

Children with complex needs

Perspectives of professionals from Aboriginal and Torres Strait Islander organisations, non-government agencies and government departments

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- *The Recruitment, Retention, and Support of Aboriginal and Torres Strait Islander Foster Carers: A Literature Review* (Richardson, Bromfield, & Higgins, 2005); and
- *Enhancing out-of-home care for Aboriginal and Torres Strait Islander young people* (Higgins, Bromfield, & Richardson, 2005).

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“We should be reluctant to put [children] into a system that may place them at further risk, particularly for Aboriginal and Torres Strait Islander young people.” (non-Indigenous agency representative)

For Aboriginal and Torres Strait Islander children needing out-of-home care, there is a shortage of placements that can provide safe, nurturing care and a continuity of cultural needs. Appropriate placements are becoming increasingly important as there are escalating numbers of Aboriginal and Torres Strait Islander children and young people needing out-of-home care who have complex behavioural and psychological needs. This is not surprising given that many children are placed in out-of-home care as a consequence of abuse and neglect.

Many children in out-of-home care experience ongoing problems such as trauma resulting from abuse, neglect or exposure to domestic violence, and may also suffer behavioural issues and learning difficulties. Indigenous children in out-of-home care may also experience a loss of cultural connection. Participants in this study talked about a number of needs to support children in care, including:

- specialist services;
- cultural mentoring;
- family contact;
- school-based support services;
- informal supports for children in care; and
- planning for leaving and after care.

The study

In a national study, the Australian Institute of Family Studies conducted interviews with *professionals* from government, non-government and Indigenous agencies, as well as *carers* of Aboriginal and Torres Strait Islander children and Indigenous *young people* in care (the *participants*). Participants were asked to talk about what kinds of support services were in place to support children in out-of-home care, and what support services were needed.

Supports and services for children with complex needs

When carers were asked about services for children and young people in out-of-home care, they responded emphatically: “We need them!” Carers and professionals told us that in order to enhance a child’s experience in foster care, it is important that they

receive the necessary supports and services such as specialist services.

Carers talked about there being significant gaps and inconsistencies in access to basic services to meet the increasingly complex needs of children in care. In some instances this appeared to derive from a lack of awareness about the services that were available and how to access them, rather than the services not being available. However, many carers described having tried to access services and being frustrated in their ability to get them, or simply reporting that they were not available.

Specialist services. When carers were asked what kind of support they needed, they invariably talked about the need for specialist services to assist the children in their care with complex needs. This included health, mental health, counselling, remedial education, language and speech services. One carer discussed the difficulties in getting specialist services for children in her care:

“Counselling? It’s a joke. When their mum passed away it took two and a half years! The guy that came, came once or twice... but said no, the kids don’t need counselling because the carers have dealt with this. He was good with the kids, but he recognised that he should have been called in straight away. It’s lip service.”
(Indigenous carer)

Carers felt that these services were provided on an ad hoc basis. Often children in care were expected to access these services through existing channels within the community or through other government departments, such as Education. This failed to take into account the unique circumstances of children in care.

For example, children’s mobility in emergency or short term placements meant that it was difficult for them to commit to an appointment months into the future – within the existing service framework this meant that children in care often missed out on services even where they were available within the community. Carers felt that children in care should have priority access to services to address this barrier.

Participants also told us there were even fewer resources to care for children with complex needs in remote areas, where there was limited access to services. Carers and agency workers talked

about region-specific problems: in rural and remote communities there just were not any services.

“The biggest areas of need are in the regional and remote areas. They don’t have support services so kids might be placed thousands of kilometres away.” (Aboriginal and Islander Child Care Agency representative)

“We have a high number of Aboriginal kids with disability... They tend to go into non-Aboriginal care. There are a whole range of issues around that. Some of those issues are cultural issues. I think there’s a different attitude to people with disabilities in Aboriginal communities. Traditionally, kids who had disabilities would have been left by their families in the desert (similar with twins)... those cultural beliefs are still there. It’s also to do with the capacity of people in those communities to meet the special needs of people with a disability. Even down to the fact that you don’t have footpaths and things like that, so that if you’re in a wheelchair you can’t get around as easily as you can in an urban environment and the lack of resources for people in the communities. Another fairly basic issue: we had a kid who was on oxygen and the doctors were very reticent about him going out into the communities with an oxygen bottle because there could be campfires and the risk of having an exploding oxygen bottle was thought to be significant.” (Departmental representative)

Where Aboriginal and Torres Strait Islander mental health services were available to provide crisis or ongoing counselling for young people, this was seen as an excellent resource. However, many carers reported difficulties in accessing appropriate mental health services for the young people in their care – either through an Indigenous service, through the school, or through mainstream mental health services. The lack of Indigenous services meant that Indigenous children were often being served by non-Indigenous agencies. Carers and service providers believed that these services were not always appropriate for the child’s cultural needs.

In one jurisdiction a Foster Carer Card has been developed to assist carers by making them identifiable to government agencies and hospitals; and providing them with access to a range of business discounts: for approved foster carers; approved relative carers; and children and young people in care.

Cultural mentoring. Participants highlighted that it was critical to make children aware of their Indigenous heritage. Cultural mentoring was in place and provided by agencies in some jurisdictions, but only minimally available in others. Cultural mentoring was incorporated into the case plan if there was a definite need (for example, if the young person expressed the

view that they wanted to know about Indigenous art or culture). However, this did not necessarily happen automatically and as a result some Indigenous children were not getting the essential information that they needed. Such issues are more important if placing a child with a non-Indigenous carer. One carer said:

“It’s hard to say, ‘You should be proud of your heritage’ when their knowledge of their heritage is the negatives, the knowledge of what happens to families when there is alcohol involved. They’re not seeing positive role models.” (non-Indigenous carer)

Carers – particularly non-Indigenous carers – felt that cultural mentoring was crucial, and that they needed better support from an Indigenous Unit in the department or other agency to support Aboriginal and Torres Strait Islander young people in learning about their cultural heritage.

In one jurisdiction an Aboriginal and Islander Child Care Agency had developed a publication to assist with understanding the cultural needs of Indigenous young people in care and to foster cultural awareness in non-Indigenous carers.

However, participants held the view that children should not rely solely on carers for cultural mentoring, that other supports need to come through education and tutoring. For example, one Aboriginal and Torres Strait Islander agency was offering some culturally sensitive styles of education and a “Little Brother, Little Sister” mentoring program. Some places have also recognised that Aboriginal and Torres Strait Islander children need more of a cultural experience in their education as well as basic literacy and numeracy.

Family contact. The behavioural and psychological effects of a child’s regular and ongoing contact with their birth family has been a contentious issue in child welfare policy and practice, and an issue that was raised by many participants in this study. Australian research has shown that at least one form of regular parental contact (for example, a telephone call or a visit) was positively associated with family reunification and negatively associated with the amount of time a child remains in care (Delfabbro, Barber, & Cooper, 2002).

Participants spoke about the need for connection between the child and their birth parents, as well as siblings placed with different carers. This was seen to be particularly important for Aboriginal and Torres Strait Islander children given the cultural significance of family. A carer explained:

“We don’t always have contact with the parents while they are in care... The first thing we find out is whether contact is allowed with the family. If it is, we let the kids

know. If they know that you'll try and get the contact, they'll settle down." (non-Indigenous carer)

School-based support services. School-based supports were seen as important in enhancing outcomes for children in care, particularly as many of these children may have learning difficulties and need extra assistance to manage their school work. Carers described the difficulties children faced and how the shame and embarrassment they felt in being behind with their school work prevented them from accessing services even where it was available:

"I believe all these children need specialised tutoring to try and catch them up. They need to be stimulated and supported. One of the reasons we left [the urban area] is that in the rural area, we are only nine kilometres from a lovely school with a supportive principal." (non-Indigenous carer)

"We did have tutoring for one of our girls. They do have tutoring for Indigenous children at this particular school, but the kids are often too embarrassed. Shame." (non-Indigenous carer)¹

One carer told of how their local school had helped in trying to overcome the shame some children feel about educational delay:

"Kids are embarrassed about being behind. We tried to get an older child to read a younger age book to a younger child. He was caring for his younger siblings, and got 'student of the week'." (non-Indigenous carer)

Carers also talked about the difficulty in accessing school-based services:

"We have problems with school. There's not enough support. I've never met the education worker, they don't support Indigenous kids." (Indigenous carer)

School-based support services were a particular area of frustration for carers who felt that they were caught in the middle of disagreements between the education and child protection departments. Two non-Indigenous carers noted:

"Often the carer gets caught like a ball in a ping-pong match between the Department of Education, and the [Child Protection] Department. Who's going to pay?" (non-Indigenous carers)

"If there's a problem at school, they contact the carer and the Department. Why don't they take responsibility?" (non-Indigenous carer)

Informal supports for children in care. Carers and service providers talked about the benefits of programs and activities that provided informal supports for children in care. The following programs and activities were suggested by participants:

- sporting involvement;
- peer-mentoring program (particularly for males who may lack a role model);
- camps; and
- a young men's program.

Planning for leaving and after care. Some states/territories have specific programs for Aboriginal and Torres Strait Islander young people leaving care. However most have no formal arrangements. Participants identified this as a significant gap in the continuum of care that should be in place:

"If we fix up care, leaving care will be less of an issue." (Indigenous worker, Departmental Indigenous policy unit)

Another important aspect of preparing for young people leaving care is to have provided support and services for the birth family, as many children will eventually return to their families, either before or after they turn 18:

"You have to blame the parents for the abuse and neglect. A lot of people are not caring for the children. But when taking the children away, you can place them with an aunty or a relative. That relative might be the one to get the help for the mother. The help should be there for the parents as well as the children. They just look at taking the children away, but don't think about what's left. Later on, that child will go back to that root. So we need to not let that root die." (Indigenous carer)

Young people also talked about the importance of providing help for their parents.

Conclusion

Increasing numbers of children and young people in care are presenting with complex needs. This is understandable given that many children are placed in out-of-home care as a consequence of abuse and neglect. These children require specialist and other support services, cultural mentoring, contact with birth parents and siblings, school based supports, informal supports and planning for leaving care.

¹ In quotations we have replaced the terms "Aboriginal" or "Aboriginal and Torres Strait Islander" or "Torres Strait Islander" with "Indigenous" to protect the identity of the participants

References

Delfabbro, P. H., Barber, J. G., & Cooper, L. (2002). The role of parental contact in substitute care. *Journal of Social Service Research, 28*(3), 19-40.





