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CANBERRA ACT 2601

By email: NationalFrameworkfeedback@dss.gov.au

Implementing the successor plan to the National Framework for Protecting Australia's Children 2009-2020 - Consultation paper

The work of Relationships Australia

Relationships Australia is a federation of community-based, not-for-profit organisations with no religious affiliations. Our services are for all members of the community, regardless of religious belief, age, gender, sexual orientation, lifestyle choice, living arrangements, cultural background or economic circumstances.

Relationships Australia has, for over 70 years, provided a range of relationship services to Australian families, including individual, couple and family group counselling, dispute resolution, services to older people, children's services, services for victims and perpetrators of family violence, and relationship and professional education. We aim to support all people in Australia to live with positive and respectful relationships, and believe that people have the capacity to change how they relate to others and develop better health and wellbeing.

Relationships Australia State and Territory organisations, along with our consortium partners, operate around one third of the 66 Family Relationship Centres across the country. In addition, Relationships Australia Queensland operates the national Family Relationships Advice Line and the Telephone Dispute Resolution Service.

The core of our work is relationships – through our programs we work with people to enhance relationships in the family (whether or not the family is together), with friends and colleagues, and within communities. Relationships Australia believes that violence, coercion, control and inequality are unacceptable.

A commitment to fundamental human rights, to be recognised universally and without discrimination, underpins the work of Relationships Australia. We respect the rights of all people, in all their diversity, to live life fully and meaningfully within their families and communities with dignity and safety, and to enjoy healthy relationships.

Further, Relationships Australia is committed to:

 Working in regional, rural and remote areas, recognising that there are fewer resources available to people in these areas, and that they live with pressures, complexities and uncertainties not experienced by those living in cities and regional centres

- Collaboration. We work collectively with local and peak body organisations to deliver a
 spectrum of prevention, early and tertiary programs with older people, adults, young people
 and children. We recognise that often a complex suite of supports (for example, family
 support programs, mental health services, gambling services, drug and alcohol services,
 and housing) is needed by people affected by family violence and other complexities in
 relationships
- Enriching family relationships, and encouraging clear and respectful communication
- Ensuring that social and financial disadvantage is no barrier to accessing services, and
- Contributing our practice evidence and skills to research projects, to the development of public policy, and to the provision of effective and compassionate supports to families.

This submission draws upon our experience in delivering, and continually refining, evidence-based programs in a range of family and community settings, including for:

- People affected by complex grief and trauma, intersecting disadvantage and polyvictimisation
- People living with intergenerational trauma
- Survivors of all forms of abuse, including institutional abuse
- People who come from culturally and linguistically diverse backgrounds
- Aboriginal and Torres Strait Islander people
- People with disability
- People who identify as members of the LGBTIQ+ communities, and
- Younger and older people.

Progress since 2009

Relationships Australia acknowledges the extensive work done since the inception of the original framework and the significant government investment made to protect Australia's children. However, we suggest that there remains a substantial amount still to be done, and welcome the opportunity to provide feedback to ensure the successor plan's first five-year implementation plan can create real change.

Introduction

Relationships Australia recognises the urgent need to make significant and sustained progress in reducing the rates of child abuse and neglect. While evidence demonstrates the role of positive relationships in preventing the need for child protection services, Relationships Australia realises that they are often overlooked in initiatives to reduce harm and neglect (Lonne et al. 2013; Harlow et al. 2013; Munro 2010, 2012; Mansell et al. 2011; Rigby et al. 2015; McAuliffe et al. 2015; Harris 2003; Trevithick 2003). We acknowledge the necessary focus on specialist services for children and families who are experiencing disadvantage and/or are vulnerable. However, we believe that a renewed focus on prevention and early intervention will help to ensure that all children and families are supported to create safe and caring homes. While redefining the target cohort is important. Relationships Australia believes that the successful implementation of the previous

plan was hampered by its inability to address the structural issues within the service sector rather than any underlying shortcomings in the adoption of a prevention approach itself. Effective prevention services would avoid the need for most children to enter the child protection system in the first place. We believe this can be achieved through a relationships-focussed approach. At the centre of abuse and neglect is a relationship in need of support. Relationship-focussed care acknowledges that relationships are the building blocks of the human experience and champions positive and respectful relationships as the foundation for a more equitable society, which will ultimately reduce incidences of harm and neglect. Relationships Australia recommends that relationship-based practice be embedded into the five-year plan to ensure that service delivery is emotionally responsive, empowering, ethical and accountable to clients.

Strategic Priority: A national approach to early intervention and targeted support for children and families experiencing vulnerability or disadvantage.

What are some of the barriers faced by those trying to access individual or family supports across the service system?

Relationships Australia is committed to providing support services to individuals, families and their children and makes every attempt to ensure that our services are accessible to all Australians. Despite this, we recognise that service delivery occurs in an environment in which clients face a myriad of barriers attempting to access the service system. Some of these include:

- Social and financial disadvantage
- Limited rural, regional and remote access
- The effects of intergenerational trauma and exposure to institutional abuse
- Stigma when entering and engaging with services, and
- Fragmentation and siloed services.

Silo-bound, fragmented practices impose an overwhelming array of burdens on vulnerable clients. They must navigate complex mazes emerging from, for example:

- The various professional disciplines and their hierarchies
- Geographical divisions
- Bureaucratic areas of 'subject matter' responsibility, and
- Reliance upon disparate funding sources.

Relationships Australia acknowledges that these issues are derived from:

- Structural inequalities and exclusions perpetuated by economic, social and political policies
- Geographical challenges and limitations in funding to address these
- Services designed for population-level intervention rather than services matched to the needs of particular families (including culturally appropriate services)

- Commonwealth Constitutional power, and its relationships with State powers to legislate and separation of powers within the Commonwealth Constitution
- Interacting legal frameworks, including child protection and welfare, and
- Bureaucratic siloes, including in funding programs, so that one service provider can, in relation to a single family, be administering funding for overlapping services from multiple government funders, at different levels of government, imposing substantial administrative burdens and costs.

Relationships Australia acknowledges the extensive work undertaken by governments, service providers and advocates and service users to elucidate and address these barriers. However, the pandemic has exacerbated many of these issues. This has further entrenched barriers to access, including:

- Technology access requiring reliable, consistent and private technology to access increasingly digitalised services
- Longer waiting lists and tightened triaging due to fewer cancellations increasing pent up demand
- Increased numbers of clients with complex needs, an increased array of complex needs per client and heightened intensity of complex needs
- Travel restrictions for outreach services
- Additional barriers to the collection of data
- Additional barriers to the collection of fees, and
- Challenges serving children and young people online because of the difficulty of properly assessing and managing their safety.

Despite these challenges, pandemic necessitated models of service have also created room for innovation and increased access, including:

- Fewer cancellations due to a reduction in practical attendance issues, for example, transportation
- More participation in group modalities which better suit particular needs
- Opportunities to use online platforms to re-set relationship dynamics with physical distance between parties in conflict, and
- Opportunities to develop innovative services that address the generalised heightened anxiety to large-scale issues, such as the pandemic and climate change.

How do you think we could facilitate greater access to and navigation through public supports?

Relationships Australia recognises that the National Framework for Protecting Australia's Children 2009-2020 aimed to shift investments towards intervention and prevention under a public health model. This approach placed priority on supporting all families, with intensive prevention and intervention reserved for families in need. Despite this, the number of children in contact with

children protection services has continued to rise. Much of the work achieved under this model focussed on bureaucratic accomplishments, while the crisis affecting children and young people experiencing abuse and neglect remains a significant challenge.

Part of this issue is perpetuated by a service system facing the aforementioned challenges. This is exacerbated for those families who face social and financial disadvantage, are located regionally, rurally or remote, identify as Aboriginal and Torres Strait Islander, live with disability and/or multiple and complex needs or who have experienced abuse and/or neglect. The effect of fragmentation on vulnerable families, who are often ill-equipped to navigate highly fragmented service system, poses sometimes insurmountable barriers to help-seeking by clients. This can represent a barrier that impedes individuals and families from accessing support, ultimately shifting the work from prevention to crisis intervention services.

Similarly, for those families who do manage to enter the system, many are met with stigma and/or services that are not trauma-informed and/or culturally appropriate. This places further burdens on already struggling and exhausted clients, who are forced to advocate for themselves or find alternative services that better suit their needs. This can lead to service exhaustion and further limit help-seeking by clients. These barriers should be understood as a key limitation to the previous plan's ability to embed a public health approach into child safety and welfare.

Despite this, some key goals of the child protection plan are best achieved through a public-health approach, including:

- Achieving consistent norms and values
- Accessing 'at-risk' families who benefit most but are least likely to access services by targeting families before they reach crisis
- Creating a service environment which can provide all aspects of support, from prevention and early intervention to crisis support, rather than reinforcing a tertiary response, and
- Funding which facilitates clients' access to services across organisations, so that services are not duplicated.

Relationships Australia supports the creation of a more targeted successor plan, and an implementation plan, that enable providers to create a services system that better supports a specific, especially vulnerable, group. We recognise the importance of a significant and sustained reduction in the rates of child abuse and neglect and its intergenerational impacts.

Greater access to, and navigation through, public supports also requires a renewed commitment to prevention and early intervention, especially acknowledging the role relationships play in children and family's health, wellbeing and welfare. Relationships Australia believes that delineation of a primary/universal approach is critical achieve the universal goal - that all Australian children reach their full potential and grow up in safe and caring homes, free from harm and neglect.

In response, Relationships Australia recommends the five-year plan prescribe universal, targeted and place-based streams of service which support all children in Australia. Services must become more accessible and more easily navigated by:

- Providing sufficient funding for outreach to vulnerable and isolated communities
- More support for providers to undertake preventative work, the impact of which can, as noted above, be inherently difficult to quantify, despite its far-reaching benefits
- Support to prioritise vulnerable at risk clients, whilst also increasing capacity to undertake early intervention/preventative work through funding and goals
- Acknowledgement of the time and burden on staff and clients when collecting data –
 including the time and cost it takes to train, analyse and research
- More support for providers to undertake relationship-building work over extended periods that can be a prerequisite to engaging fragile communities, particularly in cohorts with a history of trauma. In working with Indigenous communities, for example, Relationships Australia staff undertake considerable community engagement work out of hours, attending local sports and arts events, shops or community activities. This kind of community participation, which is 'hidden from view' in terms of measurement and reporting, allows space and time in which relationships can develop and, over time, clients may come to trust the service sufficiently to feel safe in engaging and seeking help
- Longer funding cycles and appropriate notice of continuation of funding cycles to support providers to continue these relationships with communities
- Support to strengthen the interface between services by engaging in less competitive funding cycles driven by questionable assumptions that competitive tendering is a necessary and sufficient pre-condition of innovation and efficiency
- Policy and programme responses corresponding to the lifespan, and supporting the wellbeing of families throughout lifespan, rather than limited to discrete segments of the life course, and
- Avoiding prescriptive funding programs which restrict providers from shifting effort and resources to early intervention and prevention, as needs emerge and evolve.

Relationships Australia supports the efforts to target, more precisely, vulnerable cohorts in this plan. However, we reiterate that efforts to target these cohorts will require the same repairs to the service system that a more universal plan necessitated, given it is these groups who are most affected by these barriers to entry.

What action can governments take to support collaboration between services to offer wrap around supports to vulnerable children and families?

Relationships Australia recognises that an ongoing challenge facing the sector is effective collaboration between services. Relationships Australia has long-supported hub-models as an innovative solution to the competitive funding predicament,¹ whilst also providing support for families which aligns well with a universal public health approach. Funding centres based on collective impact with bundled funding, rather than fee-for-service, are shown to be more cost-effective, especially in complex cases (Rosen et al. 2010). Hubs can provide primary services in

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¹ See our submissions here https://www.relationships.org.au/what-we-do/submissions-and-policy-statements

the forms of universal screening, education, information, advice and support, with secondary and tertiary services in the form of service provision and other specialisations.

Hubs also strengthen the interface between services by engaging in less competitive funding cycles, reducing the referral burden and bounce rate and encouraging innovation and efficiency through proximity. They can rely on existing community collaboration, established local structures and reduce the need for extensive relationship building by individual service providers.

Additionally, wrap-around service modalities challenge the traditional fee-for-service models which produce many of the aforementioned barriers to entry. Traditional funding models rely heavily on funding a particular activity or episode of care. Hub models support services to provide wrap-around care through ease of referral and demonstrate how a shift in funding to support the life cycle of clients is needed. Hubs also support collective impact by enabling a shared vision for change, specific goals, joint decision-making and responsibility between providers and clients.

Finally, the holistic nature of hub models also allows for various aspects of a family's life to be considered. It supports practitioners to shift focus from a single issue to consider health and wellbeing in a social, familial and cultural context. In doing so, practitioners are able to adopt a holistic, relationship-centric approach and the protection of the child transcends the emphasis on separation to more child and family-focused solutions (O'Leary 2013).

While not necessarily defined as a hub, the previous plan's implementation of *Stronger Places, Stronger People* is one such example of using placed-based knowledge to disrupt disadvantage. *Stronger Places, Stronger People* employed collective impact logic to support place-based and consumer-centric projects which overcame barriers to access and navigation. A similar project, which also involves hub-based service provision, is known as Leeds' *Child Friendly City*. It employs place-based, collective impact logic "to improve outcomes for all our children [as they recognise] the need for outcomes to improve faster for children and young people from vulnerable and deprived backgrounds". *Child Friendly City* is accountable for a population approaching 1 million, with 185,000 children living in the city. Specifically, they achieved collective action through the creation of local 'clusters' of services, which worked together to provide a holistic approach for improving outcomes for children and families. The clusters comprise of local partnerships between schools and the other services within a given area, relying especially on the preestablished relationships children had with various people, services and institutions. This represents a hub-model, providing a variety of supports at a convenient location and the results have been transformational for children and families in Leeds. It is a model that empowers

• 12% reduction in referrals to children's social work services

- A safe reduction in 'looked after' children (10.7%) from March 2011 to January 2015
- 39.5% decrease in children on child protection plans
- A significant increase in school attendance, with around 400,000 extra days in school

² Leeds City Council. (2021). *Leeds Children and Young People Plan 2018-2023*. Leeds. Retrieved from https://www.leeds.gov.uk/childfriendlyleeds/Documents/CMT18-022%20Childrens%20and%20YP%20Plan%2018-23.pdf

³ Including:

families to develop their own plan to ensure the safety of their children. We discuss this project further in the question addressing data and outcomes-based evaluation, below.

Lastly, Relationships Australia also believes it is imperative to ensure that there are sufficient supports in rural, regional and remote areas. It is essential to recognise that there are fewer resources available to people in these areas, and that they live with pressures, complexities and uncertainties not experienced by those living in cities. Geographical pressures are further compounded for those families who identify as Aboriginal and/or Torres Strait Islander, those living with disability and/or multiple and complex needs or who have experienced abuse and/or neglect. While hub-models are effective at overcoming many of the barriers to entry, it is important that there is appropriate funding which acknowledges the challenges of establishing hubs in places in which the services do not already exist. Similarly, the requirement for services which are place-based is compounded in these settings, as they are best able to address some of the geographical barriers to entry.

How can children, families and communities be better engaged in service design and delivery?

Children and young people must be recognised as primary stakeholders and consulted with appropriately. The same is true for families and communities. As such, a driving question should ask 'What is it like to be a child growing up in Australia?', especially for those who identify as Aboriginal and Torres Strait Islander, live with disability and/or multiple and complex needs or who have experienced abuse and/or neglect.

In order to answer this question, Relationships Australia believes that the voice of the child must be heard on every decision that affects them. This includes:

- Consultation in the planning phase as this consultation has done. Children, families and communities should be given meaningful opportunities to explain their own needs and aspirations, to provide examples of effective service delivery and to test and refine concepts to ensure they meet their needs and expectations. Relationships Australia recognises that the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability has done an excellent job of providing people with a myriad of avenues to share their story and provides great guidance on how consultations can become a more accessible process with ample responses from diverse voices.
- Consultation when designing outcomes and their evaluation given that the outcomes
 refer directly to the children, it is appropriate that children, families and communities are
 given an opportunity to provide feedback on their content and how they are measured. We
 support the efforts made already to collaborate on outcomes and support further efforts to
 ensure co-design is embedded into the design process, to ensure that outcome evaluation

For more information see Relationships Australia's submission to the Productivity Commission Consultation Paper - What is known about systems that enable the 'public health approach' to protecting children. Retrieved from https://www.relationships.org.au/pdfs/RelationshipsAustraliaSubmissiontothePCsystemsthatenablethepublichealth approachtoprotectingchildren21Mar2019.pdf

is effective and accurate and that children, families and communities can inform strategy to improve their own outcomes.

- Consultation in the plan implementation and procurement stage the government should continue to provide children, families and communities the opportunity to inform service delivery so that it best supports their needs. Stronger Places, Stronger People provided a pertinent example of how local knowledge and the experiences of children, families and communities can design and lead implementation and procurement of services.
- Information sharing and outcome progress updates Relationships Australia believes that
 an important aspect of outcome measurement and funding accountability is publically
 available data and progress updates. This enables collective responsibility and
 empowered decision-making on the part of children, families and communities. Children,
 families and communities can also provide feedback on service delivery, giving examples
 of what is working and how performance could be improved.

Strategic Priority: Improved information sharing, data development and analysis

What data and information is needed to better understand and improve outcomes for vulnerable children and families?

Relationships Australia applauds the shift to outcomes-focussed plans. We recognise that outcome frameworks create programs that achieve results and create longer-lasting change. The way outcomes are defined has a dramatic impact on the way services are designed and evaluated. As such, Relationships Australia believes that it is important that definitions are unequivocal. To support this effort, foundational datasets must be established.

The previous plan's development of the Child Protection National Minimum Data Set, the establishment of the office of a Children's Commissioner, National Standards for out-of-home care, improved information sharing protocols across jurisdictions and the establishment of the National Principles for Child Safe Organisations were important achievements. These regulations, information sharing practices, frameworks and principles will continue to enable better outcomes for children and families.

While outcomes-based approaches are ideal, quantifying social phenomena is challenging. To be effective, outcomes require the following data and information:

- A detailed understanding of the problem The first national study of child abuse and neglect in Australia is an important step in the right direction. However, Relationships Australia notes the need for a more thorough recognition of the complex role relationships play in this work, especially in preventative programs.
- Clear differentiation between inputs, outputs, outcome indicators and outcomes and an accurate understanding of comparisons can be made from measurement. Relationships Australia recognises the challenge of quantifying social concepts and realises that exactly how outcomes are determined, indicators quantified and targets measured remains a point of contention. We believe that part of this issue stems from an over-reliance on the concept of measurement. Measurement is most useful for representing mathematically equal properties over a clearly specified and applicable range of units (Michell, 1986; Markus & Borsboom, 2013), whereas client goals and circumstances are inevitably framed by values

and emotional perspectives. Since a client's improvements can only be measured against their (and their practitioners') subjective perceptions, generalising across clients, programs or sectors is not a true 'measurement'. It would be better to assess clients' experience of the program together with their improvement rather than attempt to 'measure' the experience. We believe that outcome indicators should reflect these complexities.

As the sector shifts to this way of working, we are concerned that outcome measurement tools will tend to promote increased standardisation of services, at the expense of service innovation – especially client co-designed innovation. As such, we think outcome-based models require further consideration to ensure these approaches produce strong transparency and accountability measures and support organisations to serve their clients in the most effective way possible.

 Acknowledgement of the difficulty of identifying and quantifying measurable outcomes for social services and in identifying modifiable drivers of differential impacts. We recognise that the nature of population-level outcomes makes it challenging to attribute outcomes specifically to the National Framework. Relationships Australia acknowledges that measurable changes to the "areas of collective effort" are affected by myriad drivers, especially for families experiencing complexity. However, we believe that data which provides a more detailed understanding of the problem is key to the efforts to understand these realities, and also enables better supports for children and families when addressing them.

We recognise the important work being done at the population-level to quantify and address these gaps. In the next iteration, and its incumbent service provisions, Relationships Australia recommends outcomes and outcome measurement techniques that:

- Recognise the important differences between individual, community and population outcomes, as well as service and sector outcomes
- Are representative of outcomes, rather than outputs, of a service
- Are established through genuine co-design
- Reflect community diversity and leverage the strengths of communities, families and individuals
- Reflect the diversity of family formation and composition, including paying attention to intergenerational relationships
- Acknowledge the powerful role relationships play in the "areas of collective effort"
- Are trauma-informed

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⁴ 1. Addressing the over-representation of Aboriginal and Torres Strait Islander children in child protection systems.

^{2.} A national approach to early intervention and targeted support for children and families experiencing vulnerability or disadvantage.

^{3.} Improved information sharing, data development and analysis.

^{4.} Strengthening child and family sector workforce capability.

⁵ See footnote 4.

- Reflect wrap-around and hub-based service models and provide space for innovation within these designs
- Consider the availability and practitioner support for the tools that will be relied on to measure outcomes
- Acknowledge that evidence-based practice requires development, testing and delivery of evidence-based programs, which requires high degrees of expertise, discipline, fidelity and consistency, which outcome-based funding rarely measures or provides for
- Provide space to measure the foundational relationship-based work which acts as a preventative measure for abuse and neglect, and
- Recognise the competing issues that affect the achievement of outcomes, especially population-based outcomes.

What information should be shared between non-government organisations and governments to support service delivery and outcomes for vulnerable children and families?

Information sharing is crucial to achieve efficient, effective and equitable resource allocation for the wider benefits to funders, providers, users and the community at large. Relationships Australia highlights the need for more transparency between governments and non-government organisations to support service delivery and outcomes. Relationships Australia would like to see the successor plan, and the first five-year implementation plan, focus on improving data sharing to enable greater, more widespread collective impact strategies, such as those demonstrated by *Stronger Places, Stronger People*. However, we recognise that replicating these at a national or even a state level has been challenging (Fox et al. 2015). For guidance, we believe exploring the success of the *Child Friendly City* is useful.

The success of *Child Friendly City* can be attributed, in part, to its simplicity. A key aspect of the project involves including the method of measurement in the three 'fundamental behaviours'. These behaviours, which were explained through training sessions, ensure that anyone working with families and children understands the outcome-based approach, and as such, becomes accountable for them. In this project, outcome progress is measured and communicated weekly, using easy-to-read scorecards. This is supported by the constant measuring, tracking and accountability for the outcomes, which is maintained throughout the project, rather than saving this evaluation for the conclusion of the project (Friedman 2015). Relationships Australia recognises that establishing data-sets and measuring tools for larger populations with a similar frequency is challenging, especially considering the difficulties faced in establishing a National Standard for out-of-home care in Australia across different jurisdictions. Despite this, the key lessons about transparency and accountability should be applied.

We believe this could ensure:

 A broadening of the approaches to measurement in relation to culturally and linguistically diverse and LGBTIQ+ cohorts which are currently unhelpfully narrow, (and can at times present as a barrier to entry due to the use of stigmatising or out-of-date binaries) to provide more, and better quality, data

- Providers are given more specific and precise feedback of data and insights, including workshops to ensure that all involved understand the information and data
- Research and evaluation are embedded as key aspects of the work for all involved in implementing the plan
- Evaluation reports are made available to providers in a timely way
- People receiving services are able to access data addressing the progress of population outcomes
- Evaluations are funded and programmed to occur after a reasonable opportunity to establish, run and adapt the service, and
- Opportunities for more real time co-design, especially in response to incoming data.

Strategic Priority: Strengthening child and family sector workforce capability

What skills, competencies, and/or practices does the workforce need to provide the most effective support for children and families in the priority groups?

Our services have a long history of working with traumatised, abused and neglected children and their families. Clients come to our services by many and varied pathways, including juvenile justice, child protection agencies, education settings or other community based support services with a range of issues and co-morbidities. In our family law services, for example, up to 70-80% of families who have problems relating to their relationship separation have also been impacted by violence.

Additionally, members of the Relationships Australia federation provide the Disability Royal Commission Counselling Services, services for Aboriginal and Torres Strait Islander people, families and communities, Family Dispute Resolution services, Family Violence Prevention services and Family Relationship Centres which all directly address the needs of the priority groups outlined in the discussion paper.

Through our experience working with these clients, we have developed services which:

- Offer early intervention and prevention services, as well as more acute service provision
- Provide child-centric services which are strengths-based
- Provide professional trauma-informed and person-centred counselling
- Are culturally appropriate
- Are aware of the unique challenges facing these cohorts, including high levels of trauma and complexity
- Build and strengthen relationships and establish a network of support which can formulate, promote and support the goals of the client
- Balance the need for autonomy against the need for protection (especially for clients with disability and/or complex needs)

- Enable warm transfers to other support services if required, and
- Provide information and referrals about other useful services.

Relationships Australia believes that these skills, competencies and practices are essential to provide effective support for all children and families, especially those working with the identified cohorts.

What changes are needed to prevent high levels of turnover or burnout for staff working with children and families experiencing vulnerability or disadvantage?

Relationships Australia acknowledges the high level of trauma the identified cohorts experience, and consequently, the vicarious trauma experienced by staff working with these children and families. Relationships Australia also realises the important role work environments and secure employment plays in the mental health of all Australians, especially those working in this area.

Research shows that opportunities to socialise in the workplace can positively affect mental health (Tinson 2020; Productivity Commission, p.172). The disruptions to work-life during COVID-19 brought about economic losses and changes to work-based relationships which challenged people socially and emotionally. Relationship Australia's poll found that 63% of respondents experienced changes to their mental health in response to changes in their working conditions during April of 2020 (Fisher 2020). Furthermore, Relationships Australia found that those respondents who agreed that their workplace was part of their social life were far more likely to experience changes to their mental health following these workplace disruptions. Before the effects of the pandemic took place, research showed that workplace social networks were found to be so effective that they improve the perceptions people have of their jobs (Tinson 2020).

Given this, and the challenging nature of the work, Relationships Australia believes it is especially important that staff working in this sector are appropriately supported. This includes:

- Creating workplace cultures that understand mental health including awareness, intervention, support and recovery
- Workplace cultures that recognise the benefits of mentally healthy workers and prioritise mental health – including ensuring accessibility and support for people living with a disability, promoting diversity and other initiatives designed to enshrine inclusion
- Secure work supported by funding models which enable providers to identify need and plan for the future
- Manageable workloads supported by achievable outcomes, clear program logics and accountability structures, appropriate training, professional development and collaborative sectors which enable smooth referrals

Supporting mentally healthy workplaces requires a combination of approaches. Good mental health in the workplace is affected by the health of one's relationships, both at work and in other aspects of life. Relationships Australia believes that when staff are supported in the above measures and have the skills and competencies to approach the work, turnover and burnout is minimised.

Role of the non-government sector

How can governments and the non-government sector and Aboriginal community controlled sector work best together to improve outcomes for children and families?

Relationships Australia supports the efforts to co-design the plan with Aboriginal and Torres Strait Islander communities, especially focusing on centring the voice of the child. We also support efforts to enable service provision from Aboriginal community controlled organisations, with the ultimate goal of reducing overrepresentation in the systems.

Aboriginal and Torres Strait Islander people encounter multiple complex barriers to accessing the mainstream service system and the layer of mistrust attached to mainstream non-Indigenous services adds to these well-recognised barriers to participation. To address this, Relationships Australia supports measures to increase cultural safety for service users and cultural competency for service providers by:

- Funding training programmes, with pathways for accredited qualifications, for Aboriginal and Torres Strait Islander people
- Funding cultural safety programmes for practitioners who do not identify as Aboriginal or Torres Strait Islander people
- Funding 'soft entry' approaches through sporting, art and other cultural activities policies and programmes that erode stigma and encourage help-seeking
- Enabling strong collaborative pathways, including referral pathways, to simplify families' journeys through the service maze, and
- Acknowledging that collection of data for vulnerable groups can be challenging. Some vulnerable groups are particularly sensitive about data collection, and may have strong disincentives to disclose matters due to previous treatment by the service system.

Relationships Australia believes that when aiming to improve the outcomes for Aboriginal children, their families and communities, governments should aim to create policies and programmes that erode stigma and encourage help-seeking. This includes acknowledging the time spent by non-Indigenous organisations creating connections within Aboriginal and Torres Strait Islander communities. Furthermore, funding models which encourage strong collaborative pathways between Aboriginal community controlled organisations and non-Indigenous organisations are needed, to simplify families' journeys through the service maze.

What would success look like?

What changes do you expect to see in the short, medium and long term?

Relationships Australia recognises that the National Framework for Protecting Australia's Children 2009-2020 aimed to shift investments towards intervention and prevention under a public health model. Under the public health approach, priority was placed on supporting all families, with intensive prevention while intervention was reserved for families in need. It was hoped this model would support Australians to see the protection of children as more than a response to abuse and neglect, but as a holistic way to promote the safety and wellbeing of all children.

While there were positive advancements made throughout the last framework's timeframe, there was a distinct lack of non-bureaucratic achievements. Much of the success involved regulations, information sharing, frameworks and principles. While these lay the groundwork for the system characteristics which represent a successful public health model, the changes which affect children and families directly were predominantly at the tertiary level.

Employing a public health model to govern a child protection system is challenging. When dealing with the most vulnerable and disadvantaged children and families with complex needs, there will always be a need for tertiary services to ensure the protection of some children. For this reason, Relationships Australia applauds the necessary shift in focus to include a priority group of especially vulnerable children and families. However, universal, preventative measures are equally important and will be essential in a plan that can practically support a sustained reduction in the rates of child abuse and neglect.

Work which is truly committed to early intervention and prevention will require a whole population approach as well as targeted supports. We believe that an important aspect of any plan targeting children and families is the work of supporting healthy and respectful relationships. In order to intensify the preventative approaches and strengthen the focus on wellbeing, this plan needs to envision the power of healthy and respectful relationships and acknowledge the pivotal role they play in prevention of abuse and neglect. As such, prevention services should be understood as a plethora of services which support families and children to achieve healthy relationships, across the full spectrum of interventions.

In particular, Relationships Australia recommends:

- Extension of supports for young people leaving out-of-home care
- Acknowledgement of the contextual differences across Australian jurisdictions, regions and communities and allowance for flexibility in implementation
- The plan be broadened from beyond child protection departments towards active engagement with relationship, education, health and early childhood sectors
- Prevention and intervention funding which acknowledges and facilitates:
 - o the role of outcomes and the need for transparency
 - service provision which supports research, development and testing, as well as innovation to deliver evidence-based programs
 - o policy and program designs which enable providers to establish supportive workplaces for staff employed in this challenging field
- A continued commitment to consultation throughout the planning, designing, implementation, procurement and evaluation phases, and
- Acknowledgement of how the upcoming findings of the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability affect the service-seeking behaviours of those children and families with disability and/or additional needs, with a commitment to address these structural issues.

- Also considering other reviews taking place, or recently concluded, in the mental health and wellbeing sectors, family and domestic violence, family law reform and the implementation of the redress scheme, including, but not limited to:
 - o Productivity Commission's Inquiry into Mental Health
 - Select Committee on Mental Health and Suicide Prevention
 - Royal Commission into Victoria's Mental Health System
 - The interim report by the National Suicide Prevention Officer
 - o Joint Select Committee on Implementation of the National Redress Scheme
 - The Department of Social Services Consultation on Supporting improvements to the Families and Children activity
 - Joint Select Committee on Australia's family law system
 - o Australian Law Reform Commission's Review of the Family Law System
 - House of Representatives Standing Committee on Social Policy and Legal Affairs inquiry into family, domestic and sexual violence, and
 - A variety of recently announced reviews commissioned by the Commonwealth Attorney-General's Department into the operation and effectiveness of elements of Australia's Family Law System

Conclusion

Thank you for your consideration of this submission. Should you wish to discuss any aspect of it, or the services that Relationships Australia provides, please do not hesitate to contact me by email (ntebbey@relationships.org.au) or our Research and Project Officer, Claire Fisher (cfisher@relationships.org.au), or by telephone on 02 6162 9300.

Kind regards

Nick Tebbey

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References:

Fisher, C. (2020) April Survey: Have the COVID-19 workplace changes affected people's mental health?. COVID-19 and its Effect on Relationships. April 2020, Relationships Australia.

Fox, S., Southwell, A., Stafford, N., Goodhue, R., Jackson, D. and Smith, C. (2015). *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*. Australian Research Alliance for Children and Youth (ARACY), Canberra.

Friedman, M. (2015) *Turning Curves: An accountability companion reader*. Scotts Valley, California: CreateSpace.

Harris, J. (2003) The Social Work Business, Routledge, London.

Harlow, E., Berg, E., Barry, J. & Chandler, J. (2013) 'Neo-liberalism, managerialism and the re-configuring of social work in Sweden and the United Kingdom', Organization, vol. 20, pp. 534–548.

Lonne, B., Harries, M. & Lantz, S. (2013) 'Workforce development: a pathway to reforming child protection systems in Australia', British Journal of Social Work, vol. 43, no. 8, pp. 1630–1648.

McAuliffe, D., Tilbury, C., Chenoweth, L., Stehlik, D., Struthers, K. and Aitchison, R., (2015) (Re)Valuing Relationships in Child Protection Practice. *Journal of Social Work Practice*, 30(4), pp.365-377.

Mansell, J., Ota, R., Erasmus, R. & Marks, K. (2011) 'Reframing child protection: a response to a constant crisis of confidence in child protection', Children and Youth Services Review., vol. 33, no. 11, pp. 2076–2086.

Markus, K., & Borsboom, D (2013) Frontiers of Test Validity Theory: Measurement, Causation, and Meaning. London: Routledge.

Michell, J. (1986) 'Measurement scales and statistics: A clash of paradigms', Psychological bulletin, 100(3), 398.

Munro, E. (2010) The Munro Review of Child Protection, Part 1 A Systems Analysis. Retrieved March 14, 2014 from https://www.gov.uk/government/publications/munroreview-of-child-protection-part-1-a-systems-analysis

Munro, E. (2012) Munro Review of Child Protection, Final report, Department of Education. Retrieved March 14, 2014 from https://www.gov.uk/government/publications/munro-review-of-child-protection-final-report-a-child-centred-system

O'Leary, P., Tsui, M. & Ruch, G. (2013) 'The boundaries of the social work relationship revisited: towards a connected, inclusive and dynamic conceptualisation', British Journal of Social Work., vol. 43, pp. 135–153.

Productivity Commission. (2019) Volume 1. Canberra: Productivity Commission.

Rigby, E., Gair, S. and Thorpe, R., (2015) Surviving Intervention: Grandparents' Struggle to Maintain Relationships with their Grandchildren Following Contact with Child Protection Services. *Children Australia*, 41(2), pp.98-105.

Implementing the successor plan to the National Framework for Protecting Australia's Children Consultation—Relationships Australia Submission

Rosen, A., Gurr, R. and Fanning, P., 2010. The future of community-centred health services in Australia: lessons from the mental health sector. *Australian Health Review*, 34(1), p.106.

Tinson, A., (2020). What the quality of work means for our health. Social determinants of health. [online] The Health Foundation. Available at: https://www.health.org.uk/publications/long-reads/the-quality-of-work-and-what-it-means-for-health [Accessed 23 July 2021].

Trevithick, P. (2003) 'Effective relationship-based practice: a theoretical exploration', Journal of Social Work Practice: Psychotherapeutic Approaches in Health, Welfare and the Community, vol. 17, no. 2, pp. 163–176.