

Buy Australian

A local family preservation success

Louise Voigt and Sue Tregeagle

The 'new' American solution for abused and neglected children -Intensive Family Preservation Programs - are being heavily marketed to Australians. Victoria and New South Wales have enthusiastically embraced the idea with pilot programs based on American statistics proving its value in maintaining children with their families and improving their safety. No matter that the Americans themselves warned that evaluations showed that out of home placements rate was no higher for families that did not receive the program and that the programs came from a country whose own Advisory Board on Child Abuse and Neglect described the child protection system as a 'national emergency'.

All this hype overlooks our own initiatives programs developed within the Australian welfare context. Such programs have evolved to suit Australian social conditions, work in a culturally appropriate manner and are tailored to local workers' education and skill. Temporary Family Care is one such program currently operating in New South Wales and the Australian Capital Territory.

Perhaps Temporary Family Care is too busy doing the job to undertake a heavy marketing campaign. Perhaps they lack the clout to get backing of giant multinationals like Avon to run their publicity. They certainly find it difficult evaluating a child protection program.

Nevertheless, these programs are currently working with over a thousand children per year (Table 1). They have successfully operated for seventeen years, and are run

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Sue Tregeagle is the Director of Programs based at Barnardos Australia Canberra Office. Ph. 06 241 5466. by a number of agencies. They will form the backbone of the Usher reforms in New South Wales.

This article will describe the program and work undertaken to date and compare it to the American programs.

FAMILY PRESERVATION - WHICH MODEL CAN PROTECT AUSTRALIAN CHILDREN?

Clearly the children identified as abused and neglected make up the vast bulk of out of home placements in the child welfare system worldwide and the literature documents how many of these systems fail children and further abuse them. Family preservation programs aim to keep abused and neglected children out of long term care.

The influential Child Welfare League of America¹ has identified intensive family-centred crisis services as characterised by:

- services with intense contact hours 8-10 hours per week
- services limited to 4-12 weeks
- caseloads from 2-6 families
- focus on intensive counselling and support services.

Dorothy Scott from the University of Melbourne² has outlined some of the problems of transplanting welfare programs to Australia from a society whose social infrastructure is so vastly different. The US has no proper income maintenance system, an acute public housing crisis and no universal health

system. Whilst Australian practitioners are aware of the short comings of the child protection system here, we take these factors for granted when working with abused children. In particular we assume the array of primary and secondary preventative services such as maternal and child health care services, childcare, disability services and some family support. Scott also points to the lower level of certification for welfare practitioners in Australia and clients' cultural resistance to 'therapy games'.

The notion that families survive without the social infrastructure of support is foreign to us, as is the American insistence on the absolute value of the individual. In addition, like the UK, we have recognised the relationship between poverty and the abuse and neglect of children. The US situation of a rapid increase in out of home placements of children is not the Australian experience. Rather the number of children in care is declining. The children now entering our system are from families with entrenched long-term problems, with a high proportion of families with a long history of child protection involvement.

The concept of 'imminent risk' of entry to care is a central tenet of Intensive Family Based Services. However the concept of 'imminent risk' has posed major problems to the operation and evaluation of these programs. Evaluation shows how workers' identification of 'imminent risk' is affected by the capacity of such labelling to obtain the resources of family support for their clients. The response of welfare systems of organising

TABLE 1.
BARNARDOS AUSTRALIA (ALONE): NUMBER OF CHILDREN SERVICED IN TEMPORARY FAMILY CARE

| 1984 | 1986 | 1988 | 1990 | 1992 | 1994 |
|------|------|------|------|------|------|
| 98 | 147 | 455 | 1065 | 1011 | 1218 |

increased levels of review for 'imminent risk' has failed to resolve these problems.

Whilst increasing the resources needed to gatekeep entry, the 'imminent risk' criteria appear to be related to the probability of children remaining in the care system in the US.

In contrast Temporary Family Care has moved the recognition of 'imminent risk' from a hard to evaluate possible future event, to an event already occurred, that is, the child is now entering the care system.

However, we in Australia have conceptualised care in a more complex way: firstly, by recognising care away from the primary caregiver, a usual event in families at times of crisis for the primary caregiver, for example, a mother's illness; secondly, by recognising that care is usually provided by the family or friends, so that families lacking these social supports are vulnerable at this time. Temporary Family Care attempts to replicate for vulnerable families the support given by informal social links to more fortunate members of society.

The welfare care system should not be a monolithic structure but rather be enhanced to complement families coping with childrearing.

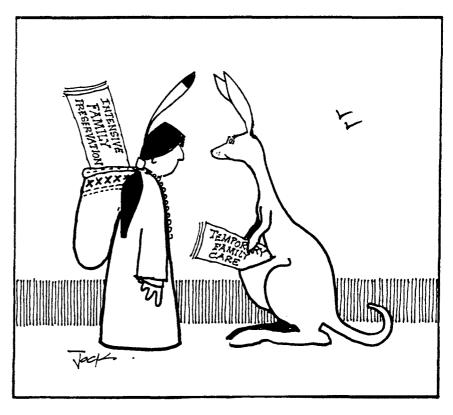
Temporary Family Care shares some of the characteristics and goals of intensive preservation programs, while avoiding some of the pitfalls of American developed programs. It deserves close consideration by policy makers.

LOCAL INITIATIVE

Temporary Family Care began in New South Wales in 1978 as a pilot program funded by the State Government and operated by a non-Government agency. Programs now operate in inner Sydney, the eastern suburbs, Auburn, outer suburbs, Penrith, the Illawarra and Canberra.

Temporary Family Care provides intensive casework, crisis foster placement and respite care to 'at risk' children. It is a family support program. The Temporary Family Care team's aim is rapid resolution of family crisis and return of a child to their caregiver if placement has been necessary. It recruits local families who are paid and supported as an integral part of the team.

The service operates 24 hours per day through workers who utilise a crisis intervention approach to problems which result in need for care. That is, they work rapidly and intensively to resolve immediate issues. The bulk of referrals are



already known to State Welfare Departments; remand placements and most importantly voluntary placements are taken. Clients are encouraged to return to the service if stress within the family builds up. When it is anticipated that families will need ongoing service, respite care is established. In these situations, a child is linked with a family who takes them into their home one weekend a month; such arrangements may go on for many years.

Temporary Family Care works as family preservation because it is designed and targeted to support families both before and after the first incident of abuse at a time when stress levels within the family are building up, but before the situation of neglect and abuse reaches a level where permanent removal is the only solution. It can be accessed by clients, thus ensuring that families are involved in problem solving and those adept at avoiding state welfare scrutiny can be serviced. New South Wales recorded a death in 1994 in which a child was killed within a week of a mother seeking to put her children into care.

The average length of stay is 25 days, and approximately 10 hours of casework time is spent on average with each family in contact with the program. Parents are expected to maintain close contact with their children if placement is required. In the case of babies this would be contact two to three times weekly.

Short placements and contact with parents during placement is critical in keeping the family together. David Thorpe and Andy Bilson³ showed clearly that once children had been in care for six weeks they are likely to remain there for a long term.

Carers are paid at 'higher than volunteerism fostercare rates'; acknowledging the disruption to their lives and the responsibility they must assume (such as relating with the child's birth family and being accountable to the agency).

WHY DOES IT WORK?

Although studies have identified factors correlated with abuse and neglect (such as maternal age, socio-economic status, prenatal care and social isolation), researchers are not good at predicting which individual children will eventually be seriously abused or neglected. The method used by Temporary Family Care is to identify 'at risk' children by targeting the factors most clearly associated with neglect and abuse poverty and social isolation. The service therefore focuses on families at the point of breakdown and access to the service is left as open and attractive as possible.

Temporary Family Care is put in the poorest areas to maximise chances of reaching the needlest families. Temporary Family Care services tend to attract the socially isolated family with its promise of childcare during family crisis. We

know these families are most likely to abuse. Such crises are generally met, in less high risk families, by neighbours and friends. The service is open to self referrals and barriers are removed.

Temporary Family Care does not get inappropriate referrals as the service is located at the point of entry into care. The American family preservation services claim that they take the neediest referrals, but their referral point is actually contact with another agency. They can only guess which families will fail and may end up taking less needy families. Families enter Temporary Family Care when they would normally enter traditional substitute care.

Other agencies feel comfortable referring clients to a service where they can get immediate help and where the child is offered immediate protection if needed. Further we have a reciprocal relationship with the network of services, another important element missing when referral of clients comes only from state welfare bureaucracies as in family preservation programs. We meet their needs for their clients and they take up our clients for their longer-term support.

Central to the provision of temporary care programs is the ideology that stress within families leads to an increased probability of child mistreatment and that the parental task is difficult and complex. Failure to reach the standard acceptable in the community is caused by both the social context in which the parenting takes place as well as the internal resources of the individual and interpersonal relationships within families.

Practical assistance is central to Temporary Family Care services. Not only does it attract socially isolated families to the service, but it can remove major stresses for a parent. Childcare in particular is important to organise for the future to allow families to work on their problems, for example, arranging housing, seeking medical care, resolving domestic violence and to have relief from the ongoing pressures of small children. Many services aim at counselling and personal change as the means to overcome abuse and neglect. However, alone this fails to address the families' very practical and immediate problems.

As the Temporary Family Care service is involved with a family crisis, counselling work in the home setting is particularly important and cognitive and behavioural concepts are utilised. The service aims at empowering families to take control of their lives.

Along with the immediate assistance of childcare and case work, Temporary Family Care services actively work to hook a family into a network of services (including specialised counselling, child care, Court for domestic violence orders, mental health resources, social security and community support). This is critical, given the ongoing nature of difficulties encountered by many of these families. This is an important part of most family preservation services as it extends the recognition that the problems of these families are entrenched and long term.

An important additional strength is the way in which Temporary Family Care services link carers who know the child and parents. This allows for the modelling of parenting skills, and the passing on of child rearing skills from an experienced carer with first hand knowledge of the child. This is particularly true for younger mothers using the service.

Temporary Family Care services can offer ongoing assistance for families. We know that many families who abuse and neglect their children have long term difficulties in parenting. Although there may be periods in which a family copes well, the socio-economic circumstances of many of these families mean that they are vulnerable to setbacks, such as unemployment, housing problems, health and addiction difficulties.

When we know that a family will have ongoing difficulties, respite care (regular periods of care) can be planned. This has the value of linking a child to another person or family who can offer a stable and secure relationship. Just as important is the break given to the child's parent. Such respite care can mean that a family is maintained through difficulties as a parent knows that they will get some relief from their children.

Some of the family preservation services are based on very short term involvement with families. We believe this ignores what we know of the social circumstances and causes of abuse and neglect.

One of the most important elements in improving a family's ability to care for their child is that services empower families, and work to avoid the disempowering aspects of the wider system. Self referral is central to empowerment (although obviously not possible with families on remand) — the ability to take self referrals leaves families with a sense of control. Throughout the placement parents are expected to make decisions regarding their children; these are not usurped by carers' or workers' decisions, no matter how small. At all times families are involved in case

decisions and the services will not attend case conferences run by other agencies unless the parent is present.

Carers are recruited on the basis that they will welcome families into their home, and will work as part of a team aimed at building up the strength of the child's family.

One of the most significant elements of Temporary Family Care is the emphasis placed on visiting the child when they are with a carer. Research into traditional foster care shows that visiting often drops off when a child is in care. When this happens restoration becomes increasingly difficult. Guaranteed visiting, backed up by financial assistance if required, is the basis of Temporary Family Care. Carers are recruited on the basis that they will welcome families into their home, and will work as part of a team aimed at building up the strength of the child's family.

Empowerment of families is maintained in many aspects of the program, most importantly in ownership of information. Confidentiality and client access to their own files are critical policies to the Temporary Family Care services.

Temporary Family Care ensures that entry to the child welfare system is appropriate and well planned. The ability of Temporary Family Care services to provide assessment of a family at first hand, and undertake intensive casework, means that children are not taken into care unnecessarily. Our figures indicate that only 5% of children who enter care are unable to return to their families. In these cases a great deal of casework is undertaken with the family and child to ensure that this is an unavoidable situation.

In cases currently before the Courts, Temporary Family Care services are often an important part of working out what is happening to a child in their family. Temporary Family Care can provide a second level of assessment, and provide a review of child/parent interactions. It is extremely valuable as the team have day-to-day knowledge of the family and its relationship with the child. Clearly child protection would not be served by returning children to seriously abusing families and in those circumstances Temporary Family Care services can serve as strong advocates for proper

permanency planning options, issues too frequently ignored in government social welfare bureaucracies. In Barnardos this includes adoption of older age group children via a specialist team.

HOW DO WE KNOW?

As already commented, funding for evaluation of Australian child protection programs is inadequate. Consequently, no independent data using a control group is available to test the central claims that Temporary Family Care prevents abuse and neglect and keeps children out of long term care. Cost effectiveness has similarly not been tested against other programs.

American Family Preservation programs usually come accompanied with statistics on these two points, however debate about them is far from conclusive. According to Bath (1994) '... research has yielded some mixed findings on Family Preservation Services outcomes'. However, even accepting the claims made by Family Preservation Services, the question of whether US results can be extrapolated to Australia is extremely dubious.

What we do know however is that Temporary Family Care programs are full, with referrals coming direct from State Welfare Departments voluntarily from clients. Furthermore, data based on referrals to Barnardos Australia long-term care services, indicates that only 5% of children who enter Temporary Family Care require a permanent substitute care placement. As all the children who move into Temporary Family Care placements would otherwise be entering substitute care placements, a useful comparison is with the United Kingdom figures which indicate that 33% of children who enter care are still there twelve months later and between 52% and 57% are still there between 7 and 51 weeks later.

Some evaluation has been carried out on consumer and carer views of the service, most notably by Brenda Smith at Sydney University. In 'Women as Foster Mothers', Brenda Smith documents attempts to organise fostercare through Temporary Family Care in a way that emphasises collaboration rather than conflict between the women involved, that is, foster mothers and birth mothers.

In What Sort of Mother Are You? Parents talk about foster care', Smith studies eighteen parents (seventeen mothers and one father) whose children entered Barnardos Waverley Temporary Family Care. She concludes, 'unless the social workers and foster mothers were very successful in reassuring and including the natural mother, the sense of failure

and stigma about going to 'the welfare' was hard to dispel'. In 'Something you do for love — The question of money and foster care' she concludes, 'It was clear that for these foster mothers in this particular agency, with its philosophy of mutuality and share care, this job provided high levels of self esteem and satisfaction, despite the still low levels of pay.'

Temporary Family Care is an Australian model for Australian conditions. There is ample practical evidence that it is a viable, affordable and tested program in Australia. Further academic research is needed, however, policy makers have as much evidence that Temporary Family Care is a surer bet than the American Family Preservation Services in protecting Australian children.

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