Children's contact services

On servicing and respecting children's identity

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This article offers a brief notation on the First International Conference on Child Access Services, held in Paris on 4-7 November 1998. The author raises some questions which took shape at the Conference and notes the contrasting representations in different countries of the disciplines involved in establishing and running Child Contact Centres and how these may contribute to the contrast in ideology and philosophy in the setting up and running of these centres and the services they offer. The author's knowledge of the French contact centre models provides a basis for looking at the establishment of Australian centres, both government and non-government funded. The French centres' paramount goal to develop respect for the child as a person and uphold his legal position by equipping him with a sense of his history and roots, and by fostering respect between the parents, is seen as a more comprehensible concept than the ambiguous 'best interest of the child' goal upheld in Anglo-Saxon countries. Moreover, the length of involvement with families in the French centres is contrasted with the shorter period needed to secure the child's physical safety. The article concludes with the hope that Australian centres are at the threshold of developing an adjunct facilitative structure that would allow progress within the families referred to them and offers as a parting note some recent American research findings on the profile of families using visitation services and of the providers of such services.

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THE INTERNATIONAL **CONFERENCE**

The First International Conference on Child Access Services was held in Paris in November 1998, in an attempt to find answers to questions such as:

- Why has there been such a mobilisation among health and social service professionals to get involved in the establishment of contact centres?
- What are the similarities and differences among the services emphasising safety and strict supervision, and those emphasising the importance for a child's identity of maintaining relationships with both parents?

More abstract questions were also raised:

- Who are contact centres really servicing - the child, one parent, judges, society?
- What does the creation of these centres tell us about changing family structures and changing concepts of parenthood?

The conference brought together 55 presenters and three times as many delegates from ten countries, mostly from Western Europe but Ghana and Iceland were also represented. Australia was very well represented among both presenters and delegates.

The first difference to strike the writer was the prevalence among French participants of marital therapists and social workers (70); psychologists (45); educators (25); researchers (10); with lawyers and judges in a very clear minority. The reverse was true of

Australian and other Anglo contingents, in which lawyers predominated. The contrasting representations of the different disciplines in establishing and running the centres may contribute part of the explanation for the markedly apparent difference in ideology and philosophy in the setting up and running of these centres.

THE FRENCH CONTACT CENTRE MODELS

There are basically two French models of 'welcoming centres' or 'meeting places' (as they are called in France). One is what the French refer to as the Collegiate Model, embodying Freudian theory and practice. These centres are characterised by neutrality, nondirectiveness, non-intrusiveness, and strict rules. They have no hierarchy, but have interchangeable staff teams of psychiatrists and psychologists (three or four members) who, excluding volunteers, receive equal pay, with peer supervision. Clients remain anonymous and visits are initiated and set up by the clients themselves. There is a clear separation between staff and clients. This model demands regular meetings of the professionals, who have other remunerated jobs in addition. Payment for visitation use is not a precondition for admission. The goal is to develop a relationship between the child and the non-residential parent, whilst operating from a formal, reserved stance (Benoit & Cardia-Voneche, 1996).

The other is the Empathic or Familial Model, closer in type to a Community Neighbourhood Centre. It receives clients in an atmosphere evoking family life in what could be described as a familial setting. Displays of affection

and regard are welcome, as are volunteers. There is a clear staff hierachy, some professionals are salaried and psychoanalysts are used as supervisors. The goal of these centres is to develop the concept of co-parenting or common parenthood as referred to in The Parental Obligation (Maclean & Ekelaar, 1997), thus effecting a paradigm shift from viewing the end of a spousal partnership as the end of the family, to accepting that the parental obligation is forever. This is done by working through the spousal conflict and through processes akin to mediation and negotiation. The concept of coparenting implies a shift in society's thinking about families after separation. It also implies a shift away from the dichotomy of what are maternal functions and paternal functions, and a shift towards recognizing the mix of skills involved in parenting, and reminding parents of the principle of 'the whole being more than the sum of its parts'.

NO LONGER A CLEAR DICHOTOMY BETWEEN MODELS

Information tends to be lost when making generalisations or compressing data into categories or types. Moreover, some things do not remain the same over the years, and nowadays, the differences between the two models are much less clearly drawn. Within the 52 existing 'Point Rencontre' Centres or 'Meeting Places', a wide range of variations on these models has developed. Nevertheless, their long term goal continues to be to develop respect for the child as a person and respect between the parents, while working to help one or both parents regain emotional stability. The backbone of the Point Rencontre Centres' Ethical Code, a copy of which was distributed during the Conference, is to equip the child with a sense of his or her history and roots and to uphold his or her legal standing by not severing the child from a relative.

These centres maintain the principle of neutrality in all their interventions and are aware that their contract with the families is temporary and time-limited. The child is gradually introduced to the particular centre and told the rules regulating visits. The emphasis is on the child feeling secure whilst there, with

reassurance that he or she has done nothing wrong. Both parents are subject to behaviour rehearsals before the visit - the residential parent in what to tell the child about the visits, the contact parent on how to say hello and goodbye. The number and type of the centres' interventions can be decided collaboratively by the parents and the centre, the judge (if a judicial referee) or the centre itself. The centres do not maintain either written or oral communication with the judiciary, or report to the judge on the parent/child relationship. They provide parents with factual dates of their visits and exchange letters with them concerning the course of the visits. It is then up to the parents, if they wish, to share any visitation information with their lawyers.

THE CENTRES' SUCCESS

At the conference, Dr Poussin, university professor and founding member in 1987 of the centre 'The Passerelle,' warned against attempts at stereotyping or profiling what makes successful client families. He did not think that non-court referrals, on the whole, proved easier to work with for positive outcomes than judicial referrals, and warned that work with some families could take as long as two years. He estimated the success rate of The Passerelle to be 50% of families. He referred to two types of situation, regardless of the referral origin, in which the centres were doomed not to succeed. One type of situation concerned a manipulating, narcissistic parent, who creates for the child a cognitive dissonance which makes it impossible for the child to modify perceptions, because of the child's previously taken position or action. The other type concerned accusations of sexual misconduct by a parent. 'What can the centre do in these situations?', the Professor asked. If the visits continue the centre is charged with favouring incest; if the visits are stopped the centre is seen as giving support to the allegation. It had to be admitted that in these situations the centre could not be of service to the child. This raised the question of criteria to be used in deciding which services best suit which families. Dr Poussin's final concern regarding the present confusion in society between the law and justice, was that some parents

became obsessed with their rights instead of thinking of fairness and justice for every family member.

THE AUSTRALIAN SCENE

Australia has not yet had ten consistent years of running contact centres (although some existed in the early 1980s) and as a young country, never embraced psychoanalysis or basked in its glory to the extent of France and Europe. Most of the money and pressure for establishing contact centres has not come from mental health professionals and social workers, but from legal practitioners and legal centres. As a predominantly Anglo-Saxon country, the Australian encroachment of public law into private lives is long-standing. Many people thus do not seek empowerment for working out parameters of possible solutions to their conflicts, but prefer to turn to lawyers and the justice system. Domestic violence and acts of aggression are considered in Australia to be a more unacceptable crime than they are in France, and draw greater social punishment. Since 1990 the National Committee on Domestic Violence has played a very important part in imprinting the Committee's view on the inadmissibility to mediation of cases of domestic violence, unless the mediator follows its Guidelines for Case Mediation involving Violence against Women, or on denying contact rights to violent fathers, because violence in men is the antithesis of being a good father.

Although the Australian Federal Government's Justice Statement announcement of May 1995 said that parents using handover centres would be offered the opportunity of education in parenting and family skills, there has been little evidence of this in the Contact Services in Australia Research and Evaluation Project Year One Report on Pilot Contact Services (Attorney General's Department, 1998). Some services have distributed a communication booklet for client families and about one third of client parents leaving these services report having acquired the ability to manage contact by themselves. This could be because, although the number of changeover visits far exceeds supervised visits, the centres' resource priorities have gone into guaranteeing

safety first. Parents' comments in the One Year Report referred to the services as dispensing a 'holding service' rather than as a place where relationships could progress.

The Code of Ethics for Australian contact centres featured in the Australian & New Zealand Association of Children's Contact Services (ANZACCS) Interim Standards document is not dissimilar to the code of the French Federation. It insists on the autonomy of each centre, application of the Association's standards and guidelines, adoption of formal protocols between centres and courts, and the availability of Legal Aid for children's representatives in complex cases.

Apart from the ten centres involved in the Project funded from 1996 to the year 2000 by the Attorney General's Department, there are at least an equal number of non-government funded centres as well.

The ten government funded centres are bound to promote the welfare and best interests of the child. Uniformity in philosophy and in service delivery models is greater than in the unfunded centres, where service appears to be more tailored to particular client needs (including transport) and hours are more flexible. In the unfunded services, adjunct service referrals are bridged in a more personal manner that assures greater compliance. Unfortunately, the principle of 'the best interests of the child' is still a very ambiguous concept in Australia and does not necessarily ensure 'respect for the child as a person, respect between parents, furnishing the child with a sense of his history and roots and avoiding total cut off from one parent or relatives'.

AUSTRALIAN CONTACT CENTRES AT THE THRESHOLD OF DEVELOPING A BRIDGING INFRASTRUCTURE

Now that the need for contact centres has been clearly demonstrated and the Government has committed more money for their development, what seems to be needed is the adjunct facilitative infrastructure for cases where alcohol, drugs, mental health and behaviour problems exist in the parents, besides the obvious parenting skills for parents of children of different ages.

In the amendments to the Family Law Act of 1996, there has already been a shift from the 'rights of parents' to the 'responsibilities of parents' but it has not permeated the thinking of all the allied health and social services people in the field. The 1998 Australian Institute of Family Studies Conference, Changing Families, Challenging Futures, included papers on the rehabilitation of fatherhood (Skene, 1998), expanding the biological function of bringing a child into existence to the nurturing and creative elements of parenting.

Perhaps one of the more positive consequences of the creation of contact centres is that they could alert society in general, and Australian society in particular, to the need to reduce the inequality that exists in dual relationships, be it parent/child or man/woman. If the centres were to develop their own facilitative infrastructure or bridge parents' access to more professionals, they could be acting as a catalyst towards the meeting of that need.

A PARTING NOTE ON RESEARCH FINDINGS

Americans Janet Johnston and Robert Strauss in their presentations at the Conference stressed the need to familiarise the child with the centre before the visits commence. They asserted the need to behaviourally rehearse the child on how to say hello and goodbye to the absent or infrequently seen parent, what behaviours were allowed from the visiting parent, and how the residential parent should prepare the child for the contact.

Pearson, a long time researcher on Dispute Resolution in the USA, reported on two of her surveys or studies for the Centre for Policy Research: Supervised Visitation: the Families and their Experiences, on the families using visitation services (as they are called in the USA, where there are 300 of these centres); and Supervised Visitation: a Profile of Providers, on a profile of the providers of such services. Among families attending the centres, 92% attended as a result of judicial referral, 40% of families assessed their own situation to have improved through visitation. The

average time over which visits took place was 6-7 months. Court orders for supervision were only lifted in 20% of cases. Among cases referred to court mediation, 50% involved domestic violence.

In 37% of cases the residential parent was seen as responsible for the lack of progress. Some of the centres offered 'evaluations and assessments' prior to or during their supervised visitation. Only a few centres organised their own review of cases.

Pearson's data from the second study appear to support the view that supervised visitation programs work best when they complement other therapeutic interventions, because many of the families attending them have serious dysfunctions, such as medical or emotional problems. She suggests that the court needs to schedule timely review hearings to ensure that case progress is being monitored and that families are receiving additionally needed services. Australia is fortunate in being able to benefit from all this research when at the threshold of further expansion in contact centres.

NOTE: ANZACCS website can be viewed at: http://www.ozemail.com.au/~anzaccs

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