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*All illustrations kindly donated by children, including some children living in care*

# Protecting children is Everyone's Business

National Framework for Protecting  
Australia's Children 2009–2020



# Foreword

I am pleased to submit this report to the Council of Australian Governments and the Australian community. This is the second in a series of three annual reports outlining progress in implementing the *Protecting Children is Everyone's Business: National Framework for Protecting Australia's Children 2009-2020* (the National Framework).

Ensuring vulnerable children get a fair go in life has been a driving force behind the policy reform governments have undertaken in recent years. Under the umbrella of the National Framework, we have made significant progress to ensure that children grow up healthily, with a good education and with opportunities for a bright future.

Protecting children is a shared responsibility. The Commonwealth and state and territory governments continue to work together with our non-government colleagues, including the Coalition of Organisations Committed to the Safety and Wellbeing of Australia's Children (the Coalition) and state and territory Children's Commissioners, to ensure better outcomes for Australia's children.

Our actions under the National Framework are increasingly interlinked and connected to broader strategies and social reforms. This allows us to provide a more holistic approach to ensuring the wellbeing of our children, starting with prevention and early intervention, all the way through to statutory child protection.

This second annual report provides the opportunity to assess our progress under the National Framework: to celebrate areas where we are making a difference and honestly identify areas where we are facing challenges. We will look to further consolidate our achievements as we head towards the end of the first three-year action plan in 2011–12 and commit to future actions to make protecting Australia's children everyone's business.

Contributions to this report have been provided by the Commonwealth and state and territory governments, the Coalition and the Australian Institute of Health and Welfare (AIHW). The data provided is the most up-to-date available on issues of child health, development, wellbeing and protection. The National Framework has a long-term focus and it is acknowledged that measuring a reduction in child abuse and neglect is difficult as data may not be sensitive to change over a short period. Over time however, we will be able to use this data to demonstrate trends and measure progress towards the National Framework's high-level target of a substantial and sustained reduction in child abuse and neglect in Australia.

Once again, I thank the Community Services Ministers, other Ministers who have responsibility for implementing actions under the National Framework, respective administrations and the Coalition for their contributions and cooperation in compiling the information in this report and their continued commitment to the safety and wellbeing of Australia's children and young people and their families.



**The Hon. Pru Goward**

Chair, Standing Council on Community, Housing and Disability Services 2012  
Minister for Family and Community Services, Minister for Women, New South Wales

March 2012



# Contents

Foreword	iii
Executive summary	1
Chapter one: What is the National Framework?	3
Background – the National Framework for Protecting Australia’s Children	4
Structure of the National Framework for Protecting Australia’s Children	4
Working together	5
Further information on the National Framework	5
Reporting on progress	5
Structure of the report	6
Chapter two: National Framework in Action—Highlights from 2010–2011	7
Are we making a difference?	8
National Priorities—covering areas of need	9
Joining up service delivery	9
Developing national standards for out-of-home care	12
Closing the Gap	14
Building capacity and expertise	16
Sharing information	17
Improving support for carers	18
Enhancing the evidence base	19
Filling the research gaps	19
Responding to sexual abuse	19
Advocating nationally for children and young people	20
Major reforms that relate to broader social reform agenda	20
Family Support Program	21
National Partnership Agreement on Homelessness	22
Ongoing initiatives for children and families which are already underway	22
Keep Them Safe; A shared approach to child wellbeing	23
Working with Children Checks	24
Community initiatives within community organisations, independent of government	24
CREATE Foundation and Origin Foundation	24
New actions	25
Intensive Family Support Service (IFSS)	25
Remote Aboriginal Family and Community Workers	25

<b>Chapter three: Measuring the Difference; Status of the National Framework Outcome</b>	<b>29</b>
Introduction	30
High-level indicators: are Australia’s children and young people safe and well?	30
Overview of the indicators	30
Trends in key national indicators of children’s health, development and wellbeing	31
CHILDREN’S HEALTH: Infant Mortality	31
CHILDREN’S HEALTH: Dental Health	32
CHILDREN’S DEVELOPMENT: Literacy and Numeracy	33
CHILDREN’S WELLBEING: Teenage births	35
CHILDREN’S WELLBEING: Overweight and Obese Children	36
CHILDREN’S WELLBEING: Family economic situation	37
CHILDREN’S WELLBEING: Injuries	37
CHILDREN’S WELLBEING: Immunisations	38
Trends in hospital admissions and emergency department visits for neglect and injuries to children under three years	38
Trends in substantiated child protection cases	39
Trends in the number of children in out-of-home care	41
<b>Chapter four: Status of supporting outcomes</b>	<b>43</b>
Introduction	44
Supporting indicators: Measuring the supporting outcomes	44
Analysis: Outcomes supporting the National Framework	45
Outcome 1: Children live in safe and supportive communities	45
Outcome 2: Adequate support to promote safety and early intervention	45
Outcome 3: Risk factors for child abuse and neglect are addressed	50
Outcome 4: Children who have been abused or neglected receive the support and care they need for their safety and wellbeing	53
Outcome 5: Indigenous children are supported and safe in their families and communities	58
Outcome 6: Child sexual abuse and exploitation is prevented and survivors receive adequate support	60
<b>Chapter five: Maintaining the momentum</b>	<b>63</b>
The story so far	64
The future	64
Evaluating our strategies	65

<b>Appendix One: Status report of actions contained in the action plan</b>	<b>68</b>
Introduction	68
Supporting outcome 1: Children live in safe and supportive families and communities	68
Strategy 1.1: Strengthen the capacity of families to support children	68
Action 1.1.A: Continue to establish and support family and children’s centres	68
Action 1.1.B: Combine and refocus community programs within FaHCSIA	69
Action 1.1.C: Continue to improve family support services	69
Strategy 1.2: Educate and engage the community about child abuse and neglect and strategies for protecting children	72
Action 1.2.A: Support community organisations to deliver cost-effective, community-based initiatives (for example, National Child Protection Week, survey of community attitudes to protecting children)	72
Strategy 1.3: Develop and implement effective mechanisms for involving children and young people in decisions affecting their lives	72
Action 1.3A: Explore potential National Children’s Commissioner	72
Action 1.3C: Finalise, print and distribute an information booklet for children entering foster care	72
Action 1.3D: Continue to improve the experience of court processes for children	72
Action 1.3E: Support participation of children in decision making	74
Supporting outcome 2: Children and families access adequate support to promote safety and intervene early	76
Strategy 2.1: Implement an integrated approach to service design, planning and delivery for children and families across the lifecycle and spectrum of need	76
Action 2.1.A: Expand the Communities for Children program	76
Action 2.1.B: Implement integrated and co-located child and family service models	76
Strategy 2.2: Develop new information sharing provisions between Commonwealth agencies, state and territory agencies and NGOs dealing with vulnerable families	77
Action 2.2.A: Nationally consistent approach to working with children checks	77
Action 2.2.B: National protocol for sharing information on children at-risk	78
Action 2.2.C: Options for improving information sharing between NGOs and government agencies (through CAARS Taskforce)	78
Strategy 2.3: Ensure consistency of support and services for all children and families	78
Action 2.3A: National approach to early childhood education and care	78
Action 2.3B: Support the development of quality assurance processes for registered community based child and family services; and out-of-home care services	78

Action 2.3C: Enhance national consistency in child and family health services	80
Action 2.3D: National Perinatal Depression Plan	81
Action 2.3E: Funding for disadvantaged schools with focus on improving student wellbeing	81
Strategy 2.4: Enhance services and supports for children and families to target the most vulnerable and protect children 'at-risk'	81
Action 2.4A: Refocus Commonwealth Family Support Program to target vulnerable families and children at-risk	81
Action 2.4B: Expand and/or target state and territory family support programs for vulnerable families and children at-risk	81
Action 2.4C: Evaluate income management trials in WA, NT and Cape York	84
Action 2.4D: Evaluation of family law reforms designed to strengthen family relationships	84
Action 2.4E: Expand access to mental health programs for children	84
Strategy 2.5: Provide priority access to services for children who are at serious risk of abuse and neglect	84
Action 2.5A: Enhance access to child care services for children at serious risk of harm	84
Action 2.5B: Develop alternative pathways for children who are at serious risk and those at lower risk	84
Supporting Outcome 3: Risk factors for child abuse and neglect are addressed	85
Strategy 3.1: Enhance alcohol and substance abuse initiatives to provide additional support to families	85
Action 3.1A: Implement the National Binge Drinking Strategy	85
Action 3.1B: Redesign the Strengthening Families Program	86
Strategy 3.2: Enhance programs which reduce family violence	86
Action 3.2A: Progress priority actions in areas of Commonwealth responsibility in Time for Action: The National Plan for Australia to reduce Violence against Women and their Children, 2009–2021	86
Action 3.2B: Expand models of integrated support to enable women and children experiencing domestic and family violence to remain at home safely	86
Strategy 3.3: Increase services and support for people with mental illness or disability	87
Action 3.3A: Develop a National Suicide Prevention Strategy	87
Action 3.3B: Further roll out the Personal Helpers and Mentors Program with a focus on disadvantaged communities and vulnerable groups	87
Action 3.3C: Enhance support for children or parents with disabilities	88
Strategy 3.4: Expand housing and homelessness services for families and children at risk	89
Action 3.4A: Increase availability of affordable and social housing	89
Action 3.4B: Targeted support to assist children and families who are homeless	90

Strategy 3.5: Increase capacity and capability of: adult focused services to identify and respond to the needs of children at-risk; child-focused services to identify and respond to the needs of vulnerable families; the broader system to identify children at-risk	90
Action 3.5A: Establish professional development resources on the risk factors for and impacts of child abuse and neglect to be provided to child and adult focussed services and professions	90
Action 3.5B: Convene an expert taskforce to develop options for shared tools and approaches for assessment and referral across services and professional groups to better identify children at risk of harm: the Common Approach to Assessment, Referral and Support Taskforce	90
Action 3.5C: Support the development and distribution of a resources guide to schools and early childhood services about responding to the needs of traumatised children	90
Action 3.5D: Build on and extend initiatives to support the workforce, such as WA’s Foster Care Team Development initiatives	90
Supporting Outcome 4: Children who have been abused or neglected receive the support and care they need for their safety and wellbeing	91
Strategy 4.1: Enhance access to appropriate support services for recovery where abuse or neglect has occurred	91
Action 4.1A: Target the Personal Helpers and Mentors Program where appropriate for people who have experienced abuse or neglect	91
Action 4.1B: Support community-based recovery programs for people who have experienced abuse or neglect, such as the Adults Surviving Child Abuse (ASCA) therapy programs for survivors of childhood abuse	91
Strategy 4.2: Support grandparent, foster and kinship carers to provide safe and stable care	91
Action 4.2A: Provide specialist supported playgroups for grandparent and kinship carers to enhance peer support and provide developmental opportunities	91
Action 4.2B: Continue to explore options through CDSMAC working group for improving financial and non-financial support to grandparent, kinship and foster carers	91
Action 4.2C: Increase the focus of support and services available for grandparent and kinship carers through Indigenous Child and Family Centres	92
Action 4.2D: Support programs for grandparent, kinship and foster carers	93
Action 4.2E: Continue to explore options through the Australian Health Ministers’ Conference in relation to the health care needs of children entering and in out-of-home care	94
Action 4.2F: Enhanced support for grandparent and kinship carers as a specified target group under the Communities for Children program	95
Strategy 4.3: Improve support for young people leaving care	95
Action 4.3A: Increase support through NGOs for young people leaving care to establish their independence	95

Action 4.3B: Continue and improve state and territory initiatives targeting young people as they leave care	96
Action 4.3C: Implement policy of ‘no exits into homelessness’ from statutory care	97
Strategy 4.4: Support enhanced national consistency and continuous improvement in child protection services	98
Action 4.4A: Develop and introduce ambitious National Standards for Out-of-home Care	98
Action 4.4B: Support child protection services to maintain continuous improvement	98
Action 4.4C: Support the Australian New Zealand Child Death Review Committee to develop more consistent data to help better understand the circumstances of child deaths and how these could be prevented	100
Action 4.4D: Improve our understanding of children in the child protection and care system (confidential unit record data, data definitions)	101
Action 4.4E: Support a National Research Agenda for Child Protection	101
Supporting outcome 5: Indigenous children are supported and safe in their families and communities	101
Strategy 5.1: Expand access to Indigenous and mainstream services for families and children	101
Action 5.1A: Expand Indigenous Parenting Support Services to additional sites	101
Action 5.1B: Link 35 Indigenous Child and Family Centres with the range of family and community programs for at-risk children. Improve access to child and maternal health services for Indigenous families	101
Action 5.1C: Support SNAICC to develop resources and materials to support and promote child and family services within Indigenous communities	102
Action 5.1D: Continue to focus new activities in the Indigenous Family Violence Partnership Program and Indigenous Family Violence Regional Activities Program on child protection issues	102
Strategy 5.2: Promote the development of safe and strong Indigenous communities	102
Action 5.2A: Ongoing support and strengthening of the Northern Territory Emergency Response	102
Action 5.2B: Continued support for Indigenous community building activities	102
Strategy 5.3: Ensure that Indigenous children receive culturally appropriate protection services and care	104
Action 5.3A: Develop and expand the Indigenous child protection and welfare workforce	104
Action 5.3B: Improve child protection service delivery for Indigenous families and children	105

Action 5.3C: Strengthen the application of, and compliance with, the Aboriginal and Torres Strait Islander Child Placement Principle	108
Supporting outcome 6: Child sexual abuse and exploitation is prevented and survivors receive adequate support	109
Strategy 6.1: Raise awareness of child sexual exploitation and abuse, including online exploitation	109
Action 6.1A: Implement cyber-safety initiatives	109
Action 6.1B: Increase support for community-based strategies to raise awareness in children, families and the community about child sexual abuse	110
Action 6.1C: Continue to introduce strategies to prevent sexual exploitation	110
Strategy 6.2: Enhance prevention strategies for child sexual abuse	111
Action 6.2A: Implement a national framework for inter-jurisdictional exchange of criminal history for people working with children	111
Action 6.2B: Investigate best practice therapeutic programs for children displaying sexually abusive behaviours	112
Strategy 6.3: Strengthen law enforcement and judicial processes in response to child sexual abuse and exploitation	113
Action 6.3A: Extend work in the detection, investigation and prosecution of online sexual exploitation	113
Strategy 6.4: Ensure survivors of sexual abuse have access to effective treatment and appropriate support	113
Action 6.4A: Support workshops for adult survivors of sexual abuse, parents and spouses	113
Action 6.4B: Review service delivery options and approaches for survivors to align with best practice such as WA's expanded network of Child Sexual Abuse Therapeutic Services	114
Other initiatives to progress the National Framework	114
<b>Appendix Two: Report on National Standards for out-of-home care</b>	<b>117</b>
National Standards for out-of-home care	117
2010–11 Reporting	119
Standard 1: Children and young people will be provided with stability and security during their time in care	120
Measure 1.1: The proportion of children and young people exiting out-of-home care during the year who had one or two placements, by length of time in continuous care preceding exit	120
Measure 1.2: The number and rate of children in out-of-home care who were the subject of child protection substantiation and the person believed responsible was living in the household providing out-of-home care	121

Standard 3: Aboriginal and Torres Strait Islander communities participate in decisions concerning the care and placement of their children and young people	122
Measure 3.1 Placement of Aboriginal and Torres Strait Islander children	122
Standard 9: Children and young people are supported to safely and appropriately maintain connection with family, be they birth parents, siblings or other family members	122
Measure 9.1: The proportion of children and young people in out-of-home care who are placed with relatives and kin	122
Standard 12: Carers are assessed and receive relevant ongoing training, development and support, in order to provide quality care	123
Measure 12.1 (part a): The number of foster carer households with a placement at 30 June	123
<i>(Number of foster carer households with a placement by number of foster children placed per household)</i>	
Measure 12.1 (part b): The number of foster carer households with a placement during the year	123

### Appendix Three: Status of National Framework indicators of change by supporting outcome 124

### References 127

#### List of Tables

Table 1: Infant Mortality	31
Table 2: Infant Mortality <sup>(a)(b)</sup> by Indigenous Status	32
Table 3: Mean number of decayed, missing or filled teeth among primary school children	33
Table 4: Proportion of year 5 students who achieved at or above the national minimum standard, 2008 and 2009 (per cent) <sup>(a)(b)</sup>	34
Table 5: Live births to teenage mothers aged 15–19 years	35
Table 6: Overweight and obese children aged 5–14 years, 2007–08, Australia	36
Table 7: Family Economic Situation	37
Table 8: Death rates from injuries, Australia, 2004–06 and 2005–07	38
Table 9: Proportion of children fully immunised by age, Australia, June 2011	38
Table 10: Hospital separations <sup>(a)</sup> for community injuries, children 0–2	39
Table 11: Hospital separations <sup>(a)</sup> for community assault, children 0–2	39
Table 12: Children aged 0–17 years subject to substantiation of a notification <sup>(a)</sup> , by Indigenous status and age <sup>(b)</sup>	40
Table 13: Children 0–17 years in out-of-home care, by Indigenous Status	42
Table 14: Hospital separations for community injury and poisoning <sup>(a)</sup> by Indigenous status of children aged 0–4 years, 2005–06 to 2007–08	45
Table 15: Proportion of women who gave birth by number of antenatal visits	46

Table 16: Live birth babies, by birth weight and Indigenous status, 2009	47
Table 17: Children subject of a child protection notification	48
Table 18: Number of children commencing family support services, by age	49
Table 19: AEDI results, children developmentally vulnerable, by Indigenous status	49
Table 20: Mental health problems among children aged 4–14 years, 1998	50
Table 21: Rate per 1,000 children accessing assistance through homelessness services (accompanied and unaccompanied)	51
Table 22: Proportion of parents with children aged 0–14 years who used an illicit substance, or a licit substance for non-medical purposes	52
Table 23: Number of children aged 0–14 years in jobless families	53
Table 24: Children in out-of-home care	54
Table 25: Households commencing and exiting foster care	55
Table 26: Number of finalised investigations, by time taken to complete	55
Table 27: Proportion of children on guardianship/custody orders achieving the national reading and numeracy benchmarks, by Indigenous status, 2003–2006	57
Table 28: Rate per 1,000 Indigenous children with substantiated cases compared to other children	58
Table 29: Rate per 1,000 Indigenous children in out-of-home care compared to other children	59
Table 30: Aboriginal and Torres Strait Islander children in out-of-home care, by Indigenous status and relationship of carer, Australia, 30 June	59
Table 31: Children aged 0–17 years who were the subject of a substantiation <sup>(a)</sup> of a notification received during the year, by type of abuse or neglect and Indigenous status, Australia	60

## List of Appendix Tables

Appendix Table 1: National Standards for out-of-home care and their measures	118
Appendix Table 2: Proportion of children and young people exiting out-of-home care by length of time in out-of-home care in 2010-11	120
Appendix Table 3: Proportion of children exiting out-of-home care by Indigenous status <sup>(a)</sup> and number of placements	121
Appendix Table 4: Number and rate per 1,000 of children in out-of-home care abused by a person living in the household providing the care	121
Appendix Table 5: The proportion of Indigenous children and young people in out-of-home care placed with the child's extended family, with the child's Indigenous community, or with other Indigenous people, by carer type, 2010-11	122
Appendix Table 6: Proportion of children and young people in out-of-home care who are placed with relatives and kin, 2011	122

Appendix Table 7: Number of foster carer households with a placement at 30 June 2011	123
Appendix Table 8: Number of Households with a placement during the year 2010-11	123
Appendix Table 9: Status of indicators of change by supporting outcome	124

## List of Figures

Figure 1: National Framework Partnership Agreements	5
Figure 2: Short and long-term measures of the National Framework	6
Figure 3: Proportion of Year 5 students achieving the national minimum standards, 2008 and 2009	35
Figure 4: Teenage births	36
Figure 5: Children subject to substantiation of a notification, Indigenous status, children 0–17 years, rate per 1,000 children	41
Figure 6: Children in out-of-home care, by Indigenous status	42
Figure 7: Per cent of live births with a low birth weight	47
Figure 8: Trends in children aged 0–17 years in out-of-home care 30 June 2005 to 30 June 2011 (per 1,000)	54
Figure 9: Proportion of finalised investigations, by time taken	56

# Executive summary

Every child has the right to a safe, healthy and happy childhood. Sadly, there are still many children in Australia who are not safe. This was the impetus behind the decision of the Commonwealth, state and territory governments and the Coalition of Organisations Committed to the Safety and Wellbeing of Australia's Children, to work together to improve children's lives through the *Protecting Children is Everyone's Business: National Framework for Protecting Australia's Children 2009–2020* (the National Framework).

This National Framework represents the first long-term national approach to protecting Australia's children. The commitment to the National Framework included regular reporting, and this is the second annual report tracking progress and highlighting achievements and ongoing issues. Two years into the implementation of the National Framework, it is too early to expect that we will see any major impact on the ground. Indeed, some indicators are showing that the problems children at risk face are still compounding, and there is a lot more work to be done. Aboriginal and Torres Strait Islander children continue to be over-represented across all indicators, as do children from lower socioeconomic backgrounds and remote and regional areas. The number of children on care and protection orders across Australia is also increasing.

We should not be disheartened. Child abuse and neglect are complex issues. Dealing with them effectively requires addressing the root causes, which often involve generational cycles of adversity and trauma and social problems such as joblessness, violence and social and family dysfunction. Changing these cycles takes time.

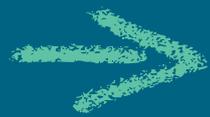
The National Framework is a long-term strategy, and much work has been done and is planned. Significant progress has been made on collecting and tracking data relating to the 12 indicators set out in the first three-year action plan. We have also gained a stronger national picture of the state of child wellbeing in Australia. This understanding has reinforced those areas which require continued work and highlighted trends which will guide future actions.

The past year has been extremely important in building the foundation for change. There are encouraging signs that progress is being made. Data from 2010–11 indicate a 13 per cent fall in the number of children subject to notifications of possible child abuse or neglect compared with the previous year. The number of children admitted into out-of-home care per year has also fallen.

Strong efforts are needed to ensure all families and children have access to universal services. We must also improve targeted services for those with particular needs. Early intervention to strengthen and support families to prevent crises continues to be a strong focus under the National Framework, so that tertiary child protection services remain a last resort. This will continue to be a key focus as work under the National Framework progresses. We will also seek new opportunities to deliver more integrated and consistent responses to children, young people and their families across Australia through government, non-government and community initiatives.

The partnership between governments and with non-government organisations offers the best chance of ensuring that evidence-based programs and projects, nationally coordinated and evaluated, make a positive difference to the lives of Australia's children.





# Chapter one

What is the National Framework?



# Chapter one:

## What is the National Framework?

### Background – the National Framework for Protecting Australia’s Children

The *Protecting Children is Everyone’s Business: National Framework for Protecting Australia’s Children 2009–2020* (the National Framework) is the first long-term national approach to ensuring the safety and wellbeing of Australia’s children.

COAG agreed to the National Framework on 30 April 2009. Through a series of three-year action plans, the National Framework identifies high-level and supporting outcomes, strategies to achieve them, actions to be undertaken and indicators of change that can monitor its success.

The Commonwealth Government led the development of the National Framework, working closely with state and territory governments and in consultation with the non-government sector, especially the Coalition of Organisations Committed to the Safety and Wellbeing of Australia’s Children (the Coalition).

The National Framework is an ambitious, long-term agenda for protecting Australia’s children. It demonstrates a commitment from government and non-government organisations to work in partnership to achieve a common goal.

### Structure of the National Framework for Protecting Australia’s Children

The National Framework works on several levels to achieve the high-level outcome ‘Australia’s children and young people are safe and well’. These components provide a structured approach to the Framework, and the key components are summarised below.

**High level outcome**—the National Framework aims to achieve a single high-level outcome, ‘Australia’s children and young people are safe and well’.

**Six supporting outcomes**—the high-level outcome will be achieved through supporting outcomes which focus on specific areas of need under the Framework.

**Strategies**—strategies designed to meet and match the supporting outcomes and which are reflected in three-year action plans.

**Three-year action plans**—contain actions which relate to each strategy. Each three-year action plan reflects a series of priority areas which emerge throughout the life of the National Framework.

**Measurement**—progress made under the National Framework is measured by assessing key indicators of change against each supporting outcome and the overarching outcome.

**Reporting**—success of actions under the first three-year action plan is reported annually to COAG.

**Evaluation**—an evaluation of the National Framework will occur every three years, coinciding with development of the next three-year action plan.

## Working together

Partners in the National Framework are continuing to work together to improve the safety and wellbeing of Australia’s children and young people. Under the partnership arrangement described in the first three-year action plan (2009–12), different groups serve different purposes. Some perform a high-level oversight role in tracking the progress of the National Framework and will have the capacity to change its direction if necessary; others will be directly involved in the day-to-day management of certain actions; and others still will focus on engaging with external groups.

Since the implementation of the National Framework in 2009, there have been updates to the partnership arrangements. These are reflected in Figure 1 below.

Figure 1: National Framework Partnership Agreements



\*previously CDSMC

## Further information on the National Framework

Further information on the National Framework for Protecting Australia’s Children can be found in the report series, Protecting Children is Everyone’s Business, at [www.fahcsia.gov.au](http://www.fahcsia.gov.au). The series includes:

- National Framework for Protecting Australia’s Children 2009–2020.
- Implementing the first three-year action plan, 2009–2012.
- Annual Report to the Council of Australian Governments 2009–10.

## Reporting on progress

The National Framework is designed to provide the foundation for national reform, and this will take time to achieve. Short and long-term progress needs to be communicated clearly and regularly to stakeholders in the community, to government and, specifically, to children and young people. This will ensure we make the best use of work already being done by state and territory governments and the Commonwealth to improve the evidence base and focus it on the safety and wellbeing of Australia’s children.

The short and long-term measures of success under the National Framework are outlined below.

Figure 2: Short and long-term measures of the National Framework



### Structure of the report

The structure of this annual report reflects the National Framework. The content of each chapter is as follows:

- Chapter 1: introduction and explanation of the National Framework.
- Chapter 2: describes progress during 2010–11 of selected activities under the National Framework. The chapter also illustrates how progress has impacted on the people or agencies activities are designed to help.
- Chapter 3: measures progress of the National Framework outcome through analysis of the high-level indicators.
- Chapter 4: measures progress of the supporting outcomes through analysis of the indicators of change.
- Chapter 5: summarises the status of the National Framework and expectations for the next 12 months.
- Appendixes



## Chapter two

National Framework in Action—  
Highlights from 2010–11

Improving the safety and  
wellbeing of Australia's children



## Chapter two: National Framework in Action—Highlights from 2010–2011

### Are we making a difference?

Although it is very early in the life of the National Framework, there are already some encouraging signs. As actions continue under the National Framework, we will have more data and be able to make better comparisons. There are some early trends that are detailed in Chapters 3 and 4. Chapter 2 focuses on some of the achievements of 2010–11, using program examples and some personal stories that highlight the difference collaborative approaches can make in building capacity and strength in our families and communities across Australia and in improving people's lives.

The National Framework has brought together the Australian Government, the state and territory governments and a large grouping of non-government organisations, the Coalition of Organisations Committed to the Safety and Wellbeing of Australia's Children (the Coalition). These three sectors have traditionally had separate responsibilities in child protection. The significance of the National Framework is that it united them in a continuous and cooperative partnership. They have worked together during 2010–11 to implement the National Framework and to deliver further improvements to the safety and wellbeing of Australia's children and young people.

The National Framework is a long-term, collaborative effort to put the safety, health and wellbeing of children and families at the centre of what we do. It represents an integrated, national approach to protecting children.

The first three-year action plan for the National Framework includes significant new actions to protect children. It also recognises the existing programs and reforms being delivered by governments across Australia in protecting children and supporting families. Its scope is broad, as it includes actions with a focus on prevention and early intervention for vulnerable children and families and providing assistance early enough to stop abuse and neglect occurring, actions designed to better target services and programs for families at risk and actions across the spectrum to involve other professionals, families and the wider community to protect children.

In 2010–11, significant progress has been achieved against each of the five broad groupings of actions within the first three-year action plan:

- › National priorities covering areas of need
- › Major reforms that relate to broader social reform agenda
- › Ongoing initiatives for children and families that are already underway
- › Community initiatives within community organisations, independent of government
- › New actions

The key highlights from 2010–11 outlined in this chapter are grouped under the five categories listed above. This is not an exhaustive list of the achievements over this period, but a selection of program examples and personal stories that illustrate the value of particular programs, approaches or collaborations in improving the lives of vulnerable children and their families.

## National Priorities—covering areas of need

There are twelve National Priorities for the first three years of the National Framework, reflecting the major aims for the Commonwealth, state and territory governments and the non-government sector.

While this chapter provides information about each of the national priorities for the first three years of the National Framework, it will focus specifically on seven of them, using them as examples of the work being done during 2010-11 and the impacts on families and communities:

- Joining up service delivery
- Closing the gap
- Seeing early warning signs and taking early action
- Developing national standards for out-of-home care
- Building capacity and expertise
- Transitioning to independence
- Sharing information

Significant achievements against all national priorities in the first three years will be reported on in the next report in this series, as we move into the next phase of implementation of the National Framework and the second three-year action plan.

This chapter will also examine a sample of major reforms, ongoing initiatives, community initiatives and new actions.

### Joining up service delivery

This national priority will implement a joined-up approach to service design, planning and delivery, targeted to the hard-to-reach, most disadvantaged families and children, by leveraging services and support from Commonwealth, state and territory governments (progressing Strategy 2.1).

#### *Communities for Children*

##### **Communities for Children in the East Kimberley**

The facilitating partner for Communities for Children in the East Kimberley is Save the Children. An Early Years Network (EYN) brings services together to strengthen the capacity of all of them. The EYN provides professional development and training opportunities for people across the East Kimberley, in areas such as early childhood and nutrition and Foetal Alcohol Spectrum Disorder.

Following flooding in Warmun in 2011, Save the Children worked with the Commonwealth Department of Families, Housing, Community Services and Indigenous Affairs (Fahcsia), the local shire and the WA Department of Child Protection to support children and families from Warmun who were temporarily relocated to Kununurra. When the community returned, work stepped up to rebuild services at the Warmun Early Learning Centre and to help children and families return to their normal routines.

Wyndham Early Learning Activities Centre (WELA) has been supported to grow and now attracts and manages funding from the WA Government and corporate sources. In 2011, WELA worked closely with community leaders and Elders to turn the Mums and Bubs program in and around Kununurra into a Mobile Playscheme, with capacity for outreach and delivery in community settings, and to integrate it successfully with language centres and other community supports.

The Communities for Children model has a proven record in engaging hard-to-reach families. The Facilitating Partners, funded by the Commonwealth Government, develop a whole-of-community approach, working with disadvantaged communities to enhance early childhood development. Through local service provider committees, the community formulates and implements strategic plans. Funded local organisations provide services such as parenting support, peer support for children, families or carers, and home visiting services.

### FamilyZone Ingle Farm Hub South Australia

Naomi (not her real name) is the mother of a young toddler and a new baby and had recently separated from her children's father. After finding housing, Naomi was still having problems with physical, emotional and financial issues. She was referred to FamilyZone Home Visiting Service, which provided support on several fronts: a family support worker who visited Naomi on a regular basis; a GP who helped with Naomi's depression; and the opportunity to participate in the Being with Baby group at FamilyZone.

Participation in the Being with Baby group was the catalyst for major change for Naomi. She developed friendships, learned new skills and grew in confidence as a single parent. She then moved into a supported playgroup, Stepping Stones, which helped her grow in skills and confidence as a parent. Naomi continued to receive support with her postnatal depression and, through the Being with Baby group, was introduced to Busy Fingers craft group.

Several terms on —after many one-on-one support sessions, home visits, play support in Stepping Stones and fun in Busy Fingers—Naomi wanted to give back to FamilyZone for the support she had received. Last term, Naomi facilitated a cake decorating course for other women attending FamilyZone. Using her new talents and creativity, discovered through the Busy Fingers group, Naomi has taught other women how to make and decorate affordable, low-cost birthday cakes for their children. This has been a great confidence boost for all concerned.

In addition to Communities for Children, Communities for Children **Plus** services build upon and strengthen existing Communities for Children services in communities of high disadvantage. The eight Communities for Children **Plus** sites were identified by the Commonwealth and state and territory governments as communities where targeted and integrated service delivery, including mental health, drug and alcohol, family violence and housing services, were required to help prevent child abuse and neglect. During 2010–11, six sites (Ipswich, Kempsey, Cardinia, Launceston, Campbelltown and East Arnhem) were well established, and two sites (Playford and Midland) were being implemented.

As at 2010–11, two new Communities for Children **Plus** services had been opened, one in the Northern Territory and another in Western Australia, bringing the total number of Communities for Children services to 49.

In Alice Springs, Anglicare NT became the Facilitating Partner of the fourth Communities for Children service in the Northern Territory. The Alice Springs service is playing an important role in the Alice Springs Transformation Plan, through which governments, the community sector and Alice Springs residents are working together to build a better future for all residents and visitors to Alice Springs, especially for residents of town camps.

In Midland, WA, the Swan Alliance—made up of Mission Australia, Anglicare WA and the parenting service Ngala—was funded to deliver services including playgroups, after-school and school holiday activities, and events to encourage social interaction between parents from culturally and linguistically diverse backgrounds. This brings the total number of Communities for Children sites in Western Australia to seven.

### Seeing early warning signs and taking early action

This national priority aims to improve the identification of early indicators of the needs of at-risk children and their families through a common approach to assessment, referral and support in universal and secondary prevention services, with appropriate information sharing (progressing Strategy 3.5).

#### *Common Approach to Assessment, Referral and Support (CAARS)*

CAARS is being developed for use in universal services such as medical centres, schools and day care centres, which are most likely to encounter the first early warning signs that might escalate to child abuse and neglect. These services are not always equipped to respond effectively. CAARS guides them in early assessment, referral and support, helping them deal with the problem early and head off a crisis

The CAARS Taskforce, a collaboration of the Commonwealth, state and territory governments and the non-government sector, was established in 2009. The Taskforce is working with the Australian Research Alliance for Children and Youth (ARACY), who are delivering the CAARS project.

Working together throughout 2010–11, ARACY and the Taskforce have assembled the CAARS Resource Kit, supported by professionals, non-government organisations and Commonwealth and state and territory governments. The Resource Kit, which includes the CAARS model presented as a ‘wheel’, will be used in universal services and includes:

- Professional judgement reference points for preparation for a conversation with families
- Conversation prompts for use with parents and with children
- A self-administered questionnaire
- A desk pad for service providers which includes the ‘wheel’—for use in visually representing needs and strengths in conversations with families
- A quick check card as a reminder prompt about the resources and the process
- A guidance manual for use in training.

Comprehensive planning for a trial of the Resource Kit in four sites was also undertaken during 2010–11. The Commonwealth provided \$1.1 million in funding in December 2010, and, in June 2011, the four trial sites for the CAARS project were announced. These are:

- Elizabeth in South Australia
- Gippsland in Victoria
- Lismore in New South Wales
- Kwinana in Western Australia

The trial will take place from July 2011 to June 2012 alongside an independent evaluation by the Social Policy Research Centre at the University of New South Wales.

#### **CAARS in practice**

Sue’s (not her real name) parents were separated, and there had been increasing tension and conflict. Sue was 12 and was living with her mother and her mother’s new partner, but she wanted to live with her father. Her mother had arranged an appointment with the counsellor because she was concerned about Sue’s behaviour.

The counsellor was able to use the ‘wheel’ that is a central component of the Common Approach to work with Sue and identify her needs. The ‘wheel’ is made up of six wellbeing domains (physical health, mental health and emotional wellbeing, safety, material wellbeing, learning and development, and relationships) that present a holistic view of a child’s life. It provides a structure for universal service providers in thinking about areas inside and outside the practitioner’s immediate area(s) of professional expertise.

Using the ‘wheel’ as a tool to guide the conversation, the counsellor helped Sue to recognise that she was doing well in the majority of areas. However, when the conversation turned to the ‘relationships’ domain of the wheel, Sue raised the concern that she felt divided between her parents, and that her wishes regarding living arrangements weren’t being respected.

Sue had not had the courage to talk to either of her parents about her concerns. She realised that she had unconsciously been ‘acting out’ to encourage her mother to send her to live with her father. Sue asked if she would be able to take a copy of the ‘wheel’ home to talk through with her parents, because she felt it would help her to raise her concerns.

Sue and her family are the ultimate decision-makers. The Common Approach puts children and families in the driving seat and lets them identify their own needs and what kind of follow-up action (if any) they would like to pursue.

By helping practitioners to engage with families in a friendly and low-pressure process, the Common Approach contributes to building and maintaining trust between the child, family and practitioner, and thus to preventing child abuse and neglect.



## Developing national standards for out-of-home care

The development of national standards for out-of-home care will aim to improve the outcomes and experiences of children and young people who are unable to live with their families (progressing Strategy 4.4).

### National standards in practice—Josh’s experience

Josh (not his real name) spent time in foster care in South Australia but is now independent. During his time in care, Josh was given support to take the lead in making decisions about his future, and this continued during his transition to independence.

Josh had a transition from care plan and was provided with practical help through a number of government agencies to prepare him for the future. This included support to access direct lease accommodation through Housing SA and having his lease extended to enable him to maintain a stable placement while completing his studies. Josh was also supported to enrol at TAFE and to have his fees waived under the South Australian Rapid Response Initiative. Funding through the Transition to Independent Living Allowance (TILA) from the Australian Government provided Josh with a computer.

Josh has been supported to maintain a relationship with his foster carer—an important link to his community, given that he has limited family support.

Josh has continued to be supported by Families SA Post Care Services. Josh is currently completing his studies and volunteering at a local police station and hopes to become a police officer. Despite some setbacks, Josh has made a successful transition to adulthood.

The 13 National Standards for out-of-home care were agreed by Commonwealth, state and territory Ministers in December 2010—an important early action under the Framework. They are designed to deliver consistency and to improve the quality of care provided to children and young people who cannot live at home. Josh’s case illustrates the use of the standards in practice. Josh has a transition plan, consistent with Standard 13, and he has an ongoing supportive relationship with his carer, in keeping with Standard 11.

The 13 National Standards address factors that directly influence better outcomes for those living in out-of-home care. The measurement of, and reporting against, agreed outcomes is a major feature of the long-term refinement and improvement of the National Standards.

The Standards represent a very significant step forward for children and young people in out-of-home care, developed through extensive consultation and a strong partnership between governments and non-government organisations.

In April 2011, Ministers also agreed on the way in which National Standards would be measured and reported against. The 22 measures and the reporting timeframe are essential for national consistency in reporting on outcomes for children and young people in out-of-home care.

The National Standards were rolled out from 1 July 2011, with five measures being reported initially; the remaining measures are under development.

Ministers also agreed, in December 2010, that the Commonwealth would fund a national survey of children and young people in out-of-home care, for reporting in 2013. A scoping study for this survey is being undertaken. Capturing the views of children and young people in out-of-home care will assist governments and service providers to make informed decisions about policy. Further information about the reporting requirements for the National Standards for out-of-home care is included in Appendix 2.

### Transitioning to Independence

This national priority aims to increase the support through non-government organisations for young people leaving care, to establish better independence, and for state and territory government initiatives to offer better support to young people leaving care (progressing Strategy 4.3).

In Victoria, MacKillop Family Services operates The Cluster Model, an out-of-home care housing pilot for young people. On a single site are four units, where 16–17 year olds can move towards independence. With lead tenant support, outreach support, transition planning and living skills development, the young people move from live-in support to less intensive options in the housing complex.

The cluster service is resourced through a combination of National Partnership Agreement on Homelessness and Victorian Department of Human Services funding. The model provides an excellent example of cross-government and new cross-sectoral collaboration and service integration to support improved pathways for young people transitioning to independence.

In December 2010, Community and Disability Services Ministers publicly released a discussion paper, 'Transitioning from out of home care to independence', which summarises key evidence about what support young people leaving out-of-home care need to reach their potential for social and economic participation. Ministers also agreed to develop a nationally consistent approach to planning for leaving care.

Commonwealth, state and territory governments and non-government organisations considered the views of young people with a care experience about what is needed to improve their transition from out-of-home care to independence. The core elements identified during this process include involving the young person, carers and other appropriate people in the planning processes in all key areas to be addressed, such as housing, health, education and employment, identity and culture, social relationships, life skills, financial security and legal matters.

The development of a nationally consistent approach to leaving care agreed by Ministers in October 2011, will deliver equity in the planning process for young people, regardless of their location.

### Transitioning from out-of-home care – Allan’s experience

When Allan (not his real name) was 10 and 11 years old, he remembers being stressed and not knowing what to do. He was very worried, and all he wanted was to have a family. Allan was restless and lashed out at people when they wouldn’t do what he wanted or give him what he wanted. He had major trust issues. A lot of the time, Allan would push workers, bite them and throw things at them. By the time he was 14 or 15, he was thinking of suicide and didn’t listen to anyone. Allan would sneak out at night and steal, ‘chrome’ and do ‘stupid stuff’. He misbehaved to a point that was not tolerable, and his behaviour was continuing to get worse. Allan recalls workers being scared of him and not wanting to be around him. But then, something shifted and Allan wanted to change because he was sick of how his life was going. Workers started to speak to him about the lead tenant service run by MacKillop Family Services in Victoria, but he did not think he was ready, and neither did some of his workers. Allan started to rebel against the idea. At 16, he went through the desire to end everything—he wanted to get charged for offences that he had previously had wiped. These charges included assault, robbery and property damage, for which Allan was on a suspended sentence. At this time, Allan was attending community school but did not like it.

Allan had a long-standing relationship with one of his support workers, Igor. With Igor’s caring support, Allan was able to turn things around and transition into the lead tenant service. Igor supported Allan throughout his placement. Allan was then 17 years old and felt that he coped with the change. He learned to look after himself, to clean and to budget. He felt that he was more respected as a person and had more control over life. One thing that he always wanted was to attend mainstream school.

Allan now attends tertiary college and is completing an Information Technology diploma and doing well. Allan’s 18th birthday was celebrated by a dinner with 24 friends. Most were staff from the Department of Human Services, MacKillop, ex-foster carers and staff who had moved on but who wanted to celebrate this tremendous occasion with him. Allan and his girlfriend have moved into student accommodation near college and the agency.

### Closing the Gap

Closing the Gap supports Indigenous community-building activities in areas such as culture and connectedness, strengthening families and communities in targeted areas that put children at risk, and speaking up about abuse (progressing Strategy 5.1).

#### *A national plan to support Indigenous children*

A national plan to support Indigenous children throughout the life of the National Framework will be commenced in early 2012. The plan will include an ongoing approach under the National Framework to reporting on outcomes for Indigenous children in each Annual Report, to providing a unique Indigenous priority action in each three-year action plan and to working in all national priority areas to identify a specific focus relating to Indigenous children.

The plan will harness the efforts of current and future whole-of-government activities aimed at improving outcomes for vulnerable Indigenous children under Closing the Gap National Agreements, Partnerships and strategies, including a report on the COAG work to date. The development of a web resource to share knowledge and awareness of best and promising practice to protect the wellbeing of Indigenous children will also be addressed under the national plan.

#### *Indigenous Parenting Support Services (IPSS)*

IPSS are funded through the Commonwealth Government Family Support Program to help Indigenous parents overcome barriers to good family relationships and to provide support through transitions to child care, preschool and primary school. They aim to address social, cultural, personal, historical, financial and health factors that can hamper effective parenting.

The parent-child services are provided by skilled family support workers and early childhood workers and target families with children aged up to 12 years old, with a particular focus on children under the age of two. They reflect a broad concept of parenting/caring that includes extended families and kinship ties. IPSS are integrated into existing services and, where possible and practical, are located in existing Indigenous services and include Indigenous workers.

Minister Macklin announced in 2008 that 51 IPSS sites were to be established over four years in all states and territories across Australia. The implementation of these 51 IPSS was finalised in 2010–11.

#### **Developing culturally appropriate resources**

'Jarjums' is a Murri word for children and was used to develop 'Consider the Jarjums', a digital story for Aboriginal and Torres Strait Islander parents who were involved in high conflict separation. The DVD explores the issues of separation and conflict from the perspective of Indigenous children. Developed by the Bundaberg Family Relationship Centre in response to the lack of culturally appropriate resources, the DVD has had a positive response from Indigenous parents. An Aboriginal father stated that it was good for parents to see the impact on children when there is high conflict following a separation. An Aboriginal mother related to the DVD, as it brought back memories of the high conflict between her parents following their separation and her own determination that the same things would not happen to her children.

The DVD has been purchased by a number of organisations across Australia, including Family Relationship Centres, Queensland Health, Queensland Department of Communities, Centacare, UnitingCare and the NT Legal Aid Commission.

#### **Supporting Indigenous parents**

A young single Aboriginal mother with a four year old child had no transport, was isolated, had no family supports or links with the broader Indigenous community and had also been a victim of domestic violence. She self-referred to the program after hearing good things about the playgroup from other attendees in the community.

When she and her child started attending the group, her self-esteem and confidence in her parenting were minimal. Her son had little knowledge of boundaries and poor peer social skills. Because of his exposure to domestic violence in the home, he continually hit his mother and behaved angrily. The mother was embarrassed with her child's behaviour and acknowledged that they very rarely went out into the community because of it.

Through encouragement from the workers and the other families, the mother was able to follow through with suggested strategies to help her son set appropriate limits and boundaries around his behaviour. She said that, once she realised that the workers and the other mothers weren't going to think she was a bad mother because her son was screaming, hitting and naughty when she said no to him, she felt more comfortable in following through rather than giving in to stop him making noise and disrupting other people. She also developed some supportive friendships with the other mothers in the playgroup and was supported by the Locational Supported Playgroups (LSP) workers and mothers to engage more frequently with the local Aboriginal community.

As time progressed, her son's behaviour improved dramatically, as the workers and other mothers were helping to support his mother in providing predictable, age-appropriate limit setting, boundaries and consequences. The mother and child now have a wonderful, respectful relationship. The mother's self-esteem has soared. Through support from the workers, she was able to get her son into preschool and took steps to request support and assistance from Marymead staff, in applying for entry into the APS Indigenous Traineeship program. She is committed to finding full-time work and strongly believes in the importance of being a positive role model for her son and the Aboriginal community.

## Children and Family Centres

**Growing Healthy Families** is part of the West Belconnen Child and Family Centre and offers family support, advocacy and community development activities. A key factor in the success of this program has been developing strong connections with Aboriginal and Torres Strait Islander families, community, government and non-government organisations.

The Aboriginal and Torres Strait Islander community is encouraged to take a strong leadership role within the program. Almost all projects and programs undertaken within **Growing Healthy Families** have been the result of suggestions from the Aboriginal and Torres Strait Islander community and have been delivered in conjunction with other Australian Capital Territory (ACT) services.

In 2011, a Strong Women's Group was established, to address the concerns of Aboriginal and Torres Strait Islander mothers around issues of literacy, creativity and self-care and physical health. A Kids' Holiday program works to encourage cultural pride and enhance educational opportunities and outcomes.

Establishing an environment of trust, acceptance and respect has been critical, and community members' opinion and participation is a central part of the program's success. Consultation is ongoing, and clients' needs are responded to as they arise. Other community-driven initiatives will be established in 2012.

The West Belconnen Child and Family Centre was the first of 38 Children and Family Centres to be funded by the Commonwealth Government through the National Partnership Agreement on Indigenous Early Childhood Development (IECDNP), in partnership with the ACT, agreed by COAG in 2008. It was officially opened on 2 May 2011.

The Centre offers a range of services to families to support their child's health, learning and development, with a particular focus on Indigenous families and children from birth to eight years of age. There are early learning activities, play groups and parental courses, as well as other child and family services such as maternal and child health and allied health services.

The Centre also works closely with local primary schools, providing a range of outreach services and wellbeing clinics that tackle issues that may impede children's learning. This includes helping children to make good decisions and choices, understand change, loss and grief, and manage anxiety.

In total, the Commonwealth has provided \$292.62 million in funding for the establishment of 38 Children and Family Centres across Australia by June 2014. The Children and Family Centres are targeted at addressing the needs of Indigenous families and their young children and will also provide services to all families in the community. The design and operation of the facilities will differ from Centre to Centre to ensure that services meet local needs.

A building has been constructed at Halls Creek, WA, where operations are expected to commence in early 2012. The Centre in Whittlesea, in Victoria, is also expected to be completed in December 2012, and construction has commenced in seven other sites in Victoria, WA, Qld, SA and Tasmania.

### Building capacity and expertise

This priority has two distinct elements (progressing Strategy 3.5):

1. Support the education, professional development and retention of the child protection welfare workforce, including a focus on enabling the Indigenous workforce to be more actively involved in tertiary child protection.
2. The Commonwealth takes a broader human services definition of 'workforce' to look at ways that professionals in a range of fields can contribute to the protection of children, including cultural sensitivity.

## *Building capacity, building bridges*

Communities for Children Mirrabooka hosted the first national Building Capacity, Building Bridges Collaborative Workshop on 12 May 2011. The workshop, facilitated by the Australian Centre for Child Protection and the Parenting Research Centre, was attended by 32 service providers working within the Mirrabooka community. It promoted effective inter-agency collaboration between children and family services and adult services, as noted by one of the participants '.....it was really great. It allowed us to reflect deeper and broader regarding collaboration'.

The key outcomes from the Workshop were:

- Increased collaboration with adult service providers, including representation on the Communities for Children Committee (CCC)
- Presentation from adult service providers regarding their role in the community at a CCC meeting
- Establishment of a Mental Health Working Party to raise awareness of mental health in the Mirrabooka area and promote professional development opportunities to local service providers
- Proposed Professional Development for 2012 will address the issues raised at the workshop, including working with fathers, Mental Health and cultural awareness (planning has commenced but is in the early stages; proposed for May 2012).

This is a priority project under the National Framework. FaHCSIA has provided over \$2 million to the Australian Centre for Child Protection to administer the project, which is being delivered over a three-year period, to 2013, in 12 selected Communities for Children sites. The 12 sites are:

Alice Springs, NT	Townsville, Qld	Playford, SA
Kempsey, NSW	Ipswich, Qld	Launceston, Tas
Lismore, NSW	Mirrabooka, MA	Hume/Broadmeadows, Vic
Campbelltown, NSW	Midland, WA	Cardinia, Vic

The project aims to:

- Build the capacity of practitioners in adult-focused services to better support their adult clients to meet the immediate needs of children in their care; and
- to help strengthen collaboration between adult-focused and child-focused services to enhance the way in which clients who require multiple supports experience the service system.

In 2011, the Centre began a series of collaboration workshops through the selected Communities for Children sites. The workshops focus on assisting local practitioners to develop collaboration action plans and provide a forum for practitioners to network across a broad range of sectors.

The Australian Centre for Child Protection is also in the process of developing a Child and Family Inclusive Practice curriculum. The Centre is currently consulting with service providers in some of the selected Communities for Children sites to ensure that the curriculum is best tailored to the needs of practitioners.

### **Sharing information**

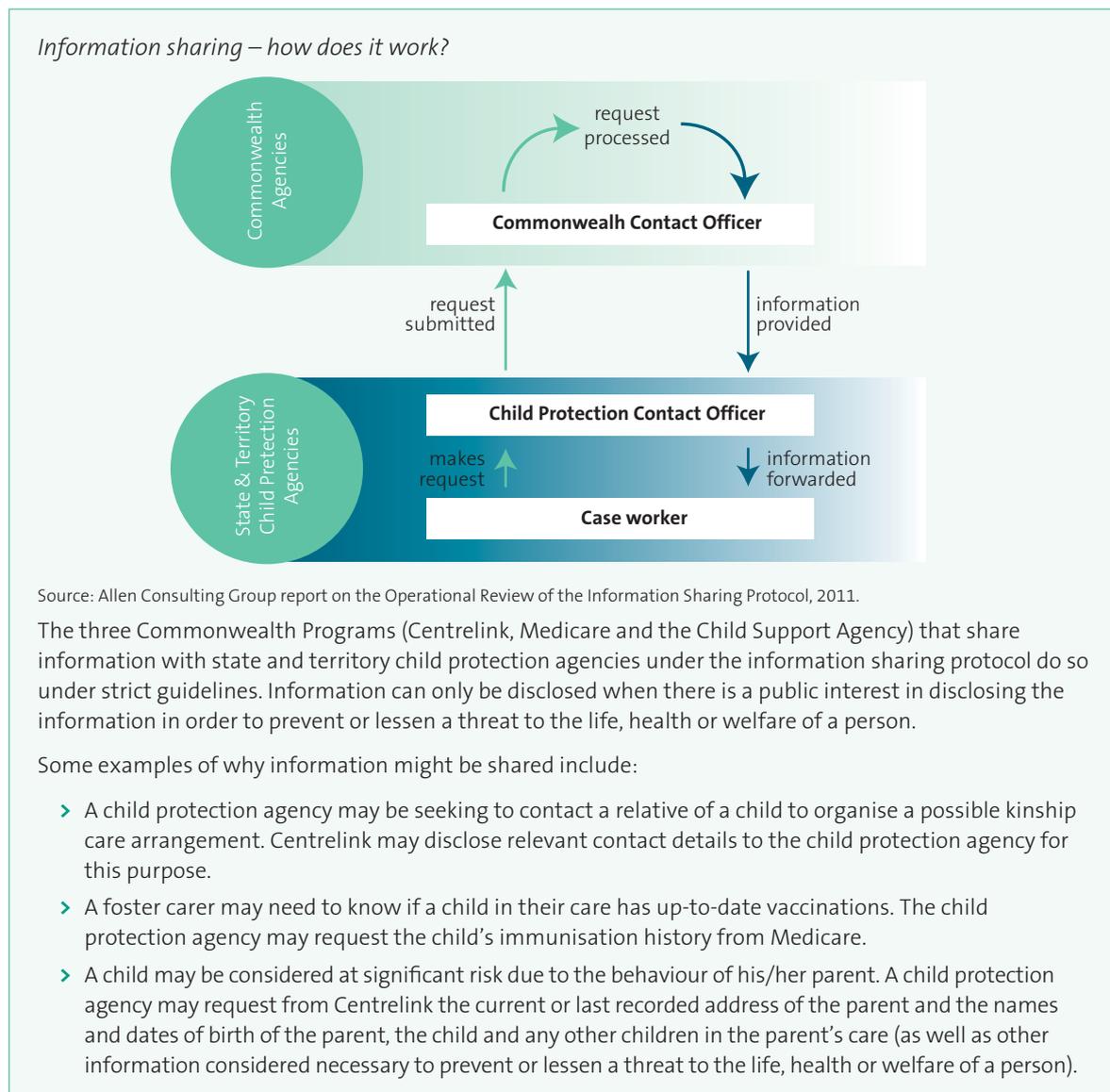
This national priority will expand the information sharing protocol currently operating between Centrelink and child protection agencies to Medicare Australia and the Child Support Agency (progressing Strategy 2.2).

In January 2009, a protocol with state and territory child protection agencies was implemented to facilitate efficient information sharing where there are concerns about a child's welfare (where it is appropriate and lawful). Parties who have signed up to the protocol since implementation include the eight child protection agencies in each state and territory and the Commonwealth Department of Human Services agencies — Centrelink, Medicare and the Child Support Agency.

Under the new information sharing protocols, requests for information have continued to grow throughout 2011, with a total of 24,527 requests received to October 2011.

The protocol was reviewed in 2011, in consultation with staff of the Commonwealth agencies supplying information under the protocol and with state and territory child protection agencies using the protocol. The review indicated overwhelming support for the protocol as a useful tool to help child protection agencies in their work.

Discussions are underway with other Commonwealth agencies with a view to expanding information sharing between the Commonwealth and child protection agencies under the second *National Framework for Protecting Australia's Children* three-year action plan 2012–2015.



### Improving support for carers

This National Priority will continue to explore options for improving financial and non-financial support to grandparent, kinship and foster carers, provide specialist supported playgroups for grandparent and other carers and provide enhanced support for grandparent and kinship carers as a specified target group under the *Communities for Children* program.

In May 2010, the Commonwealth Government commissioned a cross-jurisdictional research project to identify gaps and inequities in the current financial and non-financial supports provided to out-of-home carers, including grandparent carers.

The report, *Financial and non-financial supports for formal and informal out-of-home carers*, was completed in November 2010. It found that there was a significant gap in carers' awareness of existing supports and services.

In response, the Commonwealth Government has developed an online resource to improve out-of-home carers' access to information about the range of supports and services for which they may be eligible. The resource was launched in late 2011. It is hosted on the Family Relationships website and can be accessed by visiting [www.familyrelationships.gov.au/carers](http://www.familyrelationships.gov.au/carers). It includes information on Commonwealth Government payments, supports and services; state and territory supports and services; and non-government services.

### Enhancing the evidence base

The data collection National Priority will involve the review and improvement of data collections relating to child protection, homelessness and juvenile justice to enhance national reporting. This priority aims to increase our knowledge of children's interactions with the child protection system in order to inform future policy and service provision.

The Australian Institute of Health and Welfare (AIHW) has been working with state and territory governments to review data collections to develop a child protection unit data collection and headline indicators relating to children's social and emotional wellbeing, shelter, and family social networks.

This work is ongoing, with methods of collecting national child protection data undergoing significant change. A dress rehearsal of this new way of reporting child protection data is planned for 2012.

### Filling the research gaps

This National Priority will drive the development of a national research agenda, in consultation with key academics and expert practitioners. This priority aims to inform future policy and service delivery through the identification of research opportunities and priorities and to develop an expanded evidence base in Australia.

The National Research Agenda for Protecting Children 2011–2014 will be a collaborative effort, developed between Commonwealth, state and territory governments and the non-government sector to identify high priority gaps in policy or practice knowledge and expand the evidence base around 'what works' in a number of key areas relevant to protecting children from abuse and neglect, through:

- > prevention
- > early intervention
- > therapeutic responses
- > out-of-home care
- > system responses.

In October 2011, the Commonwealth and state and territory government Ministers agreed to provide \$600,000 over three years (2011–12 to 2013–14) to fund a number of research projects.

The National Research Agenda is significant for all Australians. It will inform future policy and service delivery for Australian families and stimulate partnerships and collaboration across the child protection sector.

On 5 September 2011, the National Research Agenda, supported by the National Research Audit, was released. The National Research Audit is accompanied by an online register that will enable users to search for the audit information more easily and to keep up to date with the latest research.

### Responding to sexual abuse

This National Priority drives research to present a national picture of therapeutic services available to all Australian children including research, training, promising practice, gaps in service provision and challenges within the sector.

Work has now begun on development of a 'Generic Sexual Abuse and Sexualised Behaviour' learning package, which will include learning, development and training tools for relative and foster carers and for residential service staff.

In July 2010, the Australian Crime Commission released a report on *Australia's Response to Sexualised or Sexually Abusive Behaviours in Children and Young People*. The report identified specialised therapeutic services designed to divert young people with sexualised behaviours from the juvenile justice system. The report is guiding work under this priority.

All jurisdictions contributed to a National Workshop on Therapeutic Residential Care which was held in Melbourne on 9–10 September 2010. The workshop, led by Queensland, focused on definitions and best practice models of residential therapeutic care for children displaying behavioural or psychological problems as a result of abuse and neglect, including sexual abuse.

#### **White Balloon Day**

2011 marked the 15th anniversary of Braveheart's White Balloon Day, an annual national awareness and fundraising campaign staged on September 7 during Child Protection Week (September 4 -11).

Bravehearts is a not for profit organisation whose purpose is to provide therapeutic support and advocacy services to survivors of child sexual assault. Bravehearts aims to 'break the silence' around child sexual assault by providing healing and support, encouraging child sexual assault prevention and protection strategies, advocating, understanding and promoting increased education and research.

### **Advocating nationally for children and young people**

The Australian Government remains committed to ensuring that the voice of Australia's children and young people is heard at the national level. As part of this commitment, the Government has continued to undertake consultations with key stakeholders to explore the potential role of a National Children's Commissioner.

These consultations found that, while stakeholders generally strongly support the establishment of a National Children's Commissioner, they are divided on the appropriate model and corresponding responsibilities and functions.

At the meeting of the Coalition of Organisations Committed to the Safety and Wellbeing of Australia's Children (the Coalition) in Melbourne on Friday 3 June 2011, then Parliamentary Secretary for Community Services, the Hon. Julie Collins MP, announced that the Government was yet to make a decision on a National Children's Commissioner and had decided to undertake further targeted consultations on the issue.

The Attorney-General and the Minister for Families, Housing, Community Services and Indigenous Affairs, are leading Government consideration of the issue.

### **Major reforms that relate to broader social reform agenda**

Whilst there is extensive work occurring to achieve the actions and strategies under the National Framework, other projects are also underway to ensure that young people are safe and well.

These areas relate to broader social reform agenda which impact on Australian children and families. They recognise that child safety and wellbeing are shaped by family and community wellbeing, and that families must have access to the resources they need to care for children.

Because of their size, major reforms such as the ones listed below are the responsibility of many portfolios across several jurisdictions. They deal predominantly with addressing factors of neglect and risk, for example, family support programs, housing and homelessness.

## Family Support Program

The National Framework is one of several key drivers behind the Commonwealth Government's reform to the Family Support Program (FSP). The Commonwealth has committed \$1.044 billion in funding over three years from 1 July 2011 for Families and Children's Services and Family Law Services to provide more support to vulnerable families and reduce red tape for service providers. The FSP complements state and territory government services to help support families during critical life events and provide access to a wider range of support for families living in locations of high and/or multiple disadvantage.

The FSP is a national program that provides funding to non-government organisations to support families and children, especially those who are vulnerable and in areas of disadvantage. Through this funding, families receive early intervention family support, focusing on family relationships, parenting and family law services, to help people navigate life events and to prevent crises occurring.

During 2010–11, the FSP was in the final stages of a review to streamline family support services. The review, which included extensive consultations between stakeholders managing or delivering services provided under the FSP, has resulted in significant improvements to the program. The reduction of programs from 20 to just four ensures more flexible, collaborative and coordinated support for vulnerable and disadvantaged families, while reducing red tape for service providers. It allows greater flexibility to tailor services and respond to the needs of families and to better assist vulnerable and disadvantaged families, Indigenous families and those with multiple and complex needs. The new FSP also makes an important contribution towards the Commonwealth Government's Social Inclusion agenda by incorporating measures to better focus services on helping the most vulnerable and disadvantaged families.

The revised model was implemented on 1 July 2011 and includes new program guidelines requiring a strategy for improving access to services for vulnerable and disadvantaged individuals and families, and Indigenous individuals and families in particular. The strategy must include a specific plan for access by Indigenous clients and contain targets for improving this access. There are reporting requirements against these targets which ensure providers are accountable for contributing to meet the Closing the Gap targets.

### Family Support Program Reform

The Family Support Program (FSP) represented a significant investment by the Commonwealth Government to Closing the Gap in Indigenous Disadvantage. As part of the FSP reform, the Commonwealth Government seeks to make family support services easier to access and more supportive for Australia's most vulnerable children and families. During the consultation process, a number of service providers voiced their concerns that some services may have difficulty engaging with vulnerable and disadvantaged clients in their communities. It was discussed with providers that an important part of assisting the most vulnerable and disadvantaged families, including Indigenous families and their children, involves service providers offering more coordinated, holistic service responses and establishing effective links with the services these families access.

To assist service providers to assess how their service would achieve this approach and make the required links, the FSP designed an Access Strategy including an Indigenous Access Plan and Indigenous Access Improvement Target. It was acknowledged that each provider's role and contribution to Closing the Gap and improving accessibility and services for vulnerable and disadvantaged families may be different depending on their circumstances and the issues present in their Activity Delivery Areas.

To assist with planning and development, and to strategically improve service accessibility, responsiveness and outcomes, FSP service providers now produce and submit their Access Strategy and, if applicable, an Indigenous Access Plan and Indigenous Access Improvement Target for the period of their Funding Agreement Schedule. Service Providers are encouraged to update their strategies as circumstances change. Joint strategies can be provided where multiple FSP service providers are funded in a given Activity Delivery Area.

The Access Strategy should identify ways of best supporting the collaborative service system, given an organisation's resources and role in the community, help ensure the full range of support required to meet the needs of the most vulnerable families is available, culturally appropriate and accessible and to link the complexity of family needs to the level of collaboration required.

## National Partnership Agreement on Homelessness

Through the National Partnership Agreement on Homelessness, the Commonwealth and state and territory governments have committed to reduce homelessness. Under this agreement, the Commonwealth is providing \$550 million over five years from 2008–09, and the states and territories will match this funding.

Under the National Partnership, some states and territories may provide additional specialist support to children who are homeless or at risk of homelessness. This specialist support for children may include:

- Regional child development workers, who will:
  - work with specialist homelessness services to provide training and secondary consultation;
  - develop and coordinate formal relationships between specialist homelessness services and early childhood services, child counselling services and schools; and
  - coordinate programs to support children at different developmental stages and with different needs.
- Brokerage funding for homelessness services to meet the specific needs of children. The funding could be used to purchase school supplies and uniforms, counselling and health services, education, tutoring and mentoring services or sporting and recreational equipment. This will ensure children experiencing homelessness can have access to the basic support and supplies they need to stay at, or return to, school and to settle into new homes.
- Closer links between homelessness and child protection services to ensure that the most vulnerable children do not leave specialist homelessness services to occupy unsafe living conditions.

### How this will work on the ground – Stella and her daughter

Stella (not her real name) is an Indigenous woman who comes to a specialist homelessness service after leaving her violent partner. She has a daughter who is four years old. After addressing her immediate legal needs and beginning work to find stable accommodation, the service worker talks to Stella about sending her daughter to preschool.

The service has a strong emphasis on the needs of children and works hard to link children with local child care centres and schools. The service has developed a partnership with an early intervention service, the local schools and several local preschools.

The centre also runs a supported playgroup for local Indigenous mothers as well as in-house school readiness programs. It strongly encourages its clients to attend the supported playgroup. A speech pathologist also makes regular outreach visits to the service.

A worker talks to Stella about her options and the importance of getting her daughter 'school ready'. She helps Stella to find a suitable preschool that is right for her daughter. Workers from the service take Stella to drop her daughter off at the preschool each day.

Two weeks later, Stella moves into stable housing in the local area. Stella's daughter is able to continue attending the local preschool.

## Ongoing initiatives for children and families which are already underway

These initiatives are currently underway as part of Commonwealth and/or state and territory government reforms of child protection systems, children's or family support programs.

They are generally the ongoing work of one jurisdiction and focus on early intervention.

## Keep Them Safe; A shared approach to child wellbeing

Keep Them Safe: A shared approach to child wellbeing is the New South Wales (NSW) Government's response to the Report of the Special Commission of Inquiry into Child Protection Services in NSW. Keep Them Safe is based on the principle that child protection and child wellbeing is a shared responsibility among government, the non-government sector and the community. The plan established a series of key reforms, supported by legislative changes, to create an integrated system that addresses concerns earlier and helps prevent children and young people from entering, or escalating within, the child protection system.

Key legislative changes include the setting of the new mandatory reporting threshold 'risk of significant harm' for reports to Community Services and enabling of better exchange of information between government and the non-government sector. Where the risk to children and young people falls below this threshold, government and non-government agencies are supported to work with vulnerable children and their families.

The *NSW Mandatory Reporter Guide* (MRG), available as an interactive online tool or as a PDF, has been developed to assist front-line mandatory reporters to determine what to do when they are concerned about a child or young person, including whether they should make a report to the Child Protection Helpline. The *Child Wellbeing and Child Protection—NSW Interagency Guidelines* are being revised to provide a reliable and easily accessible source of information about *Keep Them Safe* and the provision of appropriate, timely responses, as well as the promotion of collaboration between agencies to deliver support services to children, young people and families. Child Wellbeing Units (CWUs) are operating in key government reporting agencies of NSW Health, Education and Communities, Police, and Family and Community Services as an alternative pathway for assessment and support and a *Keep Them Safe Support Line* provides advice on the reporting threshold for non-government mandatory reporters.

The role of the Child Wellbeing Units is to:

- advise workers on what to do to support vulnerable children, young people and families;
- drive a closer alignment and coordination of agency service systems over time to establish better responses to children, young people and families in need of assistance.

### How this works in practice

A case manager from Ageing, Disability and Home Care (ADHC) had concerns about Jenny an eight-year old child with Down Syndrome as the stepfather appeared to hinder support services for the child.

The case manager applied the Mandatory Reporter Guide which recommended contacting the Child Wellbeing Unit (CWU). The CWU assessment officer advised the case manager to gather more information under the child protection information exchange provisions. The case manager contacted the child's previous case manager, the child's school and any support services Jenny may have been attending. The CWU assessment officer completed a child protection history check.

The previous case manager reported difficulty in engaging the stepfather and lack of attendance to support services. The previous case manager stated that the stepfather was a tradesman and required respite support, particularly outside of school hours. Jenny's school reported that Jenny was often late to school and did not have the necessary school equipment when she did attend. The CWU found no previous child protection reports.

The case manager and CWU assessment officer together with the new information gathered, reapplied the Mandatory Reporter Guide. The outcome was that the concerns at this stage were below the threshold of significant harm, however intervention was required.

The case manager and CWU assessment officer discussed suitable actions and possible referrals to assist the family. They identified that engaging the stepfather in any case plan was fundamental in addressing the child protection concerns. The case manager and CWU assessment officer began exploring appropriate methods of engaging the stepfather and implementing a case plan that ensured the safety and wellbeing of Jenny, with his involvement.

## Working with Children Checks

This action aims to maximise the protection of children who come into contact with staff or volunteers in organisations and involves a commitment from jurisdictions to both legislative and administrative action (progressing Strategy 2.2).

On 16 December 2010, Community and Disability Services Ministers agreed to the broad directions outlined in the position paper, 'Toward a Nationally Consistent Approach to Working with Children Checks'. This was an important first step in achieving national consistency in screening people who work with children.

The paper identifies a number of short, medium and longer term strategies. Significant progress has already been made in some areas, such as embedding child-safe risk management practices at the organisational level and introducing legislative and administrative amendments that enable an expanded range of criminal history information to be shared to assess a person's suitability to work with children.

States and territories are at varying stages of implementation; however, all jurisdictions are working towards greater consistency across the working with children check systems, with the specific aim of maximising the protection of children wherever they live.

### Example—crossing borders

There are many people working or volunteering with children who are often required to cross state borders on a short term basis. Because states and territories have different working with children checks, this can become a cumbersome and costly burden for the people involved.

During 2010–2011, state and territory governments worked together successfully to align the criteria that will enable people to cross state borders on a short-term basis without the need for further checking. By late 2012, national exemptions to working with children checks will be introduced in all jurisdictions for paid employees and volunteers who are required to cross state or territory borders for up to 30 days in any 12-month period for work related purposes.

For people with a valid check, an additional working with children check will not be required from the state or territory hosting the activity. Strong safeguards for children will still need to be maintained, as the exemption from screening will only apply if the organisation hosting the activity has a risk management strategy in place to safeguard children and protect them from harm.

The implementation of the exemptions represents significant progress toward a nationally consistent approach to working with children checks, while retaining a national focus on protecting children from harm.

## Community initiatives within community organisations, independent of government

These are actions initiated by the non-government sector, independent of the government. They demonstrate the strength of the non-government sector in establishing partnerships with other non-government organisations, including private sector corporations and small business.

Actioning, monitoring and reporting on these initiatives is solely the responsibility of the non-government sector.

### CREATE Foundation and Origin Foundation

In 2010, CREATE Foundation entered into a three-year funding arrangement with Origin Foundation, with a view to increasing access to CREATE Your Future Workshops in New South Wales, Queensland, South Australia and Victoria and to support young people 15–25 years of age transiting from care to independence. In addition to a generous financial commitment, Origin Foundation has also committed to supporting workshops via staff workplace giving and skilled volunteering.

In the first year of operations, 50 workshops were delivered to 301 participants, with Origin staff recently supporting workshop delivery in New South Wales and Queensland. Evaluations from workshop participants have provided positive indications that workshops are relevant, interesting and supporting young people practically in their transition from care.

Rose (not her real name), an Indigenous 22 year old woman, became involved with CREATE Foundation early on in life. She was placed in care when her mother, who was a foster carer, became ill and was hospitalised for a period of time.

*'I guess now I know what it's like from both perspectives. I grew up with other children coming and staying in our house but I also know what it's like to have to go into care too. It's really unsettling',* said Rose.

Before attending the '**CREATE Your Future Program**' camp, which included a workshop titled, 'How to get a job and keep it', Rose struggled with her lack of self-confidence. In spite of having achieved a good education and solid volunteering experience, she had not been successful in securing a job.

*'I had applied for over 300 or so jobs in the past few years, but I could never 'sell myself' at the interviews. When I got to job interviews, all I could think about were all the negative things people had said about me at school. Now, when I look back, I can see I couldn't point out any good things!'*

Just days after arriving home from the '**CREATE Your Future**' camp, Rose was successful in securing an interview opportunity for what she viewed to be a 'real' job. With the new job-finding skills learned on the CREATE Your Future camp, Rose went into the interview with newfound confidence.

*'After three rounds of nerve-racking interviews I got the job! I know I wouldn't have got it if it wasn't for CREATE Your Future—I could sell myself well and I really believed what I was saying.'*

## New actions

As the rollout of the National Framework's first three-year action plan continues, adaptations are made, with jurisdictions and organisations introducing their own actions.

### Intensive Family Support Service (IFSS)

The release of the Growing them strong, together report of the Board of Inquiry into the Child Protection System in the Northern Territory 2010 prompted the implementation of new Intensive Family Support Services in the Northern Territory. Funded by the Commonwealth Government, the new services provide intensive parenting support and education for families referred by Northern Territory child protection workers.

In 2010–11, five IFSS sites were established: in Darwin Town Camps, Gudorrka (Palmerston town camp), Wadeye, Katherine Township (and Mataranka) and Palmerston Township. The \$25 million service is being rolled out over four years in urban, regional and remote areas. Service providers are collaborating with the Parenting Research Centre and the Menzies School of Research to develop an evidence-based model of service delivery that will inform family support intervention with Indigenous families.

The Department of Families, Housing, Community Services and Indigenous Affairs is working closely with the Northern Territory Department of Children and Families on the implementation and referral arrangements. To date, services have commenced work with 15 families.

### Remote Aboriginal Family and Community Workers

The Remote Aboriginal Family and Community Program (RAFCP) provides a responsive and culturally appropriate child protection service to Aboriginal families living in remote communities by employing, training and supporting local Aboriginal people to work as family workers in their own communities. Remote Aboriginal Family and Community Workers (RAFCW) are Aboriginal staff that live and work in their communities. They have language skills, established relationships and knowledge of the families and clan groups in their community and nearby communities. They have knowledge of Aboriginal culture and law. They are leaders in their communities. (Progressing Strategy 5.3.)

## Progress

The RAFCP is based in 13 remote communities and during the period was operational in all 13 communities, not including outstations. There are 14 RAFCW Community based staff.

Five RAFCW staff from the communities of Oenpelli, Borroloola, Nguiu, Kalkarindji, Ntaria and two Aboriginal Team Leaders were enrolled in the Diploma of Child, Youth and Family Intervention and graduated in May 2011. A graduation was held on 23 September 2011. RAFCWs provide outreach services and support to nearby communities that share the same language and family connections.

In the period January to June 2011, there were 97 referrals generated by individuals and families contacting the RAFCP for help for themselves, for other people and to report child protection concerns in their communities. In the same period, there were 212 referrals from child protection staff for advice, information and assistance to engage and support clients and their families in communities.

Many of these referrals were for ongoing family support to vulnerable and at risk children, young people and families. There were also 130 referrals from government and non-government services to the RAFCP. Referrals are received from services that: reside in regional centres and have clients in the community; reside in regional centres but deliver services in the community; and reside in the community. There were approximately 228 interactions between the RAFCP and these services. Total referrals for this period were 439.

Service activity indicates that:

- Children, young people and families are accessing the program for help as safety issues arise
- Northern Territory DCF child protection teams are utilising the RAFCWs to respond to safety issues and strengthen families in remote communities
- RAFCWs are working with relevant services with specific families to improve child safety and family capacity to protect and raise children
- Aboriginal staff are taking leadership in their communities to address child safety issues and strengthen families.

Evaluations of the RAFCP occur on an annual basis. An independent evaluation of the RAFCW initiative, conducted by the Social Partnerships in Learning Research Consortium Evaluation Unit at Charles Darwin University, found that there were difficulties in accessing definitive data, but there was anecdotal evidence to suggest that issues of family function, health and wellbeing of families and communities, and attitudes and perceptions about community safety and child protection, were being addressed by the program. For the most part, RAFCW were making a significant contribution to supporting at-risk families (Williams et al, 2010).

### **Remote Aboriginal Family and Community Workers making a difference**

The Department of Children and Families was made aware of a young mother who was abusing drugs and alcohol. Several senior members of her remote community contacted the Department of Children and Families with concerns about the general lack of care the baby was receiving and fears the mother was feeding the infant whilst taking alcohol and drugs.

The community did not have the capacity to deal with the situation alone; their strong women were already fully engaged with providing care to other children in need, so they asked the Department to step in and help.

It was arranged for an investigator to visit the community; however, he was able to gather little relevant information about the young mother's situation from the community health centre, local school or the police. Only after the investigator contacted the Remote Aboriginal Family and Community Workers (RAFCW) was he able to gain a comprehensive snapshot of the situation.

With the involvement of the RAFCW, the Department was able to hold a formal meeting with the family and community members to discuss the situation and their options. Through this community involvement, the RAFCW were able to identify the risks and concerns community members held for the infant and involve locals in finding an acceptable solution.

The child was nominated as being at high risk, and it was recognised that no-one in the community had the capacity to provide a safe home or medical and other supports for the infant. As a result, it was agreed that the best outcome was for the Department to transfer the child to the closest Regional Centre.

The young mother was also offered accommodation and access to drug and alcohol services in the Regional Centre, to enable her to leave the community and accompany her child. Although this offer was ultimately declined, the mother agreed that her baby would leave alone.

The involvement of the RAFCW was invaluable in facilitating an acceptable outcome, for both mother and child, which also had the support of senior members of the community.





# Chapter three

Measuring the Difference -

Status of the National Framework Outcome



# Chapter three: Measuring the Difference - Status of the National Framework Outcome

## Introduction

The National Framework is designed to achieve a single outcome—Australia’s children and young people are safe and well. Our target is a substantial and sustained reduction in child abuse and neglect in Australia over time. But how will we know when we are there? How will we monitor that we are on track? Where is the evidence?

Progress on the National Framework will be measured through a range of indicators, some existing and some yet to be developed. Some of these indicators, included in Chapter 3, measure whether Australia’s children and young people are safe and well. Others, reported in Chapter 4, measure the National Framework’s supporting outcomes. The indicators in both chapters may appear similar, but they measure different outcomes. A full list of the indicators for the National Framework and supporting outcomes is contained in Appendix 1.

## High-level indicators: are Australia’s children and young people safe and well?

There are four groups of indicators for measuring progress towards the National Framework outcome:

- › Key national indicators of children’s health, development and wellbeing
- › Hospital admissions and emergency department visits for neglect and for injuries to children under three years
- › Substantiated child protection cases
- › Number of children in out-of-home care.

Information in the following pages brings together these groups of indicators to paint a picture of our children now. How safe and well are they?

Much of this information is already publicly available, and existing reports are acknowledged throughout this publication. This *2010-11 Annual Report* brings the data together for a comprehensive view of progress.

## Overview of the indicators

It is, of course, still early in the life of the National Framework, and much of the data reported in this chapter precedes the Framework. It may not be possible to judge the effect of the Framework for several years; the National Framework is an ambitious, long-term initiative, and it is unlikely we will see changes in its high-level target for many years to come. Short-term achievements against individual actions will, in time, all contribute to the success of the high-level target. For this reason, it is important to begin gathering data and reporting as early as possible and to continue measuring the same aspects of children’s lives, year after year, so that trends can easily be observed.

For the first two groups of indicators, relating to key national indicators and hospital admissions and emergency department visits, we have information that is representative of all Australian children.

In general, improvements are apparent in reducing rates of:

- Infant mortality with Indigenous and non-Indigenous children, although there is much more work to do
- Births to teenage mothers
- Injuries.

Figures are stable for:

- Dental health
- Reading and numeracy
- Immunisation rates.

There are concerns about:

- Overweight and obesity.

For the two groups of indicators relating to substantiations and children in out-of-home care, we have information that is representative of children who come into contact with statutory child protection systems.

In general:

- We are improving with numbers of children subject to a notification
- Figures are stable with substantiations of child protection cases
- There remain concerns about the over-representation of Indigenous children in all of the indicators, particularly in numbers in out-of-home care.

## Trends in key national indicators of children’s health, development and wellbeing

This section reports on data against the 10 key national indicators.

### CHILDREN’S HEALTH: Infant Mortality

#### *Infant mortality*

High infant mortality rates are linked to high socioeconomic disadvantage and generally indicate the poor social and environmental conditions in which children are developing. The mortality rate is used throughout the world as an indicator of population and child health (AIHW 2011).

**Table 1: Infant Mortality**

	1990	2000	2005	2006	2007	2008	2009	2010
	<b>Number</b>							
Males	1,224	725	714	727	655	702	728	738
Females	921	565	588	535	548	524	533	491
Persons	2,415	1,290	1,302	1,262	1,203	1,226	1,261	1,229
	<b>Infant mortality rate<sup>(a)</sup></b>							
Males	9.1	5.7	5.4	5.3	4.5	4.6	4.8	4.8
Females	7.2	4.7	4.7	4.1	3.9	3.6	3.7	3.4
Persons	8.2	5.2	5.0	4.7	4.2	4.1	4.3	4.1

<sup>(a)</sup> Infant deaths per 1,000 live births

Source: ABS Deaths, Australia 3302.0 2010

In 2010, there were 1,229 infant deaths, of which 738 (60 per cent) were males. Since 1990, the number of infant deaths has decreased by 49 per cent, from 2,415 to 1,229, with the number and rate of infant mortality remaining relatively stable over the last five years.

#### *Indigenous infant mortality*

Since 2004–05, Indigenous and non-Indigenous infant mortality rates (IMRs) have fallen across all selected states. However, in NSW, Qld and SA, Indigenous infant mortality rates (IMRs) are much higher than non-Indigenous IMRs. In the Northern Territory, the difference is more than three times as high.

**Table 2: Infant Mortality<sup>(a)(b)</sup> by Indigenous Status**

	2005-2007	2006-2008	2007-2009	2008-2010
<b>NSW</b>				
Indigenous	8.9	7.7	6.8	5.2
Non-Indigenous	4.5	4.3	4.1	4.1
<b>Qld<sup>(d)</sup></b>				
Indigenous	9.1	7.9	7.6	8.8
Non-Indigenous	4.8	4.7	4.7	4.7
<b>SA</b>				
Indigenous	8.9	6.4	6.7	4.6
Non-Indigenous	4.0	3.4	3.5	3.4
<b>NT</b>				
Indigenous	15.7	13.6	12.2	11.4
Non-Indigenous	4.2	3.8	3.9	3.7

<sup>(a)</sup> Infant deaths per 1,000 live births. The volatility in infant mortality rates is partially due to the relatively small number of infant deaths registered.

<sup>(b)</sup> Data are for NSW, Qld, SA and NT only, based on state or territory of usual residence. Victoria, Tasmania and the ACT are excluded due to small numbers of registered Aboriginal and Torres Strait Islander deaths. WA data are excluded due to an ongoing investigation into unusual volatility in 2007, 2008 and 2009. For further details, see ABS *Deaths, Australia 2010* Cat. No 3302.0.

<sup>(c)</sup> Care should be taken when interpreting Aboriginal and Torres Strait Islander deaths data for Queensland for 2010. See: ABS *Deaths, Australia* (Cat. No. 3302.0) - Technical Note: Registration of outstanding deaths, Queensland, 2010, and paragraph 36 of the Explanatory Notes

Source: ABS *Deaths, Australia 2010* Cat. No 3302.0

### **CHILDREN'S HEALTH: Dental Health**

Dental decay, which is linked to socioeconomic disadvantage, has been shown to affect children's growth and cognitive development and can be minimised by the use of dental services (Kilpatrick, Neumann, Nicholson & Chapman 2009).

**Table 3: Mean number of decayed, missing or filled teeth among primary school children**

	2002	2003-04	2006
<b>Children aged 12 years</b>			
Boys	0.9	1.0	1.1
Girls	1.1	1.1	1.3
All children	1.0	1.0	1.2
<b>Children aged 5 and 6 years</b>			
Boys	n.a.	n.a.	2.6
Girls	n.a.	n.a.	1.8
All children	n.a.	n.a.	2.2

Source: Child Dental Health Surveys, Australia, 2005 and 2006; AIHW DENTAL STATISTICS AND RESEARCH SERIES No. 54

The average number of decayed, missing or filled teeth (DMFT) of Australian children at 12 years of age in 2006 was 1.2, an increase of 0.2 since 2003–04. The average number of DMFT is slightly higher among girls of this age group.

The 2006 data for children aged 5 and 6 years shows a different trend, with boys having a higher average number of DMFT. Additionally, the average number of DMFT was much higher for the younger age group (2.2 compared to 1.2).

### **CHILDREN'S DEVELOPMENT: Literacy and Numeracy**

Literacy and numeracy skills are important building blocks within a child's education. A child's proficiency in literacy and numeracy is a strong indicator of their likelihood of continuing on to further education and participating fully in Australian society as they become adults.

**Table 4: Proportion of year 5 students who achieved at or above the national minimum standard, 2008 and 2009 (per cent) <sup>(a) (b)</sup>**

Student type						
Reading	2008		2009		2010	2011
All	91.0	± 0.3	91.7	± 1.3	91.3	91.5
Male	89.3	± 0.3	89.6	± 1.5	89.3	<i>n.a.</i>
Female	92.8	± 0.3	93.9	± 1.0	93.4	<i>n.a.</i>
Indigenous <sup>(c)</sup>	63.4	± 1.8	66.7	± 3.8	66.2	<i>n.a.</i>
Non Indigenous <sup>(c)</sup>	92.6	± 0.2	93.1	± 1.2	92.7	<i>n.a.</i>
LBOTE <sup>(d)</sup>	87.5	± 0.7	89.7	± 1.4	89.4	<i>n.a.</i>
<b>Numeracy</b>						
All	92.7	± 0.2	94.2	± 1.3	93.7	91.5
Male	92.8	± 0.3	94.0	± 1.2	93.4	<i>n.a.</i>
Female	92.5	± 0.3	94.3	± 1.4	94.0	<i>n.a.</i>
Indigenous <sup>(c)</sup>	69.2	± 1.7	74.2	± 4.5	71.4	<i>n.a.</i>
Non Indigenous <sup>(c)</sup>	94.0	± 0.2	95.3	± 1.1	95.0	<i>n.a.</i>
LBOTE <sup>(d)</sup>	90.7	± 0.7	92.9	± 1.3	92.1	<i>n.a.</i>

LBOTE =Language Background Other Than English.

<sup>(a)</sup> The achievement percentages reported in this table include 95 per cent confidence intervals (for example, 80.0 per cent ± 2.7 per cent). Confidence intervals for 2009 in this table are equated to 2008 data to enable comparisons to be made.

<sup>(b)</sup> Exempt students were not assessed and are deemed not to have met the national minimum standard. The proportion of absent and withdrawn students varies across jurisdictions, as shown in table 4A.87. Readers are urged to be cautious when comparing results.

<sup>(c)</sup> A student is considered to be 'Indigenous' if he or she identifies as being of Aboriginal and/or Torres Strait Islander origin. Students for whom Indigenous status was not stated are not included in these calculations. The method used to identify Indigenous students varies across jurisdictions.

<sup>(d)</sup> A student is considered to be 'LBOTE' if either the student or parents/guardians speak a language other than English at home.

Source: MCEETYA (2008), *2008 National Assessment Program — Literacy and Numeracy, Achievement in Reading, Writing, Language Conventions and Numeracy*, Melbourne.

MCEECDYA (2009 and unpublished), *2009 National Assessment Program — Literacy and Numeracy: Achievement in Reading, Writing, Language Conventions and Numeracy*, Melbourne.

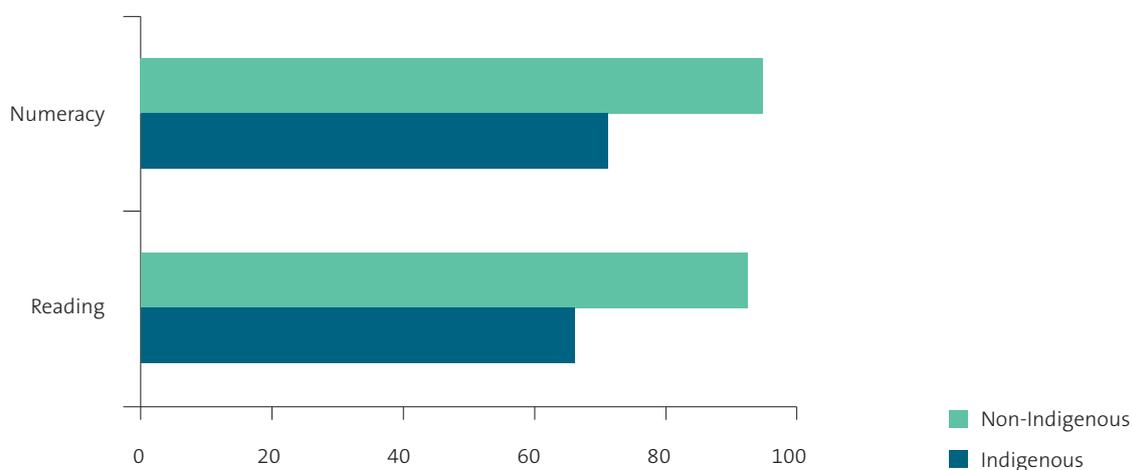
NAPLAN *Achievement in Reading, Writing, Language Conventions and Numeracy: National Report for 2010 National Assessment Program — Literacy and Numeracy, Preliminary results for achievement in Reading, Writing, Language Conventions and Numeracy*.

In 2011, 91.5 per cent of Year 5 students achieved at or above the national minimum standard for reading and numeracy. For reading, the proportions have remained relatively stable since 2008, at 91 per cent or more, with minor fluctuations in numeracy ranging between 91.5 and 94.2 per cent.

Between 2008 and 2010, the proportion achieving the national minimum standard for reading was slightly higher for females than males (around 91 per cent compared to around 89 per cent). Students with a language background other than English achieved slightly lower proportions (2 to 3 percentage points) than the Year 5 population overall.

The proportion of Indigenous students achieving the national minimum standard for reading was more than 25 percentage points lower than for non-Indigenous students (around 63–66 per cent compared to around 93 per cent). This gap was slightly less for numeracy, with the difference ranging from around 21 to 25 percentage points; see Figure 3 below.

Figure 3: Proportion of Year 5 students achieving the national minimum standards, 2008 and 2009



Source: MCEETYA (2008), *2008 National Assessment Program — Literacy and Numeracy, Achievement in Reading, Writing, Language Conventions and Numeracy*, Melbourne;

MCEECDYA (2009 and unpublished), *2009 National Assessment Program — Literacy and Numeracy: Achievement in Reading, Writing, Language Conventions and Numeracy*, Melbourne.

### CHILDREN'S WELLBEING: Teenage births

Young motherhood is a strong indicator of disadvantage, both for the mothers and for their children. Teenage mothers face significantly higher physical and psychological risks while having their children. They are also at higher risk of domestic violence, are more likely to be reliant on welfare payments and generally attain lower levels of education than their peers.

Table 5: Live births to teenage mothers aged 15–19 years

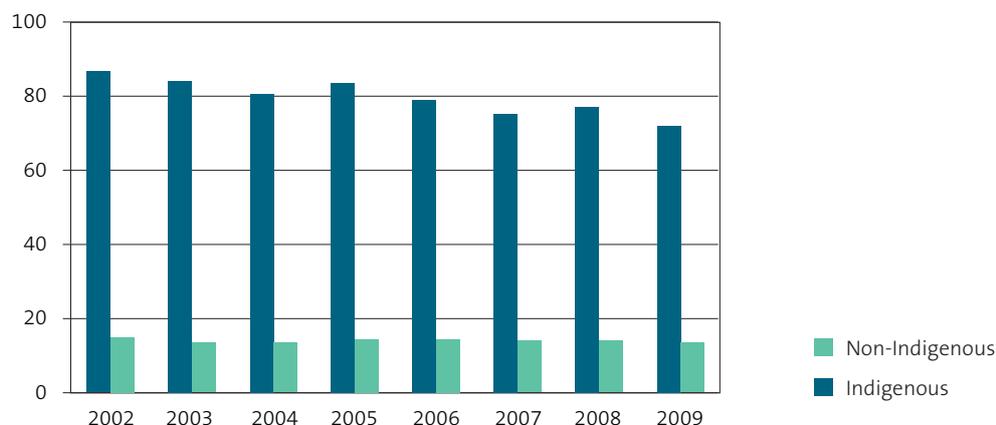
	2006	2007	2008	2009
	<b>Rate per 1,000 females</b>			
	79.6	75.4	77.5	72.2
Non-Indigenous mother	14.7	14.3	14.2	13.6
Total rate per 1,000 females	17.3	16.8	16.8	16.1
	<b>Number</b>			
<b>Total teenage births</b>	<b>11,903</b>	<b>11,803</b>	<b>12,051</b>	<b>11,679</b>

Source: AIHW Children's Headline Indicators 2011

In 2009, there were almost 11,700 infants born to teenage mothers in Australia—a rate of 16.1 live births per 1,000 females aged 15–19 years (Figure 4). Teenage mothers accounted for around 4 per cent of all women who gave birth in Australia (Laws et al. 2010).

The teenage birth rate has shown a slight decrease since 2006. The national trend has been for the teenage birth rate to decline from the mid-1990s (22 per 1,000) to 2003, when the rate stabilised at 17 per 1,000 females aged 15–19 years.

Figure 4: Teenage births



Source: AIHW National Perinatal Data Collection.

### CHILDREN'S WELLBEING: Overweight and Obese Children

Overweight and obese children risk suffering serious health conditions, such as asthma, cardiovascular conditions and Type 2 diabetes, in both the short and long term.

Table 6: Overweight and obese children aged 5–14 years, 2007–08, Australia

		Number	Per cent
Sex	Boys	223,700	23.8
	Girls	206,200	22.3
Age	5–9 years	194,900	21.3
	10–14 years	235,000	24.7
Country of birth	Australia <sup>(a)</sup>	399,600	23.3
	Born overseas	30,300	20.1
Remoteness	Major cities	246,500	21.0
	Other areas <sup>(b)</sup>	183,400	26.6
Socioeconomic status	Lowest SES areas	110,000	30.6
	Highest SES areas	66,900	17.5
Family type	Couple with children	330,100	22.0
	One-parent with children	99,900	27.5
<b>Total overweight and obese children</b>		<b>429,900</b>	<b>23.1</b>

<sup>(a)</sup> Includes other Territories. Country of birth refers to the household reference person for the survey.

<sup>(b)</sup> Other areas include *Inner regional*, *Outer regional* and *Remote areas*. The survey was not conducted in *Very remote* areas of Australia

Note: Refer to *AIHW Headline Indicators 2011 Appendix 2: Methods for explanation of remoteness areas and socioeconomic status (SES)*.

Source: AIHW Headline Indicators 2011.

In 2007–08, an estimated 430,000 children aged 5–14 years, or over one-fifth (23 per cent) of the child population, were overweight or obese. The difference between boys (24 per cent) and girls (22 per cent) was not statistically significant.

The prevalence of overweight and obesity was similar for children living in couple families (22 per cent) and for those living in one-parent families (28 per cent). Prevalence also did not vary significantly for children living in households where the survey reference person was born overseas (20 per cent) compared with those born in Australia (23 per cent).

Among Australian children, estimates from large-scale national surveys for children aged 5–12 years show only a slight increase in measured overweight and obesity, from 21 per cent in 1995 to 22 per cent in 2007–08. A meta-analysis by Olds et al. (2010), based on data on measured BMI from localised, state and territory and national surveys, suggests that the prevalence of overweight and obesity among those aged 2–18 years has plateaued or only slightly increased over the past ten years (at 21–25 per cent for overweight and obesity and 5–6 per cent for obesity alone). However, further research is necessary in this area.

### CHILDREN'S WELLBEING: Family economic situation

For most families, regular, adequate income is the single most important determinant of their economic situation. Children living in families without adequate income are at a greater risk of poor health and educational outcomes, both in the short and long-term. Children living in low-income families are more likely to have insufficient resources to support the minimum standard of living (AIHW, Headline Indicators 2011).

Table 7: Family Economic Situation

		2005-06	2007-08	2009-10
<b>Mean equivalised disposable household income for low income households <sup>(a) (b) (c) (d)</sup></b>				
Children aged 0-4 years <sup>(e)</sup>	\$	395	437	441
Children aged 5-12 years <sup>(e)</sup>	\$	393	435	440
Children aged 0-12 years <sup>(f)</sup>	\$	393	436	440

<sup>(a)</sup> Low-income households based on the 2nd and 3rd income deciles. Deciles formed using equivalised disposable household income of all households.

<sup>(b)</sup> Estimates presented for 2007–08 and 2009–10 are not directly comparable with estimates for previous cycles due to the improvements made to measuring income introduced in the 2007–08 cycle. Estimates for 2005–06 have been recompiled to reflect the new treatments of income; however, not all new components introduced in 2007–08 are available for earlier cycles. For further information see ABS *Household Income and Income Distribution, Australia, 2009–10* (cat. no. 6523.0).

<sup>(c)</sup> Data for 2005–06 and 2007–08 are in 2009–10 dollars, adjusted using changes in the Consumer Price Index.

<sup>(d)</sup> Households in collection districts defined as very remote were excluded, accounting for about 23 per cent of the population in the NT.

<sup>(e)</sup> Refers to age of eldest child in low-income households with children aged 0–12 years.

<sup>(f)</sup> Refers to all low-income households with children aged 0–12 years.

Source ABS 2009–10, Survey of Income and Housing, unpublished data.

In 2009–10, the mean equivalised disposable household income for low income households with children aged 0–12 years was \$440. This is an increase of \$47, in current price terms, since 2005–06. Note, however, that 2009–10 data is not strictly comparable with 2005–06 because of changes in the survey used to collect this information.

The median household income was similar for those with children aged 0–4 years and those with children aged 5–12 years (\$441 and \$440 respectively).

### CHILDREN'S WELLBEING: Injuries

The leading cause of death, or hospitalisation, among children aged 0–14 years in Australia is injury (Mercy, Sleet and Doll 2006; AIHW 2009).

**Table 8: Death rates from injuries, Australia, 2004–06 and 2005–07**

	Rate per 1,000	
	2004–06	2005–07
Children aged:		
0–4 years	10.2	9.8
5–9 years	3.4	3.4
10–14 years	4.5	4.4
<b>Total</b>	<b>6.0</b>	<b>5.8</b>
<b>Total number</b>	<b>720</b>	<b>708</b>

Source AIHW: National Mortality Database

Between 2004–06 and 2005–07, the number of injury deaths for children aged 0–14 years decreased from 720 to 708, resulting in a very minor decrease in the rate per 1,000 children, from 6.0 to 5.8.

### CHILDREN'S WELLBEING: Immunisations

Immunisation coverage needs to exceed 90 per cent in order to protect the community adequately from vaccine-preventable diseases (Lister et al. 1999). The National Health and Medical Research Council (NHMRC) actually recommends a higher rate for children at two years of age and near 100 per cent coverage of children at school entry age. Because of the small percentage of conscientious objectors to immunisation and children with medical conditions that preclude immunisation, a 100 per cent immunisation rate is not considered to be achievable (AIHW 2009).

**Table 9: Proportion of children fully immunised by age, Australia, June 2011**

	2008–09	2009–10	2010–11
Children aged:			
12–15 months	91.3	91.5	92.1
24–27 months	92.9	92.4	92.8
60–63 months	82.4	89.6	89.3

Source: Medicare Australia: Australian Childhood Immunisation Register statistics

As at June 2011, 92 per cent of children aged 12–15 months and 93 per cent of children aged 24–27 months were fully immunised, meeting the recommendations of the NHMRC. By around five years of age (60–63 months), this had dropped to below 90 per cent.

### Trends in hospital admissions and emergency department visits for neglect and injuries to children under three years

The leading cause of death or hospitalisation, among children aged 1–14 in Australia, is injury (Mercy, Sleet and Doll 2006; AIHW 2009)

The rate of hospitalisation for injury and poisoning for children is measured by the total number and rate of hospital separations for community injury and poisoning. A hospital separation is an episode of care that can range from a total hospital stay, or a portion of a hospital stay, that ends with a change in type of care (for example, from acute care to rehabilitation). A community injury is an injury or poisoning that is most likely sustained in the community.

**Table 10: Hospital separations<sup>(a)</sup> for community injuries, children 0–2**

	2004–05	2005–06	2006–07	2007–08
	<b>Number</b>			
Males	6,200	6,492	6,585	6,616
Females	4,821	4,975	4,926	5,045
Persons	11,021	11,468 <sup>(b)</sup>	11,511	11,661
	<b>Rate per 1,000</b>			
Males	15.9	16.2	16.0	15.5
Females	13.1	13.1	12.6	12.5
Persons	14.5	14.7	14.4	14.0

<sup>(a)</sup> Includes ICD-10-AM principal diagnosis codes of S00-T75 or T79 and mode of admission other than 'admitted patient transferred from another hospital'.

<sup>(b)</sup> Includes one separation of unknown sex.

Note: Community injury separation rates are a significant underestimate of all separations due to abuse or neglect.

Source: AIHW National Hospital Morbidity Database (unpublished data).

Between 2004–05 and 2007–08, hospitalisations for community injuries involving children aged 0–2 years have remained fairly stable, from 11,021 (14.5 per 1,000) in 2004–05 to 11,661 (14.0 per 1,000) in 2007–08. The number and rate of separations was higher for males than females.

**Table 11: Hospital separations<sup>(a)</sup> for community assault, children 0–2**

	2004–05	2005–06	2006–07	2007–08 <sup>(a)</sup>
Number	227	214	226	209
Rate per 1,000	0.3	0.3	0.3	0.3

<sup>(a)</sup> Includes ICD-10-AM principal diagnosis codes of S00-T75 or T79 and first external cause X85-Y09, Y35-Y36, Y87.1, Y89.0 or Y89.1 and mode of admission other than 'admitted patient transferred from another hospital'.

Notes:

1. Numbers and rates are two-year moving averages

2. Community assault separation rates are a significant underestimate of all separations due to abuse or neglect.

Source: AIHW National Hospital Morbidity Database (unpublished data).

There has been very little change in the number and rate per 1,000 separations for community assault since 2004–05.

### Trends in substantiated child protection cases

Child abuse and neglect can negatively affect a child's development, including physical, psychological, cognitive, behavioural and social aspects. It can result in attachment difficulties, trauma, physical health problems and learning difficulties (Lamont 2010). The negative effects of child abuse and neglect can be long lasting. For example, young people and adults who were abused or neglected during childhood commonly experience mental health problems, and there is a strong association between sexual abuse and substance abuse (Lamont 2010).

A substantiation of a notification is the conclusion, after investigation, that a child has been, is being or is likely to be, abused, neglected or otherwise harmed.

Table 12: Children aged 0–17 years subject to substantiation of a notification<sup>(a)</sup>, by Indigenous status and age<sup>(b)</sup>

	2004–05	2005–06	2006–07	2007–08	2008–09	2009–10	2010–11
<b>Number</b>							
<b>Indigenous status</b>							
Indigenous	4,912	6,052	7,100	7,340	8,172	8,334	8,231
Non-Indigenous	29,134	28,465	26,928	24,758	24,469	22,961	23,296
<b>Age</b>							
0–4 years	12,661	13,092	13,359	12,682	13,084	11,854	12,516
5–9 years	9,794	9,579	9,203	8,754	8,713	8,227	8,338
10–14 years	9,354	9,479	9,066	8,393	8,551	8,263	8,130
15–17 years	2,082	2,243	2,277	2,145	2,258	2,405	2,536
<b>All</b>	<b>34,046</b>	<b>34,517</b>	<b>34,028</b>	<b>32,098</b>	<b>32,641</b>	<b>31,295</b>	<b>31,527</b>
<b>Proportion (%)</b>							
<b>Indigenous status</b>							
Indigenous	14.4	17.5	20.9	22.9	25.0	26.6	26.1
Non-Indigenous	85.6	82.5	79.1	77.1	75.0	73.4	73.9
<b>Age</b>							
0–4 years	37.2	37.9	39.3	39.5	40.1	37.9	39.7
5–9 years	28.8	27.8	27.0	27.3	26.7	26.3	26.4
10–14 years	27.5	27.5	26.6	26.1	26.2	26.4	25.8
15–17 years	6.1	6.5	6.7	6.7	6.9	7.7	8.0
<b>All<sup>(b)</sup></b>	<b>100.0</b>						
<b>Rate per 1,000 children</b>							
<b>Indigenous status</b>							
Indigenous	22.9	28.0	32.6	33.5	35.0	35.3	34.6
Non-Indigenous	6.3	6.2	5.7	5.2	5.1	4.6	4.5
<b>Age</b>							
0–4 years	10.0	10.3	10.1	9.4	9.3	8.2	8.5
5–9 years	7.4	7.3	6.9	6.5	6.4	6.0	6.1
10–14 years	6.7	6.8	6.5	6.0	6.1	5.9	5.8
15–17 years	2.5	2.7	2.7	3.0	2.6	2.7	2.9
<b>All</b>	<b>7.1</b>	<b>7.2</b>	<b>6.9</b>	<b>6.5</b>	<b>6.5</b>	<b>6.1</b>	<b>6.1</b>

<sup>(a)</sup> These data count the **number of children** subject to substantiation of a notification, not the number of substantiations.

<sup>(b)</sup> Total children aged 0–17 years may not equal the sum of age categories as it includes children whose age was unknown

Note: 'Non-Indigenous' includes children whose Indigenous status was unknown.

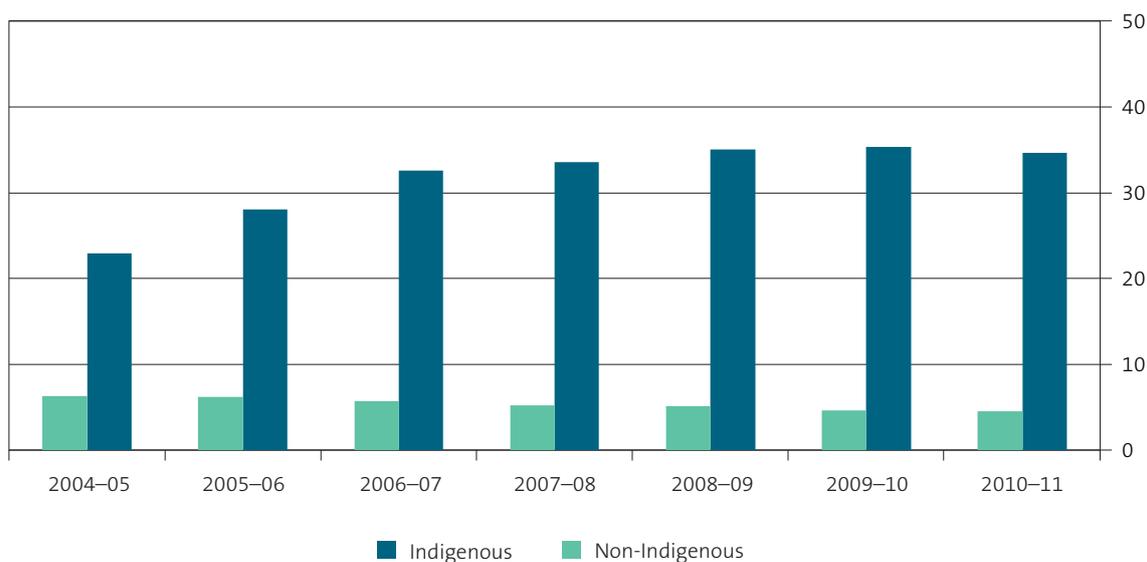
Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

In 2010–11, there were 31,527 children subject to substantiation of a notification, similar to 2009–10 levels. Overall since 2004–05, the number of children subject to a substantiation has been trending downwards.

Indigenous children account for just over one quarter (26.1 per cent) of children subject to substantiations in 2010–11 and are almost eight times more likely to be subject to substantiations than non-Indigenous children (34.6 per 1,000 children compared to 4.5 per 1,000 children).

Additionally, the rate per 1,000 children has been increasing for Indigenous children but decreasing for non-Indigenous children; see Figure 5 below.

**Figure 5: Children subject to substantiation of a notification, Indigenous status, children 0–17 years, rate per 1,000 children**



Note:

- These data are for 'children subject to a substantiation'; these data count children, NOT substantiations.
- Total children aged 0–17 years may not equal the sum of age categories as it includes children whose age was unknown.
- There is a break in the series between 2009–08 and 2009–10 due to a slightly different method of Indigenous rate calculations.

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

The number and rates of children subject to substantiations has remained relatively consistent across all age groups since 2004–05, with the most noticeable change occurring in the 0–4 year age group, decreasing from 10.0 to 8.5 between 2004–05 and 2010–11.

### Trends in the number of children in out-of-home care

Out-of-home care is provided across Australia for children and young people who are unable to live with their families, generally because of child abuse or neglect or because their family is unable to care for them.

There are different kinds of out-of-home care, including foster care (living with a family), residential care (living in a staffed house with other children) and kinship care (living with a relative).

Table 13: Children 0–17 years in out-of-home care, by Indigenous status

	2004–05	2005–06	2006–07	2007–08	2008–09	2009–10	2010–11
<b>Number</b>							
Indigenous	5,678	6,497	7,917	9,070	10,512	11,468	12,358
Non-Indigenous	n.a.	n.a.	20,036	21,539	23,374	24,279	24,929
<b>Total<sup>(a)</sup></b>	<b>23,695</b>	<b>25,454</b>	<b>28,379</b>	<b>31,166</b>	<b>34,069</b>	<b>35,895</b>	<b>37,648</b>
<b>Per cent</b>							
Indigenous	24.0	25.5	27.9	29.1	30.9	31.9	32.8
Non-Indigenous	n.a.	n.a.	72.1	70.9	69.1	68.1	67.2
<b>Total<sup>(a)</sup></b>	<b>100.0</b>						
<b>Rate per 1,000 children</b>							
Indigenous	26.4	29.8	36.3	41.3	44.8	48.4	51.7
Non-Indigenous	n.a.	n.a.	n.a.	n.a.	4.9	5.0	5.1
<b>Total<sup>(a)</sup></b>	<b>4.9</b>	<b>5.3</b>	<b>5.8</b>	<b>6.3</b>	<b>6.7</b>	<b>7.0</b>	<b>7.3</b>

<sup>(a)</sup> Totals include 'Indigenous', 'non-Indigenous' and 'unknown'.

Notes:

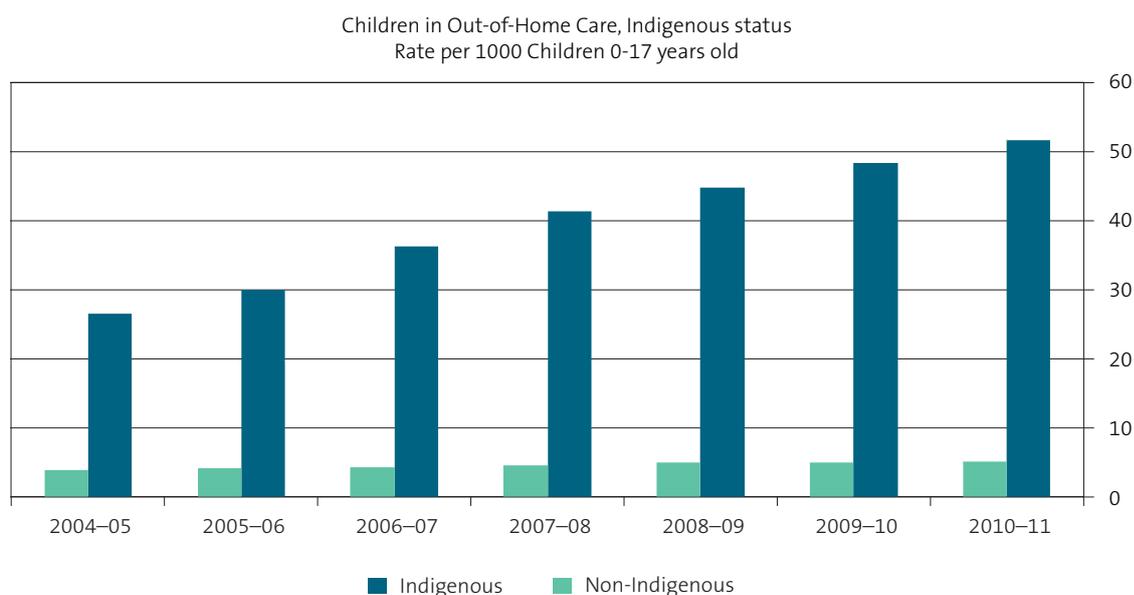
1. 'Non-Indigenous' excludes children whose Indigenous status was unknown.

2. Data for 2006–07 does not match previously published data due to retrospective update from jurisdictions.

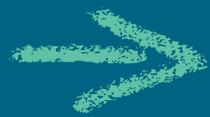
Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

Since 2004–05, the total number of children in out-of-home care has increased by 59 per cent, from 23,695 to 37,648. The increase has occurred relatively consistently across Indigenous and non-Indigenous children; however, the increase in the rate per 1,000 children has been much higher for Indigenous children. The rate per 1,000 children also shows the increasing gap between Indigenous and non-Indigenous children; see Figure 6 below.

Figure 6: Children in out-of-home care, by Indigenous status



Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.



# Chapter four

Status of supporting outcomes



# Chapter 4:

## Status of Supporting Outcomes

### Introduction

The National Framework includes six supporting outcomes which focus on specific aspects of the safety and wellbeing of children and young people:

- Outcome 1:** Children live in safe and supportive families and communities
- Outcome 2:** Children and families access adequate support to promote safety and intervene early
- Outcome 3:** Risk factors for child abuse and neglect are addressed
- Outcome 4:** Children who have been abused or neglected receive the support and care they need for their safety and wellbeing
- Outcome 5:** Indigenous children are supported and safe in their families and communities
- Outcome 6:** Child sexual abuse and exploitation is prevented and survivors receive adequate support.

### Supporting indicators: Measuring the supporting outcomes

Each supporting outcome has its own set of indicators of change, called 'supporting indicators', to measure the progress under the National Framework. Progress against the supporting outcomes will be measured through the indicators of change. Some indicators can be reported on immediately, while others require further development.

This chapter provides a summary view of all indicators by supporting outcome, followed by more detailed analysis for each indicator.

For some outcomes, we have information that is representative of all Australian children. In general, the numbers show:

- › We are improving with injuries, child protection notifications, children and their families being supported through intensive family services
- › Figures are stable with low birth weight and women attending at least one antenatal visit.

For other outcomes, we have information that is representative of children who are the specific target of particular work being done under the Framework. In general, the numbers show:

- › We are improving with the proportion of children in jobless families, the number of children in foster care and the number of children subject to an investigation
- › The percentage of Indigenous children placed within an Indigenous household and the number of children with substantiations of abuse (not sexual) have remained steady
- › There are concerns about the numbers of children accessing homelessness assistance (although the increase may indicate that services are more accessible), parents using illicit drugs, the numbers of children in out-of-home care, Indigenous children with a substantiation of a notification and in alternative care, and the number of children with substantiation of sexual abuse
- › A stable trend may also be a cause for concern, if there continues to be no improvement.

For some figures, the trend can only be shown over a limited number of years, so those trends should be treated with caution.

This summary is very general, and the detail below will give a more complete picture.

All governments are aware that, even though some indicators are improving, there is no room for complacency. Much work is needed to maintain the success we have had so far, and even more work is necessary to extend the benefits to children who are harder to reach and to those at risk.

## Analysis: Outcomes supporting the National Framework

### Outcome 1: Children live in safe and supportive communities

This outcome aims to ensure that all children and families receive appropriate support and services to create conditions of safety and care for children. Where families have additional needs, it aims to ensure that early intervention and specialist services are available.

#### *Indicator 4: Hospitalisations for injury and poisoning*

The leading cause of death, or hospitalisation, among children aged 1–14 years in Australia is injury (Mercy, Sleet and Doll 2006; AIHW 2009).

The rate of hospitalisation for injury and poisoning for children is measured by the total number and rate of hospital separations for community injury and poisoning. A hospital separation is an episode of care that can range from a total hospital stay or a portion of a hospital stay that ends with a change in type of care (for example, from acute care to rehabilitation). A community injury is an injury or poisoning that is most likely sustained in the community.

**Table 14: Hospital separations for community injury and poisoning <sup>(a)</sup> by Indigenous status of children aged 0–4 years, 2005–06 to 2007–08**

Injuries	Indigenous	Other	Total
Number of separations	3,790	51,611	55,401
Rate per 1,000 separations <sup>(a)</sup>	20.3	14.2	n.a.

<sup>(a)</sup> Community injury: ICD-10-AM principal diagnosis S00–T75 or T79 and mode of admission other than ‘admitted patient transferred from another hospital’. Assault: ICD-10-AM principal diagnosis S00–T75 or T79, and first external cause X85–Y09, Y35–Y36, Y87.1, Y89.0 or Y89.1, and mode of admission other than ‘admitted patient transferred from another hospital’.

Notes:

1. Three years of aggregated data are presented here as a more robust measure than single year data.
2. Due to jurisdictional differences in data quality, analysis by Indigenous status is based on state of usual residence and includes data from New South Wales, Victoria, Queensland, Western Australia, South Australia and public hospitals in the Northern Territory only. Data from these jurisdictions is not necessarily representative of excluded jurisdictions.
3. Community injury separation rates are a significant underestimate of all separations due to abuse or neglect.

Source: AIHW National Hospital Morbidity Database (unpublished data).

Updated data for this indicator has not been available since the *2009–10 Annual Report to the Council of Australian Governments*.

During 2005–06 to 2007–08, there were 55,401 hospital separations (or ‘episodes of care’) for community injury and poisoning for children aged 0–4 years. The rate of hospital separations for community injury and poisoning per 1,000 children was higher for Indigenous children than for all other children (20.3 and 14.2 respectively).

### Outcome 2: Adequate support to promote safety and early intervention

Supporting Outcome 2 aims to ensure that all children and families receive appropriate support and services to create conditions of safety and care for children. Where families have additional needs, it aims to ensure that early intervention and specialist services are available.

### Indicator 9: Antenatal visits

Antenatal care is important for the safety and wellbeing of infants<sup>1</sup>. Women who do not receive antenatal care are more likely to have adverse pregnancy outcomes, including preterm birth, post-partum haemorrhage, babies with low birth weight and perinatal death (Humphrey and Keating 2004; Orvis et al. 2002; Raatikainen et al. 2007). These adverse birth outcomes can have long-term negative impacts on the mental and physical wellbeing of both children and their mothers, and this, of course, can affect parenting capacity.

The National Framework indicator for this outcome is Indicator 9: Proportion of pregnant women who receive perinatal care. Data for this is not available; instead, a proxy measure is used: Proportion of women who gave birth by number of antenatal visits.

Table 15: Proportion of women who gave birth by number of antenatal visits

Antenatal visits	2008		2009	
	Number	Per cent	Number	Per cent
At least one visit	82,349	98.3	87,611	97.1
None	250	0.3	270	0.3
One	652	0.8	372	0.4
Two to Four	4,628	5.5	4,934	5.5
Five or more	77,069	92.0	82,305	91.2
Not stated	1,201	1.4	2,336	2.6
<b>Total</b>	<b>83,800</b>	<b>100.0</b>	<b>90,217</b>	<b>100.0</b>

Sources: AIHW National Perinatal Data Collection; Laws & Sullivan (2009); Australia's Mothers and Babies 2009.

Note: Data on the number of antenatal visits during pregnancy were available for Queensland, South Australia, the Australian Capital Territory and the Northern Territory. For the ACT, two to four antenatal visits includes women who had one antenatal visit and five antenatal visits. Care must be taken when interpreting percentages.

Data on the proportion of mothers who access antenatal services is only available for Queensland, South Australia, the Northern Territory and the Australian Capital Territory. During 2009, almost all (97.1 per cent) of women who gave birth had at least one antenatal visit, and 91.2 per cent had five or more visits. Only 0.3 per cent had no antenatal visits. Between 2008 and 2009, there has been very little change to the proportions of women who gave birth by number of antenatal visits.

### Indicator 6: Low birth weight

It is generally accepted that Infants born with a low birth weight have an increased risk of health, learning and behavioural problems.

Factors affecting low birth weight include:

- Inadequate prenatal care
- Alcohol and drug use (including tobacco)
- Poor maternal nutrition
- Poor maternal physical and mental health
- Maternal experiences of trauma or injury during pregnancy.

<sup>1</sup> According to the World Health Organisation (WHO), antenatal care includes recording medical history, assessment of individual needs, advice and guidance on pregnancy and delivery, screening tests, education on self care during pregnancy, identification of conditions detrimental to health during pregnancy, first line management and referral if necessary.

Table 16: Live birth babies, by birth weight and Indigenous status, 2009

	Indigenous	All
<b>Per cent</b>		
Birth weight <1,500gm	2.1	1.0
Birth weight 1,500 – 2,499gm	9.9	5.2
Birth weight <2,500gm	12.0	6.2
<b>Number</b>		
Birth weight < 2,500 gm	1,352	18,347
Total live births	11,267	296,791

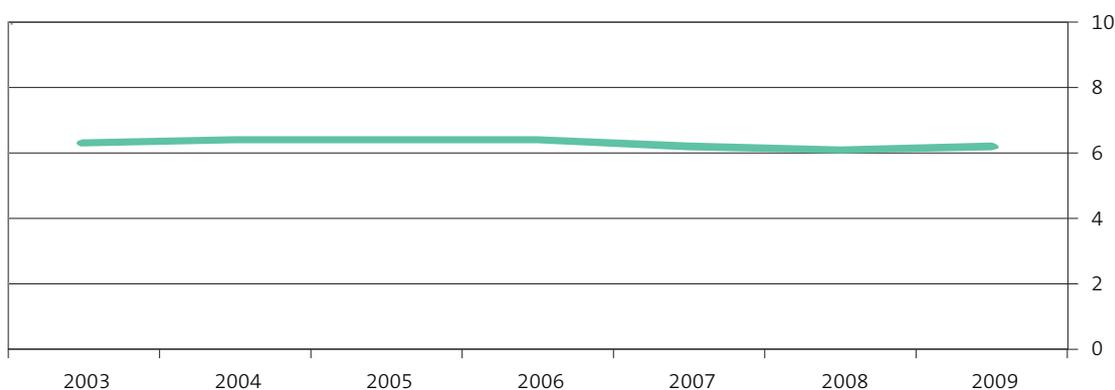
Notes: Data is provisional and may be revised at a later date.

Sources: AIHW National Perinatal Data Collection; Australia’s Mothers and Babies 2009

In 2009, 6.2 per cent of live-born infants had a low birth weight (<2,500 grams). Of these, 5.2 per cent were infants with a birth weight between 1,500 and 2,499 grams, and 1.0 per cent were infants weighing less than 1,500 grams.

Indigenous infants were almost twice as likely to have a low birth weight compared to all infants (12.0 per 1,000 compared to 6.2 per 1,000).

Figure 7: Per cent of live births with a low birth weight



Notes: Data is provisional and may be revised at a later date.

Sources: AIHW National Perinatal Data Collection; Australia’s Mothers and Babies 2009

Between 2003 and 2009, the proportion of live-born infants of low birth weight has remained virtually unchanged, decreasing marginally from 6.3 per 1,000 in 2003 to 6.2 per 1,000 in 2009.

*Indicator 7: Child protection notifications*

A child protection notification is a report made to an authorised department about possible child abuse or neglect, child maltreatment or harm to a child. If a child protection service receives a notification, it will assess the situation—usually under legislative guidelines—and may act in the following ways:

- Initiating a formal investigation
- Referring the child or family to another service, or
- Closing the case if no action is warranted.

Notifications are not a good indicator of child abuse or neglect. However, they are a useful indicator of the number of children about whom individuals or professionals within the community have expressed concern. They may also provide an opportunity for some families to be brought into contact with support and services.

**Table 17: Children subject of a child protection notification**

Year	Number <sup>(a)</sup>	Rate per 1,000
2010–11 <sup>(b)</sup>	163,767	31.9
2009–10 <sup>(b)</sup>	187,314	36.8
2008–09	207,462	41.2
2007–08	195,387	39.3
2006–07	188,408	38.3
2005–06	167,433	34.7
2004–05	161,930	33.7

Sources: AIHW *Child Protection Australia 2009–10*; AIHW *Child Protection Australia 2010–11*.

<sup>(a)</sup> These data count the number of children subject to a notification, not the number of substantiations.

<sup>(b)</sup> Data for 2009–10 for Western Australia are not comparable with other years, due to the introduction of a new client information system in March 2010. Proxy data were provided for that year.

Note: 2006–07 data do not match previously published information due to retrospective updates.

In 2010–11, 163 372, or 31.9 per 1,000 children were the subject of a child protection notification. The number and rate has decreased for the last two years, after a high of 207 462 in 2008–09. The 2008–09 peak may have resulted from changes in the reporting practices during the period or from enhanced public awareness as a result of legislative changes or inquiries into child protection processes.

#### *Indicator 8: Intensive Family Support Services*

Intensive Family Support Services (IFSS) offers early intervention when child protection concerns are identified, helping to avoid the need for out-of-home care. It is also provided to help reunite families after a child has been removed from their family. The rate of children who commence with IFSS is a proxy indicator of the support children and families are receiving to allow children to live safely in their home environment.

Between 2008–09 and 2009–10, the total number of children commencing family support services remained stable; however, the distribution between age groups varied. The 0–4 year age group decreased by 2,824 (39.7 per cent), and the 10–14 year age group increased by 2,670 (97.0 per cent).

Data for 2010–11 excludes Victoria and therefore is not comparable with previous years. Historically, Victoria accounts for approximately 5,000 children. The availability of data from jurisdictions has varied over time, and therefore any historical comparisons must be made with caution.

**Table 18: Number of children commencing family support services, by age**

Age group (years)	2008–09	2009–10	2010–11 <sup>(a)</sup>
0–4	7,115	7,551	5,900
5–9	3,997	4,044	3,040
10–14	2,745	2,387	1,517
15–17	791	975	357
<b>Total children<sup>(b)</sup></b>	<b>15,545</b>	<b>15,432<sup>(c)</sup></b>	<b>11,384</b>

<sup>(a)</sup> 2010-11 data excludes Victoria, which was unavailable at the time of this report. Historically, Victoria accounts for approximately 5,000 children.

<sup>(b)</sup> Includes children whose age was unknown.

<sup>(c)</sup> Includes 475 children of unknown age.

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

#### *Indicator 10: Australian Early Development Index (AEDI)*

Children’s wellbeing and future opportunities are increased by a healthy start to life and good early development. The proportion of children who meet developmental milestones, therefore, provides an indicator of children’s general safety and wellbeing. The proportion of children who are developmentally vulnerable is a useful indicator of children in need of intervention to meet developmental milestones.

The AEDI is a population-wide measure of young children’s development as they progress into the school environment. It is measured against the following five domains:

- Physical health and wellbeing
- Social competence
- Emotional maturity
- Language and cognitive skills
- Communication skills and general knowledge.

The AEDI is completed every three years and is due in 2012.

**Table 19: AEDI results, children developmentally vulnerable, by Indigenous status**

	Developmentally vulnerable on:			
	One or more domains		Two or more domains	
	No.	%	No.	%
All	246,421	23.6	246,873	11.8
Indigenous	11,190	47.4	11,181	29.6
Non-Indigenous	235,231	22.4	235,692	11.0

Note: These figures may differ slightly to those published in *Protecting Children is everyone’s Business: Annual Report 2009–2010* due to data revisions.

Source: *A Snapshot of Early Childhood Development in Australia, Australian Early Development Index (AEDI) National Report 2009 Re-Issue* March 2011.

Key findings from the 2009 AEDI report were:

- 23.6 per cent of Australian children were rated as developmentally vulnerable on one or more AEDI domains, and 11.8 per cent were developmentally vulnerable on two or more domains
- Indigenous children were more than twice as likely as non-Indigenous children to be rated as developmentally vulnerable on one or more AEDI domains (47.4 per cent compared to 22.4 per cent). They were around three times more likely to be rated as developmentally vulnerable on two or more AEDI domains (29.6 per cent compared to 11.0 per cent)
- 22.0 per cent of Australian Indigenous children speak a language other than English in the home.

#### *Indicator 13: Mental health*

Mental Health issues in children can be a result of many factors, including genetics, temperament and low self-esteem (AIHW 2009). Other factors such as bullying and discrimination can also contribute to mental health issues in children.

Negative outcomes for children with mental health issues include poor educational achievement, drug and alcohol abuse, poor sexual health, self-harm and suicide. These issues often extend into adulthood and affect job prospects and relationships.

No new data for mental health have become available since the release of the 2009–10 Annual Report to COAG.

**Table 20: Mental health problems among children aged 4–14 years, 1998**

Internalising problems	12.9
Externalising problems	12.9
Total mental health problems	14.3

Source: AIHW analysis of the 1998 Child and Adolescent Component of the National Survey of Mental Health and Wellbeing, unit record file as presented in AIHW A Picture of Australia's Children 2009.

The most recent, reliable national data on children's mental health was reported in the child and adolescent component of the 1998 *National Survey of Mental Health and Wellbeing*. At the time, approximately 14 per cent of children aged 4–14 years were reported to have mental health problems (Table 21).

### **Outcome 3: Risk factors for child abuse and neglect are addressed**

#### *Indicator 14: Homelessness*

Homelessness can have a negative impact upon children's physical and mental health.

Children who experience homelessness with their family are at a greater risk of having experienced abuse and neglect than children who do not experience homelessness. Children who are experiencing homelessness alone may be unable to live at home because of abuse and neglect. Unaccompanied homeless children are at a high risk of sexual and physical assault after they have left home, as a result of the unsafe conditions in which they often live.

**Table 21: Rate per 1,000 children accessing assistance through homelessness services (accompanied and unaccompanied)**

Year	Age group	Accompanied		Unaccompanied	
		No.	Rate/1,000	No.	Rate/1,000
2010–11	0–4	38,100	26.1	1,300	0.9
	5–9	24,300	17.8	300	0.2
	10–14	18,400	13.1	2,100	1.5
	15–17	7,200	8.2	12,600	14.2
	<b>0–17</b>	<b>88,000</b>	<b>17.2</b>	<b>16,200</b>	<b>3.2</b>
2009–10	0–4	37,100	26.1	1,300	0.9
	5–9	23,500	17.3	300	0.2
	10–14	17,200	12.2	2,200	1.5
	15–17	6,400	7.3	12,800	14.6
	<b>0–17</b>	<b>84,100</b>	<b>16.6</b>	<b>16,600</b>	<b>3.3</b>
2008–09	0–4	35,100	25.4	1,400	1.0
	5–9	22,000	16.3	400	0.3
	10–14	16,200	11.5	2,200	1.6
	15–17	5,800	6.6	12,800	14.7
	<b>0–17</b>	<b>79,100</b>	<b>15.8</b>	<b>16,800</b>	<b>3.4</b>

Notes:

1. Data are weighted to adjust for agencies that do not participate in the collection and clients that do not consent to provide personal data.
2. Weighted numbers of children are rounded to the nearest 100.

Source: AIHW SAAP National Data Collection (unpublished data).

In 2010–11, 88,000 children (17.2 per 1,000 children) accompanied by an adult needed assistance through homelessness services. An additional 16,200 children (3.2 per 1,000 children) unaccompanied by an adult required assistance through homelessness services.

Indigenous children accompanied by an adult are more than seven times more likely than non-Indigenous children to seek assistance through homelessness services (88.3 per 1,000 children compared to 12.5 per 1,000 children). Similarly, rates for Indigenous unaccompanied children seeking assistance are around five times higher than for non-Indigenous children (12.9 per 1,000 compared to 2.5 per 1,000).

#### *Indicator 15: Adult abuse of alcohol or other drugs*

The abuse of alcohol or drugs can compromise a parent’s ability to provide a safe environment for children and can interfere with their ability to respond adequately to a child’s emotional needs (Dawe 2007).

To support a habit, parents may become involved in illegal activity such as theft and prostitution that can place children at further risk (Dawe, Harnett & Frye 2008). High rates of child maltreatment have been reported in families with parental substance misuse (Dawe 2007).

**Table 22: Proportion of parents with children aged 0–14 years who used an illicit substance, or a licit substance for non-medical purposes**

	Number		Per cent	
	Adults <sup>(a)</sup> with Children <sup>(b)</sup>	Adults <sup>(a)</sup> without Children <sup>(b)</sup>	Adults <sup>(a)</sup> with Children <sup>(b)</sup>	Adults <sup>(a)</sup> without Children <sup>(b)</sup>
<b>2010</b>				
Used a licit substance for non-medical purposes	155,300	395,100	3.1%	4.7%
Used any illicit excluding pharmaceuticals	562,100	1,111,400	11.1%	13.1%
<b>Used any illicit substance or licit substance for non-medical purposes</b>	<b>663,100</b>	<b>1,355,500</b>	<b>13.1%</b>	<b>16.0%</b>
<b>2007</b>				
Used a licit substance for non-medical purposes	120,500	346,800	2.9%	4.2%
Used any illicit excluding pharmaceuticals	430,300	983,200	10.2%	11.8%
<b>Used any illicit substance or licit substance for non-medical purposes</b>	<b>524,200</b>	<b>1,205,500</b>	<b>12.4%</b>	<b>14.5%</b>

Source: AIHW Drug Survey, unpublished data.

<sup>(a)</sup> Adults are persons aged 18 years or more.

<sup>(b)</sup> Dependent children aged 0–14 years.

The 2010 National Drug Strategy Household Survey found that 13.1 per cent of parents with children aged 0–14 years had used either an illicit substance (such as marijuana or ecstasy) or a licit substance (such as pain killers) for non-medical purposes in the previous 12 months. This is a slight increase from 12.4 per cent in 2007.

This pattern is similar for adults without children. The proportions that had used either an illicit substance or a licit substance for non-medical purposes increased from 14.5 per cent to 16.0 per cent.

Overall, adults without children were more likely to use an illicit substance or a licit substance for non-medical purposes (16.0 per cent compared to 13.1 per cent for adults with children).

#### *Indicator 18: Joblessness*

Children living in poverty face a range of challenges including a higher risk of low birth weight, lower school readiness rates, poorer literacy skills and the corrosion of family relationships due to the stress associated with poverty (Smart, Sanson, Baxter, Edwards & Hayes 2008; CCCH 2009a).

While most children living in poverty do not experience abuse or neglect (Gutermann 2000; McSherry 2004; Crosson-Tower 2005), family poverty can be a key factor for child abuse and neglect. This is probably related to other risk factors for abuse and neglect, such as substance misuse, mental illness and homelessness, which are also associated with poverty (Guterman 2001). People who are jobless are at high risk of poverty (ACOSS 2009).

**Table 23: Number of children aged 0–14 years in jobless families**

	2006–07	2009–10
Children in couple families		
Neither parent employed	152	206
All	3,273	3,488
Children in one-parent families		
Parent not employed	326	347
All	675	686
Total children in families		
No parent employed	478	552
All	3,949	4,174

Source: *Family Characteristics and Transitions, Australia* (ABS Cat. No. 4442.0).

In 2009–10, 552,000 children aged 0–14 years lived in families in which no parent was employed, accounting for 13.2 per cent of all children aged 0–14 in families. Almost two-thirds (62.9 per cent) of these children lived in one-parent families.

The number of children aged 0–14 years living in jobless families has increased by 74,000, or 15.5 per cent, since 2006–07. Most of this increase (54,000) has occurred in couple families.

#### **Outcome 4: Children who have been abused or neglected receive the support and care they need for their safety and wellbeing**

This supporting outcome is about providing timely, appropriate, high-quality child protection and other support services to children and young people who have been abused (or are at risk of abuse).

##### *Indicator 19: Children in out-of-home care*

The removal of children from the care of their parents is generally viewed as an ‘intervention of last resort’; however, there will always be a population of children who are unable safely to remain in the care of their parents.

**Table 24: Children in out-of-home care**

	2010		2011	
	Number	Per cent	Number	Per cent
Home-based care				
Foster care	16,551	46.1	16,805	44.6
Relatives/kin	16,336	45.5	17,276	45.9
Other home-based care	762	2.1	1,005	2.7
<i>Total home-based care</i>	<i>33,649</i>	<i>93.7</i>	<i>35,086</i>	<i>93.2</i>
Other care				
Residential care	1,832	5.1	1,999	5.3
Independent living	156	0.4	167	0.4
Other	151	0.4	147	0.4
Family group homes	107	0.3	249	0.7
<i>Total other care</i>	<i>2,246</i>	<i>6.3</i>	<i>2,562</i>	<i>6.8</i>
<b>Total</b>	<b>35,895</b>	<b>100.0</b>	<b>37,648</b>	<b>100.0</b>

Source: AIHW *Child Protection, Australia 2010–11*; *Child Protection Australia 2009–10*.

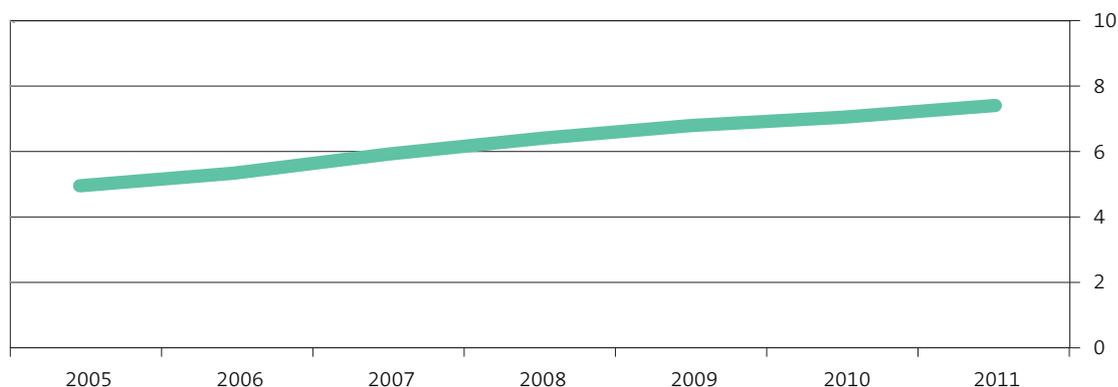
Notes:

1. Multiple placement types for each child can occur.
2. 2011 data do not match previously published totals due to retrospective updates.

At 30 June 2011, there were 37,648 children in out-of-home care. Of these, 35,086 (93.2 per cent) were in home-based care (44.6 per cent in foster care, 45.9 per cent in relative/kin care), and nearly 7 per cent were in other types of care.

The number and rates per 1,000 children in out-of-home care continue to increase steadily; see Figure 8 below.

**Figure 8: Trends in children aged 0–17 years in out-of-home care 30 June 2005 to 30 June 2011 (per 1,000)**



Source: AIHW *Child Protection Australia 2010–11*.

Note: Some rates may not match those published in previous publications of *Child Protection Australia* due to retrospective updates to data.

### Indicator 20: Households commencing and exiting foster care

Foster carers can play an important role in caring for children who cannot live with their family. Research with young people in care and care leavers found that most children in care report that they are fairly happy and think they are better off as a result of being in foster care (Defabro, Barber & Benthon 2002; NSW Community Services Commission 2000).

**Table 25: Households commencing and exiting foster care**

	2009–10	2010–11
	Number	
Households commencing foster care	1,427 <sup>(b)</sup>	1,676
Households exiting foster care	1,151 <sup>(b)(c)</sup>	1,192 <sup>(c)</sup>
Net change <sup>(a)</sup>	+ 276	+ 484

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*; *Child Protection Australia 2009–10*; *NFPAC Annual Report 2009–10*.

(a) 'Net change' does not necessarily reflect sector capacity. These data capture authorisation status, regardless of whether the household actually had a child placed in their care in that period. Delays in administrative processes may result in overcounting the net increase in foster care households.

(b) Excludes Queensland.

(c) Excludes NSW.

The number of households commencing foster care has increased by almost 250, between 2009–10 and 2010–11. The number of households exiting foster care has also increased, but to a lesser degree i.e. of around 40 households. This has resulted in a theoretical increase of just over 200 foster carer households between the two years. Care should be taken when interpreting the net change. As stated in the table note above, the net increase in households may be an overcount and does not necessarily reflect sector capacity.

### Indicator 21: Investigations finalised by time taken to complete investigation

An investigation is where a department responsible for child protection seeks more detailed information about a child who is the subject of a notification and then makes an assessment about the harm or degree of harm to the child and their protective needs (AIHW 2010). The duration of time between the notification date and when an investigation is finalised indicates whether children experiencing child abuse and neglect are receiving the care and support they need in a timely manner.

**Table 26: Number of finalised investigations, by time taken to complete**

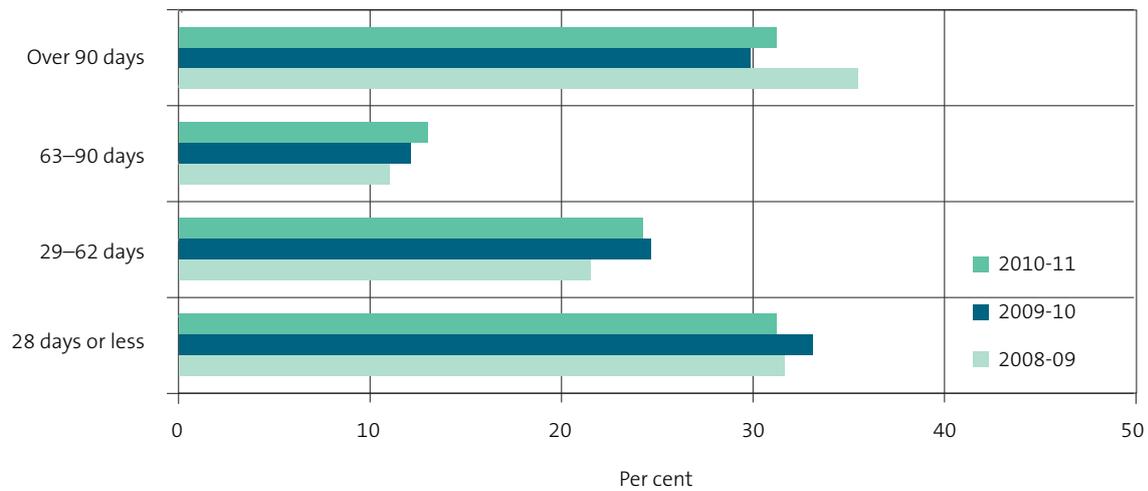
	2008–09 <sup>(a)</sup>		2009–10 <sup>(a)</sup>		2010–11 <sup>(a)</sup>	
	No.	%	No.	%	No.	%
28 days or less	17,101	31.7	16,339	33.2	17,762	31.3
29–62 days	11,627	21.6	12,204	24.8	13,823	24.3
63–90 days	6,001	11.1	5,977	12.1	7,442	13.1
More than 90 days	19,134	35.5	14,698	29.9	17,774	31.3
<b>Total</b>	<b>53,863</b>	<b>100.0</b>	<b>49,218</b>	<b>100.0</b>	<b>56,801</b>	<b>100.0</b>

Source: AIHW Child Protection Data Collections.

<sup>(a)</sup> NSW data not available for 2008–09, 2009–10 and 2010–11

Between 2009–10 and 2010–11, the number of finalised investigations increased by 15 per cent, from 49,218 to 56,801. Over the three years since 2008–09, the time taken to complete investigations remained reasonably consistent. In 2010–11, just under one-third (31.3 per cent) of investigations were finalised in 28 days or less, and the same proportion (31.3 per cent) took more than 90 days; see Figure 9 below.

Figure 9: Proportion of finalised investigations, by time taken<sup>(a)</sup>



Source: AIHW Child Protection Data Collections.

<sup>(a)</sup> NSW data not available for 2008-09, 2009-10 and 2010-11

*Indicator 23: Educational outcomes*

Australian children on guardianship and custody orders generally have much lower educational outcomes. This may be due to a range of factors, including higher absenteeism, tardiness, truancy and dropout rates; lower scores on standardised tests; and higher rates of being kept back a year (Cavanagh 1996).

Table 27: Proportion of children on guardianship/custody orders achieving the national reading and numeracy benchmarks, by Indigenous status, 2003–2006

		Indigenous Australians			Other Australians		
		Per cent	95% CI	Sample size	Per cent	95% CI	Sample size
<b>Reading benchmark</b>							
2006	Grade 3*	70.2	61.3–78.2	121	83.1	78.8–86.8	360
	Grade 5*	47.0	38.9–55.3	151	63.6	58.8–68.1	428
	Grade 7*	43.5	34.9–52.4	131	67.9	63.3–72.3	424
2005	Grade 3	67.2	57.9–75.7	116	78.7	73.9–82.9	338
	Grade 5*	36.8	28.4–45.9	125	61.0	56.0–65.9	385
	Grade 7*	55.0	46.0–63.8	129	72.2	67.6–76.5	403
2004	Grade 3	83.2	75.2–89.4	119	86.0	82.2–89.3	387
	Grade 5*	50.0	40.4–59.6	112	66.6	61.5–71.4	365
	Grade 7	66.0	55.7–75.3	97	79.3	74.6–83.4	352
2003	Grade 3*	63.0	53.1–72.1	108	78.8	74.2–83.0	354
	Grade 5	53.8	44.9–62.6	130	64.9	59.8–69.8	365
	Grade 7*	57.1	46.3–67.5	91	72.4	67.8–76.7	413
<b>Numeracy benchmark</b>							
2006	Grade 3*	45.3	36.5–54.3	128	75.0	70.2–79.4	364
	Grade 5*	45.0	36.9–53.3	151	64.0	59.3–68.5	433
	Grade 7*	27.3	19.9–35.7	132	53.9	49.0–58.8	421
2005	Grade 3*	59.0	49.5–68.0	117	77.5	72.7–81.8	346
	Grade 5*	49.2	40.3–58.2	128	69.5	64.6–74.1	377
	Grade 7*	39.7	31.1–48.8	126	56.1	51.1–61.0	401
2004	Grade 3*	58.9	49.7–67.6	124	75.4	70.8–79.6	386
	Grade 5*	46.2	36.9–55.6	117	70.3	65.4–74.9	377
	Grade 7*	35.8	26.2–46.3	95	52.9	47.5–58.2	346
2003	Grade 3	62.8	53.2–71.7	113	75.7	70.9–80.0	362
	Grade 5*	45.9	37.2–54.7	133	70.8	65.9–75.3	380
	Grade 7*	29.8	20.8–40.1	94	58.2	53.3–63.0	416

Notes:

1. Includes all children in the study population who had the test score data required to calculate achievement of the national benchmarks (that is, sat test, exempt). Data only include children on guardianship/custody orders attending government schools in the five participating states (Vic, Qld, WA, SA and Tas).
2. Asterisks indicate statistically significant differences between the proportions of Indigenous and non-Indigenous children achieving the national benchmark.

Source: AIHW Educational outcomes 2008 pilot data collection; AIHW: Educational Outcomes of children on guardianship or custody orders: a pilot study, stage 2, January 2011.

Between 2003 and 2006, the proportion of children on guardianship and custody orders achieving national numeracy benchmarks varied across years and grades but, overall, decreased by Year 7. There was more variation amongst the proportions achieving national reading benchmarks, with a general decrease in Year 5 before improvements in Year 7.

Between 2003 and 2006, the proportion of Indigenous children on guardianship and custody orders achieving national reading and numeracy benchmarks was significantly lower than that of their non-Indigenous counterparts.

### Outcome 5: Indigenous children are supported and safe in their families and communities

Ensuring Indigenous children are supported and safe in strong, thriving families and communities to reduce the over-representation of Indigenous children in child protection systems. For those Indigenous children in child protection systems, culturally appropriate care and support is provided to enhance their wellbeing.

#### *Indicator 24: Rates per 1,000 Indigenous children with substantiated cases compared to other children*

Aboriginal and Torres Strait Islander children are over-represented in child protection services (Berlyn and Bromfield 2009). This suggests that Aboriginal and Torres Strait Islander children are more likely to be abused or neglected than other children.

The reasons that Aboriginal and Torres Strait Islander children are more likely to be abused or neglected are multiple and complex. Past and ongoing dispossession, social exclusion and racism have contributed to high levels of unresolved trauma among Aboriginal and Torres Strait Islander people. This unresolved trauma can be expressed in ways that are destructive, such as substance abuse (Berlyn and Bromfield 2009). This has a negative impact on parenting capacity and family functioning and increases the risk of children experiencing abuse or neglect.

**Table 28: Rate per 1,000 Indigenous children with substantiated cases compared to other children**

	2010	2011
Indigenous	35.3	34.6
Non-Indigenous	4.6	4.5
All children	6.1	6.1
Rate ratio Indigenous/Non-Indigenous	7.7	7.6

#### Notes

1. Legislation and practice differs across jurisdictions in relation to children aged 17. In some jurisdictions, children aged 17 are not substantiated, and this means the number per 1,000 children who were the subject of a substantiation may be lower for those jurisdictions.
2. Rate ratios are calculated by dividing the unrounded rate of Aboriginal and Torres Strait Islander children who were the subject of substantiations by the unrounded rate of non-Indigenous children who were the subject of substantiations. The resulting number is a measure of how many Aboriginal and Torres Strait Islander children were the subjects of substantiation for every non-Indigenous child who was the subject of substantiation.

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

#### *Indicator 25: Rates per 1,000 Indigenous children in out-of-home care compared to other children*

Aboriginal and Torres Strait Islander children are over-represented in out-of-home care compared to other children.

It has already been noted that the effects of out-of-home care on children can vary, depending on the individual child and their circumstances. For Aboriginal and Torres Strait Islander children, there is a particular concern that out-of-home care may result in loss of contact with their family of origin, their community and their culture.

This concern is based on an acknowledgment of the damaging impact of past practices of cultural assimilation and forced removal of Aboriginal and Torres Strait Islander children from their families, resulting in mutual grief and trauma and the loss of important cultural links and cultural knowledge (Human Rights and Equal Opportunity Commission 1997).

Although out-of-home care may be beneficial for children who are unsafe living with their families of origin, it is generally viewed as an 'intervention of last resort', and there is a preference for children to be reunited with their birth parents wherever possible (Bromfield and Osborn 2007, Bromfield, Higgins, Higgins & Richardson 2007).

**Table 29: Rate per 1,000 Indigenous children in out-of-home care compared to other children**

	2010	2011
Indigenous	48.4	51.7
Non-Indigenous	5.0	5.1
All children(a)	7.0	7.3
Rate ratio	9.7	10.1

(a) 'All children' includes children whose Indigenous status was unknown. This equates to 148 children in 2010 and 361 children in 2011.

Note: Rate ratios are calculated by dividing the unrounded rate of Aboriginal and Torres Strait Islander children who were in out-of-home care by the unrounded rate of non-Indigenous children who were in out-of-home care. The resulting number is a measure of how many Aboriginal and Torres Strait Islander children were in out-of-home care for every one non-Indigenous child who was in out-of-home care.

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

#### *Indicator 26: Proportion of Indigenous children placed in accordance with the Indigenous Child Placement Principle*

The Aboriginal and Torres Strait Islander Child Placement Principle states that the preferred order of placement for an Aboriginal and Torres Strait Islander child who has been removed from their birth family is:

- With the child's extended family
- Within the child's Indigenous community, or
- With other Indigenous people.

Only if an appropriate placement cannot be found from the three groups can an Aboriginal or Torres Strait Islander child be placed with a non-Indigenous carer (Lock 1997). The principle has been endorsed by all states and territories in Australia (Bromfield & Berlyn 2009).

The Indigenous Child Placement Principle is an acknowledgement of the previously discussed harmful practices that removed Indigenous children from their families and communities (Bromfield & Berlyn 2009).

**Table 30: Aboriginal and Torres Strait Islander children in out-of-home care, by Indigenous status and relationship of carer, Australia, 30 June**

Relationship	2010		2011	
	No	%	No	%
Indigenous relative/kin	4,633	40.6	4,803	39.0
Other Indigenous caregiver	2,001	17.5	2,055	16.7
Other relative/kin	1,412	12.4	1,657	13.5
<i>Total placed with relatives/kin or other Indigenous caregivers</i>	<i>8,046</i>	<i>70.5</i>	<i>8,515</i>	<i>69.2</i>
<i>Total not placed with relatives/kin or other Indigenous caregivers</i>	<i>3,370</i>	<i>29.5</i>	<i>3,788</i>	<i>30.8</i>
<b>Total</b>	<b>11,416</b>	<b>100.0</b>	<b>12,303</b>	<b>100.0</b>

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

Notes:

1. This table does not include Indigenous children who were living independently or whose living arrangements were unknown.
2. Percentages in tables may not add to 100 due to rounding.
3. Family group homes and residential care are reported under 'other caregiver'.

At 30 June 2011, just over two-thirds (69.2 per cent) of Aboriginal and Torres Strait Islander children in out-of-home care were placed with relatives/kin, with other Indigenous caregivers or in Indigenous residential care. The majority of these children (56.4 per cent) were placed with Indigenous relatives/kin. There has been very little change to these proportions since 2010.

## Outcome 6: Child sexual abuse and exploitation is prevented and survivors receive adequate support

This supporting outcome aims to protect children from all forms of sexual exploitation and abuse through targeted prevention strategies. It is also about supporting survivors in the community through specific therapeutic and legal responses.

Currently, there is only one indicator available to measure progress against this outcome: Number and rate of children with substantiations related to sexual abuse.

### Indicator 28: Substantiations by type of abuse and neglect

Experiencing child sexual abuse affects children's psychological and physical health (Feiring, Taska & Lewis 1996; Kendall-Tackett et al. 1993; Wurtele 2006). Individuals who are sexually abused in childhood may have long-term difficulties lasting well into adulthood, including difficulty maintaining adult relationships, low self-esteem and mental health problems including depression and anxiety (Mullen & Fleming 1998).

Other types of abuse and neglect are generally viewed as a symptom of family dysfunction and parenting problems. Sexual abuse is different, with multiple types of potential perpetrators. These include adult family members of the child, adults in a position of power or authority over the child (such as a teacher or doctor), adults with no familial or authority relationship to the child, adolescent or child family members, and nonfamilial adolescent or child perpetrators (Price-Robertson, Bromfield & Vassallo 2009).

**Table 31: Children aged 0–17 years who were the subject of a substantiation<sup>(a)</sup> of a notification received during the year, by type of abuse or neglect and Indigenous status, Australia**

	Indigenous children		Non-Indigenous children		All children <sup>(b)</sup>	
<b>2010–11</b>						
Physical	1,641	19.9	5,265	23.8	7,186	22.8
Sexual	802	9.7	3,398	15.3	4,427	14.0
Emotional	2,659	32.3	8,339	37.7	11,290	35.8
Neglect	3,113	37.8	5,104	23.0	8,570	27.2
<b>Total</b>	<b>8,231</b>	<b>100.0</b>	<b>22,144</b>	<b>100.0</b>	<b>31,527</b>	<b>100.0</b>
<b>2009–10</b>						
Physical	1,670	20.0	5,390	24.1	7,169	22.9
Sexual	732	8.8	3,330	14.9	4,155	13.3
Emotional	2,805	33.7	8,445	37.8	11,549	36.9
Neglect	3,127	37.5	5,170	23.1	8,422	26.9
<b>Total</b>	<b>8,334</b>	<b>100.0</b>	<b>22,335</b>	<b>100.0</b>	<b>31,295</b>	<b>100.0</b>

<sup>(a)</sup> <sup>(b)</sup> 'All children' includes children whose Indigenous status is unknown. This equates to 626 children in 2009–10 and 1,152 children in 2010–11.

Notes:

1. Finalised investigations, including substantiations, refer only to cases which were notified during the reporting year, not the total number of investigations finalised during the reporting year.
2. If a child was the subject of more than one type of abuse or neglect as part of the same notification, then the abuse and/or neglect is the one considered by the child protection workers to cause the most harm to the child. Where a child is the subject of more than one substantiation during the year, then the type of abuse reported in this table is the type of abuse and/or neglect associated with the substantiation decision relating to the earliest notification during the year.
3. Percentages in tables may not add to 100 due to rounding.

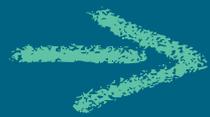
Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010–11*.

In 2011, Indigenous children who were the subject of a substantiated sexual abuse accounted for 9.7 per cent of all substantiations relating to Indigenous children. The majority of substantiations involving Indigenous children relate to emotional abuse or neglect (32.3 per cent and 37.8 per cent respectively). In comparison, 15.3 per cent of non-Indigenous children were subject to substantiations of sexual abuse, and substantiations of abuse were more likely to relate to emotional abuse (37.7 per cent).

There has been very little change to the numbers of substantiations or the distributions across types of substantiations between 2009–10 and 2010–11.

When interpreting this data, note that, if a child was the subject of more than one type of abuse or neglect as part of the same notification, then the abuse and/or neglect is the one considered by the child protection workers to cause the most harm to the child.





# Chapter five

Maintaining the momentum



# Chapter five:

## Maintaining the momentum

### The story so far

We are still in the initial stages of implementing the National Framework, but we are firmly focused on building the foundation for the National Priorities. Already there are encouraging signs, signs we expect to become more pronounced as work continues over the life of the Framework.

It is gratifying that the level of commitment to the National Framework by all partners remains strong. This document, together with the strategies it incorporates, has fostered unprecedented levels of cooperation between all levels of government, as well as with their non-government counterparts, and this is critical to arresting the downward slide of child protection statistics.

Leadership of most National Priorities under the Framework to date has been by the Commonwealth. The 'Responding to Sexual Abuse' National Priority is the first example of another jurisdiction agreeing to take the lead. Queensland initially took the lead; then, following the devastating Queensland floods, Western Australia agreed to take over. This is an indication of the collaborative approach in action. It is anticipated this collaborative leadership will be further developed as implementation of the National Framework progresses.

The release, during this reporting period, of the National Standards for out-of-home care was a breakthrough. For the first time, states and territories agreed to a set of national benchmarks relating to children who are unable to live with their parents. Child protection systems still vary markedly across the country, with each state and territory having its own child protection policy, standards and legislations; however, these Standards are exploring the opportunity for consistency.

This cooperation, collaboration and commitment between the Commonwealth, states and territories, and the non-government sector will only grow throughout the life of the National Framework as protecting Australia's children continues to be everyone's business.

### The future

During the next 12 months of the National Framework and beyond, we will continue to build on the National Priorities under the first action plan. We will also start preparing for the second three-year action plan. Some priorities under the new action plan will be familiar; others will be new, based on identified areas of need. All will be committed to ensuring the safety and wellbeing of Australia's children.

The National Framework recognises the role and importance of all elements of the child protection system, beginning with preventative measures, reaching into early intervention services for vulnerable families, supporting targeted services and programs for 'at-risk' families and concluding with statutory responses as a last resort.

The Commonwealth, state and territory governments, as well as the non-government sector, remain committed to continuing the momentum the National Framework has built around prevention as the primary way of delivering better outcomes for children, young people and their families. Early prevention and education will always be the preferred options for keeping our children safe and well.

Further work will be undertaken to refine early identification and intervention mechanisms for vulnerable children and families.

Priority is placed on having universal supports available to all families so, wherever possible, families can be preserved, and children can grow up healthy, happy and at home.

As the National Framework moves into its second three-year action plan, targeted services and programs will be further refined as we gain a better understanding of what works and are able to adjust service responses to better meet the needs of 'at-risk' families and their children.

Where the intervention of statutory child protection agencies has been necessary, ensuring the optimal health and wellbeing of children placed in out-of-home care is of the utmost importance. The implementation of National Standards for out-of-home care will continue to provide a focus for improving the experiences for these children, and there is much goodwill around progressing measurements and reporting against them.

It is well recognised that Indigenous children are still over-represented within most of the indicators of poor outcomes. The reasons behind this are complex, often including a combination of intergenerational cycles of adversity and trauma, social problems such as poverty and violence, and social and family dysfunction. In some cases, isolation is also a barrier to accessing resources.

Dealing with these additional challenges requires a holistic approach, placing a focus on Indigenous-specific issues within all areas of work throughout the National Framework. Work will also be undertaken to eliminate geographical location as a barrier to reaching children in regional and remote areas through online resources.

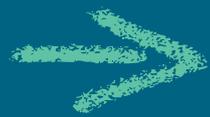
## Evaluating our strategies

The National Framework was designed to be a 'living' document, one which would be altered and enhanced over time to reflect changes in the children's policy arena and show progress against the outcomes.

The first evaluation of the National Framework is scheduled to be completed by the end of 2012, coinciding with the conclusion of the first three-year action plan.

A comprehensive evaluation, which will look at issues encountered and progress made during the first three-year action plan, will provide the blueprint for all future evaluations. Consistent evaluations are essential, given the long-term and fluid nature of the National Framework. Regular assessments of progress against the outcomes will ensure resources are directed to those areas with highest need and will inform the development of future action plans.





# Appendixes



# Appendix One: Status report of actions contained in the action plan

## Introduction

To achieve the supporting outcome, strategies and actions have been implemented across the jurisdictions. The following information was provided by each jurisdiction reporting on the progress and achievements over the last twelve months.

## Supporting outcome 1: Children live in safe and supportive families and communities

### Strategy 1.1: Strengthen the capacity of families to support children

#### Action 1.1.A: Continue to establish and support family and children's centres

**ACT** The new Child and Family Centre opened in May 2011 in West Belconnen, and it is the third Child and Family Centre, along with the two highly successful Centres in Tuggeranong and Gungahlin.

West Belconnen Child and Family Centre is funded jointly via the Indigenous Early Childhood Development National Partnership Agreement (until June 2014) and the ACT Government. The Gungahlin and Tuggeranong Centres are fully funded by the ACT Government.

The three Child and Family Centres provide innovative and integrated universal and targeted services which include services for the local Aboriginal and Torres Strait Islander community.

Community relationships have been established and are continuing to influence the provision of services which are provided from the centre.

The Community Services Directorate currently provides resources to community organisations to provide complementary support services across Canberra.

**NSW** In NSW, Community Services commenced establishment and support of Family and Children's Centres with the construction of the nine centres scheduled to commence in early 2012, completed mid-2013 and managed in partnership with NGOs. Centre Managers will commence delivering interim services from temporary premises during the construction period. Planning for integration and coordination of existing services has also commenced.

**VIC** A total of 75 children's centres have been established since 2003, and 29 new centres are in the planning and construction stages.

**QLD** The Department of Communities continues to implement the Referral for Active Intervention (RAI) in 11 sites. RAI services provide a range of direct supports and referral to other services to improve the safety and wellbeing of vulnerable children (including unborn children), young people and their families who may progress into the statutory child protection system in the absence of an intervention.

The Department of Education and Training established four Early Years Centres in North Gold Coast, Caboolture, Browns Plains and Cairns. The Early Years Centres and associated satellite services across the state are 'one-stop-shops' where children and their families can access integrated early childhood education and care, and parenting and family support services, in one location.

- The 'Next Step Logan-Beenleigh Young Person's Project' has commenced.
- NT The Integrated Family Services Working Group will ensure a continuing high-level commitment to services including Child and Family Centres.
- SA The South Australian Government has committed \$26.5 million over four years from 2010–11 for the establishment of a further 10 *Children's Centres for Early Childhood Development and Parenting*, bringing the total to 34 Children's Centres providing services to children and families.
- An allied health program, including speech pathology and occupational therapy services, currently operates in 14 Children's Centres across South Australia, contributing to the support Children's Centres provide for families to promote optimal child development.
- TAS The Child and Family Centres Project is currently engaging with 12 vulnerable communities, and, although not all buildings are finalised, activities and programs are being managed through alternative venues. The building in Beaconsfield is complete and the Centre fully operational.
- The buildings for an additional three centres are to be completed by the end of September 2011.
- WA Halls Creek Child and Family Centre (CFC) is very close to lock-up and will be operated by the Wunan Foundation.
- Site works have begun for the Fitzroy Valley CFC; the Quantity Survey is being completed for the Kununurra CFC; and the locations of the Swan Region and Roebourne CFCs should be known by the end of the year.

### Action 1.1B: Combine and refocus community programs within FaHCSIA.

Complete.

### Action 1.1C: Continue to improve family support services

- ACT The West Belconnen, Tuggeranong and Gungahlin Child and Family Centres seek client feedback on a regular basis to ensure services being provided meet the needs of the local community.
- The *Indigenous Family Support Service* is providing direct casework support to Aboriginal and Torres Strait Islander families within the care and protection or community youth justice systems.
- The *Indigenous Integrated Service for Aboriginal and Torres Strait Islander people* is working with Aboriginal and Torres Strait Islander families at risk of entering, or who have entered, the statutory child protection system. The service works with other government and non-government family support agencies to provide families with integrated and sustainable services.
- Child, Youth and Family Services Program Framework**
- In 2011, a procurement process to deliver a new Youth and Family Support Service Delivery Framework for 2011–2014 was finalised. The Framework has combined reforms that have been recommended through Youth and Family Support Reviews undertaken in 2002 and 2004. Recommended reforms included:
- Services targeting at risk children, young people and their families
  - Improved coordination, collaboration and integrated approaches across the service system
  - Work with young people/youth occurring within the context of their family
  - Increased emphasis on early intervention with high risk/high need service users where possible.
- NSW In 2010–11, Family Support Services were realigned to reflect the Keeping Them Safe directions with an additional annual amount of \$4.3 million for early intervention services and \$6.9 million for placement prevention services.
- Eight new case management and support positions were funded through the SAFE START program in 2009–10.

Sustaining NSW Families programs have been established in Fairfield/Liverpool, Cessnock/Kurri Kurri/Maitland and Wyong, with two further sites in the Kyogle/Lismore/Richmond Valley and Arncliffe commencing in 2011–12.

In 2011, the number of practitioners in the Positive Parenting Program (Triple P) was increased to 1,200, with 213 practitioners in the Indigenous Triple P Program.

VIC Analysis of data trends indicate the impact of an additional \$4.7 million from 1 January 2010 has been positive and reflects a 12 per cent increase between 2009–10 and 2010–11 in the capacity of Child FIRST and family services.

Each of the 24 Child FIRST Alliances has received funding for Early Childhood Development workers. An independent, state-wide evaluation commenced in December 2010 and will be completed in December 2012.

QLD The Queensland and Australian Governments are implementing a number of initiatives to provide access to quality childhood education for vulnerable and disadvantaged children in Queensland, including:

- 240 additional kindergarten places in Queensland by 2014 under the Commonwealth Flying Start program enabling an additional 12,000 eligible children to access kindergarten in the year before starting Prep
- Overcoming cost as a barrier to accessing child care by developing a new kindergarten funding model
- Developing innovative service delivery models, such as outreach and mobile learning services, for isolated or itinerant communities.

The Department of Communities (QLD) continues to implement the Helping out Families (HoF) initiative, running pilots in three locations: Logan, Beenleigh and the Gold Coast.

The Department of Communities is also funding:

- 11 Aboriginal and Torres Strait Islander child safety organisations to deliver Family Support Services across Queensland, including Recognised Entity Services.
- 49 individual Indigenous controlled service providers to deliver Family Intervention focussing on either reunification of children with their families or children who remain living with their family.

The Department of Education and Training (QLD) is supporting the Foundations for Success Pre-Prep program. At March 2011, the service was available in community kindergartens, child care centres and schools in 35 Aboriginal and Torres Strait Islander communities.

The Department of Employment, Economic Development and Innovation (DEEDI) continues to implement the Skilling Queenslanders for Work initiative.

The Department of Community Safety provides the following support services to families where parents are in custody:

- Playgroups conducted by Save the Children Fund Mobile Play Scheme provide young children and their mothers with opportunities to enhance the mother and child attachment
- The Butterfly Wings program, an interactive Parenting Education program, was delivered to female prisoners. The Butterfly Wings program is facilitated at the Brisbane Women's Correctional Centre on an as-needs basis
- Parenting education workshops, nutrition programs, and a Carers Course for women approved to be alternative carers for children living in the centre
- 24-hour nursing care for mothers with children, a visiting child health nurse and a child immunisation program for children accommodated in secure prison centres with their mothers.

- NT Integrated Family Services (IFS)
- The Integrated Family Services Working Group has been established
  - Integrated Family Services Framework and implementation plan for the Territory Growth Towns was endorsed by the Early Childhood Steering Committee
  - The Indigenous Early Childhood Parenting Reference Group has been established
  - Child and Family Leaders have been recruited for Groote Eylandt, Ngukurr and Gunbalanya
  - Recruitment has commenced for Child and Family Leaders for Maningrida, Yirrkala, Ntaria, Lajamanu and Yuendumu
  - Three Regional Managers for IFS have been recruited to support the Integration of child and family services across the Territory Growth Towns
  - A consultant has been engaged to train Child and Family Leaders and Regional Managers of Integrated Family 3 Strategy 3-Year Action Delivery Status.

Services in the implementation of an evidenced based framework to guide service redevelopment.

- A consultant has been engaged to develop tools and resources for supporting the implementation of IFS in the Child and Family Centres of the Territory Growth Towns
- The NTG, through the Indigenous Early Childhood Development National Partnership Agreement, is integrating Children and Family services through the establishment of five Child and Family Centres in Yuendumu, Maningrida, Gunbalanya, Ngukurr and Palmerston.

The communities of Yuendumu, Maningrida and Ngukurr have signed off on the design of their Child and Family Centres, while the process is ongoing in Gunbalanya and Palmerston.

- SA South Australia's Family Safety Framework has been developed under the auspices of the Women's Safety Strategy and Keeping them Safe. The Family Safety Framework incorporates Family Safety Meetings that provide an integrated case response to high-risk families when domestic violence is occurring.

During 2010–2011, the Family Safety Framework has been expanded from an initial three trial sites to nine sites with the aim that the Framework will be further expanded for implementation state-wide.

Department of Education and Children's Services has worked with the Commonwealth government to establish four Aboriginal Children and Family Centres, and three sites are currently under construction. Community Development Coordinators have been employed for these centres. Recruitment for four Family Service Coordinators to be based in the Aboriginal Children and Family Centres is underway.

A trial reunification project has been developed by the Department for Families and Communities: Families SA. The project provides a multi-disciplinary and multi-agency response to the factors that contribute to the entry of a child or young person into care. The trial complements existing reunification services provided under the Stronger Families Safer Children Program.

Ruby's Therapeutic Youth Service has been expanded to two new Adelaide metropolitan sites and one in Mount Gambier. Ruby's will provide expanded services to support young people experiencing homelessness and family breakdown.

The Department of Further Education, Employment, Science and Technology, in partnership with local NGOs, is delivering the Building Family Opportunities program. This program aims to break the cycle of intergenerational joblessness by bringing together long-term jobless families, local community organisations, government, businesses and employers to find solutions to issues that prevent families from participating in employment. Building Family Opportunities will provide intensive support to 465 families across three local government areas.

- TAS Child and Family Centres are supporting Tasmanian families in vulnerable communities who are caring for children up to five years.

Intensive Family Support Services (IFSS), Targeted Youth Support Services (TYSS) and the Pathway Home have been implemented and continue to support vulnerable children and families across Tasmania.

- WA Establishment of Child and Family Centres.
- Increased funding for Intensive Family Support Services to increase number of services.
- The expansion of Responsible Parenting Services to the regional areas has begun, through funding of \$28 million over four years, provided by Royalties for Regions.

## Strategy 1.2: Educate and engage the community about child abuse and neglect and strategies for protecting children

### Action 1.2A: Support community organisations to deliver cost-effective, community-based initiatives (for example, National Child Protection Week, survey of community attitudes to protecting children)

- QLD Child Protection Week is coordinated nationally by the National Association for Prevention of Child Abuse and Neglect (NAPCAN) and, in Queensland, by the Child Protection Week Committee.
- The Queensland Commission for Children, Young People and the Child Guardian provides research and policy information on early childhood, education, care and development to community organisations.
- WA Each year, the Department for Child Protection (DCP) provides funding to its district offices across the state to undertake community activities during Child Protection Week. In addition, DCP hosted an interagency event during 2010 Child Protection Week on 'Keep your kids safe in cyberspace', involving WA Police, WA Health and the Department of Education. Brochures for parents were distributed and are available on DCP's website.

## Strategy 1.3: Develop and implement effective mechanisms for involving children and young people in decisions affecting their lives

### Action 1.3A: Explore potential National Children's Commissioner

- QLD The Queensland Commission for Children, Young People and the Child Guardian (the CCYPCG) represented the Australian Children's Commissioners and Guardians (ACCG) at the hearing of the Senate Legal and Constitutional Affairs Committee on the Inquiry into the Commonwealth Commissioner. The CCYPCG contributed to the Australian Children's Commissioners and Guardians (ACCG) submission to the Senate Inquiry in relation to the Commonwealth Commissioner for Children and Young People Bill 2010 as well as the Queensland Government's submission. Other submissions included Peakcare and CREATE.

### Action 1.3C: Finalise, print and distribute an information booklet for children entering foster care

- VIC This project is completed and available on the Australian Childhood Foundation's website. 'A Home Away from Home' booklet is available as a free download for the public and all out-of-home care providers.

### Action 1.3D: Continue to improve the experience of court processes for children

- ACT There has been a major focus on improving the Youth Justice System in the ACT following the release of the Human Rights Commission Inquiry Report on the Youth Justice System 2011, in July 2011. The ACT Government is developing a Blueprint for Youth Justice which will guide the strategic direction of the youth justice system in the ACT over the next 5–10 years.
- In 2011, the ACT introduced an after-hours bail support service for young people, strengthened the processes for Circle Sentencing for Aboriginal and Torres Strait Islander children and young people and is trialling a Youth Drug and Alcohol Court which has a therapeutic focus for young offenders.

- NSW Alternative Dispute Resolution (ADR) has been established and embedded, with four models of ADR across the NSW care jurisdiction. An additional four Children's Registrars and a Senior Children's Registrar have been recruited in Parramatta, Campbelltown, Port Kembla, Broadmeadow, Wagga Wagga, and Lismore.
- A new model of Dispute Resolution Conference was launched in the Children's Court on 7 February 2011.
- A Family Group Conferencing (FGC) pilot was launched in February 2011 that operates in Metro Central and Northern region and will conduct 30 conferences in each region.
- An external care and protection mediation pilot was launched on 9 September 2010.
- Care Circles currently operate in Nowra, and consultations are underway to expand the program to Lismore in late 2011.
- VIC Current initiatives between the Department of Human Services, the Children's Court of Victoria and Victoria Legal Aid (VLA) include:
- implementation and ongoing evaluation of New Model Conferences (NMCs) in the Melbourne Children's Court (a new model of mediation for Children's Court matters)
  - children's attendance at NMC's subcommittee: working on strategies and options regarding children's participation in NMCs without requiring children to attend court unless they need or want to
  - multi-disciplinary training between child protection and legal/court stakeholders
  - development of a Code of Conduct between the Department of Human Services and VLA.
- On 31 January 2011, the Government announced the establishment of the Protecting Victoria's Children inquiry.
- QLD The Court Services Child Safety and Youth Justice Units of the Queensland Department of Communities continue to improve court processes for children. The unit also plays a role in the Family Court of Australia Magellan case management program, which has been implemented in all registries of the Family Court in Queensland.
- The Blueprint for the Implementation Strategy 'Reducing the over-representation of Aboriginal and Torres Strait Islander children in Queensland's child protection system' includes a priority project to improve Children's Court decision-making about Aboriginal and Torres Strait Islander children.
- Other initiatives designed to improve court services for children include:
- Youth justice conferencing
  - An integrated domestic and family violence response model being trialled in Rockhampton
  - A Victim Assist scheme through the Department of Justice and Attorney-General
  - Funding for Protect All Children Today (PACT) and the Witness Support Scheme.
- NT A project proposal has been developed and an internal and external reference group established to guide a major review of the *Care and Protection of Children Act* (the Act).
- Consultation has taken place with Department of Children and Families staff, representatives of other government departments, non-government organisations, legal services, foster carers and Magistrates in Darwin, Katherine and Alice Springs.
- The consultation process has revealed a range of complex issues associated with the Act, the relationship between the Act and the Youth Justice Act and the training of and support provided to departmental staff to participate in court proceedings.
- SA South Australia is working with the Family Law Courts and Commonwealth Attorney-General's Department to enhance communication and relationships to improve outcomes for children and young people within the Family Law Court system.
- In 2011, Families SA undertook a review of the interface between Families SA, the Courts and other relevant stakeholders that deal with child protection matters. Recommendations of this review are now being implemented, including the establishment of a Court Liaison Team to oversee the interface between Families SA, the Courts and stakeholders.

TAS A specialised Youth Court for youth justice matters is being piloted in the south of Tasmania. The pilot will conclude in January 2012.

WA **Court preparation and support**

The provision of evidence by closed circuit television links to the court and pre-recording of the child's evidence as well as Child Witness Service have been in place for some time in WA.

To ensure that children are treated with respect and sensitivity relevant to their development age, information for Family Court proceedings is obtained by suitably trained professionals (family consultants) in supportive surroundings external to the formal Court room. In addition, a collaborative approach has been well established, including an information sharing protocol between the Department for Child Protection (DCP), Legal Aid of Western Australia and the WA Family Court, in addition to the co-location of a DCP senior practice development officer at the Family Court.

### Action 1.3E: Support participation of children in decision making

ACT A Case Conferencing model has successfully been implemented with an increasing number of children, young people and their families. The model focuses on planning and support for child protection clients and improving participation of children and young people in decision making.

ACT has undertaken some preliminary research into Viewpoint, which is a web-based software program that promotes individual and collective participation by young people in care, offering:

- An interactive, computer-based self interviewing tool for use by young people as part of the care planning process
- A management reporting system which collates live data for use in service monitoring and improvement, strategic and operational planning and reporting.

NSW The NSW Commission for Children and Young People has a legislated mandate to promote children and young people's participation in decisions that affect their lives, as well as to encourage government agencies and NGOs to seek the views of children and young people.

During 2010–11, the Commission:

- Established, supported and evaluated a Young People's Reference Group to advise the Commissioner
- In partnership with the Southern Cross University Centre for Children and Young People, commenced an evaluation of the Uniting Care Burnside Child-led Research Project
- In partnership with NSW Government agencies, NGOs and research institutes, trialled, developed and promoted participation mechanisms for children and young people
- Developed a paper that outlines options for effective participation of children and young people in contemporary policy development environments, including a framework for the ethical engagement of children and young people
- Supported and advised on methodologies for obtaining the views of children to a range of NSW Government agencies and NGOs, including the NSW Department of Education and Communities, Sydney Opera House and the Board of Studies
- Supported the rollout and evaluation of the 'Proud Schools' initiative by the NSW Department of Education and Communities and committed to providing advice on the evaluation methodologies for obtaining the views of children in this evaluation
- Led and developed the children and young people's participation stream at the 8th Australian and New Zealand Adolescent Health Conference, held in November 2011
- Developed methods for the inclusion of children's voices in the Commission's Middle Years
- Seminar Series.

VIC The New Model Conferences sub-committee is currently working on strategies and options regarding children's participation in NMCs without requiring children to attend court unless they need or want to.

QLD The Queensland Department of Communities is currently finalising a streamlined quality framework that will apply to NGOs funded by the department to provide child protection services. It is anticipated that the Human Services Quality Framework (HSQF) will be available from April 2012. A feature of the HSQF is the inclusion of the views of service users in the process, including the views of children and young people using child protection services.

Other Departmental strategies and initiatives designed to improve the participation of children in decision making include:

- New adoption legislation enabling Child Safety Services or a court to appoint a person to support or represent a child in proceedings regarding their proposed adoption
- A Children and Young People's Participation Strategy 2008–2011 that includes a vision and framework for the participation of children and young people in decision making
- A Youth Engagement Grants Funding Initiative, currently funding eight organisations across Queensland that support youth-led projects and forums
- The Queensland Youth Forum, enabling young people to engage with the Queensland Government by raising issues affecting them and their peers
- The annual YMCA Queensland Youth Parliament (QYP)
- Indigenous Youth Leadership Program (IYLP), funded by the Department of Communities plus an Xstrata Coal Queensland Pty Limited sponsorship, to run an annual five-day event which provides a platform for engaging Aboriginal and Torres Strait Islander young people in leadership activities and Indigenous Youth Parliament.

NT As in 1.3D.

SA South Australia's Guardian for Children and Young People has coordinated development of Charter of Rights resources for children and young people with a disability and an accompanying booklet for carers. Flash cards for explaining rights incorporate having a say in decision making.

TAS Children and Youth Services is working closely with CREATE in enhancing opportunities, for children and young people in care, to participate in decision making.

CREATE has established the Youth Advisory Group (YAG) to provide advice on issues impacting on children and young people in care.

Members of the YAG meet with the Minister for Children and senior department workers.

The Commissioner for Children is undertaking a project aiming to improve opportunities to improve decision making for Tasmanian children.

WA Viewpoint—a web-based, interactive, computer based, self interviewing program for children and young people in care—has been introduced. It contributes to management reporting by collating live data for use in service monitoring and improvement, strategic and operational planning and reporting.

Viewpoint is used by Child Protection Workers as an integral part of the Care Plan and Care Plan Review cycle for all young people in the CEO's care. The program offers an interactive approach for consulting with children and young people aged 4 to 17 years through a series of age-related questionnaires to help ascertain their individual views, concerns, experiences and wishes. Flagged issues are explored and reflected upon in follow-up discussions between the young person and the Child Protection Worker, and possible solutions and actions are identified in preparation for the development of the Care Plan.

## Supporting outcome 2: Children and families access adequate support to promote safety and intervene early

### Strategy 2.1: Implement an integrated approach to service design, planning and delivery for children and families across the lifecycle and spectrum of need

#### Action 2.1.A: Expand the Communities for Children program

QLD The Queensland Department of Communities monitors and reports on the Commonwealth-funded Communities for Children (C4C) program. Mission Australia C4C Plus in Ipswich is implementing a strategic activity plan which includes a range of activities under four connection strategies of 'Family and Child Connect'; 'Schools Connect'; 'Community Connect'; and 'Service Connect'.

#### Action 2.1B: Implement integrated and co-located child and family service models

ACT In the ACT, there has been significant work undertaken to help improve early identification and integrated responses, including joint training being offered across the community and government sector, regular meetings with Family Support agencies to discuss cases, developing active referrals and identifying an appropriate agency to take on the lead role for the family. The West Belconnen, Tuggeranong and Gungahlin Child and Family Centres also provide targeted and universal programs aimed at meeting specific needs of children, young people, and their parents.

VIC The Child Protection and Integrated Family Services State-wide Agreement was reviewed and distributed to all child and family services alliances in November 2010.

Each of the 24 alliances has developed a local agreement in line with the state-wide requirements.

A new child protection operating model has been proposed, which includes measures to further strengthen the interface between child protection and family services.

QLD Under the *For Our Sons and Daughters Strategy to Reduce Domestic and Family Violence 2009–2014*, the Departments of Communities, Justice and the Attorney General, Queensland Police and Legal Aid Queensland are trialling the Breaking the Cycle on Domestic and Family Violence program in Rockhampton to provide an integrated response to children and families experiencing domestic and family violence.

The Queensland Government has implemented the SCAN team which brings together the Departments of Communities, Health, Education and Training, Queensland Police and, for matters relating to Aboriginal or Torres Strait Islander children or young people, a Recognised Entity.

The Queensland Department of Education and Training has also established the Early Years Centres.

#### NT **Dual Pathways**

An options paper and internal consultation about Dual Pathways models has been developed to guide discussions and decisions about the most appropriate model for the Northern Territory. A community sector engagement strategy has been developed in consultation with ATCOSS.

Consideration is being given to a Board of Inquiry recommendation on legislative reform to allow information sharing and mandatory reporting.

SA South Australia's Children's Centres for Early Childhood Development and Parenting deliver early childhood and parenting services for young children, birth to age eight, and their families. During 2010–2011, the Family Service Coordinator program within Children's Centres has strengthened partnerships with local Families SA Offices by working with families in contact with the child protection system to improve relationships between parents and their children. Developmental needs are identified, and links are made to specialist services to support families towards reunification.

TAS The Child and Family Centres in Tasmania are based on models of collaboration across services and collocation of care.

WA An integrated approach to service design, planning and delivery occurs at both strategic and operational level through a raft of strategies such as the Child Safety Directors Group, Family and Domestic Violence Seniors Officers' Group, Early Years Collaborative Group, Community Sector Roundtable, establishment of family support networks and implementation of Rapid Response, an across-government policy for children and young people in care.

Seventeen Family and Domestic Violence Case Management and Coordination Services have been established across WA. This model operates a multi-agency case management process for cases assessed as high risk.

Senior child protection workers have been placed in police stations leading to improvements in the reports police complete after attending domestic or family violence incidents, and this has resulted in more relevant, fact-oriented information being available about the incident. This model focuses on the prevention of child abuse and family and domestic violence through improved information sharing, coordinated responses, resource sharing and referrals to other support agencies.

## Strategy 2.2: Develop new information sharing provisions between Commonwealth agencies, state and territory agencies and NGOs dealing with vulnerable families

### Action 2.2A: Nationally consistent approach to working with children checks

ACT In 2011, the introduction of the Working with Vulnerable People (Background Checking) checks has been progressed. This legislation will establish mandatory background checks for employees (including self-employed people) and volunteers who work with children and vulnerable adults in the ACT in 2012.

NSW The child related employment provisions of the *Commission for Children and Young People Act NSW 1998* were amended to broaden the classes of employees in high-risk groups who must undergo background checks prior to commencing employment in child-related fields.

NSW is a member of the CDSMAC subcommittee on national Working with Children Check issues which has agreed upon a work plan for further progress towards national consistency.

VIC In Victoria, following a technical and procedural review, the *Working with Children Act 2005* was amended in 2010. This action attempts to align the criteria that enable individuals to cross state borders for participation in national and inter-jurisdictional activities on a short-term basis without the need to be screened.

QLD The Commission for Children and Young People and Child Guardian has stringent working with children check requirements through the Blue Card system. Queensland is one of the few states that have a central database and regular monitoring and updating of information.

Queensland is working with other jurisdictions to implement the recommendations that individuals be able to cross state borders for participation in national and inter-jurisdictional activities on a short term basis, up to 30 days in a 12 month period, without the need to be screened.

SA Recent changes to the *Children's Protection Act 1993* in response to the Children in State Care Commission of Inquiry have extended the requirement for organisations to conduct criminal history assessments for people working in prescribed positions with children to a range of non-government and local government organisations.

This requirement is being phased in sector by sector over three years and will help ensure children and young people are better protected when accessing services in the community.

WA The *Working with Children (Criminal Record Checking) Act 2004* was amended in October 2010. New provisions enabled more timely and effective responses to a wider range of criminal history information. A review of the Act's operation is underway.

TAS Tasmania does not have legislation in place but continues to work to achieve a working with children check that is consistent with the national approach.

### Action 2.2B: National protocol for sharing information on children at-risk

- QLD The Queensland Department of Communities continues to support the national protocol for sharing information for children and risk. In addition, the department currently has a protocol in place for information sharing with the Family Court.
- VIC The Centrelink Protocol appendix has been reviewed and amended, and the Child Support Agency appendix became operational in late 2010.

### Action 2.2C: Options for improving information sharing between NGOs and government agencies (through CAARS Taskforce)

- NSW The introduction of Chapter 16A of the *Children and Young Persons (Care and Protection) Act NSW 1998* allows NSW government agencies and NGOs who are 'prescribed bodies' to exchange information that relates to a child or young person's safety, welfare or wellbeing.
- SA The Information Sharing Guidelines for Promoting the Safety and Wellbeing of Children, Young People and their Families (ISG) is a state-wide protocol for information sharing that applies to both government agencies and NGOs funded to provide family services.
- The Office of the Guardian for Children and Young People is collaborating with Uniting Care Wesley Adelaide in an application to the Commonwealth Privacy Commissioner for a Public Interest Determination which would allow implementation of the ISG by relevant South Australian NGOs.
- VIC The purpose of the CAARS tool is to provide a way to identify and respond early to indicators of need and to strengthen collaboration among service providers by providing a common language.
- Gippsland Lakes Community Health is one of four organisations selected to participate in a 12-month national formative evaluation of the tool, commencing July 2011.

## Strategy 2.3: Ensure consistency of support and services for all children and families

### Action 2.3A: National approach to early childhood education and care

- QLD To support the COAG Early Childhood Agenda, the Commission for Children, Young People and the Child Guardian will be conducting research to identify barriers to children in state care accessing early childhood education.

### Action 2.3B: Support the development of quality assurance processes for registered community based child and family services; and out-of-home care services

- ACT The Community Service Directorate has been working collaboratively with other jurisdictions to implement the National Quality Framework for early childhood education and care services, which commences from 1 January 2012.
- An audit program has been developed and commenced to monitor compliance against out-of-home care standards for funded out-of-home care service providers.
- Funded out-of-home care agencies, as part of their contractual obligations, are also required to undertake self-audits (using an assessment tool developed by the Office for Children, Youth and Family Support) and provide evidence of this in their reporting to the Directorate.
- NSW In December 2009, the Council of Australian Governments (COAG) endorsed the National Partnership Agreement on the National Quality Agenda for Early Childhood Education and Care.
- In 2010–11, the NSW Government worked closely with the Commonwealth government to develop the details of the new system. The NSW NQF Reference Group has been established and continues to consult with and provide advice to the NSW Government.

The Office of the Children's Guardian is responsible for safeguarding the rights of all children and young persons in out-of-home care, monitoring all agencies providing this service. An agency needs to provide the Children's Guardian with evidence that it is complying with the relevant standards for accreditation. Only accredited agencies, known as 'designated agencies', may place or arrange the placement of children and young people in court-ordered (statutory) out-of-home care in NSW.

As a result of audit results and feedback from the Children's Guardian, a case planning framework, procedure and case plan template have been developed to meet case planning requirements established by the standards. Training in case planning requirements commenced from July 2011.

In 2010, Community Services completed a review of out-of-home care policies and procedures and began streamlining the procedures.

Strategies to improve practice around relative/kinship carer assessment, training and support are being developed.

During the year, Community Service Centres were briefed in preparation for the 2011–12 audit process, and caseworkers were assisted during on-site assessment visits by the Children's Guardian.

Community Services' Professional Development and Quality Assurance program has provided an impetus for change, supporting a culture of professional, evidence-based, high quality casework practice.

VIC The first round of external reviews against Victorian Standards was completed for all registered Victorian out-of-home care and Community-based Child Care and Family Services by April of 2010. Results were analysed and an action plan developed.

Agencies have continued with annual self-assessments against the standards. The second round of external reviews has commenced.

The Department of Human Services is transitioning to a single set of integrated standards within the department to reduce the red tape for agencies. Full implementation will occur from July 2012.

QLD The Department of Education and Training is working collaboratively with other jurisdictions to implement a new National Quality Framework for early childhood education and care services, to be implemented nationally from 1 January 2012.

The Department of Communities is implementing the Quality Assurance Strategy for non-government child protection services, incorporating 11 Child Safety Service Standards. The department's priority remains out-of-home care services, which are licensed under the *Child Protection Act 1999*. Child protection services will participate in the implementation of the Human Services Quality Framework, to be rolled out from April 2012.

NT **New alternative care models and service mix**

A tender process was undertaken in early 2011, but did not result in the procurement of a suitable consultant to undertake the review of residential care. As a result, reform in this area has been delayed. A detailed project proposal has been developed for various elements of the redesign and reform of alternative care services and a project team appointed. The work of conducting the review of residential services is now being conducted in-house, with some minor elements outsourced to consultants.

Queensland, New South Wales and New Zealand are providing assistance to undertake the review and reform of residential care. Discussions, regarding frameworks and approaches, have been held with the Thomas Wright Institute, Cornell University and the Menzies School of Health Research for sharing across both foster and kinship care systems. A project governance group has been established to oversee the project.

SA Step by Step (South Australia) has been introduced as a carer assessment tool and can be used in conjunction with the Shared Stories, Shared Lives SA training as part of the assessment process.

An Other Person Guardianship (OPG) team has been established in Families SA to expand and strengthen the use of long-term other person guardianship arrangements. An OPG Review Panel will be established to review assessments and make the final determination on whether to proceed with a Court application for an OPG Order.

Families SA has developed a Care Planning Policy providing a foundation for achieving stable, nurturing, secure and continuous care arrangements for children and young people in care. The Care Planning Policy promotes the practice of concurrent planning.

- TAS A Working Group was established in July 2011 to implement a Carers Approval and Accreditation Panel that includes the Commissioner for Children, representatives from all non-government providers and peak bodies, including the Foster Carers Association of Tasmania (FCAT) and the CREATE Foundation. It is anticipated that the Panel will be operational from January 2012.
- WA Development of Better Care, Better Service Standards 2007 for the Department and community sector out-of-home care services. Self-assessments for placement services were completed in 2010–2011, and external monitoring processes have commenced.

### Action 2.3C: Enhance national consistency in child and family health services

- ACT Minor technical amendments to the *Children and Young People Act 2008* have occurred in relation to the implementation of the National Quality Agenda for Education and Care and information sharing.

In the ACT, there are identified Health Liaison positions to assist in the coordination and delivery of services across health and child protection.

Integrated Multi-agencies for Parents and Children Together (IMPACT) Program is a coordination service for pregnant women, their partners and their young children (less than two years of age) who are clients of Mental Health ACT and/or are receiving opioid replacement therapy and require assistance to manage their involvement with multiple services.

ACT Health run Parenting Education Program (PEP); Community Health provides support for vulnerable pregnant women in their home. Maternal and Child Health (MaCH) Nurses visit families in their home to provide parenting education and support for up to two years.

- NSW NSW Health is working with the Child Health Wellbeing Subcommittee (CHWS) of the Australian Population Health and Development Committee (APHDPC) to enhance national consistency in child and family health services.

The CHWS is developing a number of resources and advice for the Australian Health Ministers' Advisory Committee (AHMAC) on out-of-home care matters relevant to the health care needs of children. This will enhance AHMAC's capacity to explore options in relation to the health care needs of children currently in and entering out-of-home care.

In 2010–11, NSW Health, on behalf of CHWS, had a lead role in the development of the National Clinical Assessment Framework for Children and Young People in out-of-home care (the Framework). The aim of the Framework is to improve consistency of health care assessments and services for all children and young people in out-of-home care.

- QLD Queensland actively contributed to the work undertaken by the Child Health and Wellbeing subcommittee of Australian Health Ministers and Advisory Council (AHMAC) to develop the National Framework for Universal Child and Family Health Services. The Framework was completed late in 2010 and is awaiting endorsement.

- NT Progress as described in 2.3B above

- SA South Australia's Health Standards for Children and Young People under the Guardianship of the Minister are applicable to all public health services. Work has commenced to ensure that the standards are consistent with the National Standards for out-of-home care and the National Clinical Assessment Framework for Children and Young People in out-of-home care.

- TAS Tasmania is participating in achieving national consistency in child and family health services.

- WA A health care planning pathway has been established to support the early assessment of the health and wellbeing of all children entering care.

### Action 2.3D: National Perinatal Depression Plan

Complete.

### Action 2.3E: Funding for disadvantaged schools with focus on improving student wellbeing

Complete.

## Strategy 2.4: Enhance services and supports for children and families to target the most vulnerable and protect children 'at-risk'

### Action 2.4A: Refocus Commonwealth Family Support Program to target vulnerable families and children at-risk

- VIC The child and family service alliances catchment planning process includes consultation with key stakeholders; this data informs the overall analysis of the needs of vulnerable children and families in the catchment and assists in minimising service duplication.
- WA The state partners with the Commonwealth in facilitating National Partnership and Agreement deliverables on this program.

### Action 2.4B: Expand and/or target state and territory family support programs for vulnerable families and children at-risk

- ACT The Youth and Family Support Program Service model was redeveloped to ensure the programs delivered:
- Services targeting at-risk children, young people and their families
  - Improved coordination, collaboration and integrated approaches across the service system
  - Work with young people/youth occurring within the context of their family
  - Increased emphasis on early intervention with high risk/high need service users where possible.

It is anticipated that the new service model will commence in 2012.

- NSW Early intervention and prevention services and support are delivered through a range of targeted programs offered to families with children at low to moderate risk through to families with children at imminent risk of entering statutory out-of-home care.

#### **Child and Family Support Services**

Child and Family Support Services offers a broad range of less intensive early intervention services to meet the needs of vulnerable children aged 0-12 years and their families. The program includes the provision of case management, parenting programs and home visiting. On average families receive services for 3 months.

#### **Brighter Futures and Strengthening Families**

Established in 2003/04 Brighter Futures has provided early intervention services and support to vulnerable families with children aged under 9 years or expecting a child. At 30 June 2010, 3300 families were participating in the Brighter Futures program.

Informed by the final Brighter Futures SPRC evaluation report (September 2010) and extensive consultation with the sector, reform of Brighter Futures throughout 2011 sought to ensure the program targets vulnerable and complex need families at high risk entering the child protection system.

From January 2012, non-government Lead Agencies will be entirely responsible for delivery of Brighter Futures. Revised program vulnerability guidelines have been developed to support Lead Agency determination of a family's eligibility for the program, with priority of access offered to families with young children (under 3 years) and Aboriginal families. On average families will participate in the Brighter Futures program for 12 months.

From January 2012, Community Services will deliver the Strengthening Families program. Strengthening Families provides a differential statutory child protection response to families with children aged under 9 years (or who are expecting a child) where a report to the Child Protection Helpline has met the risk of significant harm (ROSH) threshold.

Strengthening Families is focused on improving the long-term safety and wellbeing of children at highest risk of future abuse or neglect. On average families will participate in Strengthening Families for 12 months.

Both Brighter Futures and Strengthening Families aim to enable children to live safely and permanently at home, thereby reducing;

- the rate of child protection reports
- the rate of entry to and length of time in out-of-home care
- demand for services that otherwise may be required in the future such as child protection, juvenile justice or mental health services.

Established in January 2011, the Early Intervention Council provides advice and oversight on implementation of both programs.

### **Intensive Family Based Services**

The Intensive Family Based Services (IFBS) program began in 1994 and is the longest running program of its kind in NSW. IFBS programs are currently delivered by Community Services and a number of Aboriginal and non-Aboriginal NGOs.

Under Keep Them Safe \$3 million per annum over five years (2009-2014) has been allocated to pilot four new Aboriginal IFBS services in the Aboriginal NGO sector. Community Services is working in partnership on this project with AbSec under an agreed Memorandum of Understanding (MOU). Community Services also operates seven internal Aboriginal IFBS services.

In 2010/11 extensive consultation processes were undertaken with local Aboriginal service providers and community groups in shortlisted areas, identified as having high numbers of child protection reports and out-of-home care placements involving Aboriginal children and young people; and having the service capacity to pilot the IFBS program.

Pilot sites in Wyong, Kempsey, Wagga Wagga and Clarence Valley were selected. Wyong, Kempsey and Wagga sites became operational in 2011. Clarence Valley will become operational in March/April 2012.

To improve family functioning and prevent entries into out-of-home care, Community Services, under Keep Them Safe, has developed the Intensive Family Support and Intensive Family Preservation services forming part of a continuum of early intervention services. Funding for each new service will be \$3.4 million.

VIC Child and family services alliances undertake catchment planning at a Child FIRST catchment level in a three-year cycle with annual reviews to plan, target priorities and use service resources more effectively to enhance the family service system responses to vulnerable children and their families.

QLD The Department of Communities is implementing the Referral for Active Intervention (RAI) and Helping out Families (HoF) initiatives. This initiative continues to focus on providing support and services to vulnerable children and families to divert children from the child protection system.

Key components of the HoF include:

- A Health Home Visiting program for all families with children aged 0–3 years (including universal and targeted support)
- Domestic violence and family violence prevention services.

Other Department of Communities initiatives include:

- South West Queensland Indigenous Family and Youth Coaching and Mentoring Service, which provides young people and their families with coaching to improve family functioning (located in four rural towns)
- The Youth Housing and Reintegration Service (YHARS), which provides support and accommodation to young people who are homeless or at risk of homelessness
- The Children and Young People Strategy Moving With Young Children Workshops.

The Department of Communities and Department of Education and Training continues to implement the:

- Youth Support Coordinators Initiative
- Youth Enterprise Partnerships (YEP) initiative
- The Youth at Risk Initiative.

The Department of Community Safety: Queensland Ambulance Service continues to support the Vulnerable Clients Program.

The Department of Employment, Economic Development and Innovation (DEEDI) continues to support the Get Set for Work program, part of the Skilling Queenslanders for Work initiative.

In 2010-11, 74 Get Set for Work projects were delivered throughout Queensland, assisting 2,529 young Queenslanders to re-engage with education or enter the workforce.

In 2011, in partnership between the Office for Women and DEEDI, a booklet was developed to provide information for mothers on how to re-engage with work. This booklet was produced to support the Q2 Fair—Jobless Households target.

NT The Child Safety and Wellbeing Directors' Network has been meeting regularly since March 2011. The Network is developing the first annual Child Safety and Wellbeing Plan for release in 2012. A proposal to develop an on-line tool to support mandatory reporting of child abuse and neglect and will be progressed through the Network.

SA South Australia's Universal and Family Home Visiting programs provide all families with newborns with a Universal Contact Visit. A community child and family health nurse addresses immediate concerns and can support access to appropriate referral pathways. This may include the Family Home Visiting Program, a two year preventative parenting program.

The Women's and Children's Health Network Child and Adolescent Mental Health Service provides the Incredible Years parent training program for vulnerable families across South Australia.

Disability Services is implementing the Healthy and Safe Parenting Program for parents with cognitive disabilities. This structured training program allows parents to identify a range of child health and safety issues and assists them to provide a safer environment for their children.

Department for Families and Communities' Family and Community Development Program (F&CD) allocates funds to non-government organisations and local government authorities to provide a range of community based services. The F&CD Program is undertaking a reform process to ensure funding is directly benefiting the people who need it most. This is being done by mapping current service delivery and predicting future need using an evidence-based management tool.

Housing SA has introduced the Child Focussed Support program, Together 4 Kids (T4K), delivered by Relationships Australia and targeted towards supporting families with children up to 12 years of age who are, or have been, homeless in metropolitan Adelaide. T4K also provides professional development concerning child development for Homelessness Service providers across the state.

The Families SA High Risk Infant Program provides an early intervention response for infants where it has been identified that they may be at risk of future harm. A review of this program is underway and will guide the development of interagency protocols that will support earlier engagement with women during pregnancy and provide services to families to reduce risks for unborn children.

TAS Family support for vulnerable families has been expanded in Tasmania through the implementation of the Integrated Family Support Services (IFSS) program and is accessible through Gateway Services in four locations throughout the state.

WA The Department of Health Child and Adolescent Community Health and King Edward Memorial Hospital (KEMH) collaborated to provide a specific position to support adolescent Aboriginal girls during their pregnancy and birth, including home visiting.

Intensive home visiting is provided through the Best Beginnings program, a partnership developed between WA Department for Child Protection and the WA Department of Health.

There is increased funding for Intensive Family Support services to increase the number of services.

#### **Action 2.4C: Evaluate income management trials in WA, NT and Cape York**

- QLD The Cape York Welfare Reform (CYWR) trial is a partnership between the Queensland Government, the Australian Government, and the Cape York Institute for Policy and Leadership and seeks to transition Indigenous people from welfare dependence to engagement in the real economy and to rebuild basic social norms. A central reform initiative in the CYWR trial is the Family Responsibilities Commission aiming to improve the care of children and to connect families with a wide range of support services.
- WA An evaluation, commissioned by the Commonwealth with input from the State, on the child protection measure and voluntary income management measure in Western Australia was completed. Implementation of strategies is underway in response to the recommendations.

#### **Action 2.4D: Evaluation of family law reforms designed to strengthen family relationships**

- QLD A central reform initiative in the CYWR trial is the Family Responsibilities Commission (FRC), aiming to improve the care of children and to connect families with a wide range of support services. An implementation evaluation of the FRC was completed by KPMG in 2010. Recommendations are currently being implemented by the FRC.
- WA An evaluation, commissioned by the Commonwealth with input from the State, on the child protection measure and voluntary income management measure in Western Australia was completed. Implementation of strategies is underway in response to the recommendations.

#### **Action 2.4E: Expand access to mental health programs for children**

- VIC On 22 September 2011, the Minister formally launched the Department of Health Chief Psychiatrist's guideline: Priority access for out-of-home care. The guideline is currently undergoing implementation and referrals will be monitored.

### **Strategy 2.5: Provide priority access to services for children who are at serious risk of abuse and neglect**

#### **Action 2.5A: Enhance access to child care services for children at serious risk of harm**

Complete.

#### **Action 2.5B: Develop alternative pathways for children who are at serious risk and those at lower risk**

- ACT The 'Connecting Families Panel' in partnership with the Community continued. This panel has improved access to community services through improving communication, collaboration, referral processes and pathways.
- NSW Child Wellbeing Units (CWUs) began operations in January 2010 in NSW Health, NSW Police Force, NSW Department of Education and Communities and NSW Department of Family and Community Services. CWUs have developed strong networks across government and non-government sectors throughout 2010–11, and an independent review of CWUs will identify areas for further improvement and focus going forward.
- Family Referral Services (FRS) have been piloted in Western NSW, the Hunter/Central Coast and the Blacktown local government area for 12 months from May 2010 to April 2011. The three pilot providers have had their operations extended, and FRS provision has been expanded to the Illawarra and New England North Coast.
- The Family Case Management program, which provides an integrated case management response to better support families has been operating in South West Sydney, South East NSW and Western NSW.

- VIC As part of the 2009–10 out-of-home care reforms, 146 families have been supported to date, including 350 children, through the implementation of seven demonstration projects in four catchments of the family coaching Victoria service. An evaluation is underway of the family coaching Victoria service.
- QLD The Department of Communities continues to support the Referral for Active intervention and Helping out Families through the No Wrong Door program; the Aboriginal and Torres Strait Islander Child Safety Taskforce; and the Children and Young People Strategy.
- NT An options paper on dual pathways models has been developed to guide discussions and decisions about the most appropriate model for the Northern Territory. Internal consultations have also taken place.
- As part of the legislative reform recommended by the Board of Inquiry, consideration has been given to the amendments necessary in relation to information sharing and mandatory reporting.
- In consultation with Northern Territory Council of Social Services (NTCOSS), a community sector engagement strategy has been developed, which involves consultation on dual pathways models.
- SA The Stronger Families Safer Children (SFSC) program provides interventions to at-risk children and their families to prevent their progression through the child protection system and the possible removal of children, as well as achieving successful reunification of children separated from their primary caregivers. These interventions are delivered by seven NGOs working in close partnership with Families SA. The first stage evaluation of the Stronger Families Safer Children program was completed, reviewing the program's first 15 months of operation, with a focus on the program's establishment, implementation issues, achievements and early outcomes.
- Families SA has implemented a Complexity Assessment Tool, designed to enhance the ability to identify and assess the needs of children entering, or already in the alternative care system. Implementation of this tool will provide Families SA with a profile of children in care that will assist in case management, placement and service planning, evaluation and research.
- TAS Tasmania implemented an alternative pathway for children who are at lower risk with the establishment of the Gateway Services in August 2009.
- The *Children, Young Persons and Their Families Act 1997*, has been amended to enable mandated reporters to make notifications to the Gateway Services about children who are at risk. The amendments included the potential to make a notification about an unborn child. A senior child protection worker is co-located in each of the Gateway Services.
- WA Work is underway to establish secondary family support networks which will bring together non-government and departmental services in a formal alliance, establishing a common entry point for families to local support services.
- A three-year strategy for at-risk youth was developed during 2010-11, outlining the Department's approach to support at-risk youth and young people in care.

## Supporting Outcome 3: Risk factors for child abuse and neglect are addressed

### Strategy 3.1: Enhance alcohol and substance abuse initiatives to provide additional support to families

#### Action 3.1A: Implement the National Binge Drinking Strategy

Underway.

### Action 3.1B: Redesign the Strengthening Families Program

VIC In November 2010, the Family Services Program supported a forum convened by Odyssey House Victoria for Child FIRST and family service providers and child protection to opportunities to strengthen collaboration between services supporting vulnerable families where the parent has an alcohol and/or other drug problem.

A reference group with representatives from Odyssey House, child protection and family services was formed following the forum.

Linkages have been promoted between the drug and alcohol services and child and family services alliance in the North and West Metropolitan region.

WA In April 2011, the Department of Communities' Office of Youth and the Drug and Alcohol Office jointly launched a publication for parents to increase their understanding of the impacts of alcohol on young people as well as providing them with tips on communicating with their children.

The Department for Child Protection contributes to the Drug and Alcohol Interagency Strategic Framework for Western Australia 2010–15, including the following initiatives:

- Participating in three of the identified working groups to implement the Foetal Alcohol Spectrum Disorder Model of Care. These working groups will implement the 33 Model of Care recommendations across the service continuum, with a specific focus on prevention
- Developed a Foetal Alcohol Spectrum Disorders (FASD) fact sheet for carers.

## Strategy 3.2: Enhance programs which reduce family violence

### Action 3.2A: Progress priority actions in areas of Commonwealth responsibility in Time for Action: The National Plan for Australia to Reduce Violence against Women and their Children, 2009–2021

Complete.

### Action 3.2B: Expand models of integrated support to enable women and children experiencing domestic and family violence to remain at home safely

ACT In 2010–11, the ACT piloted The Stay at Home program, which is assisting victims of domestic violence, principally women and children, to remain in their home rather than being forced out to avoid abuse.

The ACT Prevention of Violence Against Women and Children Strategy 2011–2017 provides a commitment to a whole-of-community approach to addressing violence against women and children. Through the strategy, identified programs will support community organisations to deliver initiatives for the prevention of violence against women, including:

- New initiatives that target men and young men who use violence
- The employment of an Aboriginal and Torres Strait Islander Guidance Partner for the ACT Restorative Justice program
- Funding to strengthen the ACT Galambany Circle Sentencing Court
- The development of a court advocacy service for those applying for protection orders
- Increasing capacity for crisis support services.

NSW NSW is implementing a domestic violence integrated support model, under the National Partnership Agreement on Homelessness (NPAH), in the Hunter, Illawarra and Western Sydney areas. Access to the private rental market is facilitated via Start Safely, a private rental subsidy.

The Staying Home Leaving Violence (SHLV) program was recently expanded, taking the total number of sites to 23 across NSW, with a further \$2.5 million allocated in the 2011–12 budget.

NSW is reviewing the existing Integrated Case Management processes across the State to determine the effectiveness and workload demand on staff.

The Domestic Violence Pro-Active Support Services (DVPASS) program has recently expanded to 11 locations across NSW, with the most recent location being the Bridges Project in Penrith.

While One Place One Plan is not being delivered in every community, it is capable of being targeted towards those communities which have extremely high rates of domestic and family violence.

VIC Funding has been allocated to Integrated Family Violence support services in all Department of Human Services regions in Victoria. Over 1,500 women were assisted to remain in their family home in the 2010–2011 financial year.

QLD The Australian and state and territory governments have implemented a national plan to reduce violence against women and their children.

The Department of Communities has made improvements in service coordination and provision through *For Our Sons and Daughters—A Queensland Government strategy to reduce domestic and family violence 2009–2014*.

The Australian Government and the Queensland Department of Communities and Department of Justice and the Attorney General, have agreed on a whole-of-government implementation plan to deliver significant reforms to reduce homelessness.

SA South Australian government agencies are working together to ensure worker access to Intervention Orders by enhancing the case management system and information sharing processes between agencies.

The Department for Families and Communities has developed a Strategic Plan to Prevent and Respond to Violence Against Women and their Children 2010–2013. A research project is being undertaken to develop models of best practice to respond to victims of domestic violence within DFC frontline agencies.

The Department for Families and Communities has progressed a significant reform to the Domestic and Family Violence Service Sector in partnership with the Office for Women and the Attorney General's Department. The reform includes significant additional investment through the National Partnership Agreement on Homelessness in outreach support for women and their children wanting to leave violence but remain safely in their home.

WA The WA Strategic Plan for Family and Domestic Violence 2009-2013, which was launched in November 2009, aims to achieve stateside systemic reform of responses to family and domestic violence through the implementation of an integrated response across government, building on current services and introducing new approaches. Refer to the Mid Term Progress Report for initiatives that were implemented during the 2010–11 reporting period ([www.childprotection.wa.gov.au](http://www.childprotection.wa.gov.au)).

Six Safe at Home services and five Domestic Violence Outreach services are operational across Western Australia. Complementing the program is a response to the perpetrator of the violence, to maximise the safety of women and children.

### Strategy 3.3: Increase services and support for people with mental illness or disability

#### Action 3.3A: Develop a National Suicide Prevention Strategy

Complete.

#### Action 3.3B: Further roll out the Personal Helpers and Mentors Program with a focus on disadvantaged communities and vulnerable groups

Complete.

### Action 3.3C: Enhance support for children or parents with disabilities

- ACT In April 2011, Disability ACT created a dedicated Children and Young People's service.
- In 2011, work commenced on the development of Disability Information Services Hub. The hub is a collocation of government and community sector information and planning services for people with disability with a particular emphasis on planning and early intervention with children, young people and families
- Work commenced on improving access to after school and holiday care for children and young people with a disability, resulting in funding being made available in the ACT budget for 2011–12 for these initiatives.
- NSW NSW Government's Stronger Together Two is a commitment to provide a disability service system that is sustainable and responsive to the needs of people with a disability, their families and carers.
- \$2.02 billion will be invested in disability services over five years from 2011 to 2016, to create an additional 47,200 places for people with a disability, including children and young people.
- This includes:
- Intensive Family Support (IFS)—\$24 million will be invested over five years to support 200 families in the IFS program
  - Social and Support Networks—\$5.3 million will be invested over five years to building support networks to assist 600 families or individuals with a disability
  - Diagnosis Support—\$10.6 million will be invested to support 3,600 families at the time of diagnosis of a child with a disability.
  - Early Start—Early Childhood Intervention—\$77.6 million will be invested to promote skill development for children with a disability, providing an additional 3,700 places.
- VIC The Department of Human Services (DHS) has developed a collaborative disability and child protection policy and operating framework for an integrated response for children with disabilities and their families—consultation about to commence on proposed new comprehensive operating framework.
- DHS has also:
- Improved service response for children with disabilities in out-of-home care through implementation of improved administration and monitoring of Child Care Agreements
  - Developed and implemented an easy English version of the Charter for children in out-of-home care to improve understanding and relevance for children with disabilities
  - Is extending the Looking After Children (LAC) care management framework to children in out-of-home care provided by disability service and mainstream placement providers
  - Improved monitoring of children with disabilities in out-of-home care—initial audit completed and analysed; consultation about to commence on proposed ongoing monitoring regime.
- QLD The Department of Communities, together with other agencies, will implement the Building Bright Futures action plan and promote social inclusion of children to the age of eight years with a disability.
- The Family and Early Childhood services (0 to 6 years) and Family Support: The Early Identification Framework continues to be implemented for families and children with a disability.
- A Memorandum of Understanding between Child Safety Services and Child and Queensland Health's Youth Mental Health Services has been developed.
- The Evolve Interagency Services is delivering intensive therapeutic and behaviour support services to children and young people in care.
- The Evolve Behaviour Support Service—Early Intervention is providing intensive family-centred practice services at an earlier stage and providing families with enhanced resources in managing the complex needs of their family member.

The Specialist Disability Assessment service provided by the Disability Services' Evolve Behaviour Support Services has been expanded to strengthen supports to families at risk of relinquishing their child to statutory care.

NT Current policy is being reviewed to meet National Standards for out-of-home care and recommendations from the Board of Inquiry and CREATE.

SA Disability SA continues to deliver Sleepwise, a comprehensive approach to managing sleep problems in young children with disabilities. A research program to extend the Sleepwise program to older children and young people is being conducted in conjunction with Monash University. A number of pilot groups for families and carers of older children have been offered, with preliminary results demonstrating significantly improved outcomes for children and young people with sleep disorders.

Disability SA has piloted a new therapeutic group program for adolescent boys with Asperger syndrome or high functioning autism with violent and aggressive behaviour.

TAS A major reform of Disability Services in Tasmania included the appointment of co-located disability consultants in each area Gateway Service to provide assessment and referral for adults and children with disabilities.

WA The Disability Services Commission has a Memorandum of Understanding (MOU) with the Department for Child Protection to collaborate on meeting the needs of children and parents with disability.

Specialist disability services for children and parents with disability provided and funded by the Disability Services Commission include:

- Comprehensive disability professional early childhood intervention, for example pre-school, child care, community and home based services
- Comprehensive disability professional school-aged intervention provided in school, home and community settings
- Professional consultation, provision of, fitting and maintenance of specialised equipment
- Disability professional services relating to individual, family and behavioural interventions
- Family support services, including respite, school holiday programs and support for families to take holidays with their child with a disability
- Intensive family support, including in-home personal support.

These services are targeted to provide for the disability needs of children and parents with disability and are available to eligible Department for Child Protection service users.

School Plus allocates resources to schools for eligible students. Schools use these resources in the form of teacher and education assistant time to provide additional support for students with disabilities.

The Department for Child Protection introduced a new disability program, in partnership with community sector agencies, to provide a placement and support service for children with disabilities in the CEO's care. The new program will assist young people with the transition to services provided by the Disability Services Commission as they reach 18 years of age.

### Strategy 3.4: Expand housing and homelessness services for families and children at risk

#### Action 3.4A: Increase availability of affordable and social housing

Complete.

### **Action 3.4B: Targeted support to assist children and families who are homeless**

- SA South Australia's Child Focussed Support program Together 4 Kids (T4K) is targeted towards supporting families with children up to 12 years of age who are or have been homeless in metropolitan Adelaide. T4K also provides state-wide professional development concerning child development for Homelessness Service providers.
- WA Six workers, including services for Culturally and Linguistically Diverse families have been funded to support children and assist them in addressing issues associated with homelessness across the metropolitan area.

### **Strategy 3.5: Increase capacity and capability of: adult focused services to identify and respond to the needs of children at-risk; child-focused services to identify and respond to the needs of vulnerable families; the broader system to identify children at-risk**

#### **Action 3.5A: Establish professional development resources on the risk factors for, and impacts of, child abuse and neglect to be provided to child and adult focussed services and professions**

- ACT A neglect policy and practice paper was developed and finalised in November 2010.
- SA Drug and Alcohol Services South Australia are revising their intake and assessment procedures to collect information about whether adult clients have any children and whether there has been contact with child protection agencies.
- VIC The suite of specialist practice resources was launched in September, and work is underway to complete the remaining specialist practice resources by March 2012.

#### **Action 3.5B: Convene an expert taskforce to develop options for shared tools and approaches for assessment and referral across services and professional groups to better identify children at risk of harm: the Common Approach to Assessment, Referral and Support Taskforce**

- QLD The Department of Communities continues to work with the other states and territories to increase workforce capacity and expertise. The National Framework Implementation Working Group (NFIWG) meeting in February 2011 agreed that FaHCSIA would convene a sub-working group to consider key areas of this priority and report back with a work plan outlining six actions achievable, by 30 June 2012. Further scoping is underway on this work.

#### **Action 3.5C: Support the development and distribution of a resources guide to schools and early childhood services about responding to the needs of traumatised children**

- VIC In 2010–11, over 50,000 copies of the Child development and trauma specialist practice resource was distributed to a broad range of service providers and educational institutions.
- SA Between 2009 and 2011, the Department of Education and Children's Services (DECS) and the non-government schools have provided training to their respective workforces on Strategies for Managing Abuse Related Trauma (SMART). During 2010–2011, the program has been extended to include DECS school support officers and staff working with children with special needs.

#### **Action 3.5D: Build on and extend initiatives to support the workforce, such as WA's Foster Care Team Development initiatives**

- ACT The Community Services Directorate is developing a workforce development strategy which will identify the capacity and capabilities required to effectively deliver services and develop a workforce planning, attraction and retention strategy which will support the retention of staff working in the statutory system.

NSW Community Services has a number of human resources programs in place to support its workforce and build its capacity and capability. The three broad areas of focus for this support are recruitment, occupational health and safety (OHS), learning and development.

## Supporting Outcome 4: Children who have been abused or neglected receive the support and care they need for their safety and wellbeing

### Strategy 4.1: Enhance access to appropriate support services for recovery where abuse or neglect has occurred

#### **Action 4.1A: Target the Personal Helpers and Mentors Program where appropriate for people who have experienced abuse or neglect**

Complete for Funding Agreements.

#### **Action 4.1B: Support community-based recovery programs for people who have experienced abuse or neglect, such as the Adults Surviving Child Abuse (ASCA) therapy programs for survivors of childhood abuse**

Complete.

### Strategy 4.2: Support grandparent, foster and kinship carers to provide safe and stable care

#### **Action 4.2A: Provide specialist supported playgroups for grandparent and kinship carers to enhance peer support and provide developmental opportunities**

VIC Funding allocated through Grandparents Victoria. Three groups have been established in Dandenong, Geelong and Morwell.

#### **Action 4.2B: Continue to explore options through CDSMAC working group for improving financial and non-financial support to grandparent, kinship and foster carers**

ACT ACT has participated in the consultation about the development of the online carer resource.

NSW The FaHCSIA report, Financial and Non-Financial Support for Formal and Informal out-of-home carers prepared by the Social Policy Research Centre (SPRC), explored the payments and services available to grandparent, kinship and foster carers and analysed the gaps in support. The report was publicly released in December 2010 following endorsement at the CDSMC meeting on 16 December 2010.

FaHCSIA conducted consultations with peak Aboriginal and Torres Strait out-of-home care care NGOs in order to get a better understanding of the specific needs of Aboriginal and Torres Strait kinship carers and other carers of Aboriginal and Torres Strait children.

NSW consulted with carers in its jurisdictions (including peak groups, Coalition members and carers in that jurisdiction) regarding the content of the online carer resource. FaHCSIA consulted with national organisations (including Coalition members from national organisations).

The online carer resource is expected to be published later in 2011.

VIC Victoria has worked with FaHCSIA to provide all relevant information for the Victorian portal.

QLD Queensland stakeholders and the Department of Communities participated in consultation to inform the development of the online resource for carers. Once resources are publicly available, Queensland carers will be informed through various formats such as Departmental website.

NT **Board of Inquiry 40- Carer Reimbursement and Matching**

A project officer has commenced and a research paper on carer payments has been completed. Consultation has been held with both internal and external stakeholders and, as part of this process, categories of additional payments were reviewed and clearer guidelines developed.

Work is now underway to cost the options that have been developed.

The South Australian and Queensland Government have agreed in principle to the Northern Territory accessing a refined version of a Structured Decision Making tool, originally developed by Queensland, to assess and match children to carers.

Instructions have been issued to staff to reinforce the existing policy that registered kinship carers are paid the same allowance rate as registered foster carers. An audit of select areas will be conducted to measure compliance.

A routine increase of three per cent for the 2011–2012 financial year was approved to the rate of standard foster allowance in line with CPI.

SA South Australia has implemented Open Space Forums through the Joint Partnership Group for Carers. The forums provide an opportunity for carers, Families SA and alternative care service providers to discuss issues faced by carers, to raise topics of interest and to increase understanding and communication regarding the challenges faced in different roles.

Implementation of the Complexity Assessment tool will provide Families SA with a profile of children in care that will assist in case management, placement and service planning.

TAS The Department has funded the Gateway Services to provide support, including financial assistance, to grandparent and other relative carers who take on the primary care role for related children who are not under care and protection orders. The Gateways Supporting Grandparent Carers was launched in July 2011.

The Department introduced higher carer payments for kinship and foster carers from July 2010.

WA Increased foster care subsidy during 2010-11.

The Establishment Payment has been implemented to support informal relative carers who assume responsibility for the care of children in the family where there is a parental agreement to the living arrangement, a plan is made to support the placement and it is not intended to continue with statutory involvement.

**Action 4.2C: Increase the focus of support and services available for grandparent and kinship carers through Indigenous Child and Family Centres**

ACT The services at West Belconnen Children and Family Centres opened in May 2011 are targeted at addressing the needs of Indigenous families and their young children and will also provide services to all families in the community. The design and operation of the facilities will differ from Centre to Centre to ensure that services meet local needs.

An Aboriginal and Torres Strait Islander Carer Liaison Officer position was established and joins an existing Carer Liaison Position within the Community Services Directorate. The Aboriginal and Torres Strait Islander Carer liaison officer spends a day a week at West Belconnen to offer support to Indigenous Carers.

VIC The centres are being established through the Department of Education and Early Childhood Development. It is expected that they will be operating by June 2014.

Under the Indigenous Early Childhood Development National Partnership Agreement, 38 Children and Family Centres will be established.

Victoria will establish two Aboriginal Children and Family Centres, one in the City of Whittlesea and one in Bairnsdale, East Gippsland Shire. The centres will provide a dynamic mix of early childhood and family support services, including long day care, kindergarten for three and four-year-old Aboriginal children, visiting professionals such as maternal and child health nurses, counsellors, midwives and other programs including In Home Support, Koori Early Childhood Field Officers and Early Childhood Intervention Services.

#### Action 4.2D: Support programs for grandparent, kinship and foster carers

ACT The 2011–2012 ACT Budget committed \$1.69 million over four years to the development of a Community Kinship Care Support Program. Work is progressing on the development of a service model for four community-based Kinship workers to augment current service provision. Work is progressing on the Project and due to be finalised in early 2012. An Aboriginal and Torres Strait Islander Carer Liaison Officer position was established and joins an existing Carer Liaison Position within the Community Services Directorate. Carer Liaison officers provide an important initial point of contact for carers and assist them to navigate the services available.

Kinship Care Mediation and Counselling Service, established in November 2010, provides free individual, family group counselling and mediation services to kinship carers.

NSW NSW undertook a range of initiatives in 2010–11 to support carers, including:

- Developing the Raising Them Strong resource package for Aboriginal carers, sent to every authorised Community Services Aboriginal foster and kinship carer during August 2011
- Publication of Caring for kids—a guide for foster, relative and kinship carers
- A new carer information sheet with local contacts and support information as well as the Support For You brochure
- A one-day state-wide meeting of Regional Foster Care Advisory Group (RFCAG) representatives in June 2011
- Planning training for RFCAG representatives on their role and responsibilities as well as new online guide on these responsibilities
- Amendments to the RFCAG terms of reference across regions to include AbSec representation
- A quarterly magazine, Fostering our Future, was delivered to more than 2,400 carer families and distribution extended to include all authorised kinship carers
- New culturally relevant support resources were developed following consultation with Aboriginal carers in urban and regional areas
- Cultural training developed by the Association of Children's Welfare Agencies was delivered to Community Services authorised staff.

VIC Victoria has 29 kinship care services for mainstream and Aboriginal kinship carers. This includes service components for both statutory and private kinship carers.

QLD The Department of Communities has developed the Blueprint for implementation strategy—Reducing the over-representation of Aboriginal and Torres Strait Islander children in Queensland's child protection system.

The Department of Communities provides significant financial and non-financial support to formal kinship carers, including the fortnightly caring allowance, the establishment fees, and additional payments to respond to the needs of children with high and complex needs.

Queensland also provides a range of non-financial supports to informal carers including grandparents, such as the provision of respite to grandparent carers through the Time for Grandparents program, and access to discounts for all carers through the Foster Carer Card and Seniors Card program.

The Queensland Commission for Children and Young People and Child Guardian's Community Visitors Program regularly visits foster and kinship carers, and the children in their care, to assist in resolving any concerns which are affecting the children's safety or wellbeing.

- SA The Department for Families and Communities continues to use the Time for Kids respite program to provide respite opportunities for grandparents who are caring for grandchildren.
- The Department for Families and Communities continues to host a Grandparents Raising Grandchildren in Informal Care group which meets regularly to discuss issues of concern for informal carers.
- Department for Families and Communities has undertaken a review of the Informal Relative Caregiver's Statutory Declaration. Analysis is underway and will inform improvements to the Statutory Declaration, systems and/or procedures.
- TAS The Gateways Supporting Grandparent Carers program includes funding to manage support groups that will assist relative carers to make a successful adjustment to the role of being the primary carer for related children.
- WA The Department for Child Protection completed a review of the Foster Care Partnership. The Department continues to build on the achievements to ensure safe and stable foster care placements.
- Work progressed on the Respite Care Program, with 60 approved specialist respite carers available. In addition, 25 camps were held in metropolitan and regional areas, which provide a valuable source of respite for many relative carers, particularly grandparents. Day programs were run for special groups, such as Aboriginal young people, to provide them with culturally appropriate experiences, and for children who are not yet mature enough to take part in holiday camps.

#### **Action 4.2E: Continue to explore options through the Australian Health Ministers' Conference in relation to the health care needs of children entering and in out-of-home care**

- NSW The implementation of stage 1 of the Pathway commenced July 2010, with the target group being all children and young people entering statutory out-of-home care and who are expected to remain in care for 90 days or more.
- As of 30 June 2011, referrals to the Pathway for children and young people entering statutory out-of-home care indicate:
- 1,072 children and young people have been referred by Community Services for a health screening and assessment
  - 611 primary health screenings have been completed by Local Health Districts
  - 169 comprehensive health assessments have been completed by Local Health Districts
  - 260 Health Management Plans have been completed by Local Health Districts and provided to Community Services.
- NSW Health is currently implementing additional out-of-home care health assessment clinics in Sydney and Hunter New England for children under 5 years of age currently in statutory out-of-home care.
- The new clinics will have capacity to provide assessments to 1,356 children, or 44 per cent of children, in statutory out-of-home care in that age group.
- NSW Health has established out-of-home care Coordinators in a range of Local Health Districts, and Community Services has established Interagency Pathway Coordinators in each of its Regions.
- Community Services has also put in place a range of casework practice and technical supports and tools to support staff delivering the Pathway.
- QLD Department of Communities continues to implement the Child Health Passport. The Child Health Passport aims for a health assessment and follow-up treatment for children and young people in out-of-home care for more than 30 days. The assessment focuses on overall physical health, including vision and hearing.
- VIC Following an earlier pilot, Victoria is now developing a new health and education assessment model for implementation in 2012.

- NT Carers as Partners is a range of strategies developed that include the development of a partnership agreement with FosterCare NT; introduction of a carer advocacy and carer peer support program; establishment of a carer learning and development program; and roll out of the Foster and Kinship Carer Excellence Awards.
- Twelve consultation sessions were undertaken around the Territory to help develop the partnership agreement and Carers Charter which commenced in September 2011.
- SA The Second Story Youth Health Service has developed two Aboriginal Clinical Health Worker positions contributing to the health assessments and community follow up for Aboriginal young people in juvenile detention.
- Rapid Response is an across-government initiative which forms part of the South Australian Government's Keeping them Safe child protection reform program. Under the auspice of Rapid Response, the Second Story Youth Health Service has introduced a new position to coordinate referral pathways into primary health care services for young people's health assessments and ongoing healthcare as required.
- South Australia's *Health Standards for Children and Young People under the Guardianship of the Minister* are applicable to all public health services. Work has commenced to ensure that the Guardianship Health Standards are consistent with the National Standards for out-of-home care and the National Clinical Assessment Framework for Children and Young People in out-of-home care.
- TAS Tasmania has endorsed the National Clinical Assessment Framework for Children and Young People in out-of-home care.
- WA Implementation of Rapid Response (an across-government initiative for children and young people in care) including health planning for children in care from May 2011.

#### **Action 4.2F: Enhanced support for grandparent and kinship carers as a specified target group under the Communities for Children program**

- VIC Communities for Children is part of the Family Support Program (FSP) which provides prevention and early intervention programs to families with children up to 12 years, who are at risk of disadvantage and who remain disconnected from childhood services.
- There are eight sites in Victoria.

### **Strategy 4.3: Improve support for young people leaving care**

#### **Action 4.3A: Increase support through NGOs for young people leaving care to establish their independence**

- ACT The ACT has been consulting regularly with the Non- Government Services sector on the development of the new transitioning from out-of-home care support model.
- VIC Post Care Support Information and Referral services, with flexible brokerage budgets, in each of the eight department regions in Victoria.
- QLD Queensland is implementing the Youth Housing and Reintegration Services including After Care services (as part of the Homelessness National Partnership Agreement) in six locations across the state. The funded NGOs provide case management and brokerage to assist young people leaving care to access stable accommodation and address risks of homelessness.

### Action 4.3B: Continue and improve state and territory initiatives targeting young people as they leave care

ACT A program supporting young people transitioning from out-of-home care will provide a range of supports and services to young people up to the age of 25 years. Work on the model has been in progress throughout 2010-11 and is currently being finalised and includes legislation changes and the development of a team who will offer specialised support for transition planning for children and young people.

NSW NSW has contributed to the development of a nationally consistent approach to leaving care planning through the National Framework Implementation Working Group.

NSW also participated in the review of the Transition to Independent Living Allowance, led by Colmar Brunton Social Research.

VIC The Victorian government has committed an additional \$16.9 million over four years to enhancing supports for young people in out-of-home care, prioritising those in residential care. This funding will be dedicated to ensuring positive outcomes in education or vocational training, resulting in sustainable employment for young people up to 21 years.

The government is also committed to providing support to those young people who need it up to 25 years of age.

QLD The Department of Communities continues to support young people leaving state care and has the following programs and initiatives to support young people:

The Children and Young People's Participation Strategy was developed to work in conjunction with CREATE, Peakcare, Foster Care Queensland and the Queensland Aboriginal and Torres Strait Islander Child Protection Peak.

This group created the GFORCE group to support the development of a strategy for a nationally consistent best practice approach to Transitioning from Care, including an increase in the participation of young people in decision making.

The Department of Communities participated in the development of a nationally consistent approach to leaving care planning, which was finalised in September 2011.

A joint project with CREATE developed a transition from care promotional kit Go Your Own Way: A Guide to Transitioning from Care, which assists government and non-government organisations to engage young people in making decisions as they transition to independence.

The Youth Housing and Reintegration Service Including After Care (YHARS) is part of the Homelessness National Partnership Agreement is also being implemented in six locations.

The Department of Communities through Disability, Home and Community Care and Community Mental Health, continues to support the following programs:

- Transition and Post Care Support Program
- Disability and Community Care Services
- The Housing and Homelessness NPA.

The Life Without Barriers (LWB) Transition from Care (TFC) program provides transition from care services to young people aged between 15 and 17 years of age who have been referred by Child Safety Services. The service is available in the Beenleigh to Goodna corridor in south east Queensland.

The Queensland Commission for Children and Young People and Child Guardian's community visitors monitor transition from care plan development and ensure the young person understands what is in their plan. They also recommend improvements to service delivery.

Foster Care Queensland assists carers in supporting young people through the transition from care process.

CREATE Foundation provides an advocacy role, as well as training and policy advice around caring for young people in care. CREATE also hosts a National Youth Advisory Council (NYAC) summit each year which brings together the NYAC youth delegates from across the country with a focus on developing plans that address key issues impacting on children and young people in care.

- NT Revised Practice Guidelines have been developed in consultation with operational staff and external stakeholders.
- SA The Department for Families and Communities held a Sustainable Housing Workshop to discuss good practice, understand operational models and to identify joint strategies to support young people in their transitions from care into sustainable housing.
- The Department for Families and Communities has commenced a research project to examine the circumstances, experiences, difficulties and strengths of young people who have formerly been in statutory care in South Australia, and evaluate the service needs of young people leaving care and the extent to which these needs are being met.
- TAS The Department has funded CREATE Foundation to manage the CREATE Your Future program for Tasmanian care leavers from 1 July 2010 to 30 June 2013.
- The leaving care information package (Outta Here, Your Options Your Choices) has been revised and updated.
- The Moving On Program (managed by an NGO) has been allocated new purpose built units to support young people leaving care.
- WA Increased funding for individualised funding packages to support young people leaving the Department's Care.
- The Department has completed a review of its policy and practice for supporting young people preparing to leave care and those who have already left care (up to 25 years of age). Work is continuing on strengthening collaborative practice between the Department, foster carers and partner agencies.
- During 2010–11, the Department continued to fund the CREATE Foundation to represent and support children in care, develop skills to improve their life outcomes and connecting them with their peers, giving them a sense of belonging.
- In November 2010, the Department launched a pilot project in two district offices to support young people to undertake the rigorous motor vehicle licensing process. Resources were developed, including:
- A guide for field staff to assist young people in obtaining their licence
  - A service provider resource list
  - Local service agreements for subsidised support for driving lessons and completion of the 25-hour log-book requirement.

### Action 4.3C: Implement policy of 'no exits into homelessness' from statutory care

- ACT The ACT has introduced the Youth Integrated Education Accommodation Service—which provides up to 28 places, with accommodation and support for young people aged 16–25 years, to maintain stable housing linked to engagement with education and employment services. The service will be adapted to specifically meet the needs of young people who are homeless or at risk of homelessness in the ACT.
- NSW There are a number of initiatives under the NPAH focusing on young people leaving care, including two state-wide initiatives funded by NSW, and location specific initiatives funded by the Commonwealth.
- Community Services is working with NGOs to implement relevant projects under the NSW Homelessness Action Plan including:
- Assisting Aboriginal young people leaving out-of-home care to successfully transition to independent living
  - Preventing homelessness by providing secure transitional housing and integrated support programs which focus on training, education and employment for young people with low to moderate needs
  - NSW is discussing a set of principles to promote the policy of no exits into homelessness.

- VIC The department is strengthening transition planning for all young people between 16 and 18 years of age to ensure safe and sustainable transitions from out-of-home care. Two new foyer-like models, with 'in-house' education, training and employment supports, are being trialled in Ballarat and Warrnambool. Three more are planned for the Melbourne metropolitan area.
- The department has also funded Melbourne City Mission's Front Yard service to operate a centralised Leaving Care Helpline (1300 532 846).
- QLD The Department of Communities continues to implement the Youth Housing and Reintegration Service (YHARS), including the After Care Service, which was established using joint funding with the Commonwealth NPA on Homelessness.
- The *Queensland Strategy for Reducing Homelessness 2011–2014* addresses prevention, housing and support, and services reform. It will be assisted by recent investments in housing and homelessness programs through the Australian Government's National Partnership Agreements and by the Queensland Government adoption of a 'no wrong door' approach to service delivery. The strategy will contribute to national objectives and targets in the homelessness NPA.
- SA Outcomes from the Sustainable Housing Workshop convened by the Department for Families and Communities will guide future reforms in South Australia. This will include the development of protocols between Families SA, Housing SA and Disability SA for relating to the provision of services for young people exiting out-of-home care.
- WA A program has been funded to provide young women and young mothers leaving child protection services with suitable transitional accommodation. In addition, the Foyer service will allocate dedicated units for young people leaving child protection services.

## Strategy 4.4: Support enhanced national consistency and continuous improvement in child protection services

### Action 4.4A: Develop and introduce ambitious National Standards for Out-of-home Care

- ACT The ACT has supported the introduction of the National Standards for out-of-home care.
- VIC Victoria actively participated in the development of the standards and continues to participate in the development of suitable performance measures and the quality survey.
- QLD The Department of Communities has contributed to the development of National Standards for out-of-home care. The measures for reporting on the National Standards have been informed by ongoing consultation with Queensland stakeholders, including peak bodies; for example, the Queensland National Framework Intergovernmental Working Group discussed the measures during meetings in 2011, and the standards remain a regular agenda item for QNFIWG meetings.
- SA South Australia has commenced discussions with child protection practitioners and other agencies to progress the implementation of National Standards for out-of-home care including data collection for reporting arrangements.

### Action 4.4B: Support child protection services to maintain continuous improvement

- ACT ACT has established a strong partnership with the Australian Childhood Foundation, Institute of Child Protection Studies and Thomas Wright Institute to help provide expert opinion informed by research to support practice across the ACT.
- NSW Throughout 2011 the NSW Mandatory Reporter Guide (MRG), a world first, Structured Decision Making (SDM) tool which is available online and as a PDF, has continued to assist mandatory reporters decide what to do when they are concerned about a child or young person. As part of its implementation strategy, the MRG continues to be fine-tuned, with a third edition uploaded in November 2011. It now has nineteen (19) decision trees that assist mandatory reporters with their decision.

Structured Decision Making (SDM) tools have also been customised for use at the Child Protection Helpline and in Community Service Centres.

The SDM Safety, Risk and Risk Reassessment (SARA) tools were successfully field tested and trialled during 2010. Due to this success, the decision was made to introduce the tools state-wide. SARA training and implementation has occurred progressively in Community Services Centres across the state during 2011.

The 2011 trial of the SDM Family Strengths and Needs Assessment (FSNA) tool in nineteen (19) Community Services Centres (CSCs) was positively evaluated, with the CSCs that participated in the trial continuing to use it. The FSNA assists caseworkers to identify and prioritise the strengths and needs of all family members.

Community Services is leading the development of *Child Wellbeing and Child Protection – NSW Interagency Guidelines*, providing information and guidance to all organisations involved in the delivery of child wellbeing and child protection services in NSW. The guidelines are being updated with new sections on engaging children, young people and families; a guide to court processes involving children and young people; exchanging information; roles and responsibilities and prevention and early intervention strategies.

VIC Implementation of 2011-12 budget initiatives includes:

- \$19.4 million to employ an additional 47 frontline workers
- \$16 million for intensive ante and post-natal support for vulnerable mothers and families
- Extension of the Early Childhood Development pilot projects for a further 8 months (\$1.7 million)
- \$1.8 million for the Children’s Protection Society Child Care Centre Pilot Project.

For out-of-home care, \$55.1 million over four years for a number of initiatives, including:

- \$22.2 million to secure 300 placements
- \$16.9 million for better supports for up to 900 care leavers
- \$12.8 million for initial health and education assessments
- Continuation of foster care information services (\$0.6 million)
- New independent Children and Youth Persons Commissioner (\$1.6 million)
- Longitudinal study on the impact of out-of-home care (\$1 million).

Strengthening Aboriginal Community Controlled Organisations (\$2.14 million) that support vulnerable children and families.

*Child protection: the case for change* (DHS, May 2011) and *Protecting children, changing lives* (DHS, June 2011) set out proposals for a new child protection operating model in Victoria that features:

- More practitioners, with more experience working directly with children, young people and families
- Greater support and supervision leading to better outcomes for children and young people
- Valuing the work child protection practitioners do.

QLD The Department of Communities continues to improve and revise initiatives and programs for continuous improvement through:

- The Child Safety Directors’ Network (CSDN)
- Enhancements to the Quality Assurance Strategy for out-of-home care services that are provided by non-government organisations.
- The Human Services Quality Framework (HSQF)
- The One Chance at Childhood program through 31 specialist positions
- The provision of professional advice and skill development for frontline staff and coordinate state-wide initiatives and programs to improve child protection practice.

The Department of Communities and the Department of Education and Training are continuing to provide enhanced education opportunities to child protection staff to build a skilled workforce for the protection of children in Queensland. The Child Protection Skilling Strategy will enable at least 300 child protection services workers to undertake and complete a Certificate IV in Child, Youth and Family Intervention qualification through four TAFE Queensland Institutes. A key priority of the strategy is the participation of Aboriginal and Torres Strait Islander child protection workers.

The Queensland Commission for Children and Young People and Child Guardian contributes to maintaining continuous improvement through:

- The Community Visitors program and its key role in monitoring service provision to children and young people in care
- Biennial publication of a report on the views of children in care to inform continuous improvement of these care systems.

NT Board of Inquiry 140 - That the NTFC establishes mechanisms for regularly listening to the voices of children and young people regarding their experiences in the care system, for determining their needs, and for implementing improvements to the standard of care and support that is provided.

SA The South Australian Government continues to implement its response to the recommendations of the Children in State Care Commission of Inquiry Report and to enhance child protection outcomes, both within the care and protection system and across the wider community. A key outcome for 2010–2011 has been the commencement of extended provisions under the Children’s Protection Act 1993 relating to child safe environments.

In the 2010 State Budget, the South Australian Government announced an additional \$137.7 million over four years for Families SA to care for children under the Guardianship of or in the custody of the Minister. Families SA has created a Residential Care Directorate to continue to grow and strengthen quality residential care for children under guardianship.

TAS The Workforce Professional Development Unit within Children and Youth Services provides orientation and specialist training for child protection workers in Tasmania. Specialist training includes signs of safety, cumulative harm and working with parents with mental illness.

WA There are various mechanisms in place to maintain continuous improvements in child protection services, including:

- The Department’s Standards Monitoring Unit monitors the Better Care, Better Services: Standards for Children and Young People in Protection and Care (2007). The Unit monitors performance in the Department’s districts, commissioned placement services and funded community sector placement services
- The Case Review Panel independently reviews planning decisions for children in care.

#### **Action 4.4C: Support the Australian New Zealand Child Death Review Committee to develop more consistent data to help better understand the circumstances of child deaths and how these could be prevented**

ACT In 2010–11, the ACT introduced legislation to establish a Child Death Review committee and will commence the development of a register in 2012. The ACT will ensure consistencies with National Data are considered.

QLD The Queensland Commission for Children and Young People and Child Guardian chairs the Australia and New Zealand Child Death Review and Prevention Group. The Group was established in 2005 and since then has regularly met to share trend information and help identify national priorities in risk factors associated with child deaths. The Group has submitted a project proposal to the Commonwealth related to preventable infant mortality. The Commonwealth is currently considering the proposal.

#### **Action 4.4D: Improve our understanding of children in the child protection and care system (confidential unit record data, data definitions)**

QLD The Queensland Government, through the Department of Communities, participated in the pilot collection of the child protection unit record data, including development of the data collection manual to specify requirements for the files and provision of data.

With the pilot completed in mid-2011, Queensland is now focusing on the unit record file dress rehearsal to be held in 2012. Queensland has committed to providing those items currently reported nationally in the Child Protection Australia report for the dress rehearsal.

VIC Victoria has chaired the Technical Working Group that is helping to develop national unit records for child protection. The group has revised technical specifications, determined the priority of items for collection and identified new analyses that can be undertaken through unit records.

Victoria has also consulted with AIHW to improve the understanding of the Victorian unit record data (for example, availability/quality) and has contributed to the review of the 2010 pilot collection.

#### **Action 4.4E: Support a National Research Agenda for Child Protection**

QLD The Queensland Government, through the Department of Communities, has had a representative on the Filling the Gaps in Research Working Group (FRGWG) since early 2011.

VIC Victoria is in the process of implementing its ground-breaking Child Protection and Family Services Outcomes Survey (CAFSOS). The survey consists of telephone interviews of 1,200 parents and carers and face-to-face interviews of 200 children and young people. Participants provide comment on their service experience, parenting capacity and the child/young person's health and wellbeing. An initial report is due in March 2012. The survey will be repeated in 2 years' time.

### **Supporting outcome 5: Indigenous children are supported and safe in their families and communities**

#### **Strategy 5.1: Expand access to Indigenous and mainstream services for families and children**

##### **Action 5.1A: Expand Indigenous Parenting Support Services to additional sites**

Complete.

##### **Action 5.1B: Link 35 Indigenous Child and Family Centres with the range of family and community programs for at-risk children. Improve access to child and maternal health services for Indigenous families**

ACT The West Belconnen Child and Family Centre offers a range of services to families to support their child's health, learning and development, with a particular focus on Indigenous families and children from birth to eight years of age. There are early learning activities, play groups and parental courses, as well as other child and family services such as maternal and child health and allied health services.

QLD The Queensland Government through the Department of Education and Training is establishing 10 Children and Family Centres in urban, rural and regional centres across Queensland with relatively high Aboriginal and Torres Strait Islander populations.

The Children and Family Centres will respond to community needs to ensure families receive the support they need. They will provide integrated early childhood education and care, parent and family support and child and maternal health services.

VIC The Department of Education and Early Childhood Development (DEECD) has lead for the Indigenous Child and Family Centres. DHS has established links with DEECD at the state and regional level where centres are to be established to ensure planning for the centres factors in relevant DHS programs to support vulnerable children and their families.

DHS and DEECD continue to liaise to ensure centres, once established, are aware of relevant DHS programs that support vulnerable children and their families.

### **Action 5.1C: Support SNAICC to develop resources and materials to support and promote child and family services within Indigenous communities**

Ongoing.

### **Action 5.1D: Continue to focus new activities in the Indigenous Family Violence Partnership Program and Indigenous Family Violence Regional Activities Program on child protection issues**

Ongoing.

## **Strategy 5.2: Promote the development of safe and strong Indigenous communities**

### **Action 5.2A: Ongoing support and strengthening of the Northern Territory Emergency Response**

Ongoing.

### **Action 5.2B: Continued support for Indigenous community building activities**

ACT The third Child and Family Centre in the ACT, which opened in May 2011, has a focus on services for Aboriginal and Torres Strait Islander children and their families. Services are planned in consultation with the community to ensure they are appropriately targeted.

NSW Under the NSW Government's Aboriginal Child, Youth and Family Strategy, 13 books have been published, covering 20 different Aboriginal language groups, as part of the Growing Up Strong series.

VIC In October 2010, DHS announced the establishment of the Morwell Local Indigenous Community Partnership Project (Secretary's site project). The site includes the Latrobe City post codes of Moe, Morwell, Churchill and Traralgon.

The Morwell Project is continuing. A Steering Committee comprising key stakeholders from government, Aboriginal community and service providers has met twice and endorsed an action plan for the project 'Enhanced outcomes for infants and young children through strengthened families'.

QLD The Queensland Government continues to implement various strategies and initiatives to support Indigenous community building activities:

- The Cape York Welfare Reform (CYWR) trial where four Queensland communities Aurukun, Coen, Hope Vale and Mossman Gorge have agreed to be part of the trial
- A central reform initiative in the Cape York Welfare Reform trial is the Family Responsibilities Commission (FRC), aiming to improve the care of children and to connect families with a wide range of support services
- Queensland Government's alcohol management program provides increased safety for children through increased access to health and social services for them and their families
- Queensland Government's Champions Program ensures that issues of child wellbeing are part of COAG priority and negotiation table discussions with the Aboriginal and Torres Strait Islander communities that they partner with

- Local Indigenous Partnership Agreements (LIPA) are iterative agreements and continue to include child wellbeing as a priority for both community and government
- The Department of Communities is the lead agency for Aboriginal and Torres Strait Islander Services in Queensland, and under the Project 2800 Strategy, the department's target of 4.4 per cent representation of Aboriginal and Torres Strait Islander employees is across all service streams.

In partnership with Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSIPP) and CREATE, the Government has developed the Blueprint for an implementation strategy to reduce the over-representation of Aboriginal and Torres Strait Islander children in Queensland's child protection system.

The Blueprint for Implementation includes a review of Department of Communities policies, procedures and practice for working with Aboriginal and Torres Strait Islander children and their families, including the child placement principle, provisional approvals and unborn children.

Through the Department of Education and Training and COAG National Partnership on Indigenous Early Childhood Development, the Indigenous Children and Family Centres will deliver integrated early childhood education, care, family and parental support to local Indigenous children and families.

The Queensland Government, through the Department of Employment, Economic Development and Innovation (DEEDI) has introduced the following:

- 12 Indigenous Employment and Training Managers (IETMs)
- 41 Indigenous Employment and Training Support Officers (IETSOs) to work with Indigenous communities and industry to develop employment opportunities for local people. IETSOs provide support to approximately 2,000 young Indigenous people each year.

- NT A literature review and review of policy in other jurisdictions has been completed. A draft Consultation Paper has been prepared. Over the next six months, the Department will consult with internal stakeholders, using the consultation paper as a starting point for discussions. An internal reference group will be formed to provide guidance to the project. The outcome of these processes will be the development of new policy, procedures and guidelines, and tools to support the implementation of the policy.
- SA The South Australian Police have permanently deployed staff on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands who will focus on relationship and trust building to work with women in the community on the best way to deal with domestic and family violence in their community. The program is staffed by female police officers.
- The Women's and Children's Health Service Vulnerable Infants Support Service, funded by the COAG National Partnership on Closing the Gap in Indigenous Health Outcomes, is working in partnership with Families SA and northern region non-government organisations to provide a flexible response to Aboriginal infants identified as at risk of harm but not imminent risk. The aim is to provide an early response to reduce the likelihood of serious harm occurring.
- South Australia's *Aboriginal Family Birthing Program*, providing culturally appropriate local maternal and infant care for Aboriginal women, continues to be rolled out across SA country and metropolitan locations.
- WA This will occur over time when the Child and Family Centres are operating.
- The East Kimberley Hub and Outreach Service (established in 2008) is continuing to assist communities to identify specific needs and priorities, building on strengths, developing appropriate programs and services, offering training opportunities and supporting a community response to family violence. Programs and activities have continued to raise awareness and challenge the acceptance of family violence in Aboriginal communities in the East Kimberley region.

## Strategy 5.3: Ensure that Indigenous children receive culturally appropriate protection services and care

### Action 5.3A: Develop and expand the Indigenous child protection and welfare workforce

ACT The Community Services Directorate is developing a workforce development strategy which will identify the capacity and capabilities required to effectively deliver services and develop a workforce planning, attraction and retention strategy which will support the retention of staff working in the statutory system.

An Aboriginal and Torres Strait Islander Employment Action Plan 2011–2013 has also been developed in the Community Services Directorate which employs Care and Protection Services workers, to increase the number of Aboriginal and Torres Strait Islander employees in the organisation.

VIC The Building the Capacity of Aboriginal Organisations four-year initiative will:

- Provide scholarships to Aboriginal students undertaking the Graduate Certificate in Child and Family Practice and the Graduate Diploma in Child and Family Practice Leadership courses funded by this division, at a cost of \$15,000 for each of four ACCO staff
- Deliver practice workshops for ACCO child and family services staff to increase ACCO staff capabilities and to support workers to address their own trauma, loss and grief. Targeted skills training may include: working with clients in the context of trauma and grief issues arising from child removal policies and practices; and providing parenting programs focused on supporting and developing parenting capacity.

QLD Over eight per cent of Community Services caseworkers identify as Aboriginal, with over 20 per cent in some rural areas, and the organisation is committed to maintaining and improving the size of its Aboriginal workforce. To facilitate this, Community Services targets its advertising for Aboriginal caseworker positions, provides information sessions for potential applicants in rural areas, and accepts Aboriginal caseworker applications with at least two years' relevant experience working with Aboriginal communities in lieu of a degree. Aboriginal appointees without a degree are given additional training through a bridging course to assist them to undertake the Caseworker Development Program.

Community Services has established four Aboriginal cadet positions for Aboriginal psychology students under the Commonwealth Indigenous Cadetship Program in order to increase the number of Aboriginal psychologists working in child protection and out-of-home care. An additional Aboriginal psychologist has completed the program and is working with children and families and mentoring the present students.

NT **Strategic Workforce Planning**

A project proposal has been approved for development of strategic workforce plans for the Department, based on the vision of the Northern Territory having a sustainable workforce sufficiently qualified, skilled and flexible to achieve the strategic objectives of the Department of Children and Families.

There will be a specific Aboriginal and Torres Strait Islander strategic workforce plan, and both plans will be developed and implemented in close cooperation and partnership with the workforce. 'Workforce' includes employees in the Department and NGOs. A tender has been released for the first phase of the strategic workforce plans, which will involve detailed mapping of the workforce, an analysis of existing job descriptions, identification of successful national and internal recruitment and retention measures and the development of relevant key performance indicators.

A project proposal has been approved for the development of the Department of Children and Families' first annual report, incorporating all Board of Inquiry recommendations, especially recommendation 135, requiring annual reporting against achievements and outcomes.

SA Department for Families and Communities (DFC) continues to implement the Aboriginal Employment Strategy 2007–12. The Department has achieved 3.8 per cent of Aboriginal and Torres Strait Islander staff employed across the Department, exceeding the two per cent benchmark. Aboriginal employees are well represented across classification levels, and average tenure of these employees has increased during 2010–2011.

An Aboriginal Employment Pool commenced in the Department for Families and Communities in 2011. This pool provides opportunities for Aboriginal and Torres Strait Islander candidates to be considered for a range of roles within DFC as they arise and before they are advertised.

TAS Tasmania is currently in the midst of a public sector recruitment freeze which has stalled its capacity to expand its child protection and Indigenous welfare workforce.

WA Aboriginal Employment & Learning Strategy (AELS) is in place and under review to improve opportunities and outcomes.

The Department for Child Protection continues to work towards the targets for Aboriginal workforce representation in the AELS. These targets are established for each Business Unit and District across the Department, to reflect the population ratios.

The Department's Aboriginal staff representation as at 30 June 2011 was 9.3 per cent. To ensure that service delivery is appropriate for Aboriginal children and families, attraction and retention of Aboriginal staff remains a key priority for the Department. A National Aboriginal recruitment campaign is being considered to increase Aboriginal staffing across all areas of the Department.

An Aboriginal Services Framework is in place and being reviewed with a view to developing an Implementation Plan. This includes a number of strategies, including the ongoing development of Aboriginal Practice Networks, focused on identifying challenges and solutions to working with Aboriginal children, young people, families and Communities; and the directions for Cultural Learning Strategy.

### Action 5.3B: Improve child protection service delivery for Indigenous families and children

ACT The ACT has strengthened child protection service delivery for Indigenous families and children in 2010–11 by increasing early intervention supports through the establishment of the West Belconnen Child and Family Services which has a specific focus on services for Aboriginal and Torres Strait Islander children and young people. The appointment of a specific Aboriginal Kinship Liaison Officer has also increased supports for carers and children in kinship and foster care placements.

In 2010–11, ACT Care and Protection Services continues to work closely with the Aboriginal and Torres Strait Islander Services family support staff and Integrated Service Delivery team to ensure appropriate supports are in place for children known to the Care and Protection system.

NSW In keeping with the Memorandum of Understanding with AbSec underpinning PACT in 2010–11, much of the joint planning and consultative work for this four-year pilot has been completed. AbSec and Community Services have worked closely together to consult with local Aboriginal communities and NGOs and identify two pilot sites at Moree and Shellharbour.

The Illawarra Aboriginal Corporation are the recently selected PACT provider for the Shellharbour area. In Moree, Pius X Aboriginal Corporation has been selected to provide the PACT advisory service and both providers are expecting to start working in partnership with Community Services to deliver services to local Aboriginal families in early 2012.

By consulting closely with these organisations and community representatives, AbSec and Community Services have worked to ensure that the pilots have the support of communities and other service providers.

VIC Victoria is building the capacity of Aboriginal organisations to deliver high quality services to vulnerable children and families through supporting performance improvement against the department's registration standards:

- Provide therapeutic responses for Aboriginal children in home based care
- Support Aboriginal young people transitioning from out-of-home care to independent living
- Support the development and implementation of Cultural Support Plans (CSPs) for Aboriginal children subject to guardianship or long term guardianship to Secretary Orders. Note: CSPs are now prepared by ACCOs to ensure their cultural relevance and sensitivity

- As part of the 2009-10 out-of-home care reforms, implementation of three Aboriginal-specific demonstration projects in Child FIRST catchments of the family coaching Victoria service which is trialling an alternative pathway to out-of-home care aimed at preventing children entering out-of-home care for the first time or supporting safe reunification for first-time entrants into out-of-home care
- 20 families have been supported to date, which includes 57 children. Another 10 Aboriginal families, which include 34 children, have been supported through the mainstream demonstration projects
- An evaluation is underway of the family coaching Victoria service.

Section 18 The *Children, Youth and Families Act 2005*:

- Is a significant reform in the range of legislated requirements focused on improving outcomes for Aboriginal children and their families. Section 18 allows the Secretary to authorise the principal officer of an Aboriginal agency to perform functions and powers in relation to a protection order in respect of an Aboriginal child
- The intent of this reform is to empower community decision making and self-determination; afford greater stability of workers involved in the children's lives; allow for greater Aboriginal community involvement in the care of children on protection orders; and promote connection to extended family and connection to Aboriginal community
- A departmentally convened working party has progressed research, policy and program development work on section 18
- The department has also been working with ACCOS to increase their responsibility for placement services, including contracted placements, to build capacity to take on section 18 authorisations. On behalf of the working party, VACCA has undertaken a research and consultation project to inform the section 18 model development including a recent study tour to Canada.

QLD The Department of Communities is developing a range of support services for Indigenous families and children; these include:

- 11 Aboriginal and Torres Strait Islander family support services which, through Recognised Entities, aim to prevent and reduce the incidence of Aboriginal and Torres Strait Islander children and young people progressing into the statutory system. This role ensures that the department makes the best possible decisions about Aboriginal and Torres Strait Islander children and young people
- The establishment of Safe Houses within 11 remote Aboriginal and Torres Strait Islander communities, which deliver supervised residential carer services to provide a short-term safe place for children, with Family Intervention Services workers providing support and assistance to children and families subject to child protection intervention
- The Safe Haven initiative, which provides a culturally responsive service, tailored to meet specific community need and responding to the needs of children, young people and their families affected by domestic and family violence in four Aboriginal and Torres Strait Islander communities. Safe Havens provides family support and counselling, youth work, emergency care funds to relative carers and community capacity building
- The Government Champions Program, which will ensure that services relating to child wellbeing are part of COAG priority, negotiation table and Local Agreement discussions with the Aboriginal and Torres Strait Islander communities with which they partner
- The whole-of-government Queensland Government Reconciliation Action Plan 2009–2012, which includes several actions relating to child wellbeing and service delivery, including the involvement of the Queensland Aboriginal and Torres Strait Islander Advisory Council
- The Blueprint for implementation strategy has identified a priority project to develop an agreed practice framework and manual for Recognised Entities and Aboriginal and Torres Strait Islander Family Support Services. The practice manual for Recognised Entities has been completed.

In partnership with Department of Justice & Attorney-General and Queensland Health, the Department of Communities is assisting Aboriginal parents who are alcohol dependent or high risk drinkers to improve their wellbeing and parenting capacity by facilitating referrals to the Queensland Indigenous Alcohol Diversion Program.

The Queensland Commission for Children and Young People and Child Guardian provides support to Aboriginal and Torres Strait Islander children and young people.

#### NT **Recruitment, Support and Retention**

A foster and kinship carer community awareness and recruitment campaign has taken place from May to July, focusing on the Northern Territory show circuit and regional festivals including:

- The Garma 'We of the Never Never' Festival
- Barunga Festival
- The Borroloola Festival.

Stalls were jointly staffed by staff and volunteers from the Department of Children and Families, Foster Care NT and Life Without Barriers.

A range of communications products was developed to support these activities. Visits to a number of remote communities have occurred, and discussions have been held with elders. A comprehensive learning and development program has been implemented for carers. Fifty-five self paced learning modules will be available to carers who will attend face to face training including Transforming the Care and Therapeutic Crisis Intervention for Care.

The Carer Registration Review Team (CRRT) currently has two P2 Advanced practitioners who continue to focus on Kinship Carer assessments and registrations and the re-registration of Carers who currently have children in their care. In support of the CRRT, two adoption workers are currently assisting with carer assessments and registrations.

An approach has been made to the Manager of the Mobile Child Protection Team for assistance, and an offer of two additional staff members has been made.

Whilst the statistical data on the Carer Assessment Review Report shows little movement, it is important to note that, as Carers with expired registrations are being assessed and registered, the numbers requiring assessment and re-registration increase due to current registrations expiring.

SA The South Australian Police trial of having one detective and two female child sex abuse investigators based on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands is continuing, with plans to run the NAPCAN *Love Bites* program across the APY Lands. Female officers on the Lands have also participated in Kungka Camps that involve school aged females and are involved with the softball program across the APY Lands.

The Aboriginal Strategy Unit (ASU) within Families SA guides best practice in how policies, programs and services are delivered to Aboriginal and Torres Strait Islander children, families and communities. The Families SA Aboriginal and Torres Strait Islander Policy provides overarching direction and support towards increasing the capacity and confidence of staff to provide respectful services to Aboriginal and Torres Strait Islander clients.

The Stronger Families Safer Children Program has conducted Aboriginal Cultural and Respect training for all funded NGO staff during 2010–11.

Families SA has developed the *Clinical Guidelines for undertaking psychological assessments with Aboriginal families within Families SA*. The document provides Families SA psychologists with guidelines and other important information relevant to undertaking clinical assessments of Aboriginal families.

Nanko-Walun Porlar Nomawi (Wellbeing for Children and Families) is a joint initiative of Child and Adolescent Mental Health Service, Department of Education and Children's Services and Families SA that aims to provide culturally acceptable interventions to assist family relationships, promote engagement with schooling and support families involved in the child protection system.

The *Cultural Inclusion Framework* (Framework) assists South Australian government agencies to develop culturally inclusive and competent services that are accessible and appropriate for Aboriginal people. The tools and approaches in the Framework are designed to assist agencies to be inclusive of the needs and expectations of Aboriginal people during the planning, development, implementation and evaluation of services.

- TAS Tasmania has been in negotiations with the Tasmanian Aboriginal Centre, which had approached the Government for funding to enable its workers to be involved in case and care planning in a holistic way. The current financial crisis has stalled negotiations, although options are currently being explored. In the meantime, child protection staff continue to work with the Tasmanian Aboriginal Centre, who assist as able.
- WA Aboriginal Services Framework established to ensure that the Department has a focus on improving service delivery, through a range of mechanisms (outlined above).

### Action 5.3C: Strengthen the application of, and compliance with, the Aboriginal and Torres Strait Islander Child Placement Principle

- ACT An Aboriginal and Torres Strait Islander Kinship Liaison Officer has been appointed for a period of 12 months to provide advocacy and support services to Aboriginal and Torres Strait Islander kinship carers and other carers who have Aboriginal and Torres Strait Islander children and young people placed with them.

- NSW NSW launched a state wide Aboriginal Consultation Guide in July 2011 which is a practical framework developed to:

- Help practitioners implement the Aboriginal and Torres Strait Islander Child and Young Person Placement Principles
- Enhance Community Services' practice and consistency in consulting and working with Aboriginal families, communities and NGOs.

Training to all regions has been delivered to support the understanding and application of the Aboriginal Consultation Guide.

- VIC The Building the Capacity of Aboriginal Organisations four-year initiative will also:

- Support ACCOS to continue to work with child protection to meet legislative requirements contained in sections 12 and 13 of the *Children, Youth and Families Act 2005*, including the Aboriginal and Torres Strait Islander Child Placement Principle
- HBC will include info re contracted placements. A kinship model is also supporting the ACP.

Reviews of the child protection training models have also included significant input from the Aboriginal Unit to improve the cultural component of the training; to improve culturally sensitive practice to ensure an increased emphasis on meeting the legislative requirements and obligations in relation to Aboriginal children.

An Aboriginal trainer also co-presents at all training sessions.

- QLD The Queensland Government, through the Department of Communities' 'Blueprint for implementation' strategy, aims to increase consideration of, and adherence to, the application of the Aboriginal and Torres Strait Islander Child Placement Principle.

The Queensland Commission for Children and Young People and Child Guardian monitors the Department of Communities' compliance with the Indigenous Child Placement Principle and, in late 2011, will release its second audit report.

- NT The Department has analysed national legislation and policy in relation to the Aboriginal Child Placement Principle and developed Terms of Reference for an audit of the use of cultural consultants and interpreters in the child protection system.

The conduct of the audit has been delayed, due to difficulties recruiting to the key position of Principal Aboriginal Practice Advisor. An Expression of Interest has been approved for a six-month contract to action the Board of Inquiry recommendations. Recruitment action has been successful in securing a Senior Policy Officer to undertake the work required to establish an Aboriginal and Torres Strait Islander Policy Branch within the Department. Once established, the Branch will have a role in projects such as this.

- SA The application of the Aboriginal Child Placement Principle in South Australia continues to be guided by established practice guidance, including the requirement for consultation with Principal Aboriginal Consultants or the Gazetted agency when placing Aboriginal children.
- Families SA continues to use Cultural Identity Plans for all Aboriginal children as a tool to assist Families SA staff to ensure that children reconnect and maintain connection with their family, community, country and culture.
- The Aboriginal Life Story Book is a tool which helps Aboriginal children and young people to learn about their culture and identity and track their own personal journey by focusing on areas such as cultural or kinship groups, Elders, the Dreaming, their Dreaming story and kinship genograms.
- TAS Tasmanian child protection staff collaborate with the Tasmanian Aboriginal Centre about the placement of Aboriginal children and who assist as time allows.
- WA Aboriginal Practice Leaders are in place in every District to ensure cultural consultations are undertaken for every Aboriginal child or young person who comes into contact with the Department.
- The Aboriginal Engagement & Coordination Directorate oversees the application of, and compliance with, the Aboriginal and Torres Strait Islander Child Placement Principle and provides support and advice on the more complex cases.

## Supporting outcome 6: Child sexual abuse and exploitation is prevented and survivors receive adequate support

### Strategy 6.1: Raise awareness of child sexual exploitation and abuse, including online exploitation

#### Action 6.1A: Implement cyber-safety initiatives

- NSW The NSW Police Force has continued to contribute to the national development of the Child Exploitation Tracking System (CETS). This system will aid in the identification and rescue of abused children depicted in images captured electronically. CrimTrac is currently coordinating this project.
- The NSW Police Force has increased the allocation of full-time investigators in the Child Exploitation Internet Unit (CEIU) by seven to 14. These officers operate online to detect and prosecute sexual predators. Members of this unit provide presentations about online safety to senior school students, teachers and parent groups.
- An officer exchange program has been established between the CEIU and the Australian Federal Police (AFP) and has been in place for 10 months, allowing exposure to broader investigative techniques, and will increase the skill levels of both organisations.
- The NSW Police Force Corporate Spokesperson and CEIU Squad Leader has, and will continue to, provide numerous media interviews and commentary reinforcing warnings about child online safety under the 'Safe people safe places' project.
- QLD The Queensland Government, through the Queensland Police Service (QPS), continues to provide educative resources in the form of the Who's Chatting to Your Kids booklets and Surf Safely resources and delivers community awareness presentations to support these resources. Present community education strategies will continue.
- SA Department of Education and Children's Services developed and disseminated guidelines—Cyber-Safety, Keeping Children Safe in a Connected World: Guidelines for Schools and preschools (2009). Examples of innovative school practice in promoting cyber safety, which were developed via Ministerial grants, are now available on the department's website.

In addition to the guidelines for schools, extra cyber safety measures introduced in South Australian schools have included:

- Cyber safety forums for parents and community members featuring renowned cyber safety and anti-bullying experts
- Information distributed to parents of school-age children about cyber risks, including e-crimes such as children distributing lewd images of themselves or others
- A \$100,000 cyber safety grants program to further support the work of schools to reduce the incidence of cyber bullying and e-crime among young South Australians
- Powers for principals to take disciplinary action against students cyber bullying classmates outside school hours.

The Coalition to Decrease Bullying, Harassment and Violence in SA Schools includes representatives of the three schooling sectors and three South Australian universities. The Coalition is revising an information brochure for parents titled *Cyber bullying, e-crime and the protection of children and young people*.

A Cyber Safety and appropriate use of e-technology in Residential Care Practice Guide is being developed by Families SA.

TAS Tasmania is contributing to national work.

WA Students and teachers in the Department of Education have access to training, programs and resources, including online activities, syllabus support (K-10) that provides teachers with information about what to teach in relation to resiliency, self protection, bullying and relationships, and teaching and learning resources for growing and developing healthy relationships.

The 2010 Child Protection Week event had a theme of 'Keep your kids safe in cyberspace'. Parenting brochures were developed and disseminated and are available on the Department's website.

### **Action 6.1B: Increase support for community-based strategies to raise awareness in children, families and the community about child sexual abuse**

TAS The Tasmanian Department of Education is committed to increasing students' understanding in the area of relationships and sexuality education through the curriculum and health and wellbeing programs. Students have opportunities to learn about sexual and reproductive health; sexual identity, protective behaviours and decision making; and how to identify, build and enhance health relationships and recognise unhealthy situations.

As well as this, Tasmania's Sexual Assault Support Service (SASS) provides continuous case management with teachers which reaches children who have been identified as displaying sexualised behaviours, or being victims of sexual abuse. They also provide Professional Development and training about sexual assault to professionals such as Police Recruits, Medical Students, Youth justice, Paramedics and Foster Carers.

SASS has also run pilot school education programs on relationships and healthy sexual relationships in the Huon Valley (2010–11) and the Derwent Valley/Midlands (2011) regions. SASS will evaluate and then develop a proposal to have ongoing, funded programs through schools.

The Tasmanian Community Paediatrician is developing a framework to ensure a consistent state-wide approach to forensic sexual assault processes.

### **Action 6.1C: Continue to introduce strategies to prevent sexual exploitation**

ACT ACT has established a strong partnership with the Australian Childhood Foundation, Institute of Child Protection Studies, Richmond Fellowship and Thomas Wright Institute to help provide expert opinion informed by research to support practice across the ACT. In 2011, a 'think-tank' was held about the development of a Trauma Recovery Service Model for children who are recovering from abuse and neglect.

- NSW The Sex Crimes Squad continues to convene a quarterly Squad Advisory Council which comprises members of the various victim support groups and related stakeholder groups. This has enabled continued and timely support for victims and survivors for whose matters being managed by Police.
- The Sex Crimes Squad and Joint Investigative Response Squad continue to investigate crimes against children, monitor and respond to emerging trends and seek opportunities to improve existing practices to the benefit of all victims.
- VIC A Child Protection role has been co-located with the Victoria Police—Sex Offender Registry. The focus of the role is to work to establish systems and processes to strengthen information exchange between Victoria Police and Child Protection to improve the protection of children.
- Updated practice advice related to responding to reports regarding sex offenders in contact with children from the Australian National Child Offender Register (ANCOR) has been completed and circulated to child protection workers.
- QLD The Queensland Commission for Children and Young People and Child Guardian administers the Queensland Blue Card system (Working with Children Check). The system comprises a comprehensive check of police and disciplinary information; daily monitoring of this information for all active blue card holders; and documented child focused risk management strategies developed by regulated organisations as part of their legislative obligation within the system.
- SA The Yarrow Place Rape and Sexual Assault Service Youth team continues to co-work with Department for Families and Communities: Families SA, with young people who have absconded or have been sexually abused or exploited.
- Child and Adolescent Mental Health Services (CAMHS) provided funding to Ngaanyatjarra Pitjantjatjara Yankunytjatjara NPY Women’s Council on the Anangu Pitjantjatjara Yankunytjatjara (APY) Lands to develop and print talking posters in Anangu language regarding the age of consent. CAMHS has provided information, education and support to families in the APY Lands regarding sexualised behaviour and worked with families on how to keep their children safe.
- TAS Tasmania has involvement in providing responses to the Hague Convention for the Child around the prevention of the sexual exploitation of children (as part of the United Nations Convention on the Rights of the Child).
- The Tasmanian Department of Education encourages schools to use the services provided by Family Planning Tasmania to raise students’ awareness of issues relating to sexuality and relationships.
- As well as this, there are a number of cyber safety tools which aim partially at raising awareness among children, young people and their families about the potential for children and young people to be placed at risk through their involvement with people on the internet.
- WA K-10 Protective Behaviours Resource Packages and an online professional learning program have been designed to equip Department of Education staff with the knowledge and tools to empower students with the skills to keep themselves safe from harm.

## Strategy 6.2: Enhance prevention strategies for child sexual abuse

### Action 6.2A: Implement a national framework for inter-jurisdictional exchange of criminal history for people working with children

- NSW The national framework for inter-jurisdictional exchange of criminal history for people working with children was implemented at the end of 2009. An evaluation in early 2011 recommended that the interim exchange be formalised into a permanent agreement, which will be progressed out-of-session by Ministers. The interim agreement remains in place until superseded by the permanent agreement.
- VIC NOTE: Progress report is the outcome of a report back from the National Framework Implementation Working Group, Working with Children Checks Sub-Working Group:

The 12 month trial of the Exchange of Criminal History Information for People Working with Children (ECHIPWC) commenced in November 2009 and has enabled an expanded range of criminal history information to be shared cross-jurisdictionally. This expanded information is only used by prescribed participating screening units in state and territory jurisdictions to assess an applicant's suitability to work with children. All states have signed the ECHIPWC agreement in support of the exchange of information, even though not all states and territories have implemented working with children checks.

The Commonwealth amended the *Crimes Act 1914* to allow the disclosure of information in addition to conviction information for the purpose of the trial.

Senior officials agreed to report to the Council of Australian Governments (COAG) mid-2011 with recommendations regarding the permanent arrangement for the ECHIPWC model. The evaluation report notes there is strong support from all stakeholders for the model's permanent continuation. The report also recommends the development of an Intergovernmental Agreement (IGA) to ensure the model's permanent operation.

- QLD The Queensland Commission for Children and Young People and Child Guardian continues to participate in the national exchange of criminal history information for people working with children (ECHIPWC) and provided feedback on the evaluation of the pilot and supported the permanent operation of the ECHIPWC model.
- WA Agreement for inter-jurisdictional exchange of criminal history is in place.

### **Action 6.2B: Investigate best practice therapeutic programs for children displaying sexually abusive behaviours**

- NSW There are three NSW New Street services, located in the Sydney West Local Health District; Hunter New England Local Health District (Newcastle and Tamworth); and the Western Local Health District (Dubbo), with the Dubbo service having an Aboriginal focus.

A state-wide Senior Clinical Advisor has been appointed to provide clinical supervision and consultation to Service Coordinators and teams.

A librarian based in the Sydney Children's Hospitals Speciality Network has also been recruited.

There are plans for a cross-NSW Health Research and Evaluation Committee to determine the parameters for specific research and evaluation projects to be undertaken, including the establishment of reference groups for each project, consideration of research proposals, reviews of previous research conducted on the services and scope future research needs.

The Kaleidoscope Sexualised Behaviour Program has been enhanced under KTS, with the creation of two new positions: a therapeutic position based in Newcastle from November 2009 and a project officer position with a state-wide focus from August 2010.

The therapeutic position will provide a service to approximately 80 new referrals each year, with approximately 19 per cent of all clients being of Indigenous descent.

The project officer position will contribute towards more informed decision making around the development of a service model to meet the needs of the target group across NSW. They will be responsible for developing a NSW Health Policy Directive for responding to children up to 10 years old displaying sexually harmful behaviours. It will also include minimum standards of practice and an evidence-based service model with guidelines on best practice, ensuring that the NSW service model will have a solid base.

- VIC An evaluation of treatment programs for children and young people (aged up to 15 years) displaying problem sexual behaviour or sexually abusive behaviour has commenced. The evaluation will be conducted over two years with a final report due in March 2013.
- QLD The Department of Communities continues to work with the other states and territories in the development of a national training package for children displaying sexually abusive behaviours.

In March 2011, Queensland handed over the lead role for this priority project to WA, after a cross-jurisdictional analysis of current responses and gaps to supporting carers throughout Australia was completed, WA sought permission to use the Queensland training modules for pre-service training, standard training for foster carers and the advanced training Protective Behaviour Series (developed by Family Planning Queensland).

The Queensland Government also provides the following treatment and counselling services for young people:

- The Griffith Youth Forensic Service (Griffith University School of Criminology and Criminal Justice), which provides court-ordered assessment and treatment services for young people in Queensland pleading guilty to, or found guilty of, sexual offences.
- Mater Family and Youth Counselling Service (Mater Health Services), which provides therapeutic interventions for young people (aged 10 to 17 years) who have sexually offended, young people who have been harmed by the sex offence and their families following referral to diversionary Youth Justice Conferencing

NT Four additional therapist positions have been recruited across the Northern Territory, two in Darwin, one in Katherine and one in Alice Springs, expanding the availability of therapeutic services.

Over the next six months, the Department will explore the Care Model developed by Cornell University, which provides guidelines for case managers to work in a therapeutic way with children.

As part of the review and reform of alternative and residential care, the Department will explore models of care and select therapeutic models for family-based and residential care services.

SA The Department of Education and Children's Services and the non-government school sectors have developed guidelines for responding to problem sexual behaviours in children and young people in consultation with Health, South Australia Police and Department for Families and Communities: Families SA. The guidelines focus on providing appropriate support to all children and young people involved, to both limit the effect of harm and prevent future harm. These guidelines are now incorporated into mandatory pre-service training for all education and care staff.

WA Department of Education Staff have been supported in the identification of developmentally inappropriate sexualised behaviours that require notification or referral.

### Strategy 6.3: Strengthen law enforcement and judicial processes in response to child sexual abuse and exploitation

#### Action 6.3A: Extend work in the detection, investigation and prosecution of online sexual exploitation

VIC DHS are engaged in collaborative effort (with Victoria Police, Depart of Justice & Corrections Victoria) to implement ten recommendations made by Ombudsman Victoria in his inquiry into the management of sex offenders and child protection in February 2011. Overseen by a Ministerial Taskforce, the implementation of recommendations will improve response to children and the wider community at risk of sexual harm by registered sex offenders. Six of the 10 recommendations have been implemented, and the remaining four are partially complete and in progress.

### Strategy 6.4: Ensure survivors of sexual abuse have access to effective treatment and appropriate support

#### Action 6.4A: Support workshops for adult survivors of sexual abuse, parents and spouses

Ongoing.

### Action 6.4B: Review service delivery options and approaches for survivors to align with best practice such as WA's expanded network of Child Sexual Abuse Therapeutic Services

NSW The NSW Child Sex Offender Counsellors Accreditation Scheme promotes the wellbeing of children and young people by establishing a public register of counsellors with the necessary knowledge and skill to work with people who sexually offend against children.

Accredited professionals are required to:

- Be currently working in a professional counselling capacity
- Be qualified as a psychologist, social worker, psychiatrist or other relevant professional
- Uphold the Australian and New Zealand Association for the Treatment of Sexual Abusers (ANZASTA) Code of Conduct and Ethics
- Be of good character
- Have a minimum level of education in specific areas relating to counselling child sex offenders
- Have a minimum level of professional experience and supervision.

There are two types of accreditation, professionals who work with children and young people who sexually offend against children and professionals who work with adults who sexually offend against children.

VIC The 2010-11 budget allocated \$6.15 million to the Department of Human Services for multidisciplinary centres (MDCs) which co-locate police, sexual assault support and child protection to provide a rapid and coordinated intervention to sexual assault or child abuse. MDCs are operating in two locations (Frankston and Mildura), and a third MDC is being established in Geelong.

QLD The Queensland Department of Communities supports research projects that directly address child protection. These may be undertaken within a range of disciplines, including social and behavioural sciences, health sciences, education, law, criminology and organisational development.

NT Board of Inquiry 23 - Over the next six months, NT Police will:

- Review the operation and resourcing of the Child Abuse Task Force (Northern and Southern) following the creation of a Sex Crimes Unit in Major Crime Division
- Continue negotiations with the Australian Government regarding resourcing and program delivery post the Northern Territory Emergency Response.

SA The Department for Families and Communities: Families SA continues to fund Relationships Australia (SA) to maintain a register of trained practitioners and to provide training to practitioners in issues relating to child sexual abuse.

The Department for Families & Communities continues to fund two NGOs to provide counselling and support to survivors of child abuse and child sexual assault.

TAS Tasmania is contributing to the national steering committee and will progress work as required. The Community Paediatrician is developing comprehensive guidelines to support Tasmanian children who have been sexually abused.

WA Expanded network of funded not-for-profit Child Sexual Abuse Therapeutic Services completed 1 May 2009.

### Other initiatives to progress the National Framework

QLD Queensland continues to promote better outcomes for children and young people by engaging with and supporting the non-government sector. The Queensland National Framework Intergovernmental Working Group met twice during the financial year 2010–11 and continues to meet regularly. In addition, the Queensland Department of Communities provides regular updates to key stakeholders regarding progress on the National Framework priority projects. The updates are also made available on the Department's website.

TAS **Young People Our Future Nurture Educate Protect 2011-2021 Agenda**

The Office for Children's ten-year agenda for is a cross-agency response to enable Tasmanian children and young people to realise their full potential.

The Office includes staff from the Departments of Premier and Cabinet, Education, Police and Emergency Management and Health and Human Services.

The Action Plan includes 13 priority areas. An Implementation Plan to support the Action Areas is being developed.

**TAS Health Education Activities Records Tracking Support (HEARTS) Project**

The HEARTS Project is a five-year project that is being led by the Department's Community Paediatrician. The Project's vision is to develop a child focused/centred multiagency, multidisciplinary approach to the case management of children in out-of-home care to enable them to achieve their best potential with improved outcomes.

WA A new Department for Child Protection website provides external stakeholders and community members with easy access to resources on child abuse and neglect.

Annual community-based activities during National Child Protection Week to educate and engage with members of the public about child abuse and neglect and strategies for protecting children.

Legislative amendments came into effect in January 2011 that strengthened the exchange of information between the Department for Child Protection and participating Commonwealth agencies, and between prescribed public authorities.

The Department for Child Protection has a raft of protocols with government departments and non-government agencies on referral, exchange of information, planning and service provision processes; for example, the Memorandum of Understanding between the Family Court of Western Australia, Legal Aid and the Department for Child Protection for sharing information to protect children at risk of family court proceedings.

In 2010–11, negotiations have commenced with community sector agencies to endorse and become signatories to the Memorandum of Understanding for information sharing between agencies with responsibilities for preventing and responding to family and domestic violence in Western Australia.

In accordance with the whole-of-government commitment to the Drug and Alcohol Interagency Strategic Framework WA 2011–2015, the Department developed its Annual Drug and Alcohol Action Plan 2010–2011. This plan outlines a range of the Department's initiatives aimed at reducing the impact of drug and alcohol use on the safety and wellbeing of children.

Ongoing implementation of protocols for the interagency management of children under 14 years of age with a diagnosed sexually transmitted Infection (STI) and children 14–16 years of age with a diagnosed STI where there is suspicion of abuse. These protocols are between the WA Department of Health, Department for Child Protection and the Western Australian Police.

Over the past 18 months, the Department introduced health screening and a strengths and difficulties questionnaire for all children entering care, with psychologists being involved in early assessment and planning for children. This screening is crucial to their wellbeing and improving their life outcomes in care.

Implementation of Rapid Response, an across-government initiative that supports the prioritisation of services for children who are, or have been, in care is underway. Under this initiative, children and young people are provided with: a health and wellbeing assessment on entry to care; a documented education plan to support education needs; the waiver of all fees linked with further education undertaken within campuses facilitated by State Training Providers; access to sport and recreational clubs that will encourage healthy community engagement; access to priority housing waitlisting from 15 years of age (in negotiation).

During 2010–11, as part of its commitment to continuous improvement in child protection services, the WA Government established and implemented the following initiatives:

- Implementation of the Foster Care Partnership, highlighting the critical role of the foster family as part of the child's care team. The Partnership was reviewed during 2011, and ongoing work will build on its successes
- The reform and expansion program of the Department's residential care services was close to completion
- Implementation of costing models for out-of-home care placements, developed with the community services sector, saw out-of-home care agencies gain significant funding
- Eighty-four family group home places, managed and operated by community sector agencies, were opened in the metropolitan area during the year
- The nine-bed Kath French Secure Care Centre was opened on 22 May 2011, providing young people aged between 12 and 18 years, in the CEO's care, at extreme risk to themselves or others, with planned intensive intervention for up to 21 days
- The Transitional High Needs Program has been reviewed and will inform the Department of required placement and service initiatives for this high risk group of children
- The Department introduced a permanency planning policy that seeks to prevent children from 'drifting' in care, by ensuring they are provided with safe, continuous and stable care arrangements
- In January, the *Children and Community Services Act 2004* was amended to replace Enduring Parental Responsibility protection orders with Special Guardianship protection orders. These changes allow carers to make direct application to the Children's Court of Western Australia for a special guardianship order, if a child has been in their care and the subject of a protection order (time-limited or until 18) for at least two years before the application is made
- The Department established the Home for Life Team to identify and manage a group of permanent carers. Referrals to the Home for Life Team can be made for children who are less than 12 years of age, unable to return to live with their birth families, subject to a protection order (until 18) and where a suitable long-term carer is not available
- The Department's assessment and investigation processes have been reviewed and revised, allowing for a more targeted, differentiated response to children and young people who come into contact with the Department
- The embedding of Signs of Safety Child Protection Practice Framework continues to be a priority. A sustained learning and development strategy is in place, supported by local learning provided by Senior Practice Development Officers in each district
- The Signs of Safety pre-hearing conferences pilot was evaluated. The evaluation report indicated that families were attending, engaging, and feeling supported in the conferences and meetings; these forums provided clarity about the Department's concerns and those of other agencies. The report further indicates that there was a high level of inter-professional collaboration. In terms of system effectiveness, the conferences have resulted in fewer court hearings and less time spent from the initial application to finalisation. The conferences have also resulted in fewer matters proceeding to trial, fewer court events and more consent orders and negotiated outcomes
- In relation to Signs of Safety pre-birth planning meetings, the Department continued to further refine processes for intervention and planning with pregnant mothers whose unborn babies may be at risk. Collaboration continued with King Edward Memorial Hospital, Legal Aid WA and other partner agencies.

The joint forensic child interviewing service of the Department and WA Police (childFIRST) won the Improving Government category in the 2010 Premier's Award. The model focuses on improving the ability of communities and supporting agencies in detecting, responding to and preventing child sexual abuse, achieving this through the implementation of community engagement activities to build community trust and rapport, capacity building and educational/social media strategies.

## Appendix Two:

# Report on National Standards for out-of-home care

### National Standards for out-of-home care

The Australian Government, state and territory governments and the non-government sector are developing National Standards to ensure children in need of out-of-home care are given consistent, best practice care, no matter where they live.

The National Standards seek to drive improvements in the quality of care so that children and young people in out-of-home care have the same opportunities as other children and young people to reach their potential in life wherever they live in Australia.

The National Standards focus on those children and young people whose care arrangements have been ordered by the Children's Court, where the parental responsibility for the child or young person has been transferred to the Minister/Chief Executive.

The overall aim of the National Standards is to deliver a more integrated response between all governments, but they do not change core governance arrangements. The states and territories retain responsibility for statutory child protection, while the Australian Government retains responsibility for providing income support payments.

#### *Measuring and reporting on the National Standards*

The aim of reporting on the National Standards for out-of-home care is to provide, for the first time, a nationally comparable picture of the outcomes for children and young people in out-of-home care across Australia. To do this in a meaningful way, a set of robust and valid national measures are being developed that accurately reflect the achievement of outcomes and progress against the National Standards.

A schedule of national measurement and reporting arrangements for the National Standards for out-of-home care was agreed by Community and Disability Services Ministers in April 2011. A full list of the 22 measures and reporting timeframe can be found in an outline of National Standards for out-of-home care, July 2011, available from the Department of Families, Housing, Community Services and Indigenous Affairs website: <http://www.fahcsia.gov.au>.

**Appendix Table 1: National Standards for out-of-home care and their measures**

Standard	Measures (existing or for future development)
<p>1. Children and young people will be provided with stability and security during their time in care.</p>	<p>1.1 The proportion of children and young people exiting out-of-home care during the year who had 1 or 2 placements, by length of time in continuous care preceding exit.</p> <p>1.2 The rate and number of children in out-of-home care who were the subject of child protection substantiation and the person believed responsible was living in the household providing out-of-home care.</p> <p>1.3 The proportion of children and young people in out-of-home care who report feeling safe in and secure in their current placement.</p>
<p>2. Children and young people participate in decisions that have an impact on their lives.</p>	<p>2.1 The proportion of children and young people who report that they have opportunities to have a say in relation to decisions that have an impact on their lives and that they feel listened to.</p>
<p>3. Aboriginal and Torres Strait Islander communities participate in decisions concerning the care and placement of their children and young people.</p>	<p>3.1 The proportion of Indigenous children and young people in out-of-home care placed with the child's extended family, with the child's Indigenous community, or with other Indigenous people, by carer type. See also Measure 10.1 The proportion of Aboriginal and Torres Strait Islander children and young people who have a current cultural support plan.</p>
<p>4. Each child and young person has an individualised plan that details their health, education and other needs.</p>	<p>4.1 The proportion of children and young people who have a current documented case plan.</p>
<p>5. Children and young people have their physical, developmental, psychosocial and mental health needs assessed and attended to in a timely way.</p>	<p>5.1 The number and proportion of children and young people who have an initial health check of their physical, developmental, psychosocial and mental health needs within a specified period of entering out-of-home care.</p>
<p>6. Children and young people in care access and participate in education and early childhood services to maximise their educational outcomes.</p>	<p>6.1 The proportion of children and young people achieving national reading and numeracy benchmarks.</p> <p>6.2 The number and proportion of three and four year old children who participate in quality early childhood education and child care services.</p>
<p>7. Children and young people up to at least 18 years are supported to be engaged in appropriate education, training and/or employment.</p>	<p>7.1 The proportion of young people who complete year 10 and the proportion who complete year 12 or equivalent Vocational Education &amp; Training.</p>
<p>8. Children and young people in care are supported to participate in social and/or recreational activities of their choice, such as sporting, cultural or community activity.</p>	<p>8.1 The proportion of children and young people who report they may choose to do the same sorts of things (sporting, cultural or community activities) that children and young people their age who aren't in care do.</p>
<p>9. Children and young people are supported to safely and appropriately maintain connection with family, be they birth parents, siblings or other family members.</p>	<p>9.1 The proportion of children and young people in out-of-home care who are placed with relatives and kin.</p> <p>9.2 The proportion of children and young people who report they have an existing connection with at least one family member which they expect to maintain.</p> <p>9.3 The proportion of children (as age-appropriate) and young people who report having contact with family members, by the reported frequency of contact, by their reported satisfaction with contact arrangements.</p>

10. Children and young people in care are supported to develop their identity, safely and appropriately, through contact with their families, friends, culture, spiritual sources and communities and have their life history recorded as they grow up.

11. Children and young people in care are supported to safely and appropriately identify and stay in touch, with at least one other person who cares about their future, who they can turn to for support and advice.

12. Carers are assessed and receive relevant ongoing training, development and support, in order to provide quality care.

13. Children and young people have a transition from care plan commencing at 15 years old which details support to be provided after leaving care.

10.1 The proportion of Aboriginal and Torres Strait Islander children and young people who have a current cultural support plan.

10.2 The proportion of children (as age-appropriate) and young people who demonstrate having a sense of connection with the community in which they live.

11.1 The proportion of children and young people who are able to nominate at least one significant adult who cares about them and who they believe they will be able to depend upon throughout their childhood or young adulthood.

12.1 The number of foster carer households with a placement at 30 June, by number of foster children placed, and number of foster carer households with a placement during the year.

12.2 The number of foster carers at 30 June, and the number of new approvals of persons as foster carers and the number of persons who cease to be approved foster carers during the twelve months to 30 June

12.3 The proportion of foster carers and kinship carers (who had at least one placement during the year) who report feeling supported in their role and who feel their developmental needs relevant to their role are catered for.

13.1 The proportion of young people aged 15 years and over who have a current leaving care plan.

13.2 The proportion of young people who, at the time of exit from out-of-home care, report they are receiving adequate assistance to prepare for adult life.

## 2010–11 Reporting

In 2010–11, five of the 22 measures are being reported:

*1.1 The proportion of children and young people exiting out-of-home care during the year who had one or two placements, by length of time in continuous care preceding exit.*

*1.2 The rate and number of children in out-of-home care who were the subject of child protection substantiation and the person believed responsible was living in the household providing out-of-home care.*

*3.1 The proportion of Indigenous children and young people in out-of-home care placed with the child's extended family, with the child's Indigenous community, or with other Indigenous people, by carer type. See also Measure 10.1: The proportion of Aboriginal and Torres Strait Islander children and young people who have a current cultural support plan.*

*9.1 The proportion of children and young people in out-of-home care who are placed with relatives and kin.*

*12.1 The number of foster carer households with a placement at 30 June, by number of foster children placed, and number of foster carer households with a placement during the year.*

## Standard 1: Children and young people will be provided with stability and security during their time in care

### Measure 1.1: The proportion of children and young people exiting out-of-home care during the year who had 1 or 2 placements, by length of time in continuous care preceding exit.

Appendix Table 2: Proportion of children and young people exiting out-of-home care by length of time in out-of-home care in 2010-11

Length of time in out-of-home care	Number of different placements						
	1	2	3	4	1-4 places	5+ places	Total
1 month to < 6 months	17.6	6.4	1.6	0.7	26.3	0.2	26.5
6 months to < 1 year	7.3	3.8	1.7	1.0	13.8	0.4	14.2
1 year to < 2 years	6.5	5.1	2.8	1.5	15.9	2.1	18.0
2 years to < 5 years	7.4	4.3	3.5	2.3	17.5	4.7	22.2
5 years or more	4.9	3.2	2.9	1.6	12.6	6.6	19.2
<b>Total children</b>	<b>43.6</b>	<b>22.8</b>	<b>12.5</b>	<b>7.1</b>	<b>86.0</b>	<b>14.0</b>	<b>100.0</b>

Source: AIHW Child Protection Data Collections.

In 2010-2011, two thirds (66.4 per cent) of children exiting out-of-home care had one or two placements during the time they were in care, and most (86.0 per cent) had four or fewer placements. The out-of-home care experience was less stable for the 14.0 per cent of children exiting care who had five or more placements. Of this group, most were in care for two years or more (11.2 per cent out of 14.0 per cent).

Comparisons between Indigenous and non-Indigenous children exiting out-of-home care showed very similar patterns as described above (see Appendix Table 3 below).

Appendix Table 3: Proportion of children exiting out-of-home care by Indigenous status<sup>(a)</sup> and number of placements

	Number of different placements						Total
	1	2	3	4	1-4 places	5+ places	
<b>Indigenous</b>							
<i>Length of time in out-of-home care</i>							
1 month to < 6 months	16.6	5.6	1.5	0.3	<b>24.0</b>	<b>0.1</b>	24.1
6 months to < 1 year	6.8	3.5	1.7	1.1	<b>13.1</b>	<b>0.8</b>	13.9
1 year to < 2 years	7.4	6.0	3.0	1.5	<b>17.9</b>	<b>2.2</b>	20.1
2 years to < 5 years	8.3	4.3	3.9	2.6	<b>19.1</b>	<b>5.3</b>	24.4
5 years or more	4.0	2.8	2.6	1.9	<b>11.3</b>	<b>6.3</b>	17.6
Total children	43.1	22.2	12.8	7.4	<b>85.5</b>	<b>14.5</b>	100.0
<b>Non-Indigenous</b>							
1 month to < 6 months	17.9	6.4	1.6	0.8	<b>26.7</b>	<b>0.3</b>	27.0
6 months to < 1 year	7.4	3.9	1.7	1.0	<b>14.0</b>	<b>0.3</b>	14.3
1 year to < 2 years	6.0	4.7	2.7	1.5	<b>14.9</b>	<b>2.1</b>	17.0
2 years to < 5 years	7.0	4.4	3.4	2.2	<b>17.0</b>	<b>4.6</b>	21.6
5 years or more	5.3	3.4	3.1	1.6	<b>13.4</b>	<b>6.7</b>	20.1
Total children	43.6	22.8	12.4	7.1	<b>85.9</b>	<b>14.1</b>	100.0

<sup>(a)</sup> Excludes children exiting out-of-home care whose Indigenous status was unknown.

Source: AIHW Child Protection Data Collections; AIHW Child Protection Australia 2010-11.

### Measure 1.2: The number and rate of children in out-of-home care who were the subject of child protection substantiation and the person believed responsible was living in the household providing out-of-home care.

In 2010–11, there were 37,648 children in out-of-home care. During the same period, 414, or 0.1 per 1,000, children living in out-of-home care were the subject of a child protection substantiation and the person believed responsible was living in the household providing out-of-home care. Of the 327 children in this group whose Indigenous status was known, over half (192 or 58.7 per cent) related to non-Indigenous children. Although the actual number of substantiations was higher for non-Indigenous children, comparison of the rate per 1,000 children showed a different story (0.6 per 1,000 Indigenous children compared to 0.0 per 1,000 non-Indigenous children).

Appendix Table 4: Number and rate per 1,000 of children in out-of-home care who were the subject of child protection substantiation and the person believed responsible was living in the household

Indigenous status	Number	Rate per 1,000
Indigenous	135	0.6
Non-Indigenous	192	0.0
Unknown	87	0.0
<b>Total</b>	<b>414</b>	<b>0.1</b>

Source: AIHW Child Protection Data Collections.

## Standard 3: Aboriginal and Torres Strait Islander communities participate in decisions concerning the care and placement of their children and young people

### Measure 3.1 Placement of Aboriginal and Torres Strait Islander children

More than two-thirds (68.9 per cent) of Indigenous children in out-of-home care were placed with the child's extended family, with the child's Indigenous community, or with other Indigenous people. Most of these children (38.9 per cent out of 68.9 per cent) were placed with Indigenous relative or kin.

Appendix Table 5: The proportion of Indigenous children and young people in out-of-home care placed with the child's extended family, with the child's Indigenous community, or with other Indigenous people, by carer type, 2010-11

Carer type	Proportion of children
Indigenous relative/kin	39.0
Other Indigenous caregiver	15.6
Other relative/kin	13.45
Indigenous residential care	1.1
<b>Total</b>	<b>69.2</b>

Source: AIHW Child Protection Data Collections.

## Standard 9: Children and young people are supported to safely and appropriately maintain connection with family, be they birth parents, siblings or other family members

### Measure 9.1: The proportion of children and young people in out-of-home care who are placed with relatives and kin.

Appendix Table 6: Proportion of children and young people in out-of-home care who are placed with relatives and kin, 2011

Proportion	Male children	Female children	Unknown/Not stated	Total children
Indigenous	50.3	53.2	41.7	51.7
Non-Indigenous	42.2	44.5	36.8	43.3
Unknown	22.9	32.4	38.5	28.0
Total	44.6	47.3	38.1	45.9

Source: AIHW Child Protection Data Collections.

Less than half (45.9 per cent) of children in out-of-home care were placed with relatives and kin. Of those children whose Indigenous status was known, Indigenous children were more likely to be placed with relatives and kin than non-Indigenous children (51.7 per cent compared to 43.3 per cent). Female children were also slightly more likely to be placed with relatives and kin than males (47.3 per cent compared to 44.6 per cent).

Standard 12: Carers are assessed and receive relevant ongoing training, development and support, in order to provide quality care.

**Measure 12.1 (part a): The number of foster carer households with a placement at 30 June**

*(Number of foster carer households with a placement by number of foster children placed per household)*

Appendix Table 7: Number of foster carer households with a placement at 30 June 2011

Number of foster children placed per household	Number of households
1	4,171
2	2,332
3	1,066
4	477
5	229
6	104
7	42
8	16
9 or more	10
Unknown	2
Total	8,449

Source: AIHW Child Protection Data Collections.

**Measure 12.1 (part b): The number of foster carer households with a placement during the year**

Appendix Table 8: Number of Households with a placement during the year 2010-11

	Number of households
Households with a placement during the year ended 30 June	11,163

Source: AIHW Child Protection Data Collections; AIHW *Child Protection Australia 2010-11*.

## Appendix Three:

# Status of National Framework indicators of change by supporting outcome Appendix

Table 9: Status of indicators of change by supporting outcome

Indicator	Reported to COAG 2010	Ongoing reporting status	Development status/ activities
<b>Supporting outcome 1: Children live in safe and supportive families and communities</b>			
(1) Community attitude towards and value of children	Not reported	Not reportable	Scoping project underway – AIHW
(2) Children’s perception of their value within the community	Not reported	Not reportable	Scoping project underway – AIHW
(3) Child homicides	Not reported	Not reportable	No agreed data source
(4) Rate of hospitalisations for injury and poisoning for children aged 0-4 years	Reported	Reportable	No development required
(5) Deaths of children known to child protection	Not reported	Not reportable	No agreed data source
<b>Supporting outcome 2: Children and families access adequate support to promote safety and intervene early</b>			
(6) Rate per 100,000 babies born with low birth weight	Reported	Reportable	No development required
(7) Rate of child protection notifications	Reported	Reportable	No development required
(8) Number of at-risk children and families accessing support services <i>Proxy indicator: Children aged 0–17 years who commenced intensive family support services</i>	Reported (P)	Reportable (P)	Treatment and Support Services NMDS development (AIHW)
(9) Proportion of pregnant women who receive perinatal care <i>Proxy indicator: Proportion of pregnant women who receive antenatal care</i>	Reported (P)	Reportable (P)	Measure requires review.
(10) Proportion of communities with improved measures against the Australian Early Development Index <i>Proxy indicator: Proportion of developmentally vulnerable children against AEDI domains</i>	Reported (P)	—	Proxy only available every 3 years.
(11) Proportion of disadvantaged 3 years olds in high quality child care	Not reported	Not reportable	Early childhood education – development work AIHW/ABS
(12) Proportion of 3 to 4 year olds participating in quality early childhood education, development and child care services	Not reported	Not reportable	Early childhood education – development work AIHW/ABS
(13) Proportion of children aged 4-14 years with mental health problems	Reported	Not reportable	No current data source.

### Supporting outcome 3: Risk factors for abuse are addressed

(14) Rate per 1,000 children accessing assistance through homelessness services (accompanied and unaccompanied)	Reported	Reportable	No development required
(15) Rate per 1,000 children living in households where there is adult abuse of alcohol and/or other drugs <i>Proxy indicator: Proportion of parents with children aged 0–14 years who used an illicit substance, or a licit substance for non-medical purposes</i>	Reported (P)	Ongoing source to be agreed	Proxy only available every 3 years
(16) Rate per 1,000 children living in households where family violence occurs	Not reported	Not reportable	No current data source.
(17) Proportion of parents with a mental illness who are accessing mental health services	Not reported	Not reportable	No current data source.
(18) Number of children living in jobless families	Reported	Ongoing source to be agreed	Census data only available every 5 years HILDA data available annually

### Supporting outcome 4: Children who have been abused or neglected receive the support and care they need for their safety and wellbeing

(19) Number of out-of-home carers, by type of carer <i>Proxy indicator: Children in out-of-home care by placement type, at 30 June.</i>	Reported (P)	Reportable (P)	National out-of-home care standards measures development (AIHW)
(20) Retention rate of foster carers and child protection workers <i>Proxy indicator: Number of households commencing and exiting foster care</i>	Reported (P)	Reportable (P)	Annually reportable with proxy.
(21) Proportion of investigations finalised by time taken to complete investigation	Reported	Reportable	No development required
(22) School retention rates (years 10 & 12) of young people in out-of-home care or under guardianship	Not reported	Not reportable	Data development underway (AIHW)
(23) Proportion of children on guardianship and custody orders achieving national reading and numeracy benchmarks	Partial only	Not reportable	Data development underway (AIHW)

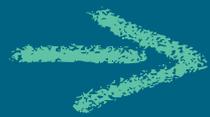
### Supporting outcome 5: Indigenous children are supported and safe in their families and communities

(24) Rate per 1,000 Indigenous children with substantiated cases compared to other children	Reported	Reportable	No development required
(25) Rate per 1,000 Indigenous children in out-of-home care compared with other children	Reported	Reportable	No development required
(26) Proportion of Indigenous children placed in accordance with the Indigenous Child Placement Principles	Reported	Reportable	No development required
(27) Ratio of Indigenous out-of-home care placement through mainstream or Indigenous services	Not reported	Not reportable	No current data source.

### Supporting outcome 6: Child sexual abuse and exploitation is prevented and survivors receive adequate support strategies

(28) Children in substantiations, by abuse type	Reported (P)	Reportable	No development required
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