

The **PERCS Conversation Guide** is a psychosocial discussion tool for practitioners working with parents. It supports collaborative, respectful conversations around the impact of substance use and other adversities on children's daily lives.

The guide provides example questions to help you explore five important domains in a child's life. It is designed to help you to recognise parents' strengths and hopes for their family, and opportunities to support and improve children's mental and physical health, resilience and wellbeing.

There are four broad stages to the guide:

1 What is the entry point?



Ask the parent-client about pregnancy and children at the first point of contact and in all subsequent sessions. This includes:

- asking at intake/assessment about pregnancy and children – age, full name, access, custody details, etc.
- exploring the child's social and emotional wellbeing from the very first meeting, using open questions; and
- asking about the child – preferably by name – at every session, keeping the PERCS domains and practice principles (listed below) in mind.

This will ensure the fast-tracking of expecting parents and will normalise parenting conversations as part of treatment.

2 What are you curious about?



Consider the five PERCS domains:

- P** Parent-child relationships
- E** Emotions and behaviours
- R** Routines
- C** Communication and meaning-making
- S** Support networks

This guide contains example questions to assist practitioners in conversations with parents about their children. The first set of questions encourages open enquiry, while the second set is designed to help develop a deeper understanding of the impact of substance use on children's daily lives.

3 Conversation with the parent



Conduct a collaborative and respectful conversation with the parent to arrive at shared understandings and decisions, using the six principles of parent engagement:

- Child-aware and parent-sensitive
- Curiosity
- Collaboration
- Strengths and hopes
- Context
- Respect

These principles will support the development of the trusting therapeutic relationship necessary to have these conversations.

4 Provide support








Provide support to parents to protect the child from the impacts of substance use:

- Use a strengths-based approach to support a positive parent-child relationship and improved emotional wellbeing for children.
- Provide resources to parents regarding child development and parenting practices.*
- Practice integrated care and make warm referrals to children's services as required.

*See www.raisingchildren.net.au

This guide provides a pathway and example questions for exploring the five domains of a child's life.

P	 <h3>Parent-child relationship</h3> <p>A safe, secure, responsive and nurturing relationship between a child and their parent/caregiver is key to building resilience.</p>	Practitioner's role <ul style="list-style-type: none">• Identify if/how parents feel/stay connected to their child.• Promote parents' confidence and a positive parent-child relationship.	ASK Example question <p>Tell me about (child's name). What's it like being their parent?</p>
E	 <h3>Emotions and behaviours</h3> <p>Children need to feel loved, safe and confident that their emotions will be listened to and responded to in a nurturing way.</p>	Practitioner's role <ul style="list-style-type: none">• Help parents to understand and be responsive to their child's emotions and behaviours.• Support parents to develop a shared language.	ASK Example question <p>How do you think (child's name) shows you when they are worried/happy/sad?</p>
R	 <h3>Routines</h3> <p>Routines and rituals provide children with a stable base, especially in times of stress.</p>	Practitioner's role <ul style="list-style-type: none">• Encourage parents to create routines and predictability in their children's lives.	ASK Example question <p>What sort of routines are important in your family?</p>
C	 <h3>Communication and meaning-making</h3> <p>Respectful and effective communication can help children to express emotions and make meaning from experiences of adversity. This helps develop their resilience.</p>	Practitioner's role <ul style="list-style-type: none">• Support parents in understanding the impact of adult issues on their child.• Guide parents in helping their children make sense of life events through questions and conversation.	ASK Example question <p>What opportunities do you get to spend time talking with (child's name)?</p>
S	 <h3>Support networks</h3> <p>Safe and supportive networks outside the family can be key to a child's social and emotional wellbeing.</p>	Practitioner's role <ul style="list-style-type: none">• Help parents to identify and develop a consistent, positive support network for their child.	ASK Example question <p>Is there someone who can help you out with (child's name) when needed?</p>

The PERCS Conversation Guide gives examples of ways to conduct conversations with parent-clients that are respectful and collaborative. A trusting relationship between practitioner and client is crucial in order for that to happen. The following principles are key in supporting the skills needed to build that relationship.



Child-aware and parent-sensitive

A child-aware approach acknowledges and considers the experiences of the client's children, and avoids these children being 'invisible' to services. It recognises the role of those children in the client's life, even when the child never directly accesses the service. A child-inclusive approach involves children in conversations about their social and emotional wellbeing where it is appropriate to do so.

A parent-sensitive approach identifies, acknowledges and validates clients who are parents and draws upon the parenting role as a central feature of meaning and motivation in their life. This includes being aware of stigma and attentive to the additional fear of judgment about parenting competence that clients may have experienced and which can complicate the development of a trusting therapeutic relationship.



Curiosity

A curious stance involves looking holistically at what is happening for the client. It involves gently exploring issues underlying substance use and the impacts of use on other areas of the client's life (or vice versa), including relationships and parenting.

Being curious asks you to be mindful and sensitive of issues such as:

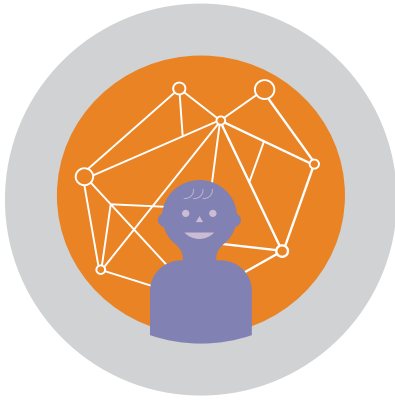
- trauma history, family and domestic violence, and housing instability and how they impact clients as parents
- stigma associated with substance use and how it can be a barrier to treatment, especially for parents
- parents' potential fear of being judged
- being open about the limits of confidentiality whilst also being sensitive to the parent's fear that you may report them to child protection authorities
- reassuring parents that in the majority of cases child protection reports are not necessary
- parents' previous experiences with child protection authorities, which may have made them angry or highly fearful of children being removed from their care
- parents' own self-judgment, internal critic and sense of shame; and
- parents' experiences of being parented themselves and intergenerational cycles.



Respect

Respect considers each individual client's story, values, culture, perspectives, needs and plans, and recognises them as being the expert in their own lives. It also involves empathetic, non-judgmental use of professional expertise that:

- is warm, genuine and transparent in order to build trust and a place of safety
- includes open and honest conversations around consent and mandated reporting
- seeks to empower parents through knowledge of the above
- acknowledges and validates the parenting status of clients, regardless of what shape it takes
- respects parents' knowledge and understanding of their own children and family
- is very mindful to avoid judging parents who are facing challenges; and
- views parents as more than just the challenges they face.



Contextual understandings

This involves asking open questions about the client's life situation to better understand the unique circumstances of each client's:

- family of origin
- current relationships and family/kin/friendship supports
- child raising circumstances – access, custody, shared care, kinship care
- employment/volunteering/study/caring/other commitments
- culture and spiritual beliefs; and
- attitudes to parenting and childhood.

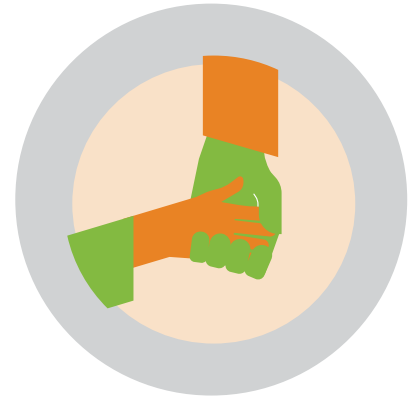
Contextual understandings are key to providing culturally competent service delivery that caters to children and families from diverse cultures.



Collaboration

Collaboration involves supporting parents to recognise their own strengths, resources and ways in which things are going well in regard to parenting. It also involves empowering them to feel more confident and competent in their parenting, and providing them with choices, information and encouragement. AOD practitioners can work collaboratively by:

- highlighting parents' expertise – their knowledge and understandings of their own child
- empowering parents to make their own decisions based on their values, hopes and dreams for their family
- working on a care plan that includes the parent's and child's identified goals for their family
- supporting parents to build constructive relationships with child protection; and
- taking time to understand the child's perspective and hopes for their family.



Strengths and hopes

This involves identifying, highlighting, encouraging and building upon the hopes, strengths, efforts, capabilities and positive qualities of clients, and the resources available to them. Practitioners should demonstrate a belief that the client, as a parent, wants the best for their children. Ask questions about parenting values that underly the hopes parents have for their children, and what is important to them in their relationship with their child. Empower parents to see how things are improving to build self-efficacy. Recognise that culture is a source of rich tradition, resilience and strength for parents and children, especially among Aboriginal and Torres Strait Islander people.