

Module 9

Courageous Conversations

A Guide for Foster & Kinship Care Practitioners

Purpose:

This module supports practitioners to engage in and facilitate courageous conversations with carers through a trauma-informed, child-centred lens. It positions partnership with carers as a core therapeutic and protective function, builds capacity to support carers to speak up with confidence, and strengthens shared responsibility while maintaining professional authority. The module promotes relational safety and alignment across adults to support child safety, wellbeing, placement stability, and carer sustainability.

Understanding Courageous Conversations

Theory and Practice Knowledge:

Courageous conversations are central to trauma-informed, child-centred practice because children experience safety through aligned, regulated adults. Miscommunication, unresolved tension, or power imbalance between carers and professionals can increase distress for children with trauma histories. Carers bring essential day-to-day knowledge, while practitioners work within systems of authority and constraint. This module frames conflict, feedback, and concern-raising as protective processes that require structure, regulation, and relational safety.



Practitioner Guidance:

- Position partnership with carers as a protective intervention and recognise carers as experts in the child's daily experience.
- Support courageous conversations by slowing interactions when emotions rise, anchoring discussions to observed child impact, and being clear about roles, decision-making, and next steps.
- Actively support carers to raise concerns early using calm, structured language, and attend to tension or misalignment promptly to protect child safety and placement stability.

Reflection Questions:

- How am I recognising and valuing carers' knowledge and expertise?
- Where might power or system pressures be affecting partnership?
- How do my emotions and regulation impact interactions and outcomes?
- How am I including carers in decisions that affect the child?

Relevant Statement of Standards:

Standards a-k

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Working in partnership

Theory and Practice Knowledge:

Children who have experienced relational trauma need coherent, regulated adult systems, as misalignment between professionals and carers can increase stress and dysregulation. Carers act as the child's primary attachment figures in placement, so their felt safety directly shapes the child's nervous system. Power imbalances can unintentionally mirror earlier experiences of control or silencing, making effective partnership a protective intervention rather than an administrative preference.

Practitioner Guidance:

Explicitly recognise carers as experts in the child's day-to-day regulation and cues, and be transparent about roles, decision-making, and system constraints. Use inclusive, collaborative language and prioritise relational safety, particularly where carers have experienced scrutiny or system harm. Address and repair partnership ruptures early, as adult misalignment directly affects a child's emotional safety.

Reflection Questions:

- Where do you feel most included in working with professionals, and where do you feel less heard?
- How does your knowledge of this child complement what professionals bring?
- What helps this feel like genuine collaboration rather than working in parallel?

When to raise concerns

Theory and Practice Knowledge:

Carers are often the first to notice changes in a child's emotional, behavioural, or physiological patterns due to their close day-to-day involvement. Raising concerns is a protective function, not an adversarial act, particularly as trauma-related distress may appear subtly or in non-linear ways. When systems delay or do not respond, harm can be compounded for children already outside their window of tolerance, making early and normalised concern-raising critical for timely, less intrusive intervention.

Practitioner Guidance:

Support carers to **raise concerns early by responding consistently and reinforcing that speaking up is protective**. Guide carers to share clear observations and child impact, acknowledge experiences that may make advocacy feel unsafe, and help link concerns to the child's history or needs. Be clear about escalation pathways and carers' rights so concerns can be raised with confidence and clarity.

Reflection Questions:

- What are you noticing that feels important to name, even if it feels uncomfortable?"
- "What impact are you seeing on the child that makes this concern feel significant?"
- "What would help you feel safer or more confident raising this?"

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Addressing Conflict

Theory and Practice Knowledge:

Conflict is a predictable feature of high-stress, trauma-exposed systems and does not signal failure. Trauma histories can heighten threat perception, defensiveness, and urgency for both carers and professionals, shaping how disagreements unfold. When adult conflict is unaddressed or avoided, children's sense of safety can be destabilised even if they are not directly involved. **Effective practice prioritises repair and relational trust over immediate resolution**, as unresolved needs or avoided conflict can be as harmful as escalation.

Practitioner Guidance:

Normalise conflict while holding clear expectations for safety, respect, and accountability, and support carers to separate people from problems by anchoring discussions to child impact. Use simple, structured approaches to reduce escalation, be mindful of power dynamics and actively ensure carers are heard, and clearly document agreements, responsibilities, and review points to reduce ongoing tension.

Reflection Questions:

- "What part of this conflict feels most activating for you?"
- "What do you feel is getting lost in the disagreement?"
- "If we slowed this down, what would you want decision-makers to really understand about the child?"

De-escalating yourself and others

Theory and Practice Knowledge:

Heightened emotional states limit executive functioning, narrowing listening, problem-solving, and shared decision-making, as described in trauma and nervous system theory. From a trauma-informed perspective, escalation often reflects a survival response rather than intentional resistance, particularly for carers operating under sustained stress. Practitioner regulation plays a critical role in co-regulating interactions and shaping outcomes. Effective de-escalation is therefore a prerequisite for collaboration, preserving dignity, relational trust, and focus on the child.

Practitioner Guidance:

Model self-regulation to slow conversations when emotions rise and support carers to recognise early signs of escalation. Reinforce that pausing or requesting follow-up is protective, coach carers to de-escalate others while holding boundaries, and be clear that escalation pathways are appropriate when safety or action is not achieved.

Reflection Questions:

- "What do you notice in your body or emotions when things start to escalate?"
- "What helps you stay grounded enough to keep the child's needs in focus?"
- "What would help this conversation feel calmer or more contained right now?"

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Giving and receiving feedback

Theory and Practice Knowledge:

Feedback within systems can activate shame, fear of judgement, or past experiences of scrutiny, particularly where trauma and power imbalances are present. Trauma-informed theory emphasises separating behaviour or process from identity, reducing threat responses and supporting regulation. When feedback is clear, respectful, and predictable, it strengthens learning, trust, and shared accountability. Feedback processes should therefore model the same principles of safety, clarity, and repair that underpin therapeutic and caregiving relationships.

Practitioner Guidance:

Frame feedback around behaviours, processes, and child outcomes rather than personal judgement, and offer it predictably and privately where possible. Support carers to pause, seek clarification, or request time when receiving feedback, intervene if feedback becomes shaming or unsafe, and reinforce that respectful disagreement is part of healthy partnership.

Reflection Questions:

- “What was it like for you to receive that feedback?”
- “What part felt useful, and what part felt hard to take in?”
- “What do you want others to understand about your intentions or effort as a carer?”

How to speak up respectfully

Theory and Practice Knowledge:

Carers may feel hesitant to raise concerns within systems due to power imbalances or past experiences, making practitioner support critical to effective advocacy. From a trauma-informed and relational practice perspective, speaking up is a protective act rather than confrontation, particularly when concerns are framed around observations, child impact, and solutions. Modelling calm, structured communication supports regulation and alignment across systems, while reflective supervision helps carers refine timing, tone, and approach. Clear documentation of concerns and agreed actions reinforces shared accountability and safety for the child.

Practitioner Guidance:

Coach carers to use structured approaches such as Observation–Impact–Request, support pausing and self-regulation before raising concerns, and reinforce solution-focused language centred on the child's needs. Guide carers to choose appropriate forums for conversations, validate advocacy as a core care responsibility, and encourage brief written follow-up to support clarity and accountability.

Reflection Questions:

- What are you hoping to achieve by raising this concern, and how does it support the child?
- How can you focus on what you've observed and its impact on the child, rather than on individuals?
- When you feel worried or frustrated, what helps you stay calm and clear before speaking up?

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Specialist Resources & Further Reading:

- Australian Institute of Family Studies (AIFS). (2020). Trauma-informed care in child and family services.
- Child Family Community Australia (CFCA). (2021). Collaborative practice in complex child and family systems.
- Queensland Department of Children, Youth Justice and Multicultural Affairs. Child Safety Practice Manual – Partnering with carers.
- Queensland Foster and Kinship Care (QFKC). Statewide communication support guide.
- Stone, D., Patton, B., & Heen, S. (2010). Difficult conversations: How to discuss what matters most.
- Patterson, K., Grenny, J., McMillan, R., & Switzler, A. (2012). Crucial conversations: Tools for talking when stakes are high.
- Schore, A. N. (2012). The science of the art of psychotherapy.
- Levine, P. A. (2010). In an unspoken voice: How the body releases trauma and restores goodness.

Self-Care Reminder for Practitioners

Courageous conversations can be emotionally demanding. Caring for your own regulation, using supervision and peer support, and allowing time to reset after difficult interactions helps you stay grounded and present. Looking after yourself supports the relationships and clarity that children and carers rely on.




Remember:

- Work alongside carers as trusted partners, recognising their deep, day-to-day knowledge of the child and keeping the child's safety and wellbeing at the centre.
- Regulate yourself first, slowing conversations when needed and using calm, clear communication to support shared understanding.
- Be transparent and respectful, naming roles, limits, and next steps while focusing on observations and child impact rather than blame.
- Address tension early and share the load, normalising concern-raising and seeking support when conversations feel heavy or stuck.

Support Options:

- Internal reflective supervision
- Peer consultation groups
- Employee Assistance Program (EAP)
- Trauma-informed counsellors or wellbeing coaches

 "Safety is not the absence of threat, but the presence of connection."
— Stephen Porges