



# Everyone Deserves to Feel Safe: The Culturally and Linguistically Diverse Safe from the Start Project

Final Report | June 2014 | Dr. Angela Spinney



The Salvation Army  
Australia Southern Territory



# **Everyone Deserves to Feel Safe: The Culturally and Linguistically Diverse *Safe from the Start* Project Final Report**



**Dr Angela Spinney  
Swinburne Institute for Social Research  
Swinburne University of Technology  
for the Phoenix Centre / Migrant Resource Centre (Southern Tasmania)**

**June 2014**

# Contents

<b>Glossary .....</b>	<b>4</b>
<b>Acknowledgements .....</b>	<b>4</b>
<b>Executive summary.....</b>	<b>5</b>
<b>Chapter One – Introduction .....</b>	<b>7</b>
1.1 Introduction .....	7
1.2 The development of <i>Safe from the Start</i> .....	8
1.3 Conclusion.....	10
<b>Chapter Two – The context of, and need for the CALD <i>Safe from the Start</i> project .....</b>	<b>11</b>
2.1 Introduction .....	11
2.2 The Australian and Tasmanian CALD community.....	11
2.3 The links between domestic and family violence and the experience of complex trauma .....	11
2.4 Domestic and family violence in refugee communities .....	12
2.4.1 <i>The impact of events experienced before arrival in Australia</i> .....	12
2.4.2 <i>The impact of events experienced after arriving in Australia</i> .....	12
2.4.3 <i>The intersection between culture, gender and trauma</i> .....	13
2.5 What is domestic and family violence?.....	13
2.6 Barriers to disclosure.....	14
2.7 The impact of experiencing domestic and family violence on children .....	15
2.8 The impact on children of experiencing domestic and family violence .....	16
2.9 How children experience domestic and family violence .....	16
2.9.1 <i>What domestic and family violence does to children</i> .....	17
2.10 How domestic and family violence can change children .....	18
2.10.1 <i>How children’s brains are affected by living with domestic or family violence</i> 18	
2.10.2 <i>The link between domestic and family violence and homelessness</i> .....	20
2.11 What <i>Safe from the Start</i> can offer to children from CALD backgrounds.....	20
2.12 Conclusion .....	21
<b>Chapter Three – Activity-based play .....</b>	<b>22</b>
3.1 Introduction .....	22
3.2 Best practice when working with children from CALD backgrounds who have experienced domestic and family violence .....	22
3.3 When do children need professional help? Information from the <i>Safe from the Start</i> website .....	23
3.4 Why activity-based play? .....	24
3.4.1 <i>How non-experts can use activity-based play</i> .....	24
3.4.2 <i>Movement as therapy</i> .....	26
3.5 Conclusion.....	26

<b>Chapter Four – Methodology .....</b>	<b>27</b>
4.1 Introduction .....	27
4.2 The research process .....	27
4.3 Trialling the books and toys .....	31
<b>Chapter Five – Results, recommendations and conclusion.....</b>	<b>33</b>
5.1 Recommended new products .....	33
5.2 Recommendations .....	35
5.3 Final conclusion .....	36
<b>Bibliography .....</b>	<b>37</b>

## Glossary

**Asylum seekers** are people who have arrived in Australia and applied for protection from the government after their arrival.

**Culturally and linguistically diverse (CALD)** refers to a person from a country other than Australia where English is not the first language. In the case of the CALD *Safe from the Start* project we included first-generation Australian young children. Only one of the parents needed to be from a CALD background for the purposes of our research.

**Culture** is commonly described as a system of shared beliefs, customs and behaviours and values that are used by members of a society to make sense of their world and of each other.

**Refugee** is defined by the United Nations Convention Relating to the Status of Refugees as someone who, owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of their nationality and is unable, or owing to such fear, is unwilling to avail themselves of the protection of that country (Cole and Bowen, 2011)

**Torture** is defined by the United Nations Convention Relating to the Status of Refugees as any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity (Cole and Bowen, 2011).

**Trauma** refers to the pain, distress and suffering relating to or arising from forced migration. Traumatic events include war, civil conflict, human rights abuses and violence motivated by religious, ethnic or political reasons (Cole and Bowen, 2011). For the purposes of our research this included anyone living in Australia from a refugee or humanitarian migration background and their children.

## Acknowledgements

The author and the Salvation Army Tasmania would like to wholeheartedly thank the CALD *Safe from the Start* project reference group members, and staff from the participating organisations, who so generously devoted their time and commitment to this project. Without them, this project would have been impossible.

We would also like to thank the anonymous mothers and children who participated in the research, trying out the materials and giving their views as to their suitability. Again, without them, this project would not have happened.

Thanks too to the organisations and their staff who facilitated finding research participants and undertook the organisation of that process for us, and to the Tasmania Community Fund which funded the research.

The author also wishes to thank Alan Harper for his work as Research Assistant on this project and Cassandra Bell for editing this final report.

## Executive summary

The CALD *Safe from the Start* Project was funded by the Tasmanian Community Fund through the Phoenix Centre and builds on the work of the original Salvation Army Tasmania *Safe from the Start* project, which was funded through the Commonwealth Office for Women – Domestic and Family Violence and Sexual Assault Initiative 2007/8.

The aims of the CALD *Safe from the Start* project are to:

- identify the needs of CALD children, aged up to eight, who have experienced trauma and domestic and family violence
- identify and form a register of intervention activities and therapeutic play which can be used by children’s workers and parents
- train children’s service workers to work with the resources
- educate parents and the community about the impact of violence on young children
- develop a training module focusing on children aged up to eight who are affected by domestic and family violence and trauma.

Both the original *Safe from the Start* and the CALD *Safe from the Start* project were community-based action research studies which involved input from stakeholders to both form a research reference committee and assist with the trialling of resources.

The expected outcomes of the *Safe from the Start* resource kit and training module, set by the research reference committee at the beginning of the original project were slightly different in that they did not include specific references to trauma and were aimed at children aged up to six;

- identification of the needs of children who have experienced domestic and family violence, and integration into programs and case management
- education of parents and the community about the impact of violence on young children
- dissemination of children’s activities and information for use by services and parents
- development of a training module focusing on children aged up to six
- information for Tasmanian services about best practice, latest research and the impact of violence on young children
- production of a final research report for application nationally.

*Safe from the Start* has grown and flourished far beyond the expectations of those involved with the original development of the program, as it has met a real need in the community by providing practical assistance on how to engage in effective activity-based play with children who have experienced domestic and family violence (Spinney, 2013).

The CALD *Safe from the Start* project discussed in this report came about as a result of a recommendation from the evaluation of the original *Safe from the Start* project by the University of Tasmania (Guenther and Bell, 2008; Bell, 2013) and from feedback received by some of the 1000 participants in the training programs developed as part of the original project. Because the original *Safe from the Start*, the Tasmanian Aboriginal *Safe from the Start* and this CALD *Safe from the Start* project are closely related there is some direct repeating of information in this final report. This is particularly the case for the sections about how domestic and family violence affects children and activity-based play. Although each report can be read alone, careful consideration of all three reports will provide a complete picture of the research findings for the three companion projects.

This report charts the history of the *Safe from the Start* project, the need for a CALD *Safe from the Start* project, and the context in which it was initiated. This includes information on the intersection of culture, gender and trauma and the impact that this has on women and children who have experienced domestic and family violence. Discussion of the impact of domestic and family violence on children, and the rationale for using activity-based play to help ameliorate the harm experienced, are followed by explanation of the methodology to develop toys and storybooks of relevance to children from a CALD background for the 2014 amended version of the *Safe from the Start* kit.

# Chapter One – Introduction

## 1.1 Introduction

This is the research report on the *Culturally and Linguistically Diverse (CALD) Safe from the Start* Project, funded by the Tasmanian Community Fund, through the Phoenix Centre, Hobart. The report builds on the work of the original Salvation Army Tasmania *Safe from the Start* project (Spinney, 2008) which was funded by the Commonwealth Office for Women, and of the more recent Tasmanian Aboriginal *Safe from the Start* project (Spinney, 2013), which was funded by the Tasmania Early Years Foundation.

The original *Safe from the Start* project investigated and researched the effectiveness of selected toys and books to assist young children in exploring their experiences of domestic and family violence in a safe and supportive environment with their carers and front-line domestic and family violence workers.

Training sessions on the results of the research have taken place all over Tasmania and Australia as well as the UK and New Zealand. The aim of the CALD *Safe from the Start* project is to take into special account the needs of children from CALD backgrounds by ensuring that culturally appropriate resources, and those that have special resonance to children from CALD backgrounds, are available in the *Safe from the Start* kit.

The research was brought about through a partnership of the Salvation Army (Tasmania), the Phoenix Centre and Swinburne University of Technology (where the author is employed). The Phoenix Centre is a not-for-profit organisation located in Hobart, run within the Migrant Resource Centre (Southern Tasmania). It has been working since 1991 to provide services to people who have suffered torture and war-related trauma. The Centre's mission is to provide leadership in the community to embrace cultural diversity by delivering responsive services, particularly to those who are socially and financially disadvantaged. In 2009/10 the Phoenix centre provided direct service and support to approximately 150 survivors of torture and trauma from 29 countries.

The aims of the CALD *Safe from the Start* project are to:

- identify the needs of CALD children, aged up to eight, who have experienced trauma and domestic and family violence
- identify and form a register of intervention activities and therapeutic play which can be used by children's workers and parents
- train children's service workers to work with the resources
- educate parents and the community about the impact of violence on young children
- develop a training module focusing on children aged up to eight.

The expected outcomes of the *Safe from the Start* resource kit and training module, set by the research reference committee at the beginning of the original project were slightly different in that they did not include specific references to trauma and were aimed at children aged up to six;

- identification of the needs of children who have experienced domestic and family violence, and integration into programs and case management
- education of parents and the community about the impact of violence on young children
- dissemination of children's activities and information for use by services and parents
- development of a training module focusing on children aged up to six

- information for Tasmanian services about best practice, latest research and the impact of violence on young children
- production of a final research report for application nationally.

*Safe from the Start* involves community-based action research with input from stakeholders to both form a research reference committee and assist with the trialling of resources within their relevant workplaces and community.

The *Safe from the Start* project has grown and flourished far beyond the expectations of those involved with the original development of the program. This is because *Safe from the Start* is recognised as filling an important gap in knowledge about how non-specialist workers and carers can intervene early with children affected by domestic and family violence and its associated homelessness. Across Australia (and more recently, internationally in New Zealand and the United Kingdom) *Safe from the Start* can play an important part in lessening the damage caused to these children, and improving their long-term prospects. The development of effective and simple interventions such as *Safe from the Start*, aimed at tackling the complex disadvantages faced by a specific group, are important not only for the children concerned, but also for the wider society, because they work to break the cycle of intergenerational homelessness, social exclusion and disadvantage (Spinney, 2011).

The CALD *Safe from the Start* research came about because both the evaluation of the original project (Guenther and Bell, 2008) and feedback from participants in the original *Safe from the Start* training program recommended that the project kit include books and toys with special relevance for children living in Tasmania who come from a range of CALD backgrounds, who have often experienced a range of traumas. The books, cards, puppets and music in the original kit come from several English-speaking countries and are intended to help children talk about and come to terms with their experiences of living with domestic and family violence. They are suitable for children aged eight and under, but until now no detailed consideration has been given to how children from non-English-speaking and different cultural backgrounds can be assisted to come to terms with and talk about both their traumatic experiences of domestic and family violence and their other experiences of trauma. The new, improved 2014 kit offers an eclectic range of resources which can be used in activity-based play to encourage children from a wide range of CALD backgrounds to express their feelings, and includes books written and illustrated particularly for children who have experienced a range of traumas.

Because the CALD *Safe from the Start* project builds on the original and Tasmanian Aboriginal *Safe from the Start* research there is, where appropriate, some information in this report taken directly from the 2008 and 2013 final reports of those two projects. This is particularly the case for the sections on contextual matters surrounding the harm done to children who experience domestic and family violence and its associated homelessness.

## **1.2 The development of *Safe from the Start***

*Safe from the Start* was initiated by Nell Kuilenburg, Development and Research Manager of The Salvation Army Tasmania. The project emerged from a previous study: 'States of mind' (Bell, 2006). Bell's research findings proposed a set of principles to guide the work of Tasmanian Immediate Emergency Accommodation services addressing the needs of young children exposed to family violence.

Although each individual's experience is different (Danby et al, 2006), growing international knowledge of the significant damage experienced by young children exposed to domestic and family violence further highlighted the seriousness of the problem, and the short-term and

long-term implications for children's wellbeing. As a result, the Salvation Army Tasmania successfully sought funding to develop an action research project looking at ways to ameliorate some of this damage. The rationale for this was the knowledge that children use play for very specific purposes when under extreme stress, as they have a need to play out crisis or trauma and use their play 'to master their fear-provoking pasts and anticipated futures' (Boyd Webb, 2007). The author, Dr Angela Spinney, now an academic in the Swinburne Institute for Social Research, was employed to lead the original research project, and also led the research for the Tasmanian Aboriginal *Safe from the Start* project and the CALD *Safe from the Start* project.

The original objective of *Safe from the Start* was to identify and form a register of intervention activities and toys which workers and parents could use for working with children aged up to six who had been exposed to domestic and family violence. This resulted in the production of the *Safe from the Start* kit, a box of 24 books and toys which have been trialled and found to help these children come to terms with their experiences. The kit also contains the final report of the original project (Spinney, 2008), reading materials on the consequences for children of experiencing domestic and family violence and information about how products in the kit can be used. This was originally envisaged as a time-limited project involving the production of about 50 kits for distribution in Tasmania and the presentation of six half-day training courses for workers on using the kits. However, due to the success of the project and its eager take-up by the community, funding for additional training was provided in 2009 by the Early Years Foundation Tasmania. This allowed 300 additional participants to be trained in the theoretical framework of domestic and family violence and its impact on children, and how to use the kit, in 22 additional Tasmanian locations. The 2008 evaluation of the original project (Guenther and Bell, 2008) found that the kits can be used far beyond the refuges, shelters and crisis recovery scenarios first envisaged, and as a result participants for the 2009 training came from a range of related occupations including child protection workers, teachers, psychologists, counsellors and police officers. This is especially important because much domestic and family violence and homelessness is not openly disclosed, and most of those affected by homelessness in Australia are unable, or do not choose, to access services (Spinney, 2011). Furthermore, there is a paucity of literature about the impact of experiencing domestic and family violence on children from CALD backgrounds. The context of and need for the CALD *Safe from the Start* project is further discussed in Chapter Two of this report.

Interest in the project soon began to come from other areas of Australia, and as a result a full-day *Safe from the Start* 'Train the trainer' course (funded by the Tasmanian Early Years Foundation) was developed to facilitate the training of individuals who can then pass on the training in use of the kit. In the six years since the original research findings were published (Spinney, 2008), over 1000 of the kits have been sold across Australia and over 700 workers, from every state and territory, have participated in the training. In October 2011, the project was awarded the national Australian Crime and Violence Prevention Award. The project also received a Tasmanian Child Protection Award in 2010 and a NAPCAN Play Your Part Award in 2013. Kits have been exported to several countries, including New Zealand and the United Kingdom, where the author ran *Safe from the Start* training sessions in 2013.

Chapter Three of this report explains how play can be used as a means of enabling children to communicate their thoughts and feelings. Using playthings, young children can often demonstrate more adequately how they feel than they can through words. This makes it possible for front-line workers and carers to play a 'first aid' role in allowing young children to explore their experiences (Spinney, 2013).

### **1.3 Conclusion**

This chapter has introduced the *Safe from the Start* project and explained why it was decided to develop an improved *Safe from the Start* kit of books and toys and an associated training program that are culturally appropriate for use in activity-based play to encourage Tasmanian children from both CALD and non-CALD backgrounds to express their feelings. Chapter Two goes on to look more specifically at the context of, and need for, the CALD *Safe from the Start* project.

## **Chapter Two – The context of, and need for the CALD *Safe from the Start* project**

### **2.1 Introduction**

This chapter examines what domestic and family violence is, how frequently it occurs, the context in which it occurs in Australian and in particular Tasmanian CALD communities, and the impact it has on young children. First, the circumstances and experiences that bring CALD people to Tasmania are briefly examined and an assessment made on how these may impact on rates of incidence of domestic and family violence, in order to provide some context about people of CALD backgrounds living in Tasmania, and the community in which the research took place.

### **2.2 The Australian and Tasmanian CALD community**

Almost one quarter of people living in Australia were born overseas. The proportion in Tasmania is smaller, with 57 645 people, or 11.6% of the population, being born overseas (Census of Population and Housing, 2011). Around 25 000 of these people are from non-English-speaking backgrounds. They come from many countries, including the Netherlands, Germany, Nepal, China, South Africa, India, Philippines, Malaysia, Italy, Canada, Poland, Korea, Thailand, Greece, Singapore, Sudan and Bhutan. Between 2008 and 2013 the following numbers of people came to live in Tasmania through the humanitarian migration streams:

- 538 people from Bhutan
- 311 people from Nepal
- 164 people from Burma
- 107 people from the Democratic Republic of the Congo
- 81 people from Sudan
- Smaller numbers from other countries

There are currently about 394 people born in Bhutan living in Tasmania, with 295 people from Nepal and 404 from Sudan. Many of these are, or have, children. In 2009/10 Tasmania took in 3% of the humanitarian intake accepted by Australia. This proportion has been relatively consistent for the past decade (Cole and Bowen, 2011)

In all at the last census there were 3153 children aged 0–14 living in Tasmania who were born overseas, and of course there are also children born in Tasmania whose parents came through the humanitarian and other migration schemes. For the purposes of this project our focus is on CALD children and their families who are from countries other than Australia where English is not the first language, and who are living in Australia with a refugee or humanitarian migration background.

### **2.3 The links between domestic and family violence and the experience of complex trauma**

As previously mentioned, a sizable number of children from CALD backgrounds in Tasmania are likely to have experienced trauma, or have parents who have experienced trauma before coming to live in Australia.

Trauma can be defined as arising from an event that is psychologically overwhelming for an individual, and complex trauma results from multiple or prolonged traumatic events. Intergenerational trauma can be transferred from the first generation of survivors to the second or further generations of their descendants (Atkinson, 2013), and it is only in the last

20 years or so that new ways of understanding the consequences of this trauma have emerged.

## **2.4 Domestic and family violence in refugee communities**

Psychological, social, cultural and structural factors can all combine to increase risk levels of domestic and family violence (Rees and Pease, 2006), and there is a link between the pre-arrival traumas of refugees and their experiences of domestic and family violence in their new country. Refugees are more vulnerable to experiencing domestic and family violence because of the traumatic experiences that they have endured prior to their arrival in Australia (Zannettino et al, 2013). Domestic and family violence occurs in most societies, but immigrant and refugee women are particularly vulnerable (Rees and Pease, 2006). The violence includes sexual violence such as rape, forced sex through economic abuse, forced marriage and the sexual abuse of children (Zannettino et al, 2013). What is more, refugee women may experience multiple traumatic incidents, including exposure to war, displacement, loss and encampment (Zannettino et al, 2013).

### **2.4.1 *The impact of events experienced before arrival in Australia***

Refugees have fled the violence of war or direct persecution. Many of Australia's refugee and humanitarian entrants have also spent considerable time period in harsh refugee camps in countries of asylum before being accepted for permanent residence in Australia (Cole and Bowen, 2011).

Unfortunately, experiencing domestic and family violence can exacerbate the negative mental health effects of refugee women's pre-arrival trauma (Zannettino et al, 2013). This can in turn have a very negative impact on their children, whether they were born overseas or in Australia. A high percentage of torture and trauma survivors suffer from extreme levels of depression and anxiety. This can manifest itself in many ways, including a breakdown in family and personal relationships. (Cole and Bowen, 2011). People from CALD communities may have experienced hurried and unplanned departures from their homeland and long periods without access to health or education, and may well experience a lack of family or social support. The United Nations High Commissioner for Refugees (2003) estimates that 80% of all refugee women experience rape and sexual abuse. The systemised torture of women is used in war and civil unrest as a strategy to terrorise and control groups. It is hardly surprising that these women have an increased vulnerability to intimate partner abuse (Zannettino et al, 2013). These factors contribute to the disproportionate impact of family violence on those from CALD communities (Settlement Council of Australia, 2013).

Zannettino et al (2013) note that we have to understand the impact of the pre-arrival experiences on individuals, families and communities to work effectively with women who have experienced domestic and family violence. Although there is a paucity of literature on the effects of experiencing domestic and family violence on CALD children, there is no reason not to expect that this is also true of their children. The CALD *Safe from the Start* project is one of the few in Australia in which the extra dimension of experiencing domestic and family violence for children from refugee backgrounds has been considered.

### **2.4.2 *The impact of events experienced after arriving in Australia***

Factors relating to refugees' settlement in a new country can also contribute to their likelihood of experiencing domestic and family violence. These contributing factors may include social isolation, a sense of not belonging, separation from family members, racism and discrimination, low socio-economic status, lack of knowledge about support services,

language difficulties, a lack of appropriate housing and a lack of education support (Zannettino et al, 2013). The National Action Plan for Australia to Reduce Violence against Women and their Children 2009–2021 acknowledges that immigrant and refugee women are more likely to be murdered as a result of domestic violence.

### **2.4.3 *The intersection between culture, gender and trauma***

Domestic and family violence in refugee communities emerges at the intersection of culture, gender and trauma. In order to allow this knowledge to inform practice, theories of intersectionality need to be explicitly included in projects (Zannettino et al, 2013). This is true of the *Safe from the Start* project discussed in this report.

Of course, many of the causes of domestic and family violence in refugee communities are shared with the wider community. Issues of patriarchal power and control and the subjugation of women are universal phenomena (Zannettino et al, 2013). But it is also true to say that asylum seekers and newly arrived refugees are among the most vulnerable in the Australian community and the issues associated with their resettlement (including experiencing domestic and family violence) are multifaceted (Spinney and Nethery, 2013).

It is because CALD women are particularly vulnerable to experiencing domestic and family violence that many Australian states have developed specialist agencies to deal with the issue. However, Tasmania (unlike Victoria, for instance) has no specific provisions for dealing with CALD victims and any homelessness that may result from their abuse. Nationwide there is a shortage of accurate and reliable research examining the prevalence of domestic and family violence within families from CALD backgrounds. What we do know however is that there are real barriers to women and children seeking help, and as a result they can suffer in silence. These barriers include the general fear, shame and powerlessness associated with experiencing domestic and family violence, as well as lack of trust of legal authorities, lack of social support networks, economic reliance on partners, social pressures to remain married, women's fear of losing their identity as wife, fear that the abuser will be deported and fear of being deported themselves. (Leggett, 2007). The idea that domestic and family violence is cultural for some communities and therefore does not warrant a serious response police and magistrates can also place immigrant and refugee women at greater risk from violent partners (Rees and Pease, 2006).

Furthermore, mainstream approaches to domestic and family violence can fail to recognise the ways in which experiences of violence and abuse can be further complicated through the intersection of domination-based religion, culture, class and nationality and ethnicity (Settlement Council of Australia, 2013). Members of all sections of the Tasmanian community experience domestic and family violence. However, the Phoenix Centre and the Salvation Army Tasmania, working together, came to realise that the design and evaluation of *Safe from the Start* kit resources need to specifically include Tasmanian CALD organisations and community members. The original *Safe from the Start* project did not take enough account of the traumatic experiences that Tasmanian CALD community members have been through, or of the need to adapt the program to take account of these children's traumatic experiences. We also need to incorporate an understanding of the intersections of culture, traditions, class, gender and contemporary social contexts into our training package.

The following section looks more generally at the consequences of experiencing domestic and family violence.

## **2.5 What is domestic and family violence?**

Domestic and family violence occurs in all cultures, races and religions. It is found in all communities and across all demographics including age, gender, socio-economic status, race, religion, culture and educational attainment. It is made up of many controlling and intimidating behaviours, often much wider in range than physical violence alone.

The following offers a useful definition for the term ‘domestic and family violence’:

*A pattern of coercive behaviour used to maintain control over a partner, through a combination of physical, emotional, sexual or financial abuse, enforced social isolation and intimidation.*

(Cunningham and Baker, 2004)

Domestic or family violence occurs, then, when a family member, member of the community, partner or ex-partner attempts to physically or psychologically control or dominate another. Abuse can be experienced in many forms: being killed, seriously hurt, raped, isolated, frightened, depressed and kept in poverty. Most domestic and family violence is perpetrated by males against females, but this is not always the case (Cunningham and Baker, 2007). Living with domestic and family violence, in whatever form it takes, has an extremely negative impact on women and their children. Being in a situation of fear, intimidation, isolation and subjugation, of constant worry about ‘keeping a lid on things’ and of having to fight to keep themselves and their children safe can mean that women and children lose a sense of having a home (in the sense of a safe place to be, where they can relax and be themselves) even before they may be forced to leave their physical dwelling (Tomas and Dittmar, 2007).

The United Nations Declaration on the Elimination of Violence against Women was instigated by Australia and Canada and adopted by the United Nations General Assembly in 1993. The declaration reads:

*Recognising that violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men.*

(Declaration on the Elimination of Violence against Women, United Nations General Assembly Resolution 48/104 of 20 December 1993)

Nearly one in four of all Australian women who have been married or in a de facto relationship have experienced domestic and family violence at some time (Australian Bureau of Statistics, 1996, p. 50), and as discussed earlier, women from a CALD background are more vulnerable to experiencing abuse. They may also feel more reluctant to disclose what they have experienced, a problem we explore in the following section.

## **2.6 Barriers to disclosure**

Whatever their cultural and racial background, the effect of domestic and family violence on mothers can be devastating. They are often isolated from family and friends, and live in fear, not knowing when the next attack will come (Calder, 2004).

In general, women experiencing abuse are often reluctant to disclose their situation, but for women who come from a CALD background there can be particular difficulties. These include issues related to cultural and religious factors, as discussed earlier, but also language problems, racism, fears about immigration or residency status and physical and cultural isolation. Often, too, the women in question have no knowledge of local legal systems or the

services available to them. Barriers that prevent CALD women from seeking help for sexual violence can include not wanting to shame and or embarrass the family, fearing the loss of their relationship, not considering sexual violence to be a crime, wanting to keep their family intact, fearing the possible loss of family support, fearing humiliation imposed by the police and the criminal justice system, fearing deportation, wanting to maintain privacy and having had adverse police experiences in the past (Zannettino et al, 2013).

Refugees' culture can also be complicated by an overlay of camp culture. This can make women be very protective of family and community norms because of a desire to protect some traditional life conditions. Adherence to traditional norms, for instance, can be far stricter in camps than in the home community (Zannettino et al, 2013). We must recognise that these factors may make women anxious about participating in projects such as *Safe from the Start*, which encourage children to talk about what they have witnessed and experienced.

## **2.7 The impact of experiencing domestic and family violence on children**

Bagshaw and Chung (2000) found that experiences of domestic and family violence can include:

- Abuse of mother in front of children – ranging from verbal put-downs through to serious physical violence
- Torture or killing of children's pets
- Obsessive control over what and when the children eat
- Unreasonable control over children's outings and friendships.

In 2004, Calder identified the following ways in which domestic and family violence can impact on a mother's parenting:

- It is difficult to give children a sense of stability and wellbeing if the mother is trying to keep the peace, to keep the children out of the way and to conceal her emotions from the children.
- Some mothers are constantly criticised or assaulted for not doing everything perfectly and get so run down they can't cope with cleaning and washing.
- Some cannot cope with finances because they have never been allowed any control over money.
- Injured women may not be able to get up and take their child to school in the morning.
- Some mothers have never been allowed a close relationship with their children, and as a result cannot talk or play with them.

Domestic and family violence can also have a detrimental effect on the mother-child relationship:

- *Children's need for reassurance, attention and support are accentuated in situations of domestic and family violence, at the same time as the resources of the mother are taxed to the limit. Mothers constantly on their guard are exhausted and have limited energy left to devote to the children.*
- *Children can be deliberately used by abusive men to hurt and control women, and can be forced to witness abuse or compelled to listen to accusations about their mothers.*

(Calder, 2004)

Children do not have to be present to experience domestic and family violence (Australian Domestic and Family Violence Clearinghouse, 2011).

## **2.8 The impact on children of experiencing domestic and family violence**

Children can experience serious emotional, psychological, social, behavioral and developmental consequences as a result of experiencing domestic and family violence. More than one million Australian children are affected, and infants and young children are especially at risk. (Australian Domestic and Family Violence Clearinghouse, 2011). As Bagshaw puts it, 'Domestic violence and child abuse are indistinguishable' (Bagshaw, 2000). Cohen (2007) discusses how children from refugee and immigrant communities experience greater risks, due to a lifetime of exposure to various forms of violence and from being unknown to child welfare or other support agencies.

No literature reviews or large-scale research projects have looked at the experiences and needs of and strategies for working with children from CALD, refugee and Indigenous backgrounds who are affected by violence. Limited research does indicate higher risks of experiencing domestic violence (Australian Domestic and Family Violence Clearinghouse, 2011). However, in more general research children continually report a need to talk with someone about their experiences (Bagshaw et al, 2000). Studies indicate that domestic and family violence can affect children's emotional and cognitive development, social functioning, ability to learn, moral development and ability to negotiate intimate relationships later in life (Weinreb and McAlister Groves, 2007). This is partly because such experiences can prevent children from being adequately parented and nurtured, when one parent can be aggressive and the other frightened and controlled (Weinreb and McAlister Groves, 2007). As a result, some children suffer from separation anxiety, sleep dysregulation, temper tantrums and aggression. Around one in four children who have witnessed domestic or family violence has serious social and behavioural problems. They are two and a half times more likely to have these problems than children from non-violent backgrounds (Jaffe et al, 1990).

Experiencing domestic and family violence can seriously affect children's brain development. The brain is constructed through a process that begins before birth and continues into adulthood. If the traumatic experience occurs during a critical period of development (that is, when the brain is on an accelerated growth curve and neural networks are being built), the effect can be significant. Because of this, trauma affects brain development in children and adults differently and the effects can be more profound on a child's developing brain. Their development can be impaired or slowed down (van der Kolk, 2007).

## **2.9 How children experience domestic and family violence**

Children can experience domestic or family violence in several ways (Cunningham and Baker, 2007). Their experiences can include being hit or threatened while in their mother's arms, hearing violence occurring after they have gone to bed, and seeing the effects of violence – blood, bruising and damage to the home – the following morning. Children are exposed to domestic and family violence by seeing their mother demeaned, hearing loud conflict and violence, seeing the aftermath, learning what happens to their mother or being used by the perpetrator as part of the abuse. Children are not just passive witnesses to events in their home, and those living with conflict and abuse will actively interpret, predict and assess their roles in causing a fight. They will also worry about the consequences and engage in measures to protect themselves and their siblings (Cunningham and Baker, 2007).

Children can also experience domestic or family violence in the following ways (Calder, 2004):

- The perpetrator may take the child hostage to force the mother's return to the home.

- The perpetrator may force the child to watch assaults against the abused
- The perpetrator may force the child to participate in the abuse
- The child may be injured when trying to intervene to protect the abused
- The child may be physically caught up in violence between adults
- The child may be killed in the process of an attack.

Further information about how children feel about experiencing domestic and family violence can be found in *Through their eyes: domestic violence and its impact on children*, published by YWCA Seattle, King, Snohomish in the United States in 2010. The book, which includes drawings by children who have experienced domestic and family violence, can be obtained from <http://www.ywcaworks.org/>. Another good resource is Cunningham and Baker (2004), *What about me! Seeking to understand the child's view of violence in the family*, published by the Centre for Children and Families in the Justice System. This document can be downloaded from [http://www.lfcc.on.ca/what\\_about\\_me.html](http://www.lfcc.on.ca/what_about_me.html).

### **2.9.1 What domestic and family violence does to children**

Experiencing domestic and family violence can psychologically rob children of both their father and their mother. One parent is the frightening aggressor, whilst the other is the terrified victim. Young children who depend exclusively on their parents to protect them are very psychologically vulnerable in such circumstances because they cannot trust their caretaking environment. When children are aged under four, their perception of the danger towards their caregiver is a strong risk factor, because their perception of their own safety is closely linked to the perceived safety of their caregiver. If a caregiver is not safe, the effects on the child can be overwhelming (Weinreb and McAlister Groves, 2007). If an adult and child are exposed to the same traumatic event, a child aged under 11 is three times more likely to develop post-traumatic stress disorder than the adult. As a result, they can suffer from separation anxiety, sleep dysregulation, temper tantrums, aggression and impulsivity. Children's physical health can also be affected by their experiences of domestic and family violence. Asthma, eczema, eating disorders, headaches, stomach pains, disturbed sleep, feeding problems and general developmental delays have been reported as a result of exposure to domestic and family violence (McGee, 2000).

When a baby or toddler sees violence at home they may feel distressed or scared. Babies cannot understand what is happening between adults, but they hear the noise and feel the tension. The most stressful things for children in this age group might be loud noise such as banging and yelling; a distracted, tense, unhappy socially isolated mother; and an angry, self-centred, inconsistent father or father figure. These children may also be at risk of physical injury as the result of an accident or physical maltreatment, such as compromised nutrition and health (Cunningham and Baker, 2007). Dissociation and hyper-vigilance are the two overarching defences babies use in the first year of life, and both are likely in response to trauma. Babies may become hyper-alert to the sounds and sight of violence and need to disconnect from relationships to protect themselves. Infants who experience domestic or family violence can suffer fear without ending (Thomson-Salo and Paul, 2007).

Children are 'good observers but poor interpreters', and as a result they may feel fear, confusion, guilt, anger, frustration, tummy aches and worry. For preschoolers aged three to five, experiences are more real than anything they are told. When a preschooler experiences violence, they may worry about their own safety and about being hurt, or feel responsible – because at this young age they think everything in the world is related to them. They may hope that a TV character or superhero will come to save them, or they may tune out the noise by concentrating hard on something else. At this age they can also worry about being arrested

or taken away if the father figure is arrested or leaves, or worry that their mother will be taken away by the police. They may have nightmares about being harmed, or may try to make an attack stop by yelling at the abuser (Baker and Cunningham, 2007). Preschoolers may feel confused about why people are saying bad things about their father, or about why he cannot live with them anymore, which often makes them feel distressed and guilty (Baker and Cunningham, 2007).

Other ways that exposure to violence can affect children include:

- *Anxious, whining or nervous behaviour*
- *Depression*
- *Nightmares and difficulty sleeping*
- *Bedwetting*
- *Withdrawn behaviour*
- *Behavioural problems like truancy or running away from home*
- *Frequent illnesses like headaches and stomach aches*
- *Poor concentration*
- *Low self-esteem*
- *Insecurity*

(Darwin YMCA, 2007)

## **2.10 How domestic and family violence can change children**

Children are not just passive witnesses to noise, tension or violence at home, and growing up with violence and abuse at home can change them.

The following are ways in which children can be changed by experiencing domestic and family violence:

- *Children are denied a good father and positive male role model*
- *Abuse can harm bond between mother and child*
- *Children can develop negative beliefs about themselves*
- *Children can be isolated from sources of support*
- *Unhealthy family roles can evolve in homes*
- *Abuse destroys a child's view of the world as a safe and predictable place*
- *A child's style of coping and survival may become problematic*
- *Children can believe that domestic or family violence is inevitable or normal*

(Cunningham and Baker, 2007)

### **2.10.1 How children's brains are affected by living with domestic or family violence**

Research over the last 20 years reveals that childhood experiences of domestic and family violence can damage key areas of higher functioning in the brain, which can negatively affect the ability to socially interact. A non-expressive maternal face triggers a negative response in the infant. Similarly, a non-responsive infant, or an infant who displays negative facial expressions, can provoke a profound negative effect in the mother. Infants raised with an abusive or a severely depressed caregiver not only experience considerable anxiety when interacting with that caregiver, but come to associate anxiety with other social interactions. Infants also become highly attuned to the environment into which they are born. An infant reared in perilous surroundings will develop brain connections and chemical responses that are highly sensitive to signs of danger (McCain et al, 2007).

A child's early experiences have far-reaching effects on the development of their brain and on their behaviour. Positive experiences are essential for vital connections that are formed in the brain right from birth and parents are crucial in providing the early stimulation that drives the function of the neural pathways. The relationship between caregiver and infant therefore plays an important role in the child's capacity to interact with others and also influences neural pathways for language and higher cognitive functions (McCain et al, 2007).

Children who grow up with domestic and family violence can learn to use intimidation and force in relationships. In violent homes children learn that aggression is a part of relationships, and that it is acceptable to relieve stress by yelling or threatening another family member (Weinreb and McAlister Groves, 2007). These are the reasons why childhood experiences of domestic and family violence are associated with greater rates of juvenile delinquency, antisocial behaviour, substance abuse and mental illness.

Older children exposed to domestic and family violence are more likely to:

- *Exhibit violence and aggressive behaviour and language*
- *Attempt suicide*
- *Use and abuse drugs*
- *Engage in risk taking behaviour*
- *Commit crimes when they are teenagers*
- *Repeat behaviour*
- *Have difficulty making and keeping friends*

(Darwin YMCA, 2007)

The United Kingdom's Social Exclusion Task Force has stated that families facing multiple problems such as domestic or family violence and homelessness do not just have a negative impact upon themselves, but also exert a high cost on society through the cost of support services, lost productivity and the costs of policing antisocial behaviour (Social Exclusion Task Force, 2007). Failure to address the exclusion faced by such families can 'levy high costs on children, parents, families, the community and wider society in terms of poor life experiences and future prospects' (Social Exclusion Task Force, 2007).

As part of the original *Safe from the Safe* research the author visited New Zealand. The Brainwave Trust (<http://www.brainwave.org.nz/>) envisages a day when every child in New Zealand will get the best start in life because the whole community understands the impact that early experiences (including experiencing domestic and family violence) have on the developing brain and thus on the success of society. The Brainwave Trust produces a range of leaflets and publications about these issues, and was very generous in allowing the Salvation Army Tasmania to amend these and use them as part of the *Safe from the Start* project. At first the Salvation Army *Safe from the Start* versions of the leaflets 'Your child does not have to be hit to be hurt' and 'Family violence can harm your child for life' did not include photographs of children from diverse backgrounds, and therefore might not be picked up and read by their mothers. As part of the Tasmanian CALD *Safe from the Start* project this has been put right and two amended leaflets have been produced. They very clearly explain why living with domestic and family violence can be very damaging for children, and what can be done to ameliorate this damage. Thousands of copies of the original Salvation Army leaflets have been distributed around Tasmania and Australia through participants from the *Safe from the Start* training sessions. The leaflets are also included in the amended 2014 *Safe from the Start* kit. New versions of the *Safe from the Start* posters 'Children growing up in a non-violent home are more likely to ...' and 'Everything babies and toddlers experience affects

their brains forever' are also being developed, as part of this project for people from CALD backgrounds.

### ***2.10.2 The link between domestic and family violence and homelessness***

In Australia, most of the women who enter homeless accommodation because of domestic or family violence have accompanying children. As women frequently bring more than one child with them, the majority of those accommodated in domestic or family violence refuges are children. Almost one in 10 of all homeless Australians is aged under 12, and three in four are aged under 10 (Australian Institute of Health and Welfare, 2007). In 2005/2006, there were 54,700 children who accompanied their parents in Supported Accommodation and Assistance Provider (SAAP) services, most of whom had previously either witnessed or experienced family violence and sexual abuse (Supported accommodation and assistance program, 2006). Nearly 2% of Australian children under the age of five sleep in crisis accommodation at some stage during the year.

Whatever the causes, for children, homelessness brings trauma and affects routines and friendships. Children who have been homeless are more likely to experience emotional and behavioural problems such as distress, depression, anger and aggression. Experiencing homelessness as a child makes adult homelessness more likely (Australian Institute of Health and Welfare, 2007).

The impact on children of living in violent households has been neglected in research more often than the impact this situation has on the women involved (Mullender and Morley, 1994). In some cases children's work in refuges has consisted mostly of providing the children with entertainment and providing mothers with babysitting facilities whilst they look for move-on accommodation. Children are infrequently given the opportunity to reflect on their experiences. However, our research has shown that a 'front-line' activity-based play response in a non-therapeutic environment can have a beneficial impact on the long-term mental health prognosis of children.

### **2.11 What *Safe from the Start* can offer to children from CALD backgrounds**

We know that the *Safe from the Start* project is viewed as a positive intervention by practitioners and mothers, and we want to ensure that people from diverse backgrounds living in Tasmania can gain maximum benefit from the *Safe from the Start* kit and training packages. Service providers are not always aware of the extent of harm and the impacts of prior experiences of horrific trauma on the needs of refugee women who present to their service (Zannettino et al, 2013). One of the aims of the CALD *Safe from the Start* project is to increase this awareness. The project also aims to raise understanding of the ways in which Tasmanian service responses can be improved in terms of providing cultural safety. This includes acknowledgement of issues of shame surrounding domestic and family violence.

Zannettino et al (2013) recognise that there is a 'conventional wisdom' about not talking about experiences of trauma with refugee women, because it may be considered better not to disturb painful memories. However, not enabling and encouraging women to talk about their experiences may increase their suffering and mean their trauma continues. This is also true for children.

There are cultures in which it is even more difficult to talk about experiencing domestic and family violence and the impacts of multiple traumas than it is in mainstream Australian culture. These are issues pertinent to this project, which seeks to enable children to open up about their experiences of domestic and family violence if they wish to do so. We need to provide a safe space for children to talk about trauma with their mothers' support.

Women from CALD backgrounds can be unfamiliar with the concept of a therapeutic relationship and therapeutic-based play. It was a finding of our CALD *Safe from the Start* research that therapeutic-based play needs to be explained so that mothers and workers can see the benefits of it. *Safe from the Start* was instigated in the context of a growing use of intervention programs designed for babies and young children who have been exposed to domestic and family violence in Australia (Bunston and Heyanatz, 2006). One rationale behind the project is that very young children do not always need to be in a formalised, designated program run by mental health professionals to have a therapeutic experience, but that a positive relationship with a well-meaning adult can also assist them:

*The more good experiences a baby has in a relationship the more chance there is for more connections to be made, not just emotionally but also neurologically. I think it is possible to offer something even if it is only a single encounter with an infant.*

(Thomson-Salo and Paul, 2007, p. 3)

The desired outcomes of the CALD *Safe from the Start* project are therefore to:

- develop a comprehensive ‘Train the trainer’ package – including a manual and PowerPoint presentations – for use in CALD and mainstream services working with CALD families
- produce a final report on the project.

## **2.12 Conclusion**

This chapter has explained what can happen to children who are exposed to domestic and family violence, and why we particularly wanted to improve the cultural applicability of *Safe from the Start* for children from CALD backgrounds living in Tasmania. Chapter Three looks at the rationale behind activity-based play such as that promoted by the *Safe from the Start* kit and training.

## **Chapter Three – Activity-based play**

### **3.1 Introduction**

Because play is one of the main ways in which children make sense of their world (Boyd Webb, 2007), the *Safe from the Start* project centres on finding a collection of effective books and toys for adults to use in play with children. It is known that children use play for very specific purposes when under extreme stress and that they have an overwhelming need to play out crisis or trauma, and to use their play ‘to master their fear-provoking pasts and anticipated futures’ (Boyd Webb, 2007, Introduction). Play can be used as a means of communicating with children, because a child can show how he or she feels using toys. This can act as a prompt for a conversation that might not otherwise arise about feelings. ‘Playing with a purpose’ in this way can make it possible for well-meaning adults to provide a ‘first aid’ early intervention role, allowing young children to explore their experiences in a safe and supportive environment. As discussed in Chapter One, feedback on the original kit was that it would be improved by making it more appropriate for children from CALD backgrounds who are living in Tasmania. This chapter explains why activity-based play can help to ameliorate some of the damage done to children who experience domestic and family violence.

### **3.2 Best practice when working with children from CALD backgrounds who have experienced domestic and family violence**

When you become aware that a child from a CALD background might be experiencing violence in their home, it is important to connect with them, and to do it in a way that is culturally competent. Cultural competence is a set of skills, knowledge, values and attitudes that individuals can use to work effectively in culturally diverse situations and environments (Dimopoulos, 2013). This does not mean that you must necessarily share the same values and attitudes as the mother of the child, but rather it means that you must have a skill set that allows you to understand their self, their personal lens and their personal values, attitudes and beliefs and how these might impact on their decision-making (Dimopoulos, 2013).

It is important to talk to, rather than talk about, the child and not to use toys just as a distraction (Thomson-Salo and Paul, 2006). Encourage children to accept that it is not their responsibility to keep their mother safe when adults fight, and that domestic or family violence is an adult problem that adults need to fix. When a child discloses information regarding abuse, adults have an enormous responsibility to appreciate how difficult it was to reveal a family secret, and understand the risk to the child if you do not respond appropriately. Cunningham and Baker (2007) advise that you should assume the child has decided that help is needed and allow the child to tell his or her story. Reassure the child by validating his or her feelings, and do not criticise or speak negatively about what they tell you. Few children admit they have problems, however (Boyd Webb, 2007), and you may pick up other behavioural signs indicating significant problems at home.

Darwin YMCA, in their Children and Violence information resource kit, give the following helpful list of DOs and DON'Ts about how to act if a child tells you abuse is happening:

## DO

Listen carefully to what the child is saying

Acknowledge how hard it is to talk about these things

Tell the child you believe them and take them seriously

Make it clear that whatever happened is not the child's fault and the child is not bad

Tell the child that grown-ups sometimes do the wrong thing and that this has also happened to others

## DON'T

Avoid or reject them – you might be the only significant adult in their lives

Investigate further yourself, unless it is within your professional duties

Press for details or inquire further into the details of the abuse, unless it is part of your job

Make promises you can't keep, for example not to tell anyone

Seek medical attention or treatment unless it's an emergency or there are serious health risks to the child

### **3.3 When do children need professional help? Information from the *Safe from the Start* website**

*Many children who have witnessed or been exposed to family violence can resolve their feelings and concerns with the help of their mum, a trusted family member such as a grandparent or their teacher. However, there are situations when professional help is needed. Consider seeking professional help in the following situations:*

- *The child is particularly vulnerable because of other stressful events or losses they have experienced.*
- *The violence within the family has occurred several times.*
- *The child is avoiding going to school or is being bullied.*
- *The child's mother is highly upset and unable to respond to the child's needs.*
- *A child is physically hurting him/herself or others.*
- *A child's problems have gone on for 3–4 months with no improvement.*

*If you are a parent worried about your child, remember that you know your child best. Don't hesitate to contact and consult with a professional.*

*If you are worried about a child you know well, remember that you play a very important role!*

#### ***Where can you seek professional help?***

*There are a number of services (both government and non-government) that provide help.*

*Talk to someone who knows your child well as they may be able to provide counselling or a referral. Consider contacting the following professionals:*

- *1800RESPECT – the national domestic violence counselling service*
- *domestic or family violence services*
- *domestic or family violence refuges*
- *child adolescent mental health services*
- *family counselling services specialising in counselling children*
- *therapeutic play therapists*
- *schools (the child's teacher or social worker)*

- *psychologists*
- *child psychotherapy*
- *general practitioner*

### **General guidelines**

*When working with young children who have been exposed to violence, the parent or care caregiver should be informed about any therapeutic or activity-based play that occurs with a child.*

*The Kits Resources used in **activity-based play** can also be given to the parent or caregiver to take home or suggestions given how to use similar resources at home to encourage the child to discuss their feelings and emotions.*

*A mother can be part of the **activity based play** session with the child which can often also be useful for the mum (eg the book *Ruby & the Rubbish Bin* is about self-esteem, and *A Huge Bag of Worries* is about sorting out large and small worries). This enables the mother and child to continue the discussion at home using the same language through using the resource.*

*The Safe from the Start brochures can be given to the parent or caregiver which provides information about the impact of exposure of family violence on young children.*

### **Supporting children who are living with violence or been exposed to violence**

*Healing begins by engaging with and listening to children.*

*A helpful and supportive adult is the most powerful tool we have to help children feel safe. This can be a parent, grandparent, neighbour, teacher, child carer or community person.*

*Engage with the child through activity-based play and listening to them.*

*Give the child permission to tell their stories and share their feelings about their experience, which can include feelings of being sad, angry, scared or of loss, grief or low self-esteem.*

*Give clear, simple explanations about scary events or situations of violence. They do not really understand the causes of violence and often blame themselves.*

## **3.4 Why activity-based play?**

Children think and behave differently from adults, so the approach we take with them must be different. We can use the medium of play to communicate with children. Play encourages their creativity, imagination, and general intelligence, and enables them to discharge their emotions (Boyd Webb, 2007). Under extreme stress children turn their play to very specific purposes and use play to try to master their fear-provoking pasts and anticipated futures; ‘Children’s overwhelming need to play out crisis or trauma suits our purposes’ (Boyd Webb, 2007, p. 47).

### **3.4.1 How non-experts can use activity-based play**

Play is the main way that children make sense of the world, and how they learn (Boyd Webb, 2007). It is possible for caring adults who do not have a therapy background to engage in useful play with children, through combining interventions that involve playing with the child, and talking about what is going on in the game. The role of the adult in activity-based

play is to participate and to play with the child, being careful to follow the child's lead, without jumping ahead. The adult can ask the child to describe the play activity, and suggest motives or feelings in the context of the play (Boyd Webb, 2007). Carefully making connections between the child's symbolic play and their own life can be helpful, but it is not essential to think too far beyond the metaphor of the game. It is not necessary to make a verbal connection between the play and the child's life if the adult does not feel comfortable doing so, or they feel they do not know the child well enough. Activity-based play can still be useful for the child and assist in relieving their symptoms. Just listening actively and talking to children can help them.

It is possible that mothers from CALD backgrounds will find it strange to take part, as they may have never played with their children – in many cultures children only play with other children (Signorelli, 2013). There is, however, a precedent for providing therapeutic storytelling for young primary-school age children from CALD backgrounds. *Jungle Tracks* is a program produced by the New South Wales Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS), consisting of short stories that mirror real-life struggles in the lives of children, adolescents and parents who have a background of refugee trauma. The stories are of hope and empowerment and assist children to process and reconcile their past experiences and ongoing difficulties in transitioning to live in a new country. The five *Jungle Tracks* stories include tales of orphaned children, having to leave your home, finding it difficult to fit in because of feeling different, building self-esteem, managing anger and stress and coping with trauma and learning how to learn to relax (Cole and Bowen, 2011).

Activity-based play can involve a wide range of materials. Art techniques involve drawing a person, family, house and tree, or whatever the child wishes. Modelling clay can be used for pounding and squishing as well as making models. Crayons, paper, scissors, glue, finger-paints and magazines can be used (Boyd Webb, 2007). These materials are really useful for engaging in activity-based play, but they are also readily available, and for this reason are not included in the *Safe from the Start* kit, which aims to make available toys and books that might not otherwise be readily to hand, in order to promote conversation.

Dolls and puppets allow the child to identify with them, and to project his or her own feelings onto the play figure. Children can name dolls the same names as members of their own family. Hand and finger puppets allow children and adults to talk about feelings without acknowledgement that the child has similar feelings, thereby not pushing the child to overtly reveal something they are not comfortable with. The *Safe from the Start* kit includes finger and glove puppets of human faces and animals.

Storytelling is also a form of activity-based play, and books and stories can help children to learn new skills and to understand their own feelings and behaviours. Storytelling can be combined with puppet play to take the story forward (Boyd Webb, 2007). The original *Safe from the Start* kit contained 16 story and picture books from Australia, the United Kingdom, Canada, New Zealand and the United States. Like the puppets, all were chosen after trialling them with children in Tasmania who had experienced domestic and family violence, and often homelessness, and all were found to be effective in helping young children come to terms with their experiences. The first trial of books and toys took place through domestic and family violence refuge and outreach organisations. Some of the children who trialled the products may well have been from CALD communities, but this status was not recorded and no specific attempt was made at that time to find books and toys which might have special relevance to children from CALD backgrounds.

### **3.4.2 Movement as therapy**

Traumatised people need to have physical and sensory experiences in order to be able to tolerate their sensations, unlock their bodies and activate effective fight or flight responses (van der Kolk, 2007). Humans need to play, talk and move regularly in order to maintain a healthy mind. Activity-based play for children that includes movement, such as dance, action songs and rope-jumping, allows intervention to be made at a sub-language level, and for this reason the original *Safe from the Start* kit included a book of action songs with a CD of accompanying music, which proved very popular with babies, children and their mothers. This remains in the amended kit.

### **3.5 Conclusion**

Activity-based play with an interested and involved adult is known to help children. Over the last six years the *Safe from the Start* kit has been found to be an effective way to promote such play between children who have experienced domestic and family violence and adults. The following chapter explains the methodology used for choosing the products of both the original and amended *Safe from the Start* kits.

## Chapter Four – Methodology

### 4.1 Introduction

This chapter explains the resource selection of the original and the new, amended *Safe from the Start* kits, and the measures taken to make the new kit more inclusive for children from CALD backgrounds.

### 4.2 The research process

The CALD *Safe from the Start* research gained approval in November 2012 from the Human Research Ethics Committee at Swinburne University, where the author is employed as an academic.

The original *Safe from the Start* research reference group was made up of representatives from five of the refuges in Tasmania, transitional accommodation agencies and support providers. The selected books for the original kit were on a mixture of themes, including recognising what feelings ‘feel like’, issues of self-esteem, moving house and the rights and wrongs of fighting. Of the 41 products originally trialled for the first *Safe from the Start* project, 24 were included in the 2008 kit: 16 story and picture books, an action songs book, four sticker and card sets and three puppets and toys. A recent evaluation of the original *Safe from the Start* training and kit (Bell, 2013) found that practitioners’ comments about the usefulness of the *Safe from the Start* kit across cultures were positive, but that they recommended development of the generic cultural translatability of the kit through direct engagement with CALD stakeholders (Bell, 2013, p. 11). That is what the CALD *Safe from the Start* project has strived to achieve.

The research reference group for the CALD *Safe from the Start* project comprised representatives of organisations that work with children from CALD backgrounds in Tasmania. These included the Phoenix Centre, Colony 47, Children’s Contact Centre, Sexual Assault Support Service, the Tasmanian Department of Health and Human Services and the Salvation Army Tasmania.

The group met in Hobart to discuss what was missing in the existing kit and whether any of the existing resources were inappropriate for children from CALD backgrounds. The consensus was that nothing in the kit would be detrimental for these children (and therefore nothing needed to be taken out), but that there was nothing in the kit that would particularly make these children or their mothers feel specifically included or that the kit had a special relevance to them. As a result, the *Safe from the Start* leaflets were amended to be more culturally inclusive (see appendices). At the same time, the research reference group members searched for books and toys that they felt would be culturally appropriate and would contain inclusive messages for children from CALD backgrounds who had been exposed to domestic and family violence and may have become homeless as a result.

In order to establish which toys and books would be most useful for promoting activity-based play, materials and resources for the original *Safe from the Start* kit were sourced from around the English-speaking world. For the CALD *Safe from the Start* project, members of the research reference group were asked to recommend books to trial for suitability. The following books and toys were recommended.

<b>Title</b>	<b>Author</b>
<i>My many colored days</i>	Dr Seuss
<i>What's wrong, little Pookie?</i>	Sandra Boynton
<i>Daddy's new family</i>	Leanne Harsh
<i>I miss Daddy</i>	Leanne Harsh
<i>Proud of our feelings</i>	Lindsay Leghorn
<i>My family's changing</i>	Pat Thomas
<i>Lots of feelings</i>	Shelley Rotner
<i>Whoever you are</i>	Mem Fox
<i>Am I really different?</i>	Evelien van Dort
<i>Spaghetti in a hot dog bun</i>	Maria Dismondy
<i>Two bad teddies</i>	Kilmeny Niland
<i>Samantha Seagull's sandals</i>	Gordon Winch
<i>The boy who didn't want to be sad</i>	Rob Goldblatt
<i>It must be my fault</i>	Leanne Harsh
<i>The nose that didn't fit</i>	Andi Green
<i>Feeling sad</i>	Althea Braithwaite
<i>The skin I'm in</i>	Pat Thomas
<i>When my worries get too big</i>	Kari Dunn Buron
<i>The naked penguin</i>	Kym Lardner
<i>My star daddy</i>	Kerry Francis
<i>It's okay to be different</i>	Todd Parr
<i>Double-dip feelings: Stories to help children understand emotions</i>	Barbara Cain
<i>The invisible string</i>	Patrice Karst
<i>The secret of dreaming</i>	Jim Poulter
<i>Lost and found</i>	Oliver Jeffers
<i>The way back home</i>	Oliver Jeffers
<i>The sad little monster and the jelly bean queen</i>	Kym Lardner
<i>Shades of people</i>	Shelley Rotner
<i>Rainbow bird</i>	Czenya Cavouras
<i>Drawing together to learn about feelings</i>	Marge Eaton Heegaard
<i>Where's my teddy?</i>	Jez Alborough
<i>My people</i>	Langston Hughes
<i>Baby says</i>	John Steptoe

<i>The twins' blanket</i>	Hyewon Yum
<i>I lost my tooth in Africa</i>	Penda Diakité
<i>Yesterday I had the blues</i>	Jeron Ashford Frame
<i>Ling and Ting: Not exactly the same!</i>	Grace Lin
<i>Shades of black: A celebration of our children</i>	Sandra L Pinkney
<i>The roots of my family tree</i>	Niki Alling
<i>Sitti's secrets</i>	Naomi Shihab Nye
<i>What is family? A question and answer book</i>	Tamia Sheldon
<i>Mixed me: a tale of a girl who is both black and white</i>	Tiffany Catledge
<i>Amazing faces</i>	Lee Bennett Hopkins
<i>Inside out and back again</i>	Thanhha Lai
<i>Ziba came on a boat</i>	Liz Lofthouse
<i>The peace book</i>	Todd Parr
<i>The peasant prince</i>	Li Cunxin and Anne Supdvilas
<i>Where is the green sheep?</i>	Mem Fox
<i>The little refugee</i>	Anh Do and Suzanne Do
<i>Home and away</i>	John Marsden and Matt Ottley
<i>A is for Africa</i>	Ifeoma Onyefulu
<i>A day in the life of Pradeep the dentist</i>	Monica Huges
<i>Peter's chair</i>	Ezra Jack Keats
<i>Sometimes my mommy gets angry</i>	Bebe Moore Campbell
<i>What is domestic violence?</i>	Immigrant Womens' Support Service
<i>Dust</i>	Save the Children
<i>On a dark, dark night</i>	Sara B Pierce
<i>Meg and Mog</i>	Helen Nicoll and Jan Pieńkowski
<i>Liking myself</i>	Pat Palmer
<i>Wilbur</i>	Phil Cummings
<i>How are you peeling? Foods with moods</i>	Saxton Freymann and Joost Elffers
<i>The red beast: Controlling anger in children with Asperger's syndrome</i>	K I Al-Ghani
<i>Small figures</i>	
<i>Feelings talk ball</i>	PTALK
<i>Expression flash cards</i>	ELC
<i>Children of the world gloves (set of 2)</i>	Story-Time

From this list the nine products listed in section 4.3 were shortlisted for trialling.

The methodology of the original project, developed in conjunction with the research reference group, centred on the ethical principle of respect and justice. It aimed at conducting ‘good’ research (Fraser et al, 2004, p. 98); that is, research that was the right and correct thing to do and would respect children as human beings (Spinney, 2013). The research methodology for the CALD *Safe from the Start* project used the same principles, but was adapted from that used for the original project. We wanted to establish which toys and books would be most effective for ameliorating the harm done to children from CALD backgrounds who had experienced domestic and family violence and trauma.

It became clear early on from the advice given by research reference group members that it was going to be challenging to design a methodology for the CALD *Safe from the Start* project that would suit mothers, workers and children who might have limited English. Issues of informed consent were raised by the research reference group: how could we make sure that mothers understood what the project was about and could therefore give their permission for the children to take part? Who would act as an interpreter? How could we keep the project to cost if we had to use bilingual workers? Would mothers be suspicious about signing the consent forms when they might have experienced negative consequences of signing things in the past? How would we deal with participants who were illiterate in any language? How would we deal with words and concepts that do not easily translate into other cultures? It was decided early on that we would need to amend the methodology from that used for the original project.

Research reference group members were also aware that the concept of adults playing with children is a western concept, and that it might be workers who trialled the products with the children (with their mothers’ permission), more than the mothers themselves. Originally *Safe from the Start* was aimed at children aged up to six who had experienced domestic or family violence. For this CALD project the research reference group agreed that it should be aimed at children aged eight and under who had experienced domestic and family violence and trauma. The group defined ‘trauma’ as referring to the pain, distress and suffering relating to or arising from forced migration. Traumatic events include war, civil conflict, human rights abuses and violence motivated by religious, ethnic or political reasons (Cole and Bowen, 2011). For the purposes of our research, the group of people who experienced trauma was deemed to include anyone living in Australia from a refugee or humanitarian migration background and their children.

We gave careful thought to issues of informed consent with this particular research participant group who might have very limited English and limited literacy skills in any language, and who might be more used to talking about matters in groups rather than on a one-to-one interview basis. The methodology agreed with the Research Reference Committee included:

- recruitment of participating domestic and family violence and refugee and asylum seeker organisations
- training of participating organisations’ primary contacts and bi-cultural workers on how to recruit research participants and how to carry out the research
- having participating organisations inform appropriate clients of the study and invite them to participate
- trialling of books and toys – having workers at the participating organisations trial the products with clients’ CALD children aged up to eight, or supervise trialling of the products by caregivers with their children
- completion of questionnaire forms by adult caregivers and workers

- invitation of adult research participants to attend group discussions with other participants from the same language group and the bi-cultural workers, to give their feedback on the books and toys
- use of the anonymous analysed data collected from the trialling process to inform the final make-up of the toolkit, which children's workers and parents will be able to use for working with children, aged up to eight, who have experienced domestic or family violence and/or trauma
- publication of the Final Report.

We also amended the original questionnaire to ask the following questions:

1. *How good do you think this book or plaything would be for young culturally and linguistically diverse children who have experienced domestic/family violence or other types of trauma?*
2. *How good do you think this book or plaything would be in helping a young culturally and linguistically diverse child to know that they are not the only one who has experienced domestic/family violence or other types of trauma?*
3. *How good do you think this book or plaything would be in helping a young culturally and linguistically diverse child to feel better?*
4. *Who do you think should use this intervention tool with young culturally and linguistically diverse children?*
5. *How good do you think this book or plaything would be in assisting a culturally and linguistically diverse parent and their child to have a conversation about the experiences they have been through?*
6. *Would you recommend this intervention tool to others to use?*
7. *If you would recommend this intervention tool, what age group do you think this book is suitable for?*
8. *How effective is this book in assisting a culturally and linguistically diverse parent and their child who have experienced domestic/family violence or other types of trauma to come to terms with what has happened to them?*
9. *What background of child do you think this book would be good for?*
10. *Do you think the book or toy is suitable to be used more than once with the same child?*
11. *Would you mind telling me in a couple of sentences what was your general feeling about the book or toy?*
12. *What makes you say this?*
13. *What mark out of 10 would you give this book/plaything?*

We looked for suitable organisations to work with us, with the aim of finding a total of approximately 25 adults from CALD backgrounds, who had children aged between nine months and eight years, to volunteer as participants for the research. Unfortunately we experienced such a low rate of participation that the group discussions did not take place, and our major data collection tool became the questionnaire completed by each participating mother and their worker.

### **4.3 Trialling the books and toys**

Recruiting participants to the research proved difficult, and only 21 completed questionnaires were received (completed by only a few mothers and their workers) in spite of an extended data collection period. While there was a lot of goodwill and support for the project from organisations, they gave the following feedback about why participation was low:

- Workers were nervous about using the books and toys with families/children who may have experienced trauma, as they felt ill-equipped to handle any issues that may arise.
- Workers did not want to risk re-traumatising children and families.
- Without the availability of interpreters, workers were concerned about the consenting process – ensuring that families knew what they were participating in – and therefore felt unable to ask their clients to participate.
- The level of English in the data collection instruments was beyond the English knowledge and skills of many client parents.

Feedback from workers who participated in the study highlighted that the information sheet and the questionnaire used to explain the project to potential participants from CALD backgrounds were too ‘wordy’ and used too many complex words. Translation of paperwork in situ by individual workers was time-consuming and difficult. Unfortunately the project funding did not allow for paid interpreters, and the participating organisations could not afford in most cases to pay for this service themselves. In hindsight the project funding did not allow for enough time to complete this methodologically complex project as fully as we would have liked. Ideally we would have had more time to visit CALD workers and reassure them about using the toys and books with children who may have experienced trauma, and had funds to pay for interpretation services. Although the project funding was similar to that of the Tasmanian Aboriginal *Safe from the Start* research, the more complicated methodology and language difficulties meant that this was a more time-consuming and therefore more expensive project.

The books and toys that were shortlisted by the Research Reference group to be trialled were:

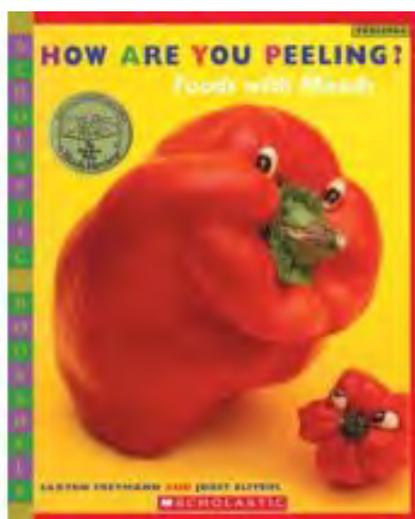
- *It’s okay to be different*, Todd Parr
- *How are you peeling? Foods with moods*, Saxton Freymann and Joost Elffers
- *Proud of our feelings*, Lindsay Leghorn
- *Feeling sad*, Althea Braithwaite
- *Lots of feelings*, Shelley Rotner
- *Double-dip feelings: Stories to help children understand emotions*, Barbara Cain
- *My many colored days*, Dr Seuss
- Feelings talk ball, PTALK
- Expression flash cards, ELC.

Although we did not receive feedback on all of these products, we were able to gain enough feedback from research participants and the research reference groups to make recommendations as to which of these should be added to the *Safe from the Start* kit and training program in order to make both more pertinent to people from CALD backgrounds. The following chapter explains these recommendations.

## Chapter Five – Results, recommendations and conclusion

This final chapter describes the products that we recommend are added to the *Safe from the Start* kit as a result of the CALD research project. The new products chosen to go are the ones that the research findings suggested would be most useful. It was not possible to include new books in languages other than English because for any language chosen relatively few children would be able to make use of the book. The number of new products is deliberately limited to prevent the kit price becoming too expensive for organisations to consider.

### 5.1 Recommended new products



#### 1. *How are you peeling? Foods with moods*

(Saxton Freymann and Joost Elffers)

**Ages:** Four to nine years

##### **Product description**

This beautiful and funny book is a wonderful way to engage young children about emotions and to help them understand there is a difference between ‘sad’ and ‘tired’ and ‘lonely’. As well as illustrations of anger, fear, surprise, joy, pride and sadness the unique photos of fruit and vegetables are excellent for counting, learning colours, judging feelings and moods and learning about healthy foods.

The book is fun and full of life, with bright, vibrant colours that make both adults and young children want to smile and laugh. The images will help children understand their moods. More importantly, they will show children that it’s OK to have these feelings.

On each page, laid out in signature crisp style, are wild lemons, capsicums and other fruit and vegetables that embody each emotion expressively with fabulous humour. Every page brings a smile to a child’s face with simple text and pictures that are funny and designed to start a conversation between adult and child about feelings.

##### **Workers’ and parents’ comments on *How are you peeling?***

- Because the pictures are of vegetables they are neutral.
- The book is a good first step – very useful for building rapport.

- Excellent resource for initiating conversations about feelings and emotions.
- Its effectiveness for trauma victims depends on the skills of the parent or worker.
- Fun and simple language.
- Every time my son reads the book it makes him laugh and happy.



## 2. Feelings talk ball

(<http://www.tts-group.co.uk/shops/tts/Products/PD1727067/Feelings-Talk-Ball/>)

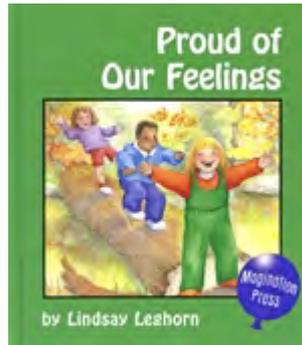
**Ages:** Two to six years

### Product description

The Feelings talk ball is highly recommended for use in activity-based play with children who may not engage with a storybook. The ball has pictures of different expressions – happy, sad, confused, surprised, angry, laughing – and can be used in a variety of activities, either one-on-one or in a group setting.

### Workers and parents' comments on the Feelings talk ball

- My children were very excited about the ball. They had good fun and played together.
- The children loved playing with the ball – could be good in a small group situation.
- Fun way to talk and play at the same time for the kids.



### 3. *Proud of our feelings*

(Lindsey Leghorn)

#### **Product description**

*Proud of our feelings* provides children with an entertaining and constructive way to learn to accept and appropriately express their emotions. It will also help to stimulate discussion and interaction between children and the adults who care for them.

*Proud of our feelings* is a wonderful way for children and parents to explore and openly discuss their unspoken feelings, thereby helping the children to build the feelings of self-trust that will enable them to evolve into emotionally well-balanced people.

Whether joy or sadness, excitement or anger, confidence or fear, this book addresses a different emotion on each page and asks insightful questions that will result in the fruitful exploration of the child's emotional landscape. In addition, children will identify with the real-life, multicultural illustrations, and the delightful prose will help to enhance the feeling being discussed.

#### **Workers and parents' comments on *Proud of our feelings***

- The pictures are engaging.
- Good that a question is asked of the reader to include him/her.
- Good for encouraging discussion of experiences of emotions.
- Reasonable diversity of children in book.
- Great diverse images.
- Great characters that the children could relate to.
- This is good for children who are lonely.

## 5.2 Recommendations

This section makes recommendations for the use of the kit and the development of a training program suitable for people who work with participants from CALD backgrounds.

1. The *Safe from the Start* training program should be modified to include the following:
  - cultural competency skills
  - an understanding of the intersection of culture, tradition, class, gender and contemporary social contexts

- information on the harm and vulnerability caused to mothers by their prior experiences of trauma, and the potential consequences for their children
- information on the intersection of culture, gender and trauma
- the use of *Safe from the Start* in group interventions, which are sometimes preferred by people from refugee backgrounds
- how people who work with people from CALD backgrounds can run their own *Safe from the Start* training.

### **5.3 Final conclusion**

This report has explained the ways in which the *Safe from the Start* kit has been made more appropriate for children from CALD backgrounds, through an action research process. The *Safe from the Start* kit will continue to develop and evolve as new products and new needs emerge.

An integral part of the *Safe from the Start* project is raising awareness of the damage done to children through experiencing domestic and family violence. Although the project has grown larger than anyone originally expected, the Tasmanian roots of the project have never been forgotten. We are delighted that an important gap in the original project – the inclusion of books, toys, posters and leaflets which have special relevance for children from CALD backgrounds – has now been filled.

It was originally envisaged that a separate CALD *Safe from the Start* kit would be developed. However, it was the view of the research reference group members that this would differentiate children from CALD backgrounds, and that it would be preferable to include some appropriate CALD-related products in the original kit, in the same way that books and toys suitable for Tasmanian Aboriginal children were added in 2013. This aims to prevent a situation where a separate kit would be brought out for children from CALD backgrounds where children of different races and cultures were present, such as in kindergartens, schools and libraries. It also means that children from non-CALD backgrounds can benefit from the new books and toys.

The available information, along with advice from workers and members of the research reference group, was used to guide how the kit should be adapted.

## Bibliography

- Atkinson, J 2013, *Trauma-informed services and trauma specific care for Indigenous Australian children, resource sheet no. 21*, produced for the Closing the Gap Clearinghouse, Australian Institute of Health and Welfare, Canberra and Australian Institute of Family Studies, Melbourne.
- Australian Bureau of Statistics 1996, *Women's safety Australia*, catalogue no. 4128, ABS, Canberra.
- Australian Bureau of Statistics 2011, *Census of Population and Housing, 2011*, Shining a Spotlight on Tasmania series, ABS, Canberra.
- Australian Domestic and Family Violence Clearinghouse 2011, *The impact of domestic violence on children: a literature review for The Benevolent Society*, The University of New South Wales, Sydney.
- Australian Institute of Health and Welfare 2007, 'Australia's welfare 2007', Australia's welfare no. 8, catalogue no. AUS 93, AIHW, Canberra.
- Bagshaw DM 2000, *Reshaping responses to domestic violence, final report*, University of South Australia, Adelaide.
- Bagshaw, DM & Chung, D 2000, *Women, men and domestic violence*, University of South Australia, Adelaide and Department of Prime Minister and Cabinet, Canberra.
- Bell, E 2006, 'States of mind': *a best practice framework for Women's Immediate Emergency Accommodation SAAP services in Tasmania working with children aged 0–5 exposed to domestic violence*, University of Tasmania, Hobart.
- Bell, E 2013, *Policy and practice directions for a domestic and family violence intervention for small children: 'Safe from the Start' final report*, University of Tasmania, Hobart and Salvation Army Tasmania, New Town.
- Boyd Webb, N 2007, *Play therapy with children in crisis*, 3rd edn, Guildford Publications, New York, USA.
- Brainwave Trust 2006, 'Seeing, hearing and feeling violence' pamphlet, Brainwave Trust, Auckland.
- Bunston, W & Heyanatz, A (eds) 2006, *Addressing family violence programs: group work interventions for infants, children and their parents*, Royal Children's Hospital Mental Health Service, Melbourne.
- Calder, M 2004, *Children living with domestic violence: towards a framework for assessment and intervention*, Russell House Publishing, Lyme Regis, UK.
- Cohen, E 2007, 'More than meets the eye: lifetime exposure to violence in immigrant families', *Protecting Children*, vol. 22, no. 2, pp. 55–56.
- Cole, R and Bowen, T 2011, *From the darkness to the light: Australia's program of assistance for survivors of torture and trauma*, Forum of Australian Services for Survivors of Torture and Trauma, Melbourne.
- Council of Australian Governments 2010, National plan to reduce violence against women and their children, COAG, Canberra.
- Cripps, K 2007, 'Indigenous family violence: from emergency measures to committed long-term action', *Australian Indigenous Law Review*, vol. 11, no. 2, pp. 7–18.
- Cunningham & Baker 2007, *Little eyes, little ears: how violence against a mother shapes children as they grow*, Centre for Children and Families in the Justice System, London Family Court, Ontario, Canada.
- Cunningham, A & Baker, L 2004, *Helping children thrive: supporting woman abuse survivors as mothers*, Centre for Children and Families in the Justice System, London Family Court Clinic, Ontario, Canada.
- Danby, S, Farrell, A & Leiminer, M 2006, 'Everyday experiences of homeless young people in supported accommodation programs in Australia', *Children and Society*, vol. 20, pp. 260–272.
- Darwin YMCA 2007, Children and violence information resource kit, YMCA, Darwin.
- Dimopoulos, M 2013, 'Domestic and family violence and CALD communities', webinar on behalf of 1800 RESPECT,  
<[www.vision6.com.au/download/files/31388/2074526/Domestic%20and%20Family%20Violence%20%20CALD%20Communities%2014%20Nov%202013%20webin.pdf](http://www.vision6.com.au/download/files/31388/2074526/Domestic%20and%20Family%20Violence%20%20CALD%20Communities%2014%20Nov%202013%20webin.pdf)>, accessed 14 April 2014.

- Fraser, S, Lewis, V, Ding, S, Dellet, M & Robinson, C (eds) 2004, *Doing research with children and young people*, Sage Publications Ltd, London.
- Guenther, J & Bell, E 2008, '*Safe from the Start*' evaluation report, University of Tasmania, Hobart.
- Jaffe, PG, Wolfe, DA & Wilson, SK 1990, *Children of battered women*, SAGE Publications, California, USA.
- Leggett, N 2007, *Violence against women in Western Australia: a summary about the prevalence, effects and community awareness of domestic and family violence*, Women's Council for Domestic and Family Violence Services (WA), West Perth.
- McCain, M, Mustard, F & Shanker, S 2007, *Early years study 2: putting science into action*, Council for Early Child Development, Canada.
- McGee, C 2000, *Childhood experiences of domestic violence*, Jessica Kingsley Publishers, London, UK.
- Mullender A & Morley R 1994, *Children living with domestic violence*, Whiting and Bird, London, UK.
- Rees, S & Pease, B 2006, *Refugee settlement, safety and wellbeing: exploring domestic and family violence in refugee communities*. Immigrant Women's Domestic Violence Service, Melbourne.
- Saville, H 1982, 'Refuges: a new beginning to the struggle', in C O'Donnell and J Craney (eds), *Family violence in Australia*, 1st edn, Longman Cheshire, Melbourne, pp. 95–109.
- Sawrikar, P, Griffiths, M & Muir, K 2008, *Culturally and linguistically diverse (CALD) young people and mentoring: the case of Horn of African young people in Australia*, report to the National Youth Affairs Research Scheme, Commonwealth of Australia.
- Settlement Council of Australia 2013, 'Domestic violence discussion paper', <[www.scoa.org.au/submissions-1/scoa-domestic-violence-discussion-paper](http://www.scoa.org.au/submissions-1/scoa-domestic-violence-discussion-paper)>, accessed 26 April 2014.
- Signorelli, R 2013, 'Challenges in cross-cultural early childhood work with refugees', *Psychotherapy in Australia*, vol. 20, no. 1, pp. 56–57.
- Social Exclusion Task Force 2007, *Reaching out: think family – analysis and themes from the Families at Risk Review*, Cabinet Office, London, UK.
- Spinney, A 2007, 'A comparative study of homelessness policies in Australia and England', PhD thesis, Sheffield Hallam University, UK.
- Spinney, A 2008, 'Challenges of working with/supporting children in a refuge (homeless) environment', paper presented to the European Network of Housing Research conference, Dublin.
- Spinney, A 2008, '*Safe from the Start*': education and therapy to assist children aged 0–5 who have witnessed domestic violence, The Salvation Army, New Town.
- Spinney, A 2011, 'Supporting children made homeless by family violence: an update on the *Safe from the Start* project', *Parity*, vol. 24, no. 10, p. 51.
- Spinney, A 2013, 'Safe from the start? An action research project on early intervention materials for children affected by domestic and family violence', *Children and Society*, vol. 27, pp. 397–405.
- Spinney, A & Nethery, A Cambridge University Press; 2013. 'Taking our houses': perceptions of the impact of asylum seekers, refugees and new migrants on housing assistance in Melbourne.
- Success Works 2006, *The right to be safe from domestic violence: immigrant and refugee women in rural Victoria*, Immigrant Women's Domestic Violence Service, Melbourne.
- Supported accommodation and assistance program 2006, *Homeless people in SAAP: the SAAP national data collection annual report 2005–06*, cat. no. HOU 159, AIHW, Canberra.
- Thomson-Salo, F & Paul, C (eds) 2007, *The baby as subject: New directions in infant–parent therapy from the Royal Children's Hospital*, Melbourne, 2nd edn, Royal Children's Hospital, Melbourne.
- Tomas, A & Dittmar, H 2007, 'The experience of homeless women: an exploration of housing histories and the meaning of home', *Housing Studies*, vol. 10, no. 4, pp. 493–515.
- United Nations High Commissioner for Refugees 2003, *Sexual and gender-based violence against refugees, returnees and internally displaced persons*, UNHCR, Geneva.

- van der Kolk, B 2007, 'Frontiers of trauma treatment with children and young people', Australian Childhood Foundation Seminar, Hobart.
- Weinreb, M & McAlister Groves, B 2007, 'Child exposure to parental violence: case of Amanda, age 4', in N Boyd Webb (ed), *Play therapy with children in crisis*, 3rd edn, Guildford Publications, New York, USA.
- YWCA Seattle 2010, *Through their eyes: domestic violence and its impact on children*, YWCA, Seattle, King, Snohamish.
- Zannettino, L, Pittaway, E, Eckert, R, Bartolomei, L, Ostapiej-Piatkowski, B, Allimant, A & Parris, J 2013, *Improving responses to refugees with backgrounds of multiple trauma: pointers for practitioners in domestic and family violence, sexual assault and settlement services*, Australian Domestic and Family Violence Clearinghouse, The University of New South Wales, Sydney.



## **SAFE FROM THE START KITS**

### **CONTENTS:**

1. A Teaspoon of Courage
2. When I Feel Angry
3. When I Feel Sad
4. When I Feel Scared
5. The Way I Feel
6. It's Just Different Now
7. Ruby and the Rubbish Bin
8. The Huge Bag of Worries
9. The Magic Beads
10. A New House for Smudge
11. The Wrong Stone
12. Something Has Happened
13. Tell Me a Story Mummy
14. A Terrible Thing Happened
15. Is it Right to Fight
16. Playsongs with CD
17. On a Dark, Dark Night
18. Cars R Us Kit
19. Teaching Mitt – Expression
20. Mood Dudes
21. Dinosaur Puppet
22. Lots of Feelings
23. How Do I Feel?
24. Duck & Goose
25. How are Peeling?
26. Emotions Ball
27. Grumpy Gertie
28. Jack the Wallaby
29. Wallaby puppet
30. When Daddy Hits the Table
31. When Mummy Shouts
32. Safe from the Start DVD

**FINAL RESEARCH REPORT**

**STATES OF MIND REPORT**

**HINTS & TIPS MANUAL**

**SMALL “FAMILY VIOLENCE” BROCHURE**

**“SEEING, HEARING AND FEELING” BROCHURE**

**A3 POSTERS**