriculum Standards for nurturing and protecting children are:

- Core values underpinning learning and teaching;
- Principles and content for learning and teaching;
- Teaching and learning outcomes; and
- Benchmarks for inclusion of content of curricula.

Core values underpinning the learning and teaching

The core values have been developed with reference to the findings of the literature review for this project regarding: legislation, policy, professional standards and academic research; the findings from the report by the Australian Centre for Child Protection (ACCP) 2009 into child protection content in nursing and midwifery curricula; and the mental health curriculum project. They have been developed through the project team processes and in consultation with a national reference group. The core values have been categorised under the three 'macrolevel' categories of child protection-related content referred to in Table 4.1 of the ACCP 2009 report – Child-centred issues; family/environmental issues; and professional issues. An additional category 'culture' has been added to these to highlight the importance of the cultural context in nurturing and protecting children.

Child-centred Issues

Core value 1

Children have human rights which must be respected.

This includes the child's need for protection without discrimination; the child's right to a safe and stable environment; respect for and freedom of expression of child's views. It includes 'a commitment to child sensitive practice, recognising that unless there is sensitivity to children's needs, children and parenting responsibilities can be [overlooked] in adult services'.² It acknowledges the challenges and complexity of fulfilling a duty of care to children where the child is not the primary recipient of the health service.

Core value 2

Children must be nurtured and supported to optimise their development and wellbeing.

This involves supporting parents and primary carers to provide sensitive, timely and effective parenting; enabling access and opportunity for children to participate in developmentally appropriate activities; and ensuring appropriate support and intervention.

Core value 3

Children must be protected from harm and neglect.

This involves the family and also the wider community. It includes contact with the health services. It encompasses the principle that children must be protected from abuse and neglect in all forms, including: physical, sexual and emotional abuse and neglect, where 'protection' includes the recognition of and appropriate response to child abuse and neglect when it is detected. Responses include reporting, referral, clinical intervention and support.

Family/environmental issues

Core value 4

Nurturing and supporting families is central to the wellbeing of the child.

This involves recognising that the wellbeing of the child begins in the home; the recognition that, where it is consistent with the child's entitlement to a safe and secure environment, the child should be cared for by the family; and recognition and protection of the family as the foundational unit of society. It recognises that, unless responding to the child's needs, the parenting role is itself compromised.

Core value 5

Nurturing and protecting children and supporting families is a whole-of-community responsibility and requires a primary health care approach.

This recognises that the basis of primary health care is that the wellbeing of the child begins in the home. While responsibility for children rests with families, safe communities, interagency cooperation and whole-of-government approaches are responsibilities shared by everybody.

Cultural issues

Core value 6

Nurturing and protecting children and supporting families means valuing cultural and family identities.

This includes recognition of the need for individualised approaches to care and support. It recognises the importance of fathers and extended family to child well being. It requires an understanding of cultural safety. It includes 'respect for Indigenous kinship and family values and child rearing practices, and those of other cultural groups'. Valuing cultural and family identities neither absolves nurses and midwives of their responsibilities in respect of child protection nor excuses child abuse or neglect on the basis of different cultural perspectives or practices.

Core value 7

Nurturing and protecting children and supporting families requires an understanding of the political, social and historical impact of family separation and displacement.

This includes an appreciation of the social and emotional impact on refugee and migrant families of displacement, family separation and the experience of torture and trauma. It includes an appreciation of issues of resettlement (parenting in a new land) that may be experienced. It appreciates the social and emotional impact of experiences of institutional care on Forgotten Australians.⁴

Professional issues

Core value 8

Inherent in the roles of nurses and midwives is valuing and understanding their role in the wellbeing and protection of children.

This includes advocating on behalf of the child; recognising that the best interests of the child are paramount; and recognising, responding to and reporting and referral of child abuse and neglect in all forms, including: physical, sexual, emotional abuse and neglect and the presence of domestic violence.

Core value 9

Inherent in the roles of nurses and midwives is building relationships with families and enabling their participation in decisions affecting them.

This includes recognising that families with multiple vulnerabilities require greater support; recognition of the need for nurses and midwives to have communication skills to enable disclosure and support through the establishment of trusting relationships; and recognition of the need to provide timely and appropriate information in a respectful and confidential manner. The goal is to optimise appropriate care and access to services, to provide continuity of care for the child and family and to provide care that incorporates a holistic view of family and community. Partnership with the family is an essential component of this value. It recognises the importance of including parents and, if developmentally appropriate, children as part of the decision-making process.

Core value 10

Nurses and midwives respect the historical issues of family separation for Aboriginal and Torres Strait Islander peoples.

This recognises the importance of inclusion and participation of Aboriginal and Torres Strait Islander Peoples in child protection and wellbeing. This also includes: a knowledge and understanding of the policies of forced removal of Aboriginal and Torres Strait Islander children from their families; the forced removal of peoples from their land; and prohibition of practising Aboriginal and Torres Strait Islander languages and culture. It also recognises specific legislated requirements in relation to Aboriginal and Torres Strait Islander Children.⁵

Core value 11

An interdisciplinary/multi-agency approach to nurturing and protecting children is necessary for optimal care.

This recognises that nurses and midwives are integral components of the family's resources; that professionals involved in the nurturing and wellbeing of children work within their professional roles to extend the most appropriate care to the child and family; and the avoidance of duplication and of fragmented care through optimal coordination of care between relevant health professions and other sectors.

Core value 12

The welfare of nurses and midwives, including students of nursing and midwifery, should be safeguarded in relation to their experiences of learning, teaching or practising in the area of nurturing and protecting children.

This recognises that nurses and midwives may require access to professional support structures in dealing with their personal responses to child abuse and neglect, be it in the course of learning to respond professionally or actually responding to abuse and neglect. It recognises that some students, nurses and midwives will have personal experience of abuse, neglect and family violence.

Teaching and learning outcomes in pre- and post-registration nursing and midwifery curricula

**The Teaching and Learning Outcomes are mapped against the ANMC National Competency Standards (for the Registered Nurse 4th edition and for the Midwife 1st edition). See Appendix A.

At the completion of the course, the graduate nurse or midwife will have met the following learning outcomes with regard to nurturing and protecting children:

Prevention/professional preparation

With respect to nurturing and protecting children, the nurse or midwife graduate will be able to:

- 1. Articulate, support and advocate for the rights of children
- 2. Demonstrate an understanding of the need to support and promote the family unit and its importance to the child's wellbeing through trusting relationships and strengths-based approaches
- 3. Articulate the importance of having a primary health care approach to child nurturing and wellbeing
- 4. Respect and work within understandings of cultural safety and cultural and family diversity
- 5. Articulate and respect the history and culture of Aboriginal and Torres Strait Islander peoples
- 6. Articulate and respect the political, social, cultural and historical issues of family separation and displacement for relevant groups and communities
- 7. Demonstrate engagement in critical reflection on child wellbeing and a commitment to lifelong learning in this area

Early intervention

With respect to nurturing and protecting children, the nurse or midwife graduate will be able to:

- 8. Demonstrate an understanding of risk and protective factors for child abuse and neglect
- 9. Identify strategies and opportunities to strengthen protective factors and reduce risk factors for child abuse and neglect at individual family and community levels
- 10. Demonstrate an understanding of the legal context for nursing or midwifery practice in child protection in Australia and the legal and ethical responsibilities of nurses and midwives in relation to child protection, including the relevant legal reporting responsibilities of nurses and midwives⁶
- 11. Demonstrate communication skills to build rapport with children and families to: enable sharing of information; enable disclosure; and to challenge inappropriate behaviour.
- 12. Demonstrate the ability to work in partnership with families and provide timely and appropriate information to children and families in a respectful and confidential manner
- 13. Explain and demonstrate awareness of the importance of providing continuity of care to children and families

Response

With respect to nurturing and protecting children, the nurse or midwife graduate will be able to:

- 14. Integrate an assessment of child and family wellbeing into a nursing or midwifery assessment⁷
- 15. Plan and provide nursing or midwifery care that takes account of child and family health and wellbeing⁸
- 16. Collaborate effectively with multi-agency/interdisciplinary teams of health, education and social service sectors and organisations in the provision of nursing or midwifery care related to child and family health and wellbeing⁹
- 17. Recognise and act appropriately when children and their families are at significant risk of child abuse and neglect
- 18. Demonstrate knowledge of the processes of identifying and responding to risk of or actual child abuse or neglect
- 19. Demonstrate knowledge of legal and professional responsibilities in relation to responding to and reporting of child abuse and neglect.

Principles and content for learning and teaching in pre- and postregistration nursing and midwifery curricula

**In applying these principles, educators and curriculum developers should have regard to the need to tailor them to the level of the course (pre or post-registration) and the differences in the disciplines of nursing and midwifery.

- 1. Content in nursing and midwifery courses on nurturing and protecting children is integrated and transparent across the curriculum.
- 2. Content in nursing and midwifery courses on nurturing and protecting children makes a clear connection between nurturing and child protection a crucial part of the concept of nurturing children is about keeping them safe.
- 3. Content in nursing and midwifery courses on nurturing and protecting children puts emphasis on optimising child wellbeing and family support. It must include as a minimum:
 - Relationship and strengths-based approaches for working with families;
 - Family and community support networks;
 - Assisting parents with problem-solving and decision-making;
 - Training in effective communication models eg. Family Partnership model;
 - Understanding the cycle of intergenerational violence;
 - Promotion of infant, child and young peoples' mental health;
 - Promotion of adult mental health; and
 - Awareness of the impact of adult mental health, parental substance misuse and domestic violence on infants, children and young people.
- 4. Content in nursing and midwifery courses on nurturing and protecting children includes knowledge of human rights and child protection legislation and nurses and midwives' responsibilities within that. It must include as a minimum:

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- Relevant professional standards and policy frameworks;
- Knowledge of the Convention on the Rights of the Child (CRC);
- National and State/Territory Child Protection and Early Childhood legislation, policies and frameworks;
- Principles of parenting (loving, sensitive, appropriate and timely); and
- Interrelationship between legislation, policy and clinical practice.
- 5. Content in nursing and midwifery courses on nurturing and protecting children incorporates a lifespan, public health approach:
 - Theories of attachment, growth and development;
 - Theories/models of family and child development; and
 - Awareness of the hidden traumatic histories of families.
- 6. Content in nursing and midwifery courses on nurturing and protecting children challenges graduates to be aware of their own cultural perspectives and attitudes. This includes the personal life experiences that shape these perspectives and attitudes. It also promotes a value and respect of the cultural perspectives of others, while remaining aware of and willing to respond to social practices that expose children to harm.
 - Understanding conflicts in response to cultural parenting practices;
 - Awareness and understanding of the history and culture of Aboriginal and Torres Strait Islander peoples e.g. continuous contact with the land, different cultural construction of ownership, kinship, health and illness;
 - Understanding the political, social and historical issues of family separation and displacement for relevant peoples especially migrant and refugee families;
 - Culturally appropriate and respectful ways of working with children and families from diverse cultures, including Aboriginal and Torres Strait Islander families¹⁰;
 - Awareness of punitive approaches to discipline that are sanctioned by communities and their legal systems eg the use of slapping; use of language to denigrate children.
 - Critical appraisal of political responses to child protection; and
 - Discussions of the appropriate use of professional and individual judgement when supporting parents and children.
- 7. Content in nursing and midwifery courses on nurturing and protecting children provides a knowledge-base for identification and responding to abuse and neglect.
 - Definitions of child abuse and neglect and child protection;
 - Signs and symptoms of child abuse and neglect;
 - Risk factors for child abuse and neglect, including domestic violence, parental substance misuse and parental mental health issues;
 - Physical and emotional assessment of children using sensitive and accepted approaches;
 - Documentation requirements and importance of confidentiality; and
 - Responding to, and identification of, child abuse and neglect, including how, when and to whom to report.

- 8. The education of nurses and midwives in nurturing and protecting children provides opportunities to explore nurses' and midwives' advocacy role in respect to nurturing and protecting children. It includes exposure to:
 - Various levels of advocacy political, professional, community and individual; and
 - Complex scenarios where the interests of the child and the parent diverge, including the presence of parental mental health issues.
- 9. The education of nurses and midwives in nurturing and protecting children provides for continuity of care in respect to nurturing and protecting children.
 - The continuing support role of the nurse or midwife.
- 10. The education of nurses and midwives in nurturing and protecting children is strengthened by drawing on the body of evidence-based knowledge and expertise in child protection beyond nursing and midwifery to include other relevant professions and interdisciplinary approaches, including:
 - Professional network development;
 - Understanding the roles and functions of other health, welfare and services professionals, including Aboriginal Health Workers; and
 - Commitment to on-going and inter-professional education.
- 11. The education of nurses and midwives involves appropriate support mechanisms for students and academics and clinicians dealing with child protection issues in the course of their learning, teaching or practice and protecting the wellbeing of those students, academics and clinicians who may themselves have been exposed to abuse or neglect.
 - Professional support mechanisms eg clinical supervision, individual counselling, critical reflection; and
 - Self-care behaviours.

Benchmarks for inclusion of content in curricula

- Nationally-consistent core values, learning outcomes and principles for learning and teaching content on nurturing and protecting children are adopted for curricula accreditation standards¹¹
- 2. Content on nurturing and protecting children is explicitly linked, across curricula, to content on health and wellbeing across the lifespan
- 3. Nursing and midwifery graduates demonstrate knowledge of and skills in child protection suitable for their level of practice
- 4. Availability and accessibility of support structures for nursing and midwifery students, nurses, and midwives who have experienced abuse and neglect or have been affected by issues of child abuse and neglect encountered in the course of their learning or their practice
- 5. Interdisciplinary approaches to teaching and learning content on nurturing and protecting children are adopted for curricula

6. Regular evaluation of content on nurturing and protecting children takes place and involves academic staff with experience in child protection and family health and representatives from services with relevant specialist expertise.

Explanation of Terms

Child abuse and neglect

Child abuse is an act by parents, caregivers, other adults or older adolescents that endangers a child or young person's physical or emotional health or development. Child abuse can be a single incident, but usually takes place over time. It falls into four main categories: physical abuse, sexual abuse, emotional abuse and neglect.¹²

Child-centred practice

Practice that recognises and respects the rights of the child and that applies the following principles:

- Recognising (and responding to) critical time frames in childhood and adolescence including
 assisting children and young people as early as possible early in the life of the child and
 early in the life of the problem;
- (Incorporating) the developmental needs of children and young people in all interventions;
- Providing children and young people with appropriate opportunities to participate in all aspects of child protection interventions which affect them; and
- Promoting a collaborative approach to the care and protection of children, including the strengthening of networks that are critical to their wellbeing.¹³

It is practice that understands that the philosophy of 'woman-centred care' in midwifery encompasses the needs of the woman's baby. 14

Continuity of care

Care that provides continuity of carer and the 'integration and linkage of components of individualised care across agencies according to individual needs'.¹⁵

Continuity of carer

The ongoing relationship between the child and the carer. It encompasses the care provided to children within families. It also encompasses the care provided to children by health professionals.

More specifically for midwifery, it is 'care by a midwife whom the woman has previously met, feels she has developed a 'relationship' with and feels she 'knows'. 16

Cultural safety

Nursing and midwifery care that is respectful and welcoming of another person's culture and that aims to ensure that the person is safe, that nothing will happen to them, by virtue of their culture. It includes: cultural awareness – 'understanding cultural difference, cultural diversity and an awareness that cultural differences may necessitate a different approach to people of that other culture'; and 'using cross-cultural understanding and perspectives to interpret and assess a child's safety, stability and developmental needs.' ¹⁷

Family

The foundational unit of society – the family is the primary social unit providing continuity of care for children. 'Family' refers to two or more persons who are related in any way – biologically, legally or emotionally. Individuals and families define their families.

Ottawa Charter

Developed by the World Health Organisation in 1986; recognises that improvement in health requires a secure foundation in a number of basic prerequisites including advocacy, enabling and mediation. Health promotion action was defined as including building healthy public policy; creating supportive environments; strengthening community action, re-orientating health services and developing personal skills.'18

Primary health care

Primary health care 'principles encompass equity, access, the provision of services based on need, community participation, collaboration and community-based care. Primary health care involves using approaches that are affordable, appropriate to local needs and sustainable. These principles are outlined in the Ottawa Charter (1986).'19

Woman-centred care

Woman-centred care is a concept that implies that midwifery care:

- Is focused on the woman's individual and unique needs, expectations and aspirations, rather than the needs of institutions or professions;
- Recognises the woman's right to self determination in terms of choice, control and continuity of care;
- Encompasses the needs of the baby, the woman's family, significant others and community, as identified and negotiated by the woman herself;
- Follows the woman between institutions and the community, through all phases of pregnancy, birth and the post natal period; and
- Is 'holistic' addresses the woman's social, emotional, physical, psychological, spiritual and cultural needs and expectations.²⁰

Relationships and strengths-based approaches

Relationship-based approaches focus on the developing collaborative professional relationship between the parent, child and the nurse or midwife. Incorporating a strengths-based approach requires emphasising parents, family and child's strengths (positives), rather than problems (negatives). This encourages the parent, child and family to build on these strengths.

Using a relationship-based approach, the nurse or midwife assists the parent and child through modelling the qualities of healthy relationship development. There is a sharing of power and expertise. The nurse or midwife acts as the facilitator of knowledge rather than as the 'expert' provider of information. There is a pursuit of mutually agreed goals. As in all healthy relationships, there are elements of respectful challenging of beliefs, values and behaviours to ensure the safety of the child and parent. A relationship-based approach requires a dynamic process with active participation of the parents and, if developmentally appropriate, the child.

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- ² Australian Association of Social Work (AASW) (2008) Australian Social Work Education and Accreditation Standards. Statement of specific child wellbeing and protection curriculum content for social work qualifying courses. A2.5
- ³ AASW (2008) Australian Social Work Education and Accreditation Standards A2.1
- ⁴ Forgotten Australians are survivors of institutional care in childhood between 1930 and 1970 in Australia. See http://www.forgottenaustralians.org.au/who/index.html [Accessed 14 December 2009]
- ⁵ Specific requirements for Aboriginal and Torres Strait Islander Children are present in the child protection legislation of some states and territories.
- ⁶ See AASW (2008) Australian Social Work Education and Accreditation Standards. B2.5
- ⁷ MHNET (2008) *Mental Health* Outcomes of Mental Health Content, 4, p. 33.
- 8 MHNET (2008) Mental Health Outcomes of Mental Health Content, 6, p. 35.
- ⁹ MHNET (2008) *Mental Health* Outcomes of Mental Health Content, 8, p. 37.
- ¹⁰ See AASW (2008) Australian Social Work Education and Accreditation Standards. B3.4
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- See Institute of Child Protection Studies 'Principles for Child-Centred Practice': http://www.dhcs.act.gov.au/__data/assets/pdf_file/0016/5614/Child_Centred_practice.pdf
- ¹⁴ See 'woman-centred care' explanation in the Explanation of Terms.
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- ¹⁶ Caroline Homer, Pat Brodie and Nicky Leap (2008) *Midwifery Continuity of Care: a practical guide*, Elsevier, Sydney.
- Adapted using definitions of 'cultural awareness' and 'the lens of culture' from Aboriginal Cultural Competence Framework, http://www.cyf.vic.gov.au/__data/assets/pdf_file/0008/312668/ framework_cultural_support_2008.pdf Accessed 25 November 2009.
- ¹⁸ Homer et al. (2008) Midwifery Continuity of Care, p. 221.
- ¹⁹ Australian Nursing and Midwifery Council (ANMC) (2006) *National Competency Standards for the Midwife* 1st edition. Canberra.
- ²⁰ ANMC (2006) National Competency Standards for the Midwife.

Appendix of Selected Resources Related to Nurturing and Protecting Children in Australia (Links valid at December 2009)

Key National sites

Australian Centre for Child Protection

http://www.unisa.edu.au/childprotection/

Research centre on child protection. Includes links to publications and presentations on child protection including a public health approach to child protection.

Australian Institute of Family Studies

http://www.aifs.gov.au/

Centre for research and information on family wellbeing. Includes links to National Clearinghouses, including National Child Protection Clearinghouse.

Australian Human Rights Commission

http://www.hreoc.gov.au/about/index.html

Policy and education on human rights issues. Includes:

• information on education resources on human rights: http://www.hreoc.gov.au/education/links.html.

Child and Family Welfare Association of Australia

http://www.cafwaa.org.au/

The national peak body for child and family welfare in Australia.

Children of Parents with a Mental Illness

http://www.copmi.net.au/

Information and resources on children of parents with mental health issues, including an e-learning resource 'Keeping Families and Children in Mind.'

Communities and Families Clearinghouse Australia

http://www.aifs.gov.au/cafca/

Information to assist with the planning and delivery of services to children and families in disadvantaged Australian communities. Includes:

• a 'what's new in the field' page with links to new relevant information and resources: http://www.aifs.gov.au/cafca/whatsnew.html

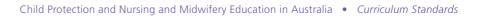
Early Childhood Australia

http://www.earlychildhoodaustralia.org.au/index.php

Information and publications on topics related to the education and care of children 0-8 years.

Institute of Child Protection Studies

http://www.acu.edu.au/about_acu/research/our_research/research_centres_-and-_institutes/institute_of_child_protection_studies/ Research centre on child protection.



National Child Protection Clearinghouse

http://www.aifs.gov.au/nch/about.html

Detailed information, research and resources on child abuse and neglect prevention and child protection. Includes:

- Publications and Resources by topic (includes: 'Understanding child abuse and neglect';
 'Child maltreatment in specific contexts'; 'Prevention'; 'Child Protection Services';
 'Research to Practice'): http://www.aifs.gov.au/nch/topics/index.html?tmm=revrrpp
- 'Curriculum materials on Child Protection Resources': http://www.aifs.gov.au/nch/bib/curriculum.html
- 'Other Australian Clearinghouses': http://www.aifs.gov.au/nch/resources/clearinghouses.html
- Information on Australian Child Protection Legislation: http://www.aifs.gov.au/nch/pubs/sheets/rs14/rs14.html

Legislation on Child Protection in Australia

Australian Institute of Family Studies. Resource Sheet No. 14, October 2009: Australian Child Protection Legislation

http://www.aifs.gov.au/nch/pubs/sheets/rs14/rs14.html

Australian Institute of Family Studies. Resource Sheet No. 3, February 2009: Mandatory Reporting of Child Abuse

http://www.aifs.gov.au/nch/pubs/sheets/rs3/rs3.html

WebLaw

http://www.weblaw.edu.au/index.phtml

Information and links on legislation in Australia by topic. Includes: Children and the Law; and Human Rights.

Child Abuse and Neglect

NSW Government. Human Services and Community Services.

http://www.community.nsw.gov.au/preventing_child_abuse_and_neglect/what_is_child_abuse.html? Explanation of child abuse, including:

- link to 'signs of abuse' http://www.community.nsw.gov.au/preventing_child_abuse_and_neglect/what_is_child_abuse/ signs of abuse.html
- information for mandatory reporters
 http://www.community.nsw.gov.au/preventing_child_abuse_and_neglect/resources_for_mandatory_reporters.html

Victorian Department of Human Services

http://www.cyf.vic.gov.au/child-protection-family-services/library/abuse/what Explanation of child abuse, together with how abuse and neglect can be recognised.

Victorian Department of Human Services, Responding to Child Abuse, 2002.

http://www.cyf.vic.gov.au/__data/assets/pdf_file/0010/334963/cp-responding-to-child-abuse.pdf Resource on identifying and responding to child abuse.

Victorian Department of Human Services, Child Protection Practice Manual. http://www.dhs.vic.gov.au/office-for-children/cpmanual/index.htm Up-to-date resource on child protection in Victoria.

Child-centred Practice

Principles for Child Centred Practice

http://www.dhcs.act.gov.au/__data/assets/pdf_file/0016/5614/Child_Centred_practice.pdf

Children's Rights

Australian Human Rights Commission. Children's Rights http://www.hreoc.gov.au/human rights/children/index.html

International Council of Nurses, 'Rights of Children' http://www.icn.ch/PS E12 RightsChild.pdf

United Nations Convention on the Rights of the Child http://www2.ohchr.org/english/law/crc.htm

Child Protection and Aboriginal and Torres Strait Islander Peoples

Australian Institute of Family Studies. Resource Sheet No. 10, February 2009: Child Protection and Aboriginal and Torres Strait Islander Children http://www.aifs.gov.au/nch/pubs/sheets/rs10/rs10.html

Australian Indigenous HealthInfoNet

http://www.healthinfonet.ecu.edu.au/

Information on Indigenous health to inform practice and policy. Includes information on physical and social determinants of health and on protective strategies and risk factors.

Victorian Department of Human Services. Protocol Between the Department of Human Services Child Protection Service and the Victorian Aboriginal Child Care Agency 2002. http://www.cyf.vic.gov.au/__data/assets/pdf_file/0004/15979/cp-dhs-vacca-protocol-2002.pdf Protocol for culturally appropriate and effective response for Aboriginal Children. Addresses cultural needs of Aboriginal children in relation to child protection issues.

Cultural Safety and Respect

Victorian Aboriginal Child Care Agency. Aboriginal Cultural Competence Framework. October 2008.

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http://www.cyf.vic.gov.au/__data/assets/pdf_file/0008/312668/framework_cultural_support_2008.pdf

NSW Department of Community Services. Working with Aboriginal People and Communities. A Practice Resource. February 2009.

http://www.community.nsw.gov.au/docswr/_assets/main/documents/working_with_aboriginal.pdf

Domestic and Family Violence

Australian Domestic and Family Violence Clearinghouse

http://www.austdvclearinghouse.unsw.edu.au/

Information, research and resources on domestic and family violence. Includes:

• a database of 'good practice' programs and information links to legislation, policies and resources grouped by state and territory:

http://www.austdvclearinghouse.unsw.edu.au/au_resources.html

Violence Intervention Programme (VIP)

http://www.moh.govt.nz/familyviolence

Support and resources to help health professionals develop and implement violence intervention programmes.

Health Policy and Services related to Nurturing and Protecting Children

Commonwealth of Australia, Protecting Children is Everyone's Business: National Framework for Protecting Australia's Children 2009-2020. 2009.

http://www.coag.gov.au/coag_meeting_outcomes/2009-04-30/docs/child_protection_framework.pdf

National policy on child protection. Details of state and territory policies.

NSW Government. Keep Them Safe

http://www.keepthemsafe.nsw.gov.au/

QLD

http://www.childsafety.qld.gov.au/child-protection/index.html

Victoria Every Child Every Chance

http://www.cyf.vic.gov.au/every-child-every-chance

WA The Signs of Safety

http://manuals.dcp.wa.gov.au/manuals/cpm/Pages/03TheDepartmentsChildProtectionFramework-TheSignsofSafetyAssessmentandPlanningFramework.aspx

SA Keeping them Safe

http://www.dfc.sa.gov.au/pub/default.aspx?tabid=283

Tasmania Safe at Home

http://www.safeathome.tas.gov.au/

ACT Keeping Children and Young People Safe

http://www.dhcs.act.gov.au/__data/assets/pdf_file/0017/5660/Web_copy2009_Keeping_Children.pdf

Interagency cooperation for child protection

NSW Government Human Services and Community Services. NSW Interagency Guidelines for Child Protection Intervention.

 $http://www.community.nsw.gov.au/for_agencies_that_work_with_us/child_protection_services/interagency_guidelines_for_child_protection_intervention.html$

Primary Health Care

World Health Organisation – Primary health care

http://www.who.int/topics/primary_health_care/en/ Includes links to related topics, eg. 'social determinants of health' and the Declaration of Alma-Ata

Risk and Protective factors

Strengthening Families Resourcing Parents

http://www.resourcingparents.com/resources/professionals.php Resources for professionals on child protection issues

Strengthening Aboriginal Family Functioning: what works and why?

http://www.innersydney.org. au/uploads/documents/StrengtheningAboriginal families What works and why.pdf

Child Welfare Information Gateway

http://www.childwelfare.gov/preventing/promoting/

US site with information and resources on strengthening families and enhancing protective factors.