



Australian Childhood Trauma Group Pty Ltd
Consulting Rooms 3 St David Street Fitzroy, Australia 3065
Correspondence PO BOX 236 Fitzroy Australia 3065
p +61 3 9415 6066
f +61 3 9415 6085
e info@theactgroup.com.au
ACN 075 823 255 ABN 42 075 823 255
theactgroup.com.au



Committee Secretary
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600
October 20, 2014

Re: Submission to the out of home care inquiry

Dear Secretariat,

The Australian Childhood Trauma Group (ACT Group) welcomes the opportunity to provide a submission to the Senate Standing Committee on Community Affairs Inquiry into Out of Home Care.

Founded by chief executive and consultant psychologist Mr Gregory Nicolau in 1985, ACT Group specialises in childhood trauma and attachment. We provide support services to government and non-government agencies, schools and individuals: including secondary consultation, training, counselling, assessment, program review, referral and R&D.

Our areas of expertise include: trauma; abuse; resilience and self esteem; therapeutic treatment planning; behaviour management; regulating aggressive and violent emotions; offending behaviour. For the last six years, ACT Group has also worked in partnership with renowned US out of home care specialist, the Jasper Mountain Centre in Oregon.

Out of home care has long been treated as the 'poor cousin' in the childhood health and wellbeing sectors, and suffers from a chronic lack of resources, focus and consistency.

Society and a fractured, inconsistent approach to out of home care – particularly in the residential care sector too often fails the 50,307 who experienced out-of-home care last year¹. This report, from the Australian Institute of Health and Welfare, found that the proportion of Australian children spending time in out of home care rose from 6.7 per cent to 7.8 per thousand between 2009 and 2013. These alarming figures suggest a social care system so stretched it is unable to identify and address care issues in the family home, leading to poorer and more expensive outcomes both for the children and society more broadly.

An overhaul of methods, approach and funding is urgently needed to ensure that out of home care can become a place of healing and ensure that abused and at-risk children fulfill their potential, rather than compound the cycle.

This inquiry is a welcome chance to examine systemic failures and identify policy changes to improve the welfare of some of Australia's most vulnerable children.

This submission focuses on the failings in out of home care and, in the following pages, addresses several of the terms of reference addressed by the inquiry. At ACT Group, we believe the following changes should be considered urgently and would strengthen the out of home care system:

- As soon as a child is identified as needing out of home care, there should be a mandatory requirement for an immediate assessment for all psychological, medical, emotional and physical needs.
- Intervention should begin at the earliest possible moment and needs to be ongoing until there is clear evidence that the infant, child or young person is meeting their developmental milestones. All states should introduce – and adequately resource – measurable, consistent and personalized intervention plans for each child when they enter out of home care, then conduct regular assessments to check whether the plan is working and redirect it when it is not.
- Parents of infants and young children considered at risk should be provided with intensive support and given 12 months to demonstrate that they can provide appropriate care to their child(ren). Should they fail to meet this deadline, children should be placed in permanent care.
- In residential care there needs to be better assessment of children's needs at night-time – when many are at their most emotionally vulnerable. No 'stand up' (awake) staff at night is a recipe for disaster.
- Foster carers need to be freed from the need to do other paid work. In the case of siblings placed with a single carer, the carer should always be provided with a 'mirror family' to support them and the children's healing.
- Humanise the language used to refer to children in care. Children are regularly referred to as clients, have 'accesses' and refer to 'my worker'. This is alienating to the children and has the potential to create a disconnect between them and other children not living in out of home care particularly at school.
- State and federal governments should introduce a nation-wide accreditation system for out of home care workers that ensures carers have at least a degree-level qualification in a human services field.
- Out of home care for older teenagers needs to be overhauled. Many 18-year olds are not emotionally mature. The 'Lead Tenant' model of home care should be extended to 18-25 year olds to promote better stability and a smoother transition to a self-sufficient and empowered adult life.
- After-care programs require resourcing they are currently inadequate or non-existent, with many post-care services not well-linked or networked into support services for 18+ year olds.

I would be delighted to discuss this submission and our on-the-ground observations of out of home care facilities further with the Committee.

Yours Sincerely,

Gregory Nicolau, chief executive officer, the ACT Group

(Gregory has had a 30-year career working with the most marginalised and vulnerable children, young people and families in our community and the agencies, organisations and education facilities who support them. Gregory is also founder and chair of Random Acts of Kindness.)

RESPONSES TO THE INQUIRY'S TERMS OF REFERENCE:

A) Drivers of the increase in the number of children placed in out of home care.

One of the drivers for the increase in the number of children placed in care is the national increase in reporting of children at risk. We, like many child welfare experts, believe the increase is due to greater pressures on families and a heightened awareness of abuse. In essence, the community is more alert to vulnerable children and there is a growing acceptance that it is better to report and discuss such things. It has been noted that many allegations are not investigated.ⁱⁱ In our experience, this too often leads to cumulative harm for those who are not helped. ACT Group has seen many children who fall into this category.

A general societal shift away from extended family networks, and more single parent families also reduces broader community and family support for communities. In the past these “village-style” networks can often reduce the levels of stress that naturally occur in all family units, reducing the pressures that might otherwise build up and lead to neglect and emotional abuse.

When families and communities are under more stress – and that can include financial stress – then incidences of abuse increase, particularly physical, emotional abuse and neglect. Economic stress can occur in all families when circumstances change, and can occur over short or long periods no matter what income levels such families are used to. For others, such stress can occur for long periods when stuck in a poverty trap.ⁱⁱⁱ

B) The outcomes for children in out of home care (including kinship care, foster care and residential care.

In our experience, while there are pockets of good practice around the country, too many of the outcomes for children and young people in out of home care programs are incredibly poor, and too many adults bear the scars of sub-standard care. The problem is acute within the area of residential care.

Inadequate care leads to significant short and long-term problems both for the children involved and those around them. In our observation, children in out of home care have poorer outcomes than their peers in: education, employment, income school achievement and relationships. As they get older they are more likely to face: teenage pregnancies, homelessness, mental illness including depression and anxiety, illicit drug use, acquired brain injury, incarceration, convictions for sex crimes and are over represented in attendance at the emergency department.

Our views are supported by many studies. A 2007 longitudinal study by the NSW Department of Family & Community Services into the outcomes of former out of home care children four or five years later, found:

The overall picture ... is one of mobility, poor quality accommodation, unemployment, early parenting, difficulties in 'making ends meet' and establishing and maintaining relationships, limited support and family contact, loneliness and mental health problems. ... Clearly the circumstances and life chances for these young people are significantly poorer and the challenges and hardships considerably greater than for other young people their age in the general population... The experience of being in care has not compensated sufficiently for earlier disadvantage and young people leaving care are significantly disadvantaged on leaving care and beyond, compared with their age-mates.^{iv}

No-one should simply blame the out of home care system and its providers – some of the pre-care abuse is also a factor – but improvements in out of home care are clearly required and any changes must consider and respond to these problems and work out ways to improve outcomes.

ACT Group agrees with a 2011 Australian Institute of Family Studies report into transitioning from out of home care which said that: “pre-care experiences of abuse and neglect, combined with poor in-care experiences, accelerated transitions to adulthood, and a lack of ongoing support after leaving care, make many of them vulnerable to a number of poor outcomes.”^v

Some of the children we have worked with have suffered fractured relationships with their parents or carers as a result of significant and ongoing physical and emotional abuse. We have witnessed too many tragic worst-case outcomes among out of home care children.

If they are unable to develop a sense of belonging in their residential facilities, generally children will go elsewhere, normally on the streets. A true therapeutic response requires committed, reliable, well-trained staff and a well designed home, to create a village of elders to hold and heal the impact of abuse.

(E) Consistency of approach to out of home care around Australia.

As argued above, there is no single nationwide approach and the standard and approaches vary substantially between states.

For example, South Australia recently became the only state to introduce protocols to ensure that no staff member was left alone with children in care.^{vi} This is not the same situation as the rest of Australia where single parents are able to act as foster carers. In South Australian random checks were already conducted in care facilities supervised by a single worker.

In Victoria, hundreds of alleged rapes, sexual assaults and instances of sexual exploitation were reported across Victoria’s out of home care network over the course of a year^{vii}.

There are pockets of good practice around Australia, but they tend to reflect good leadership at individual organisations, rather than a broader systematic approach.

(G) Best practice in out of home care in Australia and internationally.

There is no single, best-practice framework for the out-of-home care sector in Australia. Such a framework would include therapeutic treatment plans, set treatment goals and frequent reviews and assessments of the progress of the child against those goals. It would also consider the psychological, emotional and physical environments and would be integrated with long-term care programs. Better integration between the support staff who work directly with children, and the staff in head office. In particular within residential care the leadership of organisations in the out of home sector needs to be more present, regularly visiting homes and not relying on second-hand reports.

ACT Group has been working with RMIT University Interior Design Program since 2007 to help students re-think interior environments in residential care units to help inform designers how interior layout and design can provide therapeutic benefits to young people in out of home care.

Recent Victorian court cases demonstrate the failure of the state’s Department of Human Services and a care provider to protect the children. In these cases, carers and department failed to pass on information to police, psychologists and parents, and failed to properly supervise children in their units.^{viii}

The world leader in the residential sector is a purpose built ‘village’ at Jasper Mountain, located on a large historic ranch, in Oregon. In this model the children are sent away from the home in which they have been abused and live in a large residence on the top of a mountain. It provides an intensive residential treatment program with a therapeutic school; a short-term residential centre; a treatment foster care program; a community based “wraparound” program and crisis response services. The facility offers a combination of traditional psychological and psychiatric interventions with innovations in treating abused and emotionally disturbed children.

Children at Jasper Mountain are never left alone. The built environment is well kept – unlike many Australian facilities - if something is broken it is immediately fixed. There are no doors on the bedrooms and there are three residents to each room. With technology and skilled staff this minimises the rate of incidents. There has never been an incident in over 30 years of child on child abuse at Jasper Mountain and the police have only ever been involved on 2 occasions and in both cases they were invited and it was a strategic decision.

J) Best practice for supporting children in vulnerable family situations including early intervention.

The out of home sector in Australia needs a complete overhaul. Melbourne lawyer Howard Draper, who has acted in the Children’s Court for decades, recently commented: “quite frankly I think the whole system is broken. It needs to be thrown up in the air and we need to start again”^{ix}.

Anglicare chief executive Paul McDonald this year called for single-sex residential units, in which he said: “I think we need to make single-sex units a mainstream factor of the system and not the exception. We need to control both the age range and gender mix”^x. In all states, Australia need many, many more placement options to be able to better match the kids that are living together, not just to put a kid in where there’s a space available.

The solution is to provide an extensive network of support for foster and kinship carers. Foster care programs always seek to match children’s needs with the skills of individual foster carers and attempt to provide those carers with financial assistance; 24-hour support; training and opportunities to meet other carers. But often demand can be overwhelming and the realities of stretched resources can compromise these good intentions

Child Safety Commissioner Bernie Geary said the federal government should provide tax breaks for foster carers to decrease the number of traumatised children being housed together.^{xi} However, the recent publicity about the out of home care sector may actually act as a deterrent to people considering foster care. Children who are placed in residential care generally have had a number of foster care placements that have broken down, and therefore there is no point in fixing just one part of the system.

A recent Victorian court case into sustained abuse of two siblings in residential care revealed that staff received one day of training on ‘sexualised behaviour’ among children, and that not all staff attended the training. This needs to be improved, so that all staff have the skills to recognise and respond to inappropriate sexual behaviour in the out of home care sector.

ⁱ *Child Protection Australia 2012-2013*, Australian Institute of Health and Welfare.

ⁱⁱ *Browne, R. Child Abuse Reports Increase but Less than Half are Investigated*, *The Sydney Morning Herald* July 25 2014

ⁱⁱⁱ *Poverty and child abuse and neglect*, Australian Institute of Family Studies.

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- ^{iv} *Wards Leaving Care: four to five years on*. NSW Department of Family and Community Services.
- ^v *Family Matters No 89, 2011*. Australian Institute of Family Studies.
- ^{vivi} *Novak, L. and Holderhead S, Premier Jay Weatherill to order Royal Commission into child abuse following horrific new case at government-run care facility*, *The Adelaide Advertiser*, July 23, 2014.
- ^{vii} *Oakes, D. Leaked documents show hundreds of sexual assault allegations in Victorian children's homes*, *ABC* July 4 2014.
- ^{viii} *Oakes, D. DHS head Gill Callister breached duty of care to vulnerable children, Victorian Court finds*, *ABC* July 24 2014
- ^{ix} *Oakes, D. Leaked documents show hundreds of sexual assault allegations in Victorian children's homes*, *ABC* July 4 2014.
- ^x *Oakes, D. Children were sexually abused in a care home due to negligence by Anglicare, says the Victorian Government*, *ABC*, July 3, 2014
- ^{xi} *Donnelly, B. and Toscano, N. Foster care for traumatised children could be nurtured by tax breaks*, *The Age* July 4 2014.