



Targeting 'At Risk' Families

An evaluation of the Brimbank Family Outreach Service

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The National Child Protection Clearing House has always been a strong proponent of the view that child abuse prevention programs require effective evaluation. Although in recent years there has been a greater recognition of the need to evaluate programs adequately, with more professionals attempting to implement program evaluations with some degree of methodological rigour, still relatively little is known about the effectiveness of current child abuse prevention initiatives. In part, this is due to the difficulties in applying experimental rigour to the realities of providing services to families.

The following evaluation, conducted by the Australian Institute of Family Studies and Burgell Consulting on behalf of the Brimbank Community Health Service¹, is an attempt to evaluate a secondary prevention program taking into account the complexities of real-life family support work and its effect on the evaluation process.

In a previous article in this newsletter it was argued that throughout Australia and across the western world, statutory child protection services were struggling to cope with ever-increasing numbers of reports of suspected child maltreatment, and that a substantial proportion of these reports were being inappropriately labelled as allegations of child maltreatment by those who refer cases to child protection services (Tomison 1996).

Often such cases involve families who are not maltreating their child but have more general problems, such as financial or housing difficulties, an incapacitated caregiver, or serious stress problems. Such cases may need assistance but do not require statutory child protection intervention. Their labelling as cases of child abuse or neglect further taxes generally limited child protection resources (Clark 1995; Little 1995; Tomison 1996). In Australia, government departments have responded to this situation by developing new, differentiated responses to allegations of child maltreatment by child protection services in conjunction with the implementation of various child abuse prevention programs. The aim of the latter is to provide support to families prior to them developing serious problems which require the use of secondary or tertiary prevention resources.

This article presents an overview of the findings of the evaluation of one such secondary prevention program – the Brimbank Family Outreach Service – conducted by the Australian Institute of Family Studies in partnership with Burgell Consulting (Tomison, Burgell & Burgell 1998).² The Service was



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developed as a twelve-month pilot project located in the City of Brimbank in the western metropolitan region of Melbourne, under the auspices of the Brimbank Community Health Service.

It was designed to provide support and advice to the 'at risk' families who were not currently identified as abusive, and to ameliorate their problems in order to prevent their becoming child protection clients and the need for the provision of significant family support resources. The model

used by the Service is currently being implemented or 'mainstreamed' across Victoria as the Strengthening Families initiative.

Brimbank Family Outreach Service

As a primary care agency, Brimbank Family Outreach Service (the Service) was to assess child and family needs, develop a case plan, ensure appropriate services were put in place to address the family's needs, and, where possible, deflect people from the secondary and tertiary service sectors through early identification, early intervention and timely treatment. Alternatively, it was to ensure that the appropriate secondary and tertiary services were supplied when they were needed to a maximum result at minimum cost, and that the families were provided with professional follow-up after disengagement of the Service. In order to engage effectively with families and to work collaboratively with the family and other agencies, case practice was centred on child-centred family-focused practice³ and effective inter-agency coordination, collaboration and communication.

The roles of the Service included:

- providing families with information on local community services; linking families to appropriate services;
- undertaking family assessments;
- notifying Protective Services (Department of Human Services) upon assessing a child to be at risk of significant harm;

- providing case management to families;
- liaising with other service-providers in the community;
- administering a flexifund to purchase services and provide material aid;
- maintaining statistics on issues, services needed and their availability, waiting lists, and gaps in the primary care service system;
- establishing and maintaining strong links with Protective Services.

A cornerstone of the role was to be active in approaching families in the role of 'friendly visitor' in order to engage with families and to assist them to resolve or ameliorate the issues or problems that were affecting their health and wellbeing.

Client Profile

The City of Brimbank is a culturally diverse local government area located in the outer northwest of the Melbourne metropolitan area. Socio-demographic profiles have indicated that Brimbank and the western metropolitan region have generally higher rates of a number of social problems, and poorer standards of health and wellbeing, than the Melbourne metropolitan area and the state of Victoria as a whole.

The target population included those children and their families from the City of Brimbank for whom there were identified concerns in relation to family functioning, parental discipline practices, child-rearing practices, and poverty and/or environmental neglect, rather than actual harm or abuse of the children. Referrals were accepted from families, service providers, protective workers and the community at large in situations where there were concerns about family functioning. The families of children for whom maltreatment had been substantiated in the context of a current notification to Protective Services, or who were currently subject to a protection order (that is, tertiary clients), were excluded.

In the twelve months in which the Service was in operation, 157 families were referred for assessment and case-planning. Referrals came predominantly from Protective Services, Brimbank Community Health Service, the education system, or from families who self-referred. As part of their various case management roles, staff from the Service referred families on to a wide range of practical and therapeutic services. These 157 families formed the population of cases from which this evaluation has drawn data

on the Brimbank Family Outreach Service case management process.

The Research

The major design features of the evaluation were:

- the development of a preferred case management approach (undertaken by Burgell Consulting), based on the results of focus groups with local workers and a survey-based assessment of the local service resources and case management practice;
- a three-month case tracking study (undertaken by the Institute) centred on the Service, where a sample of cases were tracked from the Service to a number of other services that had been identified previously as playing a significant role in the management of Brimbank Family Outreach Service cases;
- a client feedback survey (undertaken by the Institute) designed to tap client families' perceptions of their experiences of the Service during the tracking period. This was distributed by workers at the Service during the case-tracking period to those families where there had been an ongoing involvement (that is, more than one visit).

The direct evaluation of the role of the Brimbank Family Outreach Service was based on the collection of the perceptions of workers from the Service and other agencies, and some of the families that the Service attempted to assist. The family feedback and case-tracking components of the evaluation developed much of this data.

Family Feedback

Staff from the Service distributed approximately thirty family feedback questionnaires to those families visited more than once whose case was still open at the that time. Overall, fourteen questionnaires were returned; such a small sample did not allow the authors to make claims about how well the results could be generalised. However, the feedback that was provided was consistently very positive, with the majority of families rating the Service very positively across a number of dimensions. These included the clarity of explanation provided by the Service about why it had contacted the family and the role it could play; the degree families felt listened to and were able to talk about their issues; the level of respect and honesty the workers employed when working with the families. The family feedback also provided evidence that the Service had

adhered to the principles of child-centred family-focused case practice, involving families in a partnership to resolve, or ameliorate, their issues or concerns.

Case Tracking

The case-tracking study was an attempt to capture the experience of the Brimbank Family Outreach Service via a sample of approximately fifty cases, with each case providing the perspectives of staff from the Service and at least one other professional who was involved with the case.

Overall, 100 questionnaires or structured interviews were collected from the staff of the Brimbank Family Outreach Service and the other agencies who participated in the case tracking. The cases that constitute the sample were collected on the basis that at least one of the agencies participating in the case tracking had had some form of professional contact with the family for which a worker involved with the case subsequently completed a tracking questionnaire outlining their case management experience.

It was clear that the Service had more than adequately fulfilled the tasks of case coordination and planning, and of developing solutions for 'at risk' families in a manner perceived by workers from other agencies and the families themselves as being very effective. Agencies reported that much of their contact with the Service was for the purposes of information exchange and professional consultation, to involve workers from the Service in a joint home visit, or as a result of accepting a referral from the Service and subsequently becoming involved in aspects of the management of a case.

The Service was perceived by other workers as:

- *Positively affecting information exchange.* The Service had greater knowledge of the family and the family's situation and needs. This was achieved as a consequence of its holistic and child-centred family-focused approach, the strength of the relationship developed with families, and the comprehensive assessments that the service was subsequently able to complete. In addition, the staff of the Service had an excellent understanding of the workings of the wider professional system – an understanding they were able to pass on to colleague agencies.
- *Enhancing inter-agency communication and collaboration.* The Service was the hub of a network of agencies and services planning and

coordinating a network-wide response to families.

- *Providing an effective, flexible approach to family support.* Families were reported to have benefited from the involvement of the Service because of the better engagement and rapport that was established, which in turn led to greater family cooperation and a better case outcome, and the case coordination and planning done by the Service (which enhanced family functioning).

Overall, it was apparent from the findings that have emerged from the case-tracking and family feedback components of this evaluation that the Brimbank Family Outreach Service model performed very well. Colleague agencies in the Brimbank service network perceived the Service to be a valuable resource that enhanced both their work with families and the outcomes for the families themselves.

Inter-agency Coordination and Collaboration

Using the results of the focus groups and the analysis of the wider service network (carried out via the survey of the local service resources and case management practice), a number of conclusions about the relationship between the Brimbank Family Outreach Service and the wider service network were reached.

First, it was concluded that the development and application of uniform inter-agency intake and assessment measures for use by the various health, education and counselling services who together constituted the local service network would enhance the implementation of service models like the Service across both the statutory and non-government sections of the local service network. Specifically, the use of a common format for documenting intake, referral and assessment information for all cases falling within the ambit of the Service's objectives would improve inter-agency communication and collaboration. Such a common format could supplement, and be integrated with, existing procedures in agencies.

Second, based on the feedback obtained in the case-tracking and focus group studies, it was apparent that the Service was able to strengthen the collaborative linkages between relevant statutory and non-government services in Brimbank in order to address the risk to children and families of significant harm of child abuse or neglect. This function occurred in conjunction with direct service provision and case-planning activities.

These findings were used to form the basis for the development of the inter-agency Case Management Framework by Burgell Consulting. This was designed, in part, as a measure to assist the Service or similar agencies to exercise a bridging role between statutory government services and non-government agency networks. This framework was compatible with existing agency practice formats, acting as a supplement to established agency procedures and practices. It would provide an informed guide for colleague agencies when participating in cases requiring inter-agency case management.

Case Management Framework

The Case Management Framework, derived from consultation with representatives from the Service and other colleague agencies, was intended to form the basis for the statewide implementation of the Brimbank Family Outreach Service model as the Strengthening Families program. The framework incorporates a definition of case management and a statement of the principles and values underlying the framework.

Inter-agency work is divided into two distinct phases: first contact/intake/referral, where an emphasis is placed on working in collaboration or partnership with the client or family as part of child-centred family-focused practice; and implementation of the plan, which includes the development and management of the case plan; identification of cases that will involve ongoing case management and the involvement of professionals for this; and, finally, the evaluation of case planning and service provision.

The framework describes a number of protocols and work practices that would enhance inter-agency collaboration.

Inter-agency communication

In order to enhance inter-agency communication, and the support and advice that agencies in a service network can provide to each other, uniform procedures and protocols are required. These should include provision for agencies to be able to share case information with colleague agencies that are also involved with the same client families – subject to the development of confidentiality and information-sharing protocols, and undertaken after permission has been sought from the family. Formal referral protocols are also recommended in order to ensure that inter-agency referrals are made effectively in cases where there are child abuse

and associated family violence concerns.

Cross-cultural practice

The multicultural nature of the Brimbank community required that the Case Management Framework reflect a cross-cultural approach to assessment and service intervention, including an understanding of the role of culturally specific factors in determining child abuse, the risk of abuse and the appropriate intervention. It was recommended that the response to non-English-speaking families by the Brimbank Family Outreach Service and the wider system could be improved. One method identified was to enhance community development outreach to local ethnic organisations and to train people in these organisations in order to build their capacities to support non-English-speaking 'at risk' families and children.

Risk assessment

Active monitoring and regular review of child safety and an assessment of the risk of child abuse should occur throughout all stages of the case management process. Burgell Consulting concluded that the agencies and practitioners who constitute the Brimbank service network required access to common risk and needs assessment guidelines. Such tools may enhance intra-agency and inter-agency observations, judgements, actions and record-keeping in cases involving child abuse and associated family problems. The tools should be readily integrated into primary service activities and the day-to-day responsibilities of all agencies and practitioners.

Two other specific implementation issues were also identified. First, the considerable time and resource demands placed on colleague services in order to engage in the inter-agency collaboration and teamwork inherent in the Brimbank Family Outreach Service model was not recognised in existing program funding arrangements. Moreover, the outcome-based targets associated with program funding for a number of the colleague agencies would need to be adjusted to embrace objectives connected to the service model.

Second, the non-government agencies involved in the focus groups consistently raised compulsory competitive tendering as a barrier to collective agency involvement in the Brimbank Family Outreach Service concept. Practitioners and agencies believed that the competitive aspects of service tendering detracted from collaboration among agencies on day-to-day case management and service planning.

Recommendations

A series of recommendations were made in the context of the Service being implemented as the Strengthening Families initiative. These included:

- that there be further development and application of the Case Management Framework to the Strengthening Families programs;
- that the Department of Human Services work to effect inter-agency communication and collaboration, and ensure the goals of the Strengthening Families program are validated in the outcome objectives of other relevant programs supported by the Department.
- that there be adoption of standardised assessment forms and data storage procedures across agencies (in spite of the obvious benefits derived from the Brimbank Family Outreach Service model and their information-sharing role, the accuracy of inter-agency communication and referrals within the local service network needed improvement);
- that the Department of Human Services ensure that the Strengthening Families program has the capability to address the needs of culturally diverse families;
- that inter-agency communication between the Brimbank Family Outreach Service (or successor agencies) and Protective Services (Department of Human Services) needs to be maintained at a very high level in order to ensure that the inter-agency relationship and case management practices remain attuned and to ensure that an

excellent level of communication and coordination is maintained. Regular meetings, case forums and joint training were seen as the cornerstones for maintaining high standards of inter-agency work;

- that agencies fulfilling the Brimbank Family Outreach Service model of service delivery should be allocated adequate funding to allow them to purchase services for clients who may otherwise not receive the support they require. The allocation of funding should take into account the current trend towards a user-pays system of service delivery;
- that as this evaluation was not able to determine the outcomes for the client families over time, Protective Services (Department of Human Services) attempt to determine the proportion of Brimbank Family Outreach Service cases who are subsequently referred or re-referred for protective investigation within one and two years of the pilot project. This follow-up would prove valuable when evaluating successor programs like Strengthening Families.

Conclusion

This program evaluation demonstrated that the Brimbank Family Outreach Service played a significant, highly constructive role in the assessment and case management of 'at risk' families who did not require statutory intervention. In the past, such families have often not received the treatment or support they required to deal with their issues and/or to prevent the occurrence of

child abuse and neglect. The Brimbank Family Outreach Service was able to develop and provide effective support for these client families, decreasing the probability of the families becoming abusive or entering the statutory child protection system.

In addition, the Service made a clear, positive impact on inter-agency communication and coordination throughout the local service network. The Case Management Framework that was developed should provide a basis for effective inter-agency work as part of the Strengthening Families programs. It is reported that further work refining the Case Management Framework is currently being undertaken by the Department of Human Services prior to its application as part of Strengthening Families.

Notes

- ¹ In April 1998, Brimbank Community Health Services amalgamated with Westgate Community Health and Community Health Wyndham to form ISIS Primary Care.
- ² A companion document, the Brimbank Research Report (Mackieson 1997) is available from the Department of Human Services (Western Metropolitan Region).
- ³ Child-centred, family-focused practice affirms the primary importance of ensuring the safety and wellbeing of children, yet also recognises the mutual significance of the child and family to each other, and promotes the importance of service professionals developing a strengths-based partnership with client families.

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Commercial Sexual Exploitation of Children in Australia

The Australian Institute of Criminology (AIC) has been commissioned by the Commonwealth Department of Health and Family Services to produce a national stocktake of legislation and policy relating to the commercial sexual exploitation of children in Australia. The project, undertaken by Dr Peter Grabosky and Research Analyst Anna Grant, in collaboration with AIC Associate, Senior Lecturer in Law, Simon Bronitt and Ms Fiona David, is investigating child pros-

titution, the abduction and trafficking in children, and child pornography. Results of the research are expected to be the basis for Australia's national action plan, pursuant to Australia becoming a signatory to the Declaration following the World Conference on the Commercial Sexual Exploitation of Children held in Stockholm in 1996. The current project follows earlier work at the AIC relating to sexual offences against children, and crime involving use of the Internet.