

**MEET OUR
10,000TH
MEMBER!**

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Australian Association
of Social Workers



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Please note that some of our workshop dates have changed and dates on this page are correct for 2016.

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For more details about these offerings and books by Leah Giarratano refer to www.talominbooks.com

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NEXT EDITION

Contributions for the Spring 2016 issue will be accepted until 5 August. The theme for articles will be **social work practice and family violence**.

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LET'S TALK ABOUT LEADERSHIP

KAREN HEALY

Leadership is a vexed issue for many social workers. The traditional notion of standing at the front of a group or team can be a contradiction of the egalitarian values by which our profession prides itself.

Our social work education has prepared us to critically examine authority and power and in our practice we see negative operations of power in organisations, communities and the effect they have on the lives of the most vulnerable. This critical awareness can make us wary of the power inherent to leadership roles.

Another concern is that leadership roles almost inevitably take us away, to varying extents, from direct social work practice.

Yet, despite the many challenges of the traditional notion of leadership, we need to embrace the opportunities that it offers to create change in our organisations and communities. Social work leaders can do leadership differently. We can be leaders who reflect the professional values of respect, social justice and professional integrity. In fact, many great leaders, across various disciplines, practice these values.

Essential capacities and qualities possessed by great leaders include professional competency, an awareness of their governance responsibilities, respectful conduct such as openness, transparency, interpersonal intelligence and diligence, and bravery.

Great leaders need to be brave; they have to tell difficult truths and bring people and organisations to account. They should also bring emotional intelligence to bear in their communication with the people and organisations they seek to influence.

I hope this edition of *Social Work Focus* will stimulate conversations about leadership within our profession. I hope too that reading and sharing the ideas and experiences within it will encourage more to step up to leadership roles. You really can make a difference.

In June, the AASW reached a membership milestone. We are now more than 10,000 members strong. This is a wonderful achievement in our 70th year and the growth is testament to the hard work of the Board and the Branch Management Committees in setting the agenda for membership, and to the many hard-working staff of the AASW (especially our excellent membership team leader, Lisa McCarron). We have achieved it also due to the efforts of members who helped us spread the word. As our membership base grows so does our strength as an influential voice on matters of concern that helps us to better serve you, your clients and community.

The COAG Health Council's recent referral of social workers' for consideration by the National Registration and Accreditation Scheme is an exciting new development in our campaign for the national registration of social workers. The referral follows the recommendations of two coronial inquests in South Australia which sought the national registration of social workers. Please read Anita Phillips' article in this issue for more details about the latest registration news and how you can get involved.



KAREN HEALY
AASW PRESIDENT

Remember to have your say during the AASW's review of the Australian Social Work Education and Accreditation Standards (ASWEAS) by 21 July. The ASWEAS set the framework for social work education in Australia and are vital for preparing social workers to engage with the challenges of practice and for ensuring national and international recognition for graduates. You can find out more about the [ASWEAS review](#), including the discussion paper and submissions process, on the AASW website and in Dr Brenda Clare's article on page 11.

Finally, I would like to acknowledge Stephen Brand for his many years of service to the AASW as the senior manager for social policy and advocacy and mental health portfolios. Thank you, Stephen, for your significant contribution to raising the AASW's profile as a powerful voice for social justice. We wish you well in the next phase of your life.

•

SOCIAL WORK VALUES ARE A GOOD FOUNDATION FOR LEADERSHIP

Social workers' values of respect, dignity and inclusion position us to be effective managers as well as ensuring that the people we work for are granted every possible opportunity. And the AASW takes its role as a leader of the profession very seriously.

The AASW ensures that social workers are represented in the development of social policy which benefits everyone – individuals, families and local communities.

Achieving the milestone of 10,000 members in June has helped us to continue to participate in national conversations about social policy. More members means we will be perceived as a professional association of influence and this will enhance our opportunities to appear before government inquiries, speak at forums such as the Royal Commission into Institutional Child Abuse, participate in reviews like that of the child protection services in Tasmania recently, and publish our opinion pieces.

Our registration campaign is also evidence of leadership for the profession. Our aim is to achieve registration with the government's National Registration Accreditation Scheme (NRAS) that promotes community safety by ensuring that people interact and engage with competent, accountable practitioners. While we work toward this goal, we are participating with other self-registering allied health professions in the National Alliance of Self Regulating Health Professions (NASHRP) to demonstrate our commitment to being part of a registration scheme. NASHRP promotes public safety by registering practitioners who meet minimum eligibility criteria and has recently received government funding to further its emergence as a professional association and develop the model.

Along with seeking registration, the AASW is embarking on a credentialing program to certify competent and skilled members working within a particular field of practice. Although we are just beginning this work, we are likely to start the child protection credentialing shortly in response

to the South Australian Coroner's recommendations for child protection workers. Likewise with disability credentialing, given the opportunities for social workers to register with the National Disability Insurance Scheme and receive a higher rebate. We will work with you, as practitioners in these areas, to articulate the practice standards so they have integrity and relevance.

Another critical opportunity for our profession is the current review of the social work education standards, known as ASWEAS. We have shown leadership with government by developing and maintaining these standards in consultation with higher education providers; they are used as the criteria for the accreditation of a professional social work course and to protect the distinct knowledge base. We need your participation and support during the review of the current standards so we can develop the next iteration. Your contribution will help us keep the ASWEAS relevant and contemporary.

GLENYS WILKINSON
AASW CEO



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A NEW LEADERSHIP AND GOVERNANCE COMMUNITY

DR SHARON MCCALLUM

Many social workers are in senior leadership and governance roles. To date, there has not been a space for them to come together - so the Australian College of Social Work has created one.

It's always a good omen when synchronicity occurs. For some time, a few of us at the College have been talking about the need for a community of practice (CoP) on leadership and governance. We were so inspired by the quality of leadership demonstrated by the keynote speakers at the last Symposium that we hit the phones and emails to garner interest.

The result was that the Steering Committee approved a Community of Practice for Leadership and Governance at the College.

Among the rationale for the CoP is:

- Many social workers sit in senior leadership and management positions, and/or on boards of governance;
- The issues facing social workers in these positions often differ from those of social workers in direct practice, or in their early careers;
- Sometimes the issues are so complex that it is difficult to find a supervisor who can mentor or supervise (unless they are good coaches), resulting in isolation; and
- There are many issues in relation to leadership and governance that are facing our profession that need to be addressed.

The first teleconference of the Leadership and Governance CoP was held on 17 May, so it is early days. We have decided on two initiatives, with the idea being to start small and build as we go. The first of these is for CoP members to make available their email address and mobile phone numbers to other members of the CoP with an offer to provide supervision, mentoring, coaching or even just a 'can I run something by you?' conversation. The second initiative is for members of the CoP to each write a page on the issue of leadership or governance which concerns them. We shall call these conversation starters, as they will be ways to begin a dialogue on the big issues facing our profession in the leadership and governance arena.

The aim of the College is to advance social work practice the CoP's aim is to advance social work practice in the areas of leadership and governance. This may include areas other than management, such as research, policy and practice. We welcome anyone from within the College who would like to join us. If you are not yet a member of the College, but are interested in joining and participating in the CoP, please give me a call on 0418 736 890 or sharon@raisingstandards.com.au. The College will welcome you!

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About the author

Dr Sharon McCallum is Convenor of the Leadership and Governance Community of Practice. Since 2000, she has worked as a private practitioner undertaking program design, development, implementation and evaluation services for her company, Sharon McCallum & Associates, and raising standards, largely in the fields of child protection, family violence, sexual assault and family support for government and non-government clients.

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REGISTRATION NEWS

ANITA PHILLIPS

Inclusion of social workers within the National Registration and Accreditation Scheme (NRAS) is again on the agenda.

On 4 April 2016, the COAG Health Council (CHC) Ministers voted to refer the inclusion of social workers to the Australian Health Ministers' Advisory Council (AHMAC) for further work and advice. The vote was in response to a motion put by the South Australian Minister for Health, Jack Snelling but, as some members know, this is not the first time our profession has been referred for further consideration. However it is timely to offer some background on what has been happening recently and what you can do to support our ongoing quest for registration.

The long campaign for registration

Many stalwart members, and since 2009 the registration subcommittee of the AASW Board, have been lobbying for years for a national scheme that will regulate and register social workers. We have written papers in support of the concept that the practice of social workers needs to be regulated and monitored according to standards that aim to protect clients, particularly those who are most vulnerable, from unqualified practitioners; and that the profession needs to be registered so that again the public is protected when seeking help from someone who identifies themselves as a social worker.

During 2008 and 2009 the Minister for Health, Nicola Roxon, introduced the concept of all health professions coming under a national scheme – the National Registration and Accreditation Scheme – so from July 2010, 10 professions, including psychologists, physiotherapists and opticians, became part of the scheme and were, in 2011, joined by four other professions, including Aboriginal and Islander Health Practitioners. The AASW made submissions to lobby for inclusion during this time because, while NRAS might not be the most perfect scheme to regulate

our diverse profession, it was the only national authority that already covered most of our allied health colleagues. (In those early days, our progress might have been hampered by responses like this one: 'Social workers don't do enough harm to be worried about'!)

After the inclusion of the second tranche of professions in 2011, the AASW had reason to believe that even more professions might be admitted, and so stepped up its campaign by engaging a consultant who lobbied government ministers and senior personnel. The positive outcome was that the Western Australian Minister for Health, the Hon. Kim Hames, championed our cause and in November 2012, the meeting of the Standing Committee for Health Ministers *noted* the proposal to include social workers in the NRAS, and agreed to refer the proposal for advice and further consideration by the Australian Health Ministers' Advisory Council (AHMAC).

In response, the AASW prepared a submission for AHMAC's Health Workforce Principals Committee (HWPC), but its consideration was overshadowed by the announcement, in 2013, that the review of NRAS, scheduled in the legislation to take place three years into the scheme, was due to be held. All other recommendations were shelved while this review took place. At about this time a national code of conduct for unregulated health professions was also announced and social work was listed as one of the unregulated professions to be covered by it. Again the AASW argued that such a code was like having an ambulance at the bottom of the cliff – what we wanted in order to protect clients was a profession that was regulated according to standards and nationally registered to prevent individuals switching states and operating under the regulation radar.

The report that followed the review of NRAS was finally released in August 2014, and despite more than a year of lobbying by the AASW, the health ministers decided 'to defer consideration with regard to admitting any other professions into NRAS, at least until administrative and financial/resource issues of the scheme were addressed'. Our chance for serious consideration of our bid had been stifled. AASW had also negotiated a possible compromise or solution with the review's consultant, Kim Snowball, that if social workers were not to be included in NRAS, then the AASW might be authorised as a self-regulating organisation so it could officially register social workers. This recommendation was also rejected by the health ministers.

Recent developments

At their next meeting in November 2015, the health ministers discussed options for registering paramedics, a proposal that had also been in discussion prior to the review. On a majority vote, 'the meeting agreed to move towards a national registration of paramedics to be included in the NRAS, with work [in relation to this] to come back to AHMAC for consideration.' AHMAC is made up of the heads of government health departments, who, in this case, were charged with collecting the research and taking a position back to the ministers. The AHMAC recommendation was more or less the same as that made by Kim Hames in support of social workers in November 2012. Despite having said in August 2015 that no other professions would be included in NRAS, three months later we heard that maybe the door was not completely shut to the inclusion of other professions.

So the AASW kept up its persistent lobbying and then a tragic situation, the death of little Chloe Valentine, provided a new opportunity. Following

the inquest into Chloe's death, the South Australian coroner included a recommendation, among others, that 'a measure be introduced that provides for registration of social workers'. Further, he added that 'there be a mandatory restriction on student social workers and qualified social workers with less than 12 months experience having client contact without direct supervision by a senior social worker'. The imposition of this condition is being further discussed within Families SA. The AASW successfully lobbied the SA Minister for Health, Jack Snelling, to take the motion for registration to the COAG Health Council (CHC) when it met in April. The result was that the majority of Health Ministers voted 'to refer the inclusion of Social Workers to the Australian Health Ministers' Advisory Council (AHMAC), for further work and advice back to Ministers at a future meeting.' The wording is very similar to the referral of paramedics and so, optimistically, we might conclude that we are to be considered similarly.

The next steps

The AASW is developing a strategic campaign that will include the following:

1. **Submission:** The AASW will prepare a detailed submission for the consideration of AHMAC members (and by their staff and advisors). This along with letters and meetings will be the main campaign tool.
2. **Corresponding with ministers:** The AASW will write to all ministers thanking each of them individually for deciding to progress the inclusion of social workers in the NRAS and advising them that we will be liaising directly with their senior bureaucrats and departmental secretaries.
3. **Liaising with AHMAC Members:** The AASW will write to each of the heads of health departments offering to provide information to help them develop an informed view prior to voting at the AHMAC meeting, which stresses our willingness to provide information via the submission that will be available in early June, and to meet with them and answer any questions they may have.
4. **Liaising with Health Practitioner Liaison Unit:** This unit, within the Department of Health Victoria, will also be working on the report to go to AHMAC. The AASW has met with the director of this unit, Ms Anne Louise Carlton, on previous occasions, but this time it will be different because social work inclusion in NRAS has been referred by government ministers for serious consideration.
5. **Allied health directors:** AHMAC members will seek advice from their allied health directors who will be critical here. The AASW will endeavour to meet individually with each one.
6. **Write to secretaries and senior bureaucrats in related state or territory** and point out the very real benefits of having a national registration scheme for social workers that will provide regulatory standards across all social work practice areas, including their own departments.
7. **Lobbying by AASW members:** All of the AASW's 10,000 members can be strategically involved in lobbying. The AASW will produce a one-page information sheet that includes a brief history, why social workers must be registered and a 'call to arms'. Many are employed in the health sector where they can be particularly active by having conversations with other staff, including senior managers, informally as well as formally – bringing the issue up at staff meetings and sharing your opinions around the coffee cart, so that all health sites become aware of the issue.



About the author

Since graduating from the University of Melbourne 40 years ago, **Anita Phillips** has utilised her social work knowledge and skills in regional north Queensland, the Hunter region and in metropolitan Sydney, Melbourne and Canberra federal, state, local and non-government agencies. She also has a Master of Public Administration, a Postgraduate Diploma in Legal Studies and is a graduate member of the Australian Institute of Company Directors. Anita is currently engaged as a sessional university lecturer in the ACT and Queensland and as a public policy consultant. She has been a Director of the AASW Board since 2012 and is very active in the AASW's pursuit of registration for social workers as a member of the subcommittee that has been exploring the possibility of social workers entering NRAS since 2009.

MEET THE BOARD

Members of the AASW's Board meet via teleconference every month and face-to-face four times a year. Among their priorities for 2016-17 are celebrating the 70th anniversary, overseeing the review of the Australian Social Work Education and Accreditation Standard (ASWEAS), pursuing professional registration with the National Registration and Accreditation Scheme, continuing to advocate for social justice in the Australian community and strengthening the AASW's membership.

Each director brings many years of experience to the association's governance as well as their own passion for social justice and the protection of the social work title.



PROFESSOR KAREN HEALY AM
President

Karen graduated from the University of Queensland in 1986 with first class honours in social work. She also has a PhD in social work and social policy from the university. Over three decades, she has worked in social work or academic posts in four states of Australia and in a variety of fields including child protection, community work and health services. Karen is currently Professor of Social Work at the University of Queensland, National Director of The Benevolent Society, and graduate member of the Australian Institute of Company Directors. On 26 January 2016, she was named as a Member in the General Division of the Order of Australia for her significant service to community welfare in the field of social work, particularly child protection, and to higher education and research. Karen has been National President of the AASW since 2011.



CHRISTINE CRAIK
Vice-President

Christine has over 25 years' experience as a social worker in family support, housing, community health and hospitals where she has focused on the areas of domestic violence, sexual abuse and refugees. Christine is currently the program manager of the Bachelor of Social Work (Hons) and the Bachelor of Social Work (Hons)/Psychology at RMIT University in Melbourne where she also lectures in the Masters of Social Work. She is currently completing her PhD and exploring routine domestic violence screening for women in emergency departments of Australian public hospitals. Christine has been National Vice-President of the AASW since 2011.



DR BRENDA CLARE
Director

Brenda has over 40 years' experience as a social worker in England and Western Australia, specialising in child protection and out-of-home care. She has been teaching social work at the University of Western Australia for 10 years and is now an Honorary Research Fellow. Brenda is also a self-employed consultant in her business, which provides training, research and supervision services, and Chair of the AASW's Education and Standards Committee. She has been a Director of the AASW since 2012.



DAVID GOULD

Director

David is the newest member of the Board. His appointment last year follows two years as Vice-President of the AASW's Tasmanian Branch. After working in the NGO sector in homelessness and mental health programs, David graduated in 2012 with a Bachelor of Social Work from Monash University. Since then, he has practiced as a hospital social worker on acute medical wards at the Royal Hobart Hospital and is currently working in palliative care. David is now studying a Graduate Diploma in Palliative Care in Aged Care at Flinders University and is a member of Services for Australian Rural and Remote Allied Health (SARRAH) and the international Social Work and Palliative Care Hospice Network. He is also a social work representative on the Tasmanian Allied Health Network. David has been a Director of the AASW since 2015.



ANITA PHILLIPS

Director

Since graduating from the University of Melbourne forty years ago, Anita has utilised her social work knowledge and skills in regional northern Queensland, the Hunter region and in metropolitan Sydney, Melbourne and Canberra federal, state, local and non-government agencies. She has also completed a Master of Public Administration, a postgraduate Diploma in Legal Studies and is a graduate member of the Australian Institute of Company Directors. Anita is currently engaged as sessional university lecturer in the ACT and Queensland and as a public policy consultant. She has been a Director of the AASW Board since 2012.



BARBARA MOERD

Director

Barbara has been a social worker for 24 years, primarily practicing in the statutory child protection, family support and mental health fields. For 14 years in the United Kingdom, she worked for the London courts in child protection and family assessments and in Edinburgh for an after-hours crisis service in mental health and child protection referrals. Barbara has also worked in brain injury rehabilitation in Sydney and is a graduate member of the Australian Institute of Company Directors. She is currently Discipline Head for Social Work at the Tasmanian Health Service South. Barbara has been a Director of the AASW since 2012.



JOSEPHINE LEE

Director

Josephine is an Aboriginal woman with nearly 30 years' experience as a social worker. She currently works in Darwin in Aboriginal and CALD communities providing services in Aboriginal emotional and social wellbeing, family and relationship counselling, group work, community development and program development. Josephine is particularly interested in anti-oppressive, anti-racist, therapeutic and relationship-based practices as well as creative and hope-focused practices. She is a committed voluntary worker, which includes being on the AASW Board, and is currently employed as a senior school counsellor with the Department of Education. Josephine has been a Director since 2013.



MARIA MERLE

Director

Maria has 15 years' experience as a social worker. She has worked in mental health, family and children services, aged care and domestic violence and post-adoption. She is a lecturer and tutor at Australian Catholic University in Sydney and an EAP counsellor. Maria chaired the AASW's National Symposium Committee in 2015 and is also Chair of the Membership Committee. She has been a Director of the AASW since 2011.



HELEN HOPPER

Treasurer

Helen has been working in the social welfare field for 38 years, the last 21 as a social worker. She has practiced in the areas of disability, aged care and child protection in rural NSW as well as the city metropolitan area of Canberra and is currently working as Team Leader School Age North for the ACT Government's Therapy ACT. Helen has a Master of Public Administration and is a graduate member of the Australian Institute of Company Directors. She has been Company Secretary for the AASW since 2008.

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DOCUMENTING THE SCOPE OF SOCIAL WORK PRACTICE

SEBASTIAN CORDOBA

The AASW's *Scope of Social Work Practice* series highlights the significant role and contribution of the profession across numerous fields for social workers, employers and clients. It is also a useful advocacy tool.

On the AASW's website you will find a series of [Scope of Social Work Practice documents](#) that provide clients, social workers and employers with an overview of the role, contribution and evidence informing social work practice within a number of fields.

There is a scope of practice document for Health, Mental Health, School Social Work, Disability, Aged Care, Child Protection, Hospital Social Work, Social Work with Refugees and Asylum Seekers, Case Management & Care Coordination, Psychosocial Assessments, and more are being developed. Social workers who have significant experience in the field,

from direct practice to academia, have contributed to their development.

Each document highlights the crucial function and services that social workers provide and that employers and clients can expect. Social workers can use them in their workplace as an education and advocacy tool and also work with the AASW to ensure the series continues to reflect the variety and complexities of social work practice.

As the representative body for professional social workers in Australia, the AASW will also use the Scope of Practice series as an advocacy tool, for the profession and its clients, at many levels of our society, including government and the private and not-for-profit sectors.

To contribute to the *Scope of Social Work Practice* series, or find out more, please telephone 03 9320 1099. •



About the author

Sebastian Cordoba is the AASW's Policy and Advocacy Officer, a social worker and a PhD candidate at RMIT University. His social work practice during the last several years has been in educational and health care settings working with children, young people and their families, specialising in trauma and crisis work.

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REVIEWING ASWEAS: THE TENSION BETWEEN REGULATION AND ENABLEMENT

DR BRENDA CLARE

Complex relationships must be negotiated during the review of ASWEAS in order to meet the AASW's responsibility as regulator, recognise the interests of multiple stakeholders and facilitate academic and professional creativity.

Since the 1960s, the AASW Board and executive has been mandated by the AASW Constitution to articulate the principles, standards and graduate attributes for social work education in Australia, and to assume responsibility for accrediting social work programs against those standards. The AASW is also responsible for the assessment of overseas-qualified social workers' eligibility for membership. In the absence of government regulation, voluntary self-regulation is essential for the quality of social work education and practice, for the reputation of the profession and, ultimately, for the safety and wellbeing of service users. Now the current iteration of Australian Social Work Education and Accreditation Standards, better known as the ASWEAS, is under review.

Item 4.2.2 of the IFSW Global Standards for the Education and Training of the Social Work Profession (2004) identifies a number of core domains of professional identity. Included in these is:

The development of the social worker who is able to deal with the complexities, subtleties, multi-dimensional, ethical, legal and dialogical aspects of power.

The capacity to manage the complex power relationships identified by IFSW is a critical requirement for those undertaking the ASWEAS Review. In its delegated role as regulator, the AASW has the authority to enable or prevent courses gaining accredited status. However, its success as a regulator relies far more on the enabling, relational power of the officers and staff responsible for shaping and implementing the accreditation process. There is a delicate balance between the AASW's developmental role in assisting social work programs to ensure that all social work students have access to education that meets national standards and in meeting our regulatory responsibilities when those benchmarks are not met. The successful implementation of the ASWEAS standards also relies on the quality of

the Association's relationships with its two major partners in social work education: The academic institutions and employers, whose ability and willingness to resource social work programs and to provide opportunities for applied learning in the field, are critical to the quality of the teaching and learning experience of students.

The second level of sensitivity that must be addressed in the ASWEAS review reflects the structure of the AASW as a membership-based organisation. The nature of the power relationship between AASW members and their executive is complex, subtle, and challenging. On the one hand, it is critical that the AASW recognises the interests of members and their voice is represented in the review process. On the other, member interests are varied, competing and sometimes conflicting; we speak with many voices. The Board and executive's responsibility is to specify baseline graduate attributes and identify the aspects of professional education that must be monitored to ensure graduate achievement. This process must be transparent and clearly argued.

The current Board and professional staff of the AASW are committed to a transparent and inclusive process which seeks to engage members and other stakeholders. Members can find information and opportunities to comment during the review on the Association's website. As members you are also encouraged to participate in invited dialogues between the branches and members of the Board. The Education and Standards Committee, which advises on the ASWEAS review, includes representatives from the Heads of Schools Council, the National Field Education Group, employers, and private practitioners. The newly formed Student Council ensures the presence of the student voice. Finally, the AASW is seeking the views of service users through representative agencies and peak bodies. All of these groups will be represented at a round table event to be held in Melbourne in mid-August.

Representatives from the Accreditation Panel responsible for reviewing courses will also attend the forum.

The desired outcome from the ASWEAS review is an agreed regulatory framework that clearly articulates mandatory graduate attributes, teaching structures and processes for social work programs and also recognises and facilitates academic and professional creativity within these parameters. We all have a stake in great educational outcomes for social workers in Australia so please participate in this important review.

For more information about the [ASWEAS review](#), visit the AASW website.

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About the author

Dr Brenda Clare has been a social worker for over four decades. She specialised in the fields of child protection and out-of-home care for 25 years before taking a break to complete her PhD which focuses on social work education and professional identity. In 2001, Brenda joined the staff of the UWA Social Work Program as Fieldwork Coordinator for almost a decade. She is now a Director on the AASW Board and the Chair of the Education and Standards Committee.



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**With social work,
you can do so many things,
you can get close to people
and work with them.**

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MARIE-LENA KUELPMANN

MEET OUR 10,000TH MEMBER!

On 1 June, the AASW signed up its 10,000th member after a very successful Board and Branch Management Committee campaign to grow the membership and make us stronger by the end of the financial year.

Her name is Marie-Lena Kuelpmann and, as a new emigrant, she had just completed an AASW International Qualifications Assessment of her German degree for employment in Australia when she signed on as a member.

'I joined the AASW for its professional social work standards, code of ethics and accreditation,' Marie-Lena said. 'As a new emigrant, I believe these will assure employers of my skills which will help me get work in Australia.'

'In Germany we do not have these standards; we have a university accrediting body but do not have an AASW equivalent yet.'

Marie-Lena graduated in Freiburg with a Bachelor of Arts in Social Work early last year. During her studies, she completed a unique fieldwork placement at an equine-assisted therapy centre where she worked with clients with disability, mental health and behavioural problems and their families to empower them and build self-esteem. In another fieldwork placement, Marie-Lena co-assisted clients with housing, health care, emergency relief and counselling and conducted education with local communities to promote understanding and empathy.

'I also worked at a youth centre while I was studying and for Caritas, one of the largest welfare associations in Germany, with people who have dementia, and I loved both these jobs,' Marie-Lena said.

After moving to Queensland's Gold Coast recently with her Australian-born partner (having lived here for a while when she was in high school and applied to become a permanent resident), Marie-Lena is now looking for work and considering which social work field to practice in.

'I am deciding maybe mental health and aged care but I also have an interest in social work with migrants and refugees after specialising in this as part of my degree,' Marie-Lena said.

On why she became social worker, she said her mum is an occupational therapist and she herself had, from a young age, always had a heart for people who needed extra assistance.

'I thought about studying psychology but that is very difficult to get into in Germany. With social work, you can do so many things, you can get close to people and work with them,' Marie-Lena said.

'I really enjoy helping people if I can, especially ones who have it harder than others.'

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WHY I BECAME A SOCIAL WORKER

So far during our 70th anniversary we have reflected on the story that led to the foundation of the AASW in 1946 and on our successive achievements. Now we have asked our members to reflect on why they became social workers.



AMBER JOHNSON

Amber sought social work as a career path after completing studies in society and culture at high school. She gained an interest in understanding the ways in which individuals and families operate within the greater systems in society and the barriers that can prevent people from achieving their potential.

Initially, her tertiary social work study interests were in child protection and family mediation but as she progressed through the learning curriculum, studying a broad range of courses in law, policy, welfare, youth, mental health, health and ageing, and community development, she says her interests expanded.

'Social work as a profession is rich in diversity and offers many different rewarding careers. I experienced student placement in a non-government housing organisation and in a government hospital setting,' said Amber.

'I enjoyed the vast difference in practice between the settings and have come to realise there are endless opportunities of practice contexts to explore in my new career.'

Amber says it is satisfying to know as a new graduate that she can assist people from all walks of life, at all developmental stages, in a range of different practice contexts. Ultimately, developing flexible and adaptable skills to assist others is why she became a social worker.



GARY BANKS

The easiest way for Gary Banks to answer the question of why he became a social worker was to talk about what makes the profession unique.

'Put 50 social workers in a room and there exists core values and beliefs that underpin social work practice,' he said.

'Those common values include social justice, equity of opportunity, enabling the most disadvantaged, working within a systems-based philosophy, and the inherent dignity and rights of the individual and would see all 50 social workers in the room very quickly finding common ground and enthusiastically engaging with each other.'

Gary is a school social worker within the Victorian Department of Education and Training and has observed the bond between social workers around the world for 35 years.

'I never cease to be amazed and appreciative of the great fortune I have had to choose social work as my chosen career, even though I have worked in leadership and management roles for many years,' he said.

'It is the principles that underpin social work that continue to direct my day-to-day practice and I hope the leadership I have provided to multi-disciplinary teams. We serve in a most honourable profession where the needs of the client are pre-eminent and central to what we hope for their future.'

Gary says it is the obligation and duty of social workers to pass the values that attracted them to the profession to those who follow. 'Social workers achieve great things when our core values direct our work and lives.'



ANNABELLE WYNDHAM

Annabelle Wyndham studied social work from 1966 to 1969 at the University of NSW when it was a new four-year course, rather than an add-on to an Arts degree.

'It was an exciting time, with enthusiastic lecturers and the wonderful, inspiring Norma Parker as head of school,' Annabelle said. 'I was excited about it too, wanting to challenge my upbringing and the world arising from the new understandings I was gaining from women's liberation and the anti-Vietnam War movements.'

While not endorsing these views, Annabelle said the course actively encouraged the students to think for themselves and critically evaluate social issues.

'I loved this. I also appreciated the fact that the course taught us skills - we studied social work methods, case work, and group work and community development as separate subjects - which we could take into future employment.'

She ended up working in a wide variety of settings on social and personal issues briefly in England and in NSW and the ACT.





BESSIE ANTONE

Currently studying her Masters in Social Work through Charles Sturt University, Bessie Antone says she cannot see herself in any other profession.

'I often think that there was not one motivation or desire that drew me to social work but many,' Bessie said. 'For me they include being able to promote and advocate awareness of injustices in our society through our professional standards and also working with people, families and communities to promote positive change and address inequalities through advocacy.'

Bessie is also drawn to social work because, she says, it is such a diverse and multi-skilled profession. 'There are so many differing roles and ways of practice but we are all united in our values and pursuit of social justice,' she said.

'I am particularly interested in child and adolescent mental health and counselling and plan, when I graduate, to work with children and families because I am interested in developing skills early in life to promote a positive future.'



DORIS TESTA

The answer to why Doris Testa became a social worker is embedded in her work as an educator. As a primary school principal, she says she was always interested in how student wellbeing influenced student achievement.

'I knew that social work could provide the necessary theory and practice insights to strengthen and promote supportive student wellbeing structures that I and my staff wanted to implement in a school setting.'

'This led inevitably to my completion of postgraduate studies in welfare and social work. Seventy-two social work students and twelve school-based community development and student wellbeing school-based programs later, I left the school to complete a PhD that focused on the contribution of social work to student wellbeing.'

The combination of education and social work has been enriching and continues to underpin Doris's current work as a university lecturer and researcher.



SHARON MCCALLUM

According to Sharon McCallum, she became a social worker due to divine intervention. Twice!

'I saw an episode of Four Corners about Elsie, Australia's first women refuge. Personal experience told me that women and children needed a safe place,' she said.

'And then, when my country high school did a trip to James Cook University, Professor Grichting told me if I wanted to work in women's refuges I should do social work.'

'And I did. Thank you Professor Grichting.'



DIANE CASS

Social work was not something that Diane Cass thought about when she was a teenager or young adult trying to work out what to do with her life. 'I was a bit downtrodden and, truth be told, I probably needed something confrontational to start my adult work life.'

With very little conscious forethought, she said she chose to become a lawyer. 'I was lucky that this worked well for me and I had a pretty good job for a while. Then my husband and I decided to start a family. Three children later we decided to move to Australia for a better life.'

Due to the very different judicial systems, Diane had to start her career all over again. 'I lost a few years studying a variety of topics for interest without really focusing on any one subject. Then I read a short paragraph in a university prospectus about social work and I liked what I read.'

Diane said she spent some time scrolling around the AASW website and found it was full of interesting information. 'I found more detailed descriptions about the role of social workers and realised that social work would be perfect for me.'

Once she started on the Master of Social Work course at Flinders University in South Australia, Diane said she realised the profession really suited her personality.

'I would sometimes struggle with the hard and often times unfriendly attitude that is necessary in law. Social work allows me to be myself and work in a field that complements me instead of working against my belief system.'

'Ultimately I feel that I became a social worker to reach my potential and be happy doing so.'



WINIFRED GEORGE

Winifred George was born in a country where she knew nothing about social work. 'But one thing I knew was I was a caring person. I grew up caring for people. In my early primary years, I was always looking after other children in my class,' she said.

In her teenage years she continued taking care of her friends. 'A friend disclosed that she was sexually abused by an adult male when she asked him for some food. My heart sank when I heard about it. I could not take it off my mind. Whenever I saw that adult I wanted to do something to him. I could not report it because no one cared. People blamed the young girl for going to meet him in his house. Where is social justice in some parts of the world?'

Winifred decided to share her food with that girl so that it would not happen to her again.

During her work, she supported families from slum areas. 'One day I visited a family where a mum and her three children were starving to death. Mum had a five month old baby and could not breastfeed her because she had not eaten and could not produce milk,' Winifred said. 'The other two children were also starving as there was no food in the house. Baby was not only hungry but seriously sick. I entered the house and everyone was lying on the floor. Mum could barely speak, but took the courage to explain to me that the family was starving.'

She ran and got food and drinks for them. 'I then took them to the hospital where they were treated. I informed the office of the situation and they provided some extra food for them. I felt so fulfilled that I was able to help this family.'

'I decided to do social work because I wanted to continue to help people who are suffering in one way or the other.'



RON McCOMISKIE

After being made redundant as an industry trainer for many years, Ron McComiskie was successful in securing a job as a social care officer working with the homeless in a night shelter.

He found the experience very humbling. 'In my earlier years, I was always interested in justice and opportunity and felt very strongly about people being disadvantaged as a result of them being seen as different and being discriminated against,' he said.

'My work with the homeless gave me a great insight into to people most in need.'

Ron worked with clients experiencing a range of issues, such as drug and alcohol problems, domestic violence, mental illness and people subject to criminal justice services.

'I was astonished about how many individuals on the streets were developing a mental illness and this was not being identified as they were transient and not registered with a GP,' Ron said. 'This led me to undertaking training as a social worker.'

He is now a hard working, professionally accredited and registered social worker with 25 years' experience and a background in mental health and criminal justice social work.

'I've gained my experience in numerous settings, including working with the homeless in a night shelter and rehabilitation setting, psychiatric hospital, community mental health and public protection teams, prison environment, family care and assessment and in school and community care settings,' said Ron.

He is an AASW accredited social worker in Perth and a registered social worker with The Scottish Social Services Council (SSSC).

'My current role is as a Service Manager for Mental Health Recovery programs at Uniting Care West,' Ron said. 'Uniting Care West is a not-for-profit community services agency of the Uniting Church in Western Australia that touches the lives of thousands of families and individuals each year.'



JENNY EDGE

Jenny Edge distinctly remembers the two occasions that tipped the balance and she chose to leave her nursing aspirations for a career in social work.

'I was a Diploma nursing student when I witnessed an exchange between a professional and a client on a needle exchange program,' Jenny said.

'The client was returning his used needles and was met with silence and judgemental body language. Instinctively I saw this as disempowering and disruptive to his health seeking behaviour and somehow I wanted to change this.'

The second occasion occurred during a mental health assessment, when a CALD client felt safe enough to reveal a hidden suicide attempt. 'I knew then my potential was with the psychosocial wellbeing of people and after reading up on the social sciences, I knew I needed to leave nursing,' Jenny said.

This decision involved turning down a \$20,000 scholarship she had been granted to continue her nursing career. 'I could not proceed for the financial benefit even though I was caring for my chronically ill husband, and chose a study path that would take three times longer to complete with no financial incentive.'

'Logically it was a decision that did not add up, but I needed to follow the inner voice.'

Over the next six years while she was studying, both of Jenny's parents died and then her husband, within 18 months.

'It was during this time I became my own counsellor, and although nothing could stop the profound grief, the education I was receiving provided a deep understanding of the experience,' Jenny said.

In 2015, she was given the opportunity of an International placement in India. 'It was in India that I learned Mahatma Gandhi, the world's ultimate social worker, was born on the same calendar day on which my husband died, and which has since been declared World Non-Violence Day.'

'I prescribe to the notion of the social worker as instrument, and going to India confirmed that my inner voice was integral to a tuned instrument, and that we should always reflect on motives to keep our practice authentic,' said Jenny.



JOSIE McSKIMMING

'In my final year of school, I was sure that I was going to study medicine,' Josie McSkimming said. 'Yet I was uneasy and restless about the choice I was making.'

She had a keen interest in understanding the world and people's ways of being in it, and was acutely sensitive to issues of injustice and inequity. 'At school, I remember being called a "socialist bitch", which was quite an insult in those days! I even surprised myself by wearing the moniker with some pride.'

Josie said she was reading a lot of poetry: Ted Hughes, Sylvia Plath, Rimbaud and Baudelaire (as 17 year olds do, or did in the seventies). 'It seemed that the world of thinking, feelings and identity was much more interesting than medical pathology and diagnosis,' she said.

Then a terrible event occurred. An ex-boyfriend of hers murdered his mother. 'I was one of the first he told,' Josie said. 'The event was so dreadful and incomprehensible that it cemented my conviction that medicine would not be my choice for university but social work.'

'I thought that being a social worker may help me understand this tragedy and that it would also, in some ways, be involved in prison reform,' Josie said, acknowledging that this sounds like the idealism of a 17 year old, which of course it was. But the commitment to understanding and assisting people through the crises of life, as well as the social organisations that impinge upon them, has remained.

She did, however, feel the pressure to return to medicine was huge. I was told I would be wasting my brains doing social work. I enrolled anyway and graduated at 21. More recently, I obtained my doctorate. My career now spans more than 30 years; while the work has been challenging and the social status and pay consistently low, it has been absolutely the right choice,' Josie said.



SHIRLEY PEPPLER

'In 1985 I began my higher school certificate; in the 60s it was common to leave school after Year 10,' Shirley Pepler said.

'I had a solid work history and a young family. An Army friend and colleague from my teenage years had moved on and studied social work. In those pre-computer, expensive long-distance phone call days, I asked her in a 12-page letter what the difference between psychology and social work was.'

It was her answer that clinched the deal for Shirley. 'Psychologists fit the person to the theory; social workers fit the theory to the person. Thanks Chris! I hadn't yet finished Year 12 before being accepted by the University of Queensland to study social work.'

Of course, life is complicated and while she was working a full-time job, Shirley found herself pregnant with baby number three. 'I used the student counselling services, signed up for just one subject that first semester, and graduated 8 years later,' she said.

Initially, Shirley said she decided on social work because of her life experience of personal suffering and hardship, and knew she loved people work.

'I was a public servant at the Department of Social Security (now DHS) at Woodridge. I harassed social workers to find out more about the profession. Luckily I stayed open-minded when I was told the Department was a fiscal organisation, not a welfare organisation,' Shirley said.

'I sometimes wondered if I provided more of a social work service to our mutual customers. While studying my degree, I took on board the opportunities for self-reflection and self-knowledge that were very seriously encouraged. Anyone who I have supervised can attest to my obsession with reflective practice.'

Shirley realised she also had a well-developed sense of social justice and natural tendency toward leadership and advocacy. 'Little did I know my orientation to counselling would become the strong community development and feminist/anti-oppressive framework that remains today,' she said. •



A portrait of Anthony Schembri, a man with a beard and mustache, wearing a dark suit jacket over a light blue shirt. He is smiling slightly and looking towards the camera. A small, colorful pin is visible on his lapel. The background is a blurred, light-colored wall.

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**This issue of
Social Work Focus
highlights the
contribution of social
work leaders in a
variety of settings from
Cambodia to New York**

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ANTHONY SCHEMBRI
GUEST EDITOR

SOCIAL WORK LEADERSHIP AND MANAGEMENT

ANTHONY SCHEMBRI

Much has been written about leadership and management over the years in popular culture, academic discourse and in professional publications. Many leadership and management styles and theories are debated and taught and we can all recall in our own professional and personal lives the positive (and perhaps negative) impact of people in leadership roles. But what is the contribution of the social work profession and by social workers to leadership in management?

This issue of *Social Work Focus* highlights the contribution of social workers in a variety of settings from Cambodia to New York and in response to dilemmas such as managing tricky workers. There are features about social workers transitioning to leadership and management roles and we are invited to step up and exercise leadership in our organisations.

I am fortunate to have what I consider the best health leadership role in the country, Chief Executive of St Vincent's Hospitals in Sydney. Hospitals are complex and complicated organisations, operating around the clock, dealing with ambiguity, human crisis and are very expensive to run. Hospitals are rightly, highly scrutinised and regulated, they are in the watch of the media, community and politicians, and there are multiple interests and stakeholders. But at the heart of it, they deliver each year millions of clinical interventions to patients and clients. As a young social work student, I couldn't have imagined I would hold this leadership role one day.

I am proud to be a social worker and while my client is somewhat complicated, and the title of my job is Chief Executive Officer, I don't turn off being a social worker. My practice is different from when I was working on the hospital wards in direct clinical service but it still draws upon the skills and teaching of my social work studies. For this reason I really connected with Joe Calleja's article, which challenges social workers to recognise that regardless of the role and job title they have, they are always social workers first. Joe's piece on page 32 resonated with me because while I don't have the title social worker in my job description, in leading and managing a complex system such as a hospital, I draw upon these social work skills and experience every day: crisis management and assessment, group work, counselling, social research, professional writing, social administration and policy.

Finally, I applaud the AASW's Australian College of Social Work for approving the creation of a Community of Practice on Leadership and Management and encourage social workers holding governance roles to support it by joining and helping the College answer the questions around the role and contribution of social work in leadership and management.

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About the author

Anthony Schembri is a social worker and the Chief Executive Officer of St Vincent's Health Network Sydney. He holds a number of board directorships and academic appointments with the University of New South Wales and the Australian Catholic University.

LEADERSHIP ANYWHERE, ANYTIME

BOBBI HENAO URREGO

Social workers have the skills and abilities to be leaders in their workplaces, they just have to harness them not only for their clients but for organisations and wider communities.

Social workers can be agents of leadership and change within any organisation or community. One example of this is Mary Parker Follett (1868–1933). She was a social worker in Massachusetts in the United States of America who became a significant contributor to management and organisational theory. Writing on her experience of leadership, Parker Follett spoke of the importance of injecting energy into situations, inspiring people, always searching for new approaches and being a part of the group. She was also clear that it's not just about the goal but how a person or group gets to the goal.

Regardless of their field, social workers today can use the advice and learnings of Parker Follett. In fact, the process of getting to the goal is one of the core beliefs of many social workers' practice, for their clients and professional colleagues. If this is the case and one looks at Parker Follett's other pieces of advice on leadership – then it's clear that in fact social workers are leaders in organisations and the communities they practice in. This can be seen in everyday interactions with clients, carers, families or colleagues of differing professions and outside agencies. Through quality improvement, research, practice improvement, education and further learning, we can see these qualities of injecting energy, inspiring people and searching for new approaches.

Leadership is not just something that can be seen in people working in senior positions; it can be evident in career spans from new graduates to retirees. Many people shy away from the term but, looking closely at some of the common theories used by social workers, one can see how leadership fits comfortably into them. Systems theory, client-centred and solutions-focused theories all require big-picture thinking, an examination of connections, and the circumstances of those being worked with and how they fit with what needs

to be done. It may be used to help individuals, families, even teams or programs; however, what social workers are doing is using theory and knowledge to provide some form of leadership – that is, leadership is already built into social work practice. Sometimes it only takes this simple realisation to harness something. Social workers are leaders, how they use their skills can show these leadership qualities.

If it is really so simple, how does one use their already formed skills for leadership? Being proactive is necessary – being on the lookout for opportunities, areas of potential contribution. Write your ideas down. There may be a plethora of them that are realistic and achievable but not all at once. Keeping a record of them allows for reflection and will make room for collaboration with others over time. A record will also provide you with an opportunity for your ideas to develop and transform and can serve as documentation that can shape publications, submissions, resource developments and any presentations that stem from completed work and share your knowledge.

In any role where one is a leader, it is important to remember your social work training. Core to that training, and the experiences of the profession, are active listening, and the use of verbal and non-verbal communication and critical reflection. These skills are not always harnessed by social workers and other professionals in our work environments but they are inbuilt leadership skills waiting to be utilised in new ways. Be prepared to venture into the exciting world of using your skills not only for clients but also for the benefit of organisations and wider communities. Carly Fiorina once said, 'Leadership comes in small acts as well as bold strokes', so make sure that you pay attention to both.

About the author



Bobbi Henao Urrego is Social Work Manager at Sydney Hospital & Sydney Eye Hospital and has extensive experience working in New South Wales Health. She is currently completing a Masters of Public Health and Masters of Health Management. Throughout her career, Bobbi has been passionate about quality improvement, service delivery and development, and been an advocate for the perspective and skills that social workers can bring to an organisation or service.

HOP, STEP AND JUMP INTO MANAGEMENT

CINDY SMITH

Cindy Smith has worked in management roles for most of her social work career and is interested in how social workers obtain the skills and competencies required, especially for executive-level roles.

The undergraduate social work degree provides social workers with foundational skills to transition into management positions but many of the competencies utilised by social workers in engagement, assessment, critical thinking, group work facilitation, interviewing and supervision, are all key skills required in management and leadership positions.

Often social workers will move into their first team leader positions because they are good at their practice, they get along well with their peers and their skills are sought out. From team leader it can seem like a hop, step and a jump and, before you know it, you are a general manager with over 60 staff (from a range of disciplines) and a considerable budget to match.

When social workers move into different management roles, skill development and competencies grow with the associated demands and expectations. In my first role as team leader, I relied on the training of my undergraduate degree, in particular my program management subject, and I also attended some skills-based training about managing conflict, professional supervision and managing people. While this was all good foundational training, I learned (especially moving from team leader to manager and from branch manager to general manager) that I needed specific training pitched at the different levels and with a different purpose.

To build management and leadership skills it seems that the process is similar to hopscotch, with one jump invariably leading to another jump and so on. Many executives find out what they need when they are already in the role, faced with complex tasks and everyone wanting something from them, including the CEO. The tasks and competencies required at an executive level usually exceed what is covered in an undergraduate degree: negotiating, often with government departments, on behalf of the organisation at a strategic level, building multi-million dollar budgets, organisational

compliance and governance and complex staffing requirements. Often we don't know we need to learn more until we are exposed to a new way of thinking or new information. Also, as important as training is, equally important are the people you meet along the way. Developing relationships with mentors has been critical to my personal and professional development; they allow me space to discuss my career in management as well as areas relating to my work.

Where do social workers at the executive level of management gain the required skills and competencies? The different areas of social work practice can greatly influence the management training and competencies that individual practitioners are exposed to and need to obtain. In health, where I have worked for many years, there are numerous associations that assist with executive career and leadership development.

Speaking to social workers in management roles, there seems to be a great diversity of expectation around the required skill sets and competencies, and the ability of individuals to obtain these. In an executive role, working closely with boards of management, social workers are required to have proven skills in business development, strategic thinking, financial planning and management, corporate governance and compliance, and whole-of-organisation risk management. However, in my experience, due to funding constraints, the training budget for executive staff skills development was minimal and if you needed (or wanted to obtain) the skills, you needed to organise and fund it. The Australian Association of Social Workers (AASW) has identified the need to develop a specific management and leadership stream of training and continuing professional practice (CPD). This will be a wonderful support for social workers who are interested in management and leadership roles. •



About the author

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Cindy Smith was a National Vice-President of the AASW until her recent appointment to the role of Senior Manager Policy and Communications. She has over 15 years' experience as a social worker and has held a range of positions including housing worker, generalist counsellor in community health, team leader in out-of-home care, counselling team program manager and general manager of a child, youth and family directorate in community health. She is a graduate of the Australian Institute of Company Directors, fellow of the Australasian College of Health Services Management, and an Accredited Mental Health Social Worker.

SCRUM IT UP: ADAPTING AGILE PROJECT MANAGEMENT FOR EFFECTIVE DECISION MAKING IN SOCIAL WORK SETTINGS

JACK DAVENPORT

Social work leaders, particularly in middle management, face daily challenges in maintaining team cohesion and motivation. Pressures in workload reduce an individual worker's capacity, effectively placing them into 'silos', and undermine their ability to engage in wider team efforts. Scrums, adapted from agile project management tools, can help provide solution-focused approaches to mitigate these problems.

Traditional team meetings, usually characterised by lengthy sessions driven by an inflexible agenda, simply give lip service to the idea of developing team cohesion. These meetings can become unduly focused on discussing problems, without resolving them. Hours of activity can be lost with everyone seated around a table resolving nothing and leave a sense of detachment from team processes.

The pressures of the work environment can also inhibit effective decision making. Leaders need to provide an effective foci of discussion so that every meeting develops a course of action, otherwise why have the meeting? Without an agile and efficient system, the risk increases that decisions are not made, and the worker may leave the discussion as directionless as when they entered.

Scrums are a technique that can assist leaders in promoting an active and engaged decision making process in their teams. A scrum should be held at the start of each day or working period, with the whole team gathered in a circle, standing up, but also with a focal point on which to record the session (usually a whiteboard). Why standing? Simply to promote a more efficient process and prevent 'drag' in the meeting. Recording the session means the group can refer to a single point throughout the day as a collective reminder of their goals and achievements. The scrum should be brief, ten minutes' maximum. It is vital for the leader to keep the conversation progressing and develop a sense of rhythm that sets the tone for the day.

A scrum's greatest strength is inducing the whole team to collaborate at least once on a daily basis, regardless of individual priorities. It can be focused on highlighting achievements from the

previous day and on identifying goals for the day ahead. This helps motivate the team by framing outcomes based on positive achievements. Alternatively, if the previous day had a particularly challenging scenario, the scrum can act as effective information sharing for the team to process collective solutions and resolve outstanding problems, as well as prioritise outstanding tasks.

In crisis situations, scrums allow key players to gather around and focus on the central problem, possible solutions, and appropriate tasks to deliver outcomes. The role of the leader is to prevent the conversation revolving purely on analysis of the problem, or extensive story telling (re-telling of case history). Rather, the leader focuses the conversation on solutions, encouraging workers to identify existing strengths that may help mitigate the crisis, and developing a plan of action for task completion. There might be a number of scrums over the course of the day, to keep relevant team members updated, and review progression. Used in this way, scrums help track the course of decision making and at each stage focus on solution-based approaches.

Social workers are often inhibited by systemic pressures that disrupt team functioning and push individual workers into 'silos'. Scrums can be an effective tool for leaders to promote team cohesion and give the whole team a sense of ownership for decisions and planning. They can become a second nature activity for the team, and not always one that is dependent on a single source of leadership to be present; where every team member has ownership in decision making and problem solving. The role of the leader in a scrum is to facilitate and progress efficiently towards a solution rather than direct and manage and this empowers workers in their case management. •

About the author



Jack Davenport completed his Master of Social Work in 2010 and has worked in child protection in a number of states and settings in Australia, including remote country. He is currently a team leader with the Department of Child Protection and Family Support in Western Australia.

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HOLDING BACK AND GOING FORWARD: SOCIAL WORK'S RELATIONSHIP WITH LEADERSHIP AND MANAGEMENT

DR ROSALIE POCKETT



About the author

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Dr Rosemary Pockett is an Honorary Senior Lecturer in the Faculty of Education and Social Work at the University of Sydney. Throughout her career she has held senior social work and allied health services leadership and management positions. Rosalie has recently developed an online SWOT course for practitioners transitioning to leadership and management roles.

Moving into management and leadership roles can raise issues about the work environment, new skills and moving away from practice.

For members of most professions the move into management and leadership roles often raises concerns about the work context, the potential move away from practice and the need for new skills to be acquired. However for social workers in addition to these are recurring concerns about the perceived dichotomous relationship between social work practice and management practice.

In a workshop about practitioners transitioning into leadership and management roles held at the AASW National Symposium in 2015, participants were asked to complete a strengths, weaknesses, opportunities and threats analysis of this transition for social workers. The results are summarised in Table 1.

STRENGTHS • Excellent communication skills • Strong values and ethics • Good organisational and problem-solving skills • An ability to understand systems • To recognise skills and abilities in others and maintain a team spirit • To critically reflect on situations • To mentor and supervise staff • To acknowledge gaps and pursue solutions • To juggle risk and be confident in decisions	WEAKNESSES • Lack of confidence • Self-doubt • Lack of experience and knowledge about management • Lack of positive role models • The distance between the management role and the service role • The potential to be de-skilled • A mismatch between social work values and those of management • Feeling disempowered by the dominance of the management discourse • Feeling uncomfortable in the position of 'expert'
OPPORTUNITIES • Availability of options to act up in senior roles to gain experience • Financial rewards • Management training within organisations and externally • Self-directed learning • Joining networks that hold influence • Seeing opportunities • Taking the initiative • Standing up when opportunities arise • Undertaking project work • Using supervision to focus on career planning, leadership and management	THREATS (or challenges) • A love of clinical work • A lack of interest in assuming a leadership or management role • Gender issues and the perception that male social workers move into leadership and management roles quickly • Social work education lacking leadership and management perspectives • A lack of professional identity as a leader • Lack of role clarity • Lack of leadership and management programs targeted at social work practitioners

Table 1: SWOT analysis of social workers transitioning into leadership and management roles

Although social workers have a skill set that can support a move into a leadership or management career, in many cases a pervading hesitancy or sense of compromise casts a shadow on their willingness or desire to do so.

The perception of a problematic relationship between social work and management can be viewed as having many features of binary positioning where social workers who move into such roles are perceived as abandoning their social work vocation and values, either by choice or necessity, and losing the capacity to see the world through a social work lens. But is such thinking helpful to the profession or to those with whom social workers interact in practice?

The terms 'leadership', 'management' and 'supervisor' are often interchangeable but there are some subtle differences. For example, leadership may be a part of a management position or a role. It may also be an equal partner alongside management responsibilities and leadership may overlap with the management roles. Supervision may also be an element of management or have other characteristics that relate to professional practice. Factors such as organisational context, individual qualities, profession-specific perspectives and the nature and type of problems that are being faced determine the degrees of difference. Underpinning these are relationships of power, influence, authority and authenticity.

Management as troublesome knowledge

In social work education, we speak of students coming to the threshold of learning when they are challenged by new understandings and beliefs and this is seen to be troublesome. Moving across the threshold to a point where new ways of knowing and understanding are fully integrated into learning is a process during which students occupy the liminal spaces where they have not yet realised their relationship with new understandings and different ways of knowing the world. New, different and

challenging knowledge is also part of professional practice and behind the reluctance of some social workers to transition to roles where leadership, management and supervision remain troublesome knowledge. For other social workers that have already taken on such roles, they may feel the need to continually justify their move to maintain their professional credibility. Perhaps these social workers are also occupying "liminal spaces" where taking on leadership, management and supervisory roles and retaining a professional sense of themselves as social workers, has not been fully realised?

In day-to-day practice it is not uncommon for social workers to express feelings of powerlessness in work circumstances, for example in client and community practice, in relationships within their organisation and those with external agencies. Finding a way through such situations and taking a critically reflective stance can be transformative and lead to social and personal change. Now considered a foundational approach in professional practice supervision, critical reflection can also be an effective way of dealing with complexity, risk and uncertainty where new understandings and new narratives can reposition the social worker, their practice and their context. In a similar way, using critical reflection to unpack the dominant discourses and assumptions made about leadership and management roles and social work practice can be a helpful exercise for those either considering a move to or already in leadership and management positions.

Along with transformational learning, critical reflection and contemporary understandings of the organisational context, recent leadership and management literature has drawn attention to inclusive and participatory leadership as key features of effective leadership and management in the twenty-first century. Inclusivity and co-production are features of new integrated leadership in human service organisations where all stakeholders are included in the planning, policy development and decision-making

process. This includes engagement with people who use services, caregivers, staff, Board and committee members, community members, and internal and external regulators such as government departments. An emphasis on co-production offers people who use services a chance to influence how organisations develop and change. [The Social Care Institute for Excellence \(SCIE\)](#) in the UK has developed some very useful, evidence-informed resource material about these approaches.

Striving towards inclusive leadership and management within organisations is a challenge for leaders and managers and an approach one that sits well with the values and practice stance of social workers.

Leadership, management and supervisory roles are, of course, not suited to everyone. For those seriously considering the move as part of their practice career there are many strategies that will support the process. Leadership and management roles need to be seen differently – whether it is through crossing the threshold or critical reflection, or through a critical engagement with new and potentially inclusive management approaches. Another very effective strategy for those thinking about such a move is to write a new professional biography or narrative about themselves as social workers engaged in social work leadership practice. This can re-interpret professional identity and facilitate self-efficacy – both fundamental elements to a successful transition.

The significant contribution that social workers can make to the leadership and management discourse for the benefits of those with whom they work needs to find a more prominent voice in social work education and practice. Then perhaps such a transition will no longer be considered as an uncertain compromise but a part of the emancipatory vision of social work practice. •

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LESSONS IN HEALTH SOCIAL WORK LEADERSHIP: REFLECTIONS OF AN INTERNATIONAL SCHOLARSHIP 2015

LORRAINE XAVIER-AMBROSIOUS

A scholar's view of her experience of the International Enhancement of Leadership Program delivered by the Mount Sinai Department of Social Work Services in New York.

The Department of Social Work Services at Mount Sinai was established in 1906 and currently has approximately 350 social workers who provide services (inpatient and outpatient) throughout the hospital and in a wide variety of connected programs, including schools, an adolescent health centre, and a visiting doctors program. It is one of the oldest and largest hospital social work departments in the United States and enjoys an excellent relationship with both hospital and medical school staff.

The social workers generally work in multidisciplinary teams and the department takes pride in encouraging its social workers to excel in their careers, develop innovative programs, carry out research, and publish their findings. Approximately 30 members of its staff are on the faculty of the Department of Preventive Medicine of the Icahn School of Medicine at Mount Sinai. Social workers teach medical students and students in genetics and public health. Many are also involved in research.

Our workshops, conducted by Dr Gary Rosenberg, focused on the broad concepts of leadership and management that require strategic thinking and relationship building. Various change models and leadership theories were discussed, reminding scholars that effective leadership is a process that includes self-regulation and awareness in order to develop further as an authentic leader.

We often forget that leadership is a process of influence and you need followers to be able to lead. As cited by Jim Collins in his book, *Good to Great in the Social Sector*, 'True leadership only exists if people follow when they have freedom not to. If people follow you because they have no choice, then you are not leading.'

Very often as social work leaders or managers we struggle with the balance and trying to achieve congruence between our social work values and business principles on which the

healthcare organisation operates. One of the biggest lessons I will carry with me is what Dr Rosenberg called a 'one-minute elevator conversation' crafted in preparation for health management and executives when asked what does social work do? What is its value add? Since returning from New York, I have developed and refined my one-minute elevator conversation and it is now a handy trick in my toolbox.

The Mt Sinai scholarship also served as a gentle reminder that leadership is situational, as we are not always a leader in all matters. It is a key ingredient in the recipe of leadership, to seek guidance and advice from clinicians who are experts in their practice knowledge, and use it to inform our decisions as leaders. The scholarship exposed me to a variety of programs, challenged my preconceived comfortable notions of leadership, and propelled me think outside the box.

Stepping away from the humdrum of daily operational management to get a glimpse of how the gold standard of social work programs successfully operates was inspiring, insightful, energising and thought provoking.

The transformative process of the Mt Sinai leadership scholarship has involved the deconstruction and reconstruction of what leadership was and is. My renewed vision of leadership is as a journey that never ends; where we need to keep redefining and fine tuning our skills and knowledge. It is important to stay curious.

A very significant and surprising lesson learnt during the scholarship was the demystification of the notion of practice research. The renowned Professor of Applied Social Work Research, Irwin Epstein, through his workshops and guidance, made it evident that research can be done effortlessly, as a core component of our social work profession and practice, to validate the very essence of the wonderful work we do.

On a personal level, the concrete jungle of New York City was exciting, dazzling, noisy (the very frequent ambulance and police sirens was something I couldn't get used to) and yet sometimes, the pangs of loneliness was also felt. The lively, vibrant life of New York did extend its warmth and embrace by offering the colourful fabric of the wonderful culture of its melting pot.

From a leader and scholar's perspective, among the valuable leadership lessons learnt were the need to be a flexible and nimble leader that responds to both the organisation and professional needs and to be a serious networker who is connected to other disciplines and channels. It is the need to find common ground, putting aside the deficient mentality that haunts our field (insufficient funding, resources, staff, etc.) and instead learn to find synergies and solutions collaboratively.



About the author

Lorraine Xavier-Ambrosious, Clinical Operations Leader & Clinical Educator for Alfred Health Social Work, is a highly experienced leader in social work who has worked in both Singapore and Australia, in a variety of settings with a range of client groups. Recently, she completed a scholarship at Mt Sinai International Enhancement of Social Work Leadership (New York).

LEADERSHIP AND LEARNING IN REGIONAL CAMBODIA

ROSS LAYTON

Cambodia has dramatically changed Ross Layton's social work career, offering rewards and challenges that he had never thought possible after working in youth justice and child protection for more than ten years in Australia. He now leads a large team of social workers in Cambodia which, he says, has strengthened his own practice.

On my first day working for the Cambodian Children's Trust (CCT), wearing shorts, sneakers and the customary glisten of sweat, I entered the home of a Cambodian family. After being a social worker in two of Australia's major cities and working in London and regional Australia, I felt prepared for the home visit. Yet the poverty and disadvantage that greeted me on this visit was startling. It quickly dawned on me that the vision-blurring heat of Cambodia was to be the easiest adjustment in my new leadership role as the Social Work Technical Advisor at CCT.

I applied for the role during a busy work day in Melbourne, enticed by the idea of using my skills and experience to lead and develop a social work team in South East Asia. Within seven weeks, I was undertaking the home visit in Battambang City and beginning a journey of leadership and learning.

My work in Cambodia has dramatically changed my social work career, offering rewards and challenges that I had never thought possible. After working in youth justice and child protection for more than ten years, I thought my experience in anti-oppressive, culturally safe and strengths-based practices was well developed. And although I now lead a large team of social workers in Cambodia, it is the people in this team that have strengthened my practice.

Cambodia, while experiencing significant economic and social growth, is still recovering from the genocide perpetrated by the Khmer Rouge in the 1970s. This brutal regime targeted educated citizens, leaving the country with few tertiary trained professionals and a severely damaged education system. While vulnerable children and families have since been

supported by skilled and passionate social workers for many decades, the Royal University of Phnom Penh only started graduating qualified social workers in 2012. This means that many of Cambodia's social workers are not university qualified but do have an unparalleled thirst for knowledge, development and training. Providing it has been a large part of my role at the Cambodian Children's Trust.

CCT was established in 2007 by Australian, Tara Winkler, and Cambodian, Jedtha Pon. Initially operating as an orphanage, it has successfully transitioned to providing 100 per cent family-based care and community support to over 400 vulnerable children in Battambang City. In the absence of a government child protection system, CCT's social workers provide a full range of social work services: assessment and case management, counselling, group work, crisis response and foster care, community development and early intervention.

At the core of CCT's social work is a belief that children thrive when living in a family, and that residential care should be a last resort and a temporary measure. Unfortunately, some 49,000 children in Cambodia have become commodities in an orphanage industry fuelled by well-meaning foreign donors and volunteers. Over eighty per cent of these children have living parents and family, however in the absence of community-based supports they are placed into orphanages due to poverty. CCT provides services to keep families together, and has taken on a significant leadership and advocacy role on this issue both locally and internationally.

Equipped with this contextual knowledge, I was nervous on my

first day. While from that day, I have provided practice leadership, training and development to my team, I have also learned an incredible amount. It was immediately clear that to succeed in the role, I would need to remain in the background of CCT's social work operations and focusing on capacity building, empowering and supporting the social workers in their direct day-to-day work with children and families. I have taken on this role and adapted to a new culture, different notions of childhood and family, working in a team of Khmer speaking locals, and providing supervision and training in a different language.

When I came on board, I was asked to review the CCT's social work practices and, if necessary, implement changes for best practice. Luckily, while the social workers may not have had the opportunity to complete formal qualifications in social work, their practice is greatly counterbalanced by their passion for supporting their community, their pursuit of informal training and personal study, and years of experience working with children, families and communities. They have achieved remarkable outcomes over many years and have a thirst for knowledge about how to further develop their practice.

In leading my team and learning alongside them, we have achieved some great results in the last ten months. They include:

- Developing a case management model focused on the best interests of the child and relationship-based practice.
- Developing a model of assessment, planning, actions and review, underpinned by individual and group supervision, and critical reflection.

- Developing guidebooks on case management, vocational training, foster care, deinstitutionalisation, independent living, and child trauma, and training CCT's social workers in these areas.
- Implementing group work programs on parenting and alcohol use, and community support groups on education, child rights and child protection.
- Working with local government, UNICEF and a local orphanage to reintegrate numerous children from residential care back to their families.
- Reaching out to orphanage directors and local authorities about the issues in Cambodia, and supporting them to help keep families together.
- Supporting one of CCT's social workers to take on management responsibility within the team.
- Forming a partnership to train CCT's social workers in the Signs of Safety Approach.
- Supporting a student from Royal Phnom Penh University to complete his practicum placement, finish his Bachelor of Social Work and join CCT as a paid social worker.

And while my team at CCT have achieved these results, what really stands out is the individual stories of children and young people. There are countless case examples of increased safety, improved living circumstances and much needed opportunities for children to build a better future, free from poverty and hardship. From the children reintegrated from orphanages back to their biological families, to the mother provided with a small cart allowing her to collect and sell more vegetables from the local market. From

the victim of a serious sexual assault who has now joined CCT's education programs, received counselling and medical care, to the young disabled child who, with support from CCT, has received medical care and is now leaving his house after years of immobility. From the smiles on the faces of parents attending CCT's weekly parenting groups to the social worker who now feels confident to deliver child protection training to our partner organisations.

Working every day as a Technical Advisor in Cambodia has been an enormous privilege. This role challenges and rewards me and I strongly encourage other Australian social workers to look out for jobs in developing countries where social work practice is in the early stage of development and use their skills to build the capacity of local staff and community-based child protection systems. You take with you a host of skills and experience, but leave with so much more perspective, compassion, and a real understanding that leading in social work can only be achieved alongside ongoing learning.

To learn more about CCT, visit www.cambodianchildrenstrust.org.
To learn more about Cambodia's orphanage crisis visit www.rethinkorphanages.org

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About the author

Ross Layton is an Australian social worker currently employed as the Social Work Technical Advisor at the Cambodian Children's Trust in Battambang, Cambodia. He works alongside a team of Khmer social workers, developing their skills and practice, to break the cycle of poverty, keep families together and reduce institutionalisation. Ross previously worked in Melbourne, Perth and London, in youth justice and child protection. He holds a Master of Social Work, a Bachelor of Arts (Justice Studies), a Graduate Diploma in Criminal Justice, and a Diploma of Management.

MANAGING TRICKY WORKERS: RESOLVING THE ETHICAL DILEMMA OF DISMISSAL

DR SHARON McCALLUM

Develop or dismiss? This is the ethical dilemma facing managers when they have under-performing staff.

As social workers, we are committed to social justice and fairness. We want this for our staff and are obligated to provide it. However as social workers we are also called to work for the most vulnerable members of our society. Human service organisations exist to serve this group of people. So, what do we do when staff members are under-performing and our clients are not being assisted as they should be? When is the need for quality service delivery more important than attempting to maintain someone in their role in the organisation? These are difficult questions, and they are the ones all managers will face some time in their career.

More often tricky workers are known as difficult and underperformers. But sometimes very talented workers can become disengaged when they are managed badly. Micromanagement will often cause innovative and confident workers to become tentative and resentful. Conversely, workers named as 'difficult' can become highly commendable staff if the right approach is taken. Deciding how to manage each member of staff in order to meet their particular needs is taxing in an environment of underfunding and competition.

Ethically, our first approach is to do all we can to develop a member of our staff. The only exception to this is when workers have committed serious misconduct – harming a client or colleague, for example. The most successful development of staff occurs as soon as someone begins work in the organisation. Most of us need feedback in our first few months because new environments often require new ways of working. Too often in busy organisations bad or substandard practice is allowed to go on until after the probation period ends.

The successful development of a worker begins with making sure the organisation has been clear about its expectations. Imagine a virtual line that denotes acceptable performance: anything that falls under the line may be underperformance,

anything over it is acceptable. Very often, when performance problems appear, it is because the line is unclear, non-existent or variable according to situation, and the manager's whim. This situation becomes very difficult in large organisations when team leaders have different ideas about acceptable behaviour. Making the line clear is one of the first things a manager can do to help develop staff.

Once the line of acceptable behaviour is clear, it is possible to assess the situation through these four domains: the worker, the manager, the organisation and its context, and the client or consumer. Each member of staff and each manager brings with them skills, knowledge, personality and experience. Organisations differ widely: not-for-profit, for-profit; large, small; highly bureaucratic, laissez-faire; hierarchical, flat; and so on. They sit in environments that have great influence – for example, witness the change in human service delivery when management by KPIs (key performance indicators) appeared. Each client or customer also brings with them differences: voluntary, non-voluntary; compliant, combative; frightened, delighted. Crafting the right management response to this kaleidoscope of situations requires drawing on a range of tools in order to choose the right one at the right time. But it begins with knowing our staff, ourselves, our organisation and its context.

The next step is quality interaction between manager and worker. Ideally, all staff should be able to access formal, high quality, one-to-one supervision at planned regular intervals. The frequency is often determined by the experience of the worker, and the availability of the supervisor. Good practice says that new graduates should receive supervision weekly; more experienced practitioners may prefer group and or monthly supervision.

Alfred Kadushin's seminal work of 1976 identified three elements of supervision: Administrative, supportive and developmental. Tony Morrison's 2005

work on staff supervision considers the priority of staff supervision to be the promotion and protection of the interests of clients. Good practice therefore occurs when a manager is able to invite discussion of the three elements of supervision in such a way that advances the worker's ability to provide quality service.

More often though, supervisees experience supervision that is either open or revolving door, that is irregular and focused only on administrative matters; more commonly known as line-management. Few supervisees experience this as satisfactory. Most managers also find this unsatisfactory but are unable to fit regular supervision of those who report directly to them into their very busy schedules. The result can be workers who feel lost and become narrow in their range of responses to clients.

One answer is to adopt a coaching style of supervision, whereby every interaction with a staff person becomes developmental. This requires a manager to understand each and every member of staff; their levels of skill and knowledge, motivation, and the style of their communication. This approach enables a manager to craft an individualised response to each worker: a response that is designed to not only answer the immediate problem or question but to facilitate worker growth.

In order to determine why a member of staff is under-performing, and the way forward, it is sometimes helpful to decide if they are fit, willing and able. In this context, 'fit' means deciding if they are the right person for the job at this point in time or are they a square peg in a round hole. A willing worker is one who is motivated and an able worker is one who has the requisite skills and knowledge. Identification of gaps in these areas allows a manager to identify possible responses that might help.

However, in spite of best efforts, sometimes more formal performance management is needed and this is often the pathway towards dismissal. This may be an easy decision to make in the heat of the moment but it is

often very difficult to deliver. It requires managers to be highly diligent and responsive, keep accurate and frequent records, and to manage feelings of guilt or fluctuating beliefs about whether they are taking the right action.

When the manager has exhausted all options of development for a worker, then sometimes the only one remaining is to move towards dismissal. This is a difficult decision but if it is not made clients may receive substandard service and the worker could begin to lose confidence and become entrenched.

For managers that have never had to performance-manage staff before, it can be helpful to identify a coach or mentor who can walk the journey with them; someone they can keep in regular contact with for debriefing and reassurance. This is the person to whom they can turn for reminders that sometimes the most just action a manager can take is to bring a timely end to an unsuccessful staff appointment – before damage is done to the worker, the agency and, most importantly, the clients.

Another thing a manager can do is to keep in mind the purpose of a helping professional agency – that is, to deliver high quality services to vulnerable clients. This is what we are in the profession to do and it's the manager's job to ensure that staff deliver this as justly and fairly as they can. •



About the author

Since 2000, **Dr Sharon McCallum** has worked solely as a private practitioner undertaking program design, development, implementation and evaluation services for her company, Sharon McCallum & Associates, and raising standards, largely in the fields of child protection, family violence, sexual assault and family support. Sharon is also the Chair of the Australian College of Social Work's Steering Committee.

WORKING WITH LAWYERS: A LEADERSHIP ROLE FOR SOCIAL WORK

JENNIFER DONOVAN

Collaborative programs, which see lawyers and social services working together, are on the rise. This is an emerging and exciting space for social work practice and one in which the profession could potentially take a leadership role. But how much do we really know about how these collaborations work? Researchers at the University of Melbourne are hoping to answer these questions.

'A social worker and a lawyer walk into the office...' For a long time this would seem nothing more than the opening line of a bad joke. But with the rapid expansion of social and legal collaborations across Australia, the ways in which lawyers and social workers work together is fast becoming an area that needs examining. At the University of Melbourne's social work department, research is being undertaken to develop a nationwide map of social-legal collaborative programs and better understand the roles and influence social work is having on this emerging field.

Over the last five years social and legal collaborations have been a growing space for social work practice in a range of settings, including hospitals, refugee services and mental health. The recent attention on domestic violence, however, has seen a dramatic expansion of these types of programs. Public and political attention on the interactions of social and legal services and systems has highlighted the points at which cracks can develop and, if victims are left to fall through, tragedy occurs. Significant funding is being directed to collaborative social and legal services as the key way to bridge gaps between systems and deliver services orientated around the needs of clients rather than areas of professional expertise.

Yet despite the importance of this form of practice and its rapid expansion in the domestic violence area, the detail of what it actually means to work collaboratively with lawyers and the roles and the leadership taken up by social workers remains sketchy. While programs are in development

and the weight of history has yet to solidify standard structures, social work needs to examine, document and voice its leadership in this area. Researchers at the University of Melbourne are looking to make contact with all social and legal collaborations in Australia. If you are interested in knowing more about the research or would like to contribute to it, you will find more information at [Social Legal Collaborations](http://SocialLegalCollaborations.org) online or by contacting Jennifer Donovan at jdonovan@student.unimelb.edu.au.



About the author

Jennifer Donovan is a social worker and lawyer. She is currently undertaking a PhD at the University of Melbourne examining the role of social work in social service and legal collaborations and the influence of collaborative work on social work practice.

I NEVER USED TO BE A SOCIAL WORKER: I ALWAYS HAVE BEEN

JOE CALLEJA

I have lost count of the number of times social work-trained colleagues, in positions of influence to which they had risen on the back of the knowledge and skills gained in their social work education and practice, have over the past 35 years used the phrases 'when I was a social worker ...' or 'when I did social work ...' I am convinced that this disconnect with their profession stems partly from a failure of social work education to fully inculcate in students the depth and richness of our profession, and partly from a lack of rigour by my colleagues to deeply reflect on their relationship with and understanding of and commitment to their profession. A social work education is not simply a meal ticket for educators and students.

In order to understand the importance of our role as leaders, we need to hark back to the definition of social work adopted by the International Federation of Social Workers and International Association of Schools of Social Work in 2001:

The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance wellbeing. Utilising theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work.

Our Australian Social Work Education and Accreditation Standards (ASWEAS) 2012 outline how social work students will be educated in ways to enable them to meet the challenges posed in this definition of social work:

Social workers pursue these goals by working to address the barriers, inequities and injustices that exist in society and by active involvement in situations of personal distress and crisis. This is achieved by working with individuals towards the realisation of their intellectual, physical and emotional potential, and

by working with individuals, groups and communities in the pursuit and achievement of equitable access to social, economic and political resources. Social workers with regulatory functions achieve these goals through a restorative practice focus. Social workers also pursue their goals through involvement in research, policy development and analysis, and consultancy...

Social work programs must demonstrate how they assist students to develop a critical analysis, understanding of and commitment to this definition of social work.

In spite of this, many social workers seem to graduate with a less than robust sense of professional identity, which comes to the fore a few years later with the 'when I was a social worker ...' statements, particularly when they are in positions of broader leadership.

For our profession to flourish in this challenging environment and for the future generally, it must present itself in a more robust manner. New social work graduates need to come away from courses with some understanding of the leadership they can bring to the workplace either in direct practice, or in policy or another role. It is important they graduate with a view that they are social workers first. This is a key challenge for social work educators. Our practitioners need to then support graduates in retaining the fire in their belly and help groom them to take both small and large leadership roles.

Overtly taking back our leadership role as a profession will enable more social workers who become politicians, CEOs, administrators, Children's Commissioners, Ombudsmen and so on to identify as professionals who are applying their knowledge and skills. This acknowledgement and leadership will help empower those who remain in direct practice and support clients who are facing almost impossible daily challenges in their lives.



About the author

Joe Calleja has forty years' experience working with the community sector. He has been the principal social worker in the state child protection department, a senior manager in state government and on the Anglicare WA executive. He has recently retired as CEO of Richmond Wellbeing after ten years. Joe has also held positions on the WA Association for Mental Health (WAAMH) and been a National Vice President of the Australian Association of Social Workers. He is a Life Member of the Australian College of Social Work.



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