

INQUIRY INTO CHILD PROTECTION

Organisation: Settlement Services International

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SETTLEMENT SERVICES INTERNATIONAL

SUBMISSION TO THE GENERAL PURPOSE STANDING COMMITTEE INQUIRY INTO CHILD PROTECTION

BACKGROUND INFORMATION ABOUT SSI

Settlement Services International (SSI) is a leading not-for-profit organisation providing a range of services in the areas of humanitarian and migrant settlement, housing services, asylum seeker assistance, disability support, multicultural foster care, and employment services in NSW.

SSI's principal client groups are:

- Refugees, humanitarian entrants and migrants
- People seeking asylum living in the community
- People with disabilities and their families
- Culturally and linguistically diverse children and young people in out-of-home care
- Job seekers

Formed in 2000, SSI is the umbrella organisation for 11 Migrant Resource Centres (MRCs) and multicultural services across NSW.

Collectively, member MRCs provide a diverse range of services to between 30,000-35,000 newly arrived migrants in any given year. Like SSI, MRCs provide a range of services to families including several programs funded by the NSW Family and Community Services (FACS).

SSI is also the lead organisation in the NSW Settlement Partnership, a consortium made up of 23 partner agencies, which delivers the Settlement Services Program, funded by the Australian Government, to refugees and family stream migrants in the first five years of settlement across NSW.

SSI is committed to achieving a society that values the diversity of its people and actively provides support to ensure meaningful social and economic participation and to assist individuals and families reach their potential.

INFORMATION ABOUT SSI MULTICULTURAL FOSTER CARE

Launched in early 2013, SSI Multicultural Foster Care is the first of its kind in NSW where a migrant service delivery organisation has been fully accredited and funded to deliver a foster care service model specifically designed for children and foster carers from culturally and linguistically diverse (CALD) backgrounds.

The service was developed to address identified barriers and challenges in providing effective OOHC to children from CALD backgrounds. These include:

- Language, cross cultural barriers in casework with children, carers, birth families
- Limitations in the cultural competence of OOHC casework personnel
- Lack of understanding in CALD communities about the concept of foster care
- Difficulties recruiting and retaining carers from CALD backgrounds
- CALD carer shortages and limited capacity for culturally matching placements

Reports identifying these challenges include: NSW Department of Community Services Research Report: Children and Young People from non-English speaking Backgrounds in OOHC in NSW (September 2008), Social Policy Research Centre report on Culturally Appropriate Service Provision for Culturally And Linguistically Diverse Children and Families in the NSW Child Protection System (2009), NSW FAS Report on the Evaluation of the Multicultural Foster Carer Recruitment Pilot (2012), and report on Cultural Diversity and Child Protection by Diversity Consultants (2012).

Unique features of our program include:

- Three way matching of the cultural background of the child, carer and caseworkers
- Bilingual caseworkers from Vietnamese, Arabic, Turkish, and African backgrounds
- Focus on supporting children to remain connected with their culture and heritage
- Access to bilingual cultural aides who can assist with cultural support work
- Bilingual contact workers to supervise contact between children and birth families
- Strong engagement with community and religious organisations and leaders
- Supervision of contact visits with birth families in community languages
- Foster carer recruitment, assessment, training and support in community languages

The service currently provides case management to over 125 CALD children and young people with a strong representation of those from Vietnamese, Arabic speaking, Turkish and African backgrounds.

COMMENTS ON THE INQUIRY TERMS OF REFERENCE

a) The capacity and effectiveness of systems, procedures and practices to notify, investigate and assess reports of children and young people at risk of harm

There have been significant changes to the child protection system since the *2009 Special Commission into Child Protection* which included changes to the threshold definition of risk of significant harm, the introduction of the mandatory reporter guide, legislative changes to facilitate information exchange between agencies, and the review of child protection interagency guidelines.

SSI experiences inconsistency in practices by workers from government agencies in its work with children in OOHC when there is a risk of harm report. Examples of this include incidents where a government agency did not report directly to its Child Wellbeing Unit or FACS but reported significant incidents to SSI, and where government agencies have made reports to FACS without due consideration of cultural issues. In one such case, an SSI carer had treated a child's cold with traditional Chinese coining therapy and the matter became the subject of a report.

Risk assessments can be improved when agencies consult and work collaboratively. Child protection sector briefings and training with partner agencies on the *Mandatory Reporter Guide* and the *Child Wellbeing and Child Protection – NSW Interagency Guidelines* seem to have subsided since their introduction. A commitment to regular refresher training which includes consideration of cultural issues is needed. This would encourage practitioners to actively consult and consider individual and cultural factors in reporting and decision-making processes relating to children and young people from CALD backgrounds.

Recommendation:

- That there be ongoing refresher training for the sector on the *Mandatory Reporter Guide* and the *Child Wellbeing and Child Protection – NSW Interagency Guidelines* and that this training includes cultural considerations.

d) The amount and allocation of funding and resources to non-government organisations

The question of funding designated agencies to maintain accreditation standards and meet ongoing case management and contracting obligations is one of critical importance.

Since the transition of OOHC to the NGO sector commenced there have been additional changes required of designated agencies. The OOHC unit costs preceded the practice changes introduced with the revised OOHC Case Management Policy and the 2014 legislative changes refocusing work on permanency placement casework. As a result there are increasing demands on services exceeding initially understood funding and resource allocations for OOHC NGO case management responsibilities. For example, designated agencies are required to contribute to assessments of family members and/or identify and authorise potential carers. When there is only one family member being assessed for a child the activities can be managed within allocated resources. However, when there are multiple potential family members the process can be time and resource demanding.

While SSI has carried costs associated with FACS requests for multiple carer assessments, we do not believe this is sustainable. In one example, a child case managed by SSI remains in 'short term care' as five family carers seek to be assessed as permanent carers for the child.

There are also differences between FACS and NGO service provider structures and staff salaries. Based on our experience and consultation with NGO agencies, we believe that most NGO OOHC caseworkers are paid less than FACS caseworkers. This is against a back drop where the changing nature of permanency placement casework (including restoration, guardianship, adoptions and long term foster care) requires caseworkers to have

a deeper and broader skill set than what has traditionally been required. Sustaining consistency in staffing resources across the sector would strengthen outcomes for children.

Where restoration is a revised care plan goal for a child from an OOHC placement, SSI has had to negotiate additional resources from FACS to support the child/ren during the post restoration period. FACS has consistently been supportive of the value in SSI maintaining relationships with the children and providing family support services during the transition. Submissions however are required to support restoration casework which is excluded from the current case management funding as it is essentially linked to the number of OOHC beds per day.

Recommendation:

- That funding formulae reflect the depth of casework when children come into care and includes resources to assess permanency placement and facilitate restoration assessment, training to strengthen caseworker permanency planning skill set, and match salary payments across government and non-government related positions.

e) Support, training, safety, monitoring and auditing of carers

SSI has a commitment to supporting placements to remain safe and stable. CALD carers provide a range of cultural strengths for children. SSI has used a range of culturally specific strategies to support carers including:

- Bilingual caseworkers and caseworkers trained in cultural competency and responsiveness, improving how caseworkers engage with carers
- Use of interpreters and translators Language-specific carer assessment, support groups and training
- Before/after school and weekend home based assistance by bi-cultural support staff to support carers and placement stability
- Transport assistance for children to appointments to support carers isolated by language or without driving skills
- Consultations with ethnic community groups to recruit carers and increase awareness of OOHC
- Engagement with community organisations to promote and increase awareness of child protection.

In addition to group-based processes, SSI has also adopted a one-on-one approach to carer assessment and training in order to optimise assessment and training efficiency. This approach has enabled SSI to address many of the barriers (including language) to assessing and training CALD carers.

SSI's experience is that kinship carers also generally prefer home based one-on-one briefings and consultations aimed at building knowledge and support needs for children and young people in OOHC. Caseworkers often deliver such training within the carer's home. Carers report the opportunity for language specific conversations in group or at home helps them feel listened to and more involved in learning to better respond to children's needs.

Cultural and placement supports are increasingly recognised as specialist services. Offering a range of language specific support groups engages carers but impacts on SSI's resources as the organisation delivers multiple support groups to capture carer diversity. Training to strengthen caseworkers' cultural competencies also adds to service costs as does ongoing community consultation with multiple ethnic groups.

As NGOs are assuming the case management of children and young people coming into care within 15 days of placement, there is a need for historical information to assist carers understand and respond in the least intrusive way to children. There are practice gaps in what information is available to carers at the time of placement. Children's trauma, separation, anxiety and loss significantly impacts how they understand and respond to their circumstances. Carers can also feel ineffectual when they are not aware of a child's history, likes, dislikes, routines or prior behaviour management strategies. SSI is active in advocating for information at the time of placement however its experience with FACS Community Service Centres reflects many different practices.

Most children and young people coming into care require some form of support to address their trauma, health, education and/or other developmental needs. There is a need for specialist support to work effectively with carers including services such as psychologists, speech pathologist, and occupational therapist. These services cannot all be obtained in a timely manner from government health agencies. Time delays in responding to these needs impacts on the child's behaviour and the carer's capacity to care and support. Our view is that immediate access to these services for the child and the carer may be enhanced if there are elements which can be funded and provided in-house by NGOs.

Recommendations:

- That the funding formulae reflect resources required to deliver elements of specialist clinical and/or child developmental support services and/or cultural competency practices required to support children, carers and birth parents/families from CALD backgrounds in OOHC.
 - That FACS and NGO participate in joint briefing sessions to discuss and strengthen commitment to practice which includes sharing critical information about individual children's needs, likes, routines and behaviour management strategies at the time of placement.
- h) Funding and resources to universal supports to intensive, targeted prevention and early intervention programs to prevent and reduce risk of harm to children and young people**

We believe that there is a need and opportunity to rethink and improve the way we provide targeted prevention and early intervention services to families most in need. In particular, the current reforms to prevention and early intervention services in NSW provide an opportunity to examine and improve the way we provide accessible and responsive services to migrant and refugee families. Many of our comments below were also submitted to the NSW Family and Community Services review of Targeted Earlier Intervention Programs.

The population of Australia is culturally, linguistically and religiously diverse. Over a quarter of Australia's population was born overseas and 43% of the population has at least one overseas-born parent (ABS Census, 2011).

The source countries of our migration program (including the skilled migration, family and humanitarian streams) have shifted towards non-English speaking countries, particularly countries in Asia and the Middle East (NATSEM, 2010). Migrants, especially recent migrants, tend to be younger than the rest of the population with about 50 per cent of those born overseas in their prime working years (25-54) compared with 39 per cent of Australian-born (NATSEM, 2010). These migrants and refugees will make up an increasing proportion of the families, parents and children coming into contact with the early intervention system.

This demographic shift is also reflected in the NSW population with 26% of the population born overseas and 23% of the population speaking a language other than English in the home (ABS, 2011). In many metropolitan FACS districts of NSW, significant proportions of the population are from culturally and linguistically diverse (CALD) backgrounds. Therefore the need for a culturally responsive early intervention system will continue to grow in the future.

SSI believes that it is important for the following gaps and priority issues to be addressed in relation to migrant and refugee families and prevention and early intervention:

1. Data and research in relation to CALD families
2. Addressing vulnerabilities of families during settlement
3. Improving service coordination and collaboration
4. Building of cultural competency
5. Community consultation and engagement

1. Data and research in relation to CALD families

There is a gap in published data on the representation of children and young people and families from CALD backgrounds coming into contact with the early intervention and child protection system (National Framework for Protecting Australia's Children Third Action Plan Roundtable Consultation Report, 2015). This gap in information creates significant barriers for effective service planning and design and limits the evidence base that can be drawn on to reform the early intervention system.

The limited data available in NSW indicates that children and young people from CALD backgrounds make up a significant proportion of those coming into contact with the child protection and out-of-home care systems. Approximately 15% of children in care are from a family where a language other than English is spoken at home and approximately 25% are from a CALD background (NSW Department of Community Services Research Report, Children and Young People from NESB in OOH in NSW, 2008).

There is also a gap in research on the experiences of CALD families in the early intervention system and best practice in service responses to these families.

A perennial issue in forums and consultations on CALD service delivery in the child protection system (such as FACS convened Multicultural Advisory Committees at central and district levels) has been the effects that limited data and evidence-based research has had on the ability of services and the sector more broadly to systematically establish need in relation to CALD families. A concern for SSI, our member MRC organisations, and many other multicultural services, has been to ensure that an absence of data is not taken as an absence of need.

SSI believes that there is a need for research on the intersection between the settlement experiences of newly arrived families, the link between vulnerabilities associated with settlement and contact with the early intervention system, and what works in terms of supporting families in settlement.

Recommendations:

- That there be robust provision for the collection and publication of cultural and language indicators for clients accessing targeted prevention, early intervention and child protection services.
- Research on the intersection between the settlement experiences of newly arrived families, the link between vulnerabilities associated with settlement and contact with the system, and what works in terms of supporting families in settlement in an early intervention context.

2. Addressing vulnerabilities of CALD families during settlement

SSI and our member MRC organisations provide casework and other support for many vulnerable families during their initial and ongoing settlement period. Approximately 73% of SSI's refugee clients are members of families. Our client families are commonly affected by a range of vulnerabilities including: low English literacy and proficiency; mental health issues e.g., torture and trauma issues; refugee physical health issues; barriers to employment, education and training; social isolation and lack of connectedness; educational issues for children and young people; poverty and income support; lack of access to affordable housing; family relationship pressures associated with settlement and change; domestic and family violence issues; lack of awareness of laws and processes including those regarding child protection.

These insights into the vulnerabilities of migrant families are also reflected in the literature. A review of the life trajectories of the children of migrants, drawing on Census data and the Longitudinal Study of Australian Children (LSAC), concluded that the limited research indicates that children in immigrant families face difficulties accessing services, suffer trauma associated with separation from family and social networks in the countries of origin, and that children from some specific origin countries fare worse than the native born population (with the exception of Indigenous children) - often linked to the English language proficiency of the parents. (Katz & Redmond, 2010) A more recent analysis of data from the LSAC found lower levels of wellbeing in children with an overseas-born mother irrespective of English proficiency. (Priest, Baxter, & Hayes, 2012).

In NSW, various inquiries (including the Wood Inquiry, and the NSW Community Relations Commission Inquiry into African Re-settlement) have also highlighted the need for support for recently arrived families (particularly those from refugee backgrounds) as an effective means of preventing family breakdown and the risk of entry into the child protection system. In the case of African background communities, key concerns identified by the inquiry included settlement pressures, difficulties experienced by service agencies in building trust, and understanding by African background communities of the service system and child protection laws in NSW.

The success of migration by families rests, in large part, on settlement programs that are post-arrival services funded by the Australian Government to assist new migrants and refugees to seamlessly integrate into a new culture and, often, a new language environment (Migration Council of Australia, 2015).

While these settlement programs provide general support to families with children in the post-arrival phase, they need to be followed up by early intervention programs that are accessible, effective and responsive to the needs of new migrants and refugees. It is well established that migrants and refugees, across a range of visa categories – skilled, family and humanitarian – struggle to access universal services. (Australian Survey Group, 2011) This is likely to be replicated across the early intervention system and points to the need for greater integration between settlement programs and the early intervention system in NSW.

The challenges of providing accessible and culturally responsive targeted prevention and early intervention services to CALD families are well documented. Some of the challenges include:

- The complexity of needs, especially in refugee families
- Linguistic and cross-cultural barriers in casework interventions
- Limited cultural competence among service providers
- Establishing trust, particularly with families that have experienced state persecution
- Knowledge within families and communities about the service system

Recent forums where these issues have been highlighted include the National Framework for Protecting Australia's Children Third Action Plan Multicultural Roundtable Consultation, and Western Sydney Community Forum organised Western Sydney District Community Sector Roundtable on the Early Intervention Reforms.

The challenges experienced by families and services seeking to respond to their needs were also the focus of the Cultural Shift Symposium on Supporting Migrant and Refugee Families through Settlement, convened by SSI with funding from FACS, in June 2014. The symposium brought 250 delegates from migrant, refugee, ethno-specific, mainstream and government agencies together to explore the needs of recently arrived migrant and refugee families, and to promote effective services, delivery models and approaches for supporting these families through their settlement journey.

The symposium particularly highlighted the importance of investment in early intervention with recently arrived families, the role of diverse organisations in responding to needs and building resilience, and the importance of partnerships, collaboration and coordination. A

range of recommendations from the symposium are reflected below in our recommendations.

The importance of addressing barriers to service delivery to CALD families has also been highlighted in a number of key reports including: NSW Department of Community Services Research Report: Children and Young People from non-English speaking Backgrounds in OoHC in NSW (September 2008), Social Policy Research Centre report on Culturally Appropriate Service Provision for Culturally And Linguistically Diverse Children and Families in the NSW Child Protection System (2009), and report on Cultural Diversity and Child Protection by Diversity Consultants (2012).

In terms of service barriers, SSI believes that it is important to consider the issue of funding for interpreter services. SSI encourages FACS to review current provisions for interpreting funding and ensure that interpreting services are appropriately funded under new program arrangements.

The devolution of a central FACS interpreter budget for registered funded services and its replacement with a system of direct budget allocations for select programs has raised significant concerns about the coverage of interpreting funding and the level of funding allocated. This matter has been consistently raised at FACS convened Multicultural Advisory Committees at central and district levels.

SSI urges FACS to ensure that vulnerable non-English speaking families do not miss out on needed services because of under resourcing for interpreting services. Pressures on limited interpreting budgets are likely to continue into the future given a range of factors including: the complexity of migrant and refugee client needs, increasing intake of migrants and refugees from non-English speaking source countries, and the medium to long-term nature of early intervention work with families.

Recommendations:

- That the prevention and early intervention system in NSW recognises the unique vulnerabilities experienced by families undergoing settlement and ensure that families in settlement receive timely and accessible early intervention services.
- That there is investment in the establishment of targeted prevention and early intervention services aimed at families going through settlement, and CALD families more broadly.
- That targeted prevention and early intervention services established under the current reforms address the barriers to service delivery to CALD families.
- That current provision for interpreting funding be reviewed to ensure that interpreting services are appropriately funded under new program arrangements.
- That there is recognition within current reforms of the existing wealth of experience and expertise within settlement, refugee and migrant service organisations in working with migrant and refugee families in accessible and responsive ways.

- Greater coordination and integration in the planning and provision of services to recently arrived families across levels of government and service sectors.
- Greater cooperation and involvement of migrant and refugee organisations in child protection and early intervention work by FACS and other service providers.
- Implementation of initiatives to enhance the cultural competence of service providers in government and non-government sectors in the early intervention space.

3. Improving service coordination and collaboration

Settlement, refugee and migrant service organisations currently provide a range of services to families. Many of these families may also be clients of early intervention services. There is scope, as part of the reforms, to build better case coordination and integration between settlement, refugee and migrant service organisations and those providing early intervention services. This includes provisions for information sharing, better referral processes, joint casework, and other forms of collaboration.

In addition to better integrated support, an additional benefit would be in assisting early intervention services build trust and rapport with migrant and refugee families.

Recommendation:

- That the current early intervention reforms build better service coordination and integration between settlement, refugee and migrant service organisations and early intervention service providers.

4. Building cultural competency

SSI believes that the reforms need to include building cultural competency within the prevention and early intervention service system.

The National Health and Medical Research Council (NHMRC) has offered useful guidance on a cultural competency model that has the potential to deliver greater integration and access to interventions by disadvantaged migrant and refugee populations. The model proposes that improving access and achieving better outcomes for refugee and migrant families demands change at a systems level, at a professional level, at the level of the service provider and change at the individual worker level. (National Health and Medical Research Council (NHMRC), 2006).

In SSI's experience, capacity building in the area of cultural competency is often limited to training frontline workers, with little attention paid to the necessary organisational, professional, or systemic changes required to achieve culturally responsive services. A multi-level approach to cultural competency such as the one put forward by the NHMRC offers a useful way to refine service system design, service delivery and program improvement under the reform process. SSI believes that applying a cultural competency

framework could help to improve equity in terms of access and early intervention outcomes for NSW's CALD communities and other disadvantaged populations.

Recommendation:

- Implementation of initiatives to enhance the cultural competency of the prevention and early intervention service system in government and non-government sectors. SSI believes that this should include training and engagement initiatives to increase the understanding of prevention and early intervention service providers and program reform staff within FACS of the settlement services system, the needs of families during settlement, and the intersection with the early intervention system.

5. Community consultation and engagement

SSI believes that there is significant value in ensuring that the views of CALD communities, families and service organisations are heard in the design and development of the prevention and early intervention service system. This includes consulting and engaging with settlement, refugee and migrant organisations about needs, strategies and models for working with migrant and refugee families.

Recommendation:

- That there be consultation and engagement with CALD communities, families and service organisations on the development of the prevention and early intervention service system.

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