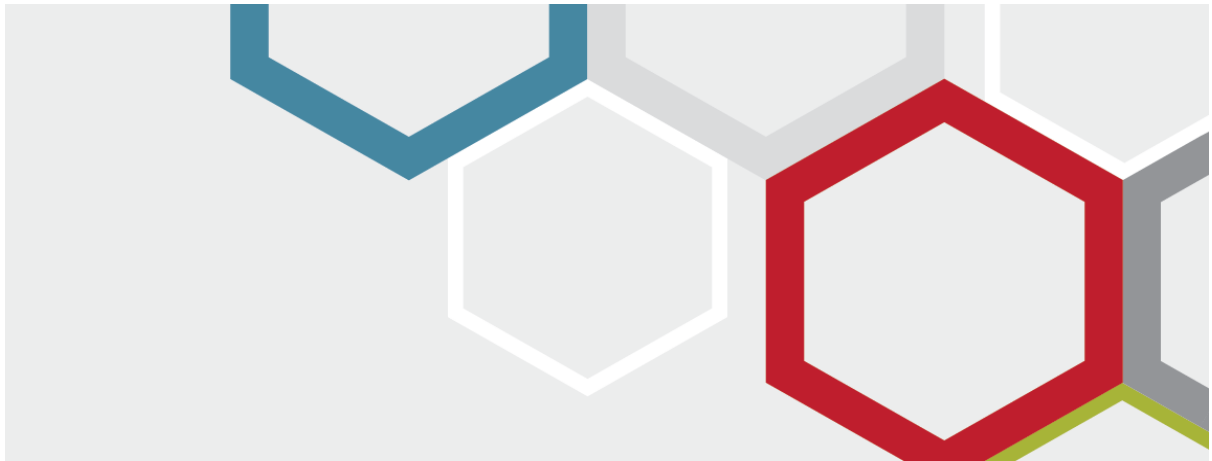


Submission
No 89

INQUIRY INTO CHILD PROTECTION

Organisation: Good Shepherd Australia New Zealand

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Submission by Good Shepherd
Australia New Zealand
Inquiry into Child Protection
(NSW Government)

Submission to the General Purpose Standing Committee No. 2 - Inquiry into Child Protection

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About our organisation

Good Shepherd Australia New Zealand

This submission has been prepared by Good Shepherd Australia New Zealand (Good Shepherd), a community services organisation that aims to disrupt the intergenerational cycle of disadvantage with a focus on women and girls. We achieve this through services that address social and economic exclusion. A central part of our mission is to challenge the systems that entrench poverty, disadvantage and gender inequality. We do this through research, advocacy and social policy development. Good Shepherd believes that gender inequality is a key driver of poor outcomes for women and girls. In order to achieve gender equality, a multi-dimensional process of empowering women and girls to achieve basic capabilities, legal rights and participation in key social, economic, political and cultural domains is critical. Unless we address the structural gender inequality across these domains and challenge the social constructs of femininity and masculinity within them, women and girls will remain undervalued and prohibited from achieving and attaining full, active and participatory lives.

Our specific expertise is in:

- **Safety and resilience** – supporting women to be resilient provides a buffer between an individual and adversity, allowing them to achieve improved outcomes in spite of difficulties.
- **Financial security** – supporting women to ensure they have access to sufficient economic resources to meet their material needs so that they can live with dignity.
- **Educational pathways** – assisting women and girls to overcome the obstacles in their life that hinder them from achieving their educational/vocational capacity.
- **Outcomes and evaluations** – developing evidence-based program designs across all Good Shepherd Australia New Zealand programs and services.
- **Research, Social Policy and Advocacy** – needs research into emerging issues, identifying effective change interventions for program design, policy analysis and advocacy.

Recognising that mainstream education cannot meet the needs of all young people, Good Shepherd delivers a range of services supporting young people and their families. Good Shepherd's Waranara Centre delivers a range of alternative educational programs to provide support for young people (14 to 19 years of age) at risk of disengagement from education because of disadvantage and the social isolation that can result. Good Shepherd's Sydney Young Parents Program was launched in January 2015 and with a number of other organisations, we provide essential services for Sydney young mothers. Our Sydney Young Parents Program aims to break cycles of disadvantage and change outcomes for young families through positive parenting skills and access to support networks. We also offer counselling services in New South Wales to support young people who are experiencing family relationship difficulties or issues arising from a recent or past trauma through one-on-one family counselling or specialist sexual assault counselling. Our Day Program also delivers a 10-week intensive life skills program to support and help young people who are dealing with mental health issues, trauma or family violence, and who were at risk of leaving school, to gain skills and confidence to make decisions, commit to goals and reduce aggressive behaviour.

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Introduction

Good Shepherd Australia New Zealand (Good Shepherd) welcomes the opportunity to provide feedback, and contribute to the inquiry into the New South Wales Child Protection system.

The welfare of all children is a family and a whole-of-community responsibility. This requires building capacity of families, community members, community services, educators, and government departments alike. In doing so, it is imperative to acknowledge and address the structural barriers that many individuals and families face, such as poverty and disadvantage that exacerbate family circumstances which can lead to child abuse or neglect. Much like many other social issues, there is no one solution. If we are to strengthen the capacity of the community, including families to protect the safety of children, and increase their wellbeing, a myriad of responses are needed, and at multiple levels.

It is well known that the child protection and welfare system has been under pressure for many years. Sadly, this situation is not unique to New South Wales. Good Shepherd services operating in Victoria face very similar issues and concerns in relation to the safety and welfare of children and young people who come into contact with the child protection system.

Our submission is sectioned into three parts, each identifying the specific terms of reference, as issued by the General Purpose Standing Committee No. 2.

Our analysis of the issues currently facing the NSW child protection system is drawn from research and practice experience, particularly from our experience in providing services for young people and families in the Sydney District. As a Non-Government Organisation (NGO) working closely and collaboratively with the Department of Family and Community Services (FACS), our intimate knowledge of the service system and its inherent challenges gives us a strong basis for making our recommendations.

We all agree that every Australian child should expect to live safely, and with opportunities for a rich and fulfilling life, within healthy and safe home and community environments. Where it is necessary for state intervention, it is critical that the care being provided is resourced adequately. In order to best guarantee the safety and wellbeing of the children and young people of New South Wales, an integrated service system working and providing services along a continuum of care is critical. An integrated approach will ensure that no child or young person 'falls through the gaps', and the provision of services from crisis through to post-crisis care will reduce the likelihood of re-engagement with the system. More importantly, provision of services along the continuum of care provides children and young people with the best opportunity to live full and safe lives.

Recommendations

● Recommendation 1

The NSW Government, through the Council of Australian Governments (COAG), ensures that the Third Action Plan of the National Framework for Protecting Australia's Children 2009 – 2020 is prioritised and further, that secondary and primary interventions and activities are robustly funded.

● Recommendation 2

In support of the recommendations made by the Australian Child Rights Taskforce, the NSW government through COAG, advocate for the necessary human, technical and financial resources to:

- Adequate fund and prioritise implementation of the National Framework, including the Third Action Plan. Primary and secondary interventions should:
 - Target early intervention and provide intensive family support services for vulnerable children that strengthens families and are distinct from mandatory child protection mechanisms;
 - Include wide scale public education that raises awareness of the rights of children to bodily integrity and dignity, and for men and boys that respond to social norms regarding gendered violence in the family.
 - Strengthen parenting information and provision of home visiting programs through universal means such as health care, including culturally appropriate approaches.

● Recommendation 3

In support of Recommendation 9 made by the Committee on Community Services Report (2013)¹, the Department of Premier and Cabinet establishes a NSW Office for the Non-Government Organisation human services sector to coordinate and facilitate consultation between funding agencies and service providers in the development of funding policies, the planning and delivery of services, capacity building within the sector and the provision of information across the sector.

● Recommendation 4

The NSW Department of Family & Community Services in consultation with the Department of Education, and NGOs devise and implement specific mechanisms to ensure that a wrap-around service is offered to adolescents who do not meet the ROSH threshold, but still require complex case management, as preventative and early intervention initiatives.

● Recommendation 5

The NSW Department of Family & Community Services invest in evidence based research to inform policy and practice innovations that address the specific needs of adolescents.

● Recommendation 6

Review the way child protection, family law system, and family violence services work together so that comprehensive support is wrapped around those at risk, irrespective of the child or young person's age, with a specific focus on shared risk assessment tools and developing shared practice guidelines.

¹ Parliament of New South Wales, 2013, *Outsourcing community service delivery: Final report*, Report No. 2/55, NSW: NSW Parliament, Legislative Assembly, Committee on Community Services, p. 40.

● Recommendation 7

The Department of Premier and Cabinet takes on overall responsibility for the development of a set of shared outcome goals across the broader child and family welfare service sector, and a more sophisticated and formal integration across these service providers, with a focus on addressing primary health issues such as access to safe and affordable housing, and alleviating poverty.

● Recommendation 8

That the ROSH process have specific funds earmarked for adolescent cases. Explanatory note: at the moment, they really only have funds for infants and toddlers, and the other cases get sent back to the agencies; earmarking funds for adolescents will be cost effective in the long run because it will reduce the numbers in juvenile justice and other higher-cost interventions.

● Recommendation 9

The NSW Department of Family & Community Services in consultation and collaboration with NGOs, develop a mechanism for supporting agencies working with clients whose case has been reported to FACS, but who FACS assess as not meeting the ROSH threshold. NGOs require adequate resources to fund dedicated support, which ranges from early intervention programs through to components of tertiary intervention, including agency-based case managers and support costs to bring family/community together to support the young person.

● Recommendation 10

The Department of Family and Community Services communicates clearly to all stakeholders the reporting process, including what happens after reports are received.

● Recommendation 11

A Coordinated system aimed at young people up to 24 years (consistent with the NSW definition of young people) be developed by FACS, in consultation and in partnership with NGOs, and NGOs are appropriately funded to keep adolescents and young people safe.

● Recommendation 12

In support of the recommendations made by the Australian Child Rights Taskforce, the NSW government through the Office for Women, respond to causal drivers of familial violence and the complex intersection of factors contributing to risk including through:

- Increasing access to integrated service delivery that takes a holistic approach to children and their families
- Increasing investment in support services addressing causal factors for children and their families including poverty, mental health, drug and alcohol abuse, housing and education while maintaining individual's right to decision-making autonomy.

● Recommendation 13

The NSW Government develop strategies and funding to integrate services including:

- Education, child protection and family services;
- Housing, child protection and family services;
- Mental health, drug and alcohol services and child protection

● Recommendation 14

The Department of Family & Community Services invest in the development of a whole-of-government evaluation and monitoring framework to evaluate and monitor universal programs in terms of the outcomes for children, young people and their families, rather than number of throughputs and outputs.

➤ Part one: Capacity and effectiveness of systems

1. *That General Purpose Standing Committee No. 2 inquire into and report on the role of the Department of Family and Community Services in relation to child protection, including:*
 - 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*

Article 19 of the *UN Convention of the Rights of the Child* requires governments to ensure that children are properly cared for and protected from violence, abuse and neglect. Violence that impacts children, whether that be directly or indirectly, is pervasive and constitutes a fundamental breach of their human rights.²

There is a plethora of evidence-based research that tells us children who experience or witness violence are at risk of harm to their physical, social and emotional development. Children who witness or experience violence are more likely to experience developmental challenges, low self-esteem, and physical and mental health conditions. Further to this, there is a risk of children repeating these behaviours as either victims or perpetrators when they become adults.

The protection and support of children and young people, particularly those at risk, requires the coordination and collaboration of many different government and non-government agencies. The *Children and Young Persons (Care and Protection) Act 1998* entrusts the Department of Family and Community Services (FACS) with the duty of safeguarding the safety, wellbeing and welfare of children and young people in New South Wales (NSW). FACS is responsible for supporting the family as a safe and nourishing environment for children to grow; for the receipt, investigation and assessment of reports of children and young people at risk of significant harm; and for the intervention on behalf of vulnerable children and young people when necessary.

Non-Government Organisations (NGOs) have a long history in providing supports to community member, largely those who are most in need and disadvantaged. FACS is the largest funder of NGOs in New South Wales (NSW). The partnership and collaboration between FACS and NGOs provides valuable and often critical connections to the community in support of children and young people at risk of harm. Indeed, the continued collaboration between FACS and NGOs is fundamental in ensuring that children and young people are protected and supported.

The National Framework for Protecting Australia's Children 2009 – 2020 is based on a public health model that aims to balance investment in universal support for all families (primary), targeted early intervention for high risk families (secondary) and statutory crisis care (tertiary). While there is recognition that service provision across this continuum is necessary to achieve the end goal of protecting Australian children, and ensuring they have the capacity to live fulfilling lives free of violence and neglect, there has been little change in redistributing funding and resources to prioritise secondary and primary interventions, which work towards strengthening the capacity of families who are experiencing times of vulnerability.

Despite the issues of under-funding and under-resourcing, there is no doubt there is a genuine willingness by both FACS and NGOs to work collaboratively, holding the best interests of the child and/or young person as central. However, it cannot be ignored that "state and territory child protection systems in Australia

² Australian Child Rights Taskforce, 2016, *Australian Child Rights Progress Report: A report on 25 years of the UN Convention on the Rights of the Child in Australia*, Sydney: UNICEF Australia, National Children's and Youth Law Centre, p. 31.

cannot sustain the current demand for investigation and response".³ As we have observed over many years in providing services to children, young people and their families, the convergence of multiple and/or complex issues such as substance abuse, domestic violence, mental health concerns, poverty and disadvantage continues to drive the increase in the numbers of children entering the broader child protection system. In order to meet this demand, adequate funding and resources are needed at the tertiary end of the system. To complement this we advocate that equal if not more funding and resources is needed at the primary prevention and early intervention end of the spectrum, particularly in relation to family support initiatives.

● Recommendation 1

The NSW Government, through the Council of Australian Governments (COAG), ensures that the Third Action Plan of the National Framework for Protecting Australia's Children 2009 – 2020 is prioritised and further, that secondary and primary interventions and activities are robustly funded.

● Recommendation 2

In support of the recommendations made by the Australian Child Rights Taskforce, the NSW government through COAG, advocate for the necessary human, technical and financial resources to:

- Adequate fund and prioritise implementation of the National Framework, including the Third Action Plan. Primary and secondary interventions should:
 - Target early intervention and provide intensive family support services for vulnerable children that strengthens families and are distinct from mandatory child protection mechanisms;
 - Include wide scale public education that raises awareness of the rights of children to bodily integrity and dignity, and for men and boys that respond to social norms regarding gendered violence in the family.
 - Strengthen parenting information and provision of home visiting programs through universal means such as health care, including culturally appropriate approaches.

● Recommendation 3

In support of Recommendation 9 made by the Committee on Community Services Report (2013)⁴, the Department of Premier and Cabinet establishes a NSW Office for the Non-Government Organisation human services sector to coordinate and facilitate consultation between funding agencies and service providers in the development of funding policies, the planning and delivery of services, capacity building within the sector and the provision of information across the sector.

Under the *Children and Young Persons (Care and Protection) Act 1998*, child abuse and neglect are defined as a broad category of circumstances that require the need for consideration of outside intervention where a child is perceived to be at risk of serious harm. Reports of child abuse and/or neglect are assessed, and are substantiated once FACS has undertaken an investigation of the report and concluded that the 'child has been, is being or is likely to be abused, neglected or otherwise harmed'.⁵

³ Bromfield, L. Arney, F. & Higgins, D., 2014, 'Contemporary issues in child protection intake, referral and family support', in Hayes, A & Higgins, D. (eds), Australian Institute of Family Studies, <https://aifs.gov.au/publications/families-policy-and-law/1-weaving-common-narrative-introduction-essays-families-policy>, pp. 121 – 129.

⁴ Parliament of New South Wales, 2013, *Outsourcing community service delivery: Final report*, Report No. 2/55, NSW: NSW Parliament, Legislative Assembly, Committee on Community Services, p. 40.

⁵ *Child Protection Amendment Act 2014 (NSW)*

The type of abuse or neglect reported for children who were subjects of substantiations is the one considered most likely to place the child at risk or be more severe in the short term – generally known as the ‘primary’ type of abuse or neglect. Nationally, emotional abuse was the most common primary type of abuse or neglect substantiated for children, (43 per cent), followed by neglect (26 per cent). Physical abuse was the primary type substantiated for 18 per cent of children who were the subject of substantiations, and sexual abuse was the reason for substantiation for 13 per cent of children.⁶

Notifications received by FACS represent 39.4 per cent of all notifications received by child protection agencies across Australia.⁷ The Australian Institute of Health and Welfare (AIHW) has reported that children in NSW aged between 5 and 9 years of age were most likely to be receiving child protection services (36.5 per 1,000 children). In comparison, across Australia, infants (children under 1) were most likely to be receiving child protection services.

The strengthening of national and state-based governments, adequately funded services and appropriate family law processes is essential to prevent and protect children from violence.⁸

As Table 1 illustrates, the number of notifications received by FACS continues to increase, with 126,146 notifications received in 2014/2015. Of these notifications, almost 21 per cent (26,424) were substantiated, equating to a rate of 8.9 children subject of substantiations per 1,000 children in NSW.

Year	Number of notifications	Number of substantiations of notifications received	Rates of children who were the subjects of substantiations of notifications received (number per 1,000 children)
2010- 2011	98,845	18,596	7.0
2011 – 2012	99,283	23,175	8.9
2012 – 2013	104,817	26,860	9.8
2013 – 2014	125,994	26,215	9.0
2014 – 2015	126,146	26,424	8.9

Table 1: NSW Child Protection notifications, substantiations and rates of children who were subjects of substantiations⁹

A review of the NSW Child Protection System in 2011 found that in the first 11 months of the new system, the number of Risk of Serious Harm (ROSH) reports referred by the Child Protection (CP) Helpline to other parts of Community Services for action was 53 per cent less than it had been before the Wood Inquiry began. This decline can be most likely explained by the higher reporting threshold from ‘risk of harm’ to ‘risk of significant harm’. It is fair to argue that the increase in the reporting threshold then resulted in more cases being referred to, and taken up by NGOs. The review in 2014 by the Ombudsman also found that the number of ROSH reports that received a face-to-face assessment increased from 21 per cent in 2011 to 28

⁶ Australian Institute of Health and Welfare, 2016, *Child Protection Australia 2014 – 2015*, Child Welfare Series, No. 63, Cat. No. CWS 57. Canberra: AIHW, p. 22.

⁷ Ibid.

⁸ Australian Child Rights Taskforce, 2016, *Australian Child Rights Progress Report: A report on 25 years of the UN Convention on the Rights of the Child in Australia*, Sydney: UNICEF Australia, National Children’s and Youth Law Centre, p. 31.

⁹ Australian Institute of Health and Welfare, 2016, *Child Protection Australia 2014 – 2015*, Child Welfare Series, No. 63, Cat. No. CWS 57. Canberra: AIHW

per cent in 2014.¹⁰ Although an improvement, this data suggests that meeting demand remains significantly inadequate and well below “an acceptable level”.¹¹

The NSW Ombudsman report also highlighted that the number of reports closed due to ‘competing priorities’ remains unacceptably high, representing 39 per cent of all ROSH report response outcomes.¹² There is no doubt that “an efficient child protection system must be able to identify those children who are most in need in order to direct an appropriate level of resources to this group”.¹³ This must include the identification of children and families who do not meet the ROSH threshold, and adequately funding and resourcing the service providers that are currently supporting these individuals and families who are experiencing times of vulnerability.

In the Sydney District, where Good Shepherd provides services to vulnerable adolescents and their families, there were 3,641 ROSH reports received in 2014/2015. Of these, 651 were determined to be at actual harm or risk of harm upon secondary assessment.¹⁴ It is safe to assume that the 651 cases were taken up by FACS, leaving the remaining 2,990 to be taken up by NGOs, depending on their capacity. It has been observed that ROSH report data indicate a higher level of priority being accorded to young children requiring immediate intervention. By contrast, a higher proportion of reports regarding adolescents were often receiving no response – this approach was “often justified by Community Services on the basis of the need to make decisions about relative risk, and the fact that generally, younger children will be at greater risk”.¹⁵ On average, 31 per cent of children under 12 received a face-to-face assessment, compared with only 22 per cent of adolescents in 2012 – 2013.¹⁶

Indeed, children who require immediate intervention should be provided with services as a matter of priority to ensure their safety and protection. However, this should not be dependent on the age of the child or young person. It has been our experience that adolescents tend to be ignored by FACS, even though their younger siblings, from the same home environment, are taken up and managed by FACS. If the decision of FACS is to solely focus on younger children, this position should be communicated to the broader service system, and adequate funding and resources be allocated to NGOs with the mandate to provide the support that young people require.

Currently, Good Shepherd participates and contributes to the monthly Adolescent Interagency Meetings (AIM), an ad hoc structure that brings together a number of local NGOs with FACS with the purpose of delegating responsibility for NGOs to take up quite complex cases that would otherwise be closed by FACS as they do not meet the ROSH threshold. These cases are discussed, and if an NGO has capacity, they will take on the case to follow up with the adolescent.

Although these cases do not meet the ROSH threshold, this does not minimise or diminish the level of support that an adolescent requires, nor the level of risk that they face. In one case example we know of, more than 50 reports had been made to FACS before the case was tabled and presented at an AIM. The difficulty that Good Shepherd and other NGOs face in this instance is that we are then required to ‘cold call’ the young

¹⁰ New South Wales Ombudsman, 2014, *Review of the NSW Child Protection System: Are things improving? A special report to Parliament under s.31 of the Ombudsman Act 1974*, Sydney: NSW Ombudsman.

¹¹ *ibid*, p.3

¹² *ibid*, p. 8.

¹³ *ibid*, p. 1.

¹⁴ Department of Family and Community Services, 2016, FACS Statistics, Objective 1 – Improving the lives of children and young people, <http://www.facs.nsw.gov.au/facs-statistics/objective-1>

¹⁵ New South Wales Ombudsman, 2014, *Review of the NSW Child Protection System: Are things improving? A special report to Parliament under s.31 of the Ombudsman Act 1974*, NSW Ombudsman: Sydney, p. 2.

¹⁶ *ibid*, p. 5.

person concerned, often after a significant period of time has lapsed since the notification was first made. Engagement with this cohort of young people can often be very difficult, and requires a significant dedication of time and resources.

The relative success of the AIMs in the Sydney District is fundamentally based on the good will of the NGOs, and the relationships between services. NGOs contribute their time and often stretch existing resources to support adolescents, who would otherwise fall through the cracks of the current system, in turn supporting FACS and the broader service system, highlighting that indeed, the current service system is premised on strong partnerships between government and NGOs.

● Recommendation 4

The NSW Department of Family & Community Services in consultation with the Department of Education, and NGOs devise and implement specific mechanisms to ensure that a wrap-around service is offered to adolescents who do not meet the ROSH threshold, but still require complex case management, as preventative and early intervention initiatives.

● Recommendation 5

The NSW Department of Family & Community Services invest in evidence based research to inform policy and practice innovations that address the specific needs of adolescents.

● Recommendation 6

Review the way child protection, family law system, and family violence services work together so that comprehensive support is wrapped around those at risk, irrespective of the child or young person's age, with a specific focus on shared risk assessment tools and developing shared practice guidelines.

● Recommendation 7

The Department of Premier and Cabinet takes on overall responsibility for the development of a set of shared outcome goals across the broader child and family welfare service sector, and a more sophisticated and formal integration across these service providers, with a focus on addressing primary health issues such as access to safe and affordable housing, and poverty.

Part two: Adequacy and reliability of safety and risk assessment tools

1. *That General Purpose Standing Committee No. 2 inquire into and report on the role of the Department of Family and Community Services in relation to child protection, including:*
 - b. *The adequacy and reliability of the safety, risk and risk assessment tools used at Community Service Centres.*

The NGO sector has long played a critical role in relation to the protection of children in NSW. In the period from 2000 to 2012, FACS has increased its funding to the non-government sector by 150 per cent, from \$800 million to \$2.3 billion.¹⁷ This increase reflects the changes to the child protection system and subsequent expansion of the roles and responsibilities of NGOs.

There are 82 locally based Community Service Centres (CSCs) across NSW. CSCs work directly with children and young people reported at ROSH. CSCs provide triage, assessment and case management to support children and young people to live safely at home. CSCs refer to and work collaboratively with interagency partners to provide families with the intervention and support they need. Managers in all CSCs meet weekly to review new reports that cannot be allocated due to insufficient resources.

NGOs are increasingly working with families with complex needs, where risks to children are high. The 'Decision Making Tree' is the tool used by NGO's to decide if a case is notifiable to FACS. If an NGO determines that a report is required, the NGO will determine whether to make an immediate report or a 'general' report. The Child Protection Helpline then has the responsibility of assessing the information provided, along with information that may be known to FACS, to determine whether or not it meets the legislative threshold for a ROSH report.¹⁸

A review of services in relation to teenagers experiencing times of vulnerability was conducted by FACS in 2014. This review acknowledged the system gaps in relation to young people and teenagers. It found that "existing practice is often limited to managing crisis and does not enable positive long term change in trajectories".¹⁹ Whilst we support infrastructure, resources and funding to ensure FACS can adequately manage crisis situations involving infants and primary-age children, the issue of risk should be broadened to also encompass the long-term risks to adolescents and young people if no adequate intervention is provided.

● Recommendation 8

That the ROSH process have specific funds earmarked for adolescent cases. Explanatory note: at the moment, they really only have funds for babies and toddlers, and the other cases get sent back to the agencies; earmarking funds for adolescents will be cost effective in the long run because it will reduce the numbers ending up in the juvenile justice system.

¹⁷ Parliament of New South Wales, 2013, *Outsourcing community service delivery: Final report*, Report No. 2/55, NSW: NSW Parliament, Legislative Assembly, Committee on Community Services.

¹⁸ Department of Family & Community Services, 2016, Mandatory Reporter Guide. Procedures, http://sdm.community.nsw.gov.au/mrg/resources/definition/decision_trees.html

¹⁹ Department of Family and Community Services, 2014, *Better lives for vulnerable teens. FACS review. Summary paper*, FACS: NSW, p.9.

● Recommendation 9

The NSW Department of Family & Community Services in consultation and collaboration with NGOs, develop a mechanism for supporting agencies working with clients whose case has been reported to FACS, but who FACS assess as not meeting the ROSH threshold. For example, providing adequate resources to fund dedicated support, including agency-based case managers and support costs to bring family/community together to support the young person. Explanatory note: current GSANZ FACS funds are for early intervention programs and not for complex cases that have already proceeded past the early intervention stage, yet GSANZ still ends up supporting such young people.

The Decision Making Tree is useful in guiding and informing decision making in relation to reports, it is critical that all service providers, regardless of government or non-government agency, share a common understanding of the definition of risk. While for FACS this definition may be focused on immediate risk, and thus calling for immediate intervention to ensure safety and protection, it is equally important to understand risk as a cumulative factor, rather than assessing risk on one particular incident. For many NGOs working with children and young people and their families, intensive case management support is already being provided, thus when an NGO follows the Decision Making Tree process and determines that a report is necessary, this should be accepted by FACS, despite the fact that a service provider is already engaged with the child and/or family.

All NGOs working with children and young people follow the mandatory reporting guidelines. Due to increasing demand there is understandable pressure on FACS in working with those children and young people who do not meet the ROSH threshold. The dilemma that many NGOs face is the reasonable assumption that young people and adolescents in particular will rarely be followed up with by FACS, partly because the young person is already engaged to some degree with an NGO. Many members of the community, including some NGOs and government agencies, believe that when a report is made to the CP Helpline the case will necessarily be investigated by FACS. The reality is that this is not always the case. Rather, NGOs are more often than not, taking on case management responsibilities for the cases that do not meet the ROSH threshold.

● Recommendation 10

The Department of Family and Community Services communicates clearly to all stakeholders the reporting process, including what happens after reports are received.

● Recommendation 11

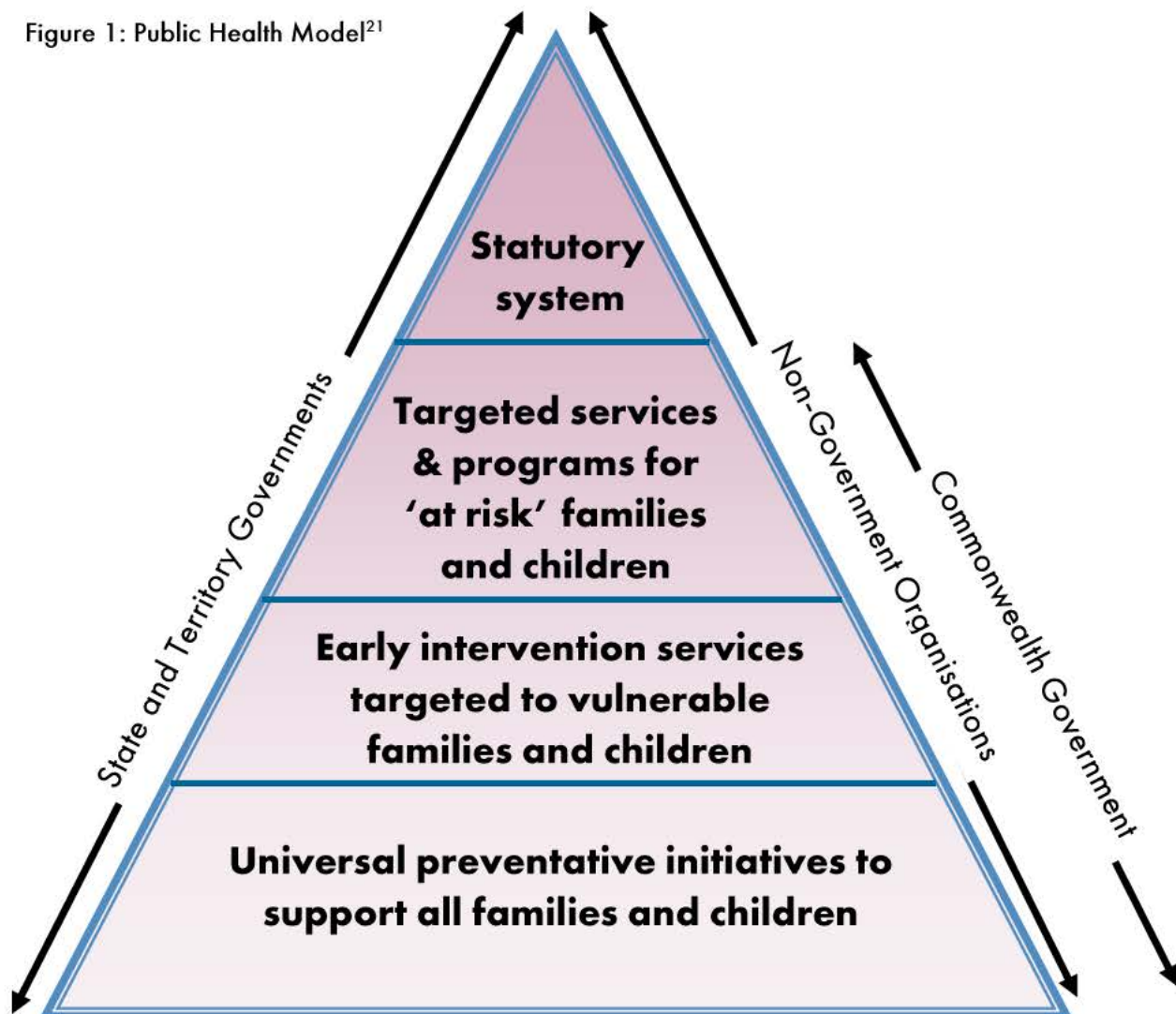
A Coordinated system aimed at adolescents up to 24 years (consistent with the NSW definition of young people) be developed by FACS, in consultation and in partnership with NGOs, and NGOs being appropriately funded to take on the work with adolescents and young people adequately.

Part three: Funding and resources across the continuum

1. That General Purpose Standing Committee No. 2 inquire into and report on the role of the Department of Family and Community Services in relation to child protection, including:
 - h. The amount and allocation of funding and resources to universal supports and to intensive, targeted prevention and early intervention programs to prevent and reduce risk of harm to children and young people

As set out in the National Framework for Protecting Australia's Children 2009 - 2020, a public health model has been adopted, recognising that protecting children is more than merely a response to abuse and neglect, but rather providing supports that promote the safety and wellbeing of children. National and international research suggests that the application of a public health model will deliver better outcomes for children, young people and their families.²⁰

Figure 1: Public Health Model²¹



²⁰ Holzer, 2007; O'Donnell, Scott & Stanley, 2008; ARACY 2008; Scott 2006.

²¹ Adapted from Council of Australian Governments, 2009, *Protecting children is everyone's business. National Framework for protecting Australia's children 2009 - 2020*, Canberra: Commonwealth of Australia

This was highlighted in the Woods' Inquiry, emphasizing the need and importance of investing in universal and early intervention services, recognising that "the more entrenched the indicators of disadvantage, the costlier the remedies".²² If we are to effectively protect the safety and wellbeing of children, additional investment is needed in primary prevention and early intervention programs as these have the "greatest likelihood of preventing progression along the service continuum and sparing children and families from the harmful consequences of abuse and neglect".²³ This investment should also focus on supporting parents, care-givers and families more broadly.

The public health model comprises of three separate, yet interconnected platforms: primary, secondary and tertiary services. All three elements are critical in the child welfare and protection system. Fundamentally, a public health model approach aims to prevent problems occurring in the first instance, quickly responding to problems if they do occur, and minimizing any long-term effects – and prevent reoccurrence. This model is similar to the ecological approach taken in Australia's efforts to tackle and eliminate domestic and family violence.

As we know from the studies into the cost of family violence in Australia, significant investment is needed at the prevention and early intervention phases if we are to eliminate violence against women. A similar argument can be made in relation to the provision of intensive, targeted prevention and early intervention programs to prevent and reduce risk of harm to children and young people. Further to this, we advocate that funding of programs and services at each of these phases be devised with a gendered lens, in acknowledgement that the needs of young men and women, boys and girls are uniquely different.

Despite the significant merits and benefits of investment in early and primary prevention, the Targeted Early Intervention Program (TEIP) funding is causing great concern and uncertainty within the community sector. In light of recent reforms to the Specialist Homelessness Services (SHS), many organisations have had to make additional submissions for additional funding, and lobby to have gaps filled, particularly for young people experiencing vulnerability, and other members of the community. This additional advocacy work, puts further strain on NGO resources and capacity.

Further to this, the way in which funding is allocated places significant restrictions on the type of work NGOs can do with families and/or young people experiencing vulnerability. For example, Good Shepherd's Sydney Young Parent Program is funded under an SHS-funding stream. When the Program was developed just under 12 months ago, the nature of the work was underestimated. As it currently stands, two case workers work with highly complex young people, most of whom have a myriad of issues ranging from homelessness, mental health issues, drug and alcohol issues, family violence, on top of the pressures and stressors of being a young parent. Our experience of this Program is that there is little collaboration between FACS and Housing NSW, which subsequently results in homeless young parents having their babies removed from them, rather than undertaking the necessary work to ensure that young parents are supported to access safe and affordable housing. If funding for this Program incorporated early intervention funding, much more collaboration between agencies could occur, particularly in the early intervention space, thus potentially reducing the need to remove children, and then undertake the extensive work in relation to restoration at a later date.

²² New South Wales Ombudsman, 2014, *Review of the NSW Child Protection System: Are things improving? A special report to Parliament under s.31 of the Ombudsman Act 1974*, NSW Ombudsman: Sydney, p. 29.

²³ Child Family Community Australia, 2016, *The public health approach to preventing child maltreatment*, June 22, 2016, Australian Institute of Family Studies, <https://aifs.gov.au/cfca/2016/06/22/public-health-approach-preventing-child-maltreatment>

In relation to the recent NSW Budget, Good Shepherd echoes the concerns expressed by Youth Action in the shift away from prevention and early intervention initiatives towards programs that engage young people once they are in crisis.²⁴ Similarly, we support NCOSS view that the continued lack of investment in early intervention and early learning are 'missed opportunities' in engaging with children, particularly with NSW having the lowest proportion of children attending early childhood education in the year before school, and being the worst Australian state in relation to the performance on the proportion of disadvantaged children in early childhood education.²⁵

● Recommendation 12

In support of the recommendations made by the Australian Child Rights Taskforce, the NSW government through the Office for Women, respond to causal drivers of familial violence and the complex intersection of factors contributing to risk including through:

- Increasing access to integrated service delivery that takes a holistic approach to children and their families
- Increasing investment in support services addressing causal factors for children and their families including poverty, mental health, drug and alcohol abuse, housing and education while maintaining individual's right to decision-making autonomy.

● Recommendation 13

The NSW Government develop strategies and funding to integrate services including:

- Education, child protection and family services;
- Housing, child protection and family services;
- Mental health, drug and alcohol services and child protection

● Recommendation 14

The Department of Family & Community Services invest in the development of a whole-of-government evaluation and monitoring framework to evaluate and monitor universal programs in terms of the outcomes for children, young people and their families, rather than number of throughputs and outputs.

²⁴ Youth Action, 2016, *NSW Budget: funding shift away from prevention risks having more young people end up in crisis*, Media Release, 21 June 2016, www.youthaction.org.au

²⁵ NCOSS, 2016, *NSW Budget: broad investment in people welcome, but we need to start earlier*, Media Release, 21 June 2016, <https://www.ncoss.org.au/news-and-events/media-releases/nsw-budget-broad-investment-in-people-welcome-but-we-need-to-start>

➤ Case Study 1: An example of where flexibility allows for more effective and efficient interagency collaboration

Good Shepherd received a referral for sexual assault counselling from Adolescent Interagency Meeting (AIM) at the local FACS office. It was for a young girl with an intellectual disability who had been sexually assaulted at school, the case was considered under the ROSH. There was follow up required by the sexual assault counsellor, Newtown Police were contacted and we were informed that they may want to interview the young woman and her family again. The police advised not to contact the mother about the counselling referral until after they had finished all their investigation and interviews.

As the case had been handed over to the counsellor she made a phone call to the deputy headmaster of the high school to assess the safety of the young woman. It was advised that the school had put in place extensive safety plans including:

1. Closing off the computer lab, which is out of bounds and moved it to a better location. This means that no student should be ever in out of bounds areas in the school
2. A support teacher provided to sit with her recess and lunch, in the playground, in an area which is close to the office
3. Provided her with a gradual return to school schedule
4. Interviewed the suspected perpetrator.
5. Organised with the YLO to give a talk to all the boys in the school about sexual harassment and sexual assault
6. Organised for the support unit students to have special education on protective behaviours

Once the police had finished their investigations the counsellor contacted the mother to discuss their counselling needs.

As an outcome of this referral the sexual assault counsellor suggested she attend the local high school to develop and facilitate a 'protective behaviours workshop' for 22 year 7 and 8 female students, including the support unit students and teachers.

The students were all engaged and participated in asking questions and offering helpful strategies and suggestions. It was suggested to the Head of Welfare at the end of the workshop that a workshop of this content was run every year as an early intervention and prevention strategy for preventing sexual violence.

This flexible early intervention strategy represents an example of an intervention responding to the local need as it arises and operating in partnership with a local high school and FACS.

➤ Case Study 2: Existing child protection structures failing to meet the needs, circumstances and challenges of young people and their families

A 13 year old young woman, *Claire, was referred for counselling by the school due to reported abuse perpetrated by her mother. The referral was a result of another student noticing cuts on Claire's arms, who reported this to a teacher. Claire was interviewed by the teacher, and she then made disclosures of the violence she had been subjected to.

The school reported that the mother physically assaults Claire, (hits and throws objects at her), verbally abuses her calling her names such as "ugly" and "slut", and does not give her money or food for school. Claire has a history of self-harm.

Claire was in year 7 in high school. She is the second child of four children (14yrs, 6yrs and 2yrs), and lives at home with her mother and siblings. Her mother is on a disability pension. She has no contact with her father.

As a child Claire moved homes and changed schools regularly. Her father was a perpetrator of physical abuse towards her mother, to which Claire was a witness. Claire reports there being a lot of violence in the areas in which they lived when she was young, and remembers feeling safest during the time that they lived in a long term women's refuge.

Claire reports her mother taking medication during the day that has her sleeping most of the day. She says that she and her siblings do their best to keep her "calm". Claire has no extended family in Australia, meaning the family are extremely isolated.

Claire's initial counselling sessions identified a range of serious issues including self-harm, suicidal ideation, and a history of sexual abuse perpetrated by a family friend, often in the house. Claire believed that her younger sister may also had been a victim. During sessions Claire would often become tearful, fearing her mother would "beat me till I'm dead" for making the disclosure. Safety planning was conducted in consultation with the school and a report was made to FACS. Due to new disclosures, reports were made each week for the first 6 weeks. Each report was assessed as meeting 'risk of significant harm' and triaged to FACS for assessment.

Two detectives made contact to arrange interviews with Claire. Claire arrived to the interview tearful and upset with a large egg on her head. She stated that her mother had just hit in the car with an object. An ambulance was called and Claire was transported to hospital. FACS was contacted by the hospital, who said they would do an assessment with Claire the following day but could not place her in a refuge overnight without her mother's permission. Claire was fearful of returning home. Good Shepherd rang a refuge directly however was also advised that they could not take Claire without parental consent. Good Shepherd rang a number of Claire's school friends in order to find somewhere for her to stay the night and dropped her off.

The following morning FACS was contacted to see what the next step would be. They affirmed this now would be an ongoing case and a case worker would be arrange. FACS from this point was remotely involved i.e. interviews were conducted but no interventions occurred. More report of abuse were made, most often weekly, and at one time Claire was scheduled under the mental health act due to high level

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suicidality. FACS engaged a family support worker to work within the family home. This was a positive step allowing support for the family unit, particularly the younger children. The family worker during one visit noticed signs of physical abuse on the 6 year old child. The 3 youngest children at this point were taken in to care.

Concluding remarks

Clearly we are failing to protect and care for young people, like the young women in the two preceding case studies. While these failings are systemic, we must recognise and acknowledge that simply injecting more and more additional resources into an already strained and stretched-system will not guarantee improved outcomes for vulnerable children and young people, and their families. We agree with the NSW Ombudsman in arguing that “in order to make real, sustained inroads into disadvantage, the service system should be rebuilt to achieve a more targeted response to those communities and individuals most in need of assistance and support”.²⁶

To be successful in supporting children and young people and their families to thrive in society, we must appreciate their unique needs, circumstances and challenges. We must recognise that children and young people who come through the broader child protection and welfare system are likely to have multiple needs that require attention and support. An effective and efficient system should provide a raft of integrated and streamlined services to address each and every one of their needs, from statutory support right through to primary prevention.

Similarly, we must remember that these children and young people are a part of a broader network of family and community. To keep children and young people safe, and to support them to live active and fulfilling lives, we must also work with families and communities alike, to build capacity and resilience at both an individual and societal level. This requires a whole-of-government and whole-of-community commitment and effort, again, at every stage of the public health model continuum.

²⁶ New South Wales Ombudsman, 2014, *Review of the NSW Child Protection System: Are things improving? A special report to Parliament under s.31 of the Ombudsman Act 1974*, NSW Ombudsman: Sydney, p. 29.

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