

# Family Relationships Quarterly

THE NEWSLETTER OF THE AUSTRALIAN FAMILY RELATIONSHIPS CLEARINGHOUSE



## Welcome

Elly Robinson, AFRC Manager | August 2011

Welcome to this edition of *Family Relationships Quarterly*, the newsletter of the Australian Family Relationships Clearinghouse. This will be the last newsletter published under the AFRC banner as we move into a period of change for the AFRC and a number of other AIFS clearinghouses. To stay informed about the changes, visit the AFRC website, sign up to the AFRC-alert <[www.aifs.gov.au/afrc/afrcalert.html](http://www.aifs.gov.au/afrc/afrcalert.html)>, or contact the AFRC.

In this edition, Professor Bryan Rodgers provides comments on AFRC Briefing No. 17, *Family Violence: Towards a Holistic Approach to Screening and Risk Assessment in Family Support Services*. Professor Rodgers draws on some lessons from other sectors to offer some further insight into this issue.

The following two articles look at issues that are pertinent for two particular marginalised groups and their families. Dr Daryl Higgins provides an overview of issues related to past adoption practices, including the associated grief, loss and trauma for mothers, their offspring and extended families. Dr Catherine Flynn outlines the results from a qualitative study with incarcerated mothers and their adolescent children.

In our trends and statistics articles, Lixia Qu and Ruth Weston update one of our most popular articles written in 2006, examining trends in couple dissolution. Maggie Yu examines the links between parenting efficacy and a range of factors, including community and financial support.

Robyn Parker and Amanda Jones outline a successful project that embedded an evaluation consultancy into Berry Street, an organisation based in Melbourne that provides services to disadvantaged children, young people and families. This collaboration helped to form a plan for the ongoing evaluation and improvement of programs and services.

We hope you enjoy this edition. Feedback, as always, is welcome by contacting the AFRC <[www.aifs.gov.au/afrc/contact.php](http://www.aifs.gov.au/afrc/contact.php)>.



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The Australian Family Relationships Clearinghouse (AFRC) is an information and advisory unit funded by the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs. The Clearinghouse aims to enhance family relationships across the lifespan by offering a resource and a point of contact for providers of family relationship and support services, policy makers and members of the research and broader communities. The Clearinghouse collects, synthesises and disseminates information on family relationships and facilitates networking and information exchange.

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# Screening for family violence

## Some comments relating to *Family Violence: Towards a Holistic Approach to Screening and Risk Assessment in Family Support Services* by Elly Robinson and Lawrie Moloney

Bryan Rodgers

Robinson and Moloney (2010) have raised and discussed several important issues around screening for and assessment of family violence. Family violence is widely acknowledged as an important matter for research, policy, intervention and prevention, but many unanswered questions remain regarding its identification and measurement. It is helpful to see what lessons can be learned from other areas where screening has been problematic but which have longer histories of trying to meet challenges. The following comments are structured around five themes that have emerged in the measurement of other constructs of a psychosocial nature:

- Screening for what?
- The continuum of severity and where to draw the line.
- How screening tools are applied.
- Measures of signs and symptoms versus measures of functioning.
- The comparative nature of reliability and validity.

### Screening for what?

Robinson and Moloney (2010) are clear from the outset that there is no single accepted definition of family violence and that this construct can mean different things to different people. This can be an especially pertinent issue if screening tools are developed by professionals who hold a different view of violence from the individuals who will be assessed using those tools. This is not a matter of “correct” and “incorrect” views but is a reflection of a fundamental feature of screening for many psychosocial constructs where there is no gold standard against which measures can be assessed. In many instances, it is more appropriate to acknowledge from the outset that we are not dealing with a single discreet entity and that the task of screening may involve the identification of two or more aspects of family violence. This, in turn, may or may not require more than one screening tool, and formal enquiry is needed to find that out.

To draw a parallel in the field of mental health assessment, the distinction between depression and anxiety has long been an area of conceptual debate and empirical investigation (Eaton & Ritter, 1988; Feldman, 1993). There are established criteria for identifying anxiety disorders and depressive disorders and many measures are available that could serve as screening instruments for one or other category of disorder (Goldberg, Bridges, Duncan-Jones, & Grayson, 1987). In practice, however, screening tools that identify depression are fairly good for identifying anxiety disorders and vice versa (Andrews & Slade, 2001; Gill, Butterworth, Rodgers, & Mackinnon, 2007). The co-existence of different disorders in the same individuals is part of the reason behind this (Andrews, Henderson, & Hall, 2001). We might expect something similar if we considered sexual violence and physical violence as separate constructs, and we need research evidence to determine whether separate tools are needed to identify each.

Overall, the absence of a gold standard in any field signals the need to consider multiple definitions and constructs, and to develop and test alternative approaches to screening for different outcomes.

### Continuum of severity

Even when we hold a clear view of a unitary concept, it is unusual for psychosocial attributes to have just two states of being “present” or being “absent”; rather we are typically dealing with a continuum where something ranges from being trivial through to being prominent and serious. Reflecting this continuum, measurement tools typically provide levels of severity. This can pose a problem in the context of service delivery where choices are required between discrete service responses, such as taking no action, conducting further follow-up, or referral to a specialist service. Often, there is an arbitrary point at which such decisions are made. Where this is formalised in relation to a screening assessment, decision-making inevitably represents a trade-off between sensitivity and specificity. Sensitivity is the

likelihood of identifying a problem when it is known to exist and specificity is the likelihood of correctly categorising that a problem does not exist. We can increase sensitivity very simply by applying a lower threshold for decision making, but the trade-off is such that this will necessarily lead to a decrease in specificity. In a service context, providers would be flooded with clients, including many who had little need for help. The dilemma in constraining the number of referrals (i.e., increasing specificity) is that this would decrease sensitivity and some families needing help would not get it.

The crunch for the sensitivity—specificity trade-off is where to draw the line. Even if the accuracy of screening is known precisely, this decision depends on the costs of incorrect decisions, that is, the false positive findings (that violence occurred when in fact it did not) and the false negative findings (that violence did not occur when in fact it did) highlighted by Robinson and Moloney (2010). Where to draw the line is further influenced by the benefits arising from true positives (correctly identifying people who need help) and from true negatives (correctly identifying people who don't need help), although the latter is typically of no consequence. In many settings, we do not know the actual value of the relevant costs and benefits but it could be instructive to use a range of guestimates and observe how this informs the decision as to where to draw a line for the purpose of screening.

## How screening tools are applied

There is a tendency to view the reliability and validity of a measurement instrument as inherent attributes of the tool itself, but there is ample evidence to show that the way in which a tool is applied can change its measurement attributes. The same measure (ostensibly) can yield different information if used as part of face-to-face interaction, if administered in a self-completion format, or if presented in an online or computer scripted format. Many research tools that were once considered to require sensitive face-to-face interviewing are now delivered by computer administration as the preferred mode. Estimates of substance use (legal and illicit) differ substantially according to the method by which information is collected (Booth-Kewley, Larson,

& Miyoshi, 2007; Richman, Weisband, Kiesler, & Drasgow, 1999). This is an issue that requires fuller investigation in the field of family violence.

As well as the costs and benefits for clients relating to the sensitivity and specificity of screening, there are important economic costs to services arising from the screening process. A similar trade-off may operate in this respect; organisations utilising less staff time for screening an individual client/family may then be able to screen more frequently and, therefore, better monitor the ongoing risk pointed out by Robinson and Moloney (2010). Of course, it is essential to consider any distress to clients during assessment and how support is provided where this occurs (and not just the accuracy of elicited information), in keeping with the concerns for safety emphasised by Robinson and Moloney (2010). This may involve the collection of information in a private way but with appropriate monitoring and follow up of responses.

## Measures of signs and symptoms versus measures of functioning

Drawing a parallel with the measurement of mental health problems is again illuminating in relation to the issue of using functioning in personal and social roles as a means of assessment. Most mental health measures are based on the clinical signs and symptoms of specific disorders. However, there has been increasing recognition of the significance of mental health problems in terms of the impact on social functioning and quality of life (and, indeed, this is reflected in the current diagnostic criteria of most disorders). Assessment of functioning provides an alternative or complementary approach to the basis of assessment in that the impact on various roles (parenting, employment etc.) and the level of personal distress (including fear) can be as useful a guide to the need for support as is information on events and features of violent behaviour.

## The comparative nature of reliability and validity

One notable weakness in the literature surrounding many areas of psychosocial measurement is the tendency to fall back on such statements as “measure

X is a reliable and valid measure of construct A". There is no pre-determined point at which an individual measure can be determined as "reliable" or "valid" and even if that were possible it is probably not the information we are really after for either research or service-delivery uses. Usually, what we need to know is the relative performance of the different instruments available to us; that is, whether measure X is a more valid indicator than measure Y for a particular purpose. Across a wide range of subject areas, it is remarkable how few studies compare the usefulness of different measures, and most published studies report on a single instrument (Rodgers, Pickles, Power, Collishaw, & Maughan, 1999). Again, drawing on the mental health field as an example, there are just sporadic reports of studies that directly compare the performance of different measures in similar circumstances (Furukawa, Kessler, Slade, & Andrews, 2003; Gill et al., 2007; Schmitz, Kruse, Heckrath, Alberti, & Tress, 1999). This is something that should be encouraged in the family violence field as, ultimately, it is through comparative studies that informed choices can be made of which instruments are better suited to particular needs.

## Conclusion

Screening for and assessment of family violence is in a stage of early development. "Further research is needed ..." is something of a cliché in these circumstances. Hopefully, we can add to that time-worn statement some pointers as to the direction in which future research should progress. The five themes covered above are not exhaustive; there are other themes to be explored and there are other points that could have been raised within the five mentioned. However, they serve as a rough guide, based on previous experience in comparable fields. If there is a unifying message across the five themes, it is that screening and assessment in psychosocial fields is not about the search for abstract and perfect measures of things well defined, but is essentially about the development of tools that are useful for expressed purposes. Professionals in the field of family violence have key roles in stipulating their requirements for such tools and working with those who have the technical skills to construct and refine the necessary measures.

## References

- Andrews, G., Henderson, S., & Hall, W. (2001). Prevalence, comorbidity, disability and service utilisation: Overview of the Australian National Mental Health Survey. *British Journal of Psychiatry*, *178*, 145–153.
- Andrews, G., & Slade, T. (2001). Interpreting scores on the Kessler Psychological Distress Scale (K10). *Australian and New Zealand Journal of Public Health*, *25*, 494–497.
- Booth-Kewley, S., Larson, G. E., & Miyoshi, D. K. (2007). Social desirability effects on computerized and paper-and-pencil questionnaires. *Computers in Human Behavior*, *23*, 463–477.
- Eaton, W. W., & Ritter, C. (1988). Distinguishing anxiety and depression with field survey data. *Psychological Medicine*, *18*, 155–166.
- Feldman, L. A. (1993). Distinguishing depression and anxiety in self-report: Evidence from confirmatory factor analysis on nonclinical and clinical samples. *Journal of Consulting and Clinical Psychology*, *61*, 631–638.
- Furukawa, T. A., Kessler, R. C., Slade, T., & Andrews, G. (2003). The performance of the K6 and K10 screening scales for psychological distress in the Australian National Survey of Mental Health and Well-Being. *Psychological Medicine*, *33*, 357–362.
- Gill, S. C., Butterworth, P., Rodgers, B., & Mackinnon, A. (2007). Validity of the Mental Health Component Scale of the 12-item Short-Form Health Survey (MCS-12) as measure of common mental disorders in the general population. *Psychiatry Research*, *152*, 63–71.
- Goldberg, D. P., Bridges, K., Duncan-Jones, P., & Grayson, D. (1987). Dimensions of neuroses seen in primary-care settings. *Psychological Medicine*, *17*, 461–470.
- Richman, W. L., Weisband, S., Kiesler, S., & Drasgow, F. (1999). A meta-analytic study of social desirability distortion in computer-administered questionnaires, traditional questionnaires, and interviews. *Journal of Applied Psychology*, *84*, 754–775.
- Robinson, E., & Moloney, L. (2010). *Family violence: Towards a holistic approach to screening and risk assessment in family support services* (AFRC Briefing Paper No. 17). Melbourne: Australian Family Relationships Clearinghouse, Australian Institute of Family Studies.
- Rodgers, B., Pickles, A., Power, C., Collishaw, S., & Maughan, B. (1999). Validity of the Malaise Inventory in general population samples. *Social Psychiatry and Psychiatric Epidemiology*, *34*, 333–341.
- Schmitz, N., Kruse, J., Heckrath, C., Alberti, L., & Tress, W. (1999). Diagnosing mental disorders in primary care: The General Health Questionnaire (GHQ) and the Symptom Check List (SCL-90-R) as screening instruments. *Social Psychiatry and Psychiatric Epidemiology*, *34*, 360–366.

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## Current trauma

### The impact of adoption practices up till the early 1970s

Daryl Higgins

Although reliable figures are not available, in the decades prior to the mid-1970s, it was common in Australia for babies of unwed mothers to be adopted. Understanding the grief, loss and ongoing trauma associated with past practices is essential to be able to provide appropriate services to meet the needs of those affected.

Over the past century, adoption practices in Australia—and society's responses to unwed preg-

#### Box 1: A new national research study on the service response to past adoption practices

On 4 June 2010, the Community and Disability Services Ministers' Conference (CDSMC) announced that the Ministers had agreed to a joint national research study into past adoption practices, to be conducted by the Australian Institute of Family Studies (AIFS). The focus of this study will be on understanding current needs and information to support improved service responses. It is anticipated that this will be the largest study on the impact of past adoption practices ever conducted in this country. The aim of the research study is to utilise and build on existing research and evidence about the extent and impact of past adoption practices to strengthen the evidence available to governments to address the current needs of individuals affected by past adoption practices.

Information will be collected using an online survey, hard-copy surveys and in-depth interviews, integrating results from across the different elements of the study.

The study will commence in mid-2011, to be completed by mid-2012.

For more information, see: <[www.aifs.gov.au/pastadoptionpractices](http://www.aifs.gov.au/pastadoptionpractices)>.

This study will complement the work of the History of Adoption Project at Monash University, which is focused on "explaining the historical factors driving the changing place, meaning and significance of adoption", particularly through its collection of oral histories. See: <[arts.monash.edu.au/historyofadoption](http://arts.monash.edu.au/historyofadoption)>.

nancies and single motherhood—have undergone considerable changes. Until a range of social, legal and economic changes in the 1970s, unwed (single) women who were pregnant were encouraged—or forced—to "relinquish" their babies for adoption. The shame and silence that surrounded pregnancy out of wedlock meant that these women were seen as "unfit" mothers. The practice of "closed adoption" was seen as the solution—where the birth identities of adopted children were effectively erased to allow the children's identification with their new adopted family. Mothers were not informed about the adoptive families, and the very fact of their adoption was usually kept secret from the children (see Swain & Howe, 1995).

#### History of adoption laws and policies

Understanding the true extent of past practices, or its ongoing effects, is problematic. There are no accurate data on the number of Australians who have been affected (Higgins, 2011). There is a wide range of people who may be affected by past adoption practices, including:

- mothers;
- the adopted children;
- fathers (anecdotal evidence from case studies suggests that often mothers knew who the fathers were, including boyfriends and even husbands);
- the mother's family (who may have failed to provide support or actively demanded relinquishment, silence and censure);
- subsequent partners of the mothers;
- siblings; and
- the adoptive family.

The range of people involved suggests therefore the potential for wide-ranging impacts, including the possibility of the effects of past adoption practices on these individuals in turn "rippling" through to others, including other children and family members. Commentators, professional experts, researchers and parliamentary committees have all accepted that past adoption practices were far from ideal, had the potential to do damage, and often did.

## Box 2: Legal and policy milestones regarding adoption and single mothers in Australia

- Legislation on adoption commenced in Western Australia in 1896, with similar legislation in other jurisdictions following.
- Before the introduction of state legislation on adoption, “baby farming”<sup>\*</sup> and infanticide was not uncommon.
- Legislative changes emerged from the 1960s that enshrined the concept of adoption secrecy and the ideal of having a “clean break” from the birth mother.
- The Council of the Single Mother and her Children (CSMC) was set up in 1969, which set out to challenge the stigma of adoption and to support single and relinquishing mothers.
- The Commonwealth Government introduced the Supporting Mother’s Benefit in 1973, coinciding with a rapid decline in adoptions from the peak of 1971–72.
- The status of “illegitimacy” disappeared in the early 1970s, starting with a Status of Children Act in both Victoria and Tasmania in 1974 (in which the status was changed to “ex-nuptial”).
- Abortion became allowable in most states from the early 1970s (the 1969 Menhennitt judgement in Victoria and 1971 Levine judgement in NSW).
- Further legislative reforms started to overturn the blanket of secrecy surrounding adoption (up until changes in the 1980s, information on birth parents was not made available to adopted children/adults).
- Beginning with NSW (in 1976), registers were established for those wishing to make contact (both for parents and adopted children).
- In 1984, Victoria implemented legislation granting adopted persons over 18 the right to access their birth certificate (subject to mandatory counselling). Similar changes followed in other states (e.g., NSW introduced the Adoption Information Act in 1990).
- By the early 1990s, legislative changes in most states ensured that consent for adoption had to come from both birth mothers and fathers.
- The majority of local adoptions are now “open”.

\* “Baby farming” refers to the provision of private board and lodging for babies or young children at commercial rates, a practice that was often abused for financial gain, including cases of serious neglect and infanticide.

## Trauma

As noted by Connor and Higgins (2008), many people who experience potentially overwhelming or horrific life events appear to adapt, and survive without developing a psychiatric disorder or other disability. But despite the capacity that humans have to adapt and survive, these “traumatic experiences” can so profoundly affected people that “the memory of one particular event comes to taint all other experiences” (van der Kolk & McFarlane, 1996, p. 4). As a diagnostic category, post traumatic stress disorder (PTSD) “created an organized framework for understanding how people’s biology, conceptions of the world, and personalities are shaped by experience” (van der Kolk & McFarlane, 1996, p. 4). PTSD was a way of recognising the effects of trauma on the veterans of the Vietnam War, but there was growing

recognition that similar stress reactions can be seen in response to other traumatic experiences, including childhood sexual abuse and adult rape. There are similar parallels in relation to women’s experience of past adoption practices.

Much of the research and case-studies have focused on the issues of grief and loss experienced by these mothers, but experiences may be better understood through this lens of “trauma”. For example, Higgins (2010) noted that issues relating to consent and coercion point to some of the reasons why trauma may be evident. These issues include:

- administration of high levels of drugs to the mother in the perinatal period (including pain relief medication, sedatives and a hormone that suppresses lactation) that were believed to affect her capacity to consent;

- not allowing the mother to see the baby (active shielding with a sheet or other physical barrier during birth, or removing the baby from the ward immediately after birth);
- withholding information about the baby (e.g., gender, health information, or even whether the baby was a live birth);
- discouraging the mother from naming the baby;
- bullying behaviour by consent takers (seen as the “bastions of morality” who are protecting “good families”);
- failure to advise the mother of her right to rescind the decision to relinquish;
- failure to adequately obtain consent from the mother (being too young to be able to give consent interactions with other issues raised above that impaired the mother’s ability to give fully informed consent; consent given while under the influence of drugs; not being fully informed of rights etc.);
- treating the mothers differently from married women—with social workers and medical/nursing staff making assumptions that all unwed mothers’ babies would be adopted;
- abandonment by their own mothers/families;
- the closed nature of past adoption practices (secrecy, and the “clean break” theory);
- assumption of a married couple’s entitlement to a child (adoption was a mechanism for dealing with the joint “problem” of illegitimacy and infertility); and
- experimentation on newborn babies with drugs, with children dying or being adopted without any follow-up of these experiments.

One issue of particular importance is the trauma of the separation of mother and child. Mothers—particularly those who have not had any contact—continue to be traumatised by the thought that their child grew up thinking that they were not wanted. In the words of one mother: “It wasn’t the children who were not wanted. Mothers weren’t wanted because they were unmarried” (cited in Higgins, 2010, p. 13).

The grief and trauma is seen as “unresolved”, due to the silence surrounding “closed” adoption that prevented the mother from being able to mourn her

loss (Goodwach, 2001; Rickarby, 1998). For mothers, the ongoing silence means knowing that her child is out there, wondering how they are, and knowing that there is a possibility of reunion—not the “severed bond” as promised by the clean break theory that shrouded the event in silence (Iwanek, 1997). In describing the grief and trauma, many authors have drawn on related bodies of research, using recent infant–mother attachment research to support their contention that separation causes emotional damage to both mother and child (e.g., Cole, 2009). It is somewhat ironic that earlier research in this same field (e.g., Bowlby, 1969) was used to justify the practices of the time (i.e., not allowing the child to bond with the birth mother so as to provide a “clean break” that encourages bonding with the new adoptive parents).

## Time (does not) heal all wounds

Contrary to the popular myth that “time heals all wounds”, one theme that was fairly consistent across the different studies and methodologies reviewed by Higgins (2011) was the notion that the pain and distress of mothers’ experiences of adoption did not just “go away” with the passage of time. In his qualitative study of women recruited through a support group for relinquishing mothers, Condon (1986) found that “the majority of these women reported no diminution of their sadness, anger and guilt over the considerable number of years which had elapsed since their relinquishment” (p. 118). However, the healing effect of time is exactly what practitioners expected during that period.

Reinforcing the notion that the feelings do not just “go away”, on the basis of his data from adoption information service users, P. Swain (1992) claimed that most birth mothers “go on wondering and worrying about their child for the rest of their lives. For almost all, the contact with their child brings immense relief” (p. 32).

In a recent qualitative study with a limited, non-representative sample, Gair (2008) observed the feelings of powerlessness, low self-worth, depression and suicidal feelings/behaviours in people affected by past adoption practices in Australia, including adoptees, birth mothers, a birth father

and an adoptive mother. However, the extent of such effects in a representative sample has not been measured.

## Conclusion

As past adoption practices cannot be “undone”, one of the steps in the journey for both mothers and children given up for adoption is the choice around reunion. Given the variation in responses provided in the case study literature, and the absence of any systematic empirical evidence, this is an area where further research would be of particular value. Services attempting to support those affected—including professional counsellors, agencies and support groups—would all benefit from a greater understanding of typical pathways through the reunion process, estimates of the number of reunions that have occurred, the perspectives of those involved, and factors that are associated with positive and negative reunion experiences.

Apart from these issues relating to reunion, there are other ongoing issues for mothers affected by past adoption practices, including problems with:

- personal identity (the concept of “motherhood” and self-identity as a good mother);
- relationships with others, including husbands/partners, subsequent children;
- connectedness with others (problematic attachments); and
- ongoing anxiety, depression and trauma (Higgins, 2011).

The needs identified by writers in this field are consistent with the broader theoretical and empirical literature on other forms of trauma, such as the field of child abuse and neglect or adult sexual assault (Connor & Higgins, 2008; van der Kolk & McFarlane, 1996). As with other groups who have experienced pain and trauma, having society recognise what has occurred (i.e., naming it, and understanding how it occurred and its impact) is an important element in coping with and adjusting to the deep hurt they have experienced.

## References

Bowlby, J. (1969). *Attachment: Volume 1. Attachment and loss*. London: Hogarth.

- Cole, C. A. (2009). *The thin end of the wedge: Are past draconian adoptive practices re-emerging in the 21st century? Public submission to the National Human Rights Consultation*. Retrieved from <[www.humanrightsconsultation.gov.au/www/nhrcc/submissions.nsf/list/298F895A0A1C6D37CA2576240003405F/\\$file/Christine%20Cole\\_AGWW-7T29E8.pdf](http://www.humanrightsconsultation.gov.au/www/nhrcc/submissions.nsf/list/298F895A0A1C6D37CA2576240003405F/$file/Christine%20Cole_AGWW-7T29E8.pdf)>.
- Condon, J. T. (1986). Psychological disability in women who relinquish a baby for adoption. *Medical Journal of Australia*, *144*, 117–119.
- Connor, P. K., & Higgins, D. J. (2008). The “HEALTH” Model – Part 1: Treatment program guidelines for Complex PTSD. *Sexual and Relationship Therapy*, *23*(4), 293–303.
- Gair, S. (2008). The psychic disequilibrium of adoption: Stories exploring links between adoption and suicidal thoughts and actions. *Australian e-Journal for the Advancement of Mental Health*, *7*(3), 1–10.
- Goodwach, R. (2001). Does reunion cure adoption? *Australian and New Zealand Journal of Family Therapy*, *22*(2), 73–79.
- Higgins, D. J. (2011). Unfit mothers ... unjust practices? Key issues from Australian research on the impact of past adoption practices. *Family Matters*, *87*, 56–67.
- Higgins, D. J. (2010). *Impact of past adoption practices: Summary of key issues from Australian research. Final report to the Department of Families, Housing, Community Services and Indigenous Affairs*. Canberra: Department of Families, Housing Community Services and Indigenous Affairs. Retrieved from <[fahcsia.gov.au/sa/families/pubs/past\\_adoption/Pages/default.aspx](http://fahcsia.gov.au/sa/families/pubs/past_adoption/Pages/default.aspx)>.
- Iwanek, M. (1997). Healing history: The story of adoption in New Zealand. *Social Work Now*, *8*, 13–17.
- Rickarby, G. (1998). Adoption grief: Irresolvable aspects. *Separation, reunion, reconciliation: Proceedings of the Sixth Australian Conference on Adoption, Brisbane, June 1997* (pp. 54–58). Stones Corner, Qld: J. Benson for Committee of the Conference.
- Swain, P. (1992). Adoption information services: Myths and realities. In P. Swain & S. Swain (Eds.), *The search of self: The experience of access to adoption information* (pp. 25–37). Sydney: Federation Press.
- Swain, S., & Howe, R. (1995). *Single mothers and their children: Disposal, punishment and survival in Australia*. Oakleigh, Vic: Cambridge University Press.
- van der Kolk, B. A., & McFarlane, A. C. (1996). The black hole of trauma. In B. A. van der Kolk, A. C. McFarlane, & L. Weisaeth (Eds.), *Traumatic stress: The effects of overwhelming experience on mind, body, & society* (pp. 3–23). New York: Guilford.

Daryl Higgins is Deputy Director (Research) at the Australian Institute of Family Studies. This article is based on a report, commissioned by the Department of Families, Housing, Community Services and Indigenous Affairs (Higgins, 2010), and available at: <[fahcsia.gov.au/sa/families/pubs/past\\_adoption/Pages/default.aspx](http://fahcsia.gov.au/sa/families/pubs/past_adoption/Pages/default.aspx)>. The report has also been reprinted in the *Australian Journal of Adoption*, *2*(2), available at: <[www.nla.gov.au/openpublish/index.php/aja/issue/view/142/showToc](http://www.nla.gov.au/openpublish/index.php/aja/issue/view/142/showToc)>.

# Responding to the children of women in prison

## Making the invisible visible

Catherine Flynn

### Background

On any given day in Australia, approximately 38,000 children have a parent in prison (Quilty, 2005); similar to the number of children who are subject to child protection orders (Bromfield & Horsfall, 2010). It is not known how many of these children fall into both categories; but it is known that in Victoria there is “no coordinated response by the child protection and justice systems to managing these children’s situations” (Sheehan, 2010, p. 164). Murray (2007) also noted that in England and Wales the same numbers of children affected by parental imprisonment are affected by parental divorce. For these latter groups of children a range of specialist services is offered. Yet, the children of imprisoned parents, whose experiences are not dissimilar, receive negligible attention or intervention. These children are also a growing group, with significant increases in imprisonment rates over the past two decades resulting in related increases in the numbers of children affected (Australian Bureau of Statistics [ABS], 2004). It has also been shown with relative consistency internationally that around two-thirds of the women in prison are the mothers of dependent children (e.g. see Caddle & Crisp, 1997; Mumola, 2000; Glaze & Maruschak, 2008). The problems experienced by their children are also well documented: isolation, behavioural difficulties at school, anxiety, insecurity, withdrawal, anger, and mental health concerns (Baunach, 1985; Brown, 2001; Caddle & Crisp, 1997; Kampfner, 1995; Kingi, 1999; McCulloch & Morrison, 2002; Phillips, Burns, Wagner, Kramer, & Robbins, 2002). Despite these concerns and the growing nature of the problem, these children remain largely invisible, and do not feature as a priority for government policy and statutory welfare bodies.

### Methods

This study gathered qualitative data from 15 women who had been imprisoned in the state of Victoria, 14 of their adolescent children, and a small group of professionals (3) who had been involved with these families. Case studies were constructed from this data, investigating the impact of maternal incarceration on 20 individual children. The mothers were a purposive sample drawn from a study

population of 237 women who were released from prison in Victoria during the period December 2002–December 2003.

### Findings

Data show that these children are the indirect recipients of adult justice, intersecting with the criminal justice system at many points; this offers many possibilities for effective identification and intervention.

### Arrest

*“She was just gone.” (Emma<sup>1</sup>, aged 16 when her mother was arrested and remanded into custody, before being acquitted and released seven months later)*

*“I was actually remanded in custody, so it was like a shock ... I was whisked away and there was no ... nothing.” (Sarah, mother of five, sentenced to 7 months imprisonment for fraud)*

Previous U.S. research indicates that around 50% of children are present at the arrest of their parent, and that this experience leads to considerable trauma (Kampfner, 1995). Victoria Police, however, currently do not have procedures for responding to the children of parents being arrested (Flat Out and Victorian Association for the Care and Resettlement of Offenders (VACRO), 2006). In this study, whilst the majority of children were not present at arrest, nine of the 20 were left parentless as either their sole parent mother or both parents were remanded into custody; 10 of the 20 children were not aware of their mother’s pending imprisonment before it happened, if at all, despite most mothers not being subject to arrest and remand procedures

### Sentencing

Whilst the Judicial College of Victoria (2005) indicates that “hardship” to others can be taken into account in sentencing, the weight accorded to such information is at the discretion of the individual judge or magistrate. In the current study, some participants indicated that the needs of dependent children were not taken into account when sentencing their mothers. Kylie, a mother of six recounts:

<sup>1</sup> All participants are referred to by pseudonyms to ensure confidentiality.

The lawyer pleaded with the judge when I was being sentenced to give me a few extra days – to come back on Monday – to have time to organise childcare [for the six children]. He said “No”. I was devastated. I had to rely on the lawyer to make all the calls and organise [the kids].” (Kylie, mother of six, sentenced to 14 months for armed robbery)

The findings of this study further indicate that a range of supportive and competing factors influenced the degree to which mothers facing imprisonment actively engaged in planning for the care for their children. Mothers with a more realistic orientation, to both their own personal problems and to the criminal justice process, typified by having experienced imprisonment previously, were more likely to ensure that secure care plans for their children were in place. Other key supportive factors included: a relationship with at least one significant adult who provided support to the woman in her parenting role, a positive relationship with the child’s carer, and having adequate time to arrange care—not being remanded into custody.

Conversely, the children of women without such supports frequently lacked secure care plans. Lily was a mother who had previously not been to prison; she suffered long-term heroin addiction and lived in unstable housing with her estranged partner. She advised her son Ben aged 12 years on the morning of her court appearance:

“I’m going to court and if I don’t come home I’m going to gaol.”

## Imprisonment

Unsurprisingly, maternal incarceration in this study lead to considerable interruption to the children’s care, with almost two-thirds of children displaced from home, typically in an unplanned way, and often into insecure arrangements. Children also experienced sustained separation from their mother: few children had frequent and predictable visiting arrangements; the contact that occurred took place in poor visiting conditions, which were not conducive to children’s needs. Children’s social isolation was further reinforced, both directly, in the active silencing they endured, and indirectly, in the lack of

## Victorian Association for the Care and Resettlement of Offenders (VACRO)

VACRO has had contact with families and children of offenders for many years and sees first hand the impact that incarceration can have on all family members. As awareness of these needs has grown, VACRO initiated family focused research and gradually expanded provision of services to include information and support for these families and children.

In 2000, VACRO commissioned *Doing it Hard: A Study of the Needs of Children and Families of Prisoners in Victoria* and has completed further research on policies and guidelines impacting on children as their families come into contact with the legal system (*Children: Unintended Victims of Legal Process*, 2006 & 2007). This research tracks needs from the stage of police contact to the point of prison release and proposes policy responses to the issues raised. VACRO has also developed service models linking vulnerable families to much

needed support at the point of contact with the Courts (*Court Based Family Support*, 2009).

The VACRO Women Family and Children’s Team offer services that provide information and support to families throughout their interactions with the criminal justice system (arrest, court, prison & post release). These include:

- informational resources for families (*Caught Out: What Now?*), children & young people (Busted);
- Visitor Centres outside three Victorian prisons in partnership with Red Cross;
- Family Information and Referral service;
- Video Visits program offering virtual visits between children and incarcerated parents; and
- Supporting Kids and Youth program providing family support and referral for children and their carers.

For further information, visit the VACRO website <[www.vacro.org.au](http://www.vacro.org.au)>.

acknowledgement of their loss by teachers/schools, as well as the broader community. Most children experienced emotional responses with which they struggled on their own; typically they coped by internalising their concerns, with few supports accessed.

“I needed someone to talk to, but there was no one there. And I couldn’t go to a teacher, because I didn’t know who they would tell.” (Keira, aged 11 years when her mother was sentenced to 3½ months for shop steal)

“I just used to cry all the time – sit in my bedroom and cry” (Sheree, aged 11 when her mother was sent to prison for 3 months).

## Release

Data from mothers in this study, indicate that participants were not aware of any policy or pre-release program for planning for family reunification after parental imprisonment. This is consistent with the report from Flat Out and VACRO (2006). It is evident that most reunification occurs with no formal support. It is of concern that although reconnection of imprisoned mothers with their children has been much discussed in previous research, beyond the current study only four studies have examined actual reunification data (Anderson, 2003; Hayward & DePanfilis, 2007; Martin, 1997; Stanton, 1980). All four of these studies indicated that many children return to their mothers care after prison. They also highlighted the challenges to family reunification, including: opportunities for contact during imprisonment, pre-prison care relationships, length of imprisonment, and the mother’s pre-existing problems. The findings from the current study show that whilst the majority of children (16 of the 20) returned to live with their mother after her release from prison, formal planning and support occurred with only one family. The findings confirm the key role played in family reunification by the pre-prison placement of the child with his/her mother, and that this is supported by predictable visiting. Interestingly parental problems, particularly chronic substance abuse, have been suggested by previous research as hindering factors in family reunification. This study also indicates, however, that such problems were not always prohibitive, and can be mediated by supportive factors, particularly: informal and formal external supports (such as grandparent/s and/or long-term partners) combined with the mother’s involvement in drug treatment, specifically a heroin replacement program.

## Practice implications of this study

This study suggests that it is important for arresting officers to be aware of offenders’ parenting responsibilities, and for children’s care needs to be considered. A similar process to the Family Violence Referral Pathway (Department of Human Services, 2006) implemented in response to family violence in recent years in Victoria, would acknowledge the direct impact of the adult justice system on defendants’ dependent children, and ensure that adequate plans are in place, linking them with appropriate resources as necessary.

Particular groups of children appear in the current study to be more at risk of having no secure care plans in place at the time of their mother’s imprisonment: those whose mothers are remanded into custody, whose mothers have not been imprisoned previously (but whose offence or history suggest that imprisonment is likely), those whose sole parents are active substance users, and whose mothers have a limited support network. Further examination of these factors may reveal the value of “red flagging” these mothers and children for particular intervention, via a more formally facilitated referral.

The findings from this study and others (e.g., see Stanton, 1980) indicate that at sentencing, a formal family impact statement, incorporated into the pre-sentence report could assist with providing a more thorough assessment of children in their families, with attention to the likely impact of sentencing options on them. This would enable the rights of children, to have their voices heard in legal proceedings which affect them (United Nations Convention on the Rights of the Child, Articles 9 and 12) (Office of the United Nations High Commissioner for Human Rights, 2008), to be upheld. Implementation of the *Better Pathways*’ (Victorian Government Department of Justice, 2005) recommendation for professional development for Community Corrections Officers around improving awareness of women’s needs as well as assessment of families, would go some way to addressing this.

It is important to acknowledge recent changes which have an impact on the children, whilst their mothers are in prison. Children whose mothers are held at the Dame Phyllis Frost Centre, located in Melbourne’s outer western suburbs, can now visit in new surroundings, with the addition of a multi-purpose room for children’s programs and new

playground equipment (Victorian Government Department of Justice, 2008). SHINE for Kids has recently implemented the Prison Invisits Program, where during prison visits children are engaged in art and craft activities, supported by Early Childhood workers and volunteers. This organisation, together with VACRO also provides a mentoring program (Supporting Kids and Youth) for these children.

However, as has been shown by the findings of this study, the impact of parental, specifically maternal incarceration on children can be far reaching; effective intervention needs to also consider the pre- and post-prison periods. Family reunification planning prior to release is suggested as a method of softening the impact of the mother's transition home and its potential impact on child wellbeing. Currently,

## SHINE for Kids

SHINE for Kids was created in March 1982 following the release of *The Children of Imprisoned Parents Report*, commissioned by the Family and Children's Services Agency. SHINE for Kids provides advocacy and various other services for the children of imprisoned parents and their families. A core focus in providing this support is our belief in the power of early intervention to stem some of the negative effects of parental imprisonment. These negative effects can include:

- family poverty;
- breakdown in family relationships;
- children's inability to thrive in a social and educational setting; and
- discrimination faced by children and their families due to the imprisonment of a parent.

These effects of imprisonment on children and their families can lead to a cycle of disadvantage for children and can also potentially result in children coming into contact with the criminal justice system themselves. SHINE for Kids goal is to address these issues and combat this potential cycle.

### Child and family activities

SHINE for Kids provides a range of initiatives aimed at reducing the isolation that children face due to having a parent in the criminal justice system. We allow children an opportunity to feel supported, have fun and enjoy visiting their mum or dad in prison with:

- Prison Invisits Program;
- Child and Family Centres;
- childminding;
- children's activities; and
- Connecting Kids and Dads Program – Barwon Prison.

Other services include:

- Contact services

These services focus on building and maintaining positive relationships between the child and their imprisoned parent, and assistance to succeed educationally and reach their potential.

- Mentoring Program for young people

This program offers a child or young person consistency, stability and healthy options for dealing with life through a supportive, caring and non-judgmental relationship with an adult mentor. These trained volunteers meet fortnightly with the child, enabling them to participate in events and activities which enhance their development and self esteem.

- Group Work

Group Work focuses on children and young people and their carers by providing opportunities to interact together in structured, fun activities. These help reduce their isolation, build resilience and develop positive communication, as well as learning and applying strategies to effect change.

- Research and advocacy

SHINE for Kids undertakes a number of research and advocacy initiatives to give children of prisoners a voice. Research and advocacy provide opportunities to share knowledge, experience, and expertise with the community, industry and government leaders.

SHINE for Kids are located across New South Wales and Victoria. For more information visit the SHINE for Kids website <[www.shineforkids.org.au](http://www.shineforkids.org.au)>.

women are “propelled, not prepared” [Christine, mother of 10 year old Dan] for release into their families and communities.

This recent in-depth study of the experiences of 20 adolescent children who experienced maternal imprisonment in Victoria clearly indicates that the experiences of these children intersect with the adult criminal justice system at many points, yet their needs are not acknowledged or responded to formally. This is a common finding in research into the experiences of the children of prisoners (see Burns, Brandon, Oakes, Olopade, & Krikorian, 2007, p. 8). The findings suggest the need for change to ensure these children are brought in from the margins: the identification of primary carers at arrest; alternatives to imprisoning mothers; family impact statements in pre-sentence reports; targeted support services for these children; and formal attention to family reunification planning.

## References

- Anderson, N. (2003, February). *Broken families: The children of women accessing Melbourne Citymission's prisons programs*. Paper presented at the Australian Institute of Family Studies Conference, Melbourne.
- Australian Bureau of Statistics. (2004). *Prisoners in Australia* (ABS Cat. No. 4517.0). Retrieved from <www.abs.gov.au/AUSSTATS/abs@.nsf/Previousproducts/4517.0Main%20Feature%20s12004?opendocument&tabname=Summary&prodno=4517.0&issue=2004&num=&view>.
- Baunach, P. J. (1985). *Mothers in prison*. New Brunswick: Transaction Books.
- Bromfield, L., & Horsfall, B. (2010). *Child abuse and neglect statistics* (NCPCC Resource sheet). Retrieved from <www.aifs.gov.au/nch/pubs/sheets/rs1/rs1.pdf>.
- Burns, A., Brandon, V., Oakes, K., Olopade, D., & Krikorian, S. (2007). Children of offenders review. National Offender Management Service and Department for Children Schools and Families. Retrieved from <www.cabinetoffice.gov.uk/~media/assets/www.cabinetoffice.gov.uk/social\_exclusion\_task\_force/think\_families/offenders\_review\_080110%20pdf.ashx>
- Brown, K. (2001). “No-one’s ever asked me”. *Young people with a prisoner in the family*. London: Action for Prisoners’ Families.
- Caddle, D., & Crisp, D. (1997). *Mothers in prison* (Home Office Research Findings No. 38). London: The Home Office, Research and Statistics Directorate.
- Corston, B. J. (2007). *The Corston Report: A review of women with particular vulnerabilities in the criminal justice system*. London: The Home Office. Retrieved from <www.homeoffice.gov.uk/documents/corston-report/>.
- Department of Human Services. (2006). *Formal protocol between Department of Human Services and Victorian Police Family Violence Referral pathways 2006–2008*. Retrieved from <www.cyf.vic.gov.au/\_\_data/assets/pdf\_file/0007/16738/fv\_police\_protocols.pdf>.
- Flat Out and Victorian Association for the Care and Resettlement of Offenders. (2006). *Children: Unintended victims of legal process. A review of policies and legislation affecting children with incarcerated parents* (Discussion Paper). Retrieved from <www.vacro.org.au/Children\_Unintended\_Victims/PDFs/Discussion\_Paper.pdf>
- Glaze, L., & Maruschak, L. (2008). *Parents in prison and their minor children* (Cat. no. 2222984). Bureau of Justice Statistics, United States of America. Retrieved from <bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=387>.
- Hayward, R. A., & DePanfilis, D. (2007). Foster children with an incarcerated parent: Predictors of reunification. *Children and Youth Services Review*, 29, 1320–1334.
- Judicial College of Victoria. (2005). *Victorian sentencing manual*. Retrieved from <www.justice.vic.gov.au/emanuals/VSM/default.htm>.
- Kampfner, C. J. (1995). Post-traumatic stress reactions in children of imprisoned mothers. In K. Gabel & D. Johnston (Eds.), *Children of incarcerated parents* (pp. 89–102). New York: Lexington Books.
- Kingi, V. (1999). *The children of women in prison*, PhD Thesis. Victoria University of Wellington, New Zealand.
- Martin, M. (1997). Connected mothers: A follow-up study of incarcerated women and their children. *Women and Criminal Justice*, 8(4), 1–23.
- McCulloch, C., & Morrison, C. (2002). *Teenagers with a family member in prison. Edinburgh*: Scottish Forum on Prisons and Families.
- Mumola, C. (2000). *Incarcerated parents and their children, Bureau of Justice Statistics Special Report*. US Department of Justice, Retrieved from <www.ojp.usdoj.gov/bjs/>.
- Murray, J. (2007). The cycle of punishment: Social exclusion of prisoners and their children. *Criminology and Criminal Justice*, 7(1), 55–81.
- Office of the United Nations High Commissioner for Human Rights. (2008). *Convention on the rights of the child*. Retrieved from <www.unhchr.ch/html/menu3/b/k2crc.htm>.
- Phillips, S. D., Burns, B. J., Wagner, H. R., Kramer, T. L., & Robbins, J. M. (2002). Parental incarceration among adolescents receiving mental health services. *Journal of Child and Family Studies*, 11(4), 385–399.
- Quilty, S. (2005). The magnitude of experience of parental incarceration in Australia. Letter to the Editor. *Psychiatry, Psychology and Law*, 12(1), 256–257.
- Sheehan, R. (2010). Parental imprisonment and child protection: A study of children presented to the Melbourne children’s court. *Australian Social Work*, 63(2), 164–178.
- Stanton, A. M. (1980). *When mothers go to jail*. Lexington, Mass.: Lexington Books.
- Victorian Government Department of Justice. (2005). *Better Pathways: An integrated response to women’s offending and re-offending*. Melbourne: Victorian Government Department of Justice.
- Victorian Government Department of Justice. (2008). *Better Pathways report card*. Retrieved from <www.justice.vic.gov.au/wps/wcm/connect/DOJ+Internet/resources/file/eb77ae0da2b4a49/BPReportCard\_FINAL.pdf>.
- Woodward, R. (2003). *Families of prisoners: Literature review on issues and difficulties* (Occasional Paper No. 10). Canberra: Department of Family and Community Services.

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# Trends in couple dissolution: An update

Lixia Qu and Ruth Weston

Patterns of couple formation and dissolution in Australia have changed significantly over a number of decades. Such changes represent a response to the interaction of many factors, including other life course changes, technological advancements, labour market and economic forces, and evolving social values and attitudes. In turn, trends in couple formation and dissolution contribute to social values and attitudes and to other family-related trends, such as fertility rates. It is important to monitor family trends, not only to understand the current circumstances of families, but also to gain insight into the future direction of changes, reasons behind them and their implications—all of which can feed into the shaping of proactive policy responses. This article updates trends in couple dissolution that formed the basis of an article that was published in the second edition of *Family Relationships Quarterly* (Weston & Qu, 2006), and includes additional information concerning the duration of marriages and differences in rates of relationship dissolution for marriages and cohabiting unions.

## Divorce rates

The increase in the divorce rate represented one of the most spectacular family-related trends in the 20th century. Figure 1 depicts the number of divorces across the years and the crude divorce rate, that is, the number of divorces granted in a year per 1,000 resident population.

Prior to the Second World War divorce was rare. In the first decade of the 20th century the number of divorces recorded each year ranged from 300 to 400.

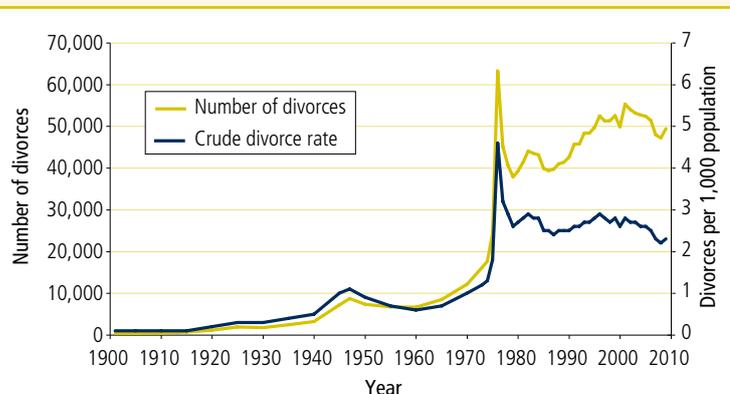
- The crude divorce rate rose slightly in the 1920s to the mid-1940s and peaked at 1.1 in 1947. In fact, the number of divorces recorded in 1947 was the highest (8,705) during the first half of the twentieth century, partly reflecting the instability of hasty wartime marriages and the disruptive effects of the war on marriage. The rate then declined slightly until the 1960s, after which it began to rise substantially.
- The rate soared to a peak of 4.6 divorces per 1,000 resident population when the *Family Law Act 1975* came into operation (5 January, 1976), which allowed only one ground for divorce (“irretrievable breakdown” as measured by at least 12 months separation). This change led to the formalisation of some long-term separations and the bringing forward of some divorces that had been filed in previous years but had not been finalised.
- Since then the crude divorce rate has mostly fluctuated between 2.5 and 3.0, falling in the mid-1980s, then rising, only to fall again during the last decade (from 2.8 in 1999 to 2.3 in 2009).

Another measure of the divorce rate is the number of divorces per 1,000 married women. These rates ranged between 10.6 and 10.9 in the late 1980s and gradually increased throughout the 1990s. The rate over the past several years has fluctuated between 12.0 and 13.0 divorces per 1,000 married women.

## Age-specific divorce rates, married men and women

A more detailed picture of the patterns of divorce is obtained by determining the rates of divorce for specific age groups. Figure 2 depicts the rates that were apparent in 2006.

- Among married women, the divorce rate was highest for those aged 25–29 years while among married men, it was highest for those aged 30–34 years—a difference that reflects the fact that women tend to marry at a younger age than men.
  - In 2006, divorce was experienced by 18 in every 1,000 married men aged 25–29, by 19 in every 1,000 aged 35–39 years, and by just under 20 in every 1,000 aged 30–34 years.
  - During the same year, divorce was experienced by 20 in every 1,000 married women aged 25–29, 18 aged 35–39 years, and just under 20 aged 30–34 years.



Sources: ABS (various years) *Marriages and divorces* (Catalogue No. 3310.0).

Figure 1. Crude divorce rate and number of divorces, 1901–2009

- Among married men and women in their mid-30s and older, the divorce rate declined progressively with increasing age.

## Duration of marriage to divorce

Figure 3 focuses on divorces granted in four different years, and shows the proportion of divorcing couples whose marriages had lasted for less than 10 years, 10–19 years or at least 20 years. Here, the duration of marriage includes the period from separation to date of divorce.

- For all four years examined, divorces most commonly occurred before 10 years of marriage (applying to 41–49% of all divorcing couples).
- 31–33% of divorces occurred when the couples had been married for 10 to 19 years.
- 20–28% of divorces occurred when couples had been married for at least 20 years.
- Nevertheless, the proportion of marriages lasting fewer than 10 years fell during the most recent decades (from 49% in 1990 to 43% in 2000 and 41% in 2009), while the proportion of marriages lasting at least 20 years increased (from 20% in 1980 to 24% in 2000 and 28% in 2009).

The median duration of marriage at divorce was 12.3 years in 2009, up from 10.2 years in 1980. It should be noted that the median duration of marriage at final separation also increased from 7.5 years to 8.7 years during the same period.

## The stability of cohabitation

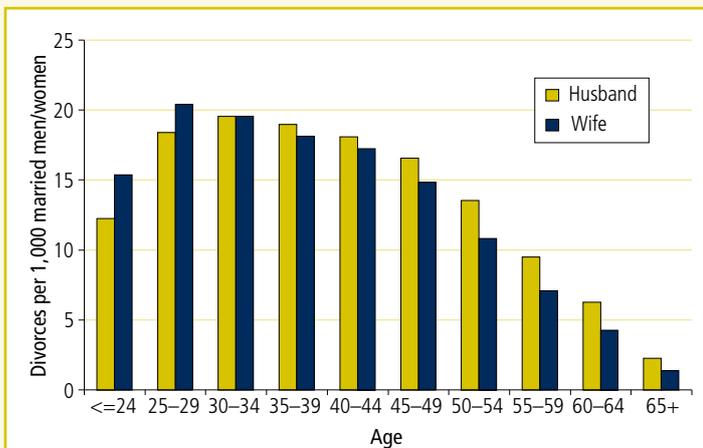
Given that some couples live together outside a registered marriage (here called “cohabitation”), trends in divorce do not present a complete picture of relationship separation. Table 1 shows that cohabitating

relationships are far more likely to dissolve than marriages. Here, attention is directed to the cohabiting unions which represent the first live-in relationship experienced by one or both partners.

- Regardless of the period in which cohabitation or marriage began, the likelihood of a cohabiting relationship ending in separation within 5 years was three to five times the likelihood of a marriage ending in divorce within 5 years (25–38% vs 7–9%).
- The proportion of marriages that ended in divorce within 5 years increased slightly over the period shown (from 7% of marriages starting in 1975–76 to 9% of marriages starting in 1994–95).
- Similarly, the proportion of cohabiting relationships that ended in separation increased over the period shown (from 25% of cohabitating unions that began in 1970–74 to 38% that began in 1990–94).
- However, for the entire period covered in Table 1 (approximately 20 years), the rate of separation among cohabiting couples increased to a greater extent than the rate of divorce among married couples.
- It is not surprising that cohabiting relationships are less stable than marriages, given that the circumstances surrounding cohabitation can be diverse (Qu & Western, 2001). For example, some couples may embark on cohabitation as a trial marriage or as a prelude to marriage and others may live together for practical reasons without strong commitment.

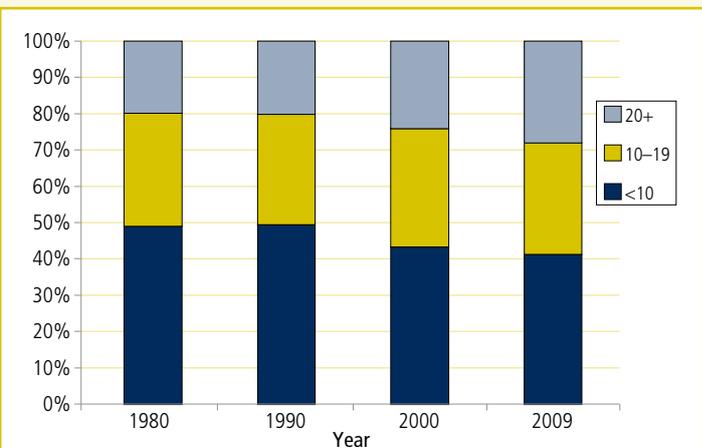
## Those without partners

Together, trends in couple formation (outlined in *Family Relationships Quarterly* No. 1) and relationship breakdown influence the overall proportions of men and women who are partnered or unpartnered.



Sources: ABS (2010), *Marriages and divorces, Australia 2009* (Catalogue No. 3310.0).

**Figure 2. Age-specific divorce rate by gender, 2006**



Sources: ABS (various years) *Marriages and divorces* (Catalogue No. 3310.0).

**Figure 3. Duration of marriage to divorce, 1980 to 2009**

**Table 1. Rates of relationship dissolution: Cohabitation versus marriage by period in which cohabitation or marriage began**

Cohabitation <sup>a</sup>		Marriage	
Year began living together	Separated within 5 years (%)	Year of marriage	Divorced within 5 years (%)
1970–74	24.9	1975–76	6.9
1975–79	30.9	1985–86	7.5
1980–84	33.4	1987–88	7.9
1985–89	33.3	1989–90	8.6
1990–94	38.2	1994–95	8.8

<sup>a</sup> Cohabiting relationships refer to first unions for one or both partners (based on HILDA Wave 1 data); the separation rate does not take into couples who went on to marry and then divorced subsequently.

Source: Qu & Weston (2008)

Figures 4a and 4b, which are based on analyses of the 2006 Census data, along with those conducted by Birrell, Rapson, and Hourigan (2004) using earlier Census data, indicate the proportions of men and women of different ages (below 50 years) who were living without a partner in 1986, 1996 and 2006.

- Across all 5-year age groups shown (20–59 years), the proportion of unpartnered men and women increased between 1986 and 2006.
- Given that men are usually older than women when they first cohabit or marry, unpartnered rates are considerably higher at younger ages for men than women.
- Gender differences in unpartnered rates narrow with advancing age, and given the lower propensity for women to repartner at older ages, women in their late forties are similarly likely to be unpartnered as men of this age.

- The rise in unpartnered rates for age groups under 40 years had slowed in the most recent decade (1996–2006). This is not the case for the two oldest age groups.

In summary, patterns of couple dissolution have undergone a great deal of change. Although fairly stable over the past decade, the number of divorces per 1,000 marriages was lower in the late 1980s than more recently. While the median duration of marriage at divorce is about 10 to 12 years, the percentage of divorcing couples who were married for fewer than 10 years has fallen, while the percentage of those who were married for at least 20 years has increased. This trend can at least partly be explained by the tendency for couples to cohabit then separate. In the 1980s, many of these couples would have married directly. Trends in couple formation and dissolution have resulted in an increase in the proportion of Australian adults who are unpartnered.

## References and data sources

Australian Bureau of Statistics. (various years). *Marriages and divorces Australia* (Catalogue No. 3310.0). Canberra: ABS.

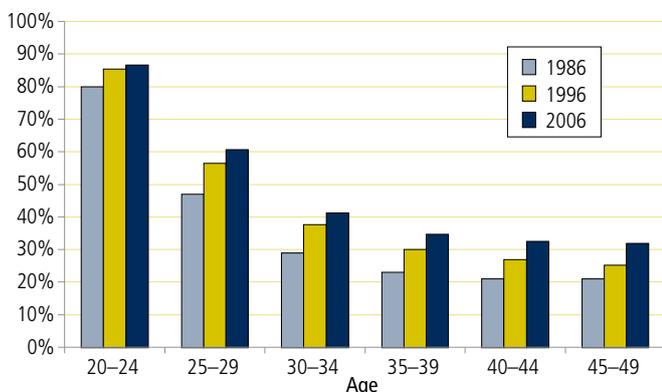
Australian Bureau of Statistics. (2007). *2006 Census of Population and Housing* (Catalogue no. 2068.0 – 2006 Census Tables). Canberra: ABS.

Birrell, B., Rapson, V., & Hourigan, C. (2004). *Men + women apart: Partnering in Australia*. Melbourne: Australian Family Association and Centre for Population and Urban Research.

Qu, L., & Weston, R. (2001). Starting out together: Cohabitation or marriage. *Family Matters*, 60, 76–79.

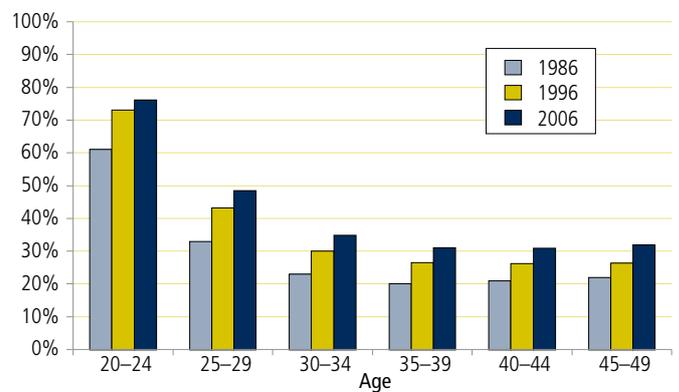
Weston, R., & Qu, L. (2006). Family statistics and trends: Trends in couple dissolution. *Family Relationships Quarterly*, 2, 9–12.

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Sources: Statistics for 1996 and 2006 based on the 2006 Census, the 1986 data are from Birrell, et al., 2004.

**Figure 4a. Proportion of men who were living without a partner by age, 1986, 1996 and 2006**



Sources: Statistics for 1996 and 2006 based on the 2006 Census, the 1986 data are from Birrell et al., 2004.

**Figure 4b. Proportion of women who were living without a partner by age, 1986, 1996 and 2006**

# Walking the talk

## Facilitating evaluation in a service environment

Robyn Parker and Amanda Jones

The growing emphasis on evaluation may require agencies to re-think some of their organisational practices—for example, in order to accommodate evaluation procedures and requirements—and to re-distribute infrastructure and resources. Evaluation can be complicated, time consuming and resource intensive, and the skills required are not necessarily commonly taught as part of everyday practice in the broader child and family services sector. Program evaluations can be conducted solely within the agency by drawing on the existing knowledge, skills, and capabilities of existing staff, by an external consultant brought in specifically to design and conduct the evaluation, or through some combination of the two. This article outlines how the third of these options is being utilised to put in place a framework for the ongoing monitoring and outcome evaluation of home-based foster care services.

This article is based on a paper presented at the 6th Australian Family and Community Strengths Conference in Newcastle, NSW, November 2010.

### Box 1: Evaluation resources

This article focuses on evaluation within a service setting, which is based on a series of resources published by the Australian Family Relationships Clearinghouse in November 2010. AFRC Issues No. 6, *Evaluation in Family Support Services*, comprises a series of five papers aimed at prompting providers to think carefully and systematically about evaluation, and to guide and support them through the evaluation process. These papers are not intended to turn practitioners into expert evaluators. They aim to build the capacity of practitioners to design and conduct or collaborate on evaluations of their programs and services.

These resources are available online: *Evaluation in Family Support Services* <[www.aifs.gov.au/afrc/pubs/issues/issues6/index.html](http://www.aifs.gov.au/afrc/pubs/issues/issues6/index.html)>

Program and service providers are becoming more aware of the need to assess the impact of their activities on their clients. Without evaluation, providers cannot know what works for which clients and, as importantly, what does *not* work for which clients. Clients have a right to expect that the services they receive are effective, funders can rightfully expect their money to be well spent, and practitioners are professionally and ethically bound to ensure that any activities and methods they use are “good practice” and evidence informed.

There are three broad ways that agencies may approach the task of designing and conducting an evaluation of their services or programs:

- Some agencies may use existing expertise and build internal capabilities (in-house evaluation).
- Others may prefer to engage an external evaluation consultant to conduct the evaluation with minimal input from agency personnel (external evaluation).
- Alternatively, a combination of these approaches may be used wherein an external consultant is engaged to work systemically within the agency on the design and implementation of the evaluation.

This article focuses on an application of the third approach, in which an external evaluation consultant was seconded to a large provider of child welfare services to co-design and implement an evaluation framework for assessing the effectiveness of home-based care services. The first two approaches and their benefits/disadvantages are described in Box 2.

### Collaborative evaluation

A collaborative model whereby an external evaluator is seconded to or embedded within an agency offers a number of advantages over completely internal or external evaluations. This model is being put into practice in a collaborative project between the Australian Institute of Family Studies and Berry Street, the largest independent child and family

## Box 2: Approaches to evaluation in a service setting

### In-house evaluation

#### Benefits

- Designing and conducting evaluations in-house takes advantage of staff knowledge of and familiarity with the agency's programs, infrastructure and, in particular, its culture, and can draw on existing relationships with clients and stakeholders.
- Can be less costly than engaging an external evaluator in monetary terms.
- Can potentially contribute to the development and growth of a culture of evaluation in the agency, in which staff accept the need for evaluation, and are willing to contribute to its design and accommodate its implementation (see Box 3).

#### Disadvantages

- May impact on service delivery through the redistribution of internal resources and increased workloads on staff.
- Can be susceptible to subjectivity in the way that data is collected, and in the interpretation and reporting of findings. Therefore findings may be perceived by others as less credible than an external evaluation.
- It is not the case that any evaluation is better than none—a badly conducted evaluation might lead to the conclusion that a program or service is beneficial when it actually has no positive effect or worse, a negative effect on the client. Therefore it is crucial to ensure that the staff member charged with

conducting an internal evaluation has sufficient knowledge and training to design a valid evaluation and instill confidence in the validity of the findings.

### External evaluation

#### Benefits

- Can overcome some of the difficulties associated with implementing an evaluation plan or project using only internal personnel and resources.
- Brings an objective perspective.
- Can bring greater technical expertise and knowledge, for example, in the development of tools and procedures.
- Can minimise the impact on the workload of agency staff.
- Can be undertaken in a more timely and efficient manner.

#### Disadvantages

- May take time for an external consultant to acquire sufficient knowledge and understanding of the client group, the program or service being evaluated, or the broader practice and policy context in which the service is provided.
- May be more expensive compared to internal staff, but consultancy costs must be weighed against the costs of conducting a poor evaluation—not only in monetary terms but also (and especially) in regard to the possibility of continuing to deliver a service that does not benefit the clients.

welfare organisation in Victoria.<sup>2</sup> The overall aim of the secondment was to begin the process of embedding monitoring and evaluation practices and procedures into Berry Street's daily practice—making them part of “how things are done” at Berry Street and building a culture of evaluation (see Box 3).

2 Berry Street ([www.berrystreet.org.au](http://www.berrystreet.org.au)) services are provided in four Victorian regions. Home-based and residential foster care are prominent among the programs and services offered, which also include family violence, therapeutic clinical/counselling (via “Take Two”), children's contact centres, various youth and community outreach programs, and Open Place, which provides services for “Forgotten Australians”.

In being seconded to Berry Street, the external evaluator became a de facto member of staff, and as such was seen as, if not a complete “insider”, at least less of an “outsider”, thereby helping to break down the perception of “us” versus “them” (Owen & McDonald, 1999). Being in this position helped when existing methods or procedures needed to be challenged, which might be less well received coming from a complete outsider or which a staff member may be reluctant to voice. It was also possible to prompt close examination of procedures that form the “nitty gritty” of evaluation, such as asking who

will actually collect the data, who will enter it into a database, and whether there is sufficient infrastructure to support these activities. It was important to resolve these issues early in the process, to maintain the integrity of the evaluation and facilitate its implementation.

It is well understood that, for an evaluation to be properly and effectively implemented, there must be an acceptance of it by those who are most directly involved or affected. The Berry Street staff member<sup>3</sup> working in conjunction with the external evaluator acted as a conduit between the evaluator and the broader agency, including both the frontline workers and higher levels of management. This role within Berry Street conferred a degree of legitimate authority in the implementation of the evaluation, particularly as the staff member had significant formal and informal corporate, practical and political knowledge of the agency, its clients, and the sector. This made it easier to negotiate across levels of the agency and to gather together those others in the agency whose contribution is vital to the viability and success of the evaluation. Combining these three sources of knowledge and expertise is resulting in a simultaneous “top down/bottom up” approach that will help promote acceptance of the need for and implementation of the evaluation framework.

## Key enablers

On the basis of this evaluation secondment experience with Berry Street, as outlined above, the following tips for getting the most out of an evaluation consultancy are offered:

- Get overt, concrete support from your management and Board, including commitment of funds and infrastructure resources to facilitate the implementation and acceptance of the evaluation. Develop a strong communication plan that includes informing staff of this governance support.
- Use the consultant to demystify evaluation, but also identify any internal champions of the evaluation strategy.
- Help those staff most directly affected understand and accept the need to build evaluation into the agency’s “ways of working”.

<sup>3</sup> The Berry Street staff member involved was the Senior Manager, Evaluation, Policy and Research.

- Facilitate opportunities for evaluator contact with staff from a range of programs. Less formal discussions/conversations about evaluation in general and attendance at meetings can help foster relationships and break down resistance to evaluation activities. These discussions may also help managers of other programs in their thinking or rethinking how well their programs are performing, and will also help the evaluator learn more about the agency. Brief information sessions run by the evaluator may also help to foster interest in and acceptance of the evaluation project. The aim of these would not necessarily be to train staff to be evaluators, but to build their understanding of the role of evaluation in working with clients.
- Create opportunities for interested staff to participate in the design and implementation of the evaluation. This may require changing or adapting roles and redistributing tasks to allow for their involvement. In the longer term, staff members may acquire the knowledge and expertise to allow future evaluation activities to be undertaken in-house or with minimal involvement from external consultants.

### Box 3: Culture of evaluation

What is a culture of evaluation?

An organisation that has a culture of evaluation has a known, shared policy and common understanding of the role of evaluation of their programs and services (Murphy, 1999). There is a commitment to using evaluation findings to inform decision-making, and practice review and development (Owen, 2003), thereby ensuring practice is evidence-based.

Why is a culture of evaluation a good thing?

Having a collective mindset of the value of evaluation helps to reinforce reflective thinking and practice and promotes a focus on what works for clients. It also enables the organisation to respond promptly to requests from stakeholders for accountability and effectiveness information. Staff confidence can be enhanced through the knowledge that their efforts are effective and evidence based, and new skills and expertise acquired.

- Think big, act small. Introducing a sweeping system of evaluating all programs and services will require a lot of change and may add to the workload of already busy people. While the overall aim may be to integrate evaluation practices into the agency, it may be sensible to focus on a single program or service. At Berry Street, developing and implementing the evaluation content and procedures on a smaller scale in order to identify what works well and what potential problems may arise down the track has been an effective approach. That model can then be applied to other programs or services, with appropriate adaptations as required. Ongoing review of its integration and the impact on infrastructure and resources can also be undertaken.
- If at all possible, take it slowly. Unless the program has already been clearly documented and articulated (in particular its objectives, preferably in the form of a program logic model), time will be needed for a clear picture to be developed of the intended outcomes of the program to be evaluated. While staff working in a program are often clear about what they do and why they do it, it can be difficult to articulate the intentions of the program—that is, what benefits clients are expected to experience—in such a way that the achievement (or otherwise) of those benefits can be assessed. Introducing evaluation as a routine

part of the agency's activities may also entail a lot of change for many staff members, and this change process needs to be carefully managed.

## Final comments

Although there is growing recognition of the ongoing need for evidence that programs and services are effective, it can be difficult for a busy agency to marshal the resources required to integrate or absorb evaluation successfully into regular practice. Funding constraints can exclude the possibility of engaging the services of an external evaluator to carry out the task. By bringing a consultant into the agency as a de facto member of staff, many of the barriers to the acceptance of evaluation activities can be overcome, and the adoption of evaluation thinking and practice as “how we do things here” can be facilitated.

## References

- Murphy, D. (1999). *Developing a culture of evaluation*. Paris: TESOL France.
- Owen, J. (2003). Evaluation culture: A definition and analysis of its development within organisations. *Evaluation Journal of Australasia*, 3(1), 43–47.

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# *Growing Up in Australia and Footprints in Time*

## The LSAC and LSIC Research Conference

15–16 November 2011 | Rydges on Swanston, Melbourne, Victoria

LSAC Data Workshop – 14 November | LSIC Data Workshop – 17 November | ABS, Melbourne

One of the great challenges for Australia is to identify and understand the myriad factors that influence children's development and to put in place measures that can improve outcomes for future generations.

Join us at this biennial forum for the discussion of research based on *Growing Up in Australia: The Longitudinal Study of Australian Children (LSAC)* and *Footprints in Time: The Longitudinal Study of Indigenous Children (LSIC)* data.

[www.aifs.gov.au/growingup/conf/2011/](http://www.aifs.gov.au/growingup/conf/2011/)

# Parenting efficacy

## How can service providers help?

Maggie Yu

Parenting efficacy is a parent's belief in their effectiveness as a parent. It helps parents respond to and engage with their children, and to cope with stressful and challenging situations (O'Neil, Wilson, Shaw, & Dishion, 2009) thereby contributing to positive early development and future child outcomes. This article reports on how parenting efficacy is related to several contextual factors (or resources) in a sample of Australian parents with infants, and offers suggestions for enhancing parenting efficacy, in particular for those who reside in disadvantaged communities.

Parenting efficacy refers to the belief parents have in their ability to provide the social, cultural and emotional support their children need to function successfully during development (Pelletier & Brent, 2002). Parents' efficacy levels are a strong predictor of parenting behaviours and later child development, demonstrating that parenting efficacy is related to:

- the amount of effort parents will expend and how long they will persist when facing life difficulties (O'Neil et al., 2009);
- greater parenting satisfaction (Coleman & Karraker, 2000);
- positive parenting behaviours (Thomas, Feeley, & Grier, 2009);
- lower levels of stress and depression (Halpern & McLean, 1997); and
- promotion of children's self-efficacy, behavioural development and their academic success in areas such as language skill development (Ardelt & Eccles, 2001; Coleman et al., 2002).

Parenting efficacy is also related to external factors, such as positive neighbourhood interactions (Lunney, Edwards, Weir, & Barr, 1998), better family relationships (Elek, Hudson, & Bouffard, 2003), stronger social support (Cook & Kilmer, 2010) and positive financial circumstances (e.g., Ardel & Eccles, 2001). However, there are few Australian studies that investigate the relationship between these resources and parenting efficacy (Waanders, Mendez, & Downer, 2007).

Given the association between parenting efficacy and positive parenting behaviours, it is worthwhile examining these other factors (community support, financial security, family/friend support, and couple

support) in order to better understand and support Australian parents.

### Community support (social cohesion and access to services)

Community support is considered to be a parenting resource that influences parenting efficacy. For example, lower levels of parenting efficacy are associated with living in isolated neighbourhoods with high violence, drug use and unemployment rates (Ardelt & Eccles, 2001). From a different perspective, parents who engage in positive interactions with local people are more likely to access information about local support, services and practical assistance during times of stress or uncertainty (Clinton, Lunney, Edwards, Weir, & Barr, 1998).

### Financial status (prosperity vs poverty)

Financial security can influence parents' behaviours inside and outside the home. For example, parents with high family income are less likely to have depressive symptoms and are less likely to engage in marital conflicts (McLoyd, 1998). Parents who are less wealthy and face economic pressures may be overwhelmed with the challenges of financial strain and have difficulties in meeting their children's needs (O'Neil et al., 2009; Raikes & Thompson, 2005).

### Family and friend support (help received from family and friends)

Parents who have strong emotional support from their family and friends are more likely to have warm parenting behaviors and better handle stressful events, and therefore feel more effective as parents (Izzo, Weiss, Shanahan, & Rodriguez-Brown, 2000).

### Couple support (support received by each partner from the other)

Actively sharing infant care tasks has been found to increase marital satisfaction and reduce parenting stress (Elek et al., 2003). Where parenting is not shared, one parent is likely to feel overloaded and

stressed (Clulow & Donaghy, 2010) and less likely to be confident about their capacity to meet their children's developmental needs.

## Current study

This study uses a national representative sample from Wave 1 of *Growing Up in Australia: The Longitudinal Study of Australian Children (LSAC)*.<sup>4</sup> Data for 5,017 parents with infants aged from 3–14 months were analysed. Information about parenting efficacy and the four parenting resources outlined above is collected from Parent 1 (person who knows the child best), in most cases the study child's biological mother.<sup>5</sup>

## What have we found?

The following figures present the proportion of parents with high level of parenting efficacy. The overall proportion of parents with high parenting efficacy (Parents who perceived themselves as “very good” or “good” parents) was 72%.<sup>6</sup>

Figure 1 presents the association between different levels of parents' perceived local community support and parenting efficacy. It shows the proportion of parents with high levels of parenting efficacy according to whether the parents had “greatest”, “high”, “modest” or “low” levels of community support.

Parenting efficacy is positively related to community support as parents who rated their level of community support as “greatest” or “high” have higher levels of parenting efficacy than parents who reported “modest” and “low” community support.<sup>7</sup>

4 *Growing Up in Australia: The Longitudinal Study of Australian Children (LSAC)* is a major study following the development of 10,000 children and families from all parts of Australia. Visit the LSAC website for details <[www.aifs.gov.au/growingup/](http://www.aifs.gov.au/growingup/)>

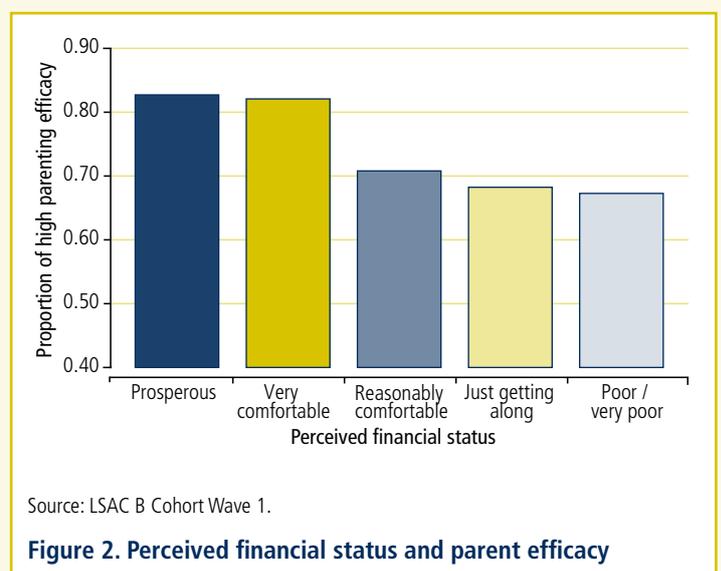
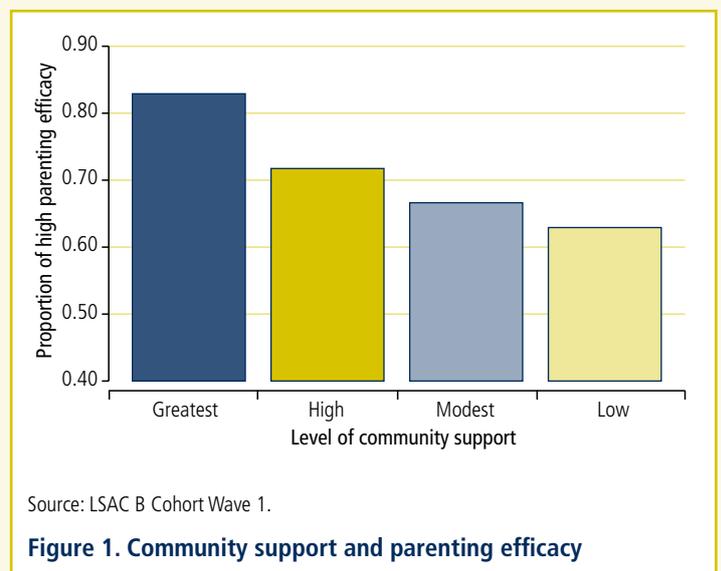
5 Parenting efficacy, financial support, and family and friend support were measured using multiple choice questions. Community support and couple support were measured using 4-point and 5-point scales respectively.

6 Associated analyses of these data (reported elsewhere) showed that the relationships between these four factors and parenting efficacy was largely unchanged by the inclusion of parents' country of birth, education or employment.

7 Parents rated their community support on a 5-point scale, ranging from 1=“Strongly agree” to 5 “Strongly disagree”. The average score on the scale is achieved by adding the scores of all 4 items and divide by 4. A higher average score reflects lower levels of community support. The level of community support was classified as “Greatest” (scores below 2), “High” (scores above 2 and below 3), “Moderate” (scores above 3 and below 4), and “Low” (scores above 4).

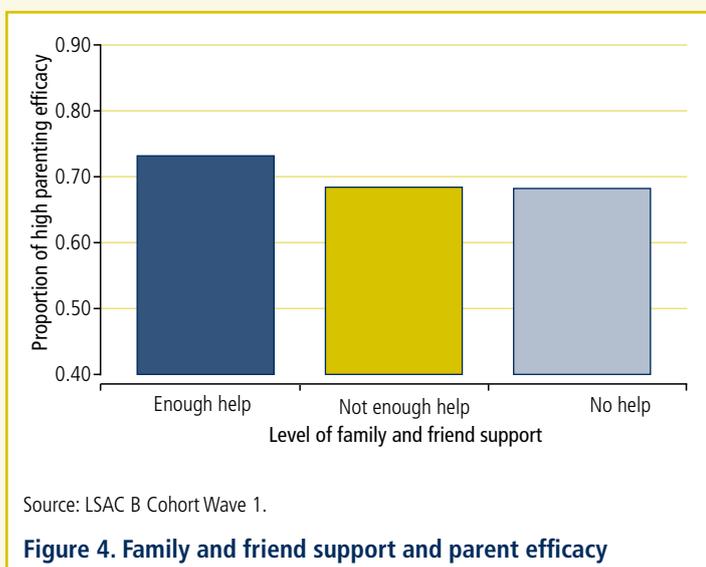
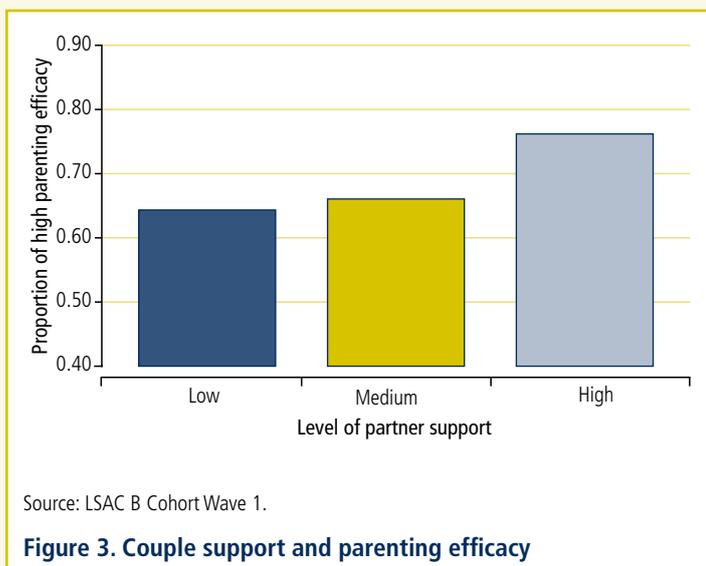
Figure 2 presents the same information according to parents' perceptions of their financial status. This figure suggests that parents who perceive their financial status as “prosperous” and “very comfortable” have higher rates of parenting efficacy than parents who perceive their financial status as “just getting along” and “poor/very poor”.

Figure 3 presents the proportion of parents who reported high parenting efficacy by the amount of support they received from their partner. This figure indicates that parents who received “high” levels of support from their partner have higher rates



of parenting efficacy. The proportion of parents with high parenting efficacy is smaller in the “medium” and “low” couple support groups.

Figure 4 represents the proportion of parents with high levels of parenting efficacy according to whether they thought they received “enough help”, “not enough help” and “no help” from their family and friends. Parents in the “enough help” group have the highest proportion of high parenting efficacy. Parenting efficacy is positively related to family and friend support as those parents reported having adequate support have higher levels of parenting efficacy.



## The positive effects of supports

This study confirmed the importance of local community support, financial support, family and friend support, and marital support for parenting efficacy. Parents with greater local community support, positive financial status, strong social network and a supportive partner reported higher levels of parenting efficacy.

## Conclusions

Local community supports and resources, such as community-based parenting services, play an important role in building parenting efficacy and should be accessible for all parents. Local councils could provide information about these services through newsletters and advertisements.

Interventions that focus on helping parents have better financial capacity and help in relieving financial pressures for them are also important. For instance, current policies such as paid maternity leave and family tax benefits should help parents cope with decreased income when they need to reduce working hours to perform parenting tasks.

An important part of support interventions can involve assisting parents to develop new relationships with people in their social networks and to help them enlarge their social networks by making new friends. For example, local community activities such as “street parties” or activities at neighbourhood houses can be encouraged as parents are often able to meet other parents who can help them to make friends and enlarge their social networks.

Strengthening parents’ partnerships is an effective aspect of parenting efficacy, and interventions could increase marital support through developing co-parenting awareness and skills to better support each other. For example, postnatal parenting support groups, parenting workshops and telephone helplines could be beneficial to parents.

## Limitations and suggestions for future research

Some methodological limitations of this study should be kept in mind before interpreting the findings. Limitations include the reliance on self-report measures of parenting efficacy and other characteristics.

Although self-report is necessary as the key concepts are perceptions of self, validity concerns such as social desirability bias may need to be kept in mind. Qualitative studies may help to determine how parenting support resources help parents to increase parenting efficacy levels, and how parenting efficacy is developed or diminished.

In addition, by relying on statistical correlations between self-reported characteristics, this study shed no light of causality. Although the results suggest that social, financial and emotional support are reliably associated with high levels of parenting efficacy, the results were unable to demonstrate that by enhancing these supports, parents will necessarily strengthen their beliefs about being good parents. Future research could attempt to identify whether improving social, financial and emotional support for parents leads to an increase in parenting efficacy levels.

Moreover, this study was a one-time study using Wave 1 data of LSAC. Future research could investigate the longer-term effects on parenting efficacy in parenting support resources. To gain a more comprehensive understanding of how parenting support resources influence parenting efficacy and child development over time, longitudinal studies at a range of time intervals would be desirable.

## References

- Ardelt, M., & Eccles, J. (2001). Effects of mothers' parental efficacy beliefs and promotive parenting strategies on inner-city youth. *Journal of Family Issues, 22*(8), 944–972.
- Clinton, M., Lunney, P., Edwards, H., Weir, D., & Barr, J. (1998). Perceived social support and community adaptation in schizophrenia. *Journal of Advanced Nursing, 27*, 95–965.
- Clulow, C., & Donaghy, M. (2010). Developing the couple perspective in parenting support: Evaluation of a service initiative for vulnerable families. *Journal of Family Therapy, 32*, 142–168.
- Coleman, P., Trent, A., Bryan, S., King, B., Rogers, N., & Nazir, M. (2002). Parenting behavior, mothers' self-efficacy beliefs, and toddler performance on the Bayley Scales of Infant Development. *Early Child Development and Care, 172*(2), 123–140.
- Cook, J. R., & Kilmer, R. P. (2010). The importance of context in fostering responsive community systems: Supports for families in systems of care. *American Journal of Orthopsychiatry, 115*–123.
- Coleman, P. K., & Karraker, K. H. (2000). Parenting self-efficacy among mothers of school-age children: Conceptualization, measurement, and correlates. *Family Relations, 49*, 13–24.
- Elek, S., Hudson, D. B., & Bouffard, C. (2003). Marital and parenting satisfaction and infant care self-efficacy during the transition to parenthood: the effect of infant sex. *Issues in Comprehensive Pediatric Nursing, 26*, 45–57.
- Halpern, L. F., & McLean, W. E. (1997). Hey mom, look at me! *Infant Behavior and Development, 20*, 515–529.
- Izzo, C., Weiss, L., Shanahan, T., & Rodriguez-Brown, F. (2000). Parental self-efficacy and social support as predictors of parenting practices and children's socio-emotional adjustment in mexican immigrant families. *Journal of Prevention & Intervention in the Community, 20*, 197–213.
- Lunney, P., Edwards, H., Weir, D., & Barr, J. (1998). Perceived social support and community adaptation in schizophrenia. *Journal of Advanced Nursing, 27*(5), 955–965.
- McLoyd, V. (1998). Socioeconomic disadvantage and child development. *American Psychologist, 53*, 185–204.
- O'Neil, J., Wilson, M., Shaw, D. S., & Dishion, T. J. (2009). The relationship between parental efficacy and depressive symptoms in a diverse sample of low income mothers. *Journal of Child and Family Studies, 18*, 643–652.
- Pelletier, J., & Brent, J. M. (2002). Parent participation in children' school readiness: The effects of parental self-efficacy, cultural diversity and teacher strategies. *International Journal of Early Childhood, 34*(1), 45–61.
- Raikes, H. A., & Thompson, R. A. (2005). Efficacy and social support as predictors of parenting stress among families in poverty. *Infant Mental Health Journal, 26*(3), 177–190.
- Thomas, J., Feeley, N., Grier, P. (2009). The perceived parenting self-efficacy of first-time fathers caring for very low birth weight infants. *Issues in Comprehensive Pediatric Nursing, 32*, 180–199.
- Waanders, C., Mendez, J. L., & Downer, J. T. (2007). Parent characteristics, economic stress and neighborhood context as predictors of parent involvement in preschool children's education. *Journal of School Psychology, 45*, 619–636.

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