

Theories of Change

The essence of Family Preservation is supporting families to achieve change so children and young people (children) can be safely cared for by their parent/s.

Partnering with a parent to make positive behaviour changes can reduce worries about harm and increase their children's safety.

In the context of Family Preservation, this change may reduce the need for a child at risk from entering the care system. It can keep them safely at home, loved by family and immersed in culture. It can support parents to achieve positive change. All of these can:

- improve a child's life for the better
- help a parent see their own strength and value
- in some cases, break the cycle of intergenerational removal.

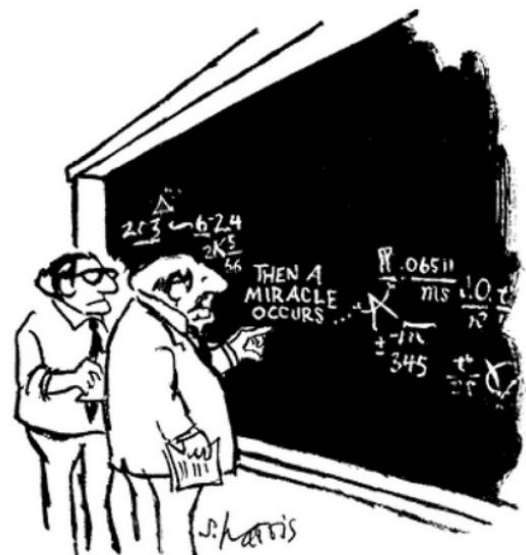
How do you Support this Change to Happen?

The Department of Communities and Justice (DCJ) supports Permanency Support Program (PSP) Family Preservation providers to have the autonomy to design their own approach to supporting families to achieve change.

Wanting to support a parent to make changes, being invested and available, is not enough for families to change.

To make sure casework staff aren't left feeling like the people in the Sidney Harris cartoon (right), there are some evidenced-based methods and tools you can use to help families.

These include a theory of change, understanding the stages of change and motivational interviewing.



"I think you should be more explicit here in step two."

Theory of Change

A 'theory of change' is a method PSP service provider can use to plan, put into action, and evaluate how their programs will help an individual achieve change. For more information, watch this 5-minute video: [What is a Theory of Change?](#)

Bickman (1985) described a theory of change as 'a plausible and sensible model of how something is intended to work'. In the context of Family Preservation services, this would be the actions taken to help a family achieve the change they need to keep their child safely at home.

The [Family Preservation Program Logic \(Program Logic\)](#) is DCJ's Family Preservation theory of change. Each PSP service provider delivering Family Preservation services should either be using the Program Logic or their own theory of change that aligns with it.

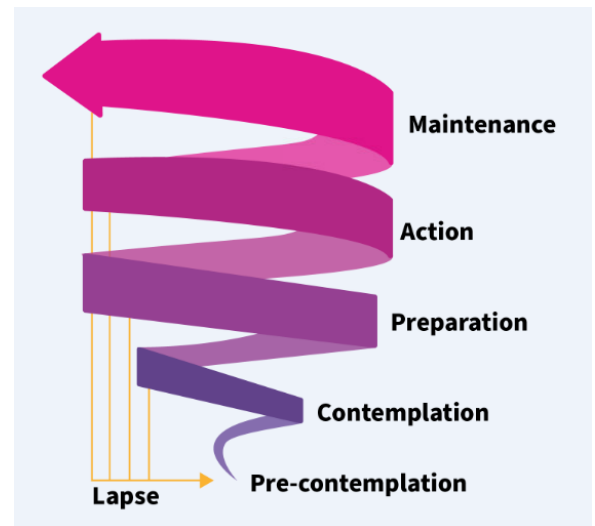
Please see examples of theories of change used in an international child protection context:

- [UNICEF Theory of Change](#)
- [World Vision Theory of Change](#)
- [Building Adult Capabilities to Improve Child Outcomes: A Theory of Change](#) (Harvard University)

The Stages of Change

The Stages of Change model recognises that different people are at different stages in their readiness to change. In order to effectively engage a parent, you must recognise and adapt your casework to meet them at their stage of readiness to change.

The Stages of Change model was developed to explain the process of change in the context of substance use and dependence, but it can also be applied to other behaviours in family preservation work, like men who use violence, alcohol dependence and problem gambling.



Source: adapted from Singer (2009)

The Stages of Change model also recognises lapse and relapse as a normal part of the change process that should be planned for and worked with. For more information see [Stages of Change Model](#).

Case Study: Jimmy, Cho, Kwan and Danny

Jimmy is a 25-year-old man. His parents emigrated from South Korea when he was 8 and he had challenges learning English and adjusting to school life in Australia. Jimmy left school in year 10 and has worked sporadically in labouring and construction jobs. Jimmy's intermittent drug dependence has been a barrier to securing stable employment. Jimmy has two children with his girlfriend Cho, a 3-year-old daughter Kwan and a 14-month-old son Danny. Jimmy and Cho have been referred to your Family Preservation service for support with parenting skills, drug dependence and Jimmy's use of violence against Cho and the children.

To engage Jimmy meaningfully, you will need to understand which stage of change Jimmy is at with his drug use and use of violence. Below are examples of what you might expect to see and hear from Jimmy at different stages in his change journey.

Pre-contemplation:

- Jimmy might be absent during your home visits, or reluctant to talk to you if he is home.
- Jimmy might say things like 'I'm not perfect, but there's nothing that I really need to change' or 'I'm not worse than other blokes, why are you hassling me?'

What you can do: Focus on building the relationship and increasing his awareness of the problem rather than on eliciting change. Invite Jimmy to think about how Kwan and Danny experience his behaviour. 'What do you think it's like for Kwan and Danny when you come home high and yell at Cho?'

Contemplation:

- Jimmy may begin to engage more, but his engagement will be inconsistent, or he may appear insincere. He may commit to do something, but then not follow through, give reasons not to change or doubt his ability.
- Jimmy might say 'I know my weed use is a problem, but I've tried quitting before and nothing works'.

What you can do: be curious, highlight using reflections the differences between his values and hope for his kids and his current behaviour. For example, 'You get angry when Kwan hits Danny, so you hit her back. I wonder what this teaches Kwan about hitting?'

Preparation:

- Jimmy might start planning, preparing or making small steps towards change, but may not have fully committed or developed a plan. Jimmy may continue to use some problematic behaviours, but he will also have some understanding of the impact of these behaviours
- Jimmy might say 'If I don't stop flying off the handle, my kids will always be scared of me. I would hate that. I need to change.'

What you can do:

- Help Jimmy plan to set achievable goals and first steps.

- Be curious about what will work for him and try to mobilise existing support networks or find supports that are suited to his individual needs. ‘It sounds like you want to find new ways to manage your frustrations so you can help your kids and Cho feel safe. What do you think you need to do to learn new strategies? How can I help?’

Action:

- Jimmy is enthusiastic, consciously choosing different behaviours, confronting challenges, developing new skills and open to receiving help.
- Jimmy might say ‘I haven’t hit the kids in a few weeks. It’s been really hard not to hit them when they are pushing my buttons, it takes all I’ve got to leave the house and cool down’.

What you can do: Help Jimmy identify and connect specific behaviour changes with positive changes in his life and relationship with his kids and Cho. Highlight how his kids have experienced the change ‘I’ve noticed that Kwan and Danny were really excited when you got home from work today and wanted to be close to you. What changes have you noticed?’ It also important to help Jimmy take responsibility for violence as he develops through the change cycle, consider saying ‘Even though you started to think of things to justify hitting the kids, you still made a choice to keep them safe and not to use violence. I wonder what made you choose to think differently in that moment?’

Maintenance:

- Jimmy has committed to and maintained changes for some time. You are likely to see improvements in his relationship with Cho and in how the kids experience him.
- Jimmy will be able to tell you how things are different from before and how he is maintaining change. He might talk about the impact of his past behaviour on his family and take responsibility for it.

What you can do:

- You are likely starting to plan for the family's exit from your Family Preservation service. It is important that you have conversations about what things will look like for Jimmy and the family without your service involved.
- Revisit where the family can go for support, reinforce the support network already identified and link the family with support people and services if needed.
- Talk to Jimmy about the possibility of setbacks (lapse or relapse) and talk through strategies, actions, and places he can go for support if things aren't going well.
- Encourage Jimmy to problem solve: 'What else do you think you could do if taking some time outside isn't working?'

Lapse and Relapse

- Lapse and relapse are a natural part of the change cycle. It is highly likely that Jimmy will lapse or relapse at some point and this is likely to be very frustrating and disappointing for him, potentially devastating for his family, and hard for you as a professional supporting the family.

What you can do:

It is important to remember that lapse is a common part of change, so don't overreact or withdraw your support. You can use it as an opportunity to review safety for the children and the change plans in place for Jimmy. At this stage you need to balance holding Jimmy accountable for the impact of his behaviour on Cho, Kwan and Danny, with supporting him to process feelings of shame.

- Acknowledge the impact of Jimmy's behaviour on Cho, Kwan and Danny, as well as any negative feelings or consequences.
- Be non-judgemental and curious about what triggered the behaviour. Help Jimmy identify and re-affirm his motivations for change and any barriers that might stop him moving back into action and maintenance.
- Talk about his coping strategies and why they did not work. Brainstorm new strategies and set new goals.

- ‘I wonder what was happening for you when you smacked the kids? What could you have done differently?’

Understanding Lapse and Relapse

Lapse and relapse are a predictable and expected part of behaviour change. Relapse is when a person continues their behaviour and no longer tries to change. A lapse is when a person temporarily returns to past behaviour they are trying to change.

A lapse does not mean a parent is hopeless, bad, lazy or not trying. During a period of lapse or relapse, a parent you are supporting needs you to stay engaged, non-judgemental, and curious.

Lapse and relapse never ‘just happen’; it is always a process. However, not all people who are trying to sustain change from alcohol and other drugs (AOD) or problematic behaviours, like gambling or using violence, are consciously aware of their triggers. This is made more confusing because the process can happen very quickly. It is important to explore occasions of lapse with the parent you are supporting, so that they can gain an understanding of how lapse can (and has) occurred. Often, this will be because they have made seemingly unrelated decisions which have put them into high-temptation or high-risk situations.

Some useful tools and strategies for you to consider using when supporting a parent through lapse are:

- Chain Analysis provides strategies for helping a parent understand the chain of events that occurs prior to a lapse or relapse.
- Psychoeducation (reality testing) provides strategies for helping a parent understand automatic thoughts and to challenge these prior to lapse or relapse.
- Re-framing finds ‘another way’ to look at a problem that makes it more solvable.
- Externalising conversations can separate the problem from the person.
- Involving a parents’ network to support safety and change

Motivational Interviewing

Motivational Interviewing is an approach that requires casework staff to engage in genuine and curious conversation with families and carers. It has a good evidence-base

for helping people to change, especially in relation to alcohol and other drugs. When used in a child protection context, the technique encourages children and parents to reflect on what is creating the risks to the child in their family and identify what supports are needed for change. Skills of active listening and reflective questioning encourage change talk and allow you to assess a parent's capacity for change and understanding of the effect of risk on their child. The core skills of motivational interviewing are known as OARS and developing discrepancy.

The OARS technique is used to prompt information and encourage clients to open up and tell their story to casework staff.

O	Open-ended questions	<p>Encouraging families to elaborate on their story. Open-ended questions are used to provide forward momentum and allow practitioners to elicit change talk.</p> <p><i>'Tell me more about....'</i></p> <p><i>'Tell me about a time when you have made a change – what was happening to you? What was different for your kids?'</i></p> <p><i>'What happened last time you left Rob?'</i></p>
A	Affirmations	<p>Listen to the parent and family's strengths and celebrate these by calling positive attention to them. This action helps parents to reframe their experiences in a positive light and builds hope and the opportunity for change.</p> <p><i>'It's really important that the kids know their extended family, especially your mum and dad. This gives you some extra support too.'</i></p> <p><i>'You know what you want for the future and what you want for your kids as they grow up.'</i></p>
R	Reflections	<p>Involves either repeating the parent's words back to them to acknowledge you have listened and to check your understanding or encouraging the parent to listen actively to their own dialogue. More complex reflection involves listening for the parent's messages within their conversations and distilling these messages into your own words.</p> <p><i>'It sounds like talking about these things with (DCJ or agency) something you have never done before...'</i></p> <p><i>'All of this is really hard and overwhelming; sometimes it feels like you just want to run away?'</i></p>

S	Summary	<p>Concluding the conversation to re-cap what has been discussed, identify change talk, and summarise any progress and themes.</p> <p><i>‘Let’s see if I got all of the information right and then we can talk about where to next...’</i></p> <p><i>‘So, your important goals are [...] but you’re not sure how to get these done without Rob in the picture?’</i></p>
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Developing discrepancy involves highlighting the discrepancies between the parent’s beliefs and values and their current behaviour. This is likely to occur when parents have been able to identify why they are ambivalent about changing.

Here are some examples of things to say to develop discrepancy in conversation:

‘You like the way speed helps you stay on top of things but it’s difficult for you to control your temper and this is scary.’

‘It’s nice having Rob in the home as he helps with the kids but when he yells, takes your car keys or phone or is violent, you worry about how this affects the kids.’

‘You like the freedom of being able to stay at your boyfriend’s place and see friends, but it makes it difficult to manage the kids and their behaviour.’

‘What things might you miss if you make changes? What are the positives you might notice if you make changes?’

The discrepancy developed in conversations can create the shift required for parents to think and talk about change. Change is possible when parents can discuss the reasons why change would be positive, rather than focusing on resistance and fear.

Additional Resources

<https://www.youthadtoolbox.org.au/4-build-awareness-prevent-lapse-relapse>

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