A policy framework for a knowledge society: families and knowledge

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Abstract

My thesis examines the link between families, harm and knowledge in a society where knowledge is increasingly the central organising principle (Bohme 1997: 449-450; Stehr 1994: 6), and represents the capacity for action (Stehr 1994: 8). I observed as a consultant in the 1990s that practitioners in family work were able to articulate what works but often unable to articulate why and therefore unable easily to replicate what works. This time coincided with increasing commentary on complexities of living, capacity of families to cope, identification of the scale of family harm, and use of the term ‘the knowledge society’.

My aim is to identify why what works, works with families exhibiting harmful behaviours and families acquiring knowledge from learning everyday life skills so as to lead less harmful and more fulfilling lives. And by such explanations inform, replicate and scale up practice to benefit more families exhibiting harm. I conceptualise the outcome as a sequence of family, community and policy work in an ecological framework (Bronfenbrenner 1979) within a knowledge society. My method was a year-long action research project with a family support service in New South Wales. I engaged in reflective practice with workers, and a parallel literature review that supported additional reflective practice.

I found growing complexity of life requires growing knowledge. I found a distinction between everyday and abstract life worlds, and with families principally acting in the everyday life world. It is a world from which some families and their members seek to escape, often by means of harmful
behaviours of neglect, abuse and violence. I substantiated the link that the
family support service of my study sees between relationships, behaviours and
affects; and I linked this in turn with its therapeutic engagement of the whole
family — adults and children, male and female, victims and perpetrators. This
engagement involves a process of learning (Rogers 1967: 280) to acquire
fulfilling behaviours. It is a process of adult and experiential learning of
relationship skills, drawing on under-used reserves of families. Relationship
skills form a basis of acquiring other life skills since most require relationships
with others to perform life skills. Combining the sequence of family,
community and policy work with workers engaging in reflective practice of
their work creates capacity for community institutions to replicate and scale up
what works and why. Understanding this sequence may assist community
institutions to inform policymakers of benefits common to all policy interests
of such replication and scaling up.

I conceptualise a policy framework of families and knowledge in a knowledge
society and two lower level frameworks of process and content of life skills.
Implications of these for practice, policy, and theory include a greater
distinction between everyday and abstract knowledge and skills; recognition of
a sequential process of information, learning, and knowledge; and
inclusiveness and fluidity in learning in diverse adult learning settings and in
family support professions.
Chapter 1: Introduction

Background to the research

This research was an outcome of working as a consultant with family, health and education institutions in the 1990s and observing practitioners articulating what works but rarely why. In particular, I observed workers could articulate what works but rarely why in moving families from harmful to fulfilling behaviours so that these families could participate more in life activities. I reflected that understanding what works but not why makes what works less easily replicable so as to infuse general practice and benefit a larger group of clients. These reflections and observations coincided at the time of increasing attention of international intergovernmental bodies and some national governments to concepts of a knowledge society and a knowledge economy. Most of their interest seemed to relate, however, to the market and economy. It seemed to me that there might be a social meaning as well; in particular, a link between family work and knowledge, replication and scaling up of this knowledge, and the knowledge society. Since the mid 1990s, governments in Australia have taken a growing interest in families, though in making family members job-ready more than in making them life-ready. Paradoxically, some of these governments appear to have become ambivalent about education and
its capacity to create jobs and to make generationally and inter-generationally unemployed families life-ready and job-ready. Pinkerton’s (2000: 219) outline of emerging family support agendas for each of the roles of researchers, workers, agencies and policymakers allowed me to clarify the issue forming in my mind and to identify a process of investigation. For researchers, Pinkerton’s agendas include evaluating what works, deepening an understanding of what works with qualitative case studies, and exploring relationships between local clusters of agencies. For workers, agendas include linking practice to strategic goals of the agency; making operational the conceptual framework; and clarifying and developing methods, techniques and skills used by them. For agencies, the list includes expressing principles and style, and developing integrated interagency structures. And for policymakers, it includes ‘developing a conceptual framework and vocabulary’. I drew from all these agendas so as to contribute to the literature and to their utility by workers, community institutions, and policymakers.

**Research question**

The problem then is what works is often known but not why in practice that relates to families and harm, thereby restricting the capacity to replicate and scale up. This problem exists within the context of an increasing insight into the substantial scale of this issue, its social and economic impact on the community and public policy, and of an emerging knowledge society. The aim of this research is to examine explicit practice, make implicit practice explicit,
and document and frame why what works, works in relation to this problem. This is done with the purpose that clients, workers, community institutions and governments may explore, replicate and scale up so more families with harmful behaviours may benefit. The research question emerging from this aim and purpose is: what is the role of learning in professional intervention with families moving from harmful to harmless to fulfilling behaviours and what are the adjustments required in institutional practice and policy frameworks to encourage this learning in the context of this role and of the contemporary shift from an industrial to knowledge society? Each component of the question is separately explored, linked, and then framed for policy. Each component contains explicit assumptions.

Theory and method

The ecological theory of human development of Uri Bronfenbrenner informed and framed my whole thesis with its representation of a set of nested structures at the centre of which is the family and extending out to the community and its institutions, and to society, its institutions and public policies. I drew especially on the work of Carl Rogers to the mid-1980s in terms of therapy and learning and on Gernot Bohme and Nico Stehr from the mid-1980s in terms of the knowledge society. I undertook pilot interviews in three states, then a year long action research project with a family support service in regional New South Wales. Most of the literature was consulted during the progress of the interviews and the project and immediately following the project. The
literature is characterised by overwhelming interest in some areas of families such as male violence; by underwhelming interest in other areas such as the family as the primary institution; and by little empirical evidence for practice. I seek to fill some of these gaps.

Outline of the thesis

Chapter 2 relates to the research question, theoretical framework, and method of the thesis. Chapter 2.1 includes the components of the research question and the assumptions relating to each component. The components are in the form of focal point questions. Chapter 3 reports on the findings of the action research project with the family support service in which I came to be a co-participant and the workers came to be co-researchers. In my joint reflected practice with them, their work separated into family work, community work, and policy work — a set of nested structures similar to the concept of Bronfenbrenner. The focus of its family work is therapeutic engagement. Many of the findings in therapeutic engagement relate to learning by clients and workers in such engagement and from which I describe a learning process. Chapter 4 has five principal sections relating to discussion of the findings from the action research project and related literature review. These are family and therapeutic engagement, learning in client engagement, professional engagement in the community, and the knowledge society from all of which a policy framework is constructed. This policy framework relates to families and knowledge within the context of a knowledge-intensive society. Two lower
level frameworks are constructed within the policy framework; these relate to
the process and content of life skills acquired in professional engagement.
Chapter 5 identifies the conclusions of the research question and its
components and the implications of these conclusions for practice, policy,
theory and further research.
2.1 Research questions

My research question is:

what is the role of learning in professional intervention with families moving from harmful to harmless to fulfilling behaviours and what are the adjustments required in institutional practice and policy frameworks to encourage this learning in the context of this role and of the contemporary shift from an industrial to knowledge society?

The research question is made up of seven focal points: explicitly families, harmful behaviours, professional intervention, learning, knowledge society, and institutional practice and policy frameworks; and implicitly, life skills.

During my research, the term ‘professional intervention’ was revised to ‘professional engagement’ since intervention implies direction of one person by another while engagement implies the coming together of equals with complementary knowledge and skills, which they exchange. I also came to use the term ‘community institutions’ in place of ‘agencies’; the former implies a range of roles and operations common to government and non-government institutions operating within a community whilst the latter is often restricted in meaning to non-government bodies providing welfare services.
Each focal point was framed as a set of questions. Some sets were identified at the start of my research and some during the course of the action research project and literature review. Each set contained explicit assumptions. Each set acted as a line of enquiry in the fieldwork and the literature review. The question set relating to families is: what is the concept and role of the family; what is the relationship of the family to the outside world, and how does the family develop? I assumed in commencing my research that the family is the primary institution in society; and that the wellbeing of the individual is provided primarily by the family. This set is addressed in chapter 4.1. The focal point question on harmful behaviours is: what forms do harmful behaviours take and in what circumstances are they acquired? I assumed that harmful behaviours take the form of neglect, abuse and violence. Adults perpetrate neglect against children and men perpetrate abuse and violence against women and children. This question is addressed in chapter 4.1. The question uncovered related topics on relationships and on emotions and cognition, also addressed in chapter 4.1. The focal point question relating to professional engagement was: what forms do professional engagements take with families exhibiting harmful behaviours? I assumed that agencies in the community assist the family to acquire life skills. This question is addressed in chapter 4.1 in relation to therapeutic engagement and in chapter 4.3 in relation to other forms of engagement. The focal point question on life skills was: what forms do life skills take? I assumed families acquire fulfilling behaviours by acquiring life skills. This question is addressed in chapter 4.2. The set relating to learning is: how learning takes place in families acquiring life skills and how workers learn
in practice? I assumed that learning of life skills takes place in community institutions focusing on welfare and in schools. Another previously implicit assumption in this question emerged during the project: I had assumed that there is no differentiation between adult and child learning. This question is addressed in chapter 4.2. The set relating to the knowledge society was: what are the characteristics of an emerging post-modern society; and are there terms that are more explanatory than ‘post’, as in post-modern and post-industrial for example? I assumed that knowledge was becoming central to society to the extent that it justified the use of the term ‘the knowledge society’. I assumed too that acquisition of everyday and abstract knowledge and skills allows greater participation and fulfilment by families in a knowledge intensive society. This question is addressed in chapter 4.4. The set of questions relating to policy was: what is the extent to which the present policy context of Goulburn Family takes account of families learning life skills; and what additional steps could be taken to assist them to do so? I assumed adjustments in present public policies could assist agencies and schools in further supporting families to acquire life skills. This question is addressed in chapter 4.5.
2.2 Theoretical overview

**The bioecological theory of human development**

Bronfenbrenner’s (1979) bioecological theory of human development provides an overall theoretical framework for the thesis, one that in keeping with his theory he is continuing to develop (Bronfenbrenner 2001: 117; Bronfenbrenner and Evans 2000: 117; Bronfenbrenner 1999: 4). It informs each of the seven components of the research question in its attention to levels of abstraction of family, community and policy and to development and change in each of these levels. Bronfenbrenner is influenced in his writings by the child and the family, the community, and by the capacity of ‘public policy … to affect the wellbeing and development of human beings by determining the condition of their lives’ (Bronfenbrenner 1979: xiii). The theory rests on the idea ‘of the developing person, of the environment, and especially of the evolving interaction between the two’ that result in ‘lasting change in the way a person perceives and deals with his environment’ (Bronfenbrenner 1979: 3).

His theory has undergone three major iterations. His first iteration in 1979, as an ecological theory of context, focused on one domain of the environmental context of the person but not on the other domain of the person himself or herself (Bronfenbrenner 1989: 188, Bronfenbrenner 1979). His second iteration from 1989 corrected this by focusing equally on both domains of the person and the context. The third iteration came 10 years later with expansion of the
domains from two to four, namely ‘process — person — context — time’ (Bronfenbrenner 1999: 5). The most recent iteration formulates a number of propositions within each of the four domains (Bronfenbrenner 2001: 6963-6970). Common to the four domains is his contrast of human relationships and technical tasks (Bronfenbrenner & Morris 1998: 1014). The contrast allowed me to identify that much of the scholarly and practitioner debate on the seven components of the research question focuses on the technical more than the human. In a more recent iteration, Bronfenbrenner (2001: 6965) describes this notion as two sets of forces — objective and subjective — that drive human development. An interdependent relationship exists between these two forces and each affects the other. It is a dynamic interaction since the forces formed in the past contribute to those formed in the present and those that shape the future. Objective forces are the biological person and their cognitive development, objects, symbols and events. Bronfenbrenner’s inference is that the biological person exists individually and within informal and formal groups — formal groups that includes institutions and their structures. Subjective forces include experiences, feelings and motivations relating to the developing person, to others and to activities in which the person engages. Motivations relate to beliefs, hopes, anticipations and expectations, as well as doubts and forebodings. A person’s positive and negative feelings towards people and activities affect the course of their development and those people and activities to which the person relates. Polarities of positive and negative feelings — such as love and hate, joy and sorrow, desire and revulsion, and curiosity and boredom — often exist at the same time. I now describe each of the four domains.
**Proximal processes**

Proximal processes are reciprocal interactions between the developing person and the environment in which they exist — between the person as ‘an active, evolving biopsychological human organism’ and persons, objects and symbols in the environment external to the person (Bronfenbrenner & Morris 1998: 996). Such processes may occur in either or both directions synchronously or asynchronously. Participation in these processes over time generates knowledge and skills for the person to engage in increasingly more complex interactions and activities. In this way, a child or adult comes increasingly over time to be an agent, if not solely, then of its own development (Bronfenbrenner 2001: 6965; Bronfenbrenner and Evans 2000: 118). Reciprocal interaction produces reciprocal development between two developing people — if one member of a dyad undergoes change from development, the likelihood is that the other member will too (Bronfenbrenner 1979: 65); for example, a child and its mother.

Proximal processes produce two developmental outcomes: competence or dysfunction. Competence allows the developing person to acquire knowledge and skills to conduct and direct their behaviour in some or all of the physical, socio-emotional, motivational and intellectual situations and domains in which that person operates (Bronfenbrenner and Evans 2000: 118). Dysfunction relates to recurring problems of the person in maintaining control over their
behaviour in some or all of these situations and domains (Bronfenbrenner and Evans 2000: 118; Bronfenbrenner and Morris 1998: 1002). Dysfunction is likely to be more severe for a person in deprived and disorganised environments. Dysfunction may be alleviated or redressed for the developing child by attention and involvement of parents or by resources from outside if there is a low degree of parental attention and involvement (Bronfenbrenner 1999: 8). The extent to which one or other outcome prevails depends on the extent of exposure between the developing person and proximal processes. This extent depends on the intensity, duration, frequency, timing and absence of interruption to the exposure (Bronfenbrenner 2000: 118).

The developing person

Favourable and unfavourable conditions of the environment for the developing person are described. Characteristics of the developing person favourable to their development are also described. These conditions and characteristics operate with the developing family. My thesis focuses on the developing adult. I draw on his insights on the developing person, and on the adult context of his work on the developing child in informing my thesis.

Conditions of the environment

Development is an ‘evolving conception’ by the person of their ecological environment and their relation to it. It represents a growing capacity for them ‘to discover, sustain, or alter’ their environment (Bronfenbrenner 1979: 9). A
person is both a producer and a product of development — a producer in influencing the form, content and direction of the proximal process and a product of the outcome of the accumulative effect of the proximal process (Bronfenbrenner 1999). The development of a child comes from participation ‘in progressively more complex activities, on a regular basis over an extended period of time’ with others with whom the child has a strong and mutual emotional attachment and with others who have a commitment to the wellbeing and development of the child (Bronfenbrenner 2001: 6967). The development of a child is enhanced by a third person participating in addition to the child and a parent — a second biological parent or relational parent. In the absence of a third person, a similar or diminished role of support may be performed by another adult in the home of the child, preferably but not essentially of a sex opposite to that of the primary adult. In either case, the third party has strong feelings of affection for the primary adult and engages in joint activity with the child. By participating in this way, the third party may expose the child to a greater variety of activities and experiences than solely a second party. Where there is no third party in the home, the child may be at greater but not inevitable risk of difficulties in development (Bronfenbrenner 2001: 6967-6968).

An enhanced human and physical environment stimulates exploration and proximal processes. A diminished environment produces instability, a low level of structured organisation and activity, and unpredictability of events. This in turn provides ‘insufficient feedback for proximal processes to be set in motion and be sustained’ (Bronfenbrenner 1999: 16). Human disruption comes
from parental behaviour that exhibits neglect, abuse and violence towards each other and/or towards the child (Bronfenbrenner 2001: 6968; Bronfenbrenner and Ceci 1994: 575-576). Human disruption may also come from changes in family composition, frequency of parental absence, relocation of home, school arrangements and employment. Instability over time may lead to developmental delay and psychological insecurity and in turn problem behaviours (Bronfenbrenner 1999: 23). Physical disruption comes from the physical functioning of the home and the surrounding physical environment, the degree of noise and low level of confusion, and its temporal regularity (Bronfenbrenner 1999: 15 citing Wachs 1979: 30).

**Characteristics of the developing person**

Proximal processes are set in motion by characteristics of the developing person. These characteristics are attachment, affection, disposition, and cognition. Active participation in increasingly more complex and reciprocal interactions results in ‘a strong, mutual, irrational attachment’ where those involved become committed to each other’s wellbeing and development often for life (Bronfenbrenner and Evans 2000: 122). A child with a secure parental and/or third party attachment has a basis for forming secure attachments in turn with teachers and others. The insecurity of a child rejected and without such attachments manifests itself in hostile relationships that increase the frequency and intensity of rejection (Bronfenbrenner & Morris 1998: 1015 citing Bowlby 1973). A second characteristic is feelings and expression of affection that build emotional attachment and mutual relationships. These in turn motivate the
interest of the child and adult to engage with other people in the immediate social environment and with objects in the immediate physical environment. And these in turn provide a basis of ‘exploration, manipulation, elaboration, and imagination of the symbolic environment’ (Bronfenbrenner 2001: 6967). A third characteristic is disposition towards development, towards using resources of ability, experience, knowledge and skills, and towards demanding a response from the environment (Bronfenbrenner & Morris 1998: 995). A fourth characteristic is the degree to which the developing person relates to the modes of cognitive functioning of the sub-culture determines the degree to which the developing person relates to the broader culture. A high degree is likely to lead to a high correlation in cognitive performance of the person in the broader culture, whereas a low degree is likely to lead to a low correlation (Bronfenbrenner 1989: 208).

A person occupies multiple positions in society — child, student, worker, parent and so on. Society attributes a set of expectations and beliefs to each of these. The set is known as a role. Changes in expectations often lead to changes in behaviour that lead to further development of the person (Bronfenbrenner 1999: 15).

The development of the child also influences the development of the parent through the life course in the formative years and through adolescence as the
young person strives for independence as individuals and members of peer groups (Bronfenbrenner 2001: 6968-6969).

Context

Bronfenbrenner conceived of the ecological environment as a set of nested and interconnected systems similar to a set of Russian dolls (Bronfenbrenner 1979: 3, 8). He identified these systems as the microsystem, mesosystem, exosystem and macrosystem. These equate with the developing family, community and policy environment of my research question. I construct in chapter 4.5, a policy framework for families and knowledge based on this nested system.

The innermost of these systems is the microsystem. A microsystem consists of the developing person in face to face physical, social and symbolic settings in the immediate environment with features that encourage or discourage increasingly more complex and sustained activities, relationships and roles over an extended period of time. Examples of face-to-face settings are family, school, peers and workplace (Bronfenbrenner 1994: 1645). A mesosystem is made up of linkages and proximal processes between two or more microsystems in each setting within which the developing person is present. Thus, the developing child is present in both home and school settings and events at home may affect the development of the child at school and vice versa (Bronfenbrenner 1994: 1645; Bronfenbrenner 1986: 723). An exosystem is made up of linkages and proximal processes between two or more settings. The developing person is absent in at least one of these settings but events in
the setting in which s/he is absent indirectly influence proximal processes in
the setting in which the developing person is present. Examples of settings are
family social networks, neighbourhoods and communities, and the parents’
workplaces (Bronfenbrenner 1994: 1645; Bronfenbrenner 1986: 723). An
example of an event is a retrenchment of a parent in their workplace, a setting
that a child rarely enters but that may affect the development of the child. The
outermost system — the macrosystem — is made up of the culture embedded
within exosystems, mesosystems and microsystems. This culture includes
shared belief systems and customs, bodies of knowledge, material resources,
opportunities and hazards, and lifestyles and life course options
(Bronfenbrenner 1994: 1646: Bronfenbrenner 1989: 229). This culture is
passed on from one generation to another by processes of institutional
socialisations such as the family, school, workplace and government
(Bronfenbrenner 1989: 229). Public policy forms part of the macrosystem.
Public policy determines the properties of the other systems in which everyday
life takes place, steering behaviour and development of the person
(Bronfenbrenner 1979: 9).

**Time**

The development of the person is not only shaped by historical times, life
events, interdependence and choices that the person shapes too.
Bronfenbrenner (1994: 1646) refers to different dimensions of the passage of
time impacting on the family: the chronological age of family members, the
lifespan of the family and its members, and the historical time of the surrounding environment in which the family is situated. These dimensions exist within a chronosystem:

A chronosystem encompasses change or consistency over time not only in the characteristics of the person but also of the environment in which the person lives (e.g. changes over the life course in family structure, socioeconomic status, employment, place of residence, or the degree of hecticness and ability in everyday life (Bronfenbrenner 1994: 1646).

Bronfenbrenner emphasises two aspects of time: life course and life events. For this, he draws on the four principles of the life course theory of Elder (1998: 961-962) and also adds a fifth (Bronfenbrenner & Morris 1998: 1020-1021). The first principle relates to the historical times in which the developing person lives: that ‘the lifecourse of [the developing person] is embedded in and shaped by the historical times and places they experience over their lifetime’ (Elder 1998: 961). Such times may be the welfare state from the 1940s and the market state from the 1980s. The second principle relates to life events of the developing person: that ‘the development impact of a life transition or event [depends] on when it occurs in a person’s life’ (Elder 1998: 961). Such events are biological (for example, puberty) and social (for example, marriage).

The third principle relates to interdependence of the developing person with other people: that ‘lives are lived interdependently and that social and historical influences are expressed through this network of shared relationships’ (Elder 1998: 961-962). The capacity of the developing person to engage in relationships and the capacity of their environment for social contact and of the...
historical time for them to do so are determinants of the extent they can develop social networks and assist their further development. The fourth principle relates to choice and action: that ‘individuals construct their own life course through the choices and actions they take within the constraints and opportunities of history and social circumstances’ (Elder 1998: 961-962). It is the decisions that the developing person makes that also determine their life course: to marry or divorce, to have or not have children, to stay in the same city or move and so on. The fifth principle relates to product and producer: that the developing person is not only being a product of historical change inferred by Elder but also a producer of historical change (Bronfenbrenner & Morris 1998:1021).

2.3 Method

Chapter 2.3 describes the preliminary fieldwork that I undertook in addressing the research question and its outcome in the form of a year long action research project.

Preliminary fieldwork

Three methods were examined and tested before focusing on one: interviews, case study and action research. Interviews were undertaken from April 2002 to December 2003. Early interviews were with community institutions in Victoria and later interviews with agencies in New South Wales and Queensland. Interviewing followed the guidelines of Fontana and Frey (2000: 645-671).
Interviews tested the assumptions of the initial literature review and refined the set of detailed focal point questions. All interviews were verbal and face-to-face in formal work settings and informal settings that were determined by the interviewee. Most were individual interviews. A few were group interviews of two to five people when the initial contact suggested this or invited others. Group interviews involved questioning individuals simultaneously and balancing the directive role of interviewer with the role of moderator of group interaction. The interview typically involved open-ended questions at the start to set the interviewee at ease with inclusion of close-ended questions as the interview progressed to seek elaboration of a point made by the interviewee. All interviewees signed Deakin University ethical clearances prior to interview. All interviews were recorded, transcribed and copied to interviewees for feedback.

A further intention of the interviews was to identify prospective case studies. Four came to be identified: three in Queensland and one in New South Wales. This was revised down to one as criteria for selection became more specific; as depth of topic became more significant than breadth; to reduce the scale of geographic logistics, and drawing on the advice of Stake (2000: 444) that ‘differences [between cases] are fundamentally more inaccurate than simple measurements [of one case]’; and ‘conclusions about the differences between any two cases are less to be trusted than conclusions about one’.

The purpose of the action research project was to empirically explore the
research question and its seven components. Goulburn Family Support
Services in New South Wales was selected as the action research project for
my research. Goulburn is a mid-size regional community with a predominantly
Anglo-Celtic population. Goulburn Family is a small but growing community
institution that grounds its practice in theory. Its clients are families exhibiting
neglect, abuse and violence in their lives, with it therapeutically engaging them
in moving from harmful to fulfilling behaviours. Goulburn Family came within
the scope of what Wadsworth (1998) describes as the typical topics of action
research as those:

…most concerned with difficult situations of social change, the loss of ways to
meet human needs, the rise of anxieties and fears as we become strangers to each
other, and the threat of dissolution into violence and alienation.

It also came within my criteria for selection of a case: a mono culture within a
self contained geographic community to reduce the variables; a smaller scale of
operations with a small number of participants who were responsible for all the
functions of the agency; identification of project activities of mutual benefit; an
interest in research and in development of practice; and a willingness to engage
in the action research project. The project was enhanced in retrospect by
stability of the practice and staff, continuing development of its practice
framework, growth in its client operations, and growth in collaboration with
community and geographically broader government institutions.
Sequence of the project

Preliminary meetings

Goulburn Family was identified as a prospect for interview in conversations at a family and policy conference in NSW in May 2002. Six months of informal contact followed. This indicated a possibility of Goulburn Family as one of three case studies. A formal interview took place in October 2002 at Goulburn Family with follow up interviews to December 2002. Goulburn Family became the sole case study in January 2003. It recognised the opportunity to gain broader reflections of its family practice through this research project, as I recognised the value of their practice as a case study. In retrospect, I was using the principles of action research method from October 2002 and described elsewhere in this chapter.

Ongoing project

Meetings occurred monthly, sometimes more frequently. Meetings were up to three hours around the kitchen table of the cottage of Goulburn Family. The duration of twelve months became evident mid-way through the project, based on the time required to observe and record the ‘struggle’ of dialogue (Kemmis and McTaggart 1988: 26), in identifying and resolving substantive issues, clarifying changes in the practice of the agency, and resolving occasional tensions between the agendas of the participants and the researcher, and the tenure of the master’s program. Regular participants were the coordinator and four workers. Less regular participants were the administrator, the supervising psychologist, and members of the management committee. The meetings
drew on the guidelines of Stringer (1996: 15, 45, 47-49, 60, 75, 80-83). There was a routine process of engagement. Permanent and changing participants and stakeholders were selected. A venue was selected that related to the lives of the participants. An agenda was set based on the convergent and divergent interests of the researcher and participants and on the situation and problem that were made up of ‘events, activities, perceptions, beliefs, values, routines, and rules’. Questions were framed on why, what, how, who, when and where that draw on the accumulation of results of meetings and the continuing literature review.
Characteristics of the project

I was mindful from the literature that the action research is a social process, exploring ‘the relationship between the realms of the individual and the social’ where ‘people, individually and collectively, try to understand how they are formed and re-formed as individuals and in relation to one another’ (Kemmis and McTaggart 2000: 597). The project had a practical outcome on the work and lives of workers (Stringer 1996: xvi). It not only passively recorded and explained events at each meeting, but also actively involved the workers in pooling their knowledge and skills in recording human development and change and the construction of knowledge (Stringer 1996: 7, 8, 23). It was a form too of professional development that was dialectic and continuous. It stood in contrast to a more common form of professional development — training — that is more passive, didactic and discontinuous.

The workers sought different ways of acting to make a difference in the lives of their clients. Action research assisted them, since action can lead to change (Dick 2000). It is more particularly a process of change to improve or create anew from implementation. As Wadsworth (1998) observes, ‘[t]he moment of inspired thinking is when collective values are expressed in a new way of connecting ideas or a new way of “naming” the world, that advances the collective situation of participants’. Wadsworth (1998) highlights this creative value of a group of qualified people, sharing a common interest and inquiry in common: ‘they choose the questions, decide how they will be answered, interpret the answers and decide what has been “discovered”’. The extent to
which participants shape what the group does is the strength ‘to theorise more creatively, deeply and imaginatively’ and the strength of their scepticism ‘to keep our theory closely in relationship to the practices we are observing’ (Wadsworth 1998).

Workers were able by means of this project to undertake research on themselves (Kemmis and McTaggart 2000: 597), involving not only the study of practice of practitioners but also the social relationships between them (Carr and Kemmis 1986: 186). They became co-researchers with me. They brought a depth of knowledge of local problems and a sense of urgency to resolution of the problems (Greenwood and Levin 2000:96); engaging their knowledge, skills, understandings and interpretations of the social and material world around them (Kemmis and McTaggart 2000: 597). I complemented this by bringing information of other cases and methods and experience in facilitation (Greenwood and Levin 2000:96) and thus became a co-participant with the workers, creating a ‘powerful research team’ (Greenwood and Levin 2000:96).

**Cyclical process**

The Goulburn project followed the sequence described by Kemmis and McTaggart (1988: 10-15) and of Carr and Kemmis (1986: 165, 184) of ‘planning, acting, observing and reflecting’ and constantly repeating and revisiting these steps. At each step, data and literature were gathered and
interpretations emerged (Dick 1993). The process adopted with Goulburn Family Support Services was repetition of the four-step cycle — planning, acting, observing and reflecting — of Kemmis and McTaggart (1988: 10-15) and Carr and Kemmis (1986: 165, 184) at periodic meetings with the agency, and in communications between meetings.

Planning drew on communications between workers and myself, meetings; transcripts of dialogue relating to questions, gaps and actions of the meeting; on visual observations at the meeting; on reflections from the previous meeting; and on outcomes from implementing actions since the previous meeting. A plan would be developed of a proposed action. It would set out for workers to act more appropriately to a situation by them collaborating in practical and theoretical dialogue to improve their understanding of the situation and weigh the benefits, risks and resource implications of alternative courses of action before deciding on an appropriate action (Kemmis and McTaggart 1988: 10-15; Carr and Kemmis 1986: 165, 184).

Acting proceeded from planning. Actions were undertaken between meetings by the workers and myself based on outcomes from the meeting and from generating and intervening events, acquiring information, gathering documents, and recording and transcribing the discourse and dialogue of each meeting. Each action was critically informed rather than spontaneous since it was planned, observed and reflected upon in terms of what outcomes would be congruent with and divergent from the plan. They were open to change in
implementation so as to take account of unexpected circumstances (Kemmis and McTaggart 1988: 10-15; Carr and Kemmis 1986: 165, 184). Observation involved workers articulating convergences and divergences in outcomes of actions and plans at the succeeding meeting (Kemmis and McTaggart 1988: 10-15; Carr and Kemmis 1986: 165, 184)

**Reflective practice**

Reflection looked back on actions within the framework of practice and theory in order to plan, act and observe further. Decisions, events and observations recorded at each meeting and items introduced by myself from wider research were included in the agenda of the next meeting. Reflection involved analysing, interpreting, critically interpreting and evaluating actions and assumptions from the preceding meeting. This was to identify gaps and achieve in theorising and explanations in discourse and dialogue new understandings of the situation and its problems. This dialogue led to adjusting the meaning of the plan in the light of the action. Reflection was also evaluative since workers weighed their experience of the action in relation to the plan and the extent to which the outcomes were favourable and unfavourable (Kemmis and McTaggart 1988: 10-15). Reflective practice was informed by work with their clients, by contact with other community institutions and the principal government funding department of Goulburn Family, and by continuing review of the literature.
Facilitation, participation and research

Means of facilitation

In the capacity of outside facilitator to the group, I served as a catalyst and resource person to the group (Stringer 1996: 22) in pursuit of its common meaning of truth (Wadsworth 1998). I supported the group in gaining a more accurate and meaningful notion of truth and generating more informed choices of action to stimulate change (Stringer 1996: 22-23). I did this by use of theory, mediation between theory and practice, open communication, challenging discourse, explanations of action research, and documentation (Grundy 1982: 30, 32; Tripp 1990: 165).

I brought a wider theoretical perspective to the group to supplement the theoretical base of the group. This wider perspective provided a basis for me to mediate between theory and practice within the critical dialogue of the group (Grundy 1982: 30, 32). I supported the group in unimpeded cross-communication between participants (Grundy 1982: 30, 32). I challenged the group by observing, listening, questioning and providing feedback with the critical dialogue (Winter & Munn-Giddings 2001: 44 citing Titchen 2000). For example, each meeting drew on the research questions; the summary of contents of the last meeting(s); and the events of Goulburn Family since the last meeting. I used open-ended questions early in the meeting and close-ended questions at particular points in the dialogue to encourage expansion on a
particular topic.

Surprises and insights from reflective practice were major reasons to explore new literature and report back to the group (Grundy 1982: 30, 32). I looked for what Tripp and Wilson (2001: 121) call critical incidents around which dialogue was focussed; what Carr and Kemmis (1986: 186-187) call critical moments in dialogue when participants look back and forward; and what I observed as seemingly sudden and profound insights where conscious connections were found between seemingly disconnected and conscious and sub-conscious thoughts from a meeting or sequence of meetings where the previously disconnected item has been the subject of often vigorous dialogue and dialectics. The frequency of these insights increased as the series of dialogues continued and reflection on practice deepened.

I assisted the group with the process of the action research project, its organisation including agendas and dissemination of information (Grundy 1982: 30, 32). I recorded, transcribed and wrote on behalf of the group what was said and what they thought, felt, expected and aspired to — and what impact the facilitator had on the group (Tripp 1990: 165) — for subsequent reflection and dialogue.

**Tools of facilitation**

Co-participants were informed of the use of tools. Transcripts were used as the
primary tool for reflection, anticipation of events, and application of practice. They were edited only in the addition of headings for each topic discussed. Headings served as a reference point for the next meeting. Other tools were used. For example, the purchasing model of the principal funding department was compared with its interpretation by the local office of the principal funding department. A paper by the Australian Institute of Family Studies on family support services was critiqued. A proposed presentation by a worker at an overseas conference was developed. A program for the balance of the action research project was discussed. Successive drafts of practice frameworks and of this thesis were critiqued and developed.

**Evolution of co-participants and co-researchers**

My role in reflective practice evolved through three phases: objective facilitator, subjective participant, and co-researcher. I advised the workers early on in the project that I was acting in the role of objective facilitator. Midway through the project, I outlined the evolution of an additional role of subjective co-participant that had become evident to me in recent meetings. As co-participant, I was influencing the evolution of practice and its outcomes. I was participating in dialogue by sharing with workers my observations and reflections of their practice within a research context; and of observations of their setting and occasional meetings with them and with stakeholders. I was drawing on earlier fieldwork and on my review of the literature on learning, family, community and policy in contributing to this dialogue. I was also assisting them in identifying the policies of the principal funding department.
Subsequently, workers accepted my invitation for them to become co-researchers and to critique successive drafts of practice frameworks and this thesis.

**The value of the researcher to the group**

Participants sometimes queried the continuing role of the researcher. On these occasions, I facilitated full discussion for resolution by the participants. On other occasions, I summarised the value to the group of interaction of practice and research. On a continuing basis, I advised participants of my observations as researcher on the practice of the agency and the process of the project; I encouraged them to think about the terminology and language in use, on theories to explain their practice, and on the process of learning underpinning the process. The value of a researcher/facilitator/co-participant to the group was summed up post-project by a co-participant:

> The interesting part about having someone external looking at it and trying to put some boundaries or some form around it is that things that we don’t notice and that now we start to notice … it has provided me with a reasonably good way of thinking about what we are doing and what are all the little parts of it. Even writing it down. The insights that have been made explicit that we were keeping implicit (transcript 10 December 2003).

**The rigour of the project**

I sought to ensure the rigour of the project in terms of reliability, bias, validity, generalisability and ethics.
Reliability

The test of reliability in collecting empirical data in this project was the extent to which, as MacNeil (1990) indicates, ‘anybody using this method, or the same person using it at another time, would come up with the same results.’ I drew on the guidelines of Livesey (n.d. a) of consistency, precision and replication. The test of consistency of data collected was summarised in the question: would ‘the same question asked of the same person in similar circumstances, produce the same answer?’ The test of precision of data collected related for example to the representativeness of a group and the level of response I received from workers. The test of the ability to replicate this empirical project was summarised in the question: ‘would the same results be gained time after time, no matter how many times I conduct this research?’ and that the relationships I established through the data collected were not the result of chance or accident. Continual repetition of the cyclical process occurred (Dick 2000). Each step in the cycle allowed testing of the data gathered since the last step, testing of the accumulation of data since the start of the project, and testing of the assumptions and interpretations of this data. Outcomes of previous actions were tested against results of actions of those plans.

Critical theorems emerged from critical intent and contemplation, dialectics and reflexivity of existing theories and practices. Critical theorems are claims to truth by participants that can be tested (Grundy 1982: 28-29). Critical intent
came from rigorous examination of the workers’ own practice within the context of their social consciousness and for them to overcome impediments to realise their practice as a social good (Grundy 1982: 28). Workers did not need to have grounding in theory though those at Goulburn Family do, only access to theory through the facilitator and their own enquiries for dialectical and reflexive dialogue (Grundy 1982: 28-29).

Practice and theory were not entirely known at the start but emerged as equal and related and transforming each in reflective practice as workers identified the status quo, then change in the status quo; and secondly as they moved out from specifics of a situation to exploring different perspectives, discourses and theories that shed light on and helped critically evaluate their practice (Kemmis and McTaggart 2000: 598):

You can begin action research by asking initially fuzzy questions using initially fuzzy methods, thereby gaining initially fuzzy answers. You may then use those initially fuzzy answers to refine your methods as you proceed. To say it differently, research content and research process both develop as the research proceeds (Dick 2000).

Highlights of the literature review were shared and discussed with workers as part of the interactive practice/theory process:

…you use a flexible and responsive approach you probably cannot know where the data will lead you. Choice of literature is therefore difficult; at the start of a study you may not know what literature will later become relevant. It therefore makes sense to postpone reading until the relevance of literature can be judged easily. In turn, this may have consequences for the structure of the eventual thesis (Dick 2000).
Bias

The recording and interpretation were affected by my personal biases as researcher, namely that the potential of individuals and families is unlimited; idealism is a form of normative and unrealised realism; and that my research provides immediate as well as longer term utility.

Validity

I used a number of measures with a view to ensuring validity. I always collected data in the same way (Livesey n.d. b: 4). Data always related to the same basic research questions. Data was dialogue recorded at each meeting, then transcribed and circulated for critical reflection. Critical reflection allowed scrutiny, debate and negotiation of different perspectives (Winter and Munn-Giddings 2001a: 21). Furthermore, there was a willingness by workers to act on the results of the action research and on the degree that outcomes match their expectations in solving the problem (Greenwood and Levin 2000: 96).

Generalisability

Generalisability of results from the Goulburn Family project came from comparing interpretations of the researcher with those of the literature, from logical analysis in the form of this thesis (Dick 2000), and from participants in the project. Generalisability also came from understanding the context within which the knowledge had been created in one setting, understanding the contextual conditions of other settings, and reflecting on the commonalities and differences in the practice and context of the settings and the consequences of
application of the practice and context to the other settings (Greenwood and Levin 2000: 98; Bronfenbrenner 1979: 3-4)

**Ethics**

The project adhered to the ethical guidelines of Deakin in collection, analysis, reporting and publication (Deakin University 2000 a, b). Each participant completed a Deakin University ethics consent form prior to the first recorded and transcribed contact.

**Data handling**

**Procedures for data collection**

The project followed and expanded on the procedures of data collection of Winter and Munn-Giddings (2001b: 223-224) and Kemmis and McTaggart (1998: 106-108). The principal forms of data were transcripts and stakeholder publications. The process of the project was communicated to members prior to commencing and as it evolved. Workers provided overall permission for proceedings to be recorded. They were also advised at the start of each meeting that proceedings were to be recorded. Each recording was transcribed and circulated for comment and adjustment so that ‘those involved are satisfied with the fairness, accuracy and relevance of accounts which pertain to them’ (Kemmis & McTaggart 1988: 108). Transcriptions were circulated on the understanding that no one else would sight the transcribed documents or
extracts of them without prior permission of participants. Participants were reminded from time to time of the advice in the Deakin University ethics consent form that ‘aggregated results will be used for research purposes and may be reported in scientific and academic journals’. Workers read two successive drafts of the chapter on fieldwork and the final draft of the full thesis.

**Analysis of the data**

Critical reflections on the data collected became the basis of analysis (Winter and Munn-Giddings 2001b: 235) during and after completion of the project. These critical reflections were shared during the project as a collaborative process between researcher and participants to detect different interpretations and practical implications for additional reflection and amendment (Winter and Munn-Giddings 2001b: 235). Thus, the analysis not only sought evidence to prove or disprove the original assertion of my research but also revealed along the way other possibilities that were not known at the start but came from changes in aspects of the original assertion (Winter and Munn-Giddings 2001b: 235). Dialectical adjustments were made to the data from identifying in statements contradictions of a participant or between participants that suggested issues on which participants disagreed, indicating where further dialogue was appropriate to achieving consensus (Winter and Munn-Giddings 2001b: 237-240, 248).
Coding transcripts and constructing frameworks

Each transcript was coded and framed by topic heading in tabular form and from this in text in the first draft of the chapter on fieldwork. The tabular form provided a visual overview on one page. Coding and recoding of accumulated transcripts from August 2003 allowed construction of successive drafts of an explicit practice framework and chapter 3 on findings. I prepared a pre-version coded framework of practice from the accumulated transcripts for the August 2003 meeting. I prepared a first full version coded framework of practice from the accumulated transcripts for the September 2003 meeting, following two intervening meetings that considered the pre-version. I reflected that the most recent transcripts were generally the most content rich since each built on the last facilitated reflective practice. Transcripts were characterised by sudden and profound insights by participants, the process of which was described earlier. I prepared a second full version coded framework of practice and a first draft fieldwork chapter for a second meeting in September 2003, drawing on feedback from the first meeting that month. This represented the final project meeting. I prepared a third full version coded framework of practice and a second draft fieldwork chapter for a first post project meeting in December 2003 with further reflection advised by phone to me. I prepared a final draft of the thesis including a third draft fieldwork chapter for a second post project meeting in February 2004. This was critiqued by the workers and the supervising psychologist and the outcomes included in the examiners’ copies.
Measuring

The first and second full versions of the coded framework of practice of coding included a scale of one to ten of two measures against each item: firstly, the degree of explicitness by the worker with the client of each stage in the therapeutic engagement process; and secondly the degree of explicitness by workers of each stage of the therapeutic engagement process in reflective practice. This provoked additional insights by workers. The third version included measurement at three points in time in the year long project: December 2002 and April and September 2003. This time scale allowed workers to identify what items increased, decreased and remained the same in explicitness over the year and explore reasons for these variations. The measurement allowed workers to reflect on what the score was and what it should be.
Chapter 3: Findings of fieldwork

Context of Goulburn Family work

I examined each of the components of the research question in the practice of Goulburn Family Support Services during the twelve months of the action research project. Goulburn Family is located in Goulburn, New South Wales. It is two hours from Sydney and one hour from Canberra. In the past, it was an agricultural and railway centre. Government is now a major employer with a prison, police academy and base hospital. Population has been static and with a significant proportion in the lower socio-economic groups, many who are unemployed. Goulburn Family has been operating for twenty-five years. It is one of a number of family support centres in New South Wales. It expanded to three paid workers and three volunteer workers during the time of the action research project. It has extended its family work over time from information, advocacy and casework to having a principal focus on therapeutic engagement. It extended significantly during the project from family work to community work and policy work. It undertakes these forms of work within the context of what it describes as a ‘learning organisation’ made possible by participatory leadership, reflective practice and openness to research.
The project followed the method described in chapter 2.3. This chapter is presented in the form of a framework of practice that evolved over the twelve months. Each section of the framework described here addresses focal point questions listed in chapter 2.1. I focused throughout the project on making implicit practice explicit; identifying learning by clients, social workers and the organisation; relating the practice to a literature review that continued through the year and subsequent research period and constructing with the workers the practice framework. The components of the framework are family work, community work, and policy work. The principal components of family work are context, casework, and therapeutic engagement. The principal component of therapeutic engagement is learning.

**Family work**

**Family**

The family is central to the work of Goulburn Family. It has a broad definition of family:

What is family? It’s connection of people, whether it is biological or through marriage; caring for children at some stage in their lives; they care for each other. In some case, the family may not have children. There might be husband and wife but there’s the mum and the father on both sides. That is their family. We are all members of a family (transcript 8 July 2003).

To Goulburn Family, anyone presenting is a member of a family. A single
person or couple without children living away from home or by themselves are members of a family made up of parents, aunts and uncles and cousins.

Goulburn Family seeks to engage ‘the whole family; [Goulburn Family] deals with the family as the unit’ (transcript 5 August 2003). Goulburn Family distinguishes between the initial presenting client and the family as client. The initial client may be a single member of the family. The family as client usually means engagement of the man as well as the woman and often the children. It engages the perpetrator as well as the victim. Workers are both male and female. Goulburn Family engages first with ‘whoever walks through the door’. These are usually adults. Goulburn Family engages each time with the adult and then if appropriate, with the child or children (transcript 16 September 2003). The engagement is an emotional human engagement as well as a technical one.

The family is a base that people can return to (transcript 8 July 2003) a similar concept to that of Bowlby (1988). Family is something that ‘people have a lot of time for and draw strength from. When you talk to somebody about connecting with family, that is something they want to do’ (transcript 8 July 2003). Those in ‘dysfunctional lifestyles’ become ‘quite functional’ when they move back into the family grouping (transcript 8 July 2003).

Clients are referred to Goulburn Family by government and non-government agencies, family and friends, past clients and self-referral. One third of initial clients are self-referrals. Mental Health and Probation and Parole provide many
referrals in contrast to Goulburn Family’s principal state funding department of the government, which provides virtually no referrals. Two thirds of initially presenting clients are female and one third male. Most initially presenting females are between 20 and 50 years of age. Most initially presenting males are in a narrower age group ranging between 20 and 40 years (Goulburn Family statistics 13 October 2003). It is likely that the family as client means that the proportion of females falls to a little over half and the proportion of males increases to a little under half as Goulburn Family seeks to engage the other partner. It is also likely that the family as client means the age range widens as Goulburn Family seeks to engage children of the partners.

**Family work**

Family work at Goulburn Family consists of the family, a home-like setting of practice, and provision of personal space and time for the client in the practice. Within this context, the practice engages people emotionally to tell their story, often for the first time, in conditions detached from frequently intimidating and chaotic home environments, and equally to allow the worker to establish a mutual and trusting rapport that opens up multiple perspectives for the client and builds capacity for moving from harmful to fulfilling behaviours. All the workers work from a practice framework that is grounded in theory that they share with the client. This framework is based on each person being a member of a family; on the whole family; on relationships, behaviours and affects within the family; and on therapeutic and learning engagement of an exchange of information by client and worker dialogue. This builds capacity for action.
The emphasis is on keeping the family together but not invariably (post-project transcript 11 February 2004).

For Goulburn Family, family work means family relationships, behaviours and affects (post-project transcript 10 December 2003). Virtually all clients have relationship issues. Most explicitly present for these reasons. Others may present for other reasons but usually the underlying reason subsequently and explicitly revealed is relationship issues; for example, the client may be ‘spending the money inappropriately’ (30 September 2003) in compensating for an unhappy relationship. The supervising psychologist of Goulburn Family describes this work as ‘a form of therapeutic intervention’ that raises awareness, raising capacity and reflecting on action:

…you can have a therapeutic interaction without having to call yourself a therapist. What we were talking about [is] family support [that is] a therapeutic approach in all sorts of ways. The major way this is done when you interact with [clients] is highly therapeutic. It may not always produce an instant result but it makes the people aware of what the issues are. … The process is partly listening but what you are trying to do is raise this person’s awareness and their own capacity to reflect on what they are doing (transcript 14 May 2003).

Casework

Casework involves referrals to and from agencies to match the needs of the client in addition to relationships, behaviours and affects. Goulburn Family provides therapeutic engagement whilst other community institutions provide
complimentary services. For example, one agency in Goulburn provides emergency accommodation, refuges, long day-care and child protection services. Each refers clients to the other. Casework may come prior to, during and/or after therapeutic intervention. In one example of casework preceding intervention, Goulburn Family identified and met immediate needs of the clients, provided them with negotiating support for accessing other agencies, and then supported them in therapeutic engagement. As I later summarised:

you are helping [the client] right there and then — the family that came in about no heating, they needed blankets, in one hour flat you had it all organised. In that case, you were acting on their behalf for them. Once you had the emergencies out of the way, the next thing was that you then skilled them up in negotiating by themselves to go to the court or go to the agency or go to the housing department and so on – on their own or may be go hand in hand on some occasions (transcript 16 September 2003).

Casework may involve supporting clients in constructing a pathway of development through community support to meet a range of needs identified in therapeutic engagement. In one case, Goulburn Family was therapeutically engaging with young mothers in their teens and early 20s and where appropriate referring them to their affiliated playgroup where they learned a range of skills in addition to reinforcing the relationship skills previously learnt. Presentations there were made to the mothers by other agencies such as Community Health and engagement in turn with them (transcript 16 September 2003).
Therapeutic and learning engagement of the client

Context

Therapy and learning

Therapeutic and learning engagement of the client is at the centre of the practice of Goulburn Family. Therapeutic engagement means healing the harm by undertaking a journey from harmful to fulfilling behaviours. Therapeutic engagement also means learning engagement: ‘the therapy comes from the learning’ (transcript 16 September 2003). Learning is implicit in therapeutic engagement: ‘we … do a lot of learning in there and some of [the clients] don’t realise they’re learning but they go and take it away’ (16 September 2003). For the supervising psychologist, learning is about building capacity: ‘learning is about becoming more responsible. [Clients] have a capacity to do it themselves, rather than having it done for them, or having it fixed up for them’ (transcript 8 May 2003). This sequence is similar to Stehr’s (1994: 8, 95–99, 182–184; 2001a: 89; 2001b: 497) definition of knowledge as the capacity for action. Capacity for action comes from exchange of information and dialogue between client and worker. Learning is a cycle. The client learns in therapeutic engagement, goes away and practices it, returns having succeeded or failed, revisits the learning and goes back and does it the same or differently. It is like a spiral in that it is not just revisiting but moving on (transcript 16 September 2003). The process of learning means re-learning — unlearning and learning (transcript 5 August 2003).
Emotional engagement

The engagement involves emotional contact from the start between the client and the worker that allows rapport to be gained speedily: ‘we treat them as people’. This is reinforced by storytelling by the client (post-project transcript 11 February 2004). The worker more often than not encourages other members of the family to join in such engagement in subsequent meetings. There is a consciousness of the presence of the family, whether or not other members are physically present.

Application of tools

Technical tools are used within the emotional context of therapy and learning to complement and build on the emotional contact the worker makes with the client. The tools include the setting, fair process, the client’s story, the script, the nine affects, the compass of shame, the social control window, rating feelings, and the setting. The first two pervade the whole engagement and are discussed here. The second two are used at the time of the process when information is provided by the client. The others are principally used in dialogue and reflection; these are discussed later. The setting had been previously implicit in the practice of Goulburn Family. I came to share my observation with workers that the home-like setting of the lounge rooms of the cottage was significant to therapeutic engagement. Reflecting on these
observations over subsequent months, the workers came to a view that the informal setting of the lounge room was ‘essential for building rapport’ between the client and the worker (transcript 30 September 2003). This setting is in contrast to and detached from the not infrequent chronic physical conditions and adverse behavioural environment of the client’s home that might cause distraction to the client and worker. I also observed that this detached setting provides a personal space for the client and worker to engage in discourse and dialogue. This observation prompted one worker to indicate: ‘I like what John talks about — a space to gain self-worth and a space to gain the worth of the family (transcript 8 July 2003). I added that:

once you give them that space … it is often the first time in their lives in which they have a personal identified space. The context of that space is the family surrounding that space. The next circle out is other families or other events that come into play there. But the person is the constant, the family is the constant, through life.
Everything else is non constant (transcript 8 July 2003).

One worker responded to this interpretation by saying that the inner circle is a ‘space to gain the freedom of what happened’ to which I responded ‘is happening and what might happen in the future’ — ‘to turn over the page’ as the worker responded in turn (transcript 8 July 2003). Time is a gift to the client to be listened to in the fullness of their story: ‘giving them the time to describe …’ (transcript 5 August 2003).
Goulburn Family uses the term ‘fair process’ (Kim & Mauborgne 1997: 69) in describing a process of engagement, explanation, expectation and clarity (transcript 30 September 2003): ‘engagement in that we engage with the person, explanation where we explain to them about affects, [and] expectation and clarity of what do you want to do with the rest of your life (transcript 30 September 2003, my emphasis). Engagement is the whole process, explanation takes place in exchange of information between client and worker, and expectation takes place as a prelude to planning. Engagement involves what came to be constructed as a therapeutic and learning process. This consists of a sequence of steps: information by the worker, dialogue, planning, and action. These steps are now described in turn.

_Acquisition of skills_

Skills are acquired in the process of learning engagement. The principal skill is relationships and the emotions that underpin them: ‘when we get a client in and they learn about their emotions, they then understand how other people might react’ (transcript 16 September 2003).

I also suggested that the client is learning skills of storytelling, disclosure, and oral literacy, and gaining skills to do this in other situations:

One of the things they are learning is they can tell their story and how they tell their story. So they are practising how to tell their story. So when they meet with fellow
mums and dads in the playgroup, they have acquired skills about how they can tell their story. If they go and drop right in and no one has been able to tell their story, [the professional interventionist] has that much more work to do. (transcript 8 July 2003).

I introduced the notion of existing but misapplied skills of clients such as manipulation (transcript May 2003). The response of the supervising psychologist was that the skill of manipulation is often well developed. An example of manipulation is acting in the role of the outraged victim to create ‘a situation to their advantage’ (transcript 8 May 2003). The worker identifies and supports the client in reapplying manipulation skills as negotiation skills.

Information by the client

The story of harm

The tool used by Goulburn Family in identifying harmful — and fulfilling — behaviours is the life story of the client. These are represented by harmful life events and experiences. A culminating life event may trigger contact with Goulburn Family. For example, acute fear of further escalation in harm by the other partner had triggered contact with Goulburn Family by one client:

She had had a long-term violent relationship. Her ex partner rang and said he was coming to see her and the children. That triggered a huge fear. The abuse over the years had been pretty [horrendous] (transcript 5 August 2003).

A worker identified that the life story placed the harmful life event in the context of their life, when reflecting on my pre-version coded framework of
practice:

When I look at this [broader framework] — disclosing the life story and the life event — it’s disclosing the life event within the context of the whole of life or part of life. [It is] putting it in a context of their whole life … different events that had an ongoing accumulative impact … You’ve got to get them to tell their story (transcript 5 August 2003).

Workers are conscious that the engagement itself represents a separate life event, both emotionally and intellectually (transcript 8 July 2003). Often clients are telling their life story and disclosing details of often deeply embedded and subconscious events for the first time since many have not been invited to do so before.

The client presents in the role of victim or perpetrator or both. Victims are often helpless … By treating them as a person; we are installing back into them a personhood, not a victim hood (transcript 16 September 2003).

Acknowledgment, clarification and sharing

Acknowledgment and clarification allow clients to tell their story in such a way that the worker is not directing but acknowledging the client as the story unfolds (transcript 30 September 2003). Sharing the story builds respect for the client that is intended to be felt by the client: ‘you give them the respect of allowing them to share their story’ (transcript 5 August 2003). The worker uses scripted and unscripted questions to clarify and frame the story. Clarifying through questions provides information for the worker about their life story and events, including the event that brought them into engagement with Goulburn.
Family and ‘the underlying issue which culminates in the presented issue’ (transcript 5 August 2003). The scripted questions of Goulburn Family identify the emotions surrounding the events, the impact on the client, and the impact on the relationship with others. The greatest impact on the victim comes from the two last questions of both sets:

In the questions, we ask them: how do you think this has affected others; then how’s it impacted on you. They can tell their story and all of that is really important but the real one is: how it’s impacted on you even if they are a perpetrator (transcript 8 July 2003).

Table 1: The scripted question

<table>
<thead>
<tr>
<th>Questions for the perpetrator</th>
<th>Questions for the victim</th>
</tr>
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<tbody>
<tr>
<td>What happened?</td>
<td>What did you think about when this happened?</td>
</tr>
<tr>
<td>What were you thinking about at the time?</td>
<td>What have you thought about since?</td>
</tr>
<tr>
<td>What have you thought about since?</td>
<td>How has this impacted on yourself and others?</td>
</tr>
<tr>
<td>Who has been effected and how?</td>
<td>What has been the hardest thing about this for you?</td>
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<td></td>
<td>What would you like to happen now?</td>
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</table>

Information by the worker

Goulburn Family draws on its accumulated knowledge of relationships, harmful behaviours and affects and their interdependence in providing appropriate information to clients on relationships, behaviours and affects.
Relationships mean first and foremost adult partner relationships and then ‘relationships with children and relationships with other people’ in the family and outside the family (transcript 30 September 2003). The supervising psychologist describes relationships as so intense a responsibility that ‘it is very easy to displace that responsibility. Instead of saying: I’m doing it badly, you could say it’s all her fault…. We have the typical thing where: I beat you up because you force me to; it’s your fault’ (transcript 8 May 2003). The centrality of relationships comes to the fore with clients when the worker prompts the client to reflect on positive experiences: ‘when they describe good times, they realise that it is when other people are around’ (transcript 4 March 2003).

Goulburn Family distinguishes between the roles of victim, perpetrator and helper in relationships. A victim in some circumstances may become a perpetrator in others. A helper is the victim helping the perpetrator perpetrate an act against another victim. These roles may be displayed at different times by the same person (post-project transcript 10 December 2003).
Harmful behaviours of neglect, abuse and violence

Goulburn Family distinguishes between relationship behaviours and mental health and intellectual disability (transcript 30 September 2003), referring the last two to relevant services in the community. Goulburn Family’s responses are determined by needs. They are guided by Maslow’s (1987: 22, 56-57) hierarchy of needs. In their view, relationships constitute a basic need once acute food, clothing and shelter needs are met.

I introduced the distinctions of neglect, abuse and violence to Goulburn Family in May 2003. This led to reflection on the meaning and extent of these distinctions. Neglectful, abusive and violent behaviours within families are often outcomes of adverse relationships between partners. Neglect, abuse and violence are perpetrated by male and female clients. Goulburn Family recognise inequalities in gender but see harmful relationships as more fundamental: ‘there have been inequalities historically but on the ground it’s the dysfunction in the relationship, the behaviour that is the problem’ (transcript 30 September 2003). For men:

Blokes think to feel good about me, I've got to be calling the shots and the sheilas have got to be fitting into their place in the world. So adjusting the reality is adjusting the reality about women. Once they do that, they can feel good about themselves without necessarily having to be dominant with women (transcript 8 May 2003).

I sought to distinguish in more detail neglect, abuse and violence. Reading the literature led me to interpret neglect relating to children. I reframed this
assumption during the project to neglect of relationships between adult partners and towards their children: ‘neglect [is] when people [are] in a relationship and what they [do is] neglect the needs of the other people’ (transcript 16 September 2003) including children. An example of neglect for Goulburn Family was clients who:

avoid dealing with any difficulty in the relationship by throwing themselves into work or the dogs or we had another guy who spent all his time with his pigeons. He’d arrive home at 5 o’clock: I got to feed the pigeons (transcript 8 May 2003).

For Goulburn Family, ‘most [of] what is termed … domestic violence is domestic emotional abuse’ (transcript 8 May 2003). ‘Emotional abuse is as significant as the bruises’ (transcript 30 September 2003). It may take the form of punishment:

The AVO [apprehended violence order] is punishment. The AVO has nothing to do often with anything other than [that] … Of all the AVOs here, there’s only be one that I can think [who] had a valid reason to have an AVO put out on her ex partner and it didn’t make any difference anyway (transcript 5 August 2003).

Violence occurs when other forms of domination are unsuccessful (transcript 8 July 2003): ‘When the emotional fails, the physical comes out’ (transcript 8 April 2003). Violence is about domination and isolation by the perpetrator when other forms of domination such as neglect and abuse do not work. Domination comes from ‘needing to feel good about yourself’. To do this, ‘you’ve got to be in control’. Violence occurs ‘when you are not feeling good’ about yourself and ‘things are not the way you want it’ (transcript 8 May 2003). Violence comes from domination by the perpetrator in a relationship with the victim. Domination comes from the perpetrator’s feelings of shame. It is a means by which the perpetrator tries to feel good about themselves. It
involves attacking the victim so as to isolate them. The effects of physical harm are more evident amongst female clients than male clients but cases of female violence also present to Goulburn Family. In one case, the male partner had gone to jail for the female partner’s violence. It was six months before this became known (transcript 30 September 2003). In another case, ‘she had a knife to his throat before. She had threatened him before and said: I should have killed you when I had a chance’ (transcript 30 September 2003). In a third case:

The neighbours … called the police, dragged him into the back of the paddy wagon. They’ve locked him up. He’d gone bizarre … she’s done all this abuse of him … you can just see that she had really got into him (transcript 30 September 2003).

**Affects**

Goulburn Family distinguishes between affects, feelings and emotions. For Goulburn Family, ‘the affect is the emotions and feelings’ (transcript 16 September 2003). Affects are ‘the physical manifestation within our body from a range of stimuli of things happening around us that turn on our emotions which are the affect occurring and the memory of every time that happens’ (transcript 16 September 2003). Affects can be indicated verbally and bodily: ‘There’s not just an affective statement; there’s an affective look. You’ll see mothers look at kids’ (transcript 8 July 2003). Feelings are ‘what happens physically to us afterwards. We can feel happy and euphoric or sad’ (transcript 16 September 2003). Emotions are ‘the physical affect occurring and the memory of every time that’s occurred’ (transcript 8 July 2003). The story can
tap deeply embedded long-term emotions: ‘What the affects do is turn on the emotions and all the memories of what happened in the previous 15, 20, whatever years come piling back in …’ (transcript 5 August 2003). In one case, a client came to Goulburn Family after the partner left him and in this first contact was engaged to the extent where he was soon relating an incident that had occurred 50 years before and that had ‘been holding him back all this time’ (transcript 8 July 2003).

‘Sharing of affect very quickly builds the relationship’ between the client and the worker (transcript 5 August 2003). Clarifying the client’s story assists the worker to identify and share with the client the affects that underpin the story (transcript 5 August 2003). The worker does this by describing affects in their physical terms. This assists the client in shifting from a focus on self to a focus on the physical experiences of self in response to affects. This objectifies the experience of affects and their related feelings and emotions (transcript 4 March 2003).

Goulburn Family focus on one of nine affects identified by Tomkins (1987: 139) and particularly on the follow up work of Nathanson (1997, 1996, 1992) on the affect of shame and its role in harmful behaviours. Goulburn Family describes the physical manifestation of shame as:

…the blood vessels filling with blood and hence the red face; the muscle in the neck and shoulders losing muscle tone, hence the head dropping. [These physical manifestations] take [the] attention [of the client] away from something that was
previously causing interest, excitement, contentment, enjoyment (transcript 4 March 2003).

The process of shame is triggered in a family:

…when something happens to a family and somebody in the family is struggling and people when they are struggling often … the shame affect kicks in and they tend to want to be by themselves, they exhibit behaviours that drive others away. So within a family when they are struggling, instead of pulling together, they are driving each other away and hence we get them in here. So when money is tight, when things are all a real struggle and they start bluing with one another, bluing is about the shame affect kicking in, and others withdraw (transcript 16 September 2003).

Learning tools provided by the worker

A range of formal, explicit and graphic learning tools is used to convey information about relationships, behaviours, and affects (transcript 16 September 2003). As discussed earlier, these include the script of questions, the social control window, the nine affects, and the compass of shame. My emphasis on explicitness led early on to Goulburn Family providing copies of these tools and then explaining them to the client (post-transcript 10 December 2003) in everyday language so that the client is engaged in theory and in practice and can reflect on them at home and in action. The script is used for expanding on and challenging aspects of the story. The social control window visualises four choices for the client of what we do with people in juxtaposition to what we do for people, what we do to people and what we do not do for people (transcript 30 September 2003). The compass of shame visualises four responses by the client to the affect of shame, namely to attack others, attack
self, avoidance, and withdrawal (Nathanson 1992: 132). Avoidance and withdrawal are forms of neglect (transcript 30 September 2003). Attacking others and self are forms of abuse and violence (transcript 30 September 2003). For the client:

[The compass of shame] is such a hands-on thing. That’s the beauty of it. People can get hold of it and take it home and work on it themselves (transcript 5 August 2003). They learn about the compass, then they apply it — it is a two part thing — and then when they have applied it — going in to attack others, the compass of shame kicks in, they back off, and then a hour later: gee, I’ve applied that, I feel really good (transcript 16 September 2003).

For some clients, the compass of shame produces immediate recognition of their responses to shame:

…when the compass [of shame] was presented to him with all the captions on the side, he just went bang: this is me. He’s had time to go away and reflect. I was there, I was here, I was out here. The fact that he’s recognised where’s he’s been and where he’s going, gives him a tool to try and pull back that reflection time (transcript 8 May 2003).

The compass of shame provides an explanation for affects and for their behaviours in response to affects:

…the knowledge of having a framework to understand emotions. Once we explain that to people they walk out and they feel: I am in control of my life. I can really get on. I can really start to understand why people are behaving like this, why I am behaving like this and I don’t need to do that anymore. I don’t need those behaviours. We talk about the cycle of changing behaviours, changing experiences and then your attitudes and we’ve got that … on the inside and people go: yeah, it is all coming together’ (transcript 5 August 2003).

Informal learning tools are also used: metaphors, stock phrases, examples and
stories. Stock phrases allow the client, in language to which they can relate, to understand the meaning of emotions and their affects; to identify interests, strengths and assets on which they can build; and to gain alternative ways of looking at the world. Thus, ‘people want the best for their children’ identifies interests and assets (transcript 8 July 2003).

**Dialogue**

The exchange of information by the client and the worker provides the basis for triggering receptiveness to dialogue, learning and acting (transcript 5 August 2003). The worker encourages dialogue by challenging and using learning tools.

Goulburn Family provides support and pressure to act: ‘what we are doing is providing them with support but at the same time applying pressure to enable them to move on from the position they are in’ (transcript 4 March 2003). The worker may challenge the affects revealed in the story: ‘you look for areas where you can challenge [the story]’ (transcript 5 August 2003). Challenging may also occur when the client is withdrawing or avoiding the worker because of the shame affect:

Invariably when they are not telling the truth the emotion doesn’t come out as much. Then we start out explaining the [compass of shame] and they reach the stage where they understand it in separating the behaviour and the person, then you revisit the story and they say: oh, look, it wasn’t quite right, there was that actually. Oh, right,
tell me. Then they start telling you the true story. They get to the stage where they feel comfortable enough to confronting the shame. You put a situation where you respect and support and it is then that they will confront their own shame (transcript 5 August 2003).

Challenging may be in the form of emphasising the strengths of the client before confronting their harmful behaviours. For example, a youth had repeatedly exhibited inappropriate behaviour at school. Once the relationship had been established between the client and the worker, the client was challenged by the worker making explicit the intellectual strengths of the client and contrasting them with their behaviour. Challenging by suggesting the skill of manipulation can be reapplied from harmful ends to harmless and fulfilling ends.

I said: you pick things up quicker than the average bear. You’re really smart, actually. You can manipulate situations. Given what you want to be — [the client] wants to be a journalist or a lawyer, that’s not a bad quality to have. You can manipulate situations. You can press buttons. You can make it happen. And [the client] said, yeah. And I said: which makes your situation even more reprehensible, doesn’t it?! (16 September 2003).

The client acknowledged that they owned the behaviour and that it was inappropriate and that they were using the abilities they had to inappropriate ends (transcript 16 September 2003).

**Client reflection**

The worker encourages reflection *on* action and reflection *in* action and the assumptions that underpin the action since some assumptions are in everyday
life never identified and questioned: ‘some things you don’t question why you do them, you just do them’ (transcript 5 August 2003). The story encourages reflection *on* action:

We then go back to their story and we view their story in the light of the new information they have been given and then let them describe their behaviour that intuitively comes back to a response to shame and they start to see their behaviour in those terms (transcript 4 March 2003).

The compass of shame encourages reflection *in* action:

…we … teach them about the compass of shame and say: if this person is coming at you, and they are feeling shame is occurring and now they are in attack others [mode], how could you more appropriately respond; and one of the things to say to them is: look I can see you’re upset, please tell me … (transcript 30 September 2003).

Based on these tools and on reflection, Goulburn Family introduces a fifth — but constructive and informed — response to shame. Namely, an informed choice: if ‘they are not in possession of all the information, then their choice is not informed (transcript 5 August 2003). The choice is what they see as best for them, not what the worker sees as best for them even though the worker may have doubts. It is about ‘finding their own level to a point where they feel happy and self managing, not to … a level the worker believes they should be’ (transcript 22 October 2002).

At the same time, the worker encourages a re-identification of role by the client; not as a victim of sexual assault, for example but as an individual and a family member making informed choices about their future. ‘People allow themselves to be defined by others or by events. What we are doing is allowing
them to move that definition of themselves’ (transcript 8 July 2003).

The worker encourages clients to reflect on the harmful behaviour of others using the compass of shame. For example, when someone attacks them, it tells the client about the shame of the attacker and that there are alternatives in responding so as not to feel wounded: ‘If someone else responds [adversely], they are telling about them, not about me and do I have to respond to it? Well, the answer is probably not. So I lean back and let that pass by because they are losing the plot’ (transcript 16 September 2003). They give an example:

…if somebody is irritable, obviously having a bad day and they say something that is meant to be hurtful about me, the question is: do I need to respond to that? It induces shame affect in me. So when I feel it come, I can get really hurt or really angry in reaction. Then instead of taking the next step and responding, I can think: what’s happening to this person. Do I have to respond [to an insult]? And the answer is that if I don’t buy into it, is there any need to respond? Why is it important what that person thinks? And is this what I want to do? Can I respond by refocusing them around the subject that I wanted to raise — the subject that they are trying to raise? (transcript 14 April 2003).

The worker also encourages the client to look again at their own behaviour using the compass of shame:

What we do is help them look at their behaviour and understand why they are behaving the way they are, for them to reconnect with one another and part of that reconnecting is exhibiting more healthy behaviours. Then it becomes the chicken and the egg where wholesome behaviours produce stronger relationships (transcript 16 September 2003).
Planning and acting

Planning by the client

A worker advised that ‘the relationship that you form and the expectation that you have is quite powerful in modifying and maintaining wholesome behaviour’ (post-project transcript 11 February 2004). The worker supports the client in raising expectations of themselves:

We … ask them to describe what a difference would look like for them. Sometimes when they struggle around that, we say to them: where would you like to see your life in two years and what are the things that you need to do to enable that to happen? What can I do? It’s all about factors over which they claim to have no control. You then say: given all that’s not going to change, what are you going to do? (transcript 4 March 2003).

The workers post-project elaborated on this as a threefold process: firstly, of the client being encouraged to describe a preferred future; secondly, of being encouraged to establish expectations that they can fulfil this preferred future; and thirdly, of acquiring a sense of obligation to the worker to fulfil their preferred future. As one worker put it: ‘they are allowed to say here what they really want’ without a context of intimidation that may exist in the home (post-project transcript 11 February 2004). It is:

…getting them to describe what the future looks like for them, what they would like … where do they want to be … what they would like life to be like … and then we go on to the expectations … what we as the workers can expect of you and what you can expect of us … and the expectation goes beyond that you’ll turn up … you won’t swear and you won’t bang doors … it’s actually that you are going to have a go. This
is what you want to achieve and my expectation is that you are actually going to work
to do that. We expect that the path you want to go down, you will go down (post-
project transcript February 2004).

The third step is undertaken by returning again to challenging the client: ‘[w] e
work on the basis of pressure and support and are explicit about this. People
are going to learn best when they are pressured and supported’ (post-project
transcript 11 February 2004).

**Action by the client**

The goals of the plan may be in the form of immediate action or adjustment
over time or, more often, both. Immediate action may be acting *for* the client
with their approval and negotiating and referring on their behalf to address
immediate and acute material and health and financial needs with other
community institutions:

He was sitting there like he had some backing up in going and dealing with all these
agencies … by the time the visit was finished, we’d organised a food voucher, we’d
organised for him to have an appointment with housing so they wouldn’t be paying
double rent and we’d organised for the housing to stop them paying on the other
place. We got the school sorted … and the uniform for school. And we got extra
blankets because they didn’t have heating at home. We organised all of that all in the
space of having two of us in there in the space of an hour (transcript 5 August 2003).

They brought all the kids in. The minute the mum went down to the police station,
[one of the workers] said: “I’m sorry I can’t stand this” and went and washed the little
kids hands and faces. And they smelt. Their clothes were dirty (transcript 8 April
2003; pseudonym used).
Less immediate action comes from supporting planning, acting, reflecting, and adjusting by the client over a longer period. The worker is providing the client with relationship skills in moving from harmful to harmless behaviours within the family and negotiating skills in dealing with community institutions. Action may mean acceptance by the worker that the action is not aligned with their own view:

We have to be with the client and influence them but at the same time they still have to make their own decisions. We have to take a step back and if they decide a really useful outcome that we think is a bit ordinary, we’ve still not got to get disappointed and move on (transcript 8 April 2003)

The worker encourages replication: ‘we train the clients as well to teach others’ (transcript 30 September 2003) about relationships, behaviours and affects.

A rating tool may be used for reflection on action. Rating is 'a gauge for us to see how successful or unsuccessful we have been in helping the clients reflect on why there have been changes within and over sessions’ (transcript 30 September 2003).

**Community work**

Casework relates to meeting the needs of a client. Community work for Goulburn Family relates to meeting the needs of aggregate groups of clients with a common interest and building the capacity of community institutions to
meet these needs such as accommodation, schools, health, housing, police, magistrates, juvenile justice, courts, probation and parole, and prison.

**Groupwork**

Although family work is groupwork of a family, groupwork to Goulburn Family means working with a group of members who are not intimately related to each other but who have common issues relating to needs in addition to relationships. Often family work is a pre-condition to groupwork. Family work addresses relationships, behaviours and affects within the family. It provides a basis for relating to others beyond the family and in this way develops other life skills (transcript 8 August 2003). I observed that Goulburn Family is critical of groupwork that relates to family relationships, behaviours and affects:

the comment that came from those people in Canberra where they said: all the research around groups indicates that people running groups, not because they are the most effective way of engaging people but they are the most efficient way in terms of engaging a whole lot of people’ (transcript 8 July 2003).

what [the principal funding state department for Goulburn Family] said the other day was: well, that’s good. There’s the playgroup because it’s in the service specifications. You can increase the contact hours with clients by using groups. The outcome is the number of contact clients, not that clients are progressing and achieving and feeling good about themselves’ (transcript 8 July 2003).

Goulburn Family is especially critical of anger management groupwork that brings together angry men. For them, such groupwork assumes men are the
sole perpetrators and other family members are the sole victims. It takes place in isolation from other family members. It assumes change in the management of anger by the man will be reflected in change in his family. But Goulburn Family question this: ‘anger management is limited because if all you’re doing is working on the anger, you are not getting at the underlying issues and why a person responds the way they do’ (transcript 16 September 2003). And again:

He said he’s been to anger management groups and rehabilitation groups at Merrylands. He said he used to come away from those really angry because I knew my family was the source of my conflict but they didn’t give me any tools to bridge that gap between him and his family (transcript 5 August 2003).

**Playgroup**

Goulburn Family formed with another community institution a playgroup midway through the project and auspiced by the other community institution. Virtually all its members are teenage and young mothers and their children from their therapeutic practice who are isolated within their homes 24 hours a day. They have no social life. One of the workers of Goulburn Family is also a worker at the playgroup. The playgroup is targeted to mothers in their teens and early 20s. It uses the same framework as Goulburn Family in therapeutic engagement (transcript 16 September 2003) of relationships, behaviours and affects and of building capacity for action by the client. The playgroup builds on and reinforces relationship skills gained in therapeutic engagement for acquiring additional life skills. These are play skills — learning about play and how to play with children — health, nutrition and cooking, and citizenship
skills (transcripts 16 September 2003 and 8 July 2003). The children learn to play with each other, with their mothers and with other adults in the playgroup. They relate together through group and individual activities. The mothers undertake artwork projects. They prepare lunch together, learning at the same time about cooking and nutrition for children and adults. Community health workers visit and teach baby, child and maternal health and hygiene. These workers also take back referrals. The outcome is mothers and children becoming engrossed in activities and social interaction and in turn becoming more skilful, confident and calmer (transcript 8 July 2003). Perhaps most instructive is the capacity of these clients to acquire advanced skills at citizenship so quickly. The workers had workshoped with the mothers using butcher’s paper on better public transport for their areas. A local government councillor and a senior member of council staff attended a presentation by the mothers and to arrange transport to attend a council meeting where they would be advocating better public transport. The councillor stayed on after the manager left and the parents reflected after she left that ‘she was a young mum too’ (transcript 16 September 2003).

**Schools**

Substantive contact with schools also commenced midway through the project. This contact included special, state and Catholic schools in Goulburn and Queanbeyan and with the area office of the New South Wales Department of Education. Initial contact was in the form of presentations, seminars, workshops and professional development days with teachers and parents —
separately and together. Goulburn Family emphasises the same framework of relationships, behaviours and affects, in this case applied to the emotional level that underpins relationships between teachers, students and their parents. This is done on the basis that such engagement is as a pre-condition to optimum learning of the curriculum by students:

…when we talk about the best teacher we ever had, the reason we remember the teacher is not because they were so smart about science or history but because of the personal qualities they brought with them, the relationship that they established. So schools in spite of the fact that they are set up to teach things, the way that they do that best is by establishing good relationships with students. If you do that part right, then everything else follows. And we work on relationships (transcript 8 August 2003).

This contact evolved to the point where Goulburn Family and schools were jointly considering ‘target[ing] families at risk in a coordinated way’:

If the home environment is stable, then the teachers can start to teach as soon as the student enters the class. If it is not stable, then they spend up to 80% of their time in a class stabilising the situation of the student before they can start to teach the curriculum (transcript 5 August 2003).

Goulburn Family and one local high school were considering working with families before harmful behaviours occur as well as with families where problematic behaviours have occurred (transcript 5 August 2003). They were doing this on the basis that:

Schools feel a bit trapped. Even if you talk to school counsellors, they say: we are here to deal with what happens at school. Even in saying that, they recognise that you can’t separate what happens at school from what happens at home. What they are seeing in some small ways is the benefit of working with the family in terms of dealing with behaviour (transcript 5 August 2003).
Health

Goulburn Family refers a number of clients who exhibit mental illness such as schizophrenia and depression and physical illness and injury. Early in the project, Goulburn Family extended this contact to outlining the framework of relationships, behaviours and affects. Nurses of one agency advised that they were teaching mothers the technical skills to express milk, but were concerned about wider behavioural issues of mothers struggling over parenting children. Goulburn Family observed that:

…[the mums] all looked tired. Mums discovered other mums struggling with kids too so they are not the exception. Mums also wanted to talk about their relationships with their [own] fathers and the problems they have had with them [as opposed to the fathers of the child]. We’re talking about parenting and they’re talking about their dads (Goulburn Family dialogue 8 April 2003).

Policy work

The policy program of the government department that funds Goulburn Family specifies family, community and policy activities of community institutions for funding. The traditional contact of Goulburn Family has been with the local level of the department. During the project, it expanded its contact to the minister of the department; and to members of the federal opposition front bench and the government of the ACT, both jurisdictions of which are in close
proximity to Goulburn. And it provided input to a social community plan of
local government (NSW Department of Local Government 2002). The purpose
was to present the framework of relationships, behaviours and affects in the
context of family; to secure additional funding for its further research and
development of practice in and beyond Goulburn; and to reconcile apparent
differences with the local level of the department in interpreting the policy
program that were resulting in uncertainty of future funding.

The family appeared to be defined by the local level as women and children up
to eight years of age in contrast to Goulburn Family defining it as everyone
being a member of a family. The local level sought less engagement by
Goulburn Family with men and children over 8 years of age. The local level
sought increased frequency of contact with women and children over a longer
period, namely 2.8 visits per month for up to two years. Goulburn Family’s
practice was based on a frequency and duration appropriate to the needs of the
client. This was in contrast to Goulburn Family that is guided by the needs of
the client and that might mean just a few visits spaced over a month or two.
The local level sought service to be delivered in the home whilst Goulburn
Family generally provides service in the lounge rooms of the cottage they
occupy and that provided a setting detached from the often chaotic and
intimidating conditions of home. Goulburn Family provides therapeutic
engagement in keeping with the program specifying ‘therapeutic intervention’
including ‘family therapy’ (NSW Department of Community Services 2002).
The local level prefers groupwork and sought to exclude therapeutic
engagement on the basis that Goulburn Family had no capacity, workers were
Learning organisation

Seven principal forms of learning were identified in the project. Client learning involves two forms: learning by the client in therapeutic engagement and replication of the learning of the client with other family members. Worker learning involves two forms: learning by the worker in therapeutic engagement and learning by workers from shared engagement in reflective practice, research and the literature with other workers and subsequent adjustment of the practice framework. Organisational learning involves three forms: principles; replication and scaling of the framework within and beyond the practice; and adjustment and application to community work and policy work (transcript 30 September 2003). Client learning is previously covered in this chapter. Learning by workers and learning by the organisation is covered here.

Learning by workers

Reflective practice

Reflective practice allows the implicit to be made explicit and for a common understanding of practice and therefore consistency of practice. It allows workers to distance and detach themselves from their own personal agendas when entering into engagement. Reflective practice on action occurs separately daily and weekly between workers, each month with the supervising
psychologist, and each month during the project with me. Reflective practice
with the supervising psychologist relates to therapeutic engagement. Reflective
practice with me related to identifying each part of the framework by making
the practice and its development explicit. Reflective practice was summarised
by one worker:

The other is engaging in reflective practice, which is the huge strength of this agency.
You reflect back, you tell each other your stories and the stories of your clients in
which you share your rich knowledge and skills. (transcript 5 July 2003).

Constructing the framework

Constructing the explicit framework assisted in identifying the parts and
linking them to the whole practice framework. It also assisted in day-to-day
practice:

I think it is interesting to define precisely what we are doing; that we learn by your
[the researcher] definition what it is we are doing; because that then enables us to
look at the constituent parts of what we are doing and to understand what the linkages
are and how we move on from place to place (transcript 5 August 2003).

The benefits are that if something is not going right, you can go back as Fran did a
while ago when I was scratching my head around a client and Fran went back through
and identified something I hadn’t done (transcript 5 August 2003, pseudonym used).

The value of explicitness and constructing the framework was described by a
worker as ‘changing the way we did business’:

…one of the useful parts about having a document like this [framework] is that when
you first started talking to us about our explicit practice and the question came up:
do we share that with clients? And at the time we didn’t. Now out of that we thought:
why wouldn’t you? So we did. That marked an extraordinary change. Once we started
to hand clients the tool, hand them the understanding, it marked an extraordinary change. I remember the first day I did it and I thought: how am I going to do this?
And that was I listened to all the stories and I said: I just want to give you some information now; and it worked so well, I pretty much stuck to that format (transcript 30 September 2003).

Construction of the framework illuminated parts deeply implicit:

…what is interesting here is the home like environment. It would have never have occurred to me until you raised it as an issue because you are standing one step removed and saying this is really important and then we start thinking about it (transcript 30 September 2003).

**Learning by the organisation**

*Goals, principles and behaviours*

Guidelines relating to goals, principles and behaviours were established when Goulburn Family commenced operations. It has come to recognise them as characteristics of a learning organisation (transcript 30 September 2003). Two of the goals are ‘to assist families take control of their affairs’ and ‘to improve client satisfaction’. Prescribed behaviours are that clients and workers were to be treated with ‘dignity and respect’ with an emphasis on speaking to but not about people and a focus on ‘issues not personalities’. A third goal relates to principles of ‘practice based on research and facts’; entitlement by workers to information to do the job; and entitlement to professional/clinical supervision.
Another goal relates to improving systems and processes and keeping a library of research materials and keeping case management files up to date. A further goal is to establish links with others in the community. A strong dominating leader was seen as inconsistent with these goals, principles and behaviours (transcript 30 September 2003).

replication and scaling up

Recognition of the utility of an explicit practice framework emerged in reflective practice in framing the work of the client and worker and in submissions to governments for funding, presentations of the practice and underlying theories to professional and geographic communities, and in working with others to replicate and scale up the framework whilst at the same time identifying and adjusting for differences in cultures, values, settings and meanings of terms (transcript 30 September 2003). As one worker put it:

The … benefit is in terms of being able to both describe it and to replicate it. People can [often] tell what [they do] but not what it is [that they do]. So being able to define what [the framework is] is important in us being able to understand it but also being able to move it on [to others] (transcript 5 August 2003).

It also assists in learning by a new worker. One new worker referred to her experience of ‘relearning’ at Goulburn Family. In her previous work experience, ‘some things you don’t question why you do them, you just do them.’ At Goulburn Family, she was not only learning what to do but why it
was being done and furthermore why what was being done is shared with clients (transcript 5 August 2003).
CHAPTER 4: DISCUSSION

Chapter 4: Discussion

This chapter discusses the findings of chapter 3 and the literature on each of the seven components of the research question. Chapter 4.1 examines families and harmful behaviours; chapter 4.2 professional engagement of the client, learning and life skills; chapter 4.3 professional engagement in the community; chapter 4.4 the knowledge society; and chapter 4.5 institutional practice and policy frameworks.

I draw in this chapter on the framework of Goulburn Family of relationships, behaviours, and affects, to construct contextual frameworks in relation to learning and family, community, and policy. These frameworks are constructed ecologically from observations and reflections of the action research project and from the literature. Two of these frameworks are included in chapter 4.2: a framework of the client learning process in therapeutic engagement and a framework of the content of everyday life skills. The third framework is included in chapter 4.4. It responds to the framework research question, namely a policy framework for families and knowledge in a knowledge society. I also argue in chapter 4.1 that adult clients have available to them substantial reserves of needs, interests, strengths, and resources that may be accessed in professional engagement, in order to participate in the process of learning in
therapeutic engagement and build their capacity for action.

4.1 Family and therapeutic engagement

Chapter 4.1 examines two of the seven components of the research question identified in chapter 2.1, namely families and harmful behaviours. It examines the association by Goulburn Family of relationships and fulfilling and harmful behaviours in the context of the family. It makes explicit previously implicit components in this association — therapeutic practice as one form of professional engagement identified by its supervising psychologist, and relationships as one of life skills that I identified. It also makes explicit other previously implicit components: the concept of the family, the home as a setting for the family, everyday life, the development of the family, and relationships, behaviours and affects.

The family and its context

I wanted to find out what is the concept and role of family; what is the relationship of the family to the outside world; and how the family develops. I had assumed in commencing my research that the family is the primary institution in society and that the wellbeing of the individual is primarily provided by the family. Here, I explore the findings of the project and the
literature for these enquiries as well as the assumptions and subsequent modifications I make to them.

**The concept of family**

**The meaning of family**

Goulburn Family goes further than much of the literature in the meaning of the family. It recognises the family as a connection of two or more individuals caring for each other, from which they draw strength and to which they can return. It goes further still in its view and practice that each of us is a member of a family (transcript 8 July 2003). This construction has elements of a post-positivist meaning of family as interpretative, plural in form, and fluid in its existence between the private and public worlds within which it exists.

The meaning of the family has undergone change. The family was characterised as a system in family therapy from the 1920s and 1930s as a ‘universal natural and human interaction processes’ (Doherty et al 1993: 10). This characterisation is an objective, value free and quantitative approach (Doherty 1999: 207); a positivist construction of the family based on biological, mechanistic, and linguistic models concerned with the ontology of being and of objectification of how the world is (Pare 1995: 1, 3, 11). This characterisation reached its apex in the 1970s (Doherty 1999: 207). Since then,
the metaphor of the family as an interpretive community within a storytelling culture (that is so evident in the practice of Goulburn Family) has been added to the metaphor of the family as a system. This is a post-positivist metaphor based on social constructionism and epistemological meaning, interpretation and intersubjectivity of knowledge (Pare 1995: 1, 3, 11); within which there is a growing plurality of family form and function and an emergence of divergence and difference (Cheal 1993; Doherty et al 1993: 16). One manifestation of this is changes in the legal form of the marriage from an institution underpinned by a legal contract and an external social obligation to a relationship underpinned by personal and mutual partnership (Mansfield 1998). Another manifestation lies in the language of the family. Thus the Royal Commission on Social Policy in New Zealand in its report in 1988 was already using the term ‘partners’ as a reflection of the changes taking place in the institution of the family. In this case, ‘partners’ was substituting for the terms ‘husband’ and ‘wife’. The substituted term indicates one role instead of two, a shared role with a greater fluidity in the roles of adult members of the family.

The private and public worlds of the family have been traditionally in opposition. This opposition ‘conceals the extent to which the public is present in the private, and in the very notion of privacy. Being the product of a sustained effort of judicial and political construction culminating in the modern family, the private is a public matter’ (Bourdieu 1996: 25; author’s emphasis). There is growing fluidity of the boundary between the private and public worlds (Doherty et al 1993: 17). This growing fluidity suggests more of a zone than a boundary where the relationship between family and community is one
of mutual need and obligation: for the family, additional resources and for the community, stability in neighbourhoods. It is within this expanding zone that the professions and community institutions exist and adapt.

The changing nature of the family

The professional work of Goulburn Family reflects the increasing complexities of everyday life for families. These increasing complexities are brought about by a historical shift from material scarcity to prosperity; an extended lifespan; expanding geographic boundaries; increased expression of individualism; increased formation and dissolution of the legal structure — but not of the biological ties that are permanent, and of the psychological ties that are more enduring than the legal status of the family; and of increasing specialisation in occupations. The family historically operated within the context of scarcity where its members were preoccupied with subsistence, pooling their labour, earning enough to make or buy basic essentials of food, clothing and shelter, and raising children as an additional source of labour. The family now is preoccupied with emotional as well as material sustenance in an era of prosperity, albeit unequally distributed (Zimmerman 2001: 74 citing Cherlin 1996). There are finer gradations of stages in an extending lifespan (Zimmerman 2001: 28). These gradations now include newborns, infants, toddlers, children, adolescents, young people, cohabitants, the middle-aged, and several stages of aging people. The family operates beyond the traditional boundaries of local community, class, gender, ethnicity, culture and religion
introducing new complexities (Pinkerton 2000: 212-213). The bonds of family and its ties of marriage and children become unnecessary constraints to greater self-expression (Zimmerman 2001: 75 citing Yankelovich 1994). There are ‘major shifts occurring in patterns of family formation and dissolution, [reflecting] shifting expectations of intimate relationships and family life’. There is ‘an increase in stable couple relations and births outside … marriage’ and in ‘divorce, remarriage, single and step parenting’. This increasing complexity has an impact on need and on forms of professional support (Pinkerton 2000: 212). Pinkerton (2000: 212) further notes ‘changing patterns of work, housing, transport and leisure.’

The institution of family

Goulburn Family seeks to engage the whole family. In doing so, it draws on the four ascending levels of family: explicitly the individual family member, family relationships, and the family group; and implicitly on the fourth level of the institution of the family (Rodgers and White 1993: 231). The family shares characteristics similar to other institutions. It institutes in each member feelings to ensure integration as a condition of its existence and persistence as a stable and constant unit ‘indifferent to the fluctuations of individual feelings’ (Bourdieu 1996: 22-23). It institutes norms, roles, customs, rituals, rules and precedents followed by its members (Rodgers and White 1993: 231).

The family is different from other institutions in the intensity and strength of
characteristics of its members relative to other institutions. It is unique from its intimacy, idealisation of its interior as sacred and closed to the outside world to protect its intimacy (Bourdieu 1996: 20); as a place of trusting and giving where the ordinary laws of economy are suspended in terms of reciprocity of exchange (Bourdieu 1996: 20); and in its intergenerational and reproductive characteristics and its responsibility for nurturing and socialising the young (White 1991: 7). The intensity and strength of the characteristics of institution come from its existence as a separate social and enduring entity (Bourdieu 1996: 20; Rodgers and White 1993: 231), one that is separate from its members whose individual interests are subsumed to the interests of the family (Rodgers and White 1993: 231), and with fulfilling behaviours that transcend its members with a common life and spirit and a particular view of the world (Bourdieu 1996: 20).

The role of the family and its members

Understanding the institution of family allowed me to understand the significance of roles of family members. This in turn allowed me to link life skills to roles as part of a framework of the content of everyday life skills discussed in chapter 4.2 and to link expectations in learning to expectations in performance of roles also discussed in chapter 4.2. Roles consist of relationships, behaviours, and expectations in common with Goulburn Family, although Goulburn Family does not refer explicitly to roles (Bronfenbrenner 1999: 15; Dupais et al. 1997 citing Turner 1968; Dupais and Norris 1997 citing
Roles are behaviours expected by others, behaviours that individuals learn to play in specific situations, and norms attached to the status and positions of these roles. Roles draw on self-worth and resources of individuals for their fulfilment. Social relationships are performed in the context of acting out roles (Dupais et al. 1997 citing Turner 1968). Positions include partners, parents, students, neighbours, friends, workers and citizens (The Royal Commission on Social Policy 1988: 451) and child, young person and family member. A person occupies many positions (Bronfenbrenner 1999: 15).

Many people exhibit characteristics of role balance. Clients of Goulburn Family exhibit characteristics of role strain. Role balance generates role ease (Marks and MacDermid 1996: 421). Role balance is a person engaging in performing every role in their total role system. It is a ‘cognitive-affective structure’ because it taps understandings and feelings about roles. This structure may be made explicit at times of ‘personal stocktaking or during episodes of difficult planning’ (Marks and MacDermid 1996: 421). These episodes attend to role strain and role imbalance (Marks and MacDermid 1996: 421). Role strain is ‘a product of the individual’s myriad interests and his or her navigation through the entire system of myriad activities’ (Marks and MacDermid 1996: 417). It is indicative of a person being unable to satisfy all demands and ‘must move through a continuous sequence of role decisions and bargains’ to adjust these demands (Goode 1968: 495). It is indicative too of a change in expectations that leads to changes in the behaviour of the person (Bronfenbrenner 1999: 15). The family is the main centre of role allocation and
therefore potentially of role strain. Members must account for how they spend their time, energy and money outside the family. Family relationships ‘form the most immediate and persistent set of interactions’ as a form of social control. Formal withdrawal from such allocations is difficult and informal withdrawal arouses guilt and pressure from other family members (Goode 1960: 493).

The home as a setting for the family

Goulburn Family mentioned the significance of the family as a base to which family members could return (transcript 8 July 2003). I also observed and Goulburn Family confirmed the home-like setting of client engagement. This concept of the base and the home-like but detached setting of engagement led me to explore the significance of the home to the family in its own right rather than as a re-creation in a professional setting. I found that the home exists within the everyday life world, meets a range of family needs, has affective and learning characteristics, and serves as a means of dialogue between the family and the community.

Goulburn Family sees the lounge room of their cottage in which they operate ‘essential for building rapport’ between client and worker (transcript 30 September 2003). This comment was prompted by my observation in preceding and this meeting that the client is engaged in a home-like setting. At the same time, Goulburn Family is reluctant to engage the client in the home.
The lounge room represents a personal space within which the client can explore (transcript 30 September 2003) whilst also providing professional detachment, unimpeded by often chronic conditions of the client’s home. I subsequently observed that the Goulburn Family lounge is midway between a home setting and an institutionalised setting (post-project transcript 11 February 2004).

The literature discusses the ideal functions of the home that, in their partial absence, may cause family harm. Bourdieu (1996: 20) describes the function of the home as a stable and enduring locus for the family and its members. It is a setting for meeting physical, psychological and sociological needs and is congruent with Maslow’s hierarchy of needs (Depres 1991: 100). It forms part of self-identity and is a powerful extension of the psyche (Depres 1991: 100). This is because the home and the spaces within provides refuge, solitude and privacy from the outside world (Depres 1991: 100); psychological comfort in warmth, light, quietness and cleanliness (Depres 1991: 100 citing Appleyard 1979); as well as fulfilling basic needs of shelter and thereby physical security and health (Depres 1991: 100).

The psychological concept of home includes cognitive, affective, behavioural, and relationship components that relate well to the Goulburn Family practice framework. The affective component reflects emotions and feelings around establishing and maintaining a home, for example, ‘feelings of security, warmth, attachment, consistency, resilience, identity and familiarity’. The
cognitive component relates to attributions of oneself to the environment, the beliefs one holds about home, and the benefits of home to oneself. The behavioural component relates to actions undertaken to ‘manipulate, construct, move and structure’ the physical environment of the home to more closely relate to one’s self-identity (Sigmon et al 2002: 33-34). In addition, the home provides a centre of interpersonal relationships of the family (Depres 1991: 100 citing Werner 1987).

The home has an impact on the capacity to learn: the amount of physical space and how it is organised; the extent to which the home is emotionally conducive to learning; and the choices of lifestyle activities within the home, such as supervising homework, play and electronic media and the availability of developmentally supportive games and toys (Kurtz-Costes 2001: 5277-5278). The home acts as a locus for everyday life activities (Depres 1991: 100) of the family. And it serves as a dialogue between home and community (Depres 1991: 101) and transmits information about social standing of the occupants (Depres 1991: 100).

**Everyday life**

Implicit in the Goulburn Family practice framework is a focus on everyday more than abstract life. The scale and complexity of conducting everyday life activities, and adapting to constant change in these activities, puts into perspective those who resort to harmful activities in the absence of requisite
life skills. The form of therapeutic engagement of Goulburn Family is one where there is a heightening of conditions of everyday life, namely of ‘everyday ordinary relationships and conversations [that] most of us prefer’ (Anderson 2001: 353-354).

Everyday life is a world where individuals experience their existence as immediate and simply given. It is a familiar world of interests and routines taken for granted in which people live most of their lives (Hall et al. 2002a); of everyday activities consisting of ‘massive facts of ... daily existence’ (Hall et al. 2002a citing Garfinkel 1967: 35); and of multiple realities:

I am conscious of the world as consisting of multiple realities. As I move from one reality to another, I experience the transition as a kind of shock. This shock is to be understood as caused by the shift in attentiveness that the transition entails. Waking up from a dream illustrates this shift most simply (Berger & Luckman 1966: 71).

The everyday world imposes on us in a massive and intense manner. It is an ordered world spatially in terms of our body and temporally as of the present and of ‘what I am doing now, what I have just done, or what I propose to do in the immediate future’. It appears external and objectified, existing before we arrived and after we leave. It depends on symbolic meaning of language and naming of objects. It is inter-subjective — a world shared with others; one with a common stock of shared knowledge of normal self-evident routines acquired through social learning and interaction. It requires learning rules for handling people and events, getting things done and mastering routine problems (Hall et al. 2002a). It is a world from which clients of Goulburn Family seek to escape,
This is a book about escapes and escape attempts. But the men and women in these pages are not escaping from the cramped cells and barred windows of a prison; they are fleeing from the demands of everyday life, from the suffocating press of routine and ritual (Cohen & Taylor 1992).

The development of the family

Major changes in the everyday world come from events in the life cycle of the family and its members. Such eventstrigger clients presenting to Goulburn Family. Each event is characterised by a period of time in which and between which the event occurs. Timing relates to norms when events are expected at a certain time such as having children by a certain age; to age, as a beginning event such as birth; and to sequence in the order of events and stages such as cohabitation, birth, school, divorce, death (Rodgers and White 1993: 231-241). Some changes are developmental and probable; for example, a couple having a first child raises the probability of a second child. Other changes are random (Rodgers and White 1993: 241-243). Events come from a life cycle of family expansion and contraction in forming, growing and dissolving (Schvaneveldt et al. 1993: 110) as it moves through each stage of the family life cycle. Family transitions occur when a family moves from one stage to another. Events occur at the time of transition from one stage of the life cycle to another (Rodgers and White 1993: 231-241). There are events separate from or less connected to the life cycle within the family such as illness and unemployment. And then
there are events that occur outside the family (Rodgers and White 1993: 231-241) such as bushfires and recessions that impact on the family.

**Relationships, behaviours and affects**

Goulburn Family describes its practice as focusing on family relationships, behaviours and affects (post-project transcript 10 December 2003). I observed from its practice that affects drive behaviours and behaviours drive relationships. I look at each of these three components in turn; before examining the form of its practice of therapeutic engagement in which it supports adult members of families exhibiting adverse affects and harmful behaviours and relationships to shift to fulfilling relationships.

**Harmful behaviours within families**

I wanted to find out from the fieldwork what forms harmful behaviours take and in what circumstances they are acquired. I assumed that harmful behaviours take the form of neglect, abuse and violence; and neglect is perpetrated by adults against children, and abuse and violence is perpetrated by men against women and children. I found in the fieldwork that ‘harmful behaviours’ was too reductionist a term. Goulburn Family introduced to me two related concepts, summarised after the end of the project, when they said their family work consisted of family relationships, behaviours and affects (post-project transcript 10 December 2003). I explore the three related concepts of neglect, abuse, and violence in turn prior to setting them in the context of
professional engagement.

**Forms of harmful behaviours**

*Scale of harm*

Heath (1996: 1109) indicates the scale of harm when he suggests that ‘apart from the police and the military, the family is the most violent grouping and the home the most violent setting in our society’. The scale of adult neglect, abuse and violence may be inferred from reported crime, general practitioner consultations, and hospital admissions but there is little research on the scale of unreported violence, and even less on the less visible forms of behaviours, but much is still to be investigated as awareness of neglect and abuse. The scale may also be inferred from child statistics. For example, there were 107,394 reports of suspected child abuse or neglect in NSW in 2000–01, up from 72,906 the year before (Totaro 2002). The issue of harmful behaviours has emerged in the last 30 years (Graycar 2000: 1). That is not to say that this issue was not occurring before then but it was less of a social priority than war, depression, infectious diseases, and a shorter life span. The last 30 years has seen a growing volume of literature on harmful new subsets of these behaviours continue to be identified, for example paedophilia and systems abuse in the 1990s (James 2000: 1-2). This scale is within the context that each wave of emerging identity is denied then embraced by governments (James 2000: 1-2). As awareness grows, so does the vigilance of agencies (Campbell...
members of the public to report to state departments of human services, and practice and awareness to be enshrined in legislation, regulation and policy.

*Abuse, neglect and violence*

I commenced my research with the assumption that neglect, abuse and violence were different forms of harmful behaviours and that clarification in this way assists in matching appropriate forms of professional engagement and acquisition of appropriate life skills. Goulburn Family had not made such a distinction between the three forms of harm, but over several months of dialogue, came to a view that such a distinction had a degree of validity. I found in the literature that abuse, neglect and violence are often conflated as ‘violence’ or ‘domestic violence’ when referring to adults, and to ‘maltreatment’ or ‘abuse’ when referring to children. Rarely does the literature separate the three forms. An exception is a recent report of the Institute of Medicine of the National Academies in the United States (Cohn et al. 2000: 23, my emphasis in suggesting the significance of adult roles), which defines neglect as ‘the failure of a loved one or caregiver to provide for a person’s basic physical, emotional, medical, educational, nutritional, or shelter needs’. It defines abuse as ‘psychological abuse, verbal abuse, or mental injury or acts of omission by loved ones or carers that have caused or could cause serious behavioural, cognitive, emotional, or mental disorders’. It defines sexual abuse as involving ‘children or adults who are unable to fully comprehend and/or
give informed consent in sexual activities that violate the taboos of society’. And it defines physical abuse as ‘the infliction of physical injury by punching, beating, kicking, biting, burning, shaking or other actions that result in harm’.

I also commenced the project with the assumption that adults perpetrate neglect against children and that men perpetrate abuse and violence against women and children. I was required to revise this assumption by the action research project and by the literature. This revision came from a defining moment in dialogue halfway through the project when I raised the issue of neglect in the unspoken context of the child, and workers responded by describing neglect in the context of the adult. Goulburn Family reported that abuse is far more common amongst clients than violence and that abuse is often more damaging than violence and that violence may or may not occur. If violence does occur, it is usually the culmination of a prolonged period of abuse. This is similar to the findings of Follingstad et al. (1990) from their study that showed emotional abuse was more frequent than physical violence and more damaging than physical violence. Perhaps most significant of all is the relationship between neglect, abuse and violence. Longitudinal cohort data generally report that verbal and emotional abuse usually precede violence but ‘fail to recognize how commonplace these tactics may be in the general population where serious violence does not erupt’ (Goodyear-Smith and Laidlaw 1999: 289).
**A focus on adults**

Goulburn Family make the point that neglect, abuse and violence primarily occurs between adults in relationship with each other and by them with children in the family. Often adult members in harmful relationships with each other exhibit the same harmful behaviours towards their children. Yet much of the literature, instead of focusing on adult relationships, focuses on the child. This quote is typical. It relates to family support — the type of professional work undertaken by Goulburn Family:

> Family support is about mobilizing support for children’s normal development; for normal development in adverse circumstances. It is about mobilizing that support in all the contexts in which children live their lives — family, school, peer group … and so on. It is about counteracting … poverty and harm [of] children (Gilligan 2000: 13).

**Male and female perpetration**

To the conflation of neglect, abuse and violence as ‘violence’ and to the focus on the child is added the assumption by much of the literature that men perpetrate ‘violence’ and that women are the victims. This assumption is reinforced by official statistics. The experience of Goulburn Family is more complex: neglect and abuse are perpetrated by both men and women, most serious violence is perpetrated by men, and less serious violence is perpetrated more evenly between men and women. Goulburn Family reports that neglect and abuse usually precede violence and violence usually does not eventuate.
Exceptions to the mainstream literature tend to confirm and explain Goulburn Family’s experience.

The male partner generally perpetrates more serious violence, with women incurring more severe injuries in intimate relationship violence. Men who hit, hit harder than women (Goodyear-Smith and Laidlaw 1999: 291 citing Straus 1997). Official statistics therefore tend to report serious violence. Both partners perpetrate less serious violence more frequently, but it is less frequently reported and is therefore not included in official statistics. Halford et al. (2003: 387) distinguish between low severity and high severity violence. Low severity violence includes pushing, shoving and slapping in which aggression may be reciprocated. High severity violence includes kicking, punching, beating and attacking with a weapon and ‘most often perpetrated unilaterally by men’ (Halford et al 2003: 387-388 citing Holtzworth-Munroe et al. 2000).

Headley et al. (1999) examined Australian and U.S. data on violence. They found that men and women reported similar rates of assault by their partner, and threats to ‘to slap, hit or attack’ the other. Half of those who reported that they were assaulted by their partners also reported that they also assaulted their partner, indicating that often violence runs in couples. Perhaps the most interesting data comes from the Dunedin Study, because of the form of methodology it uses to determine its findings and because its findings indicting the degree of violence amongst younger partners. It consists of a representative birth cohort of 1,037 New Zealand men and women born between 1 April 1972
and 31 March 1973. Assessments took place at regular intervals from that time. Ninety-seven per cent participated in the 1993–94 assessment. This included for the first time partner relationships since there were now couples in the cohort entering into intimate relationships and parenthood (Moffitt and Caspi 1999: 1, 3-4). The findings showed that between a fifth and a third of participants had experienced physical abuse in the 12 months before assessment. This was consistent with the National Family Violence Survey in 1985 and the National Youth Survey 1983 in the United States (Moffitt and Caspi 1999: 4). Fifty-one percent reported perpetration by the male cohabiting partner and forty-two per cent reported perpetration by the female cohabiting partner (Moffitt and Caspi 1999: 4). Significantly, ‘in most cases of partner violence in this age group, the parties are involved in mutual violence’ (Moffitt and Caspi 1999: 4). It found that partner violence is strongly linked to cohabitation at a young age; parenthood at a young age; a background of family adversity; dropping out of school; drug abuse, juvenile aggression, and conviction for crime, especially violent crime; long-term unemployment; and a variety of mental illnesses (Moffitt and Caspi 1999: 1-2).

Despite these and other findings, there is little literature on physical abuse of men by women in intimate relationships. There is however, substantial literature on the physical violence of women by men in intimate relationships (Hines and Malley-Morrison 2001: 75, 82-83), portraying the woman as victim and the male as perpetrator. For example, notwithstanding the comprehensive definition of neglect, abuse and violence by the Institute of Medicine mentioned earlier, its report identifies only child, elder and intimate partner
‘violence’, and that intimate partner violence is undertaken by male perpetrators (Cohn et al. 2000: 21-34). Goodyear-Smith and Laidlaw observe that ‘epidemiological research has consistently found that men and women engage in physical aggression towards their partners in roughly similar frequencies’ (Goodyear-Smith and Laidlaw 1999: 285-288). Goodyear-Smith and Laidlaw examined crime and victim statistics, epidemiological data and longitudinal cohort date. They advise that:

Judicial, clinical, and social service samples are not representative populations of society but a sub-set of individuals at the extreme end of the couple conflict/domestic violence continuum and data derived from these sources should not be generalized to the population at large (Goodyear-Smith and Laidlaw 1999: 287).

There is little literature too on neglect and abuse by either party in an intimate relationship; or on the consequences of neglect, abuse and violence on male and female partners (Hines and Malley-Morrison 2001: 75, 82-83). Neglect and abuse by both partners may be more frequent than violence, but again it is rarely reported and is not therefore recorded in the official statistics. Men perpetrate the majority of sexual abuse on children but women perpetrate the majority of non-sexual abuse on children. Women are more likely to commit infanticide but men are more likely to perpetrate fatal attacks on older children (Goodyear-Smith and Laidlaw 1999: 294-295).

Intergenerational harm

There may be an intergenerational relationship of neglect, abuse and violence
between partners and children. A disengaged style of parenting ‘involving low involvement, nurturance, warmth, control, and monitoring’ is often related to a neglectful style of parenting that may be unintentional. An authoritarian style of parenting ‘involving punitivness [sic], coercion, restrictiveness, and low warmth and support’ is often associated with intentional neglect (Browne and Herbert 1997: 13; The Panel on Research on Child Abuse and Neglect 1993: 128 citing Baumrind 1989, 1991; Dornbusch et al. 1987; Maccoby and Martin 1983). Intergenerationally, Headley et al. (1999) found that most partners who had violent parents were not violent to each other, but those who did have violent parents were ‘significantly more likely than others to be violent to their own partners and to be victims of violence themselves.’

*Impact on professional engagement*

Agencies drawing on the literature and statistics tend to design their services accordingly (Goodyear-Smith and Laidlaw 1999: 299). This brings about a mismatch between needs and services:

Agencies working in the domestic violence field tend to design their services on data that is based on national crime surveys or official police records, or on clinical populations such as women in therapy or those using the services at women's refuges. Nevertheless, these are not representative samples, because men are far more likely to be charged with domestic violence than women, and women are much more likely to use support services than men (indeed, very few support services are available for men who are victims of domestic violence) … (Goodyear-Smith and Laidlaw 1999: 299).
Explanations of harmful behaviours

The literature tends to explain violence in accordance with the conflated meaning, mentioned before. Explanations of neglect and abuse seem rare. I therefore draw on explanations of violence as an indication only of explanations of neglect and abuse. Reiss and Roth (1993: 101–104) suggest three explanations of violence: biological, psychosocial, and the social context of the individual and group. The biological may be genetic, neurological, hormonal and nutritional. The psychosocial explanation is twofold (Reiss and Roth 1993: 101-104). Firstly, the individual draws on perceptual and cognitive processes in his or her interactions with others. Secondly, the individual learns aggressive behaviours. This occurs where interaction with others causes frustration and anger and a preference of violence to achieve a desired goal, or to take advantage of opportunities that can be gained from such behaviour. These opportunities may include gaining social status from fighting or gaining money from violent intervention. In turn, the child or adult learns aggressive and violent behaviours. He or she does this from observing and participating in violent situations involving adult members of the family and in the emotional states and sanctions of such situations. These may spill over to peers and to authority in the community. Frustration and anger may be triggered by cues such as school or competitive failure (Reiss and Roth 1993: 101-104). The third explanation of the social context relates to the culture and degree of organisation of the family and the community in which it lives. Reiss and Roth (1993: 132) see correlations between violence and:
concentrations of poverty, residential mobility and population turnover, family
disruption, high density in housing and population, features of local social
organization (e.g., low density of friends and acquaintances, few social resources,
weak intergenerational ties in families and communities, weak control of street-corner
peer groups, and low organizational participation in community life), and
opportunities associated with violence …

Reiss and Roth (1993: 129-138) indicate that structural and cultural aspects in
the social context of violence have an impact on the behaviour of individuals
— for example, the values and beliefs of families and neighbourhoods within a
community. They emphasise the structural, technological and economic
changes (citing Wilson, K. 1987: 39) that are familiar to the community that
Goulburn Family serves and that result in the shift from a manufacturing to
service economy with polarisation to high-end and low-end service skills, and
in consequence the availability and changing nature of work.

**Relationships between partners and across generations**

I found issues of intimate relationships between adult members of the family
manifest themselves in harmful behaviours. I also found considerable literature
on relationships in contrast to a paucity of literature on many aspects of
neglect, abuse and violence. The literature on relationships lends weight to the
experience of Goulburn Family of a connection between relationships,
behaviours and affects.
Relationships for Goulburn Family mean first and foremost partner relationships and then ‘relationships with children and relationships with other people’ in the family and outside the family (transcript 30 September 2003). The supervising psychologist to Goulburn Family describes relationships as so intense a responsibility that ‘it is very easy to displace that responsibility’ (transcript 8 May 2003).

Satisfaction in relationships is perhaps the most significant cause of personal happiness. Conversely, ‘problems in relationships are perhaps the most significant cause of personal distress and unhappiness’ (Holmes 2000: 451). The scale of adverse relationships is as daunting as the scale of harmful behaviours.

Relationship exists where there are degrees of interdependency between two people and each influence the other’s thoughts, feelings and behaviours (Clark 2001: 14,423). The essence of a relationship is the social interaction that it constitutes and the interdependent influence that each person exerts over the other (Holmes 2000: 448 citing Kelley et al. 1983). Influence is a key to relationships since the behaviour of one partner in any single episode of interaction influences the behaviour of the other in subsequent episodes (Reis et al. 2000:845).

Families are characterised by intimate or close relationships. These are
generally more affect laden than less intimate relationships (Reis et al. 2000: 845 citing Reis and Patrick 1996). Intimate relationships go beyond mutual satisfaction of needs to responses that are not contingent on a benefit in kind. Those in intimate relationships do not keep a list of exchanges. Instead, each perceives the other’s thoughts and emotions and believes the other understands, validates and cares for them (Clark 2001: 14,426).

Relationships respond to needs (Holmes 2000: 470). This responsiveness draws on reserves. Hinde (1997: 373-374 citing Foa and Foa 1974) suggests a number of reserves used in interpersonal exchange. These are love, warmth, softness and care; status in terms of regard and esteem; information in terms of opinions, advice and instructions; goods and services; and finally money. Each is related to power — each can be given or taken away (Hinde 1997: 379). Relationships are also temporal. The rhythm of a relationship is in its regularities. These regularities oscillate over time and are revealed over time (Bernschied 1999: 261). And relationships may converge and diverge over time.

The distressed individual is often a member of a distressed family system. Relationships in a family system function ‘as a whole through the interdependence of its parts’, and ‘within a hierarchy of levels of organization’ (Horwitz 2001: 153). An individualistic perspective seeks causes of behaviour in the characteristics of the individual. A relationship perspective augments and often replaces this with seeking causes of behaviour within interconnections.
and relationship patterns of the family, and of the family in the context of wider systems. Each system exchanges information, energy and material within the hierarchy of systems in which they are nested (Reis et al. 2000:847).

**Emotion and cognition**

Affects are the third part of the connection of relationships and behaviours that Goulburn Family makes. I spent time with Goulburn Family in dialogue separating affects, feelings and emotions. Goulburn Family interprets affects as bodily manifestations, feelings as the affects felt, and emotions as the memory of similar affects that have occurred in the past. Goulburn Family focuses on one of these affects — shame — and its defence mechanisms, namely attacking others, attacking self, avoidance and withdrawal (Nathanson 1992: 312). The literature required me as well to distinguish affects, feelings and emotions from cognition.

Affects, emotions and feelings are linked. Affect is a biological phenomenon (Basch 1976), confirming Goulburn Family’s view. The experience of affect ‘is the result of data analysis that triggers something in the brain that in turn makes things happen all over the body’ (Nathanson 1996: 3). Feelings are those affects that we become aware of (Matthias 2000: 217; Basch 1976). Emotions are those affects that we are unaware of but which can be inferred from affective reactions of the body and behavioural clues (Matthias 2000: 217). Emotions are brought to the awareness of clients from the detection of affective reactions by workers. This may in turn lead to Goulburn Family’s view that
this in turn triggers memories of similar situations.

Emotion is concerned with how people feel and cognition is concerned with how people think (Smith and Kirby 2001: 75). Emotional and cognitive processes are symbiotic: ‘cognition relies on emotion, emotion relies on cognition and … relationships rely on both’ (Planalp and Fitness 1999: 732). Both use information from the environment to guide action and both operate unconsciously with ‘the cognitive system orient[ating] us to what makes sense … [and] the emotional system orient[ating] us to what matters’ (Planalp and Fitness 1999: 734).

Emotions were once seen as disrupting cognitive thought but now are seen as assisting thought. The view of emotions from the 1930s was that they were ‘a disorganized and disorganizing response to difficult circumstances [where] the impact of emotion on cognition was seen primarily as a disruption of an otherwise logical (and preferred) mode of functioning.’ This view shifted from the 1960s to ‘emotions as highly organized and systemised responses to environmental demands that … evolved to serve adaptive functions’ (Smith and Kirby 2001: 75-76). Suppressed emotions become somatised and/or projected on to others in the form of harmful behaviours: ‘if pain cannot be given words, if anger, fear or despair cannot be given voice, then it gets somatized or worse, gets projected on to the other’ (Hoggett 2000: 150).
Affects

Ortony and Turner (1990: 315-331) reviewed the classifications of fourteen emotion theorists from the 1960s. Some of these classifications are biologically based and others psychologically based. Many of the emotions identified are common to most of these theorists. Goulburn Family draws on one of these theories. This is the affects theory of Tomkins, principally interpreted and extended by Nathanson. Its attractiveness to Goulburn Family and myself is twofold. It links the biological and psychosocial explanations of harm of Reiss and Roth (1993: 101-104) mentioned earlier, since Tomkins saw biological causes of psychologically and socially constructed emotions. Buck describes affects as the voices of the genes: ‘affects are ways in which the genes influence, persuade, or cajole the individual to behave in ways conducive to the preservation of the individual or the group’ (Buck 1999: 324).

Affect ‘is the root of such words as affection’, those warmest of feelings for people in our lives. When affected by something, we experience emotion. When disaffected, we are indifferent with little emotional involvement (Nathanson 1992: 49; author’s emphasis). Tomkins identified nine innate affects. Two are positive, one is neutral and six are negative. Seven of them have two word descriptions, ‘the first indicating the mildest presentation of the affect, the second its most intense’ (Nathanson 1996: 9). Each affect is accompanied by a facial display, often involuntary (Tomkins 1962: 209):
Table 2: Tomkin’s affects and displays

<table>
<thead>
<tr>
<th>Affects</th>
<th>Facial display</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td></td>
</tr>
<tr>
<td>Interest-excitement</td>
<td>Eyebrows down and the stare tracking an object or fixed on it</td>
</tr>
<tr>
<td>Enjoyment-joy</td>
<td>The smiling response</td>
</tr>
<tr>
<td>Neutral</td>
<td></td>
</tr>
<tr>
<td>Surprise-startle</td>
<td>Eyebrows raised and eyes blinking</td>
</tr>
<tr>
<td>Negative</td>
<td></td>
</tr>
<tr>
<td>Fear-terror</td>
<td>Eyes may be frozen open in a fixed stare or moving way from the dreaded object to the side, the skin pale, cold, sweating, and trembling, and the hair erect</td>
</tr>
<tr>
<td>Anger-rage</td>
<td>Frown, clenched jaw, red face</td>
</tr>
<tr>
<td>Distress-anguish</td>
<td>The crying response</td>
</tr>
<tr>
<td>Dissmell</td>
<td>Upper lip raised</td>
</tr>
<tr>
<td>Disgust</td>
<td>Lower lip lowered and protruded</td>
</tr>
<tr>
<td>Shame-humiliation</td>
<td>Eyes and head lowered</td>
</tr>
</tbody>
</table>

Adapted from Tomkins (1987: 359); Tomkins (1962: 337)

The two positive affects are interest-excitement and enjoyment-joy. Interest makes us engage in what is going on around us. It may precede social interaction or an activity that causes such stimulation. Constant novelty or new thinking and creativity can sustain excitement. Enjoyment-joy comes from relief of stress producing contentment and then a smile. It is short lived unless we then reflect on similar experiences that have occurred in our past lives (Nathanson 1992: 74-75, 79, 81) that Goulburn Family call memories.

Surprise-startle may have a positive or negative outcome. Its function is to clear the mind from what was receiving attention before to what is occurring now. It is a momentary affect unless it triggers other pleasant or unpleasant memories (Nathanson 1992: 88-91).
There is a hierarchy of negative affects. This is set out in the table above in descending order and described in detail here:

Rage and terror are the most punishing of the basic affective experiences; anguish, more tolerable. When it is experienced as an affect, dissmell keeps others at a distance and prevents any sampling or testing of a potential relationship. Disgust motivates us to keep away from whatever or whoever once made us feel good, but anyone who has ever seen a couple go through ... a divorce and later reconcile, it can be overcome. Shame is the least toxic ... for it operates in the context of positive affect and always carries the hope that the impeded good sense may return and, with it, the positive affect associated with it (Nathanson 1987: 123-124).

Conflict arises within the individual 'from conscious and unconscious affects, cognitions and urges that are competing, conflicting, and in constant opposition’ with ‘certain behaviors or responses in one partner provok[ing] a violent reaction in the other’ (Goodyear-Smith and Laidlaw 1999: 285, 293).

Shame

Goulburn Family emphasises the role of shame in harmful behaviours, drawing on Nathanson’s emphasis on shame in his interpretation and extension of Tomkins. Nathanson does this on the basis that the negative affects of terror and distress hurt the ego but shame is:

…felt as an inner torment, a sickness of the soul. It does not matter whether the humiliated [person] has been shamed by derisive laughter or whether he [sic] mocks himself. In either event, he feels naked, defeated, alienated, lacking in dignity or worth (Nathanson 1992: 146 citing Tomkins 1962: 118).

Nathanson describes a sequence in the onset of shame. There is a triggering event that usually impedes a positive affect in progress. This sets in place an
unpleasant flow of innately scripted other events, namely:

…a series of physiological events occurring at sites of action all over the body … a programmed mechanism that pulls our eyes away from whatever has been the object of our attention, dilates blood vessels in the face to make us blush, causes our neck and shoulders to slump, and brings about a momentary lapse in our ability to think (Nathanson 1992: 308).

This inability to think lasts momentarily before being replaced by a flood of new thoughts as the brain accesses a library to see which script of experiences this new experience fits into or whether the script needs to be changed. This in turn results in acceptance or defence. Acceptance allows us to examine the impediment and learn from it — to use it as an impetus to change. More common though is defence to avoid change and instead mitigate the pain (Nathanson 1992: 308-309).

Defensive scripts may take one of four forms: avoidance, withdrawal, attack on others, or attack on self. Nathanson uses the metaphor of ‘the compass of shame’ since people ‘fly to one of four points of the compass’ with the onset of shame (Nathanson 1992: 312). Goulbourn Family uses the compass in its work with clients and to which it finds clients strongly relate in describing their harmful behaviours.

Withdrawal isolates us from others. It may range from shyness to depression. Avoidance distracts our attention away from shame to hedonism in the form of
a new material acquisition, a sexual conquest, excessive alcohol and/or drugs.
Attacking oneself allows contact with others to be maintained but ‘we take
pains to define ourselves as lesser than the other person with whom we are
interacting.’ It may range from deference to masochism ‘in which we accept …
brutal treatment at the hands of the powerful other in order not to feel the sting
of abandonment.’ None of these may be entirely sufficient to keep the pain of
shame at bay so that the remaining strategy is to attack others by seeking ‘a
relationship within which we can reduce the self-esteem of another person …
range[ing] from the mildest moment of irritability to the most pathological

**Therapeutic engagement — healing harm**

I wanted to find out what forms professional engagement takes with families
exhibiting harmful behaviours. I assumed that agencies in the community assist
the family to acquire life skills. I found that relationship skills are acquired
from the connection that Goulburn Family makes between relationships,
behaviours and affects. This acquisition occurs through therapeutic
engagement. Other forms of professional engagement of Goulburn Family
complement this, namely casework, community work and policy work. This
section focuses on therapeutic engagement. Chapter 4.3 focuses on other forms
of professional engagement. The identification of therapeutic engagement for
me was made when the supervising psychologist of Goulburn Family observed
the practice of Goulburn as ‘a form of therapeutic intervention’ (transcript 14
May 2003). This allowed me to identify more specifically the nature of family
work of Goulburn Family and to explore the literature accordingly.

Healing and hope

Therapy is a form of emotional healing. The client is viewed as ‘as an active self-healer’ (Bohart 2000: 145). Therapy mobilises ‘naturally occurring self-healing forces’ of the client (Bohart 2000: 145). The distinction in the literature between therapy and therapeutic intervention appears to be a matter of degree of professional training and practice. Therapy is undertaken by clinicians with extensive training in counselling. Therapeutic intervention is undertaken by social workers with their work on relationship and behavioural issues of clients (Wilson 2000: 348).

Therapy brings about hope in the process of healing. It does this by providing a safe, structured, supportive working space and time infused with a sense of hope in which the client ‘can be listened to, listen to themselves, think, and feel’ and can draw on their intrinsic creative problem solving abilities. In doing so, it allows the client to gain a sense of self within their frame of reference, to unravel their problems, and to gain other perspectives and explore options. It allows the therapist to introduce tools and techniques — or structured opportunities — to assist the client in exploration. And it provides an interactive setting in which the therapist can act in the role of a person rather than a superior expert, providing feedback in a way that invites ‘thinking, experiencing, and exploring … what they want out of relationships, how they
relate to others [and] how they relate to themselves’ (Bohart and Tallman 1996: 18-21, 25).

Degree of collaboration

Workers at Goulburn Family seek to make human or emotional contact with the client to quickly build rapport so that technical or rational engagement in the process can begin. They tend to do this more than the literature explicitly indicates. Thus, Bohart (2000: 145) appears to emphasise the technical more than the human when suggesting that the therapist assists in healing by engaging in a collaborative relationship of client involvement and learning within an environment of hope, activity and marshals ‘intrinsic intelligence for solution-finding’.

Within a largely technical interpretation, Bohart indicates that the willingness of the client to be involved depends on a number of factors. It depends on whether the client presents voluntarily from a feeling of guilt or from desires or goals; or presents compulsorily for example by court order (Bohart 2000: 138 citing Sheldon and Elliot 1999). It is associated with the stage of change at which the client is at the time of presenting and therefore willingness to engage in activity and action (Bohart 2000: 138-139 citing Prochaska et al. 1994). It is associated with the degree of hopefulness or optimism of the client presenting. A low degree may result in a belief that nothing will help; it may result in passivity in the presence of the therapist; and it may engender defensiveness and self-protection that may lead to a focus on protection rather than learning
It is associated with the extent to which the client trusts authority. It is associated with the degree to which the therapeutic approach meets the values and worldview of the client (Bohart 2000: 139). And it depends on the ability of the client to be involved so as to:

…maintain a focus on the tasks at hand, persist in the face of temporary failure, and maintain an open learning-oriented stance so that they can confront painful material, explore, and learn from failure. Productive involvement means being able to maintain a focus on the tasks at hand, persist in the face of temporary failure, and maintain an open learning-oriented stance so that they can confront painful material, explore, and learn from failure (Bohart 2000: 139 citing Bohart & Tallman 1999; Tallman 1996).

Mobilising the capacity of the client

The supervising psychologist to Goulburn Family critically observed that the client is building capacity in therapeutic engagement ‘to do it themselves rather than having it done for them’ (transcript 14 May 2003). This observation is congruent with Bohart and Tallman (1996: 21) that the therapist helps to mobilise the capacity of the client. Within the therapeutic engagement, clients:

…explore all of the relevant information, searching for meaning, opening to deeper experiencing, investigating options, developing new choices, brainstorming about new possibilities, examining neglected hypothesis, and testing out hunches (Bohart and Tallman 1996: 21).

The degree to which a relationship is established with the client provides a basis for the degree to which the worker can support the client in mobilising this capacity. People already know a lot about everyday and abstract when they
come into a professional engagement relationship. Some of their knowledge and skills are well applied, though sometimes inconsistently. Some of their knowledge and skills are sometimes misapplied. The knowledge and skills is represented by reserves, often under-utilised and under-developed, of needs, interests, strengths and resources. Some of these reserves are marshalled and strengthened in professional engagement in a community organisation; others are marshalled through casework with this and other community organisations.

Needs

Existing knowledge by the client of their needs give a sense of direction and purpose for the client in everyday life activities. For example, Goulburn Family clients are expressing a need when they say: ‘I want the violence to stop and the relationship to improve’ (post-project transcript 11 February 2004). This sense of direction provides the worker with the basis for supporting the client in developing goals and actions to fulfil this need. Goulburn Family refer to Maslow’s hierarchy of needs: ‘it’s almost as if we have forgotten what we learnt about Maslow’s hierarchy of needs … It’s as basic as that. We need shelter, food and then the belonging’ (transcript 22 October 2002).

Maslow’s theory of motivation arranges human needs in a hierarchy. From the basic to the advanced, they are physiological, safety, love, esteem, and self-actualisation (Maslow 1987: 22, 56-57). The major motivation of an individual
‘missing everything in life in an extreme fashion … would be the physiological needs more than any others. A person … lacking food, safety, love, and esteem would most probably hunger for food more strongly than anything else’ (Maslow 1987: 16). Other needs progressively are felt as the physiological needs are fulfilled.

Goulburn Family undertakes casework if physiological needs of the client are acutely absent when the client presents. They do this by marshalling the material resources of community institutions that provide for such needs. Physiological needs embrace food, clothing, shelter and health. They share with other community institutions the fulfilment of safety needs. These cover a wide variety of needs: ‘security; dependency; protection; freedom from fear, anxiety, and chaos; need for structure, order, law, and limits; strength in the protector; and so on’ (Maslow 1987: 18). Goulburn Family fulfils psychosocial needs for safety, for example, by assisting with an application for an apprehended violence order.

Goulburn Family undertakes therapeutic engagement in order to fulfil psychosocial needs of the client for love and esteem from fulfilling relationships. These ‘involve giving and receiving of affection. When they are unsatisfied, a person will feel keenly the absence of friends, mate, or children. Such a person will hunger for relations with people … loneliness, ostracism, rejection, friendlessness, and rootlessness’ are keenly felt in their absence. Maslow grouped esteem needs into two: self-esteem that involves competence,
mastery, achievement and self-confidence; and esteem held by others of the self such as appreciation and status (Maslow 1987: 18-21).

Goulburn Family undertakes self-actualisation needs to the extent of referring some clients on to the playgroup. Maslow (1987:128-149) identified these needs as a strong sense of values and of ethical right and wrong; a continuing wonderment and pleasure at the surroundings, peaking in mystical experience; solitude, detachment and self autonomy from the culture that surrounds them; a focus on problems beyond themselves; a distinction between ends and means with a priority for ends but valuing both; resolution of dichotomies or dualisms; creativity and spontaneity with humour and without affectation; affection for others combined with humility and respect and deep and profound relationships with others; perception of reality with the capacity to detect openness and honesty in people and its converse; and acceptance without anxiety or guilt.

The meeting of psychosocial and self-actualisation needs produces a sense of self-worth. Self-worth, or wellbeing, of individuals, family and community means those who deeply value themselves. Self-worth highlights the significance not just of relationships, but also the degree of their quality and connectedness within the family and in relation to the community. The South Australian Department of Human Services (2000) has identified three dimensions consistent with this: an individual, a relationship and a community. There is an individual dimension in having a sense of purpose and control over one’s life together with a sense of vitality and energy of being able freely to
undertake activities that one enjoys. To this might be added a sense of direction and, as The Royal Commission on Social Policy (1988: 470) puts it, fulfilment of social potential. There is a relationship dimension to self-worth in ‘having positive and satisfying social relationships’ (South Australian Department of Human Services 2000). To be social is to be in relationship with others — a connectedness with others in social relationships that values others as well as a sense of comparison and contrast with others (The Royal Commission on Social Policy 1988: 470). And there is a community dimension in ‘experiencing a connectedness to “community”’ though The South Australian Department of Human Services (2000) does not go so far as to identify the role of citizenship of the family and its members in this. Fulfilment of social potential and the link beyond the family to the community suggest an abstract dimension taken up in chapter 4.2 in a sense of learning and of citizenship and the acquisition of such skills.

**Interests**

A school I interviewed in Queensland formed groups of parents based on identifying their interests:

One of them is about a cultural group with a specific focus that meets at the community centre each Monday. There’s a cooking group. There’s a young parents group; they invite someone to talk about babies for example. There are a couple of training focus groups … There are other examples. They have computers down at the community centre and that has got some in. We run computer sessions here as well in
the afternoon … There’s a community choir as well involving a couple of my teachers (interview 27 November 2002).

Stock phrases of Goulburn Family such as ‘virtually all families care about kids’ and ‘people want the best for their children’ suggest an interest in children (transcripts 8 July 2003; 8 April 2003) that Goulburn Family looks for in therapeutic engagement.

Strengths

Goulburn Family uses the stock phrase with clients: ‘why do you do the right thing most of the time?’ (transcripts 8 July 2003; 8 April 2003). This not only allows the client to look at the world in a different way but also to identify their innate strengths. The Australian Family Strengths Template identifies eight strengths from interviews and surveys of families. These strengths are qualities of communication, togetherness, sharing activities, affection, support, acceptance, commitment, and resilience (Geggie et al. 2000). Communication involves listening and being heard by other family members. It consists of openness and honesty in interaction between members of the family in a positive way frequently and when something is troubling them. Togetherness is shared values, rituals, and activities and making oneself available to others that bind the family together; it is a coping strategy when pulling the family together to face the challenges to it. Affection is the expression of emotional connection in the form of love and care for one another and doing things for each other. Support is the ease with which family members feel comfortable in giving and seeking practical and emotional support: of ‘assisting, encouraging,
reassuring each other, and looking out for each other.’ Acceptance is the understanding of the uniqueness of each member of the family, acknowledging differences and allowing space for each for their own interests and to voice their own opinions without being judgmental. Commitment is a dedication, loyalty and responsibility by each member to the family as a whole to ensure its wellbeing and sense of mutual belonging and working together as a unit. It involves a mutual commitment of the partners to each other and to nurturing their children, maintaining links with the extended family, and contributing to the community (Geggie et al. 2000). Whilst there is clarity of definition of the first seven of these strengths, Geggie et al. (2000) seem less clear about resilience. They ask the rhetorical question, why are some families strengthened in times of adversity whilst others fall apart? In a sense it is the first seven strengths that make up the resilience of a family (Silberberg 2001: 55). Some clarity is provided by the Family Action Centre (2000: 3) when it states that resilience is the positive attitude of a family to challenges and its ability to withstand setbacks and crises.

Resources

I distinguish elsewhere information, skills, and knowledge from other resources since these are used in a process of learning to acquire other resources. Goulburn Family recognises in therapeutic engagement that clients have large amounts of information about ‘their history, experiences, and life environment’ and are therefore the experts on themselves (Bohart and Tallman
Clients in therapeutic engagement at Goulburn Family draw on many sources of information, including: ‘their feelings and emotions, bodily reactions, their relationship with the therapist, historical events, recent events, therapist responses, techniques, and the therapist’s ideas’ (Bohart & Tallman 1996: 21).

Resources extend beyond information though. Onians (2000) describes a related concept of personal wealth, one more generally associated with economic and material resources but a term that has wider historical meaning to suggest a contemporary meaning of health, knowledge, time, sociability, and community. Health relates to mental and physical health free from illness and injury; knowledge to ‘freedom of thought and expression’ of this knowledge; time ‘and the ability to use it well’; and sociability that extends to ‘the ability to contribute to a community’.

Coohey and Braun (1997: 1083) complement and add to this list. Resources for them include knowledge, skills, physical strength, networks and financial. Knowledge and skills relate for example to parenting and child development. Physical strength relates to the means by which one person influences another to act in the way the person wants. Networks relate to family and friends and beyond to community resources such as social workers and teachers that vary in access and availability from community to community. Onians (1998) and Coohey and Braun (1997: 1083) refer to knowledge and the community.
Coohey and Braun extend their identification of community from Onians’ concept of individuals contributing as resources to the community to individuals drawing on the resources of the community. One of the resources they draw upon is community institutions like Goulburn Family. There is another group of resources on which I reflect in chapter 4.2 and that is that Goulburn Family is drawing out in the process of learning latent abilities of the client of observation, reflection, conceptualisation, and experimentation of the client.

4.2 Learning in client engagement

Chapter 4.2 examines two of the seven components of the research question identified in chapter 2.1, namely learning and life skills. I wanted to find out how learning takes place in families acquiring life skills and how workers learn in practice. I assumed that learning of life skills takes place in agencies and schools. An additional but implicit assumption in this question that became explicit during the action research project was that I had made no distinction between adult and child learning. I found that families acquire everyday life skills in community institutions from therapeutic engagement, and other life skills from groupwork engagement. I found that life skills are acquired in adult learning, drawing on an accumulation of experience of adults. I revised my assumption about schools. Children have a much lower level of experience to draw on from learning. At the same time, the school curriculum focuses on abstract learning by children but not by adults. Learning by all students may be interrupted by some students from families with harmless behaviours who
disrupt the classroom. Community institutions providing therapeutic and groupwork engagement have the capacity to provide forms of learning that address harmless behaviours. I seek in chapter 4.2 to make two contributions to the literature: a framework of the client learning process in therapeutic engagement and a framework of the content of everyday life skills. The progressive construction of the first framework led me to review the literature on therapy and learning and on adult and child learning. And adult learning led me to explore experiential learning. This in turn led me to explore worker and organisational learning.

A framework of client learning in therapeutic engagement

I made the link between the practice of Goulburn Family and learning from two observations by its supervising psychologist midway through the project when he described its practice as a form of therapeutic engagement and that this engagement built capacity for action by the client. This resonated for me with the concept of Stehr (1994) that knowledge is the capacity for action, explored in chapter 4.4. I observed that learning is the means by which knowledge is acquired. I observed that learning in therapeutic engagement is adult learning that principally draws on the accumulated experience of the adult. I further observed that learning by the client is more implicit and learning by workers is more explicit in the practice of Goulburn Family. I made the learning of its clients more explicit by constructing a framework of the client learning process in therapeutic engagement. The framework was
principally constructed from my empirical observations of the Goulburn Family practice and from the reflections of workers from sharing with them its progressive construction. I found the literature sparse on learning in therapeutic engagement and incorporated what was available into the construction. I represent this client learning process in the form of a table, followed by an explanation of each stage of the learning process.

**Table 3: A framework of the client learning process in therapeutic engagement**

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Context of engagement

The framework is composed of a process of the worker building capacity for action by the client from acquisition of knowledge so that: they ‘do it themselves rather than having it done for them’ (transcript 14 May 2003). Knowledge is acquired by learning from exchange of information.

In my observations and reflections on the practice of Goulburn Family, learning comes from healing in therapy. Healing comes from a human or emotional engagement of the worker and the client from the start supported by application of a range of technical or cognitive tools provided by the worker. This human and technical engagement is one of discourse, dialogue, didactics, and dialectics and the worker applying at each step support and pressure to the client. The client acquires from the process a range of self-sustaining skills of fulfilling behaviours. Foremost are relationship skills and the emotions that underpin them. Other skills include storytelling, disclosure, and oral literacy. The client is also learning to reapply negotiation and manipulation skills to fulfilling ends. And the client is taking the first steps in learning how to learn. Therapeutic and learning engagement provides space and time detached from everyday life of the client. It takes place within the home-like setting of the lounge rooms of the cottage. This space is both professional and personal. It lies midway between the personal space of the often chaotic and intimidating conditions of home and the professional yet impersonal conditions of an institutional setting. Such a space allows human as well as technical engagement. The worker is giving time to the client in which to be heard, often for the first time in their lives. Such space and time to tell their story, explore,
reflect and act have often been absent from the life of the client to date. Such a space acts too as an exemplar of an organised home.

The client in this process acquires a set of relationship and related skills; identifies and redirects existing but misapplied manipulation and negotiation skills; develops disclosure and oral literacy skills that come with storytelling; acquires skills of multiple perspectives and choices, and planning, acting and reflecting; and acquires skills of structuring and organising in planning and acting.

Learning is a cycle. The client learns in therapeutic engagement, goes away and practices it, returns having succeeded or failed, revisits the learning and goes back and does it the same or differently. It is like a spiral in that it is not just revisiting but moving on (transcript 16 September 2003).

**Learning in therapeutic engagement**

Discourse comes from exchange of information between client and worker. Discourse of the client is in an account of their life in the form of sharing their story and focusing on harmful and fulfilling life events and experiences that have occurred, culminating in the event that brought them into therapeutic engagement. The worker is identifying behind the events and experiences the issue underlying the presenting issue, the victims and perpetrators and the
extent that these roles mingle amongst family members. The worker is also
identifying during the course of the story latent client reserves of needs,
interests, strengths, and resources. The worker identifies these considerations
by acknowledging the role of members in the story, clarifying so as to reveal
implicit aspects of the story, and by progressively encouraging different family
members to share their stories. The worker clarifies by drawing on scripted and
unscripted questions and sometimes challenges if the client, reverting to
avoidance or withdrawal from the shame affect, omits parts of the story. The
engagement takes place on the basis of fair process: engagement, explanation,
expectation and clarity (Kim and Mauborgne 1997: 69).

The discourse of the worker is in the form of an account of the theory and
practice of harmful and fulfilling relationships, behaviours, and affects in the
context of the client’s story so that the client knows what works and why. The
worker dialectically describes some or all of a range of learning tools to
illustrate and to build the reserves of the client: the script of questions, the
social control window, the nine affects, and the compass of shame. A range of
informal learning tools is also used: metaphors, stock phrases, examples and
stories.

A dialogue comes from the common ground — and mutual trust — that
evolves from the two sets of discourses. The dialogue takes the form of an
interchange of thoughts and views on relationships, behaviours, and affects,
sometimes to a point of dialectics. These thoughts and views in dialogue reveal
multiple perspectives of relationships, behaviours and affects for the client previously committed to a single perspective. The worker is encouraging and sometimes challenging and applies pressure on the client to own their behaviours and to move on. The dialogue between client and worker acts as an exemplar of a fulfilling relationship as the setting acts as an exemplar of a stable and organised home.

Client reflection encourages them to identify informed choices that are available on action after the event and that can be used in anticipation in similar circumstances in action during an event. These informed choices go beyond the uninformed choices of behaviour in the compass of shame of attacking others, attacking self, avoidance, and withdrawal. Informed choices come from multiple perspectives — the different ways of looking at the world — that come in turn from the information they and the worker have exchanged and refined in dialogue. These multiple perspectives allow the client to move on from the role in which they have cast themselves as victims and/or perpetrators and re-identify themselves as family members with informed choices: ‘people allow themselves to be defined by others or by events. What we are doing is allowing them to move that definition of themselves’ (transcript 8 July 2003).

The worker supports the client in building and realising expectations of relationships and the behaviours and affects that underpin them. This is a threefold process: firstly, of the client being encouraged to identify a preferred
future and goals to achieve it; secondly, of being encouraged to establish
expectations that they can fulfil this preferred future; and thirdly, acquiring a
sense of obligation to the worker to fulfil their preferred future from pressure
brought by the worker. This preferred future may be a goal or a series of goals
that form a plan. The plan may be in the form of immediate action or
adjustment over time or, more often, both. The client then experiments and
acts, reflects with the worker, and adjusts in subsequent actions. Other goals
may be introduced as the client gains confidence. One may be to replicate
fulfilling behaviours with other family members so that the client becomes a
facilitator of others as the client is facilitated by the worker. Thus, there are two
forms of client learning: learning by the client in therapeutic engagement; and
replication of the learning of the client with other family members.

Disengagement takes place when the client is confident enough to act on their
own. The worker at different stages of this process uses a rating tool with the
client for him or her to assess on a scale of one to ten their sense of success
from acting.

The process of learning in therapeutic engagement

I found that the connection of therapy and learning largely absent from the
therapeutic, learning and social work literature. An exception is Carl Rogers
who wrote extensively on the topic before he died in the mid 1980s. His
observations and reflections assisted me in substantiating the empirical
framework of the learning process of Goulburn Family identified in chapter 3.
Rogers on learning

Learning in therapy

Carl Rogers (1967: 280) contended that significant learning occurs in psychotherapy. For Rogers, ‘important learning was that which heightened your awareness of yourself and others, and which gave you the option of changing your behaviour. Nobody can tell you about such learning — you had to experience it yourself, as a person does in psychotherapy’ (Foley 2000: 46). Rogers used the term ‘significant learning’ to describe ‘learning which makes a difference — in the individual’s behavior, in the course of action he [sic] chooses in the future, in his attitudes and in his personality’ (Rogers 1967: 280).

Goulburn Family emotionally engages the whole client and draws on feelings and facts in their life story and before proceeding to subsequent steps in a learning process. Rogers (1967: 280) saw learning as more than the accumulation of facts. Rogers (1974: 103) posited a place for learning for the whole person; where feelings and ideas merge, and where cognitive learning and affective-experiential learning occur simultaneously. We need to feel our knowledge. Without feelings, knowledge allows us to justify, for example, violent acts (Rogers 1974: 105).

Rogers (1967: 281-284) also posits a process of learning that is similar to and
expands on the process of learning of Goulburn Family: facing a problem, congruence, unconditional positive regard, an empathetic understanding, and perception of the clients of these conditions. The client has an ambivalent desire to learn from the problem s/he faces — in one way eager to learn but frightened of what s/he discovers as disturbing. The therapist is one who is ‘a unified, or integrated, or congruent person’ in the relationship, who experiences an unconditional positive regard for the client, one that is warm and caring without possessiveness and that demands ‘no personal gratification’ and who is ‘experiencing an accurate, empathetic understanding of the client’s world … from the inside’.

This process of learning has five characteristics (Rogers 1983: 258) that resonates with and expands on the sequence of engagement of Goulburn Family and which I italicise for emphasis. Rogers adds to the framework the cognitive dimension that I had previously overlooked. The five characteristics are: affectivity and cognition of a person in that person’s involvement in learning; a self initiated sense of discovery that comes from within the person; learning that is evaluative by the learner in meeting a need of theirs; the meaning of learning that becomes incorporated into the total experience of the learner; and learning that is pervasive enough to make a difference in the behaviour, attitudes and perhaps the personality of that person in the role of the learner.
The learner

The client-learning framework identifies client reserves of needs, interests, strengths, and resources. Rogers refers to a vast array of resources of the individual ‘for self-understanding, for altering the self-concept, basic attitudes, and … self-directed behavior’ (Rogers 1979: 98). These resources can be tapped where facilitative psychological conditions prevail (Rogers 1979: 98). As the learner is emphatically heard, s/he becomes capable of listening more accurately to his/her inner experience, valuing this and thereby developing a self more congruent with this experience of becoming more real and more genuine with self (Rogers 1979: 99). Underpinning this is the striving of people to develop and grow in a direction — to becoming as well as being (Rogers 1979: 99). It is activating a direction that is selective and constructive (Rogers 1979: 100).

The facilitator

The worker in therapeutic engagement at Goulburn Family works with the client as learner. Goulburn Family describes the social control window that visualises four choices for the client of what we do with people in juxtaposition to what we do for people, what we do to people and what we do not do for people (transcript 30 September 2003). Rogers’ (1962: 417) view was that ‘the quality of the interpersonal encounter … is the most significant element in determining effectiveness’ of learning, growth and change. This interpersonal
encounter takes place between the learner and the facilitator.

Rogers (1974: 106-107) adds to the framework by describing the worker as a facilitator who is also a whole person and one who has a deep empathy with the client. The facilitator establishes psychological conditions of a climate of self-initiated experiential learning including awareness of the facilitator’s own feelings; valuing the learner and his/her perfections and imperfections that advance and inhibit learning; and empathetic understanding by the facilitator. The facilitator acts as a whole person when their own feelings they are experiencing are available to them and where appropriate to the learner, to the extent where there is a realness projected by the facilitator to the learner.

The likelihood of learning increases when the facilitator understands the reactions of the learner from the inside — of the way that the process of learning is seen by the learner — so that the learner feels understood, and is aware that s/he is understood within his/her private world to the point where the learner feels this is a new experience: ‘at last someone understands how it feels and seems to be me without wanting to analyse and judge me. Now I can blossom and grow and learn’ (Rogers 1974: 107).

To enable this, the facilitator prizes the feelings and opinions of the learner in a non-possessive caring way, accepting the learner as a separate person worthy of trust, of the fear and hesitation with which the learner may approach a new
problem, and of the satisfaction in their achievement of learning goals; as well
as of the discipline as well as occasional apathy, erratic manner and oscillating
feelings that advance and inhibit learning along the way to achievement
(Rogers 1974: 107).

**Learning since Rogers**

**Locating the literature**

There is a degree of acknowledgment of Rogers’ contribution in the adult
learning literature. For example, Merriam and Caffarella (1999: 258) and Foley
(2000: 46) refer to Rogers’ contribution to adult learning, experiential learning,
facilitation, and self-directed learning over the past 30 years. Merriam and
Caffarella (1999: 258) also note that the client-centred therapy of Rogers has
similar features to student-centred learning since both are concerned with
learning that leads to personal growth and development. Client learning is
rarely acknowledged though in the therapeutic literature; for example two
mainstream texts on family therapy contain no references to learning (Becvar
and Becvar 2003 and Goldenberg and Goldenberg 2004).

Client learning is rarely acknowledged too in the social work literature.
Hamilton (1958: 164) suggested nearly 50 years ago that ‘social work lies
midway between the healing and educational professions and draws on the
insights of both’. Lightburn and Black (2001: 15-18) suggest the literature and practice have not worked out this way. The social work literature relates to therapy but much less to learning. Social workers identify as therapists rather than educators (Lightburn and Black 2001: 15). Therapy focuses on helping rather than learning; on the ‘affective and relational practice’ of ‘the individual’s emotional life, relational patterns, perceptions, and behaviors, particularly maladaptive patterns of defense, resistance, and transference’ (Lightburn and Black 2001: 16, 18-19). Social work practice rarely relates to how clients learn in the midst of life transitions; how those who are not clients but equally in need of information and skills can acquire them; or how the nature of settings — family support agencies, clinics, hospitals, prisons — in which learning intentionally or unintentionally takes place, affects the capacity to learn (Lightburn and Black 2001: 16).

There are exceptions to the therapeutic and social work literature. Lightburn and Black (2001: 15, 26) identify the social worker as an agent of learning. Social workers engage in a learning process with clients as they help clients ‘gain knowledge, develop skills, reflect critically about their environments, beliefs and values, and consider the active role they play in creating the world in which they live’. Viewing clients as learners assists in not only helping them cope with present and past circumstances but also to think more flexibly in handling future life events and transitions.
Miller and Boud (1996: 10, 17) strengthen the observation of Rogers that emotion is a key component of learning. For them, ‘the affective experience of learners is probably the most powerful determinant of learning of all’. Doherty (1995: 353-354) strengthens Roger’s observation of the link between emotion and cognition. He observes that family therapy and learning are often seen as dichotomous where therapy addresses emotions and learning addresses cognition. Yet family therapy and learning can also be seen as a continuum from emotion to cognition (Doherty 1995: 353-354). Illeris (2003: 398-399, 404) expands on this view. For Illeris, learning suggests integration of ‘an external interaction process between the learner and [their] social, cultural or material environment and an internal psychological process of acquisition and elaboration’. This internal psychological process is made up of emotion and cognition. The emotional dimension of feeling, motivation and mental energy secures the mental balance of the learner and develops a mental sensibility. The cognitive dimension constructs ability and meaning to deal with life situations and thereby develop personal functionality. The two dimensions are interrelated: ‘all cognitive learning is … “obsessed” by the emotions at stake’.

Levels of client engagement

Goulburn Family describes a sequential process of development of their practice of initially providing only information to clients; subsequently adding...
advocacy with other community institutions on behalf of clients; and later still engaging as well in therapeutic intervention. This process aligns with levels two to five of Doherty’s (1995: 354-356) family involvement model of engagement programs. Doherty emphasises in the model the degrees of affective engagement of the client and worker, consistent with the work of Goulburn Family. Level one programs are those where the interests of the parents are implicit and marginal, for example a school counselling program that focuses on the child with little or no input of the parents. Level two programs focus on information and advice to family members, for example one-off didactic parenting workshops with a presentation, questions and answers and practical recommendations in parenting practices (Doherty’s 1995: 354-356). Levels three to five programs match the therapeutic engagement of Goulburn Family. They involve the family with increasing degrees of intensity depending on the acuity of the family issues listening to stories, probing gently the stories and the feelings behind them, creating an open and supportive dialogue, and collaborating in identifying family solutions. These different degrees of intensity relate to the proportion of affectives relative to information content with an increasing level of affectivity as the levels increase (Doherty’s 1995: 354-356).

Conditions of client engagement

Bohart (2000: 140–141) describes conditions for encouraging client involvement that closely match the therapeutic/learning engagement of Goulburn Family: space, multiple perspectives, dialogue, structured activities,
and a plan. The engagement takes place with patient, persistent and genuine support within clear boundaries and with immediate feedback on harmful behaviours to the client (Bohart 2000: 141 citing Kohlenberg & Tsai, 1987); and with the therapist guarding against being drawn into a complementary dysfunctional role. Secondly, from this experience, clients may learn that not all people are dangerous or manipulative. They may learn that their emotions may not be overwhelming but can be managed, that they are of value and have something of value to contribute, and that there are different ways of asking for what they need (Bohart 2000: 141). Thirdly, the therapist may introduce dialogue to promote client discovery. This dialogue may take different forms. It may be by the therapist questioning in a way designed to encourage the client to think; the therapist interpreting in a way that brings fresh perspectives to the clients; the therapist encouraging the client in narrative reconstruction and/or historical exploration; the therapist providing information through feedback; and the therapist and the client brainstorming a problem (Bohart 2000: 141–142). Mezirow (1997: 10) describes conditions of dialogue as empathic, open to different perspectives, and free to critically reflect on assumptions. There must be a capacity to identify common ground, synthesise different perspectives, and judge on the best action from dialogue. Fourthly, the therapist may also introduce structured activities to promote client discovery and creativity in the form of guided exploration activities and/or in the form of strategic and solution based therapy (Bohart 2000: 142). And fifthly, the therapist may introduce a plan or curriculum of study to acquire a skill or in guided learning opportunities from exposure to activities (Bohart 2000: 140, 142).
The process of adult learning

Differences in adult and child learning

I had made no differentiation between adult and child learning until midway through the project when the supervising psychologist observed that therapeutic engagement builds capacity for action. I reflected from this that Goulburn Family was primarily building the capacity of adult members of the family to act. This led me to explore the distinctive features of adult learning. Merriam and Caffarella (1999: 390-398) describe a number of its features. Learning for adults is voluntary. Adults have assumed responsibility for themselves and others in contrast to children who are still dependent. Adults are less inclined to learning that is not meaningful and immediately relevant to their life situation. Their process and speed of learning may be affected by adverse experiences of previous learning, interruptions in use of abilities, and environmental conditions. It may be affected by fatigue and medication. And the ability to respond slows with age. These impediments may be overcome by resources that tap the accumulation of experience of adults. The emphasis in adult learning is on modifying experience whilst the emphasis in learning by children is on accumulating new experiences. Merriam and Caffarella (1999: 390-398) suggest that adults are dealing with ‘intimacy, generativity, and integrity’ in the multiple roles and adjustments in life events and transitions discussed in chapter 4.1 whilst children are dealing with ‘establishing trust, autonomy, initiative, industry, and identity’. Merriam and Caffarella (1999: 390-398) further suggest that the life of the adult is defined by family, community and work, while the life of a child is bounded by home and
school. Learning by adults is one of many activities that constrains their time to learn whilst learning by children is a full time job. These many activities are ‘characterized by its usefulness for immediate application to the duties and responsibilities inherent in the adult roles of worker, spouse, partner, parent, citizen, and so on’.

**Experiential learning**

Storytelling by the client in therapeutic engagement with Goulburn Family is a means of drawing on the resource of learning, then modifying it as Merriam and Caffarella (1999: 390-398) suggest above. This resource represents the accumulation of everyday life experiences (Knowles 1980: 44) that Goulburn Family richly use. Making sense of such life experiences is an incentive for engaging in learning (Merriam & Caffarella 1999: 390). Adults can call on this resource for their own learning as well as use this resource as a means of learning for others (Merriam & Caffarella 1999: 390) such as children.

Experiential learning ‘is the process which takes [the] experience and transforms it in ways which lead to new possibilities, which may involve changes in actions, ways of viewing the world or relationships’ (Miller and Boud 1996: 8). The concept of experiential learning has evolved over the last twenty years. The concept is well covered in the literature. Kolb identified the abilities of adult learners; Boud and his colleagues linked experiential learning to reflective practice; Jarvis placed a social context of learning around
experiential learning and reflective practice; and Mezirow identified transformative learning. Reflecting post-modern developments, adult learning also embraces storytelling and somatic learning. I look at these in turn.

*Abilities of adult learners*

I reflected that Goulburn Family is drawing out the latent abilities of the client of observation, reflection, conceptualisation, and experimentation. This reflection was based on Kolb’s (1984: 30) interpretation of learner abilities not only as concrete experience but also reflective observation, abstract conceptualisation, and active experimentation; and on Barnett’s (1989: 4-6 cited by Merriam and Caffarella 1999: 224-225) addition of a fifth ability of planning for implementation. This suggests that concrete experience is the ability of learners to ‘involve themselves fully, openly, and without bias in new experiences’; reflective observation is the ability ‘to reflect on and observe their experiences from many perspectives’; and abstract conceptualisation is the ability ‘to create concepts that integrate their observations into logically sound theories’ (Kolb 1984: 30). Planning for implementation is the ability to undertake a ‘plan, specific activities that will occur, other people who will be involved, a time line of events and activities, and types of data to be collected to determine how the plan is working’ (Merriam & Caffarella 1999: 224–225 citing Barnett 1989: 4–6). And active experimentation is the ability ‘to use
[that is, act on] these theories to make decisions and solve problems [in practice]’ (Kolb 1984: 30).

Reflection

The literature on experiential learning especially focuses on reflection. (Clark 2001:85 citing Michelson 1998) indicates that knowledge resides in the experience as well as in our reflection of it. As a Goulburn Family worker noted:

We then go back to their story and we view their story in the light of the new information they have been given and then let them describe their behaviour that intuitively comes back to a response to shame and they start to see their behaviour in those terms (transcript 4 March 2003).

Boud et al. (1985: 18-20, 26-27) distinguish between experience and reflection. Experience is ‘the total response of a person to a situation or event: what he or she thinks, feels, does and concludes at the time and immediately thereafter’. Reflection results when learners work with the experience. They ‘recapture their experience, think about it, mull it over and evaluate it’. They identify the behaviour, ideas and feelings of the experience; make use of the positive feelings of the experience and similar experiences, removing the feelings of obstruction; and re-evaluate the experience ‘in the light of the learner’s intent, associating new knowledge with that which is already possessed, and integrating this new knowledge into the learner’s conceptual framework’. The outcomes ‘may be a personal synthesis, integration and appropriation of
knowledge, the validation of personal knowledge, a new affective state, or the decision to engage in some further activity’.

Merriam and Caffarella (1999: 232) suggest that reflection takes place in action as well as on action. Reflection in action is thinking through the event at the time of the event. Chapter 3 noted an example of both in client reflection. Reflection in action is triggered by surprise when what practitioners are doing does not work out, giving rise to experimentation and reframing (Schon 1987: 28). Reflection on action is thinking through the event after the event in which ‘we consciously return to the experiences we have had, re-evaluate these experiences, decide what we could do differently, and then try out whatever we decided to do differently (Merriam & Caffarella 1999: 235).

Transformation

Many clients of Goulburn Family appear to experience a ‘perspective transformation’ brought about by ‘a disorientating dilemma’ (Mezirow 1991: 168) that provides a critical understanding of ‘how one’s social relationships and culture have shaped one’s beliefs and feelings’ (Mezirow 1991: 161). Such a transformation goes beyond reflection to a sequence of:

…an enhanced level of awareness of one’s feelings, a critique of their assumptions … an assessment of alternative perspectives, a decision to negate an old perspective in favor of a new one or to make a synthesis of old and new, an ability to make action based upon the new perspective, and a desire to fit the new perspective into the broader context of one’s life (Mezirow 1991: 161).
Mezirow’s (1991: 161) observation is similar to my own at Goulburn Family: that this transformation is often facilitated by others to whom a person or family may look for guidance. Mezirow further observes that the facilitator may introduce points of view that the person or family may find ‘discordant, distasteful, and threatening’ but come to realise in due course as ‘indispensable’ to coping with the disorientating dilemma. A perspective that appears to be promising is interpreted in a way to make it one’s own. It is then tested on friends and others to validate through rational discourse. It means also working out ‘the changed relationships with others that result from the new perspective’.

Narrative

Narrative in the form of storytelling is central to the early stages of therapeutic engagement of Goulburn Family. Its value is described in the literature. Relationships may be seen as narratives shared between each other for mutual understanding and for bringing the two narratives together. Such narratives may consist of reliving a past experience or imagining a future experience that may or may not come to pass (Hinde 1997: 39-40). Clark (2001: 87-89) describes narrative as a familiar and comfortable form of media for people. It is a natural mode of making meaning and therefore of learning. The opportunity and capacity to tell our story of life events and experiences allows us to make sense of them and therefore of our lives. It brings coherence and understanding of the links of and between events and experiences as they unfold. It brings a
sense of continuity as well as of change and provides a platform for coming to understand the reasons for change. These stories have a social context since they often have an audience. They are platforms for reshaping identity in their telling.

*Somatic learning*

Somatic or embodied learning appears in the practice of Goulburn Family with its emphasis on identifying bodily affects in therapeutic engagement. Polanyi (1969: 147-148) argues that knowledge begins in the body: ‘every time we make sense of the world, we rely on our tacit knowledge of impacts made by the world on our body and the complex responses of our body to these impacts. Such is the exceptional position of our body in the universe’. Somatic comes less naturally than narrative learning: ‘we live much more comfortably in our heads than in our bodies’ (Clark 2001: 84). Yet: ‘all of us … have the experience of stress manifesting itself in our bodies before our heads fully understand what trouble we’re in’ (Clark 2001: 85).

*Learning settings*

I was surprised by the extent of learning that occurs in therapeutic engagement at Goulburn Family. Rogers went so far as to suggest that ‘the best of education would produce a person very similar to the one produced by the best
of therapy’ (Rogers 1983: 283, author’s emphasis). I was surprised by the extent of learning in Goulburn Family’s affiliated playgroup.

I was surprised too to find the literature on learning settings sparse. There are exceptions, however. Kolb (1984: 32) indicates that learning ‘occurs in all human settings’. Location is significant in terms of the practical, psychological and cultural familiarity for the learner (McGivney 1999: v). If it is physically close to the location of the client, it is practical. If it is psychologically and culturally familiar, it is conducive to learning. Local settings give a sense of identity, helping people ‘build a feeling of belonging and security — people know where they are’ (Smith 1994: 11). At the same time, choice of setting slightly removed from familiarity can stimulate the senses, or as Smith (1994: 27) puts it, encourage ‘people to enter new situations and settings.’ Thus, the value of Goulburn Family engaging in the home-like setting of the cottage, rather than in the home, is reinforced. An appropriate setting provides ‘[a] micro-culture, climate and space within which to work’ with ‘local rules and norms’ (Smith 1994: 27).

This led me to reflect on the greater diversity of adult learning settings, for example, home, neighbourhood, community institutions, shopping centres, and work; and the lesser diversity of child settings of home, neighbourhood and school. Community institutions include kindergarten, pre-school, health centres and hospitals, and voluntary groups such as sporting and recreational. Adults may not be conscious that they are learning in such settings. Those involved in
provision of such settings may be equally unconscious. I further reflected the potential if learning by adults in these settings was conscious and facilitated.

Adapting McGivney (1999: v) and based on my interpretation of the Goulburn project, I suggest that the acquisition of everyday knowledge in community settings arises from a need or interest of the learner that is facilitated by professional engagement, for example by a social worker or health worker; and/or met from collaboration with other learners in a group sharing a similar need or interest. Learning may not be the explicit intention and the learner may not see themselves in this role. Nonetheless, the expectation and often the result is one of improvement in meeting the need or interest. This is from sharing experiences and from acquiring knowledge and skills from doing. Experiential learning in everyday settings combines knowing and doing. Abstract learning in school tends to separate them as I discuss below.

*The playgroup*

I was expecting to hear about child learning when the playgroup commenced in April 2003. Instead I heard about adult learning. As I reflected with Goulburn Family, ‘[t]he children were learning [in the playgroup] but the adults were learning more’ (post-project transcript 11 February 2004). The playgroup brought together adults unrelated by family in contrast to therapeutic engagement and whose common interest was prior participation in therapeutic
engagement and the activities of the playgroup.

As mentioned in chapter 3, the playgroup builds on and reinforces the relationship skills gained in therapeutic engagement. It provides a learning setting for acquiring additional life skills. These are play skills — learning about play and how to play with children — health, nutrition and cooking, and citizenship skills (transcripts 16 September 2003 and 8 July 2003). It demonstrates the capacity of acquiring relatively advanced skills such as citizenship in a relatively short period.

McGivney (1998: 44-46) describes a study of a preschool in the UK. Like the experience at the Goulburn Family affiliated playgroup, the study indicated that there were positive learning outcomes for adults involved in preschools, especially for first time parents with few qualifications and limited employment experience and for those geographically and socially isolated. Parents sought social interaction and to become part of the local community. Joining a pre-school allowed them to do so. Involvement increased the confidence of parents in their parenting role by sharing experiences with others that they were not alone in problems they faced; and by observing and interacting with a group of children developing at different speeds. Many parents in the study learned to organise, structure and manage play and learned to understand their children through play; this allowed them in turn to stimulate their own children in more creative ways at home and thereby improve relationships with them.
Learning in schools

Learning in therapeutic engagement was consistent with one part of my original assumption that learning life skills takes place in community institutions. I wanted to find out if the other part of my assumption that learning life skills takes place in school was valid. The principal of a primary school located in a suburb ranked by the council as the most deprived in its city commented that teachers were battling to teach the curriculum when social issues of children were so overwhelming:

We had a lot of conversations here at this school with staff and family about achievement levels — literacy, numeracy, high level subjects on the basis that we have to focus on the academic but if you had that conversation with teachers, they asked how do you behaviour manage crises at school, crises at home, families in chaos. You spend the day mopping up the social issues and the dysfunction in the home, mopping up the kids so that can actually do some learning (interview 27 November 2002).

Schools assume that ‘children have acquired the cognitive and social interactive styles found most often in the mainstream group’ by the time they start school. Based on this assumption, children outside this mainstream group may acquire significant learning difficulties ‘even though they may be quite capable of building the equivalent knowledge if developmentally and culturally appropriate learning experiences [are] available to them’ (Keating 1996: 164-165).

Schools stress the cognitive — learning without feeling (Rogers 1974: 105) —
but the emotional dimension is also crucial: ‘how the situation is experienced, what sort of feelings and motivations are involved, and thus the nature and strength of the mental energy involved’ (Illeris 2003: 401). In school, ‘the greatest premium is placed on “pure thought” activities — what individuals can do without the external support of books and notes, calculators, or other outside instruments’. Even if permitted on occasions, these media are excluded from examinations (Resnick 1987: 13). Schools provide little opportunity for discourse (Keating 1996: 166) or indeed dialogue and didactics. There is no provision for linking the emotional and the cognitive, the everyday and the abstract:

…schooling focuses on the individual’s performance, whereas out-of-school mental work is socially shared. Schooling aims to foster unaided thought, whereas mental work outside school usually involves [access to and use of a range of] cognitive tools. School cultivates symbolic thinking, whereas mental activity outside school engages directly with objects and situations [such as events]. Finally, schooling aims to teach general skills and knowledge, whereas situation-specific competencies dominate outside (Resnick 1987: 16).

I reflected from this that learning life skills is not a focus of schools; that the school curriculum is ill-equipped for adult experiential learning; and that schools assume instead that everyday life skills of adults and children are provided in the home by families and therefore such learning is not required to be provided at school. Generally this is the case. However, families with harmful behaviours provide little or no learning in life skills. Their children are expected by schools to acquire abstract knowledge and skills without everyday knowledge and skills. In failing to do so, such children in their frustration disrupt the learning of themselves and others. I reflected that facilitating life
skills of adult and sometimes child members of the family by Goulburn Family is complementary to the role played by schools in teaching abstract knowledge and skills to children, since children come to school better equipped with everyday life skills allowing teachers to focus on their traditional role of teaching abstract skills.

Professional learning

My research question had focused on learning by families. I found though learning also occurring by workers in therapeutic engagement; and in reflective practice, research and the literature with other workers, with and without my presence as researcher and facilitator; and that this learning led to continuing adjustment of their practice framework. I also found workers explicit about their own learning and that of the organisation but implicit about the client learning in therapeutic engagement. I came to be struck by similarities in learning of clients and workers. Common to both was the abilities of adult learners, reflective learning, transformative learning, narrative, and somatic learning. For example, it was common for workers to tell stories to me as it was for clients to tell stories to workers and for workers to use learning tools with each other as it was for workers to use learning tools with clients. Observation, reflection, conceptualisation, and experimentation were common to both engagements. Discourse, dialogue, dialectics, and didactics were common to both: the exchange of information, exchange of thoughts and ideas from it, argumentation, and instruction. The difference was that the
engagement between client and worker was more at the everyday level whilst the engagement between the workers was more at the abstract level. This in turn meant a higher degree of reflection and dialectics.

**Practice reflection and transformation**

I came to be aware that the context of the form of engagement I had with the workers was principally one of reflective practice (Merriam & Caffarella 1999: 232). I found workers at Goulburn Family reflected regularly as a group, and once a month with their supervising psychologist from a medical centre in Goulburn. My visits during the project augmented and deepened this reflective practice. I facilitated the workers in making explicit implicit areas of their practice as their practice expanded in content and scale. This facilitation was assisted by a continuing review of the literature as the project progressed, as the results of explicit practice accumulated and reflection deepened, and in my own reflection after completion of the project. In this process, the workers provided information; I provided additional information gained from my own reflections and from the literature; I challenged their information in the light of this; the workers acquired additional skills in reflection thereby gaining additional capacity to act; and they planned, acted and reflected on their actions.

I came to distinguish between client reflection and worker or practice reflection. I have already observed one distinction: client learning is principally
of the everyday and worker learning is principally of the abstract. It seems to me another difference is the *foreknowledge* of and *commitment* to a process of engagement by the worker in practice reflection. For (Merriam & Caffarella 1999: 233), reflective practice assumes that practitioners are committed to problem finding and problem solving, with openness to discovering new problems and to looking at old problems in different ways. It involves making judgments on actions to take and changes to be made and therefore there is a moral dimension. And it involves taking or not taking action in practice. It seems to me too that workers at Goulburn Family were much more consciously and critically identifying and examining their underlying assumptions: ‘to look at what we do from as many angles as possible … to stand outside ourselves and see how some of our most deeply held values and beliefs lead us into distorted and constrained ways of being’ (Merriam & Caffarella 1999: 233).

These angles are our autobiographies as practitioners and learners, how [clients] see us, how colleagues perceive us, and the theoretical literature which ‘can help us understand our experience by naming it in different ways’ (Brookfield 1995: 28-30). Workers too may build the capacity to, as Bateson (1994: 30-31) puts it, revisit reflective practice: that ‘lessons too complex to grasp in a single occurrence spiral past again and again’, that ‘events that were ambiguous, mysterious, incomplete [and] once barely intelligible may be deeply meaningful a second time … and a third’.

Workers may also build a greater capacity in reflecting *in* action and reflecting *on* reflection in action, with, as Freidman and Sykes (2001: 158) distinguish it, the former covering immersion in and reflection of each practice event and
through questioning its reframing; and the latter covering the accumulation of all these practice events, differentiating and terming patterns from these events, identifying the theories that explain each of these patterns, identifying and naming the concepts from these patterns and theories, and identifying and filling the gaps.

Worker reflection may go so far as transforming the practice in line with Mezirow (1991: 161, 168). I observed the deliberative, liberating and transpersonal orientations of reflective practice at Goulburn Family. I was able to do so from identifying level five of the five degrees of orientation by workers to reflective practice that Wellington and Austin (1996: 308-314) distinguish. The immediate orientation focuses on survival without reflective practice. The technical orientation uses reflective practice as an instrument of direct practice within predetermined guidelines and standards. The deliberative orientation ‘places emphasis on the discovery, assignment and assessment of personal meaning within an education setting’. The dialectic orientation ‘involves continual questioning, revision and internal validation … of ends, contents, and means’. The liberating orientation is dialectical and questions ends and means of education from a personal perspective.

**Dialectics**

Dialectics was evident in reflective practice at Goulburn Family. It was perhaps a somewhat gentler form of what Kemmis and McTaggart (2000: 598)
characterise as ‘people deliberately set[ting] out to contest and reconstitute irrational, unproductive (or inefficient), unjust, and/or unsatisfying (alienating) ways of interpreting their world … ways of working … and ways of relating to others’. Dialectics at Goulburn Family involves logical argumentation. It assumes people, organisations, events and activities are connected to each other; that these objects and connections change; that there are contradictions in the objects and connections; and that we understand them when we have identified these objects and contradictions. Dialectics draws on information and interpretations of an event or activity, its context, the history of the event or activity, the change that has taken place, and future developments in the event or activity. This information and interpretations served as a basis for dialogue and detecting and comparing differences in interpretations and contradictions such as ‘dilemmas, disagreements, inconsistencies, tensions and conflicts of interest’ (Winter and Munn-Giddings 2001b: 214, 248).

**Animation**

I found Miller and Boud’s (1996: 7-8) use of the term ‘animation’ appropriate to the description workers gave of engagement with the client. For them, animation means ‘to give life to, to quicken, to vivify, to enliven, to inspire, to encourage, to activate or to put into motion’. Animators provide ‘a context and space to learn, give support and encouragement, listen to the learner and provide access to particular devices which may be of use. They may also at times act as a sounding board and help the learner clarify intentions and set goals. Of course, all this must be in the context of the learner’s needs and
interests’ (Boud et al. 1985: 38). Much learning takes place through its animation by others: parents, caregivers and friends; and teachers, therapists, and other professionals. In some animation, the promotion of learning is strong such as parents, teachers and therapists and in other facilitation it may be weak such as friends (Miller and Boud 1996: 4).

**Learning organisation**

Goulburn Family described themselves as a learning organisation. By this, they mean applying in their practice the guidelines or principles of operation documented when they commenced as an agency. These guidelines include ‘practice based on research and facts’; entitlement to information to do the job; entitlement to professional/clinical supervision; and keeping a library of research materials (transcript 30 September 2003).

I found two further forms of this at Goulburn Family: replication and scaling of the practice framework within and beyond the practice; and adjustment and application of learning to community work and policy work (transcript 30 September 2003). I subsequently reflected that Goulburn Family’s practice as a learning organisation is one to the extent that its clients are learning practice and theory; its workers and support staff are learning practice and theory in engagement with clients and with other workers and staff; and that its principles and the accumulated learning by clients and workers of process and content is constructed and documented in the form of a framework for
reflection and adjustment, for replication within the organisation — for instance, with new workers — and for explanation and advocacy in the wider community and in policy work.

I found, like Easterby-Smith and Araujo (1999: 1-2), that the literature on learning in organisations is conceptually fragmented. This has come from rapid growth of the concept and from many contributors drawn from other fields with little prior interest in learning, some with commercial outcomes in mind (Easterby-Smith and Araujo 1999: 1-2). I found that the concept of learning in the literature on learning organisations, in those instances where the concept was defined and discussed, largely replicated the concept of adult learning without substantially adding an organisational learning distinctiveness to it.

The literature did though allow me to extend the distinction I had made between the human and technical in client engagement in learning in organisations. Easterby-Smith and Araujo (1999: 4–6) make a distinction between the social and technical interpretations of learning in organisations. They describe a social perspective of learning in organisations. This is one in which ‘people make sense of their experiences at work’. Learning emerges from social interactions and social construction. Social interactions take place within an organisational culture that influences the way workers behave towards each other. Social interactions also take place within a political process whereby ‘particular interpretations will suit the interests of some and harm the interests of others’, especially when it comes to presenting the organisation to
Those outside the organisation. Easterby-Smith and Araujo (1999: 3-4) describe the technical perspective of learning in organisations as one of processing, interpreting and responding to information, internal and external to the organisation, and one that is separate from meaning and behaviours. Issues that emerge from a technical perspective are those that people do not always respond to rationally and that this perspective does not take account of the political process. The combination of the human and technical produces a cultural, structural and leadership capacity of an organisation to learn that takes the form, for example, of the capacity for dialogue (Finger and Brand 1999: 150-151).

The literature appears sparse on replication. Scott (2000: 1, 3) is an exception. She describes the concept of ‘going to scale’ or transplanting models to other communities. This is a form of ‘“micro community building” … interventions aimed at developing natural helping networks around families’ at the local level. Scott (transcript 25 June 2002) describes a four-step process of ‘going to scale’:

…identify priorities and become a partner in testing out an innovative approach to an issue such as salinity, indigenous, child health and so on; build in internal and external evaluation; disseminate the learnings from that; and go to scale across a service system and help bed down system reform so best practice does not remain standalone.

I had been struck by Goulburn Family’s observation that a strong dominating leader was seen as inconsistent with its goals, principles and behaviours.
(transcript 30 September 2003) underpinning its practice and therefore its practice might not be easily replicated in organisations characterised by such leadership. The literature tends to support this: that power and oppression reduce the capacity of learning within an organisation: ‘…the biggest gains come when leaders … model tolerance for diverse views [and] willingness to take risks (Marsick et al. 2000: 17). People must feel free from coercion (Mezirow 1997: 10). They must feel it safe to contribute to a group: to have their ideas valued and respected, whether or not these ideas are adopted by the group (Ewart & Grace 2000: 337). Power and oppression may occur through manipulation and distortion of communication in a group (Boud & Miller 1996: 20); through language used in agendas that excludes competing agendas; through statements produced external to the group such as missions, visions, strategies, and learning objectives, and externally organised training in which learners have had no prior input (Owenby 2002: 54); and in terms of gender and ethnicity (Boud and Miller 1996: 20). This allowed me to reflect that the practice was likely to be replicable when the focus was on the social and the human but was unlikely to be replicable when the focus of an authoritarian organisation was on the rational and the technical.

A framework of learning everyday life skills

The discourse so far has related to the process of learning. I also wanted to find out what forms life skills take. This section focuses on content of learning everyday life skills by adults. My original assumption that families acquire
fulfilling behaviours by acquiring life skills appears to be confirmed. I also found that relationship skills are foundation skills that assist in acquisition of other life skills; that acquisition of everyday life skills is accompanied by acquisition of everyday life roles and of abstract skills; and these acquisitions accelerate the scope for acquiring more advanced abstract skills to allow scope by the family and its members for leading more deeply meaningful and fulfilling lives. Finally, I found these acquisitions flow through from adult to child members of the family.

The discourse at Goulburn Family was primarily about adults acquiring life skills for themselves and adults then facilitating acquisition by their children, more than about children acquiring them directly from Goulburn Family. Adult clients of Goulburn Family learn to acquire relationship skills. Further, a number of them who are mothers learn to strengthen relationship skills gained in prior therapeutic engagement and extend these skills beyond the family to other mothers in the playgroup, strangers who became acquaintances and in some cases friends. In addition, they learn play skills, cooking skills and citizenship skills.

I investigated the literature to find that the term, life skills, is rarely defined. Schmidt et al. (1988: 113) seem almost dismissive in saying that ‘the term “life skills” is so simple that it is almost self-defining’. Instead, an eclectic mix of life skills is usually provided. Often this mix relates to population subsets such as mental and physical illness and disability or preparation for job training
rather than to the general population. For example, the job training literature often assumes people are already life-ready to be made job-ready by training them. Some of the literature focuses on deficits rather than on assets. Some borders on the marginal, exhortational, high-minded, and incredulous. For example, ‘many homeless people have never had the opportunity or the need to go through the job application process … some do not know proper dining etiquette’ (Wong and Mason 2001: 477-478); ‘[the eating skills] program stresses that mealtime should be a happy gathering where everyone displays socially acceptable eating skills’ (Haugen 1994); and ‘it is high time for counsellors and therapists to put client skills and human being skills at centre stage’ (Nelson-Jones 2002: 115).

Life skills are rarely differentiated between ends and means. Wichroski et al. (2000: 285) identify: self-esteem, social support, food and nutrition, money management and work and family without suggesting that self-esteem is a means and the others are ends. Often and in addition, an eclectic mix of ends and means in the literature is presented without explanation, linkage, framing and context. I have separated life skills into ends and means in the next two examples to illustrate the possibilities of such construction though this separation does not appear in the original references. Christopher et al. (2001: 137) report the results of a study on a family empowerment project that focused on life skills. The project identified the ends of family skills and parenting, nutrition, budgeting and money management, and job-readiness skills without defining what these skills are. Thurston (2002: 316) reports another study on a life skills management program for at risk youth. The
program identifies a list of life skills. The list includes ends: health, money and work. Health includes nutrition, dieting and ‘emotional health’. Work includes finding a job, self-assessment and interviewing as well as an exhortation of ‘working hard’. The list includes means: respecting self and others, communication with others, planning and reaching goals, reflection, and legal rights and responsibilities. Communication includes listening and body language. Respecting self and others includes strengths, assertive communication, individual strengths and ‘team building’.

To respond to these issues, I define life skills as those necessary by family members to undertake a fulfilling everyday life within their family and community. I construct a framework of the content of everyday life skills from my observations of the Goulburn Family practice; from the reflections of its workers from sharing with them these observations as the framework was progressively constructed; and from the little that was available in the literature on everyday life skills. I represent these everyday life skills in the form of a table, followed by explanations of a number of them.

The construction is based on separating ends and means in everyday life activities. The ends are practical skills in performing activities for a fulfilling everyday life. The means are abstract skills in performing these activities. Many of these abstract skills gained in one activity may be applied generically to other everyday life activities. Many of these abstract skills may also be applied to abstract activities. I have grouped in the table skills that otherwise
appear in the literature as lists of ungrouped skills, for example, self-esteem and social support as subsets of relationship skills. I have identified roles against each end skill and generic skills that are created in learning practical skills. This framework, explained in detail below, sees parenting as a role rather than skill of adults in transmitting practical and abstract skills, and related roles, for developing the child.

Nelson-Jones (2002: 167) suggests benefits in framing skills: the capacity of the therapist to identify appropriate skills to ‘function effectively’ and ‘a self-help framework for monitoring, improving and, where necessary, self-correcting how well they use their … skills’. I suggest additional benefits. Defining a life skills framework and language assists families presenting to identify in therapeutic engagement what applied skills they have, what misapplied skills they can reapply, and what skills they can potentially acquire within the context of their needs, interests, strengths and resources, described in chapter 4.1.
Table 4: A framework of the content of everyday life skills

<table>
<thead>
<tr>
<th>Everyday life activities</th>
<th>Specific end skills</th>
<th>Role</th>
<th>Generic means skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationships</td>
<td>Intimacy</td>
<td>Partner, parent</td>
<td>Affects, feelings and emotions</td>
</tr>
<tr>
<td></td>
<td>Sexuality</td>
<td>Lover</td>
<td>Oral literacy and communication</td>
</tr>
<tr>
<td></td>
<td>Peer group</td>
<td>Friend, acquaintance</td>
<td>Planning, acting and reflecting</td>
</tr>
<tr>
<td>Recreational</td>
<td>Play, leisure and recreation</td>
<td>Player</td>
<td></td>
</tr>
<tr>
<td>Physical &amp; mental health</td>
<td>Cooking, nutrition, exercise, sleep</td>
<td>Cook</td>
<td>Structure and organisation</td>
</tr>
<tr>
<td></td>
<td>Safety from illness and injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home maintenance</td>
<td>Cleaning and laundry</td>
<td>Cleaner</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Maintenance</td>
<td>Maintainer</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Repairs</td>
<td>Repairer</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Garden</td>
<td>Gardener</td>
<td></td>
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<tr>
<td></td>
<td>Car</td>
<td>Driver</td>
<td></td>
</tr>
<tr>
<td>Transactional</td>
<td>Budgeting</td>
<td>Financier</td>
<td>Financial</td>
</tr>
<tr>
<td></td>
<td>Negotiating with agencies</td>
<td>Negotiator</td>
<td>Negotiation</td>
</tr>
<tr>
<td>Citizenship</td>
<td>Citizen</td>
<td>Advocate</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Teamwork</td>
</tr>
<tr>
<td>Learning</td>
<td>Learning to learn</td>
<td>Learner</td>
<td>Literacy and numeracy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Detaching knowing from doing</td>
</tr>
<tr>
<td>Vocational</td>
<td>Volunteering — unpaid</td>
<td>Volunteer</td>
<td>Problem solving</td>
</tr>
<tr>
<td></td>
<td>Working — paid</td>
<td>Worker</td>
<td></td>
</tr>
</tbody>
</table>

This table lists eight forms of activities performed by individuals and families.
in everyday life. These are relationships, recreational, physical and mental health, home and car maintenance, transactional, citizenship, learning, and vocational. Relationships are more human than technical skills, recreational and citizenship skills may be human and technical, and other skills are more technical than human. The framework relates to acquisition, maintenance and improvement of these everyday life activities. Skills take two forms: skills specific to performing the end task and skills acquired in learning these tasks that can then be applied to other everyday life activities and to abstract life. Each of the end skills is performed within a role; thus intimacy as a partner and parent, and learning to learn as a learner. Making explicit the inventory of roles and of abstract skills in this way provides extended foundations for facilitating the acquisition of more advanced abstract skills so that adults may participate more fully in abstract life; with a beneficial flow through to their children. The repertoire of everyday life skills builds generic skills that have application in work life. Everyday life skills make people life ready so that, in the economic imperative of the times, they can be made job ready.

**Relationship skills**

Relationships skills embrace affects and behaviours and thus converge with Goulburn Family’s focus on relationships, behaviours and affects bringing about change. Relationship skills provide a foundation for learning other life skills since few tasks are performed without varying degrees of emotional contact and interchange with other people that allow or inhibit performance of that task. Relationship skills are acquired in a family context at Goulburn
Family of related members since this is where relationships are usually at their most intense. Other skills are acquired in groupwork made up of members usually unrelated by family.

The family is an ideal setting for learning relationship skills. Relationships are usually more intense than those outside. Learning within the family assists in relationships between adult members and in supporting each other. Learning allows adult members in turn to act in the role model for children (Schuller et al. 2002: 79-80) in relationships. And learning allows adult and child members to use these relationship skills in social contact outside the family. On the other hand, a low level of understanding of relationships from a low level of learning in the family may lead to negative affects and harmful behaviours.

Research and practice tend to focus on the technical rather then on the human, on the pathological rather than the emotional. Chapter 3 described nurses of one agency teaching mothers the technical skills to express milk, but also reporting their concern about wider behavioural issues of mothers struggling over parenting children. (Halford 2000: 55) suggests, in keeping with this, that parenting programs often are restricted to the antenatal and childbirth itself. Impact and adjustment, for example, in couple relationships does not generally form part of these programs.

Halford (2000: 32) draws on research on couple satisfaction to suggest five
components of relationship skills: communication and conflict management; mutual support; relation expectations and goals; gender role flexibility; and affections and intimacy. (Manor 2000: 290) observes that the worker in therapeutic engagement models relationship skills to the learner in listening, showing respect, sharing feelings, empathy and being specific.

Recreational skills

Adult clients at the Goulburn Family affiliated playgroup learn how to play with children; and the children learn to play with each other, with their mothers and with other adults in the playgroup (transcripts 16 September 2003 and 8 July 2003). Play skills reinforce relationship skills: play is a means of meeting people, making friends and building social relationships. And play is fun and enjoyable (Lillemyr et al. 2001:12). Play has benefits for adults whose childhood was marked by a low engagement in play activities. Play has benefits for children because the pace of their cognitive development exceeds their pace of language development. Children use the medium of play as adults use the medium of speech for self-fulfilment — to explore relationships, express feelings, describe experiences, and disclose desires. Play allows children to enter a world of pretence and fantasy. This enables them to express themselves through feelings and reactions, and resolve and distance themselves from traumatic experiences and events (Landreth and Bratton 1999). Cognitive development through play builds long-term capacities of metacognition, social cognition, and problem solving. Structured play enhances these skills and builds self-regulation. Rich forms of structured play build language and
narrative and build literacy and numeracy skills that extend them into adulthood (Bergen 2002). Children may be introduced to structured play through games with rules where they learn social skills of shared activities, negotiating and reasoning skills and criteria for selection of players and the winner, organising and competition skills, numeracy skills, social affirmation in selecting and being selected as team mates (Fernie 1988).

Physical and mental health skills

Clients in the Goulburn Family affiliated playgroup learn physical and mental health skills. Community health workers visit the Goulburn Family playgroup and teach baby, child and maternal health and hygiene. These workers also take back referrals. The clients prepare lunch together and thereby learn about cooking and nutrition for adults and children (transcript 8 July 2003). Learning assists in sustaining physical and mental health and in pre-empting or recovery from ill health. Again this reinforces and builds relationship skills by providing personal autonomy, self-direction, self-esteem and an active life (Schuller et al 2002: 80-81).
**Transactional skills**

Part of the casework of Goulburn Family is provision of budgeting and negotiating skills. For example:

> Clients might come in with a budgeting or account problem like the guy who came [this morning] about the gas bill (transcript 22 October 2002).

> We helped [a client] write a statement that he wanted to read out in court. When he went down to the court, the magistrate said: don’t you read it out, I’ll read it. The magistrate looked at it and said: you really are trying, aren’t you? (transcript 4 March 2003).

> …you … skilled them up in negotiating by themselves to go to the court or go to the agency or go to the housing department and so on — on their own or maybe go hand in hand on some occasions (transcript 16 September 2003).

**Citizenship skills**

Clients of the playgroup acquired advocacy and teamwork skills to gain better public transport for their areas. The workers held workshops with the mothers. A local government councillor and a senior member of staff attended a presentation by the mothers and to arrange transport to attend a council meeting to advocate better public transport (transcript 16 September 2003).

This playgroup experience relates to the concept of citizen participation.
Citizen participation describes three types of activity: community development, social planning, and social action. Community development involves organising residents to create the capacity to improve their situation such as health, education, housing and infrastructure. Social planning involves residents working with data and information to prepare plans. Social action involves residents influencing institutions to change policies and practices and redistribute resources (Baum 2001: 1841-1842). Citizen participation develops the individual as a citizen-raising self-esteem, contributing to self growth, developing relationships and support networks, contributing to knowledge and problem solving, information, representation, organising and conflict skills, and gaining more control over their circumstances (Baum 2001: 1842, 1844). Learning assists in accessing, participating in and contributing to the community through networks and engagement in services and resources of the community, reinforcing and contributing to the identity, belongingness and citizenship of the person; understanding the perspective of others; and reinforcing or changing their own values. Engaging in a structured activity such as learning and in a setting other than the home supports development of participation. Learning may include basic skills of participation, generic skills to assist in community positions, and meta-skills to assist people understand ‘the system and networks within which they operate’. A common form of community participation is a parent volunteering in the activities of the child’s school (Schuller et al 2002: iv-v, viii, 81-82).
Learning skills

Learning skills relate to learning process and content. Both have been set out in this chapter. The acquisition of learning skills by adults has a number of direct and indirect benefits. Learning allows adult members to act as role model learners for their children; as parents coming to ‘value their own children’s learning more highly, to understand what their children are engaged in at school and to support them in it’; and consequently in the educational achievement of their children; and in children helping their parents to learn (Schuller et al 2002: 79-80).

Vocational skills

A school in Queensland has a parent population similar that of Goulburn Family. It encourages participation of parents in school activities. One of them was volunteering in the tuckshop. Six of the mothers had gained vocational skills in this setting sufficient for them to go on to paid employment. The school also runs computer sessions for parents in the afternoon (interview 27 November 2002).

4.3 Professional engagement in the community

Chapter 4.3 examines one of the seven components of the research question identified in chapter 2.1, namely professional engagement, in this case in the
community. Professional engagement in the family is examined in chapter 4.2. I wanted to find out what forms of professional engagement assist in formation of life skills, in addition to therapeutic engagement and the playschool of Goulburn Family. I found that Goulburn Family is also involved in casework, interagency collaboration, and capacity building within the context of the community; and that these, matched with the capacity building of families and community institutions, have synergistic outcomes for families and communities. I found support for these empirical findings in the literature: that casework is focused on the family and that interagency collaboration is focused on constructing and maintaining complementary client services. These forms of professional engagement occur because a client presenting with multiple family problems may require multiple providers of engagement and in turn multiple organisational issues (Unger and Sussman 1990: 8).

**Values and relationships**

The practice of Goulburn Family progressively expanded within the community during the year long project to embrace welfare agencies, schools, health services, housing, police, magistrates, juvenile justice, and prison. I reflected from this expansion on a sense of community of Goulburn Family:

… [a] perception of similarity with others, an acknowledged interdependence with others, a willingness to maintain this interdependence by giving to or doing for others what one expects from them, the feeling that one is part of a larger dependable and stable structure (Sarason 1977: 157).
This expansion was underpinned by values, expressed in the form of principles that are described in chapter 3 and which Goulburn Family seek to extend to the community. Etzioni (2000: 191-192; 1996: 127) describes communities as committed to ‘a set of shared values, norms, and meanings, and [to] a shared history of identity — in short to a particular culture’. These values come from a dialogue of community members that go beyond facts, logic, reasoning, rational exchanges, and the law and regulations. They become a basis of prescriptive behaviours of what is to be done and not done. This expansion was underpinned by relationships, behaviours and affects that resonate with those of families. Communities are characterised by a ‘web of affect-laden relationships among a group of individuals’ which ‘often criss-cross and reinforce one another’ (Etzioni 1996: 127).

**Casework**

Goulburn Family’s casework involves clients referred by other agencies for therapeutic engagement and for referral of clients to other agencies for complementary support provisions. For example, Goulburn Family arranges basic physical needs such as food, shelter and clothing through casework with community institutions providing these needs and other community institutions refer clients with relationship needs to Goulburn Family.

Scott (2003a: 20; 2003b) distinguishes between casework and case management. Casework is the relationship between worker and client and ‘the vehicle through which the intervention is delivered’ and ‘hope is engendered’.
It deals with the state of mind and the state of affairs of the client as well as services (Scott 2003a: 20; 2003b). Case management coordinates these services. It works ‘at the interface between various services and between the services and the client/family to ensure that an integrated service is received, without gaps and without duplications and with key people communicating effectively with one another’ (Scott 2003a: 20; 2003b). Case management provides a single point of service for clients. It benefits the client in otherwise navigating through complexities and barriers of eligibility of multiple services (Ooms et al. 1992: 5). It benefits community institutions and policy programs in allocating scarce resources (Ooms et al. 1992: 5); a mismatch of services selected by the client in the absence of interagency collaboration may result in unintended duplication and misuse of resources (Waldfogel 1997: 467-468).

**Interagency collaboration**

Interagency collaboration takes case management one-step further to address clusters of family issues (Voydanoff 1995: 64 citing Morrill and Gerry 1990) common across community institutions within a community. Goulburn Family workers, with just such a purpose, meet regularly with other agencies on a one-on-one basis, are member of committees of agencies within and beyond Goulburn, and are engaged with local government in developing a social plan. Interagency collaboration is assisted when common values of family over professional practices and programs are emphasised (Walter and Petr 2000: 496-497). Interagency collaboration is enhanced by setting issues within an ecological framework that takes account of multiple levels of influence on families. Individual problems impact on relationships with other family
members within the microsystem of family. Poorly resourced schools and unsafe neighbourhoods impact on families within the mesosystem. Difficulties in access to health and social services and to employment impact on families at the exosystem level. And norms of abuse and violence impact on families at the macrosystem level (Voydanoff 1995: 64 citing Morrill and Gerry 1990). Interagency collaboration may extend to supporting clients identify services who are otherwise daunted by lack of information about them, by seemingly conflicting eligibility requirements, and/or by absence of child care and transport for accessing them. It may go so far as identifying clients that would not otherwise present, because those who need a range of services to meet their needs are often the least capable of identifying and accessing them (Waldfogel 1997: 467).

**Capacity building**

Interagency collaboration may extend further to capacity building, to building new and reconfigured services and eliminating others that overlap so resources available to support clients increase. The playgroup was established by Goulburn Family and another community institution in Goulburn in this way. Capacity building for action just by communities complements and strengthens capacity for action by families. Capacity building is a conscious and synergistic change (Miles and Ralston 2002: 12). It involves ‘acquiring and using knowledge and skills, building on assets and strengths, respecting diversity, responding to change, and creating the future’ (Anderson and Nickols 2001: 9). Miles and Ralston (2002: 12) posit a sequential five-step process for capacity building. Firstly, it is constructing an inventory of knowledge, skills and
strengths. Secondly, it is determining values, gaps and therefore needs. Thirdly, it is developing a preferred future that matches these values and needs. Fourthly, it is determining the goals, activities, resources and means of assessing achievement so that results are by design rather than default; and by priority setting so that some activities may be new, others reconfigured and others still left behind. And fifthly, it is then assessing whether these goals and activities have been achieved.

4.4 The knowledge society

Chapter 4.4 examines one of the seven components of the research question identified in chapter 2.1, namely the knowledge society. I wanted to find out what the characteristics of an emerging society are, that is sometimes referred to as a ‘post’ society and at other times is referred to as an information, learning, or knowledge society. I wanted to confirm or reject my assumptions that knowledge was becoming central to society to the extent that it justified the use of the term ‘the knowledge society’; and that acquisition of everyday and abstract knowledge and skills allows greater participation and fulfilment by families in a knowledge intensive society. I found that a central organising principle may define a society and that knowledge is emerging as this core organising principle (Bohme 1997: 449-450). I found that knowledge represents the capacity for action (Stehr 1994). I found too that acquisition of knowledge and skills by adults is restricted by access such as entry and eligibility requirements of and by availability of provision by community institutions. Yet without access, the life chances of adults diminish (Stehr
2001b: 497). I reflect that Goulburn Family provides a first point of access by adults to learning everyday life skills where the opportunity has not previously been available to the family. I reflect from chapter 4.2 that Goulburn Family is drawing out latent abilities such as observation, reflection, conceptualisation, and experimentation as well as a rich array of other reserves of the client. I reflect too that abstract knowledge gained from everyday life activities and roles, if made explicit, may assist acquisition of and access to advanced abstract knowledge.

A ‘post’ society

There is a sense of epochal transition in increasing use of the prefix of ‘post’, as in, for example, a ‘postmodern’ and ‘post-industrial’ society (Bohme 1997: 449-450; Stacey 1990: 18). This transition is the latest in a historical sequence (Delanty 2001: 20-21, 27-28, 42, 102, 104, 109-110). Each shift leads to major social change. This social change comes from routines disrupted and orientations displaced (Stehr 1994: 6). Emergence of societies is as gradual as their demise so that they become apparent only after the transition is over (Stehr 2001: 495). ‘Post’ lacks, however, the fullness of definition (Stacey 1990: 18).
Core organising principle

An alternative to describing a society in terms of a historical transition is describing it in terms of a core organising principle (Bohme 1997: 449-450). Thus, the industrial society signifies productive work and labour. Designations of the emerging society include information, learning, and knowledge. Such designations also represent the sequence of a process where information is transformed into knowledge by learning. Learning is ‘the process of creating knowledge’ (Kolb 1984: 36). Learning and information are means to an end of acquiring knowledge. Knowledge becomes the source of life chances. A person’s social status ‘in [a] knowledge society is largely dependent upon the level of his or her education’ (Bohme 1997: 463-464). Stehr (1994: 6) describes the ‘emerging form of society as a “knowledge” society because the constitutive mechanism or the identity of society is increasingly driven by “knowledge”’. The constitutive mechanism is similar to the core organising principle of Bohme (1997: 449-450).

There is little scholarly literature on the knowledge society in contrast to the use of the term by intergovernmental bodies such as the United Nations Educational, Scientific and Cultural Organization (e.g. 2003), the Organisation for Economic Co-operation and Development (e.g. 2001), The International Bank for Reconstruction and Development/The World Bank (e.g. 2002), and the European Union (e.g. The European Foundation for the Improvement of Living and Working Conditions 2003); and by a number of national governments such as Canada (e.g. Chrétien, Jean 2002), New Zealand (e.g.
New Zealand Ministry of Research, Science and Technology 2000), and Ireland (e.g. Information Society Commission 2002). However they tend to use the term ‘knowledge’ in a technical more then a human sense; the term ‘society’ as a basis of discourse on the economy and work more than life; and/or the term ‘economy’ as in ‘the knowledge economy’.

Knowledge as the core organising principle leads to a fundamental change in learning. Knowledge is no longer seen as just facts and facts are no longer seen as the final authority. Knowledge also embraces symbols, rules, meaning of facts, multiple perspectives, interests (Bohme 1997: 460-62) and values. Knowledge also means having more advanced knowledge (Bohme 1997: 462). This fundamental shift affects families and community institutions. Professional engagement with families exhibiting harmful behaviours may introduce them to knowledge in addition to facts. Goulburn Family does this by introducing clients to theory as well as practice, using symbolic tools such as the compass of shame to describe the meaning of theory so that the client may shift from a singular to multiple perspectives.

**Capacity for action**

The observation of the supervising psychologist of Goulburn Family was that the client is building capacity in therapeutic engagement ‘to do it themselves rather than having it done for them’ (transcript 14 May 2003). This is
congruent with Stehr’s (1994: 8, 95-99, 182-184; 2001a: 89; 2001b: 497) concept that knowledge is the capacity for action and the ability to act, not action itself. Knowledge may be left unused. If acted upon, knowledge sets an event in motion that in turn produces change. Those who act seek a marginal addition to their existing body of knowledge from accessing, interpreting, contextualising, reflecting and contesting knowledge of another actor. Actors may seek advice from experts and advisers for accessing, transmitting, interpreting, contextualising, reflecting, contesting and applying knowledge that in turn sets in motion a range of social and economic functions, actions, activities and knowledge-based occupations.

**Construction and relationships**

Clients of Goulburn Family construct their knowledge from giving information, receiving information, and entering into a dialogue. This dialogue is triggered by the information and tools provided by the client and the information provided by the worker so as to open up multiple perspectives. This allows the client to plan, act and to actively experiment and report back to the worker. This construction is of values, facts, and multiple perspectives. It is not only objective knowledge ‘as an external entity with an absolute value which can therefore be transferred from teacher to student’ (de Weert 1999: 53); it is also subjective knowledge:

…the objectivity of knowledge is in part located in the social networks, institutions and codes of practice built up by knowledge producers over time. It is these networks
Construction of knowledge extends to relationships as relationships are based on knowledge about each other (Stehr 2001: 90); for example, the knowledge of the Goulburn Family client and worker about each other from the exchange of information between each other. Social roles, social groups, social situations and social interaction are based on and mediated by knowledge (Stehr and Meja 2001: 128; Stehr 2001b: 495). Knowledge creates dependencies between people (Bohme 1997: 457). Construction of knowledge extends further to a relational concept between a sharing of the subject and an object. The subject knows the object or knows of the object. The subject has access to it, can orient himself/herself to the object and knows how to deal with it or enjoy it (Bohme 1997: 457). Knowledge is also a relational concept between reality and people. Knowledge is a way of participating in objects and situations and therefore participation in social relationships. And the reverse: objects, situations and therefore social relationships are given to us through knowledge (Bohme 2002: 201).

**Everyday and abstract knowledge**

Knowledge of everyday life for most people is more comprehensible and useful than scientific knowledge (Stehr 2001: 500 citing Merton 1973 [1942]). Knowledge is a bundle of social competencies for actions to master one’s life. Mastering one’s life is done by influencing for example one’s social relationships, health status, and financial wellbeing and the ability to ‘locate
and gain assistance to mastering these tasks’. Furthermore, Stehr states (1999: 58–59):

The ability to mobilize defiance, exploit discretion, develop strategies for coping and organize protection … are a significant part of such strategies [of influence and locating assistance] and therefore the conviction that one somehow is in charge and not merely the object of fortuitous circumstances.

Scientific knowledge is assumed to be ‘the final authority in establishing the facts’. However, ‘a question cannot be decided by scientific expertise’, only by ‘a reflection of the interest involved and [one that] underscores the respective viewpoint’ (Bohme 1997: 460 citing Nowotny 1979; original emphasis). Bohme (1997: 459–460) poses the question whether the dominance of scientific knowledge is excluding other forms of knowledge in terms of questions that cannot be resolved by scientific knowledge. This leads me to reflect that abstract knowledge gained from everyday life activities and roles, if made explicit, may complement, assist, and add to acquisition of advanced abstract knowledge.

**Expertise and contestation**

Acquisition of knowledge is necessary for families to negotiate with increasing scale and numbers of community institutions:

In private life, knowledge becomes the tool with which individuals negotiate the complexities of everyday life, from taxation (tax counsellors), to unfair labour practices (shop stewards and human resource personnel); from relationships
Knowledge is increasingly the basis of authority (Stehr 2001b: 497). Knowledge becomes contested subject to challenge and interpretation (Stehr 2001b: 498). Acquisition of knowledge and a commensurate increase in awareness of rights enhances the capacity of the individual to say no (Stehr 200b1: 494). The influence of institutions declines under these conditions and the influence of civil society increases (Stehr 200b1: 494). Events no longer just happen by institutions imposing their will, they are also made to happen (Stehr 2001b: 494 citing Lowe 1971: 563) by individuals and groups.

The inequality of knowledge

The present status of the knowledge society is characterised not only by a shortfall in everyday knowledge of many families and their members but also by ‘the gap between everyday and scientific knowledge’ (Bohme 1997: 459). Access to everyday and abstract knowledge is restricted to those community institutions that provide access to it by clients and make it available to clients. Goulburn Family provides a first point of access by adults to learning everyday life skills. Goulburn Family does this by drawing on under-used reserves of needs, interests, strengths and resources of the family and its members. It does this as a basis for learning by the client and thereby for the client to acquire everyday and abstract knowledge and in turn the capacity to act.
Life chances, lifestyle and the social influence of individuals ‘depend on access to the stock of knowledge at hand (Stehr 2001b: 497). These life chances include work. A distinguishing feature of the knowledge society from previous societies is the increasing number of occupations and professions involved in knowledge, and the decreasing demand for occupations requiring a low level of cognitive skills (Stehr 2001: 90). The physical components of the workforce are being replaced by intellectual, cultural and relational components (Silva and Smart 1999: 5-6). This in turn gives rise to new forms of social stratification and inequality (Stehr 1999: 54-60).

4.5 Policy framework for families and knowledge

Chapter 4.5 examines the final of the seven components of the research question identified in chapter 2.1: institutional practice and policy frameworks. I wanted to find out the extent to which the present policy context of Goulburn Family takes account of families learning life skills and what additional steps could be taken to assist them do so. I assumed adjustments in present public policies could assist agencies and schools in further supporting families to acquire life skills. I examine the policy process and content including the context of the context of the policy program of the principal funding department of Goulburn Family and convergences and divergences that in its interpretation and application. I construct from this and from the findings of chapter 3 and the preceding discussion of this chapter, a policy framework for families and knowledge. In examining policy process and content, I found
convergence between the decision-making level of the department and Goulburn Family in the application of policy. I found divergence in its interpretation between the local level of the department and Goulburn Family and divergences between the decision-making and implementation levels of the department. I describe these divergences below, and then indicate additional work that a community institution in a similar position to Goulburn Family might undertake to reduce these divergences over time. I do this on the basis that actors in policy are policymakers. Actors include professions, community institutions, community-based government institutions, government departments, politicians, and media. Each has available to them the means of identifying multiple perspectives of policy content and process; the capacity to identify; the current stage of the policy process cycle; and strategies and tools that can be used to influence policy over time.

The policy context of Goulburn Family

The principal funding department introduced a new contractual framework to the policy program that funds community institutions such as Goulburn Family. The introduction took place during the period of the action research project. Documentation of the department that related to its introduction is characterised by a range of family, community and policy work activities that can be undertaken by community institutions, and by a range of measures for community institutions to record and report performance of each activity.
I found convergence and divergence in the program of the department and the practice of Goulburn Family. The framework of practice activities of the department is congruent with the practice of Goulburn Family, namely family work, community work, and policy work. Details of these three forms of work are provided below. The framework is so comprehensive that it suggests activities in which Goulburn Family is not presently engaged but might by logical extension undertake in due course. I also found a degree of absence of clarity leading to a variety of interpretations. Terminology of content and process is undefined, values and assumptions of the program are unarticulated, and time to change and develop from one state to another is largely unstated. Activities relate to means rather than ends, of services rather than life activity needs of the family. I was only able to identify one end, namely relationships. But its meaning appears to relate to the child rather than the family. The program did not extend in detail to recognising related programs of the department, nor drawing on Bogenschneider (2000: 1137–1138, 1152), policies of other departments that impact on the family and on this program. Bogenschneider distinguishes between family policy where the focus is on family creation, child rearing and care giving and a family perspective of policy where family issues inform a broader range of policies such as health, education and work.
Family work

The practice of Goulburn Family and the program of the department converge in relation to the purposes of family work, namely to:

- provide opportunities for all families and individuals to access support to solve problems early before they become entrenched;

- support families and individuals during vulnerable times in their life cycle in order to prevent crisis and promote a safe and nurturing environment (NSW Department of Community Services 2002a: 8; my emphasis).

Goulburn Family and the department converge in relation to activities specified by the department: material assistance, information, therapeutic intervention, recreation and vocational support, and casework (NSW Department of Community Services 2002b: 26). On the other hand, I found frequency, duration, and location of contact unspecified. I found ambivalence in the target of the program. The program instead refers to diverse targets. I have highlighted two of these targets in the quote above: the individual and the family. One of the program’s objectives adds to this list of ‘supporting children, young people, individuals and families so that they can enhance their independence, safety, self-esteem and/or quality of life within the community’ (NSW Department of Community Services 2002a: 9). It refers to them, not as family members, but as if separate from the family.
Community work

Goulburn Family and the department converge in relation to community work. The purpose of its program is to ‘strengthen the capacity of communities to protect and promote the well-being of their members’ (NSW Department of Community Services 2002a: 8). The objective is: ‘building strong communities and social capital [and] undertaking community development, so that communities are well informed, resourced and connected and equity and diversity are embraced’ (NSW Department of Community Services 2002a: 9). The program allows for a range of community work activities: information and education, networking, developing new and existing services, coordinating services and facilities, coordinating events, advocacy, research, and encouraging volunteers (NSW Department of Community Services 2002b: 26–27). On the other hand, these activities are means to ends unstated, giving rise to the possibility of multiple interpretations some of which are intended, some of which are unintended but none of which are explicit other than in the generic statement of purpose.

Policy work

And Goulburn Family and the department converge in policy work. The purpose is to ‘provide social infrastructure to respond to community needs and deliver quality services’ (NSW Department of Community Services 2002a: 8). The objective is: ‘building and sustaining the capacity of the community services sector at a state or regional level to deliver responsive services through
sector development, policy and advocacy’ (NSW Department of Community Services 2002a: 9). The program allows for a range of policy work activities: collaboration and partnerships, information and advice, policy research, social justice advocacy, promoting community initiatives of state wide significance, professional development, developing community infrastructure, and facilitating ‘industry’ change (NSW Department of Community Services 2002b: 28). Again the focus is on means without guidance on ends.

Divergence in interpretation

Divergences in interpretation may arise from the program of the department then from frequency, duration, and location of contact unspecified; diverse and undefined targets and terms; and stated means but unstated ends. Divergences may rise from the program of the department from unstated values and assumptions; and from absence of reference to other policies that affect these targets, to the preceding policy and its programs and their linkage to the new policy and its programs, and to broader frames of reference of policy. Divergences may also arise from conflicting imperatives; from conflicting use of conceptual and instrumental approaches, anticipatory and reactive approaches, and incremental and substantial change; and from different policy interests and perspectives. They may arise between different levels within a government department, for example the policy decision-making level and the local implementation level; and between these different levels and community institutions. Some of these causes may explain divergences that occurred.
between the local level of the principal funding department and Goulburn Family during the project.

In the absence of definition of the family at the decision-making level, the local level appears to interpret the family as mothers and as children up to and including eight years of age, with the mother in the role of the victim. Goulburn Family see everyone as a member of a family. The local level seeks less engagement with men. Goulburn Family see both genders integral to the family. In the absence of specification of frequency and duration of contact at the decision-making level, the local level specifies duration of contact often more frequently and longer than Goulburn Family typically engages the family. The specification is 2.8 visits per month for up to two years. Goulburn Family engages with the family according to their needs and this in many cases is a few visits spaced over a month or two. In the absence of specification of location of contact at the decision-making level, the local level prefers more engagement in the home whilst Goulburn Family typically engages in their practice location (transcripts 8 April 2003, 14 May 2003, 8 July 2003). The local level excludes therapeutic engagement whilst the decision-making level includes it. It excludes this on the basis of its view that workers are unqualified for therapeutic engagement, that Goulburn Family has no capacity for this, and because of the cost of doing so.

The literature provides more generic explanations of policy divergences as earlier indicated. These may assist community institutions to participate more
fully as policy actors and policymakers. These explanations include the policy cycle, frames of reference, conflicting imperatives, conceptual and instrumental approaches, anticipatory and reactive approaches, substantial and instrumental approaches to change, and policy perspectives.

**Policy cycle**

The policy decision-making level and local implementation level of the department also represent two of the five stages of the policy cycle. These stages are the agenda setting process by which issues come to the attention of government; the policy formulation process by which options are formulated by government; the policy decision-making process by which governments adopt a course of action or inaction; the policy implementation process by which governments put policies into effect; and the policy evaluation process by which governments monitor outcomes of affected actors and reconceptualise the issue (Howlett & Ramesh 2003: 13). The process is not necessarily linear and not all steps are necessarily included (Howlett & Ramesh 2003: 14). However, the five steps do assist in analysing what is the focus of policy attention at a particular time. They in turn assist in identifying the appropriate questions relating to actors, institutions, tools and ideas for use at each stage (Howlett & Ramesh 2003: 17) by community institutions such as Goulburn Family.
Frames of reference

Each party may frame ‘issues, policies, and policy situations in different and conflicting ways that embody different systems of belief and related prescriptions for action’. These frames ‘determine what counts as a fact and how one makes the normative leap from facts to prescriptions for action’ (Schon & Rein 1994: xviii). Schon and Rein (1994: 197-198) advise that ‘family support work is concerned with keeping children in their own families whenever appropriate, employing preventative strategies to avoid family disruption.’ This is in contrast to child protection policy, which ‘stripped of some of the cosy or therapeutic language, is still about the policing, by the state, of child-rearing practice in the family’. There may be two unstated and conflicting frames of reference about the funding department program: one seeking to keep families together and one seeking to protect the child from the family that may mean separation of the child from the family. An agency in Victoria comments that ‘the child welfare and family welfare system is unbalanced. There has been a concentration of the heavy interventionist end with a relative diminution in effort in prevention. It is more protection [of the child than prevention]’ (interview 22 June 2002).
Conflicting imperatives

For Schon and Rein (1994: 197-198), ‘everyday practice occurs in a policy environment that may be friendly, neutral or hostile to practice.’ If unfriendly, it may be because of conflicting imperatives of autonomy of the community institution and accountability of politicians and public servants for funding the community institution. Workers may want to provide family support whilst policymakers may want social control with workers acting as ‘agents of social control charged with monitoring families’ child rearing practices’.

Policymakers and practitioners prioritise different constraints: ‘for the policy makers, it is the political environment … for practitioners, [it is] the clienteles they directly serve’ (Schon and Rein 1994: 197-198). Politicians and public servants have to try and balance ‘a consensual imperative to do what is feasible, given the consensus and the existing conflicts in the social world for which the legislation was designed; …a legal imperative to follow the law as understood in the legislation [and] a bureaucratic imperative not to endanger one’s position within a given agency’ (Schon and Rein 1994: 197-198). Thus, achieving ‘outcomes for the community’ and meeting ‘accountability objectives’ (NSW Department of Community Services 2001: 10) in the program of the principal funding department of Goulburn Family may be conflicting imperatives for the department. The program provides the context for optimising outcomes, improving relationships and accountability, namely to ‘achieve better outcomes for clients; [to] demonstrate value for money in resource allocation and resource management; [to] help build capacity; and [to] develop stronger partnerships with community partners’ (NSW Department of Community Services 2001: 30). At the same time, the weight of accountability
is also indicated in the document. The department is accountable to eleven parliamentary and government bodies, to ministerial advisory committees, and to periodic Commonwealth and state inquiries and commissions (NSW Department of Community Services 2001: 28).

**Conceptual and instrumental approaches**

There appears to be a higher level of interest in the conceptual and a lower level of interest in the instrumental at the decision-making level of the department and the reverse at the lower implementation level. Radaelli (1995: 161) sees the conceptual as a more indirect and diffuse use of policy and the instrumental as the use of policy for specific actions. Policymakers may be instrumental; they are often unwilling to wait on findings of empirical research because of the length of time, exacting standards, and lack of certitude in often inconclusive findings (Monroe 1995: 428-429). Conceptual relates to values and instrumental to facts. A policy divergence straddles the fact-value distinction (Hoppe 2002: 308-309). Goulburn Family values are expressed in the form of principles whilst values of the department are unstated. This leaves open their potential for a multiple interpretations and misunderstandings and/or a greater reliance on lower level instrumental measures that are enabling or punitive.
**Anticipatory and reactive approaches**

Policy decision-makers may be anticipatory or reactive in resolving issues and to the means of consensus or imposition in relationships with other actors (Richardson et al. 1982: 13). Different rhythms take place in different jurisdictions in the development and diffusion of a new frame (Surel 2000: 507). The decision-making level of the funding department of Goulburn Family appears largely anticipatory and the implementation level largely reactive. Turning points, when the pace quickens, often come from a change of government or worsening of a crisis (Surel 2000: 507) or from a change in personnel. These turning points represent opportunities for community institutions to be heard.

**Incremental and substantial change**

The same actors, institutions, instruments and policy ideas may dominate policymaking for extended periods of time providing consistency of process and content (Howlett and Ramesh 2003: 234). Generally, policies implicitly or explicitly assume that their implementation will change human behaviour (Monroe 1995: 429). Change comes from learning, with policymakers reflecting on their own and others’ experiences (Howlett and Ramesh 2003: 241 citing Heclo 1974).
Much policymaking is incremental. Incrementalism represents variations to existing practices (Howlett & Ramesh 2003: 235). It may occur at the decision-making level in a shift in the program, which may be somewhat uncertain and not yet complete, such as the seeming shift may be from child protection to family support of the funding department. Substantial policy shifts take place less frequently and often only when actors are responding to gathering evidence that an existing policy regime is unable to deal effectively with a policy issue. Substantial policy change may be rapid or slow (Howlett & Ramesh 2003: 238). Incremental and substantial policy change may result from endogenous or exogenous events. Endogenous events include policy learning and venue change. Exogenous events include one off crises such as war or recurring events such as elections; new actors entering the policy process; and/or from spill overs of activities from one policy arena to another (Howlett and Ramesh 2003: 235).

**Policy perspectives**

Making explicit implicit perspectives of policy decision-makers may assist other actors in influencing policy and advancing the policy debate. Historical, constructivist, ecological and emotional perspectives are explored here.

*Historical perspective*

There appears to be no sense of an explicit historical perspective in the
program of the principal funding department of Goulburn Family. I therefore
looked elsewhere for identification of this perspective. An agency in Victoria
reflected on the shift in perspectives of the past 25 years from a child to family
perspective, introduction of mandatory reporting, and introduction of economic
rationalism:

There has been a strong attempt to ground the philosophical commitment in child
welfare practice, policy and legislation to involvement of the family, continuity of
families and due process that relates to family decision making since the 1980s.
Another change has been the introduction of mandatory reporting which did not have
a philosophical base but was done in response to a number of deaths. A third change
has been government concentration on core business that came with an economic
rationalist approach (interview 26 June 2002).

Sometimes an ongoing issue meets with success at a particular time when it
may not have done so before. It may be because of a convergence of events. It
assists then to study issues and identify policy actors and their values in a
historical context (Monroe 1995: 431 citing Spano 1986) to act when the
opportunity arises.

Conductivist perspective

A constructivist perspective is explicit in the program of the principal funding
department in its use of the term ‘framework activities’ (NSW Department of
frameworks’ where the focus is on social construction of policy issues, belief
systems and frames of reference. Framing makes sense of our everyday life in
sorting out and organising our daily interactions, conventional rituals and
discourses (Creed et al 2002: 36 citing Goffman 1974). It also makes sense of social issues (Creed et al. 2002: 36-37 citing Gamson and Lasch 1983 and Gamson et al 1982). Frames are ‘underlying structures or organising principles that hold together and give coherence to a diverse array of symbols and idea elements’ (Creed et al 2002: 36-37 citing Gamson and Lasch 1983 and Gamson et al 1982). Like a window, frames define boundaries and ‘direct our attention to what events and texts are relevant to our understanding of an issue or situation … we see the world through frames that determine our perspective while limiting our view to only a part of a complex world around us’. Like a frame of a house, frames are an invisible infrastructure holding together different rooms and supporting ‘cultural building blocks that make up the edifices of meaning (Creed et al 2002: 36-37 citing Gamson and Lasch 1983 and Gamson et al 1982).

Framing assists in actors identifying what is included and excluded with a view to articulating the unarticulated. Thus, a lower level framework of activities is included in the program of the department but higher level frameworks of values and assumptions are excluded.

Ecological perspective

The ecological perspective is implicit in the program when it describes sequentially the family, community, and policy within its ‘framework activities’ (NSW Department of Community Services 2002b: 26). Goulburn
Family operates at one lower level of the developing person as a member of a family and at each of the other three levels of this framework. The developing person corresponds to the microsystem, the family to the mesosystem, the community to the exosystem, and public policy to the macrosystem of Bronfenbrenner’s (1979: 3, 8) ecological perspective mentioned in chapter 2. The ecological perspective frames the microsystem of the developing person within the context of a set of nested and interconnected systems of the family, community and policy. An ecological perspective assists in framing family and community support within public policy. The macrosystem of public policy mediates the relations of the person within society drawing on intermediary systems and their adaptation and enhancement (Gabarino 1995: 434) while determining the properties of the other systems in which everyday life takes place, steering behaviour, and developing the person (Bronfenbrenner 1979: 9).

**Emotional perspective**

Chapter 4.1 described how emotions suppressed become emotions somatised and/or projected on to others in the form of harmful behaviours: ‘if pain cannot be given words, if anger, fear or despair cannot be given voice, then it gets somatized or worse, gets projected on to the other’ (Hoggett 2000: 150). In a similar way,

…affect gets somatized on to the body of the [institution]. … Institutions can become organized systems of defence against anxiety. Painful affects become mapped on to the body of the institution: they become part of its fabric, like a corrosive vapour, which penetrates everywhere. Procedures, regulations, even the physical fabric of buildings and rooms, come to contain traces of the suppressed affect. This is
what happens if words are not available to give meaning to emotional experience but
are used to suppress and foreclose it’ (Hoggett 2000: 150-151).

There is a sense throughout the twelve-month period of indirect observation of
contact between Goulburn Family and the local implementation level of an
explicit technical interpretation and implicit emotional position. An example is
reliance on directives and measures by the local level rather than on values. It
is unclear the extent to which Hoggett’s (2000: 152) view relates, namely that
documentation of an institution often ‘is not designed to promote emotional
contact, dialogue and learning but to enable the [institution] to look as if it is
doing these things’.

A policy framework for families and knowledge

I construct from the program of the principal funding department and the
discussion in this and preceding chapters an ecological framework of policy for
families and knowledge in a knowledge society. The purpose is to contribute to
building capacity for action of community institutions and government
departments for supporting more families to move from harmful to fulfilling
behaviours. The framework takes account of the four ascending levels of
context of professional and policy engagement of the family. The levels are the
mesosystem, exosystem, macrosystem, and chronosystem. The first three
match the community institution, the community, and the community activities
of the policy program of the principal funding department. The chronosystem
embraces the concept of time that makes dynamic each of the other systems. I
represent these levels in the form of a table below, followed by an explanation of each level. The microsystem is represented by the members of the family within the institution of the family.

This policy framework embraces two other frameworks that I constructed in chapter 4.2. Each of these two exists at a lower level of abstraction within this policy framework. One is a framework of process of client learning in therapeutic engagement, namely information exchange, dialogue, reflection, and acquisition of relationship skills. The other is a framework of content of everyday life skills, namely relationships, recreational, physical & mental health, home maintenance, transactional, citizenship, learning, and vocational. These lower level frameworks correspond to the second and third levels of the mesosystem of building family capacity highlighted in bold below.
Table 5: A policy framework for families and knowledge

<table>
<thead>
<tr>
<th>System</th>
<th>Capacity for action</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mesosystem</td>
<td>Building family capacity</td>
<td>First ascending level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Initial casework of material needs and therapy</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Second ascending level</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Learning by clients about affects, behaviours, relationships</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Third ascending level</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Additional casework for acquiring additional life skills</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Fourth ascending level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Learning by workers about practice and theory</td>
</tr>
<tr>
<td>Exosystem</td>
<td>Building community capacity</td>
<td>First ascending level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Developing relationships in interagency collaboration</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Second ascending level</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Developing intra- and inter-professional collaboration</td>
</tr>
<tr>
<td>Macrosystem</td>
<td>Building policy capacity</td>
<td>First ascending level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Learning by workers and organisations about policymaking</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Second ascending level</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identifying family and related policies</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Third ascending level</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Addressing inequalities of access and availability</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Balancing competing interests</td>
</tr>
<tr>
<td>Chronosystem</td>
<td>Gaining capacity over time</td>
<td>First ascending level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identifying increasing complexities in life activities</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Second ascending level</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Identifying changes in the balance of policy interests</td>
</tr>
</tbody>
</table>

**Mesosystem of building family capacity**

The mesosystem of a policy framework for families and knowledge is the engagement of the family with harmful behaviours with workers in the community institution to which it presents. The family engages with workers in casework and therapy face to face in building the capacity to act. The family is the whole family whether or not all members eventually present: adult and
child members, males and females, victims and perpetrators. The mesosystem focuses on the family as a social institution with its roles, norms, customs, rituals, rules and precedents followed by its members (Rodgers & White 1993: 231) and its high degree of intensity and strength of relationships of its members (Bourdieu 1996: 20). The mesosystem focuses too on the home as the primary setting of the family, everyday life activities of the family, the life cycle of the family and its members, and the multiple realities of the family and its members.

The mesosystem has four ascending levels. The first level may be professional engagement between client and worker in initial casework to fulfil any unfulfilled acute material needs, prior to therapeutic engagement to fulfil unfulfilled relationship needs. The second ascending level is engagement of the client in acquiring knowledge about harmful and fulfilling relationships, behaviours and affects within the family. This engagement is both a therapeutic one in healing the harm and learning one in acquiring relationship skills. Harmful behaviours are neglect, abuse and violence in relationships of adult members that may spill over to child members of the family. Learning is with the purpose of the client building capacity for action for engaging in fulfilling relationships. It draws on the latent capacity of the family represented by its reserves of needs, interests, strengths, and resources and those of its members to support them to acquire life skills to match their needs. Learning is primarily adult experiential learning supplemented, where appropriate, by child experiential learning. Adult experiential learning is in the form of explicitly engaging in the practice and theory of exchanging information between the
client and the worker, dialogue, reflecting, planning, and acting in accordance with figure 2 in chapter 4.2. The sub-program of the principal funding department of Goulburn Family relating to family work includes casework, advocacy and therapeutic engagement; a full program might also include learning activities by the family with the purpose of acquiring life skills and building capacity for action. The policy framework recognises in the third ascending level of the mesosystem additional needs of families. Like acute material needs and relationships, these needs are increasingly more complex, diverse and problematic. These needs are health, daily living, recreational, citizenship, learning to learn, and vocational. The framework may recognise these needs to the extent that they are sequential and ascending (Maslow 1987). It may also recognise the function of additional casework that refers clients that have acquired relationship skills to other professional workers in this or another community institution so that they may acquire other everyday life skills secured on the foundations of relationships skills. The sub-program of the principal funding department relating to family work includes recreation and vocational support. An enhanced sub-program might add physical and mental health, home maintenance, transactional, citizenship, and learning. Casework would be retained. The fourth ascending level is learning engagement by workers in reflective practice in a professional learning organisation with a capacity to explicitly engage between workers in practice and theory in a form and sequence similar in outline to the adult experiential learning process of the client.
Exosystem of building community capacity

The exosystem is engagement of the community institution with other community institutions. The exosystem has two ascending layers. The first level is building capacity of the local geographic community of institutions to provide support for building the capacity of families. It consists of developing relationships based on contact from casework with community institutions so as to engage in interagency collaboration. Interagency collaboration comes from identifying common target groups of clients and providing complementary services to meet their needs without excessive overlap of resources. They do this by engaging in the practice and theory in a form and sequence similar in outline to the adult experiential learning process of clients and of workers. The second level is building capacity from intra- and inter-professional collaboration within community institutions and across geographic communities. It consists of workers of the community institution engaging within and across their respective professional interest communities in practice and theory in a form similar in outline to the adult experiential learning process of clients, of workers and of geographic communities. The sub-program of the funding department relating to community work includes interagency collaboration. An enhanced sub-program might add interagency and intra- and inter-professional collaboration and learning with a view to both forms of collaboration building capacity for action of community institutions and professions. It might also extend community activities it presently identifies of services, events, and resources to include facilities and volunteers.
Macrosystem of building policy capacity

The macrosystem is the engagement of community institutions with public policy in the context of an increasingly knowledge intensive society. Community institutions seek to build policy capacity for action from informed positions on families and knowledge. They do this by learning about the practice and theory of policymaking in a form and sequence similar in outline to the adult experiential learning process of clients, of workers and of geographic and professional interest communities. They do this also by identifying inequalities of families and their members in access and availability of everyday and abstract knowledge from professional workers in their geographic and professional communities; by identifying family policy that may use a term other than family and policies that may relate to the family such as health, education, housing, transport, and judicial; by encouraging interdepartmental collaboration where these policies overlap; and by learning about the process of public policymaking, its capacity to create opportunities, and its constraints in balancing competing social, political, economic, and accountability interests. The sub-program of the principal funding department relating to policy work includes policy research, information, advice, and advocacy; and development of community infrastructure; and promoting community initiatives of statewide significance. It might add cross-referencing of health and education policies and programs and interdepartmental collaboration to further realise the capacity of families. And the sub-program might refer to the impact of the family on policy and of policy on the family.
Chronosystem of building capacity for change

The imperative of building public policy capacity comes from escalating complexities of everyday and abstract life activities commensurate with a transition over time to a knowledge intensive society. These life activities are relationships, maintenance of physical and mental health, maintenance of the home, transactions, and development of recreation, citizenship, vocation and learning interests. Each requires time to develop a set of new and revised skills to cope, and to participate in fulfilling life opportunities presented by a knowledge intensive society. Changes over time in the family parallel changes over time in the balance of social, political, economic, and accountability interests in the public policy environment. These changes create new opportunities and constraints for action. Knowledge of these changes, opportunities and constraints increases the capacity of community and state institutions to meet this imperative. The sub-program of the department relating to policy work would retain facilitation of ‘industry’ change by community institutions. It might be enhanced by referring to time in the changing needs of families and time in development of skills by families; in commensurate development of skills of workers to anticipate and respond to these changes in needs; and in commensurate development of policy that includes balancing the interests of diverse policy actors.
Chapter 5: Conclusions and Implications

Introduction

This has been a thesis generically about adult learning and everyday knowledge. This generic meaning in the research question was revealed as the action research project progressed. This has also been a thesis specifically about families learning everyday life skills to overcome harm and acquire a fulfilling life that benefits both its members and the community. This meaning was explicit in the research question. Acquiring a fulfilling life takes place within the context of increasing complexities — and commensurate opportunities and issues — that are emerging in everyday life from transition to a knowledge society.

I constructed a policy framework of families and knowledge in the context of this knowledge society in accordance with the title of this thesis. I also constructed two lower level frameworks on process and on content of acquiring everyday life skills that fit within the overarching framework. I did this from the empirical and theoretical findings of investigating the main research question and its seven focal point questions. The frameworks were constructed for the purpose of this thesis: as a contribution to the literature and for use by
Community institutions as another perspective on their work, with an intended flow on benefit to family clients. I also identified and classified the substantial reserves of families, namely needs, interests, strengths, and resources, which, in their acute and under-utilised state, may result in harm.

I adapted the action research process to allow me to become progressively more embedded within a community institution over the course of a year, initially as a researcher and facilitator and later and additionally as a co-participant; and to allow the workers to act as participants and later and additionally as co-researchers. I was able to do this under the specific conditions of a practice of an institution grounded in theory and during a year of consistency in stability of the institution, in growth of its core operation, and in its expansion into the community and into public policy activities.

**Conclusions about the research question**

The research question addressed the problem of replication and scaling up what works by knowing why what works, works, taking an example of a family support service in New South Wales. Understanding why allows information about what works to be articulated to audiences beyond the community institution where what works, works. These audiences include other community institutions that might seek to replicate such practice; and public policy that might seek to adjust its balance of interests from the additional information and those revealed benefits that may be common to other
interests. The research question was made up of a sequence of seven focal points and related questions: families, harmful behaviours, professional engagement, everyday life skills, learning, knowledge society, and institutional practice and policy frameworks. Understanding each step in the sequence from family to policy making provides a basis of articulation by community institutions in engaging with public policy.

Goulburn Family observes that everyone is a member of a family. This observation frames individuals and the family in a way that enables therapeutic engagement of the individual as an inclusive member of a family and in relationship with other members of that family. The family develops by drawing on its own reserves and those of the community. The principal forms of harm are neglect, emotional abuse, and physical violence. These forms of harm are acquired from adverse affects in relationships. Affects are the physical manifestations of feelings and emotions. Harm may come from a lower level of reserves and/or from lower development of these reserves. The impact of harm within the family affects not only the family but also the community and public policy in the physical and emotional effects of harm; and in construction and provision of services to address this harm in forms that allow the family to access, develop and redirect its use of reserves from harm to fulfilment.

The principal forms of professional engagement to heal the harm are therapeutic engagement and subsequently groupwork. These forms of
engagement are with the purpose of the family acquiring everyday life skills. Everyday life skills include relationships, recreational, physical and mental health, home maintenance, transactional, citizenship, learning, and vocational. Therapeutic engagement supports acquisition of everyday life skills and basic abstract skills. Groupwork may lead to acquisition of additional everyday life and abstract skills and subsequently to acquisition of more advanced abstract skills. Learning in professional engagement of the family draws primarily on making its implicit reserves explicit, including its accumulated experience. This is a form of adult learning as the introduction to this chapter indicates. Adult learning is distinctive from child learning because of the much greater accumulation of reserves that adults may draw on. Workers may similarly draw on their accumulated experience in professional practice.

The present policy context of Goulburn Family is explicit about the distinction between family work, community work, and policy work of community institutions. It is implicit about everyday life activities of families and therefore about information, learning, and knowledge about life skills. It is an implicitness common to much of the literature. This thesis is a contribution to making the implicit explicit.
Implications for practice and policy

The research outcomes have implications for practice and policy on shifting from one perspective to another, represented here as a checklist:

- a shift from fragmentation to inclusiveness – from identifying the client as an individual and/or as a family in a fragmented state to identifying the client as a whole family, and an individual as a member of a family whether they are an adult or child, male of female, victim or perpetrator;

- a shift from conflating harm as violence to differentiation of neglect, abuse, and violence as harm, with emotional abuse usually preceding and not leading to physical violence but the effects of which may be as severe;

- a shift from providing services to identifying family needs and its other reserves to facilitate their use in learning everyday life skills;

- a shift from a professional focus on child development to a professional focus on adult development, and on the adult as agent for child development; and

- a shift from conflating learning to differentiation of adult and child learning – with adult learning and child learning of everyday and abstract skills as a complementary undertaking of families, community institutions and schools.
Implications for theory

An increasingly fluid society may be restricted in its continuing use of ‘modern’ disciplines to respond to research questions in social practice and policy. My research question focused on the ends of family and harm and this required me draw, as a means, on many disciplines, sometimes referred to as an interdisciplinary approach. These disciplines included psychology, sociology, and political science and sub-disciplines such as social work and education. I found the term ‘education’ problematical however, because of its technical, instrumental and institutional meaning; I use instead the term ‘learning’ to capture its conceptual and human meaning of the person and the family.

An overarching theoretical task was combining fragmented concepts and constructs. Goulburn Family combines relationships, behaviours, and affects — an intensely human combination. In addition, it was for me combining theory and practice, the human and the technical, the emotional and cognitive, and the everyday and the abstract. These combinations do not seem to be vigorously investigated and debated in the literature but largely remain separate concepts without recognition of their links to each other. These separate concepts sit ill at ease with the increasing inclusiveness of an emerging knowledge society. To the extent that this society is referred to in the literature, it examines abstract life but rarely everyday life. Fragmentation of constructs relates to the family in practice, policy, and theory: either children or adults, women or men, victims or perpetrators. In contrast, the family for Goulburn Family is an inclusive construct: everyone is a member of a family and the...
whole family is the focal point of the practice. Fragmentation extends further to the emotion or cognitive and the human or technical. A family, presented by the worker with the theory of affects, may be unable to understand this theory cognitively and relate it to unexpressed emotions without prior emotional engagement and association. The family as a human as well as a technical construct may hold significant implications for those institutions in the community that see, often unconsciously, the family predominantly as a technical construct. Emotional engagement prior to cognitive engagement may have relevance to interpretation by community institutions of clients beyond their role of family member to other roles such as student, worker, and citizen.

Construction of the frameworks in this thesis relies primarily on the overarching theoretical work of Bronfenbrenner on ecology, Rogers on therapy and learning, and Bohme and Stehr on the knowledge society. More specific theoretical work that I consulted does not always draw on this overarching work. For example, Rogers work appears to have been taken up only in a limited sense in adult learning and less so in therapeutic work and rarely has his combination of therapy and learning been taken up. Such specific theoretical work might benefit from more explicit recognition of their overarching work.

Adult learning appears to occur in settings beyond ‘modern’ constructs of the school and further and higher education and more recently the workplace. Information, learning, and knowledge play an increasing role in the life of the
adult as well as the child. Under-used reserves of adults may be drawn upon in therapeutic engagement and groupwork. Knowledge may be acquired and reserves tapped by a focus on adult learning in community institutions that relate to family work, community work, and policy work.

Professional engagement appears to be more fluid than ‘modern’ boundaries of professions suggest in titles such as social workers, psychologists, teachers, nurses, lawyers, and police officers. This sense of fluidity came when addressing a contemporary meaning of social work, a term to me that seemed conflated. New professional roles, but not yet professions, are emerging such as suppliers of material provisions, therapeutic workers, learning workers, health workers, facilitation workers, and policy workers. Facilitation workers include caseworkers and client advocates. Facilitation workers have other roles too such as therapeutic engagement and learning, group work learning, and interagency collaboration.

Further research

The action research project examined learning everyday life skills in the context of casework and therapeutic engagement of the family and to a more limited extent of the playgroup. I am mindful of the degree of generalisability of a single case. Further research might modify observations and reflections. I am mindful too of the scope for similar research in other settings such as schools, universities, hospitals and other health services, housing services,
and an array of judicial institutions where life skill issues may be at their most intense. These judicial institutions include police, courts, remand, prisons, probation and parole, juvenile justice, and detention centres. There is scope for research in more depth that examines learning everyday life in terms of discourse, dialogue, dialectics, and didactics. There is scope for conducting similar research in indigenous and ethically diverse communities; in researching the contribution of everyday to abstract knowledge; in investigating the shift in balance of policy interests in family work and community work in the context of a knowledge society; and in researching the economic costs of practice and policy that focus on relationships and other life skills and the savings to education, health, welfare, and judicial institutions. The costs may in part be in additional professional workers and the savings may be in less technological and security intense infrastructure.
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