



AUSTRALIAN NATIONAL COUNCIL ON DRUGS

Strengthening Families Program Consultation 2009

A report prepared for the Department of Families, Housing, Community
Services and Indigenous Affairs

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Executive Summary

This report presents the results of a consultation conducted by the Australian National Council on Drugs (ANCD) on behalf of the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) with services and organisation in the alcohol and other drugs (AOD), family support (FS), and child protection (CP) sectors about directions for a refocused Strengthening Families Program funded under the National Illicit Drug Strategy (NIDS). The consultation involved two parts: (i) an online survey open to interested parties working in the AOD, FS, or CP sectors and (ii) structured telephone interviews with key nationally focused bodies in the AOD, FS, and CP sectors. It was designed to primarily focus on collecting views about the most appropriate service models, programs and investments that could be made within the context of two new initiatives, the Family Support Program (FSP) which now incorporates the Strengthening Families Program, and the National Framework for Protecting Australia's Children which informs the new policy direction of the Strengthening Families Program and the existing funding allocation. The national annual budget for the Strengthening Families Program is \$3.1 million. The consultation process took place between 23 June and 14 July, 2009.

Information from 171 respondents from the survey and six phone interviews was analysed. This analysis indicated that most respondents work for not-for-profit organisations which are part of larger organisations that provide multiple services. Many services and/or organisations were found to operate in more than one state or territory and in a variety of sites. More than half of the services were small services, having an annual budget of less than \$1.5 million.

Key Findings

The key findings identified from the consultation on the most appropriate service models, programs and investments that could be made within the context of the two initiatives and the existing funding allocation to provide the best outcomes for families affected by substance misuse are provided below.

Most supported

- The expansion of existing AOD service providers to respond to children and family issues and the development of a program to enable existing AOD, FS and CP services to become better equipped in identifying children at risk in families affected by substance misuse were identified as the most appropriate service models to achieving the best outcomes for families and children at risk within a context of an annual budget of \$3.1 million.
- Aftercare support for families with members who have undergone AOD treatment/intervention; early identification and prevention; treatment/intervention; case coordination between AOD, FS, and CP services;

referral between sectors; and outreach services were identified as the most important services to achieve the best outcomes for families and children at risk.

- A focus on direct service delivery was considered the most important factor when allocating funding under the Strengthening Families Program.
- Evidence of current service capacity and performance, likelihood of service sustainability in the medium to longer term; ensuring services are located in areas of need were considered the most important factors when determining which service providers receive funding under the refocused Strengthening Families Program.
- Tailoring services and prioritising responses to disadvantaged populations was identified as being the most important factor to consider when determining which programs/projects receive funding. Populations identified by respondents to the survey include Indigenous people, at risk children and families, vulnerable families, people with multiple and complex issues, and youth.

Least supported

- A single service provider to roll out a standardised program across Australia was the least appropriate service model to achieving the best outcomes for families and children at risk within a context of an annual budget of \$3.1 million.
- A national social marketing campaign was considered the least important service to achieve the best outcomes for families and children at risk.
- A focus on IT infrastructure and sector development were considered the least important factors when considering the allocation of funding under the Strengthening Families Program.
- The least important factor when determining which service providers receive funding under the refocused Strengthening Families Program is whether a service provider is situated within a larger service or organisation.

Ways to improve linkages and collaboration between sectors and services

- A top down approach to the Strengthening Families Program that includes an interdepartmental approach and requirement for service agreements to include the establishment and use of memorandum of understandings between services and sectors.
- Providing financial incentives to support linkages and collaborations between the sectors.

Ways to improve access to relevant sectors and services

- Provide funding to support the provision of case coordination.
- Provide funding to support an increase in services that cater to the needs of families affected by AOD issues.
- Enhancing organisational development to promote knowledge about appropriate services in other sectors.

Ways to improve the identification and response to children at risk

- Development of information that provides a clearer understanding of 'at risk' and the levels of risk, as well as how services can best respond to each of these levels.
- Training of staff to be able to identify and respond to risk.
- Development and dissemination of policies and procedures to AOD services on identification and response to children at risk.
- Dissemination to, and training of, staff in the AOD sector on assessment tools for identifying children at risk.
- Funding to support the provision of services that cater to the specific needs of individual children.

Comments and Conclusions

If the needs of children at risk are to be prioritised then the focus for the new Strengthening Families Program would be best directed towards improving the skills of workers in the AOD, FS and CP sectors in identifying and responding to children at risk. If the funding allocation prevents this from occurring across the three sectors then it would seem most appropriate that the focus be placed on the AOD sector. This is based on the identified need and the overall support for the expansion of existing AOD service, particularly from CP services.

No one sector was identified as being the ideal one to be primarily responsible for ensuring that families access all of the services they need but rather the importance of services being able to respond to the multiple needs of families was noted. It is therefore important that services within the three sectors have good linkages and be able to collaborate well with one another.

The amount of funding currently available was noted and identified as relatively small for a national program and therefore significantly limited respondents' suggestions.

There is a need for common tools to identify and assess AOD-related risk. This will require a common understanding of what is meant by the term 'risk' and training of staff in the use of such tools.

Each sector in the survey tended to see themselves as the most appropriate to deliver better responses to children and families at risk. However, in the context of AOD services, which are generally funded only to provide specific treatment interventions to individuals affected by substance misuse, additional resources are necessary if they are to extend their scope and address the children and families of people affected by substance misuse.

Introduction

Background

The Strengthening and Supporting Families Coping with Illicit Drug Use ('Strengthening Families') Program is a component of the National Illicit Drug Strategy (NIDS) that focuses on the specific areas of family support rather than the health, education or law enforcement aspects of the strategy. The Strengthening Families Program currently funds 19 initiatives across Australia which assist families; including parents, grandparents, kinship carers and children of drug using parents, by taking an early intervention and family-focused approach to dealing with the impacts of substance misuse. Services include counselling, support, advice, information, advocacy and referral.

The Strengthening Families Program has an annual funding allocation of \$3.1 million.

In April 2009, the Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin, announced a refocusing of the Strengthening Families Program's \$3.1 million annual allocation to provide focused parenting and substance abuse support where children are at risk. Under this measure, all existing Strengthening Families Program providers were offered an extension of funding until 30 April 2010.

The refocusing of the Strengthening Families Program is linked to two important initiatives of the Australian Government: The Family Support Program (FSP) which is the new overarching program that now incorporates the Strengthening Families Program along with a number of other programs and the National Framework for Protecting Australia's Children which informs the new policy direction of the Strengthening Families Program.

The three principles that underpin FSP are:

1. Building the capability and resilience of Australian families and children in their communities.
2. Working in the best interest of children.
3. Responding to the vulnerabilities of families and their communities.

The National Framework for Protecting Australia's Children is structured around six high-level supporting outcomes with associated strategies and indicators of change. The two outcomes that particularly relate to the drug and alcohol sector are:

- **Supporting Outcome 2:**
Children and families access adequate support to promote safety and intervene early.

In particular, the associated Strategy 2.4 to enhance services and supports for children and families to target the most vulnerable and protect children 'at-risk'

- **Supporting Outcome 3:**

- **Risk factors for child abuse and neglect are addressed.**

- In particular, the associated Strategy 3.1 to enhance alcohol and substance abuse initiatives that provides additional support to families.

To assist in the development of the new Strengthening Families Program, FaHCSIA engaged the Australian National Council on Drugs (ANCD) to undertake an independent consultation of services within the alcohol and other drug (AOD), family support (FS) and child protection (CP) sectors. The consultation which included an online survey and a select number of phone interviews was designed to primarily focus on collecting views about the most appropriate service models, programs and investments that could be made within the context of the two initiatives and the existing funding allocation to provide the best outcomes for families affected by substance misuse.

The report prepared for FaHCSIA includes:

- The design and methodology of the survey and interview questions
- The findings of the consultation, highlighting the key findings, and
- A discussion and conclusions

Methodology

The consultation was divided into two separate parts. The first part consisted of an on-line survey open to services and organisations that either work with people affected by substance misuse who may have children or that work with families and/or children who may be affected by substance misuse. The second part involved a series of structured telephone interviews with a select number of key nationally focused bodies in the AOD, FS, and CP sectors and one state body from the AOD sector.

A Consultation Steering Committee consisting of representatives from the ANCD and FaHCSIA was established to oversee and guide the project. This Committee also had input into the development of the online survey and telephone interview questions.

Survey

The survey was distributed to services and organisations working in the AOD, FS, and CP sectors through established e-mail networks. Services and organisations received an e-mail explaining the survey consultation process and inviting interested parties to complete the survey. A copy of the e-mail is provided at appendix A. Individual organisations that had more than one site or more than one relevant service were encouraged to have all the services within their organisation respond. Included in the e-mail was a link to a background discussion paper that had been developed to assist people in responding to the survey and the survey. A copy of the Background Discussion paper, including a letter from FaHCSIA is provided at appendix B.

Survey Instrument and Question Design

A structured survey instrument was designed using 'SurveyMonkey', an online survey program which enables users to create and conduct professional online surveys (<http://www.surveymonkey.com/Default.aspx>). The survey questions were developed with input and approval from the Steering Committee members. The survey consisted of seven questions about the respondents' organisation and eight quantitative and qualitative questions specifically designed to obtain an individual service perspective. The survey questions used are provided in appendix C. Respondents indicated on a five point scale the level of importance or appropriateness of a variety of specified services, models, programs, and factors ranging from extremely important/appropriate to not important/appropriate. The questions were divided among five sections:

- Organisational details
- Program Design/ Service Model
- Needs and Location
- Selection of Providers

- Additional Comments

The online survey was conducted between 23 June and 6 July, 2009. Complete results of the qualitative part of the survey are provided in appendix D.

Survey Sample

A total of 171 respondents to the online survey provided sufficient information to be included in the findings. The results identified that most respondents worked for not-for-profit organisations: NGO (133; 77.8%); Government (37; 21.6%); and private companies (1; 0.6%). The majority of respondents (76%) worked for a service which is part of a larger organisation that provides multiple services.

Most respondents worked in organisations which provide multiple types of services: AOD (53.2%); FS (57.9%); CP (20.5%); and other sectors (11.1%). Figure 1 presents the sector in which respondents' services/organisations work.

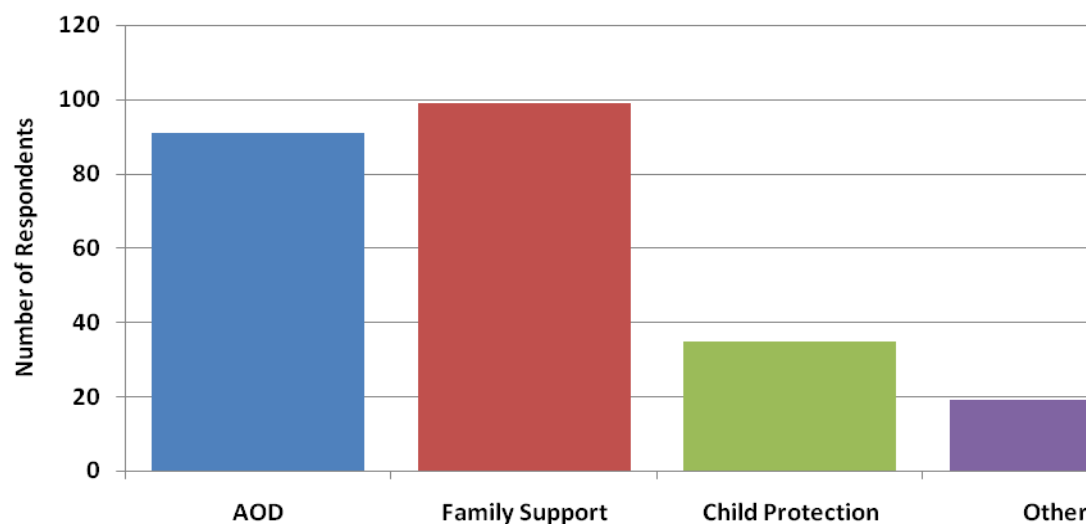


Figure 1. Number of respondents according to the sector type in which their service/organisation operates.

Many services and/or organisations operated in more than one state or territory: NSW (39.8%), VIC (22.2%); QLD (23.4%); SA (19.9%); WA (24.6%); TAS (12.9%); ACT (14.0%); and NT (15.8%). Figure 2 presents state/territory in which respondents' services operate.

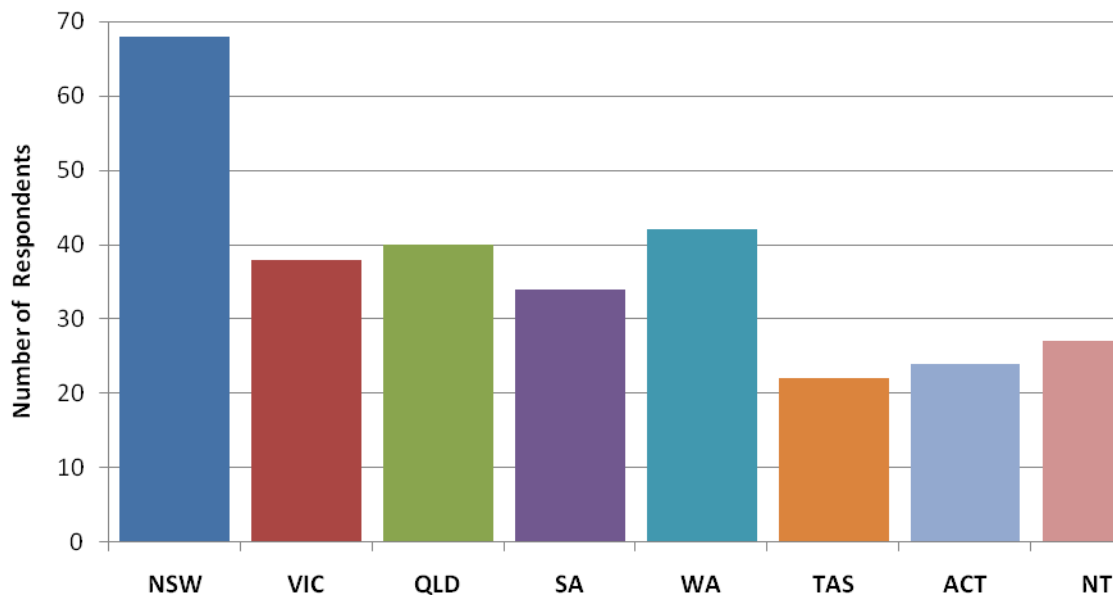


Figure 2. Number of respondents according to state/territory in which their service/organisation works.

Many respondents worked for services and/or organisations which operated in a variety of sites: capital cities (56.7%); major (21.6%); regional centres (32.2%); and smaller locations (12.9%). Figure 3 presents the location in which respondents' services/organisations work.

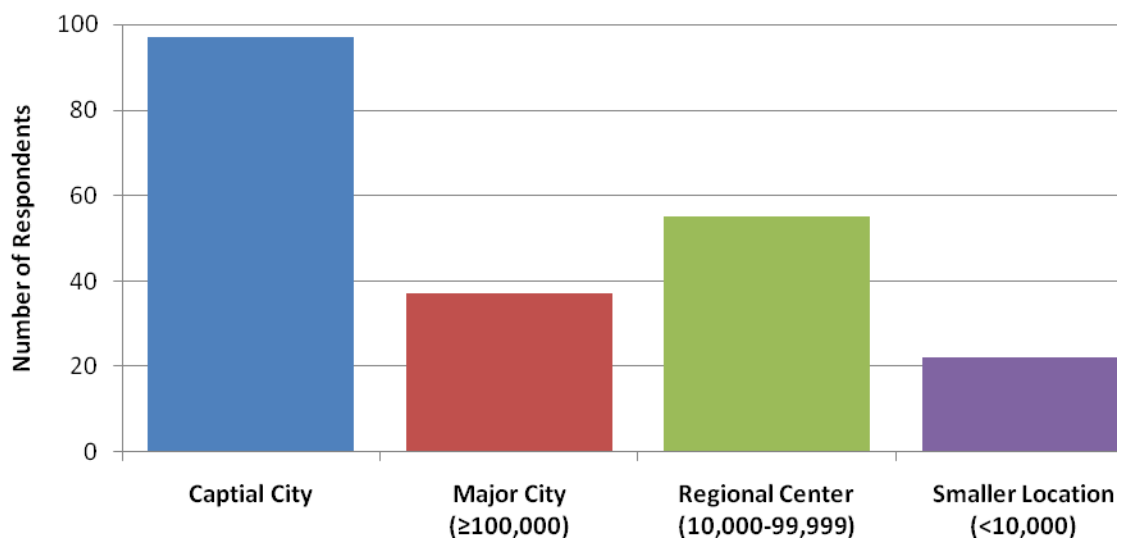


Figure 3. Number of respondents according to location in which their service/organisation works.

More than half of services and/or organisations had an annual budget of less than \$1.5 million (58.5%) while almost one third (31.6%) of respondents indicated that they worked for a service or organisation which currently receives funding under the Strengthening Families Program.

Telephone Interviews

Structured telephone interviews were undertaken with select key nationally focused bodies in the AOD, FS, and CP sectors and one state body from the AOD sector. These bodies were selected to ensure a national perspective across the three sectors. Due to restrictions on resources and time, the number selected was limited to a maximum of three per sector. A list of organisations invited to take part is provided in appendix E.

The selected bodies in the FS and CP sectors were initially approached by FaHCSIA staff to explain the purpose of the consultations and invite them to take part. Those that agreed to participate were contacted by the ANCD by telephone to organise a time for an interview and sent a copy of interview questions which included background information. The AOD bodies were contacted directly by the ANCD. The questions and background information is presented in appendix F.

A few bodies were unable to take part in the consultation. As one key national peak body for the AOD sector was unable to take part due to resource and time constraints, a state AOD peak body was contacted and asked to take part, in their place.

Telephone interviews were constructed to provide a national perspective across the AOD, FS, and CP sectors and to build on the information from the survey consultation.

Telephone Interview Question Design

The questions used for the telephone interviews were developed with input and approval from the Steering Committee members. The questions were open-ended and were divided among five sections:

- Linkages/collaboration between sectors and services
- Improving access to relevant services
- Working with families and children
- Identifying children at risk
- Responding to children at risk

The interviews took place between 07 and 14 July, 2009.

Findings

The main findings of both parts of the consultation are presented in nine sections, representing important themes or components. These are:

1. Service Models
2. Program Design
3. Criteria for Selecting Programs and Services
4. Criteria for Selecting Providers
5. Targeting Particular Groups
6. Respondents' Final Comments
7. Linkages and Collaboration between sectors and services
8. Improving Access to Relevant Services
9. Identifying and Responding to Children at Risk

The first six sections cover information obtained from the online survey and the last three cover information obtained from phone interviews only. These sections inform the development of the most appropriate service models, programs and investments that could be made within the context of the Family Support Program and the National Framework for Protecting Australia's Children to provide the best outcomes for families affected by substance misuse. Responses for each sector were examined to determine whether meaningful differences existed. When this was deemed to be the case, results for all three sectors are presented at the end of each section under a subheading entitled *Variations by Type of Service*.

1. Service Models

Respondents answered two questions related to potential service models. Respondents were asked to indicate *how appropriate a number of specified service models would be to achieve the best outcomes for families and children at risk within an AOD context and the current national annual budget of \$3.1 million*. Figure 4 depicts the results of this question for each proposed service model according to the level of appropriateness.

There was general support for a number of proposed service models including expanding existing AOD or FS and CP services and developing new programs to allow AOD or FS and CP services to identify and respond to children at risk. There was a general lack of support for a single service provider to roll out standardised programs and the establishment of one-stop shops.

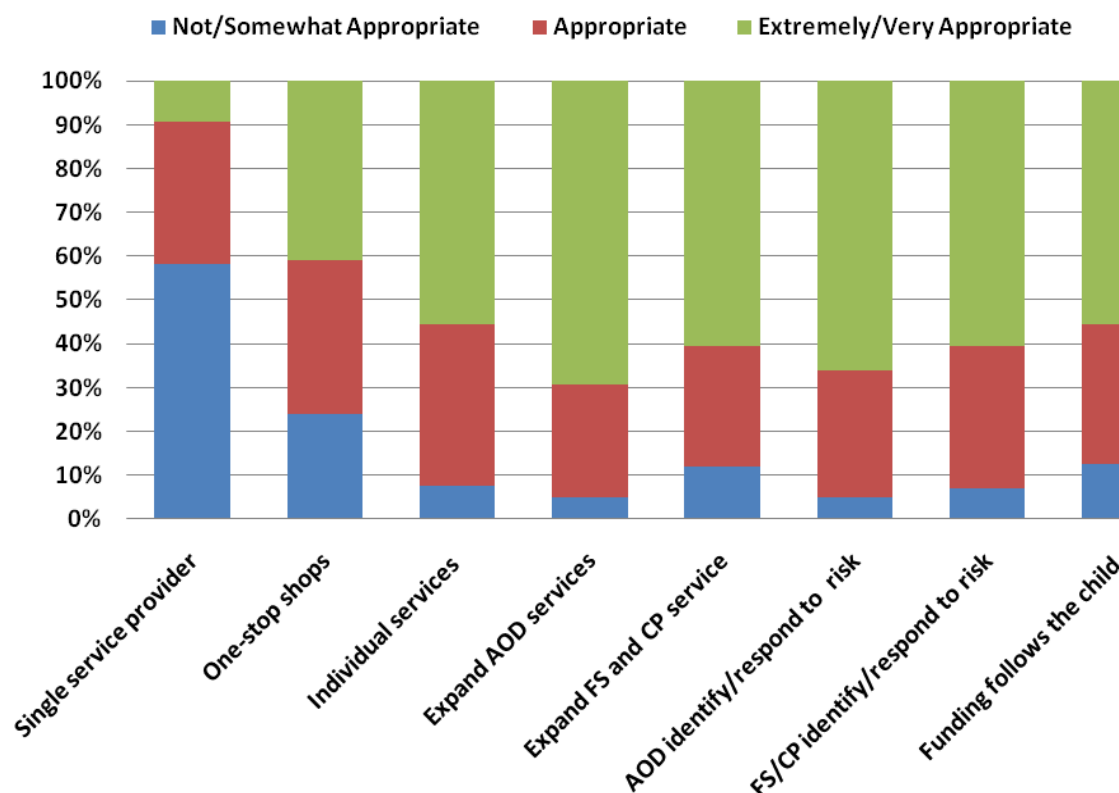


Figure 4. Appropriateness of potential service models.

- More respondents (70%) indicated that expanding existing AOD services to address the needs of clients with children was very or extremely appropriate than any other proposed model.
- Two thirds (66%) of respondents indicated that developing a program to enable existing AOD service to better identify and respond to children at risk was very or extremely appropriate.
- Approximately 60% of respondents indicated that developing a program to enable existing FS and CP services to become better equipped to identify children in families affected by substance misuse was very or extremely appropriate.
- More than half of respondents (56%) indicated that a number of individual services situated across Australia providing services which meet local needs was very or extremely appropriate.
- Nearly 61% of respondents indicated that expanding FS and CP services to address substance misuse in families was very or extremely appropriate. Approximately 12% indicated this was not appropriate.
- More than half of respondents (56%) indicated that a program of funding which follows individual children across AOD, FS and SP services were very or extremely appropriate. Nearly 13% indicated that this was not appropriate.

- Approximately 41% of respondents indicated that a number of one-stop shops located in key areas providing a range of services was very or extremely appropriate. Approximately 24% indicated that this was not appropriate.
- Overwhelmingly, the proposed model involving a single service provider to roll out a standardised program across Australia was not supported, with only 10% indicating that this was very or extremely appropriate. More than half (58%) indicated that this was not appropriate.

Variation by Type of Service

A number of responses differed substantially between sectors.

Generally, the results indicate sector support for furthering capacity in their own sectors with the exception of expanding FS and CP services to address substance misuse issues where the least support came from FS services.

- The strongest support for expanding existing AOD services to address the needs of people affected by substance misuse who also have children came from AOD services where 79% indicated this model was very or extremely appropriate. This compared with 63% for FS and 59% for CP services.
- The strongest support for expanding existing FS and CP services to address substance misuse came from CP services (79%). This compared with 61% for both AOD and FS services. FS services were the most likely to indicate that this was not appropriate (14%) compared with AOD (13%) and CP services (7%).
- The strongest support for developing a program to enable existing AOD services to become better equipped in identifying and responding to children at risk came from AOD services where 77% indicated this would be very or extremely appropriate. This compared with 69% for CP and 61% for FS.
- The strongest support for developing a program to enable existing FS and CP services to become better equipped in identifying children in families affected by substance misuse came from CP services where 73% indicated this would be very or extremely appropriate. This compared with 62% for AOD services and 57% from FS services.
- The greatest support for one-stop shops came from CP services (52%); of respondents indicated this service model was very or extremely appropriate. This was in comparison with 41% for FS services and 33% for AOD services.

Key Findings

Most supported

- The expansion of existing alcohol and other drug service providers to respond to child and family issues
- The development of a program to enable existing AOD, FS and CP services to be better equipped to identify children at risk in families affected by substance misuse were identified as the most appropriate service models to achieving the best outcomes for families and children at risk.

Least supported

- A single service provider to roll out a standardised program across Australia was identified as the least appropriate service model to achieving the best outcomes for families and children at risk.

2. Program Design

Respondents were asked to indicate *how important a number of specified services would be to achieve the best outcomes for children and families at risk*. Figure 5 presents the results of this question.

There was strong support for all services with the exception of a national marketing campaign.

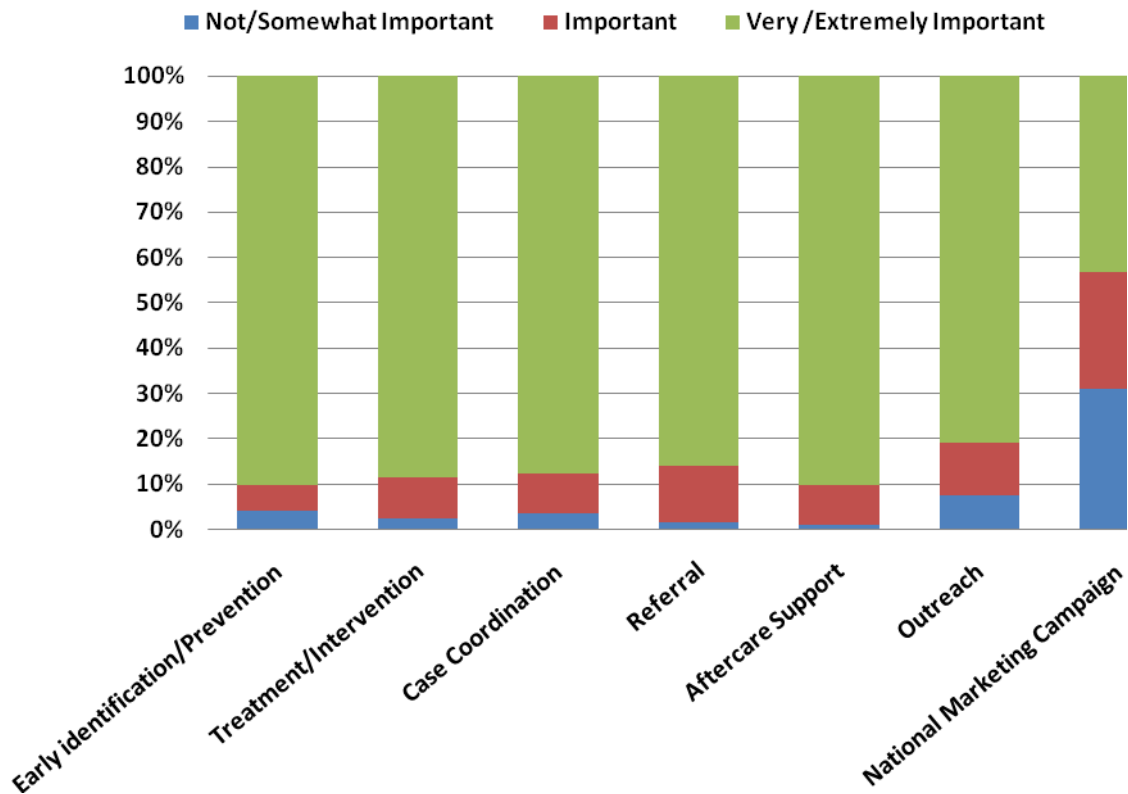


Figure 5. Appropriateness of potential services.

- The strongest support was for aftercare support where only one (0.6%) respondent indicated that this was not appropriate and 90% indicated that this was very or extremely important.
- Approximately 90% indicated that early identification and prevention were very or extremely important.
- Approximately 88% indicated that treatment/intervention very or extremely important.
- Approximately 88% indicated that case coordination between AOD, FS, and CP services was very or extremely important.
- Approximately 86% indicated that referral between sectors was very or extremely important.
- Approximately 81% indicated that outreach was very or extremely important.
- Fewer than half (43%) indicated a national social marketing campaign was very or extremely important and 12% indicated that this was not important.

Variation by type of service

There were not generally substantial differences in responses according to the type of service respondents worked for.

The one exception was for case coordination between AOD, FS, and CP services. For this initiative, strongest support came from CP services.

- Almost 97% of CP services indicated that this would be very or extremely important. This compared with 91% for AOD services and 84% for FS services.

Key Findings

Most supported

- Aftercare support for families with members who have undergone AOD treatment/intervention; early identification and prevention; treatment/intervention; case coordination between AOD, FS, and CP services; referral between sectors ; and outreach services were identified as the most important services to achieve the best outcomes for families and children at risk.

Least supported

- A national social marketing campaign was seen as the least important service to achieve the best outcomes for families and children at risk.

3. Criteria for Selecting Programs and Services

Respondents to the survey were asked to indicate *how important a variety of services should be when considering allocation of funding under the Strengthening Families Program*. Figure 6 presents the results for each proposed service and program according to the level of importance indicated by all respondents.

Strongest support was for direct service delivery initiatives (service delivery) and the least support was for IT infrastructure.

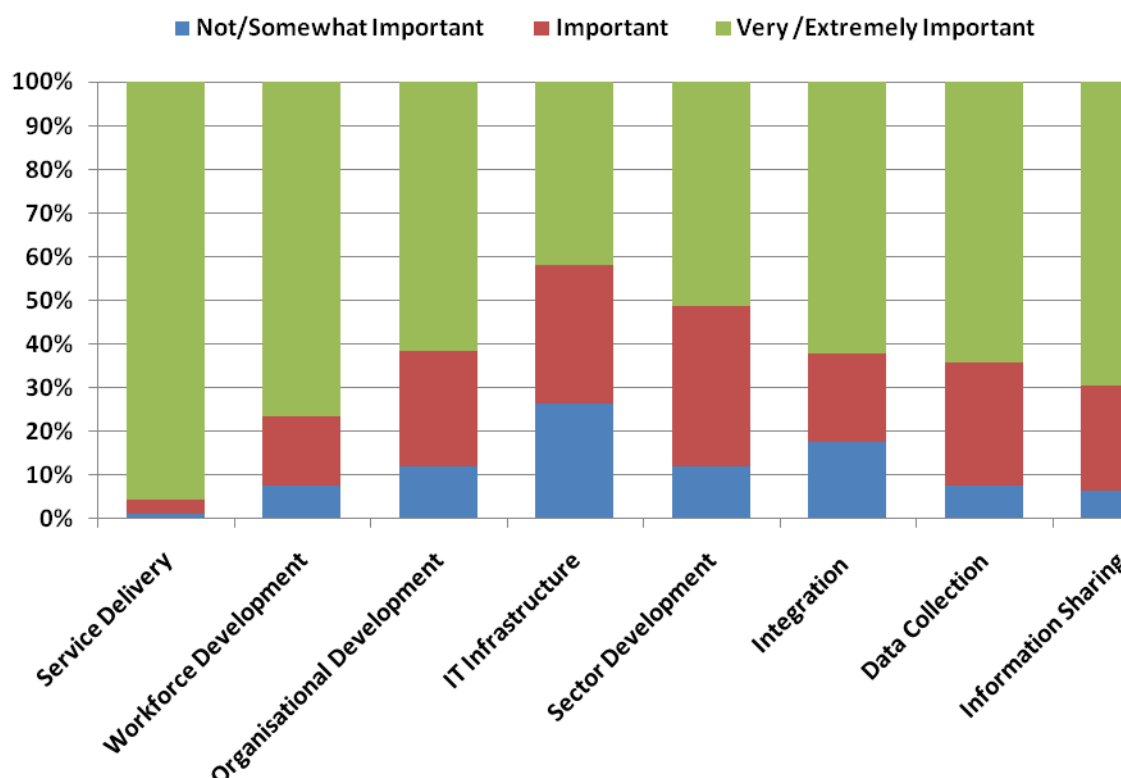


Figure 6. Importance of services when considering allocation of funding.

- Almost 96% of respondents indicated that direct service delivery initiatives were very or extremely important.
- Between two thirds and three quarters of respondents indicated that workforce development (77%), information sharing (69%), data collection and analysis (65%), integration of services (62%), and organisational development (62%) were very or extremely important.
- Roughly half of respondents (51%) indicated that sector development was very or extremely important.

- Less than half of respondents (42%) indicated that IT infrastructure was very or extremely important and 26% indicated that it was not important or somewhat important.

Respondents were asked to indicate *how important three specified factors should be when determining which programs or projects receive funding*. Figure 7 present the results of this question for all three proposed factors according to the level of importance indicated by respondents.

There was general support for all three factors but strongest support was for prioritising responses to disadvantaged populations.

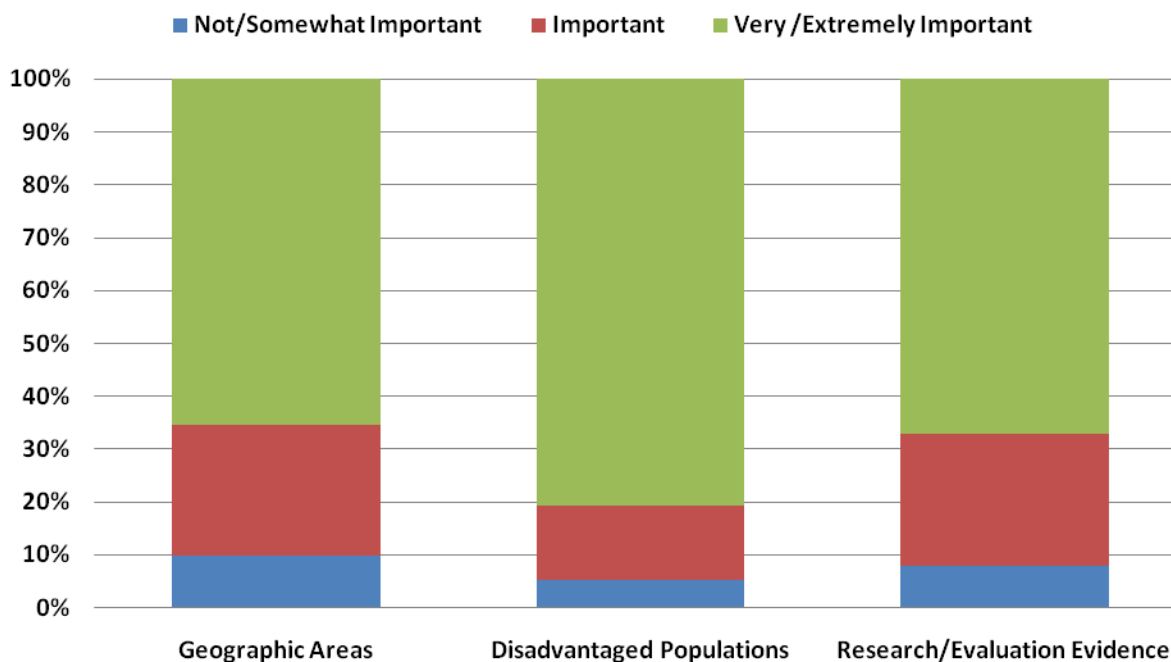


Figure 7. Importance of factors when determining which programs/projects receive funding.

- Nearly 81% of respondents indicated that prioritising responses to disadvantaged populations was very or extremely important. This compared with 67% for a research/evidence base for proposed services and programs and 66% for prioritising geographic areas of greatest need.

Variation by Type of Services

Responses differed for a number of proposed initiatives according to the type of services respondents worked for.

Generally, strongest support for organisational development, sector development, and integration of services came from the AOD sector.

- The strongest support for organisational development came from AOD services where 77% indicated that it was very or extremely important. This compared with 60% for both CP and FS services.
- The strongest support for sector development came from AOD services where 61% indicated it is very or extremely important. This compared with 52% for CP and 51% for FS services. The strongest rejection of sector development came from CP services where 17% indicated it would be not important or somewhat important. This compared with 15% for FS and 7% for AOD services.
- The strongest support for integration of services came from AOD services where 67% indicated that this would be very or extremely important. This compared with 57% for FS services and 50% for CP services. The least support for integration of services came from FS services where 25% indicated integration of services is not important or somewhat important. This compared with 23% for CP and 13% for AOD service.

Key Findings

Most supported

- Direct service delivery (service delivery) was considered the most important service factor when considering the allocation of funding under the Strengthening Families Program.

Least supported

- IT infrastructure and sector development were considered the least important service factors when considering the allocation of funding under the Strengthening Families Program.

4. Criteria for Selecting Providers

Respondents to the survey were asked to indicate *how important they believed a number of specified factors to be when determining which service providers receive funding under the refocused Strengthening Families Program*. Figure 8 presents the results of each factor according to the level of importance.

There was strong support for evidence of current service capacity and performance; ensuring services are located in areas of greatest need, and the likelihood of service sustainability in the medium to longer term.

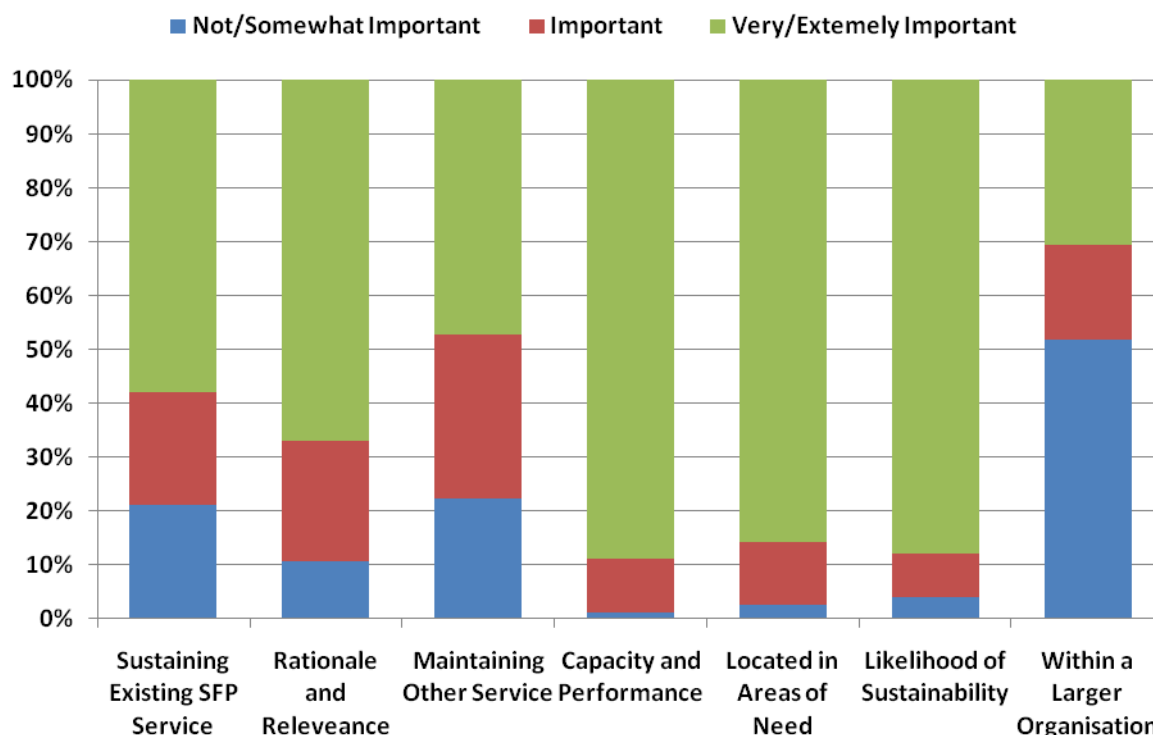


Figure 8. Factors to consider when determining which service providers receive funding according to importance

- The vast majority of respondents indicated that evidence of current service capacity and performance (89%), likelihood of service sustainability in the medium to longer term (88%); and ensuring services are located in areas of need (86%) were very or extremely important when determining which service providers receive funding. The strongest support was for considering current capacity and performance where no respondents indicated that this was not important.
- A majority of respondents indicated that rationale and relevance to the refocused Strengthening Families Program (70%) was very or extremely important.
- Sustaining the existing services currently funded under the Strengthening Families Program (58%) was seen as very or extremely important.
- Fewer than half of respondents (47%) indicated that maintaining continuing funding for other existing services were very or extremely important.
- Half of respondents (52%) indicated that whether a service existed within a larger organisation was not/only somewhat important when determining which service providers receive funding.

Key Findings

Most supported

- Evidence of current service capacity and performance, likelihood of service sustainability in the medium to longer term; and ensuring services are located in areas of need were considered the most important factors when determining which service providers receive funding under the refocused Strengthening Families Program.

Least supported

- Whether existing within a larger organisation was considered the least important factor when determining which service providers receive funding under the refocused Strengthening Families Program.

5. Targeting Particular Groups

One hundred and twenty nine respondents to the survey provided *information about particular client groups which should be targeted as a priority*. Figure 9 presents a summary of the main disadvantaged populations and geographic areas identified in these responses. The bolded terms refer to the general population or area into which responses were grouped. Bulleted points refer to specific characteristics identified by respondents in their responses.

The greatest number of comments related to Indigenous populations (54 comments) and vulnerable families (50 comments).

Disadvantaged populations	Geographic areas
<i>Indigenous</i> <ul style="list-style-type: none"> • Young women • Families <i>At risk children and families</i> <ul style="list-style-type: none"> • Identified by government-based child protection services • Not identified by government-based child protection services <i>Vulnerable Families</i> <ul style="list-style-type: none"> • Parents leaving prison • Young parents • Pregnant women • Children with AOD issues • Parents with AOD issues <i>Multiple and complex issues</i> <ul style="list-style-type: none"> • Dual diagnosis • Domestic violence/ sexual abuse <i>Youth</i> <ul style="list-style-type: none"> • Adolescents • Children 	<i>Disadvantaged communities</i> <ul style="list-style-type: none"> • Concentrated socio-economic disadvantage • High proportion speaking a primary language other than English <i>Regional, rural, and remote</i> <ul style="list-style-type: none"> • Geographically distant from services • Indigenous communities

Figure 9. Main populations and geographic areas identified as priorities by respondents.

Key Findings

Most supported

- Prioritising responses to disadvantaged populations was identified as being the most important factor to consider when determining which programs/projects receive funding. These populations included Indigenous people, at risk children and families, vulnerable families, people with multiple and complex issues, and youth.

6. Respondents' Additional Comments

In addition to the quantitative responses in the survey, respondents were provided an opportunity to provide *final comments on issues they believed relevant to refocusing the Strengthening Families Program*.

The primary theme which emerged from these responses was the need to tailor services to meet the needs of specific client groups and geographic locations.

Many of these groups and geographic locations were those identified in figure 9, above. Repeatedly, Indigenous populations and rural and remote communities were identified as needing to be the priority for the Strengthening Families Program. Emphasis was placed on culturally appropriate services and the need to use existing services to refocus the Strengthening Families Program rather than develop new initiatives.

In addition to tailoring services to specific groups and geographic locations, many respondents emphasised the need to promote continuity of service for individuals, especially children, involved in AOD, FS, or CP services. A number of respondents identified a holistic approach to strengthening families and responding to the risk of substance misuse in a family with children. Some respondents indicated that this could be achieved by addressing the underlying causes of parental neglect and child abuse.

Key themes from additional comments
<i>Tailoring services</i> <ul style="list-style-type: none">• Specific Groups<ul style="list-style-type: none">○ Indigenous populations• Geographic locations<ul style="list-style-type: none">○ Regional, rural and remote• Culturally appropriate services
<i>Expanding existing services</i> <ul style="list-style-type: none">• Continuity of service• Holistic approach to service delivery• Underlying causes of abuse and neglect

7. Linkages and Collaboration Between Sectors and Services

Greater emphasis needs to be placed on linkages and collaboration between the sectors and service if appropriate referral between the sectors is going to improve.

Key issues from telephone interviews (linkages and collaborations)
<ul style="list-style-type: none">• Greater emphasis on linkages and collaborations needed to facilitate appropriate referrals• Current linkages and collaborations vary by service and sector<ul style="list-style-type: none">○ Usually contingent on individual staff and services○ Services within larger organisations link and collaborate more often

When asked to provide additional information on the linkages and collaboration between sectors and services, respondents from the phone interviews indicated that the level of linkage and collaboration between the AOD, FS and CP sectors and services varied and was generally dependent on individual staff and services. Where services were part of a larger organisation that provided a range of services across the sectors or where

states required inter service and inter sectoral partnerships, stronger linkages and collaboration were noted to occur.

Particular issues identified as impacting on the ability of services to link and collaborate well with one another included:

- Competing work demands
- Lack of knowledge about other services, particularly between the different sectors
- High turnover of staff
- Funding agreements not including this aspect of service delivery
- Confidentiality issues, particularly with CP services.

Suggestions on how linkages and collaboration could be improved included:

- A top down approach to the Strengthening Families Program that includes an interdepartmental approach and requirement for service agreements to include the establishment and use of memorandum of understandings between services and sectors
- Provision for financial incentives supporting linkage and collaboration between the sectors
- Provision for worker incentives.

8. Improving Access to Relevant Services

The importance of families being able to access a range of services at any one time was noted as being important in ensuring the best outcomes for families and children at risk. This however was not necessarily required to be available at the one place.

Issues with access were identified during most of the phone interviews with all three sectors noting the existence of waiting lists. This was particularly evident where clients had multiple issues and were seeking assistance as a family unit. For example within the AOD sector there were limited services, particularly residential services where parents or pregnant women were able to receive treatment for their AOD issues whilst also looking after their children. Likewise families accessing FS services were often not able to obtain the assistance they needed to address AOD issues. Access to CP services was also noted as being quite difficult and off putting to clients due to the focus on risk management issues.

Key issues from telephone interviews (improving access to relevant services)
<ul style="list-style-type: none">• Families being able to access a range of services is important• All three sectors indicated:<ul style="list-style-type: none">○ long waiting lists are a barrier○ accessing CP services was complicated by focus on risk management• AOD sector indicated:<ul style="list-style-type: none">○ limited residential services for mothers with children○ inadequate services for pregnant women• FS sector indicated:<ul style="list-style-type: none">○ families unable to access AOD services

Additional issues identified as creating barriers to clients and other services accessing services included:

- Insufficient funding, including capital works funding to provide appropriate facilities
- Little scope within funding agreements to provide a range of services
- Lack of experienced, multi skilled staff
- Little public awareness of available services
- Perceived stigma of seeking help was also noted as a barrier for clients, resulting in many families not accessing services until they were in crisis.

Most responses to the telephone interviews indicated that all three sectors should theoretically be able to be the initial point of access for clients and that many services were seeking to cater more broadly to the needs of families affected by AOD issues.

Suggestions on how access to relevant services could be improved included:

- Funding to support the provision of case coordination
- Funding to support an increase in services that cater to the needs of families affected by AOD issues.

9. Identifying and Responding to Children at Risk

All sectors saw identifying and responding to children at risk as a priority for services with many reporting that they were aware of their statutory obligations. Services dealing more directly with children and families were generally noted to be more skilled in being able to do this while other services, particularly AOD services were noted to be generally not as skilled. Most respondents however highlighted that identifying risk is a complex issue with some services often not being good at recognising and dealing with this complexity. There was a significant level of commentary regarding the need to clarify what is meant by the term 'risk' and identifying the appropriate point to refer the family onto child protection services. It was also noted that it was important for staff to recognise that the presence of AOD use did not automatically equate to children being at risk.

Key issues from telephone interviews (identifying and responding to children at risk)
<ul style="list-style-type: none">• Priority in all three sectors because of mandatory reporting requirements• AOD sector least skilled in this area• Identifying risk is complex<ul style="list-style-type: none">○ Need to clarify the meaning of 'risk' in the context of AOD issues○ Examples of risk assessment tools exist• Staff unskilled in dealing with families where child is at risk

It was noted that there are a number of good assessment tools available to assist in the identification process but that there is a need for staff to be skilled in using these tools and being able to respond appropriately once identification was made. Staff were also identified as often being inexperienced and lacking in skills to know how to approach people when there are issues of this nature to be addressed.

Components reported as enabling services to identify and respond to children at risk included:

- Development of information that provides a clearer understanding of 'at risk' and the levels of risk and how services can best respond to each of these levels
- Training of staff to be able to identify and respond to risk
- Development and dissemination to AOD services of policies and procedures on identification and response to children at risk
- Dissemination to and training of staff on assessment tools for identifying children at risk

Most respondents involved in the phone interviews also emphasised the need for services that responded to the specific needs of individual children. Many of the services being provided were described as addressing the issues of the parents or of the family as a whole but not of the individual children. There is therefore a need for:

- Funding to support the provision of services that cater to the specific needs of individual children.

Discussion

Commissioned by FaHCSIA, the ANCD sought input from the AOD, FS and CP sectors on how best to refocus the Strengthening Families Program after the announcement by the Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin, that the \$3.1 million annual allocation for the Program be used to provide parenting and substance misuse support where children are at risk. In particular, views were collected about the most appropriate service models, programs and investments that could be made with the announced change in focus. The consultation involved an online survey of interested workers in the AOD, FS, and CP sectors and structured telephone interviews with key state and nationally focused AOD, FS and CP bodies.

Limitations

When interpreting the key findings of the online survey and the phone interviews, it is important to be aware of a number of limitations with the consultation. These relate to the sample, the use of set optional response questions asked in the online survey, the number of organisations involved in the telephone interview component of the consultation, and the timeframe and resources available for the consultation as a whole.

A total of 171 responses to the online survey were included in the final results. Most respondents were from FS and AOD services, and consequently, the views of individuals working for CP services may not have been represented in the final results to the same extent as the FS and AOD respondents. In relation to the questions asked in the survey, they required a set response. While opportunity was provided for respondents to provide additional comments in a number of questions, these comments were not generally directly relevant to the specific questions being asked or related to the annual budget of \$3.1 million. Consequently, much of the additional qualitative information obtained from the online survey was either not relevant to the consultation process or was not feasible within the budget context of the program and could not contribute to the findings.

Responses also generally indicated sector support for furthering service delivery in their own sector. This is likely to be a mix of better knowledge of that sector, and a better understanding of how this could be done rather than necessarily mere self-interest. A more detailed analysis of the results might have been able to elucidate the extent to which each sector was supportive of specific suggestions in other sectors but time constraints did not allow for this.

Analysis

The information obtained from the online survey provides a good understanding of what respondents from the AOD, FS and CP sectors consider as the priorities when selecting the most appropriate service models and programs for the refocused Strengthening

Families Program. Difficulties with access to services, including waiting lists, the lack of experienced multi skilled staff and inconsistencies with linkages and collaboration between the sectors were also noted as being important issues needing to be addressed if the best outcomes for families affected by substance misuse were to be achieved.

Both the expansion of existing AOD service providers to address the needs of people affected by substance misuse who may have children and the development of a program to enable existing AOD, FS and CP services to become better equipped in identifying children at risk in families affected by substance misuse were selected as the preferred choice of service model. The inclusion of aftercare support for families with members who have undergone AOD treatment/intervention, early identification and prevention; treatment/intervention; case coordination between AOD, FS, and CP services; referral between sectors ; and outreach services were all identified as important services required for achieving the best outcomes for families and children at risk.

Some of the respondents noted that \$3.1 million was a relatively small amount for a national program and therefore significantly limited their vision or suggestions while others who are not familiar with national funding programmes would not have been aware of the potential amounts this might mean for any particular jurisdiction and/or service and the implications of this. Support for a few of the service models differed depending upon the specified annual budget (not reported here). Generally, when asked about their support for service models within the context of an unlimited budget, more people found individual service providers and one stop shops appropriate compared with an annual budget of \$3.1 million.

The telephone interviews provided specific information in terms of the issues and potential service models, services, and initiatives that are pertinent to refocusing the Strengthening Families Program. However, a total of only nine organisations were initially contacted to be involved in that component. Due to resource and time constraints, one of the key national AOD peak bodies was unable to take part resulting in a state peak AOD body being invited and interviewed. Notwithstanding this, additional information was able to be obtained from the phone interviews that complemented the information obtained from the online survey.

Issues with identifying and responding to children at risk were also noted during each of the phone interviews. Although each sector saw this as a priority, the AOD sector in particular, was noted as not being as skilled or in a position to be able to identify and respond to children at risk. This situation within the AOD sector is often identified as being due to funding not extending to include family related services.

Most AOD services are paid to deliver specialist AOD specific interventions to individuals who are misusing alcohol and other drugs. It is not surprising therefore that they struggle to extend their resources to attending to families and even more, to children in families. They all recognise that this is important work and that it is a significant part of successful intervention in the longer term and also a specific preventative intervention for the next generation of Australians. However, they are only funded for direct work with the alcohol/drug user and a broader remit requires additional resources. In this context the

Strengthening Families Program funding has been almost the only source of funding for such extended and holistic responses.

If the needs of children at risk are to be prioritised then the focus for the new Strengthening Families Program would be best directed towards improving the skills of workers in the AOD and FS sectors in identifying and responding to children at risk. Although services across the sectors were identified as generally being clear about their statutory obligations, there were a number of important issues that need to be taken into account.

A number of services were identified as not having the skills and resources to deal with the complexity of identifying and responding to issues of substance misuse and children at risk. In particular many were unclear about the meaning of risk and lacked an understanding of the different levels of risk and the best ways of responding to these different levels of risk.

These issues around identifying and responding to children at risk were particularly evident in the AOD sector. In the FS and CP sectors, an understanding of risk, and tools in which workers are trained exist however, the lack of understanding about AOD-related risks for children and families among the FS and CP sectors, combined with a general lack of awareness about risk in the AOD sector, indicates that there may be a need to clarify, specifically, what is meant by AOD-related risks for children and families so that there is a shared understanding of what constitutes risk and the implications of this between the three sectors. Problems within the FS sector around identifying risk within the context of a family affected by substance misuse were also noted. One method of addressing this is to have a common set of instruments that all three sectors are familiar with.

No one sector was identified as being the ideal one to be primarily responsible for ensuring that families access all of the services they need but rather the importance of services being able to respond to the multiple needs of families was noted. It is therefore important that services within the three sectors develop effective, locally relevant partnerships and liaison arrangements with one another. Currently this does not occur uniformly between the sectors. However, a 'no-wrong-door' policy approach would be appropriate in these circumstances.

The development of partnerships and liaison arrangements between the three sectors could include development of memorandums of understanding or other arrangements that allow for clear articulation of roles and responsibilities and ways of working and communicating. These arrangements could also assist in resolving the tensions that exist within AOD services and any other complex issues such as data sharing.

If the funding allocation prevents improving the skills of workers across all three sectors then it would seem most appropriate that the focus be placed on the AOD sector. This is based on the identified need and the overall support for the expansion of existing AOD services, particularly from FS services. This was despite there being a bias in responses towards supporting initiatives which expanded or involved respondents' own sectors. In

addition, funding from within the overall FSP could allow for FS and CP services to be developed in this respect.

There was a general impression that respondents to both the online survey and the telephone interviews were heavily influenced by a focus on short-term initiatives. Specifically, strong support for service delivery initiatives and lack of support for infrastructure, IT, and organisational development indicate that respondents were focused on short-term outcomes rather than on methods of building the response to implementing a medium to long-term strategy to identify and respond to children and families at risk of AOD-related harms.

The lack of support for infrastructure and organisational development did differ with the AOD sector where there was general support for funds to be allocated on strengthening the sector. This response is not surprising as it reflects the overall needs of the sector and highlights the need for a closer examination of such things as organisational governance arrangements, qualifications and levels of staffing.

Conclusions

The consultations process obtained information which can be used in the development, planning, funding, and maintenance of services and programs funded under the refocused Strengthening Families Program. Information about the importance and appropriateness of a variety of services, service models, and issues pertinent to funding allocation from the AOD, FS, and CP sectors were presented. These findings indicate that that, within the context of a national annual budget of \$3.1 million, priority could be given to clarifying the definition of AOD-related 'risk', training of staff to be able to identify and respond to 'risk', promoting linkages and collaborations between the sector at all levels including departmental staff and service delivery staff, and funding arrangements which facilitate a system of case coordination, referral, and information sharing between the sectors. However, a variety of alternative services, programs and models are likely to be generally supported by all three sectors.

Appendix A

Dear Service Provider in the Drug and Alcohol, Family Support and Child Protection Sectors

The Australian National Council on Drugs (ANCD), on behalf of the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) is seeking input on the development of a new phase of the National Illicit Drug Strategy (NIDS) Strengthening Families Program from organisations that either work with people affected by substance misuse who may have children, or with families and/or children who may be affected by substance misuse. This could include organisations in the alcohol and other drugs sector as well as those in family support and child protection service sectors.

The consultation is primarily focused on collecting views on the most appropriate service models, programs and investments that should be made within the context of available funding to provide the best outcomes for families and children at risk.

This is an important opportunity to ensure that your views are considered by FaHCSIA when redesigning and refocusing the Strengthening Families Program. To participate you will need to answer a number of questions that will take approximately 10 minutes of your time. Questions can be accessed at http://www.surveymonkey.com/s.aspx?sm=OBugC5Kykk6qp0JA7wbjjQ_3d_3d To assist in answering the questions a background discussion paper is also provided at http://www.ancd.org.au/assets/pdf/Consultation_Background_Paper.pdf **The closing date for answers to be submitted is COB, Monday 6 July 2009.**

Should you require further information or assistance in completing these questions please contact Denise Gilchrist at denise@ancd.org.au regarding this request.

We thank you for your valuable time and information.

Kind regards
Denise

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Appendix B



Australian Government

**Department of Families, Housing,
Community Services and Indigenous Affairs**

Dear Sir/Madam

Consultation with Key Stakeholders in the Drug and Alcohol, Family Support and Child Protection Sectors

The Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin MP, recently announced the National Framework for Protecting Australia's Children. As part of this announcement, the Minister also advised that the National Illicit Drug Strategy, Strengthening Families Program (the Program) would be refocused to support vulnerable families and their children consistent with the National Framework for Protecting Australia's Children.

I would like to invite you to participate in a consultation process being undertaken by the Australian National Council on Drugs (ANCD) on behalf of FaHCSIA, involving stakeholders in the drug and alcohol, family support and child protection sectors about refocussing the Program to better meet the needs of vulnerable and at risk families and children who are affected by problematic drug and alcohol use.

The consultation will collect views on the most appropriate service models and investments to provide the best outcomes for these families and children at risk. The consultation will be an important opportunity to ensure your views are considered in the decision making process when refocusing the Program.

I encourage you to take part in this consultation and thank you in advance for your contribution.

Yours sincerely

Barry Sandison

Group Manager

Families

Att: Consultation Background Paper



Australian Government

**Department of Families, Housing,
Community Services and Indigenous Affairs**



ANCD

AUSTRALIAN NATIONAL COUNCIL ON DRUGS

**Department of Families, Housing, Community Services and Indigenous
Affairs (FaHCSIA)**

Australian National Council on Drugs (ANCD)

Consultation Background Paper

Introduction

This paper provides some relevant background information to the consultation with the drug and alcohol, the family support and child protection services sectors being undertaken by the Australian National Council on Drugs (ANCD) on behalf of the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) to guide the new focus of the Strengthening and Supporting Families Coping with Illicit Drug Use ('Strengthening Families') Program.

Strengthening Families Program

The Strengthening Families Program is a component of the broader National Illicit Drug Strategy (NIDS) and focuses on the specific areas of family support rather than the health, education or criminal aspects of the strategy. The program currently assists families; including parents, grandparents, kinship carers and children of drug using parents, by taking an early intervention and family-focused approach to dealing with the impacts of substance misuse on families.

A diverse range of services to support families are funded under the Program with 18 organisations currently funded to deliver 19 programs across Australia. Services include counselling, support, advice, information, advocacy and referral. A list of the currently funded programs and service providers funded under the Strengthening Families Program can be found at: <http://www.fahcsia.gov.au/sa/gamblingdrugs/progserv/nids/Pages/default.aspx>

The Strengthening Families Program has an annual funding allocation of \$3.1 million

Refocusing of the program

As part of the recent announcement by the Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin, on the National Framework for Protecting Australia's Children, all existing Strengthening Families Program providers were offered an extension of funding until 30 April 2010.

The Minister also announced that from May 2010 the Strengthening Families Program will be refocused to support vulnerable families and their children consistent with the National Framework for Protecting Australia's Children.

As part of the process of developing a new service model FaHCSIA is working with the Australian National Council on Drugs (ANCD) to gain an understanding of the views and needs of the drug and alcohol, family support and child protection service sectors to inform the new approach for the Strengthening Families Program.

The consultation is expected to be completed by 30 July 2009. An open tender process under the new service model is then expected to be conducted between August and October 2009 with successful applicants announced in late 2009.

It should be noted that the decision to refocus the program has not been taken in response to any issues with the existing program but rather in order to direct resources to a key government priority in a time of increasing funding pressures.

The New Strategic Directions

The refocusing of the Strengthening Families Program is linked to two important initiatives of the Australian Government: The Family Support Program, a new umbrella program of which Strengthening Families will be a specialist part and the National Framework for Protecting Australia's Children which will inform the refocused policy direction of the Strengthening Families Program.

1. Family Support Program

On 16 February 2009, the Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin, announced the formation of the Family Support Program.

The FSP brings together a number of community-based families, parenting and children's services:

- Family Relationship Services Program
- **Strengthening Families Program funded under the National Illicit Drug Strategy**
- Communities for Children Initiative
- Invest to Grow program
- Child Care Links
- Indigenous Children Program
- Indigenous Parenting Support Services
- Playgroup Program
- Responding Early Assisting Children Program.

The Minister has brought these services together under a single umbrella program to join up a series of key policy and service delivery approaches that have been developed over time to address specific family and/or social issues. In bringing these services together, the FSP will build on the strengths and achievements of each of these individual initiatives to provide a more coordinated and flexible approach to delivering support to families and children.

Bringing these services together provides the opportunity to enhance policy development, coordination and service delivery across the FSP system. It is also the intention of this

integration to strengthen links with the broader community services sector and other levels of government, as well as to rationalise service and policy domains.

The FSP comprises three core service streams:

1. *Family and Parenting Services*: provides early intervention and prevention services and tools to families to build and strengthen relationships, develop skills and support parents and children navigating life's transitions.
2. *Community and Family Partnerships*: provides intensive and coordinated support targeted at significantly disadvantaged communities and families and especially vulnerable and at risk families and children.
3. *Family Law Services* (Attorney-General's Department responsibility): provides assistance to families to manage the process and impacts of separation in the best interests of children.

In addition, the 3 principles that underpin FSP are:

1. Building the capability and resilience of Australian families and children in their communities.
2. Working in the best interest of children.
3. Responding to the vulnerabilities of families and their communities.

While many families seeking support may receive all the assistance they need from a single service stream, an increasing number of families and children present with multiple and complex needs. These children and families will benefit from bringing together the broad suite of FSP services in a tailored and coordinated way. Improved flexibility and tailoring of services will primarily be **within** the FSP streams in the first instance, however, the longer-term goal is to offer families and children access to tailored and coordinated services **across** the FSP streams and with other FaHCSIA programs and other levels of government.

The services offered through the core FSP service streams will work to build the resilience of:

- parents and children navigating life transitions
- vulnerable and at risk families and children in highly disadvantaged communities
- families and children experiencing separation and divorce.

FaHCSIA is currently undertaking consultations around the country on this new consolidated program. These broad consultations are being conducted concurrently to the ANCD's consultations on the Strengthening Families program and each process will inform the other.

For a full copy of the Departmental Discussion Paper - Developing a Family Support Program please see:

<http://www.fahcsia.gov.au/sa/families/progserv/familysupport/Pages/DepartmentalDiscussionPaper-FSP.aspx>

2. National Framework for Protecting Australia's Children

On 30 April 2009 Minister Jenny Macklin announced the National Framework for Protecting Australia's Children. This National Framework is an initiative of the Australian Government that has been developed closely with, and endorsed by, all State and Territory Governments.

The National Framework aims to deliver a more integrated response but does not change the relative responsibilities of governments. States and Territories retain responsibility for statutory child protection, as the Australian Government retains responsibility for providing income support payments. The National Framework also recognises the significant existing efforts and reforms which are being undertaken by governments across Australia in protecting children and supporting families. It also involves a commitment to better link the many supports and services provided across the family services, child protection and related sectors by avoiding duplication and ensuring that innovation and information are shared across the sectors.

The Framework is structured around six high-level supporting outcomes with associated strategies and indicators of change of which the most relevant for the drug and alcohol sector are:

- **Supporting Outcome 2:**
Children and families access adequate support to promote safety and intervene early.
In particular, the associated Strategy 2.4 to enhance services and supports for children and families to target the most vulnerable and protect children 'at-risk'
- **Supporting Outcome 3:**
Risk factors for child abuse and neglect are addressed.
In particular, the associated Strategy 3.1 to enhance alcohol and substance abuse initiatives that provide additional support to families.

These supporting outcomes highlight the important role of drug and alcohol services in ensuring that children at risk are identified and assisted. This can be either as primary clients or as children of adult clients presenting at drug and alcohol services.

For a full copy of the National Framework for Protecting Australia's Children 2009–2020 please see:

<http://www.fahcsia.gov.au/about/news/2009/pages/nationalframeworkprotectingchildren.aspx>

Consultation

As part of the consultation process being undertaken by the ANCD on behalf of FaHCSIA, the ANCD will provide the drug and alcohol, as well as the family support and child protection services sectors with an opportunity to ensure their views are considered in the decision making process of the Australian Government when redesigning and refocusing the Strengthening Families Program.

Given that the policy framework for the refocusing of the Strengthening Families Program has now been determined; this part of the consultation will be primarily focused on collecting the views of relevant services on the most appropriate service models, programs and investments that should be made within the national \$3.1 million annual budget to provide the best outcomes for families and children at risk.

Appendix C

Introduction

Dear Service Provider,

As an organisation that either works with people affected by substance misuse who may have children, or that works with families and/or children who may be affected by substance misuse, the Australian National Council on Drugs (ANCD), on behalf of the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) is seeking your input to inform the development of a new phase of the National Illicit Drug Strategy (NIDS) Strengthening Families Program which is funded by FaHCSIA.

The ANCD has been commissioned by FaHCSIA to conduct an independent consultation of organisations with a particular interest in the Strengthening Families Program. The consultation is primarily focused on collecting views about the most appropriate service models, programs and investments that could be made within the context of available funding to provide the best outcomes for families and children at risk. This consultation is to be undertaken primarily via the use of this online consultation.

We encourage you to take the time to participate as this is an important opportunity to ensure that your views are considered by FaHCSIA when redesigning and refocusing the Strengthening Families Program. Where individual organisations have more than one site or where they may have more than one relevant service we hope that you will encourage all the services within your organisation to respond.

Once the consultation has been completed the ANCD will provide FaHCSIA with a report on the responses to this consultation, highlighting the key findings which will assist FaHCSIA in developing a service model for the refocused Strengthening Families Program.

To assist in answering the following questions a short background discussion paper is provided which can be accessed at http://www.ancd.org.au/assets/pdf/Consultation_Background_Paper.pdf It will be important that you read it before answering the following questions which are expected to take no more than 10 minutes to complete. **The closing date for answers to be submitted is COB Monday 4 July 2009.**

Please note that no individual services or organisations will be identified as part of the consultation.

We thank you for your valuable time and information.

A) Organisational Details

These questions provide information about the size and location of your service and the type of service you provide. Please note that we are interested in your specific service and not your organisation as a whole unless your service constitutes the entirety of your organisation.

1) What type of service do you work for? Please select one:

- a. NGO (not for profit)
- b. Government
- c. Private
- d. Other (please specify)

2) Is your service part of a larger organisation which provides multiple services?

- a. Yes
- b. No

3) What is the main type of service(s) you provide? Multiple answers allowed:

- a. Alcohol and other drug specific
- b. Family support
- c. Child protection
- d. Other (please specify)

4) In which state or territory does your service operate? Please select one:

- a. NSW
- b. VIC
- c. QLD
- d. SA
- e. WA
- f. TAS
- g. NT
- h. ACT

5) Where does your service operate? Please select one:

- a. Capital city
- b. Major city (greater than 100,000)
- c. Regional centre (10,000 – 99,999)
- d. Other (eg city/town of less than 10,000)

6) What is the size of your service (measured by annual budget)? Please select one:

- 1. Up to \$499,999
- 2. \$500,000 - \$1,499,999
- 3. \$1,500,000 - \$3,000,000
- 4. More than \$3,000,000

7. Does your service currently receive funding under the Strengthening Families Program?

Yes No

B) PROGRAM DESIGN/SERVICE MODEL

These questions ask about the ability of potential service models and programs to achieve the best outcomes for families and children at risk. To gain an understanding of responses, question 1 has been asked as if there was no limit to the budget. Given that there is an annual **national** budget of \$3.1 million for the Strengthening Families Program, question 9 asks the same question within the budget context.

You are asked to rate the degree of appropriateness/importance etc for each of the options on a five point scale ranging from extremely appropriate/important to not appropriate/important.

1) Within the context of an unlimited budget, how appropriate do you think the following expanded service models would be to achieve the best outcomes for families and children at risk?

- a. A single service provider to roll out a standardised program across Australia
- b. A number of one stop shops located in key areas providing a range of services
- c. A number of individual services situated across Australia providing services that meet local needs
- d. Existing alcohol and other drug service providers expanded to address the needs of people affected by substance misuse who also have children
- e. Existing family support and child protection services expanded to address substance misuse issues
- f. Developing a program to enable existing alcohol and other drug services to become better equipped in identifying and responding to children at risk
- g. Developing a program to enable existing family support and child protection services to become better equipped in identifying and responding to children in families affected by substance misuse
- h. A program of funding which follows individual children across both alcohol and other drug and family support and child protection services
- i. Other - If there is a service model not listed above that you consider important please provide details on the type of service and the degree of appropriateness?
 - i. Not appropriate
 - ii. Somewhat appropriate
 - iii. Appropriate
 - iv. Very appropriate
 - v. Extremely appropriate

2) Within the context of an annual budget of \$3.1 million, how appropriate would the following service models be to achieve the best outcomes for families and children at risk?

- a. A single service provider to roll out a standardised program across Australia
- b. A number of one stop shops located in key areas providing a range of services

- c. A number of individual services situated across Australia providing services that meet local needs
- d. Existing alcohol and other drug service providers expanded to address the needs of people affected by substance misuse who also have children
- e. Existing family support and child protection services expanded to address substance misuse issues
- f. Developing a program to enable existing alcohol and other drug services to become better equipped in identifying and responding to children at risk
- g. Developing a program to enable existing family support and child protection services to become better equipped in identifying and responding to children in families affected by substance misuse
- h. A program of funding which follows individual children across both alcohol and other drug and family support and child protection services
- i. Other - If there is a service model not listed above that you consider important please provide details on the type of service and the degree of appropriateness?
 - i. Not appropriate
 - ii. Somewhat appropriate
 - iii. Appropriate
 - iv. Very appropriate
 - v. Extremely appropriate

3. How important do you think the following services are to achieve the best outcomes for families and children at risk?

- a. Early identification and prevention
- b. Treatment/ intervention alcohol and other drug treatment that includes attention to children in the treatment plan and/or intervention re parenting that includes active consideration of alcohol issues
- c. Case Coordination between alcohol and other drug services, family support and child protection services
- d. Referral between sectors i.e.: to specific alcohol and other drug or family support and child protection services
- e. Aftercare support for families with a member who has undergone alcohol and other drug treatment
- f. Outreach
- g. National social marketing campaign
- i. Other if there is a service not listed in B 3) above that you consider important please provide details on the type of service and the degree of importance?
 - i. Not important
 - ii. Somewhat important
 - iii. Important

- iv. Very important
- v. Extremely important

4) How important do you think the following should be when considering the allocation of funds under the Strengthening Families Program?

- a. Service delivery
- b. Workforce development
- c. Organisational development
- d. IT Infrastructure
- e. Sector development
- f. Integration of services eg sharing infrastructure services
- g. Data collection and analysis
- h. Information sharing e.g. research findings
- i. Other if there is an area not listed above that you consider important please provide details of this and its degree of importance?

- i. Not important
- ii. Somewhat important
- iii. Important
- iv. Very important
- v. Extremely important

C) NEEDS AND LOCATION

These questions ask you to indicate what factors are most important in determining where the current annual budget of \$3.1 million should be allocated to achieve the best outcomes for families and children at risk.

1) Indicate how important you believe the following factors should be when determining which programs/projects receive funding:

- a. Prioritising geographic areas of greatest need
- b. Prioritising responses to disadvantaged populations
- c. A research/evaluation evidence base for proposed services and programs
- d. Other if there is an factor not listed above that you consider important please provide details and level of importance.
 - i. Not important
 - ii. Somewhat important
 - iii. Important
 - iv. Very important
 - v. Extremely important

2) Are there particular client groups that need to be targeted as a priority?

Yes (please provide details).....

No

D) SELECTION OF PROVIDERS

Assuming that FaHCSIA identifies a model which they intend to fund under the Strengthening Families Program, we are interested in what factors you believe are important when selecting service providers. A link to a list of currently funded programs and services under the Strengthening Families Program is provided in the Background Discussion Paper.

1) Indicate how important you believe the following to be in determining which service providers receive funding:

- a. Sustaining the existing services currently funded under the Strengthening Families Program
- b. Rationale and relevance to refocused Strengthening Families Program
- c. Maintaining continuing funding for existing services
- d. Evidence of current service capacity and performance
- e. Ensuring services are located in areas of need
- f. Likelihood of service sustainability in the medium to longer term
- g. Service exists within a larger organisation
- h. Other – if there is a factor not listed above that you consider important please provide details and indicate the degree of importance
 - a. Not important
 - b. Somewhat important
 - c. Important
 - d. Very important
 - e. Extremely important

F) FINAL COMMENTS

Are there any additional comments you would like to make on how best the funding could be allocated to support the development of a new phase of the Strengthening Families Program?

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.....T

Thank you note

Appendix D

What type of service do you work for? Please select one:		
Answer Options	Response Percent	Response Count
NGO (not-for-profit)	77.8%	133
Government	21.6%	37
Private	0.6%	1
Other (please specify below)	0.0%	0
<i>answered question</i>		171
<i>skipped question</i>		0

Is your service part of a larger organisation which provides multiple services?		
Answer Options	Response Percent	Response Count
Yes	76.0%	130
No	24.0%	41
<i>answered question</i>		171
<i>skipped question</i>		0

What is the main type of service(s) you provide? Multiple answers allowed:		
Answer Options	Response Percent	Response Count
Alcohol and other drug specific	53.2%	91
Family support	57.9%	99
Child protection	20.5%	35
Other (please specify below)	11.1%	19
<i>answered question</i>		171
<i>skipped question</i>		0

In which state or territory does your service operate? Please select one:		
Answer Options	Response Percent	Response Count
NSW	39.8%	68
VIC	22.2%	38
QLD	23.4%	40
SA	19.9%	34
WA	24.6%	42
TAS	12.9%	22
NT	15.8%	27
ACT	14.0%	24
<i>answered question</i>		171
<i>skipped question</i>		0

Where does your service operate? Please select one:		
Answer Options	Response Percent	Response Count
Capital city	56.7%	97
Major city (greater than 100,000)	21.6%	37
Regional centre (10,000 – 99,999)	32.2%	55
Other (eg city/town of less than 10,000)	12.9%	22
<i>answered question</i>		171
<i>skipped question</i>		0

What is the size of your service (measured by annual budget)? Please select one:		
Answer Options	Response Percent	Response Count
Up to \$499,999	32.2%	55
\$500,000 - \$1,499,999	26.3%	45
\$1,500,000 - \$3,000,000	11.7%	20
More than \$3,000,000	29.8%	51
<i>answered question</i>		171
<i>skipped question</i>		0

Does your service currently receive funding under the Strengthening Families Program?		
Answer Options	Response Percent	Response Count
Yes	31.6%	54
No	68.4%	117
<i>answered question</i>		171
<i>skipped question</i>		0

Results continued on next page.

Within the context of an annual budget of \$3.1 million, how appropriate would the following service models be to achieve the best outcomes for families and children at risk?							
Answer Options	Extremely appropriate	Very appropriate	Appropriate	Somewhat appropriate	Not appropriate	Rating Average	Response Count
A single service provider to roll out a standardised program across Australia	7	8	20	31	92	4.22	158
A number of one stop shops located in key areas providing a range of services	31	34	29	26	38	3.04	158
A number of individual services situated across Australia providing services that meet local needs	50	38	33	25	12	2.44	158
Existing alcohol and other drug service providers expanded to address the needs of people affected by substance misuse who may have children	64	45	26	14	8	2.09	157
Existing family support and child protection services expanded to address substance misuse issues	55	40	26	17	19	2.39	157
Developing a program to enable existing alcohol and other drug services to become better equipped in identifying and responding to children at risk	58	45	33	12	8	2.15	156
Developing a program to enable existing family support and child protection services to become better equipped in identifying children in families affected by substance misuse	56	40	38	14	11	2.27	159
A program of funding which follows individual children across both alcohol and other drug and family support and child protection services	52	36	30	20	20	2.49	158
answered question							162
skipped question							9

How important do you think the following services are to achieve the best outcomes for families and children at risk?							
Answer Options	Extremely important	Very important	Important	Somewhat important	Not important	Rating Average	Response Count
Early identification and prevention	118	12	8	5	1	1.33	144
Treatment/Intervention - alcohol and other drug treatment that includes attention to children in the treatment plan and/or parenting intervention that includes active consideration of alcohol and other drug issues	109	28	14	3	1	1.45	155
Case coordination between alcohol and other drug services and family support and child protection services	101	41	14	5	1	1.54	162
Referral between sectors i.e. to specific alcohol and other drugs or family support and child protection services	89	49	20	2	1	1.61	161
Aftercare support for families with members who have undergone alcohol and other drugs treatment	104	42	14	1	1	1.48	162
Outreach	94	31	18	7	5	1.70	155
A national social marketing campaign	38	29	40	30	18	2.75	155
answered question							163
skipped question							8

How important do you think the following should be when considering the allocation of funds under the Strengthening Families Program?							
Answer Options	Extremely important	Very important	Important	Somewhat important	Not important	Rating Average	Response Count
Service delivery	125	27	5	1	1	1.28	159
Workforce development	60	61	25	8	4	1.96	158
Organisational development	40	58	42	17	2	2.26	159
IT infrastructure	23	44	51	28	14	2.79	160
Sector development	33	48	58	16	3	2.42	158
Integration of services e.g. sharing infrastructure services	47	52	32	16	12	2.33	159
Data collection and analysis	44	61	44	12	0	2.15	161
Information sharing e.g. research findings	62	47	38	10	0	1.97	157
<i>answered question</i>							163
<i>skipped question</i>							8

Indicate how important you believe the following factors should be when determining which programs/projects receive funding:							
Answer Options	Extremely important	Very important	Important	Somewhat important	Not important	Rating Average	Response Count
Prioritising geographic areas of greatest need	51	52	39	8	7	2.16	157
Prioritising responses to disadvantaged populations	77	50	22	5	3	1.77	157
A research/evaluation evidence base for proposed services and programs	65	40	39	9	3	2.01	156
<i>answered question</i>							157
<i>skipped question</i>							14

Are there particular client groups that need to be targeted as a priority?		
Answer Options	Response Percent	Response Count
Yes (please specify)	77.7%	129
No	22.3%	37
Please specify (max 300 characters)		123
answered question		166
skipped question		5

Indicate how important you believe the following to be in determining which service providers receive funding:							
Answer Options	Extremely important	Very important	Important	Somewhat important	Not important	Rating Average	Response Count
Sustaining the existing services currently funded under the Strengthening Families Program	45	43	32	29	3	2.36	152
Rationale and relevance to refocused Strengthening Families Program	46	55	34	13	3	2.15	151
Maintaining continuing funding for other existing services	30	40	45	30	3	2.57	148
Evidence of current service capacity and performance	87	48	15	2	0	1.55	152
Ensuring services are located in areas of need	94	38	18	1	3	1.58	154
Likelihood of service sustainability in the medium to longer term	84	48	12	2	4	1.63	150
Service exists within a larger organisation	17	28	26	35	41	3.37	147
answered question							155
skipped question							16

Appendix E

Key national bodies contacted for telephone interviews		
Alcohol and other drug	Family support	Child protection
Australasian Therapeutic Communities Association	Family Relationship Services	Mission Australia
Alcohol and Other Drug Council of Australia	The Benevolent Society	Australian Council for Youth and Children Organisations
Victorian Alcohol and Other Drug Association	Good Beginnings Australia	Childwise
Queensland Indigenous Substance Misuse Council		

Appendix F

Information for Phone Interviews for Strengthening Families Program Consultation

Dear Participant

Thank you for agreeing to take part in a phone interview with Adam Bode from the Australian National Council on Drugs (ANCD). As a key national body that represents services that either work with people affected by substance misuse who may have children, or that work with families and/or children who may be affected by substance misuse, the ANCD, on behalf of the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) is seeking your input to inform the development of a new phase of the National Illicit Drug Strategy (NIDS) Strengthening and Supporting Families Coping with Illicit Drug Use ('Strengthening Families') Program.

The ANCD has been commissioned by FaHCSIA to conduct an independent consultation of organisations with a particular interest in the Strengthening Families Program. The consultation is primarily focused on collecting views about the most appropriate service models, programs and investments that could be made within the context of available funding to provide the best outcomes for families and children at risk. This consultation is being undertaken through two phases:

1. An online consultation, targeting services/organisations working in the alcohol and other drug (AOD), family support and/or child protection sectors. This online consultation process is currently being conducted and can be accessed at http://www.surveymonkey.com/s.aspx?sm=OBugC5Kykk6qp0JA7wbjQ_3d_3d. **Closing date for responses is Monday 6 July;** and
2. A number of phone interviews with key national bodies from the AOD, family support and child protection sectors.

To assist in answering the questions that will be asked during the phone interview some background information along with a copy of the questions that will be asked during the interview are provided

below. It is important that you read this before the scheduled interview. Interviews are estimated to take approximately 30 minutes.

Once the two phases of the consultation have been completed the ANCD will provide FaHCSIA with a report on the responses to this consultation, highlighting the key findings which will assist FaHCSIA in developing a service model for the refocused Strengthening Families Program.

If you have any questions, please feel free to contact me at the e-mail and telephone numbers below.

Thanks again for your valuable support and input.

Kind regards

Denise Gilchrist

Manager

Australian National Council on Drugs

3 July 2009

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(02) 6166 9600

Background

The Strengthening Families Program is a component of the broader National Illicit Drug Strategy (NIDS) and focuses on the specific areas of family support rather than the health, education or criminal aspects of the strategy. The program currently assists families; including parents, grandparents, kinship carers and children of drug using parents, by taking an early intervention and family-focused approach to dealing with the impacts of substance misuse on families.

As part of a number of recent announcements by the Minister for Families, Housing, Community Services and Indigenous Affairs, the Hon Jenny Macklin, the Strengthening Families Program will be refocused to support vulnerable families and their children consistent with the new National Framework for Protecting Australia's Children.

To allow for the development of the refocused Strengthening Families Program, all existing Strengthening Families Program providers were offered an extension of funding until 30 April 2010.

As part of the process of developing a new service model, FaHCSIA is working with the Australian National Council on Drugs (ANCD) to gain an understanding of the views and needs of the drug and alcohol, family support and child protection service sectors to inform the new approach for the Strengthening Families Program.

The consultation is expected to be completed by 30 July 2009. An open tender process under the new service model is then expected to be conducted between August and October 2009 with successful applicants announced in late 2009.

It should be noted that the decision to refocus the program has not been taken in response to any issues with the existing program but rather in order to direct resources to a key government priority in a time of increasing funding pressures.

The refocusing of the Strengthening Families Program is linked to two important initiatives of the Australian Government: The Family Support Program, a new umbrella program of which Strengthening Families will be a specialist part and the National Framework for Protecting Australia's Children which will inform the refocused policy direction of the Strengthening Families Program.

For a full copy of the Departmental Discussion Paper - Developing a Family Support Program please see:

<http://www.fahcsia.gov.au/sa/families/progserv/familysupport/Pages/DepartmentalDiscussionPaper-FSP.aspx>

For a full copy of the National Framework for Protecting Australia's Children 2009–2020 please see:

<http://www.fahcsia.gov.au/about/news/2009/pages/nationalframeworkprotectingchildren.aspx>

Questions for telephone interviews

1. We will not be attributing any information to particular individuals or services/organisation within the main part of the report but would you be happy for us to mention your name and organisation as one of the key national bodies that participated in the telephone interviews.

A) Organisational Details

1. Which sector do you represent? (AOD, Family Support or Child Protection)

B) Linkages/collaboration between sectors and services

With the refocus of the Strengthening Families Program, FaHCSIA are seeking to *improve coordination and linkages* between services within the AOD, family support and child protection sectors to improve outcomes for families and children affected by substance misuse. The program currently assists families; including parents, grandparents, kinship carers and children of drug using parents, by taking an early intervention and family-focused approach to dealing with the impacts of substance misuse on families.

1. How well do you think each of the following service types currently link and collaborate with other services within the different sectors?
 - a. AOD
 - b. Family support
 - c. Child protection
 - d. Which (if any) sector is best situated to facilitate linking and collaboration between services in all three sectors?
2. Are you aware of the sorts of services which currently link and collaborate with the other sectors well? (This may also include services such as housing)
 - a. Please provide examples of how these sorts of services link and collaborate well with services from the other sectors.
 - b. What specific features of these sorts of services help to achieve this?

3. What are the current barriers to services linking and collaborating with services in the other sectors?
4. What changes are needed to facilitate greater linking and collaboration between services in all three sectors (AOD, family support and child protection)?

C) Improving access to relevant services

One major component of improving outcomes for children and families affected by substance misuse is ensuring that individuals are able to access the services they believe can help their situation. The following questions relate to the **accessibility** of services and your views on **barriers** to access and **changes** which may improve accessibility.

1. How easy is it for clients to access services in each sector?
 - a. AOD
 - b. Family support
 - c. Child protection
2. Are you aware of the sorts of services which currently do a particularly **good job** in promoting client access to their services?
 - a. Please provide examples of how these sorts of services promote client access.
 - b. What specific features of these sorts of services help to achieve this?
3. We are interested in understanding what are the **barriers and challenges** to providing access for clients:
 - a. Can you specify what service providers believe are the main barriers to promoting access?
 - b. Can you specify what clients believe are barriers to accessing relevant services?
4. What are the **benefits and the possible problems** associated with differentiating between AOD, family, and child protection services in terms of access for clients?

- a. Does it matter which sector the initial *point of access* is with?

D) Working with families and children

An important aspect of the Strengthening Families Program is the provision of services that look specifically at providing **family support** to improve outcomes for children and families affected by substance misuse. The following questions ask about how services in your sector achieve this.

1. How high a priority is each of the following in your sector?
 - a. Fostering more resilience within families and communities.
 - b. Ensuring families take account of the best interest of their children in making parenting arrangements.
 - c. Enhancing safety and wellbeing of children.
2. How feasible is it to provide each of the following in your sector?
 - a. Fostering more resilience within families and communities.
 - b. Ensuring families take account of the best interest of their children in making parenting arrangements.
 - c. Enhancing safety and wellbeing of children.

E) Identifying children at risk

With the refocus of the Strengthening Families Program to support vulnerable families and their children consistent with the new National Framework for Protecting Australia's Children there will be a requirement for services to be able to identify children at risk. The following questions ask about your sectors ability to identify children at risk of harm or neglect in families affected by substance misuse.

1. How well do services currently **identify children at risk** in families affected by AOD issues?
 - a. AOD
 - b. Family support
 - c. Child protection

2. Are you aware of the sorts of services which currently do well at **identifying children at risk** in families affected by AOD issues?
 - a. Please provide examples of how these sorts of services do well at identifying children at risk in families affected by AOD issues.
 - b. What specific features of these sorts of services help to achieve this?
3. What are the current **barriers** and **challenges** to services being able to identify children at risk in families affected by AOD issues?
4. What **changes** need to be made to facilitate better identification of children at risk in families affected by AOD issues?

F) Responding to children at risk

Following on from the previous section which looked at identifying children at risk this next set of questions asks about your sectors ability to **respond** once children at risk have been identified.

1. How well do services currently respond to children at risk in families affected by AOD issues.
 - a. AOD
 - b. Family support
 - c. Child protection
2. Are you aware of the sorts of services which currently do well at responding to children at risk in families affected by AOD issues?
 - a. Please provide examples of how these sorts of services do well at responding to children at risk in families affected by AOD issues.
 - b. What specific features of these sorts of services help to achieve this?
3. What are the current **barriers** and **challenges** to services being able to respond to children at risk in families affected by AOD issues?
4. What **changes** need to be made to facilitate better responses for children at risk in families affected by AOD issues?