

27 August 2020

The Hon, Gareth Ward, MP 52 Martin Place SYDNEY NSW 2000

Dear Minister,

### Re: Ongoing funding for Family Preservation and support programs

I am writing to you regarding the currently precarious situation regarding the ongoing funding of intensive family preservation and support programs.

I am aware of your strong commitment to ensuring the availability of effective programs of this type which are aimed at keeping families together and preventing children and young people from entering out-of-home care. As you know, the COVID-19 pandemic has significantly impacted already very vulnerable families, many of whom are likely to have endured far greater distress had it not been for the support provided by family preservation and similarly targeted programs.

It is against this background, that I'm bringing to your attention the significant concerns of my member agencies about the funding uncertainty in relation to these programs.

By way of background, on 15 July this year the Department of Communities and Justice (DCJ) wrote to providers to clarify the arrangements for extending family preservation programs. This letter highlighted previous advice to providers by DCJ on 20 March about the intention to extend their contracts, subject to final confirmation of funding availability through the 2020-21 NSW Government budget process. However, the impact of the COVID-19 pandemic has meant that the 2020-21 NSW budget process was deferred from June until October this year. As a result, DCJ indicated that it would not have a final 2020-21 budget until the budget process is completed later this year.

As you know, in June 2020 the Attorney-General endorsed an extension of a range of programs for a period of six months to 31 December 2020. The Department noted that all funded providers had only been given short-term funding extensions, and that this was not a reflection on each organisation's capacity, performance or client outcomes. However, this decision has effectively put member agencies in an invidious position due to the very limited period of guaranteed funding.

Apart from the obvious impact on providers' 2021 budgets, this decision has adversely affected providers in a number of ways. In this regard, providers have contacted me to express their significant concerns in relation to issues such as:

Increased client anxiety – on the back of COVID-19 restrictions, young people particularly are experiencing increased levels of anxiety, isolation and family violence and caseworkers are now only able to provide them with four months of guaranteed care and support.



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- Staff retention and recruitment issues providers have already lost quality staff due to lack of job security; while other providers are attempting to build high quality teams but are struggling to recruit good applicants due to the very limited period of funding.
- Staff morale providers are seeing increased anxiety among their staff as
  uncertainty about how they will continue to support their clients increases,
  especially when they are accepting new referrals into what was supposed to be a
  12-month program. There is deep concern and anxiety among committed staff,
  regarding what will happen to these families if the program is not funded beyond
  December. These concerns are compounding existing stress among staff
  resulting from the impact of COVID-19.
- Unmanageable workload with staff leaving agencies and new referrals still
  coming in, providers are reporting that staff are becoming increasingly
  overwhelmed as they seek to juggle larger caseloads and take on extra duties.
- Best practice service provision providers are concerned about fulfilling their contractual obligations given the staff retention and recruitment issues that they're currently facing.

Providers have also shared with us numerous case studies demonstrating the practical value of family preservation programs as they work with families to:

- identify and acknowledge underlying trauma
- develop and maintain essential life and parenting skills
- access suitable housing, financial assistance and appropriate support services
- overcome addiction and substance abuse problems
- access appropriate psychiatric assessment and treatment
- enrol their children in school and access supports for their educational needs, and
- identify and maintain support networks from within their existing circle of positive connections.

I've included several case examples below to illustrate the damage that will occur if ongoing supports to vulnerable families isn't guaranteed.

# Case Study 1: An Aboriginal family whose children have significant learning difficulties

After decades of living in unstable accommodation, and facing challenges such as unemployment, substance abuse and domestic violence, the parents received specialist therapeutic support through IFP to explore their own trauma history, recognise their 'trigger points' and to "'Notice', 'Name,' and 'Neutralise' their emotions without becoming their emotions." A skilled therapist guided the family through an exploration of their values which revealed they wanted to be more connected to culture and nature. During therapy they talked of valuing loyalty, respect, commitment, love and their desire to nurture their children. Helping the parents to develop a profound connection to these values formed the foundation for behavioural change within the whole family. The family's therapist also supported the family in meetings with the children's school and other critical services. After a previous history of unproductive engagement with a range of government services, this family is now living without intervention from services other than the NDIS, and there have been no further ROSH reports in the 12 months since they completed the IFP program.

### Case Study 2: Supporting the restoration of children to their mother

A family with a single mother in her 30s and two daughters, aged 5 and 9, entered an IFP program when the children were restored to their mum. Prior to the restoration, the children had spent time in temporary foster care following an incident in which they had been found wandering alone in a theme park while their mum was sleeping off the effects of drugs and alcohol. In fact, the family had an extensive history with the Department, including domestic violence and possible sexual harm perpetrated towards the girls by their father, a known sex offender. Initial exploration of the mother's childhood revealed that she had been adopted by her grandparents; had a significant history of family violence and sexual abuse; had been detained in Juvenile Justice Centre for two years from age 12; and had given birth to a child (who was given up for adoption) at age 16. Drug addiction and prostitution followed, as well as jail time for involvement in a serious offence. While incarcerated, she was diagnosed with ADHD. She also suffered anxiety and panic attacks, 'flashbacks' and insomnia, and had no idea how to cook, clean, play with her children or be a parent. The IFP helped this mum develop her parenting skills, including teaching her to cook, clean the home, setting routines, manage her children's behaviour and engage emotionally with them. Additionally, she was supported to access a psychiatric assessment and related treatment – this resulted in a diagnosis of PTSD. She was also assisted to reconnect with positive people from her past to create a support network for the family. Her daughters were supported to access sporting activities and enrol in school with learning plans developed to address their additional needs. This family is now doing well, with both girls thriving in school and mum receiving ongoing support for her PTSD. They continue to access services provided by the NGO.

## Case Study 3: Helping a father to create a safe home for his daughter

A young father and daughter were referred to the IFP because of ongoing child protection concerns, including drug use, homelessness (transience), neglect and family violence. The father was allocated a male IFP caseworker who was able to quickly build a rapport with him. IFP used its strong working relationship with a housing provider to have the family quickly housed in stable, social housing. The caseworker supported the father through the court process to finalise an AVO protecting him and his daughter from extended family members. The father received DV education and a safety plan to safeguard him and his daughter against further violence. He remained clean throughout the program and worked hard with his caseworker on drug relapse prevention. The daughter started pre-school to build on her social and emotional development. After completing the IFP program, this father was able to continue to develop his parenting skills with community support.

#### Case Study 4: Creating a network of supports for a family

A mum and dad entered the IFP with a clear need for support to develop parenting skills and build connections with a range of services to help them on the right path. The caseworker engaged with both sets of grandparents, as well as other family members, to provide 'in- home' supports to help minimise the parents' stress. Mum and dad received education on communication and conflict resolution strategies, which has had a positive impact on their communications with each other. The caseworker also engaged the children through conversation and play to identify their needs and crucially, spent time observing and monitoring the family's progress. Mum

also received training, support and guidance across a range of topics that were aimed at helping her to build a positive attachment with her children and a safe and nurturing environment. Considerable work was undertaken to identify the right mental health services for mum, including advocating via her GP to access a psychiatrist – this led to her receiving a mental health diagnosis and cognitive behavioural therapy paid for by an ongoing bulk-billing arrangement. Mum was also connected to outpatient services to deal with her substance abuse problems and was supported to engage with antenatal services. Assistance was provided to help the family apply for long term, affordable housing with a priority housing application granted. The family was able to move into new stable accommodation and were helped with their relocation, including to furnish their new home. The caseworker also obtained financial support with bills and emergency relief from a charity and arranged financial counselling and budget assistance. Prior to their engagement with the IFP, the family had a substantial child protection history spanning a number of years, but the Department has now been able to discontinue its involvement with the family because they now possess the necessary tools to improve their parenting independently, and access services in the future if required.

In light of the obvious practical benefits delivered by family preservation and support programs, ACWA is seeking your strong support for the Government to guarantee ongoing funding for these programs. For the reasons outlined, we would ask that you communicate to Government the urgent need for early advice along these lines.

I appreciate your consideration of this critical issue facing vulnerable children and families in NSW and look forward to receiving your early response.

Yours sincerely

Steve Kinmond OAM

**ACWA CEO**