

# Children and Families

*'The family is the primary influence on a child's development.'*<sup>3</sup>

Families play a central role in making communities liveable for children and young people. To enhance their children's resilience families require proper safety nets and supports.<sup>4</sup> In some instances families may need focused support to provide the best care for their children, particularly those families who are experiencing disadvantage.

For families, and their children, a liveable Victoria is one where the spectrum of services that work with children, young people and their families, work closely together to ensure that those who are vulnerable do not fall through the net.

A sustainable Victoria has services and supports that surround children and families, in the communities where they live, coupled with families having equitable access to opportunities to participate and be decision makers.

By investing in keeping Victorian children and families safe and supported we are building strong and connected communities and creating a more inclusive, liveable, sustainable Victoria.

## Universal support for Victorian families

Support for families cannot be undertaken in isolation - it is critical that it is provided in a seamless, integrated way along the prevention – early intervention – secondary – tertiary service continuum. Sustained investment in a system of universally available family support services that complement and collaborate with a range of other services or interventions is required.

Family support services provide valuable assistance to parents, helping to reduce parental stress, improving parenting skills and confidence, and strengthening parent-child relationships. To be most effective, vulnerable families need to be connected to the support services they need as early as possible, and for as long as required.

Family support organisations report that their services are under increasing pressure. Their capacity to provide early intervention family support services is limited because of the significant demands from more complex families that they are required to prioritise due to the fact that the children are at a higher risk.

Continued under-funding of family support services, particularly early intervention supports, remains one of the key factors undermining improved outcomes for vulnerable children, young people and families. A lack of early intervention family support services can damage the development of children.

<sup>3</sup> L Irwin, A Siddiqi & C Hertzman, *Early childhood development: a powerful equalizer*, Final report for the World Health Organisation's Commission on the Social Determinants of Health, Human Early Learning Partnership, June 2007, p.21.

<sup>4</sup> ..., p.25.

The current heightened financial hardship being experienced by many families as a result of the drought and increased housing costs, further highlights the urgent need for more early intervention family support services.

An increased investment in early intervention families support services will not only better support families before they reach crisis point but will also divert demand from child protection and other more cost intensive tertiary end services.<sup>5</sup>

## Indigenous children, young people and families

*'By sharing the journey together in trust we have a chance to give every Aboriginal child, and their families, a chance.'*<sup>6</sup>

Indigenous children continue to have poorer health and wellbeing than non-Indigenous children. These differences include higher infant mortality rates and lower birth weights.<sup>7</sup>

In addition, Indigenous children are over-represented in the out-of-home care system.<sup>8</sup> In Victoria, Indigenous children are 10 times more likely than non-Indigenous children to be substantiated as child protection cases.<sup>9</sup> This is in part due to the fact that currently too many Indigenous families receive no support until issues reach crisis point.

Many of the services that are available often don't meet the specific needs of Indigenous children, young people, and families because of the lack of sufficient Aboriginal-specific family services and culturally responsive generalist services.<sup>10</sup>

VCOSS has welcomed the commitment in the *DHS Aboriginal Services Plan* and the funding contained in the 2008-09 State Budget to strengthen the capacity of Aboriginal community-controlled organisations and assist them in delivering child and families' services.

VCOSS also welcomed the Government's investment in Aboriginal-specific residential care services and kinship care supports. This is an important first step towards ensuring that more Aboriginal community-controlled organisations are able to care for more Indigenous children.

5 K Paterson, *Supporting families: The case for increased resources for family services*, Centre for Excellence in Child and Family Welfare, 2003, p.61.

6 M Bamblett (as quoted in Centre for Excellence in Child and Family Welfare Monograph, *Good practice in child and family welfare services for Aboriginal children, young people and families*, CECFW, February 2007.

7 Department of Human Services, *State of Victoria's Children 2006*, Statewide Outcomes Branch, Office for Children, 2006.

8 D Higgins, L Bromfield, J Higgins & N Richardson, *Protecting Indigenous children: views of carers and young people on out-of-home care*, Family Matters, Australian Institute of Family Studies, 2006, Issue No. 75.

9 Department of Education and Early Childhood Development and Department of Human Services, *Improving Victoria's Response to Vulnerable Aboriginal Children and Families*, Discussion Paper, June 2008.

10 Office for Children, *A new strategic framework for family Services – 2006*, State of Victoria, Department of Human Services, 2006.

Those mainstream organisations that do work with Indigenous children and their families must be culturally competent.

Cultural competence is about genuine organisational commitment to Aboriginal self-determination. The benefits of non-Indigenous organisations becoming culturally competent include greater engagement with Indigenous communities, an appreciation of Indigenous culture and people and improved outcomes for Indigenous children and families now and in the future.<sup>11</sup>

The Victorian Aboriginal Child Care Agency was contracted by the DHS to develop an Aboriginal Cultural Competence Framework, which is due to be implemented across registered community service organisations that comply with the *Children, Youth & Families Act 2005*.

*'A positive Indigenous community development model must incorporate 'yarning up not down'. Yarning up related to 'yarning for outcomes' rather than speaking down to indigenous people. Yarning down is an indication that the outsider knows best or takes control of the outcomes for Indigenous people.'*<sup>12</sup>

Central to cultural competence is the commitment to building respectful partnerships between Aboriginal community-controlled and mainstream organisations. VCOSS members, who are both mainstream and Aboriginal community-controlled have highlighted the importance of having a cuppa and yarn as part of building partnerships, however resourcing is essential if partnerships are to be maintained.<sup>13</sup>

Partnerships at this time, need to be about supporting and complementing Aboriginal-controlled organisations, not about mainstreaming.

## Strong child and family services - resourcing Child FIRST and community-based child protection

*'Outcomes for children, young people and families improve if services are integrated, coordinated and provided flexibly to meet individuals' needs.'*<sup>14</sup>

A sustainable child and family service system needs to be adequately resourced in order to provide a range of supports along the service continuum. In addition to the need for investment in early intervention family support services, resources also need to be targeted

11 Victorian Aboriginal Child Care Agency, *Draft cultural competence framework*, 2008, p.22, unpublished.

12 M Burchill & D Higgins, Indigenous community development. In *Early Learnings: Telstra Foundation Research Report Volume 2*, D Higgins (Ed.), 2005, p.8.

13 C Atkins & L Matthews, *Building sustainable partnerships: Aboriginal community-controlled and generalist organisations learning together*, Paper presented at the VACCA Conference, 2008.

14 Department of Human Services, *A strategic framework for family services*, Office for Children, Victorian Government, Department of Human Services, 2007, p.2.

to ensure that secondary and tertiary level services are funded, particularly as substantiation rates are increasing.

The Child FIRST intake system, which was established as part of the reforms resulting from the *Child, Youth & Families Act 2005*, plays a vital role along the service continuum.

Since the implementation of Child FIRST, demand projections for its services have clearly understated the real need for these services. This means that inappropriately high numbers of vulnerable families experiencing entrenched disadvantage with increasingly complex needs and requiring long-term support from a range of service providers are on waiting lists.

The system is currently unable to cope with demand, and funding is based on notification rates and socio-economic disadvantage measures – aligning resource allocation to the needs of the tertiary system. Investment also needs to be linked to population growth and the cost of service delivery in order for more families to be supported earlier and for longer.

Child FIRST is a networked model of service delivery that brings together local service providers to deliver services to families in an integrated way. There has, however, been a lack of adequate resourcing for collaborations and network development.

VCOSS believes that the adoption of a model where funding is included for networking and linking, similar to that used in the Primary Care Partnerships, is required.

This focus on integrated service delivery is reflected in other key government policy commitments including the Children's Centres' capital funding, neighbourhood and community renewal, the Mental Health Strategy, the Vulnerable Youth Framework and the Blueprint for Education and Early Childhood Development. It is vital that all of these policy frameworks and relevant government departments come together to develop a genuinely integrated system of service delivery.

There needs to be a whole-of-government approach to integrated service delivery for children and families. Investment is required to ensure that linkages between child and family services and universal services are developed and sustained, and that children and families are supported in whichever service they are participating in.

## Out-of-home care

There are currently considerable pressures on Victoria's out-of-home care system, with 5,052 children in out-of-home care at 30 June 2007.<sup>15</sup>

These children are being cared for in kinship care, foster care, permanent care and residential care. Measures need to be put in place to ensure that children and young people in out-of-home care are well looked after through the provision of a safe, therapeutic and healing environment.

<sup>15</sup> Australian Institute of Health and Welfare figures 2006-07

Consultations undertaken by the Centre for Excellence in Child and Family Welfare to inform the current review of the Out-of-Home Care system identified critical gaps that need to be prioritised for urgent investment and reform.

Funding is currently based on full occupancy and this results in cost implications for government, which has to fund contingency places at approximately \$550,000 per placement per year due to the system's inability to respond to demand pressures.<sup>16</sup>

VCOSS called for and has welcomed investment for therapeutic residential and foster care pilots.

Therapeutic residential and foster care provides intensive, multi-dimensional support and enhanced care for children and young people in out-of-home care. This is critical to meet the diverse and complex needs of these vulnerable children.

Research by the Royal Children's Hospital Mental Health Service, for example, showed that nearly two thirds of children and young people in out-of-home care had mental health diagnoses and required mental health referral.<sup>17</sup> VCOSS believes more children and young people in out-of-home care need to be able to access these valuable supports so as to better support and promote their wellbeing.

The outcomes for children and young people in out-of-home care are very poor both during their time in care and when they leave the formal state care system.<sup>18</sup> Young people leaving care continue to have significantly poorer life outcomes than other young people.<sup>19</sup> Despite this there remains limited support for young people leaving care.

VCOSS welcomed the inclusion of leaving care provisions in the new *Child, Youth & Families Act 2005* to ensure that additional support is provided to young people leaving care to the age of 21. Little has occurred, however, in relation to the implementation of leaving care supports and there has been no new funding announced since the initial allocation.

Research undertaken by the Centre for Excellence in Child and Family Welfare highlights that an adequate leaving care model requires an annual investment of \$8.7 million, however current funding is less than this and with 450 young people leaving care each year, current funding equates to \$1,000 per person.<sup>20</sup> This is clearly not enough.

16 Centre for Excellence in Child & Family Welfare, Draft State Budget Submission, 2009/10.

17 N Milburn, Royal Children's Hospital Mental Health Service, *Protected and respected: Addressing the needs of the child in out-of-home care – the Stargate Early Intervention Program for children and young people in out-of-home care*, Royal Children's Hospital Mental Health Service, 2005.

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19 S Raman, B Inder & C Forbes, *Investing for success: The economics of supporting young people leaving care, Monograph number 5*, Centre for Excellence in Child and Family Welfare, Melbourne, 2005; P Mendes & B Moslehuddin, *Transitioning from the state care system: the impacts of incare experiences on the post-care outcomes for young people leaving care*, Paper presented at the Australian Social Policy Conference, Sydney, 13 July 2007.

20 Centre for Excellence in Child & Family Welfare, Draft State Budget Submission, 2009/10.

## Helping parents be parents

*'[Parenting] is probably the most important public health issue facing our society'*<sup>21</sup>

Evidence highlights that parenting plays a crucial role in children's cognitive, social, language and emotional development but many families feel unsupported and few access formal parenting supports or education programs.<sup>22</sup>

VCOSS supports the view of the Parenting Research Centre that governments have a role to play in supporting parents and families in raising children.<sup>23</sup> VCOSS has welcomed the focus on parenting support in the recent Blueprint for Education and Early Childhood Development, particularly the commitment to develop a program to assist vulnerable families in creating positive home learning environments.<sup>24</sup>

Parenting supports not only require a whole-of-government approach, they also require a broad focus that encompasses the early years. The middle years (9-14) are also a time of enormous challenges and change for children and their parents<sup>25</sup> – highlighted by the transition not only into secondary school but also into adolescence.

Parenting information and supports need to be available in a range of forms, ranging from face-to-face advice, telephone supports, information resources, the internet and education programs delivered at an individual or group level.<sup>26</sup> Information and supports also need to be available universally, as targeted approaches for specific populations and as indicated approaches for parents who are struggling.<sup>27</sup>

## Mental health services for children and young people

There is a concern that the wellbeing of the current generation of Australia's children is not as robust as previous generations.<sup>28</sup>

As part of the Longitudinal Study of Australia's Children the six-seven year old cohort were

21 Hoghughi 1998, quoted in Centre for Community Child Health, *Parenting young children*, Policy Brief No 9, 2007.

22 Centre for Community Child Health, *Parenting young children*, Policy Brief No 9, 2007.

23 Parenting Research Centre, Submission to the Blueprint for Early Childhood Development and School Reform consultation, May 2008.

24 Department of Education and Early Childhood Development, *Blueprint for Education and Early Childhood Development*, Department of Education and Early Childhood Development, September 2008.

25 Parenting Research Centre, The ABCD Approach – Parenting Adolescents, [www.parentingrc.org.au](http://www.parentingrc.org.au).

26 Centre for Community Child Health, *Parenting young children*, Policy Brief No 9, 2007.

27 ....

28 M Gray & D Smart, Growing up in Australia: The Longitudinal Study of Australia's Children is now walking and talking, in Family Matters, Australian Institute of Family Studies, 2008 No.79, p.13.

asked some questions. One of the most alarming responses was that while two thirds of the children said that they felt happy most of the time, 13 per cent of the children said that they felt scared or worried most of the time.<sup>29</sup>

VCOSS has welcomed both the investment in early intervention mental health services for children and young people in the 2008-09 State Budget as well as the focus on supports for children and young people in the Mental Health Strategy Green Paper.

Research indicates that targeting prevention programs to high-risk families only, is likely to miss up to 50 per cent of the children in the population who go on to develop mental health problems. This demonstrates the importance of prevention and early intervention at a universal service level.<sup>30</sup>

## Recommendations

1. VCOSS recommends that the Government better support Victorian children and their families by:
  - Investing in early intervention family support services; and
  - Increasing investment in services for level 1 and 2 families to prevent problems from escalating.
2. VCOSS recommends that the Government better support and promote the wellbeing of Indigenous children, young people, families and organisations by:
  - enhancing Indigenous-specific counselling and case work services; family support services and Child FIRST workers;
  - continuing investment in targeted resources and programs for Indigenous kinship care;
  - Funding cultural competence training for all community sector organisations working with Indigenous children and their families (not only those who are DHS-funded);
  - investing in building and sustaining partnerships between Aboriginal-community controlled and generalist organisations.
3. VCOSS recommends that additional funding be provided within the Child FIRST model by:
  - funding the development and maintenance of Child FIRST networks, similar to the model used for Primary Care Partnerships;
  - providing additional resources for community-based child protection to reduce the

<sup>29</sup> Australian Institute of Family Studies, Growing up in Australia: The Longitudinal Study of Australia's Children – 2006-07 Annual Report – Wave 2 Snapshot, <http://www.aifs.gov.au/growingup/pubs/ar/ar200607/wave2snapshot.html>.

<sup>30</sup> Centre for Community Child Health, 2006, *Childhood Mental Health: Promotion, Prevention, Early Intervention, Policy Brief No 5*, [www.rch.org.au/ccch/policybriefs.cfm](http://www.rch.org.au/ccch/policybriefs.cfm). [http://www.rch.org.au/emplibrary/ccch/PB5\\_Childhood\\_mental\\_health.pdf](http://www.rch.org.au/emplibrary/ccch/PB5_Childhood_mental_health.pdf)

- number of complex referrals to family support services;
  - increasing funding to allow for lower throughput – providing an increased capacity for longer term support for complex families and subsequently decreasing entry into the child protection services; and
  - training and professional development for universal services staff, such as teachers, childcare workers, community health workers, maternal and child health nurses and kindergarten teachers on Child FIRST and child protection issues.
4. VCOSS recommends that the family support services' funding model reflect the genuine time required and length of intervention required by families within the Child Protection and family services system. Such a model should provide for:
- increases in population demographics;
  - demand growth;
  - level of complexity of families including co-working;
  - weighting to areas of greater socio-economic disadvantage;
  - weighting for rurality;
  - inputs for various service components including group work,
  - community engagement and building activities, client expenses;
  - proportional population based access to family services;
  - multi-disciplinary teams; and
  - adequate remuneration for skill level and contemporary entitlements.
5. VCOSS proposes that the Government increase investment and support for children and young people in, and transitioning out of out-of-home care by:
- developing of a community visitors' program for out-of-home care;
  - providing additional resources to increase the capacity of the out-of-home care system to match demand, reducing the need for contingency arrangements;
  - increasing funding to ensure state-wide coverage of therapeutic models of residential and foster care; and
  - extending the support available to young people transitioning from State-care to include increased brokerage funding, active case management and more effective and flexible program responses.
6. VCOSS proposes that the Government provide additional resources and supports to assist Victorian parents by:
- developing a comprehensive Victorian parenting strategy;
  - investing in middle years and adolescent parenting programs and resources;
  - investing in the Raising Children Network website; and
  - providing resources and program development to support young and vulnerable

parents

7. VCROSS proposes that the Government increase investment into prevention and early intervention mental health supports for children and young people, particularly at a universal service level.