

Working along the continuum of services and supports for vulnerable children and their families

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The aim of Australian Centre for Child Protection

To bridge the gap between what is known and what is done to transform the lives of children who have experienced, or who are at risk of experiencing, abuse and neglect.



Confronting the problem

- Profound, long lasting effects, prevalent problem
- a response is needed which aims to prevent harm, is based in the best available evidence and maximises impact on investment.
- support for research into the causes and impacts of child abuse and commitment to developing national education and training programs
- Using evidence to fight injustice



Burgeoning knowledge base

- An understanding of the scope of risk factors (AOD, MH, FV, homelessness, populations)
- A much better understanding of their impacts (neurobiology, data linkage, studies involving children, the voice of parents who have had their children removed)
- Theories of change (how to prevent or ameliorate the impacts)
- Models of intervention (emerging Australian evidence base)
- Cost effectiveness

Unintended consequences

- Expansion of the remit of child protection system (1 in 4 children, 60% Aboriginal children)
- A large body of knowledge to incorporate into practice, policy and program design; proliferation of practices
- Service fragmentation as we focus on individual problems rather than children and their families
- Complexity makes it difficult to convey the message (why, what, how and who) to others (it depends...)
- Focus on risk factors rather than determinants of risk factors (hurt, pain, isolation, emotional regulation)

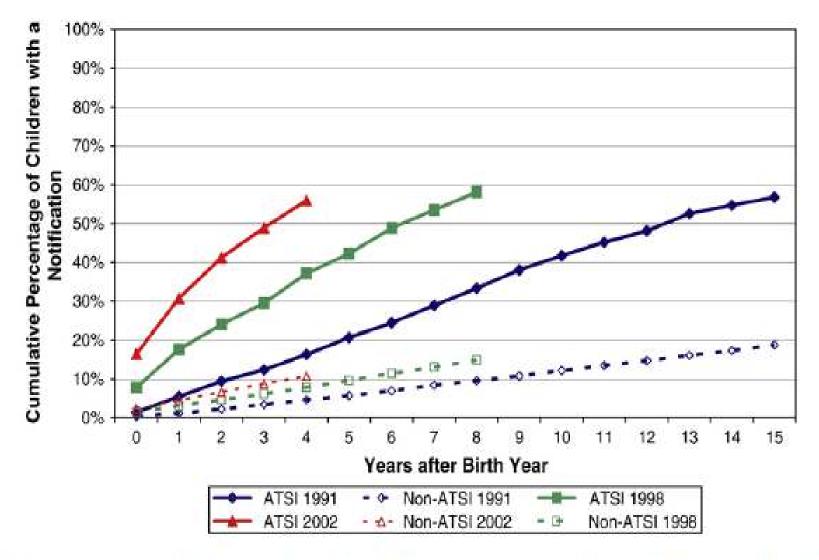


Fig. 5. Cumulative percentage children with Aboriginal or Torres Strait Islander background with a notification born in 1991, 1998 and 2002,3

Delfabbro et al, 2010, p.1425

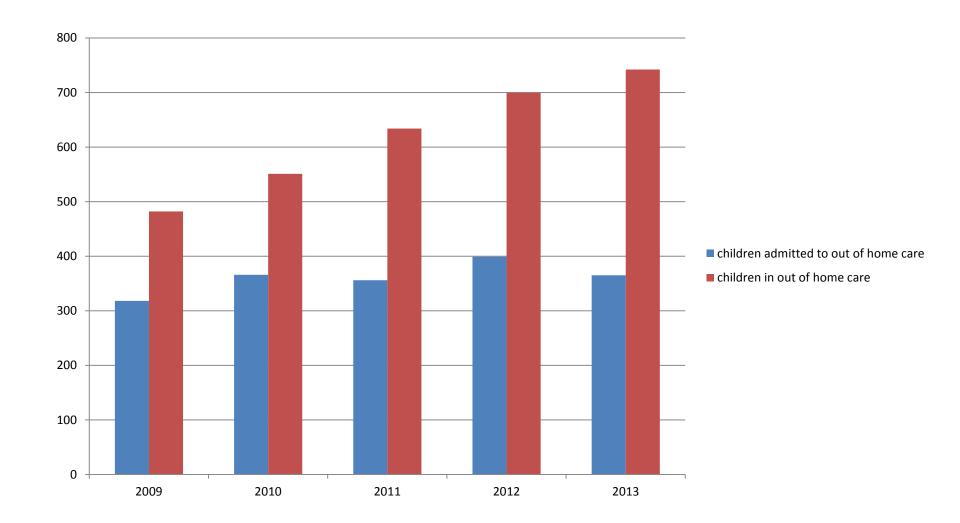
The NT context

- Culturally diverse population (27% Indigenous, 25% born overseas)
- Community strengths
- Large geographic area, low density, remoteness (56% outer regional, 22% remote, 22% very remote)
- Great expertise, high turnover
- Structural disadvantage
- Changing political and service landscape
- Service fragmentation, unprecedented investment
- Significant reform in child and family services BOI

Children and young people in the NT

- 58,230 children aged 0-17; 27% population (2011 ABS census)
- 22,450 Indigenous children aged 0-17; 40% population (2011 ABS census)
- It has been estimated that 15% of Aboriginal children in the NT are in contact with the care and protection system in a year (Northern Territory Government, 2010)
- 88% of children in substantiations and 83% of children in out of home care are Indigenous (AIHW, 2014)
- 30% of Indigenous children are placed with relatives/kin (AIHW, 2014)

Number of children admitted to and in out of home care in the NT (AIHW, 2014)

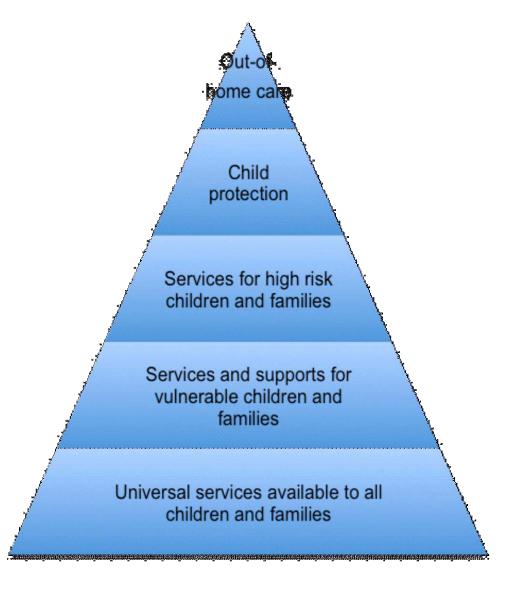


Changing focus for protecting Australian children

- National Framework
- Commissions and inquiries across Australia
- Experiences, evidence, policy
- Increasing the responsibility for protecting children – expanding to the NGO sector and community based interventions
- Public health approach

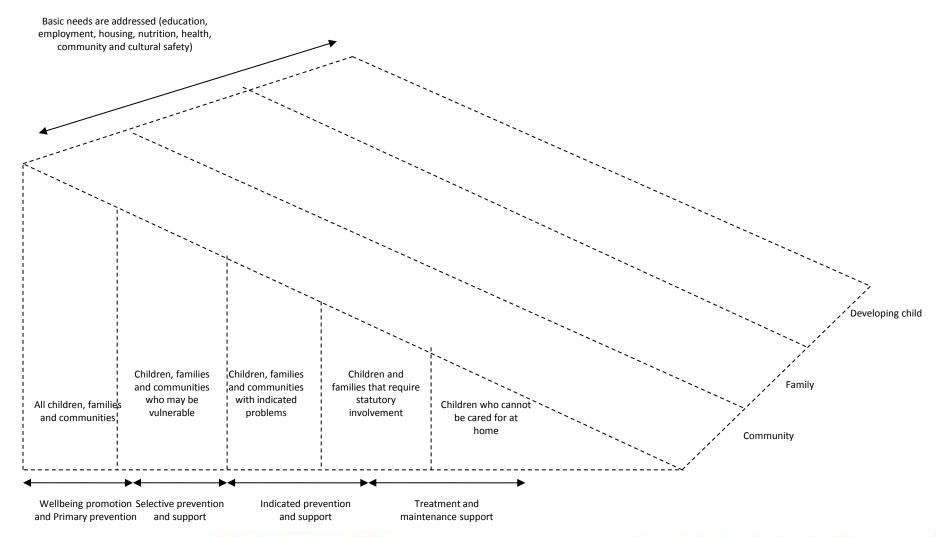
Public Health Approach

- What is the nature and extent of the problem?
- What are the causes and consequences of the problem?
- What can be done to prevent or treat the problem?
- What can be done to implement and embed these programs/treatments in service systems?

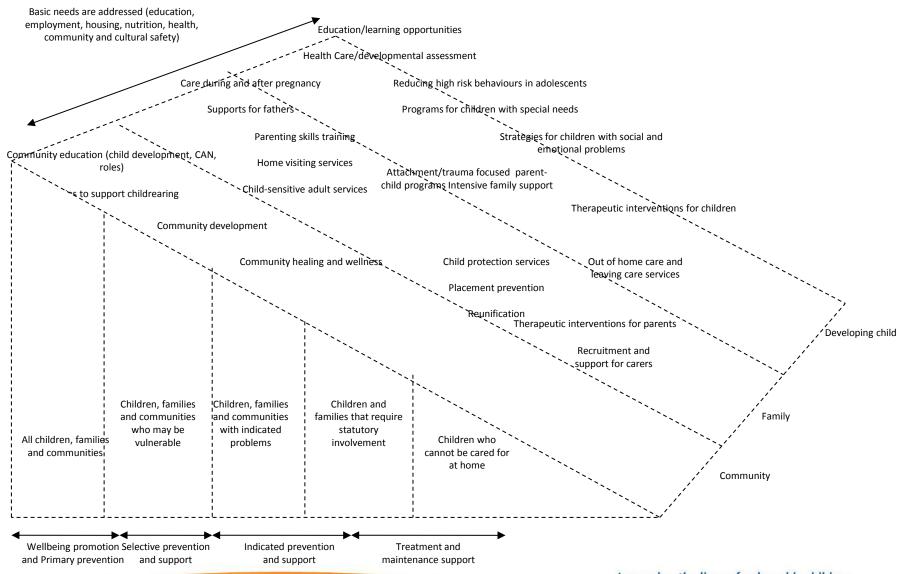


- **5.** Some families cannot or will not meet their children's needs, or cannot make the changes to meet those needs in the child's developmental timeframe. The state is in loco parentis and is required to facilitate children's needs being met
- **4.** Some families are not meeting all of their children's needs, but may be able to meet those needs with assistance. They are not open to receiving support, but will comply with statutory involvement
- **3.** Some families are not meeting all of their children's needs, but are open to receiving support and can meet their children's needs if they are provided with assistance
- 2. Some families are meeting their children's needs, but are vulnerable to future problems. They will benefit if they are supported with targeted assistance to prevent problems from occurring
- **1.** Most families are meeting their children's needs. They will benefit from formal and informal supports available to all families

Incorporating ecology and life course



Planning services



Pressures on prevention efforts

- Political cycles and short term funding changes the landscape constantly
- With fiscal constraints, people revert to core business – what is legislated vs what is needed
- Whose portfolio(s) does prevention sit in?
- Prevention calls for innovation and new ways of working – often termed "pilots" with no plans for scale up, or hampered by the usual ways of doing business
- Lack of recognition that high quality therapeutic intervention with children who have been abused and neglected and their families is a prevention activity

Pressures on prevention efforts...

- Expected outcomes do not necessarily reflect activities
- Activities may be unclear, but high pressure to be doing 'something'
- Timelines short/expectations for service delivery high
- Reliance on training or employing "professionals" as a means of implementation
- Sustainability is not always the goal

(Segal, Opie and Dalziel, 2012, p.56)

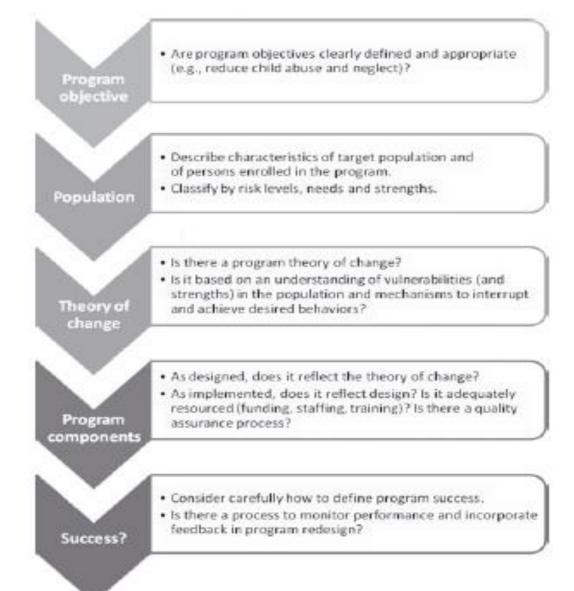


FIGURE 1. Program Logic Model for Reviewing Complex Interventions

Review of 52 home visiting programs:

TABLE 6
Relationship between Program Success and Full, Partial, or No Match for Theory, Components, Population, and Child Abuse Objective

	Successful (n = 25)	Not Successful (n = 27)	Fisher's Exact p Value (two sided)
Full match (n = 7)			
Yes	7	0	
No	18	27	0.004^{a}
Partial match ($n = 30$)			
Yes	18	12	
No	7	15	0.055
No match $(n = 15)$			
Yes	0	15	
No	25	12	$<0.0001^a$

Note Statistically aignificant (p < 0.05).

Segal, Opie and Dalziel, 2012, p.85

Collective problem solving – building a system of care for children

- Families and communities think more systemically than we as academics/services do
- Holding multiple realities
- Defining the problem together what is it and how much is it happening
- Understanding the problem causes and consequences
- Developing solutions together
- Embedding solutions in services

Back to the Future

- Think Child
- Think Family
- Think Community

Think Child

- Mind, body, spirit and heart
- Link to a significant person who loves us unconditionally and supports us and will be there for us
- Ensuring that children and youth are nurtured, safe and engaged, by:
 - promoting early detection of and response to health, mental health and developmental concerns
 - providing high-quality childcare and schools
 - providing opportunities for youth to engage in civic and community life

Think Family

- Mind, body, spirit and heart
- Childrearing is something we learn and families prefer to learn from other families
- We have many teachers, and so do our children
- How do we learn?
 - By doing
 - By talking and asking
 - By watching
 - By reading
- Acknowledging the family's expertise

Help and healing may not necessarily, and in fact may be unlikely to, flow through formal service delivery channels. Parents and caregivers will often seek support from other family members and friends before seeking professional help. Building and supporting informal, as well as formal, networks of support could be one of the most powerful strategies available supporting...children and families

(Arney, 2010)

Think Family

- parenting and family focused—ensuring that families are strong in culture; connected to other families; and free from substance abuse, mental illness and violence, by:
 - providing intensive family support services to strengthen parenting skills and provide respite
 - building social networks and services attuned to child development and connected to specialty care
 - building strong attachment through improved parent—child relationships and communication
 - addressing parental mental health, wellbeing and safety through provision of child-sensitive adult focused services
 - Family decision making and extended family networks involved in caring for children

Think Community

Ensuring that communities and neighbourhoods are safe, stable and supportive; and that vulnerable communities have a capacity to respond, by:

- promoting strong community norms about the wellbeing of children and young people
- helping communities to function well and support families within them
- promoting community healing
- providing opportunities for participation and the development of social supports
- providing services and supports that target populations in communities with concentrated risk factors

A remote community example

- Frustration at lack of input into service decisions
- Tertiary focus of services, different service orientations and small remit/eligibility criteria
- Lack of local employment, little bicultural work
- Community members had systemic understanding of problems, services often had one lens (not a matter of "or", a matter of "and")
- Child safety partnership plan
 - Focus on prevention and diversion from child protection
 - Developing "one story"
 - Greater community involvement in planning and delivery
 - Culture as a protective factor
 - Not necessarily more funding reconfigure/redesign
 - Desire for evidence-informed/evidence based approaches

Making the uncommon more common

- Working across agencies and disciplines is a rare specialisation
- It has teachable and unteachable components
 - Processes to support common solutions and their implementation
 - The ability to see multiple perspectives and build relationships
 - Tolerating ambiguity
- Leadership it must become an expectation
- Using legislative frameworks to promote common work rather than preclude it
- Examining perversities of the system



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