



**To:** **Their Futures Matter**  
**Department of Family and Community Services**

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**From:** **Barnardos Australia**

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**Subject:** **Submission – Access System Redesign discussion paper**

**Date submitted:** **29 March 2019**

Barnardos Australia (Barnardos) thanks Their Futures Matter for the opportunity to participate in the discussion of the vision, guiding principles and direction of the next phase of reform for the comprehensive redesign of the child safety and child wellbeing intake, assessment and referral system (the “Access System”).

We recognise the imperative of whole-of-system reform. The status quo is not an option if we are to address the impact of intergenerational trauma and long-term disadvantage and poverty on children; and assist parents and children together to break the cycle of disadvantage.

Our relevant expertise lies in the development and delivery of evidence informed service models for interventions targeted at families at high risk or vulnerable to child maltreatment due to, for example, parental substance abuse, parental mental health concerns, or intimate partner violence.

We have focussed our comments on our knowledge of how to successfully implement best-practice socio-ecological service models in local communities to provide a multi-disciplinary, child centred program of wraparound support.

### **Background: Barnardos knowledge of this area**

Barnardos is a family support and out-of-home care (OOHC) agency, which assists over 14,409 children and their families in New South Wales (NSW) and the Australian Capital Territory (ACT) each year and maintains 1,415 children in NSW and the ACT in foster and kinship care. In our family support work we aim to reach vulnerable children at risk of separation from their families, and we work in areas with significant Aboriginal populations<sup>1</sup> such as Western Sydney, Central West NSW, the South Coast and Inner Sydney.

We are committed to supporting families in caring for their children and to ensure permanency for children who cannot safely live at home. In 2017-18 we achieved 38 adoptions from care, which represented 26% of the 140 adoptions in NSW and 27% of all

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<sup>1</sup> Note that we use the term “Aboriginal” throughout our response to reflect that in the NSW and ACT there are only very small numbers of people who report they are of Torres Strait Islander origin.

adoptions from care nationally.<sup>2</sup> Of the 7 adoptions from care in other Australian states and territories in the same period, Barnardos achieved two in the ACT.

We take seriously the need to ensure that the next generation does not suffer the problems of the past. For this reason, we work together with children, young people and families to break the cycle of disadvantage, creating safe, nurturing and stable homes, connected to family and community.

## **PART 1: GUIDING PRINCIPLES**

### **The vision for a new Access System (Table 1; Q1 – Q3)**

Barnardos welcomes the new vision for the Access System. In our view, the concept of the redesign with a multi-agency, evidenced-based approach to addressing the intergenerational disadvantage and vulnerabilities of children and families is exactly what is needed. We strongly believe the identified design principles outlined provide an appropriate overarching framework.

We note that while there is strong agreement on the desirable characteristics of the system, less clear is *how* to implement a system where all parts are working towards wellbeing and prevention rather than focussing on where abuse and neglect have occurred (Productivity Commission, 2019). Effective interventions that connect at-risk children and families with appropriate services will inevitably vary by socio-cultural context, jurisdiction and locality.

Moreover, rebuilding the access system will mean adapting and working with the existing system that prioritises tertiary-based approaches. The need for agile crisis responses to abuse and neglect will always remain. Consequently, we believe developing tailored responses at the local level will present many challenges. Nevertheless, in our view a co-ordinated response is required at the local level to ensure a holistic and collaborative approach that is client-centred. The local service delivery challenges of translating the design principles into a recalibrated system include:

- Who will take the lead on the ground in co-ordinating/driving the holistic collaborative approach?
- What local processes will be put in place to ensure services are not duplicated?
- The development of a collaboration model is required to provide direction, governance, accountability, service planning and decision making. How will this be established?
- How is ongoing resourcing to drive change going to be managed? This requires constant critical reflection and monitoring of local needs, delivery, measurement and evaluation.
- To build a cohesive model of collaboration and a holistic service, significant relationship building, such as joint meetings, are required. This places significantly increased administrative requirements on organisations which need to be resourced.
- What importance will be placed on further investment to enhance data-driven decision making and improved systems outcomes reporting at the individual, program and sector levels?

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<sup>2</sup> Barnardos achieved 36 open adoptions in NSW and 2 in the ACT. NSW achieved 140 of the 147 carer adoptions finalised in Australia in 2017-18.

- What strategic support will be provided to assist service providers to identify and improve the evidence base of locally-designed and developed service solutions?

Meeting these challenges will require different solutions according to varying local needs. Some examples of Barnardos approach are described in detail in our responses to Parts 2 and 3 below.

## **PART 2: KEY THEMES FROM THE EVIDENCE**

### **Understanding the drivers of vulnerability (2.1 pp.10-11; Q3-Q4).**

#### *Poverty and the intergenerational transmission of economic disadvantage*

We welcome the focus on intergenerational trauma and disadvantage as the most significant drivers of vulnerability and risk of harm, of long-term and multi-generational reliance on child and family services, and in particular, of crisis and statutory responses (p. 10). However, we believe the negative impact for families living in situations of chronic poverty is insufficiently acknowledged.

Entrenched and elevated levels of economic disadvantage are strongly associated with increased risk of child maltreatment. Recent research conducted with highly vulnerable Aboriginal users of our services highlights the impact of economic disadvantage and deep deprivation. The study findings evidence that families are dealing with generations of poverty and material deprivation, as well as loss, substance abuse, violence in the home and lateral violence (Newton, 2016).<sup>3</sup>

Families involved in the study were living in Wiradjuri country in a small township in NSW where one quarter of the town's population is Aboriginal. Like many other Aboriginal communities, the township has very poor access to support services and to early childhood education. Families lived in chronic poverty and young parents themselves frequently had a history of growing up in situations of gross neglect. The researcher concluded that Aboriginal parenting in that community was adversely affected by living in poverty (including how to prioritise limited income), shifts in parenting norms, historic trauma, lateral violence, a pervasive sense of powerlessness and reluctance to engage with services because of concerns about child protection policing. Importantly, despite disparities in their exposure to poverty, the findings show that there are very few differences in how Aboriginal and non-Aboriginal parents perceive child neglect; like non-Aboriginal parents "*it is the difficult circumstances experienced by Aboriginal families that keep parents from actualising their parenting expectations*" (Newton, 2017, p. 262).<sup>4</sup>

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<sup>3</sup> Newton, B.J. (2016) *Understanding child neglect from an Aboriginal worldview: Perceptions of Aboriginal parents and workers in a rural NSW community*. SPRC. Sydney, UNSW.

<sup>4</sup> Newtown, B.J. (2017) 'An Aboriginal community's perceptions and experiences of child neglect in a rural town'. *Australian Journal of Social Issues*, 52:262–277.

**Engaging with children and families earlier to bring about change (2.2 p.12; Q6-Q7).**

From our implementation experience of parenting and family support programs in highly disadvantaged communities, we note that:

- vulnerable families need access to high quality child care and support;
- early childhood centres and primary schools can be used as a point of parent education and trauma-informed support services;
- outposted Family Referral Service (FRS) workers and therapeutic specialists can build capacity in child care centre networks to provide care for children who have been impacted by intergenerational trauma and deprivation; and
- Aboriginal Child and Family Programs and Early Years Programs remain underutilised due to funding constraints.

These themes are demonstrated in the following description of our local and capacity building partnership with early childhood services:

*Example: Piloting a partnership between family referral services, therapeutic specialists and early childhood centres*

In the South Coast Barnardos identified that Early Childhood services provide a platform for quality referral pathways and options for families who are at risk and who often fall through the gaps. Consequently, Barnardos South Coast Family Referral Service partnered with a child care provider (*Big Fat Smile*) to locate a Family Referral Service worker within their Early Childhood Centres (ECCs).

*Big Fat Smile* operates 26 Early Childhood Centres (ECCs) and 16 out of school hours care centres across the Illawarra region of NSW. The pilot commenced in early 2019 at Bellambi and Barrack Heights Long Day Care Centres, which are situated within locations experiencing high levels of social and economic disadvantage, with a view to enhancing referral pathways for at risk families. It is also being evaluated.

The project has consulted with the ECCs and identified a range of gaps in terms of the ECCs capacity to effectively provide for children who present in their centres, who are in the care system, and who present with high levels of trauma and attachment-related behavioural concerns. Critical identified barriers included:

- Educators had no information on the child's experiences prior to entering care. This information (within reason) would be able to help them plan for the child's needs, give context to their play and would help identify or locate behaviour triggers.
- ECCs have no knowledge around what happens in the life of a child in care. Events such as 'family time' (contact) can help educators understand and respond more appropriately to the messages behind the child's changes and fluctuations in behaviour which may be as a result of these events (moving or changes in placement, medical assessments, sibling contacts etc). Educators report often seeing patterns of behaviour in children (in care) and potentially could have significant input into planning and supporting placement stability.

- ECCs at times, struggle to understand and respond to the extreme behaviours exhibited by children who have experienced extreme abuse and trauma, often resulting in either punitive responses, reduction of days in care or expulsion.
- ECCs find it difficult to talk to the children about their experiences for fear of making things worse for them. Educators worry that children's extreme behaviours will make things more unsafe for them and compromises their capacity to respond therapeutically.

Increasingly Barnardos Children's Family Centres are identifying kinship carers who are reporting limited support and significant struggles in caring for the children placed in their care (both voluntary and statutory placements).

The Supporting Trauma & Attachment Recovery in Children (STAR-IC) project was developed and implemented in early 2018 in response to the ongoing reform across the Barnardos South Coast Children's Family Centre. It was designed to supplement and strengthen our therapeutic response to the children within our programs who have lived experiences of significant trauma and abuse; more specifically, children who are at imminent risk of assumption into care, currently in a short term foster care placement (Temporary Family Care), or are in a kinship care placement.

The STAR-IC project has a strong theoretical foundation and is multi-pronged, offering direct therapeutic interventions to children and birth families, an additional layer of therapeutic support (and training) to sit alongside casework efforts and targeted support for Foster/Kinship Carers to provide a more therapeutic, trauma informed care response. This is in addition to providing trauma education and additional supports for the services who are providing direct care to the children i.e. the people and services who sit around the child, notably, early childhood services, out of school hours services, and schools.

Barnardos STAR-IC Project will be working with targeted ECCs to deliver training on trauma informed care, responding to trauma-related behaviours, responding to children's questions about being in care, self-care for educators, supporting educators understanding around reasons for or general contexts for children's experiences prior to being placed in care, goal setting and developing strategies for children who have experienced trauma. The project will also be delivering ongoing consultation for ECC Directors.

### **Socio-ecological approaches to supporting child and family wellbeing (2.4 p. 14; Q13-Q14)**

We strongly support the use of a socio-ecological framework to recalibrate the system towards prevention and early intervention.

#### *Integrated service responses*

Evidence shows that an effective child and family system considers the unique needs, preferences and strengths of people and communities, rather than solely using vulnerability as a method for client identification and service planning.

The Barnardos Children's Family Centres are operating a best-practice socio-ecological model to provide a multi-disciplinary child-centred program of support.

Barnardos currently operates nine Children's Family Centres across NSW and the ACT. The Children's Family Centres are:

- placed in key areas of need;
- already responding to the existing system's siloed service delivery in a holistic manner;
- designed to deliver individual child programs that support their family and carer needs;
- funded through multiple individual government grants with varying timelines and expiry dates; and
- demonstrate best practice proof of the NSW Government's Their Futures Matter whole of government framework.

In 2018 the centres supported the individual needs of 14,049 children ranging from newborns to 18 years of age, through the coordination of 178 programs and services centrally managed through individually designed programs for each child.

The Barnardos Children's Family Centre model operates under the following practices:

- *Restoration*: Half of all children taken into the Temporary Family Care (TFC) program with Barnardos are restored to their birth parents or extended family (kin).
- *Shorter duration in care*: The Temporary Family Care (TFC) program has achieved restoration for children and their families within an average timeframe of 8-9 months since 2014, well inside the 2-year temporary care orders stipulated.
- *Placement stability*: Since 1st July 2012, over 75 per cent of the children and young people who have exited the Temporary Family Care (TFC) program experienced only a single placement, with results relatively similar between Aboriginal and non-Aboriginal children and young people.
- *Safety and prevention*: In 2017-18 Barnardos supported 7,567 children and young people (under 18) to remain safely at home with their families through our Children's Family Centres programs.

The model's 'one stop shop' approach is further described below in Part 3. We believe the use of Children's Families Centres should be extended across the State, including the most remote areas through developing an appropriate funding model for the future.

### **Rural and regional areas face specific challenges (2.5 p. 15; Q15-16).**

Barnardos notes that children and families living in rural and remote areas face inferior health and developmental outcomes relative to their urban peers. Geographically isolated

children experience poverty and adversity at disproportionately higher levels, the effects of which are cumulative (Arefadib and Moore, 2017).<sup>5</sup>

We strongly agree that rural and remote areas face specific challenges, and that services in these areas require more staffing and better funding to enable wrap around services to be retained for as long as they are needed by children, young people and families. Building and maintaining an acceptable level of service provision and access is an ongoing responsibility of all governments. We note that:

- greater emphasis should be placed in the Discussion Paper upon the opportunity for technology to overcome some of the challenges of service delivery (e.g. therapeutic service delivery by video conferencing, online tutoring);
- developing financial incentives to live in rural areas would assist with workforce capacity building;
- good training courses are often offered in rural and remote areas, then cancelled because of insufficient bookings. This results in staff either needing to wait to be trained or having to travel to Sydney. Resources are needed so that training can go ahead even with lower numbers of participants than would be considered viable in urban areas; and
- further investment is required to establish and maintain comprehensive, integrated service centres.

### **PART 3: THE SYSTEM ELEMENTS**

#### **Community hubs (3.2 p. 17; Q19-20)**

At Barnardos we believe that:

- well-functioning community hubs are vital, but each community has distinctive needs. Implementation at the local level will require considerable flexibility to achieve appropriate place-based solutions;
- targeted services which can be mobilised quickly, delivered by highly skilled workforces before problems escalate are key;
- targeted services need to focus on reaching children and families who cannot access existing community hubs and thus are not receiving the right resources when they need them;
- collaborative outreach work in a person's life space (that is, assertive engagement in the family home and environment) is the most effective approach to reach difficult-to-engage, socially isolated families living in chronic poverty; and

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<sup>5</sup> Arefadib, N. and Moore, T.G. (2017). *Reporting the Health and Development of Children in Rural and Remote Australia*. The Centre for Community Child Health at the Royal Children's Hospital and the Murdoch Children's Research Institute. Parkville, Victoria.

- the use of existing infrastructure could be extended and access to parenting support increased, by resourcing service providers to deliver parenting programs outside of standard business hours.

### **Multi-agency service coordination (3.3 pp. 21-23; Q21-23)**

We believe that partnership approaches, demonstrating a high-level of case co-ordination between services, genuine buy-in to work co-operatively for shared outcomes and impact, and the determination and skill levels required to work collaboratively need to be an essential feature of the new Access System.

Barnardos has extensive experience in this area, noting its lead agency status for the ACT Together consortium which is solely responsible for the delivery of restoration, out-of-home care, Enduring Parental Responsibility orders (akin to Guardianship orders) and adoption. Under this consortium model, Barnardos works with 3 other service providers to deliver a continuum of care. While preservation services exist outside the consortium, Barnardos has established strong relationships with the service provider.

#### *Network Coordinators*

In our experience funded network co-ordinator positions based in lead agencies is a promising approach. In the ACT, Barnardos employs one of four ACT Network Coordinators who play a critical role in identifying gaps and bringing services together to meet the needs of their local area. The Network Coordinators are not isolated, but regularly come together to develop a co-ordinated plan to ensure seamless service delivery to service users and to also develop linkages that deliver best outcomes. Together they manage the engagement of services with identified service users across the four service networks in the ACT, including building and supporting collaborative practice between service providers and across the broader service system and monitoring and developing strategic responses to improve services and service delivery.

Inclusion within non-government agencies is a noticeable difference to the NSW Government's approach with Permanency Coordinators, which are all FACS employees.

### **A monitoring and outcomes framework (3.6 p. 19; Q29-Q30)**

We note that:

- Some further tightening in the use of consistent and clear language in the Discussion Paper and Evidence Review would be helpful to service providers.
- Training and resources will be required for staff to consistently implement common indicators and measurement of outcomes.
- Guidance will be needed on what constitutes mandatory versus complementary tools and measures.
- Clarity on reporting requirements are not just important for measurement of outcomes; collection (if onerous) may impact heavily on service quality and cause more work for frontline staff.



- Avoiding any unnecessary or duplicated tools/form filling (apart from the essential) wherever possible is better for clients.
- An outcomes frameworks alignment piece should be conducted as there are many intersecting outcomes reporting needs across various FACS-funded project roll-outs – this would smooth implementation for service providers who are operating across different parts of the permanency spectrum and service system and enable benchmarking and consistent data.
- Detailed consideration of the capacity for service providers to integrate tools within existing client management systems and their ability to share outcomes data through Business to Business approaches is a fundamental requirement of any system changes.

### **Aboriginal collaborative partnerships and community-controlled services (3.7 p.20; Q31-Q34)**

#### *An Aboriginal collaborative partnership approach*

Barnardos strongly supports an Aboriginal collaborative partnership approach as a fundamental element of the new Access system. To achieve this, we would welcome increased investment in Aboriginal community-controlled early childhood and child and family support services to deliver targeted care to Aboriginal children.

We note two promising models of evidence-based practice and innovation below:

#### *Example: Tailoring local service delivery strategies for highly disadvantaged Aboriginal families*

Barnardos' experience leads us to believe that a major problem in addressing the developmental vulnerability of children and the risk of maltreatment arising from long-term poverty and social isolation is the poor support available to highly disadvantaged Aboriginal families. We speak from experience working as a non-government agency which aims to care for Australia's most vulnerable children. For the past 12 years, we have increasingly targeted our support towards Aboriginal parents to assist them in caring for their children, and also towards supporting kin carers and helping Aboriginal agencies assist children who cannot live at home.

To get services to highly disadvantaged Aboriginal families Barnardos has had to tailor its direct service delivery strategies. As outlined in Part 2 above, we offer direct services in NSW and ACT in rural and urban areas through Children's Family Centres and rural networks of services. We have organised our services into local Children's Family Centres which are 'one stop shops' and rural networks which can integrate State and Federal government programs in local areas (see Attachment A, Case Study 1). It is only through the integration of early intervention family support (largely a Federal responsibility) and more intense help to families (a State or Territory responsibility) that the most vulnerable families in the community can be targeted and assisted. These Centres are managed in an integrated way so that Aboriginal families have one point of relationship with a centre.

Our Children's Family Centres have managed to overcome potential service users' reluctance to participate in our programs by developing strong local relationships

with the Aboriginal community (as documented in Newton's 2016 study). We have found that many Aboriginal families are open to seeking help and more than willing to access services when they are offered in a culturally respectful way. Our family support services are at capacity. Our Learning Centres have waiting lists of children wanting to improve their engagement with mainstream schools (see Attachment A, Case Study 2).

Furthermore, our experience is that child welfare programs linked to education and health information work best when delivered in a holistic way which can address the range of issues facing a family. For example, families are more willing to engage with prevention services and accept assistance from family support workers when the concrete needs of family members such as helping with food, violence prevention and relationship problems, are being addressed

We note that Children's Family Centres work best when they are delivered by well-supported Aboriginal workers. We have increased the number of Aboriginal staff working in family support programs in our Children's Family Centres so that currently 14% of our family support staff are Aboriginal.<sup>6</sup>

*Example: Using relational empowerment to improve the social and emotional wellbeing of Aboriginal mothers leaving jail*

As a group, Aboriginal women have the fastest growing incarceration rates in Australia (WRI, 2018).<sup>7</sup> Most Aboriginal women offenders are the primary carers for their children at home. When they are incarcerated, the children either go in to statutory care or voluntary family care. This perpetuates the multi-generational impact of systemic disadvantage and inequality on the lives of their children (Weatherburn, 2014).<sup>8</sup> Grief, loss and social isolation are major barriers for these women, as they seek to gain control over their circumstances and break the cycle of historical oppression and disadvantage.

Barnardos' Beyond Barbed Wire program aims to improve a range of outcomes, including social and emotional wellbeing for women with children in contact with the criminal justice system. The model aims to reduce rates of re-offending and re-entry into correctional centres, to support mothers to build parenting skills, to provide information and supported referrals to community services on their release, to help them maintain connections with their children, to prevent removal of further children, and to facilitate restoration of their children back into their care. It is made up of a suite of programs and services, including evidence-informed parenting skills and knowledge, practical skills, training and work experience, short term accommodation, referral to a casework service and matching with a volunteer mentor for up to two years.

An independent evaluation by the Western Research Institute indicates that for every dollar spent there is a return on investment of **\$2.15** to the community. The evaluation demonstrates effective approaches of 'what works' to achieving positive

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<sup>6</sup> Barnardos Australia (2019). *Annual Review 2017-18*. Barnardos Australia. Sydney, p. 15.

<sup>7</sup> Western Research Institute (2018). *Barnardos Beyond Barbed Wire WRI Evaluation Report*. WRI. Bathurst

<sup>8</sup> Weatherburn, D. (2014). *Arresting incarceration: Pathways out of Indigenous imprisonment*. Aboriginal Studies Press.

outcomes for the health, wellbeing and safety of Aboriginal women and their children, and to improving intergenerational outcomes relating to justice and closing the gap on incarceration rates of Aboriginal people (see Attachment A, Case Studies 3 and 4).

Based on our experience of what's working, ways of strengthening the current system would therefore include:

- develop secondary support services for vulnerable families in local communities which link State child welfare preventative programs with Federal early intervention and local Aboriginal welfare workers and families;
- invest in the local Children's Family Centres approach to provide 'on the ground' integration of services which can work closely with local Aboriginal priorities for families suffering chronic poverty, isolation and violence;
- invest in extension of the Beyond Barbed Wire program to other sites to assist mothers with children in statutory care with case work supports to keep their children in their care once born;
- fund Aboriginal Learning Centres linked to family support programs in every community with poor educational outcomes; and
- allocate 'top-up' funding to employ and support Aboriginal welfare workers within non-government welfare agencies. Such funding would allow for skill development especially in the areas of literacy, computerisation and governance in these non-government organisations.

### **Awareness and capability development (3.8 p. 21; Q35-Q36)**

#### *Community capacity building*

We note that a promising but currently underutilised approach is funding for programs focused on community development in public housing and areas of high socio-economic disadvantage. Public investment in these programs has declined in recent years, yet they remain highly relevant to the needs of the local communities we serve.

### **PART 4: SYSTEM-WIDE ENABLERS (p. 22; Q37-Q38)**

We note that:

- Existing funding streams and contracting models tend to promote competition rather than collaborative practice (Mason, 2018).<sup>9</sup>
- The ability of registered charities, such as Barnardos, to generate revenue from philanthropic, corporate and community sources, to enhance funding available to

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<sup>9</sup> See for example: Mason, J. (2018). *Commissioning for outcomes in NSW – an NGO perspective. Discussion paper*. ACWA. Sydney, Table 2, p. 6. Nearly half (45%) of the study's NGO interviewees, when asked about their existing contract administration arrangements, reported that competition for funds made it hard to be collaborate.

support vulnerable children and families. For the latter non-government funding sources collaborative partnership models are generally preferred.

*Prioritising reduction of poverty and ease of access to universal systems*

In addition to the design features identified in Part 4, Barnardos believes broader societal change plays an indispensable role as a broader system enabler for protecting children and ameliorating the impact of intergenerational disadvantage and deprivation. The model should set the new Access system within a broad socio-economic context where reduction of poverty and ease of access to universal systems are prioritised. Such broader system enablers include:

- Strong broad-based and well-funded universal health services (including mental health, child and maternal health, and dental health).
- Funding for universal preschool access to support school readiness for three- and four-year-old children, by ensuring all children have access to a quality preschool program at least 2-3 days per week.
- The provision of accessible and affordable quality early childhood education targeted to families where children are known to be at-risk of deprivation (those living with disability, those living in monetary poverty, and those living in jobless families) (Sollis, 2019).<sup>10</sup>
- Investment in Aboriginal and Torres Strait Islander community-controlled early childhood and child and family support services to deliver targeted care to Aboriginal and Torres Strait Islander children.
- Increased assistance to low-income families including increases to Newstart and the review of the adequacy of family support payments (Sollis, 2019).

## **FUTURE COLLABORATION WITH THEIR FUTURES MATTER**

We congratulate Their Futures Matter on the new vision for the Access system and the reform directions outlined in the Discussion Paper. Barnardos is strongly committed and has a significant history and depth of expertise in implementing best practice socio-ecological approaches. We look forward to continuing to contribute our knowledge of implementing successful models, innovations and practices to the collaborative consultation process that has begun with the release of the Discussion Paper.

Barnardos would welcome the opportunity to discuss any aspect of its submission with Their Futures Matter. On request we are able to provide salient case studies and data from our case records and administrative records and/or organise onsite visits and briefings. Further, we are keenly interested in assisting Their Futures Matter with testing and refining proposed solutions on the ground to build on what's working and address the limitations of the current system.

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<sup>10</sup> Sollis, K. (2019). *Measuring Child Deprivation and Opportunity in Australia: Applying the Nest framework to develop a measure of deprivation and opportunity for children using the Longitudinal Study of Australian Children*. ARACY. Canberra, ACT.

## Attachment A<sup>11</sup>

### **Four case studies: How we connect children, young people and families to the right support at the right time**

#### **Case Study 1**

Case Study 1 demonstrates the outcomes that can be achieved by providing a ‘one-stop shop’ service to facilitate wrap around support services to a family who are dependent on welfare due to the father’s mental health and physical disability. The father was at risk of his children being removed due to neglect before the Family Referral Service (FRS) became involved:

*Family with neglect concerns – FRS in Schools Program, Sydney Metropolitan*

*A family was referred to the FRS in Schools Project through the Learning and Support Team of a participating secondary school. The family comprised a single dad with both a mental illness and a physical disability, and 2 boys, 14 and 15 years old.*

*The referral was made due to concerns of neglect as the boys were presenting to school in dirty clothes and without food, which was deteriorating over time. The school had attempted to contact the father with no success. After numerous phone calls from the FRS worker the father agreed to meet with the FRS worker at school. After three face-to-face meetings the FRS worker was invited into his home. On arrival at the home it was identified that the father was unable to meet the boys’ basic needs around provision of food, hygiene, and appropriate and safe housing. FRS referred the family to a service that offers in-home help such as cleaning, food preparation and washing. When they arrived at the home they deemed the home too unsafe for their workers to enter due to a severe cockroach infestation and general lack of hygiene. At the same time a local charity organisation were engaged to carry out a furniture assessment, however, would also not enter the house due to the unsafe environment.*

*FRS organised and provided brokerage for pest control, industrial cleaning and the removal of all household items infested with cockroaches including beds, mattresses and lounges. FACS replaced the carpet which was riddled with cockroaches and was stained and ripped. After the cockroaches were eradicated the family was referred to a case management service for support, the charity refurbished the house and the household management service agreed to work with the family around household functioning. Due to the care the sons provided to their father, the FRS worker registered them as young carers for further support. The family is now closed with ongoing case management to support them long term.*

#### **Case Study 2**

Case study 2 evidences the value of providing a range of specialist support services to Aboriginal children and their parents who live in social housing and have been exposed to issues such as substance abuse and family breakdown or violence. These children have often had limited access to reading materials and other stimulus at home which results in them being behind in their development even before they start school.

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<sup>11</sup> All names are pseudonyms

The Yurungai Learning Centre delivers a range of after-school services to 30 Aboriginal children aged 5-12 years old. The program provides a safe and secure after-school environment for the students and plays a crucial community role, not only by strengthening relationships between parents/carers, students and teachers in the area, but by also providing a hub for a range of social services.

*Young girl at risk of school disengagement, Yurungai Learning Centre, Waterloo*

*Ella is an eleven-year-old girl who has one younger sister, three older sisters and two older brothers. Ella was facing some difficult times living with her mum, dad, younger sister and older sister.*

*Mum was using drugs, and mum and dad were arguing on a regular basis, sometimes leaving Ella and Jackie (aged 13) at home to look after themselves for quite some time. Ella became very withdrawn and started ignoring her school work, was not listening in class and not completing her homework.*

*Ella was falling behind in everything and she was not motivated to achieve at school. Her older sister Jackie who she relied on heavily started running away.*

*Both Ella and Jackie went into the care of her Aunty. Ella started a new school and then was enrolled into Yurungai Learning Centre to help her with her homework to get her back on track.*

*Since attending Yurungai Ella has got her enthusiasm for life back, she gets excited to spend her afternoons there as she has made real friends. Also, getting help with her homework means she doesn't feel left behind and hopeless.*

*Yurungai has worked with Ella and her Aunty to enrol her in the local Indigenous choir one afternoon a week. Ella is also in the school choir and Ella runs into the centre every afternoon with a "massive" smile across her face.*

*Ella's self-esteem and confidence have risen dramatically and she hasn't held back on wanting to be a part of anything that she puts her mind to.*

*Yurungai is not just a homework centre, it becomes a safe place for the families to talk about personal issues they may be facing at home and they know the staff will do their very best to help them with whatever the problem is or they will guide the families to the appropriate services that can help.*

*Yurungai has helped Ella get into boarding school for the following year and helped Ella's sister Jackie obtain a scholarship for a boarding school.*

*Yurungai treats every child as if they are family and that's what Ella and her Aunty felt when they received all the support they needed.*

### **Case Study 3**

Case study 3 evidence the family preservation outcomes achieved by the Beyond Barbed Wire by Community Offender Services program.

*Socially isolated Aboriginal family with complex needs, Beyond Barbed Wire, Western NSW*

*Stacey is a 31 year old mother of seven children; Crystal (13), Taleah (12), Matty (9), Summa (8), Angel (2) and newborn twins; Tyrone and Jai. The four eldest children have resided with Stacey's mother in Western NSW since 2012, under the jurisdiction of the Family Law Court due to concerns around Stacey's parenting capacity and substance use. Stacey is estranged from her mother and her step father, and has no contact with her four eldest children. Stacey's youngest daughter Angel is in statutory care, and is placed with foster carers. Stacey has orders for monthly contact with Angel. However, attending regular contact visits has been hampered due to Stacey's homelessness, lack of transport and pregnancy. Stacey has no support from family or the fathers of her children.*

*Stacey also has a history of early trauma, including family violence, sexual abuse, parental drug and alcohol use and neglect. Stacey has stated she uses 'ice' to help her to 'not feel' and to cope with the strong emotions surrounding the abuse. In 2018, Stacey fell pregnant with twins. Stacey was unsupported throughout her pregnancy, as the father of the twins was taken into custody. Due to Stacey's history of substance use and the care orders for Stacey's other children, Family and Community Services became involved with the pregnancy.*

*Stacey was referred to Beyond Barbed Wire by Community Offender Services, when she was placed on an intensive order in November 2018 for an assault charge. Stacey had been involved in an altercation, in which another woman sustained injuries. Stacey has an extensive history of involvement with the criminal justice system, and has served three prior custodial sentences for drug related driving offences, larceny and assaults.*

*Stacey was assessed and matched with a Beyond Barbed Wire case worker and a mentor. Not only did Stacey need a mentor to support her social wellbeing and connection to community, Stacey also needed the support of a case worker to ensure the family did not face further trauma which would inevitably result in the babies going into care. With assistance from Beyond Barbed Wire, suitable accommodation was secured in a Beyond Barbed Wire short stay property, and supported referrals were made to the Substance Use in Pregnancy Program and the Aboriginal Families Nurse Practitioner Program. Beyond Barbed Wire staff also provided advocacy around the family care plan; working closely with FaCS and attending case conferencing to support Stacey in being able to safely bring her babies home.*

*Stacey's twins Tyrone and Jai, arrived on 28/12/2018, weighing in at a healthy 2676 and 2314 gm respectively. On 8/1/2019, following a safety assessment by FaCS, Beyond Barbed Wire case workers provided transport for Stacey to bring her babies to their new home in Western NSW. Further supported referrals were made to local community midwifery services, Brighter Futures and Safecare programs. Stacey told Beyond Barbed Wire case workers, 'I didn't have this kind of support when I had the other kids. Things could've been so different if I did. I can't thank Barnardos enough for making it possible for me to have my boys'*

## Case Study 4

Case study 4 demonstrates the effectiveness of relational empowerment through mentoring for high-risk families.

*Family with mother leaving jail, Beyond Barbed Wire, Western NSW.*

*Mandy is a 40-year-old mother of four children; David 19, Crystal 17, Tommy 16 and Allira, who is 14. Mandy was referred to the Beyond Barbed Wire Mentoring program by Corrective Services when she entered custody in May 2017. She had been involved in a single vehicle accident, in which a pedestrian sustained significant injuries. Mandy had never been in trouble with the Police prior to the accident and was relieved when she was granted conditional bail shortly after her arrest at the scene of the accident. For the next six months, Mandy maintained her normal family routine; caring for her disabled partner, Ben and her children. Mandy and her family were shell shocked when the Court imposed a prison sentence.*

*Mandy was assessed and matched with a mentor. Not only did Mandy need a mentor to support her while in custody, her family also needed support to ensure they did not face further crisis. Due to Ben's disabilities, he was unable to cope with daily chores and household routines. Crystal, Tommy and Allira found it difficult to get to school each day as they took on new roles as carer for their father and ensuring the housekeeping, cooking and washing were done. Finances were also an issue for the family, as Mandy had always ensured the family's commitments were met. With assistance from Beyond Barbed Wire, supported referrals were made to local disability support services to assist the family, as well as Reconnect Youth services to help the children remain engaged with school and other activities in the community. Beyond Barbed Wire were also able to support the family with transport to attend visits at the jail.*

*While Mandy was in custody, she participated in parenting programs, including Mothering at a Distance and Out of the Dark. Mandy also completed her Certificate II in Business Administration. Mandy said her mentor supported her with her studies, sending in relevant articles and learning materials with each letter. 'Having Lyn to talk to about my family and my studies made a big difference for me. I knew I wasn't alone.'*

*When Mandy was released on parole in October 2018, her husband and children had spent the previous day making sure the house was up to standard. Ben said, 'I'm sure Mandy was expecting to find us with the house falling down around our ears, but we did a pretty good job to keep it together!'*

*Mandy and Lyn continued to write to each other when she was released, and in November 2018, they met each other face to face for the first time. 'We just clicked straight away', said Lyn. 'It was like two old friends catching up after not seeing each other for a while.'*