Shining a light on good practice in NSW

stories from child protection and out of home care
Acknowledgements

The Department of Family and Community Services gratefully acknowledges the practitioners and teams who have shared their practice experience in achieving positive outcomes for children and families and the children. Thanks also to the children, young people and families whose stories and experiences are featured in this report.

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The Salvation Army Young Hope
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The Department would also like to thank Moya Sayer-Jones at Only Human Communication. Moya interviewed the practitioners whose stories are in the following pages – she did an excellent job of capturing their voices.

All images contained in this report are approved for publication. None of them are of the children, young people and families in the stories.
What a privilege it is to write the foreword for this report. While we have a strong track record for publishing reports that provide honest insights into the work of NSW’s statutory child protection system, most particularly the last three years of child death reports, we have never written exclusively about our good practice. Learning from our mistakes and critiquing the whole system with a view to continual improvement is the job of good government. Arguably the opportunity for learning is even greater when we shine the light, as the name of this report suggests, on good practice. It’s a very important light, because of what it can give.

This report was written to inspire, celebrate and encourage excellence in our child protection practice. Too often the work is understood as only adversarial - responding to reports through investigation and removing children from families. Too often it is perceived as fraught with difficult relationships where families, the sector and the statutory workforce are pitted against each other with different agendas. The twenty stories in this report go a long way to debunk these commonly held views. They reflect the innovation, compassion and sheer tenacity that characterises the real work of child protection. They also reflect the positive relationships that are proof that when children are at the centre of honest and genuine partnerships, good outcomes are possible.

I read the following stories with respect and admiration and I was so moved by them. Not many professions can lay claim to having turned a life around; having given back a lost teenage girl her culture and kin; having given a young mother hope of a future with her baby and having found a boy his father. You give a great deal but your rewards are great.

This report will become an annual publication and an annual celebration. Let it provide recognition, encouragement and optimism. Most importantly, let it be at the foundation of a child protection system that acknowledges its leaders and provides our most vulnerable children with the brightest and best people NSW has to offer.

Hon Pru Goward
Minister for Family and Community Services
Minister for Women
In February this year Community Services formed its Office of the Senior Practitioner (OSP). It was an important step, the first time the division has had a unit with the sole purpose of practice leadership, support and improvement, and signalled a genuine commitment to strengthening the real work of child protection. I was honoured to be appointed to lead the Office.

First and foremost the job of the OSP is the promotion of best practice. And what better way to do that than to ask practitioners across the NSW child protection and out of home care system to submit stories about their work. We were clear that the stories did not necessarily have to have happy endings but they did need to reflect skilful practice and they did need to be ones about which practitioners were proud. We wanted a mix of stories reflecting all the different challenges in our work and we wanted ones from Community Services’ staff and ones from our partners in government and non government agencies.

We were thrilled to receive 143 high quality submissions because it was evidence of what we all know – that we have exceptional people, many of whom are keen for an opportunity to describe what they do. Everyone of the stories went to the heart of why working in child protection is so important; how it can have a lasting impact on the lives of the people we serve; and importantly, why it can be the most rewarding of careers. The task of selecting that number down to 20 stories was not easy, so many of them were excellent.

It is hard to know which of these stories I like the best. I admire the respectful partnerships that shine through – between practitioners and families and between agencies. Kristen and Winsome’s journey to South Australia to connect four Aboriginal children with their family is a perfect example of a relationship, based on mutual respect, which made a difference. There are some beautiful examples of persistence and tenacious practice - important because children and young people need to be able to trust and depend on practitioners who will not give up on them. So many of the stories are touchingly sad yet at the same time full of hope – well summed up by the courage of caseworker Natasha who fought so hard to give a baby the best start with his very young mum. But mostly I love that this report tells the stories of honourable people doing honourable work.

They are such different stories but they have one common feature – hardworking, courageous, compassionate and skilled people who have changed lives. We know there is a lot about our system that we need to fix. This report reminds us of so much that is working and does not need fixing. It also reminds us that our people, and the relationships they form, are the very best asset we have to offer vulnerable families.

I hope you like this report as much as we do in the OSP – may it make you smile, cry, think and reflect – but mostly may it make you proud of our people and hopeful for our children.

Kate Alexander
Executive Director
Office of the Senior Practitioner
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“I remember the midwife said a funny thing when we arrived at the hospital. She smiled and told us ‘It’s the first time I’ve ever seen a new mother actually excited about Community Services arriving!’”

Natasha, caseworker, Department of Family and Community Services
We got further in that first session than I’ve ever got with any kid. I made a promise to her then that I would never lie to her. And that’s how it’s been. She knows she’ll always get the truth: warts and all, good or bad.

She asked so many questions. Annie had endured a lot in 12 months, you couldn’t have asked a child to cope with more. Soon after she’d found out the truth about her situation, her Mum died before she could reconnect. Then her favourite Nan passed away a month later.

In the beginning, I was working with Annie’s Aunt and Uncle around boundaries, safety and supports while working with Annie about what she needed to do to return home. Then two months after I took over the case, she dropped the bombshell. She calls me and says, ‘I’m pregnant’. She’d just turned 14.

It was a planned pregnancy, I knew that. She’d flagged the idea when we first started working together and I’d been trying to get her to understand that if she did have a baby, there would be a possibility that she might not be able to keep it. She’d say, ‘I just want a family of my own.’ And I’d say, ‘If you’re not keeping yourself safe, I’m worried you might not be able to keep a baby safe.’ She was jumping on trains and going missing down to Sydney and calling her own shots about everything. I had conversations with her Aunt and Uncle and we were all saying, ‘don’t fall pregnant.’ And then lo and behold, I get that phone call.
Annie’s first trimester was pretty bumpy and we received a lot of reports because she put herself at such risk. I took her to family planning and early pregnancy consults. I wanted her to know all the options including termination and adoption. She was quite angry at me but I made it clear from the get go that part of my job was to make sure she was safe and fully informed. I told her it was still her choice and I would support her. I said, ‘I will continue to support you whether you keep your baby or not. I’ll be your advocate.’

There was never any doubt the chances of her keeping the baby were not great. I was asking Annie to think about people who would be potential carers for the baby because she was simply not doing what she needed in order to keep the baby in her care. I met with the baby’s father too, he was 16 and worked with them together.

And then, about 12 weeks in, Annie pretty much turned her life around. She ended the relationship with the baby’s father and started including me in her plan. She enrolled in school again and after 18 months of refusing to go was suddenly attending four days a week. While she was still living in residential care, we did a lot of work to help Annie learn more about her birth mother. When she requested a copy of her Mum’s death certificate, we went with her to visit the house where her Mum had died.

She was trying very hard but there were still some ups and downs. If Annie had done something to break the safety plan, she would ring me up and say, ‘Tash, I’ve stuffed up. Can I come and talk to you?’

And she’d come and tell me the reasons why it happened and talk through the reasons why she shouldn’t do it again. I knew she was trying to work with me so we managed those bumps as opposed to seeing them as big red flags. Throughout, I kept telling her straight what she needed to do to have a shot at keeping her baby.

Our team had created a process around what we should be doing with our young women who were pregnant and we used this with Annie. It covers what our case guides should be between 0 and 16 weeks, then between 16 and 24 weeks and what we needed to know at 28 weeks to decide whether we’d be needing to take court action. The guide is set up so caseworkers can say, ‘look, there’s a possibility you’re going to be able to keep your baby but we need you to understand what needs to change to help keep your child safe.’

At 16 weeks I did the first assessment report, not on Annie but the unborn baby, and came up safe with the plan we had in place. Annie was so excited, she was giddy. Next step was to refer her to a one stop shop young mother’s program in Sydney. The thought of her having to go all the way down there reduced both Annie and her Aunt to tears but Annie said she was willing to do it if it was better for her baby. The Aunt was willing to do anything. She was 100 per cent behind Annie.

I worked hard to support Annie’s Aunt and that’s how I discovered she too had a secret. She didn’t know who her own Mum was either. She didn’t know whether her sister had raised her or her Nan had raised her. She’d never dealt
with this. The identity issues were like history repeating itself and she didn’t want Annie to go through all that she’d been through. The Aunt came to understand that it was time to face her own pain. We were able to link her in with her own specialist counselling support and she is now doing really well.

At 28 weeks, we told Annie she could go home with her Aunt and she was doing cartwheels. She kept going to school and God bless her, she was still going right up to a week before the birth. She was so tired but so committed! We’d negotiated with the hospital to ‘bend’ their rules to allow the baby to remain in the room with Annie after the birth and for her Aunt to stay with her as well for five days. When the time came, we were ready.

Annie had asked me to come to the hospital and support her when her baby was born and five hours after the birth, we were there with bells on. The baby remained with Annie in the hospital. I remember the midwife said a funny thing. She said, ‘it’s the first time I’ve ever seen a new mother actually excited about Community Services arriving!’

As I tell this story, bub is three months old and for now is in the parental responsibility of the Minister, and is living at home cared for by Annie and her Aunt. Annie’s with us until she’s 18 and this means we’ve got eyes on bub and Annie is getting an education so it’s the nicest thing. She gets a bit unhappy sometimes that she still can’t look after bub without adult supervision but I tell her it will change and, ‘it’s our way of keeping your baby safe and healthy and making sure you have the right support.’ Most of the time she gets it, she knows the long term goal we are all working toward is restoration of her child to her care but she also knows she needs help.

There is great trust between all of us. Annie calls me if, as she says, ‘things suck’ or I get a text message if she’s cranky but every week she sees me without fail. She’s now attending a young Mum’s school in a city a fair distance from where she lives. She goes two days a week at the moment and we’ve organised for her Aunt and bub to go too. They stay two nights in a motel, Annie goes to school, bub goes into the school crèche and Auntie has a few hours to pamper herself and enjoy the big smoke.

Annie’s journey has not been without pain and has healed so many people along the way because no one gave up. Annie and her Uncle and Aunt, they just fought so hard. And I fought so hard and then my manager joined my fight beside me. It was a big call to send a 15 year old home with a baby when she had been in residential care for 10 months. There were lots and lots of questions but in the end, I was able to say to Annie, ‘you can go home with your baby.’

It’s been an amazing turnaround. To me, this little baby saved Annie. She was saved by love.
Reflection

I am so moved by the work here and reminded at how our actions – statutory casework – can resonate down generations – for good or ill. This time, with Annie’s child, our actions have the chance of building a story of recovery and hope. The caseworker, Tash was attuned to the risks but was able to hold both the risks and the strengths of the family to build a more honest and open future with Annie’s baby.

I can also see how much trust the caseworker gained from all members of the family – trusting relationships are at the heart of child protection – if clients don’t trust you they won’t tell you what is really happening. It seems the caseworker never lost her authority, was comfortable with her statutory powers. Trust is also about dependability and not giving up. The worker here says, ‘no one gave up and everyone fought so hard.’

Well done everyone for their tenacity and indeed their love.

Maree Walk, Chief Executive, Department of Family and Community Services, Community Services
Margot: Bringing up baby

“I was really struck by the fact that this woman was saying: ‘I did things wrong in the past and I need to do it differently this time. I’m prepared to do whatever’s required not to lose this baby.’ That kind of acknowledgement is half the battle.”

Margot, caseworker, Department of Family and Community Services
We worked with Jenny in the Strengthening Families program. She was around 26 weeks pregnant when she first contacted us, asking how she could keep her new baby.

Her two older kids were already in foster care and given the family’s history, it was one of those cases where it was almost a given that this child would end up in care too. Jenny didn’t want this to happen, she knew she had to do something so she reached out for help. It was a really brave thing to do.

She’d already established a relationship with a support worker before we got involved. She’d also started attending church a bit more and going to antenatal care.

At the time she was living with her former in-laws, the paternal grandparents of her eldest child. Her two kids and unborn child all had different fathers but she’d kept a relationship with this family, even though she and the Dad were no longer together. She no doubt thought this would be a good thing but we weren’t so sure.

The home environment did offer some stability and it was a nice home, fairly ordered and on the surface it looked fairly ‘normal’. But this family had a lot of problems under the surface which made it difficult for Jenny to develop independence. Although there were no reports about the grandparents themselves, every child we knew who had been part of this extended family had suffered sexual abuse which made it difficult to determine the safety of the unborn child if Jenny stayed with the family.

There were many complicating factors in Jenny’s case, including that she had a mild intellectual disability. Part of our engagement involved exploring her childhood, which had been very traumatic. There was a history of abandonment, neglect and abuse. At five, Jenny had been placed in a children’s home – she was vulnerable and was abused by other children. Her Grandmother was the closest thing she’d had to a mother figure and when she died Jenny literally had no one. That’s why she was dependent on her ex-partner’s family, despite the risks we were seeing.

On the one hand there was an urgency about moving Jenny and her newborn out of this environment but on the other she had no supports in place. She was very much alone. Without a network of support, she would be very vulnerable and this had worked against her badly before.

A decision was made to find another home quickly through public housing while keeping a close eye on Jenny until it came through.

Despite being the one to contact us, Jenny was initially very distrustful of Community Services because of losing her older children. We had to build a relationship with her and give a lot of reassurance about our motivations which were about the baby and its safety. At the same time, we also helped her accept responsibility for
some of the circumstances that had led to the other children being taken from her and this meant having some very honest discussions. It was really important for her to see what she could do differently to avoid a repeat of the past.

I knew we had to find Jenny another support network – a positive, caring support network – and her church became really valuable in this.

Initially, people at the church didn’t understand what was going on with Jenny and how they could help but they indicated their interest in taking her under their wing so we communicated directly with them. One of the ladies came to multiple meetings. She was a social worker too and that was great because we could speak to her about the deeper issues. The people were quite selfless about supporting Jenny, I think because they were coming from the church perspective.

By the time baby Sean was six months old we’d found them a home. With the other agencies involved in the case we kept up our support. I visited them at home on a regular basis to check that everything was okay, talk with Jenny about what was going well and things like child development, healthy relationships and social boundaries. Because of her intellectual disability I’d get her to repeat the key points to make sure she’d understood and that we were on the same page.

The family support worker was great. Jenny liked doing craft so they’d do scrap books together, while chatting about keeping the baby safe. At one point the baby wasn’t sleeping and Jenny became anxious so we organised a Tresillian placement. In the end she didn’t take it up as the problem fixed itself. I think knowing she had an option of support was enough for Jenny.

To me this case wasn’t just about keeping the baby with his mother it
was also about reuniting the siblings. It breaks my heart to see the way siblings have been separated in the past. I felt it was really important that Jenny’s little boy be given the chance to get to know his older sister and brother, now eight and six.

By the time we closed the case, we had a much stronger idea of the actual risk involved in Jenny having contact with her children. I think it’s very minimal now. She recognises that her older children are happy where they are and she thinks their foster carers are fantastic.

She knows their carers love them and they are in the best place. Her daughter has been diagnosed with autism and Jenny understands it would be very difficult for her to successfully parent her new son and the other children as well. She has reached a place of acceptance but values the relationship she has with them.
Reflection

Margot did a great job in striking a tricky balance. She was open to the possibility that Jenny could make the changes needed, but at the same time was able to hold a very realistic appreciation of the multiple risks which would need to be addressed. I was impressed by how Margot worked alongside Jenny, building a trusting relationship and getting an understanding of her own history and context, while still being honest and respectful about the risks and concerns we had. I like the way she maintained this relationship and worked to help Jenny to get the support she needed to ensure the safety of her baby as well as help Jenny strengthen her relationships with her older children and their carer.

Lisa Campbell, Acting Senior Director Practice Standards, Department of Family and Community Services

Recognising Jenny’s willingness to change was a starting point in working with her and assessing her capacity to care for her unborn child.

What supports you as a practitioner so that you can remain open to the possibility of change and at the same time hold a realistic picture of risk?

Why is this a difficult thing to do and what do you think might be some common traps in getting the balance right?
Rebecca: Midiga means friend

“I’m not saying that parents don’t know how to support their children but they often don’t know how to start the conversation about child sexual assault or answer questions about what is okay and what is not okay.”

Rebecca, Aboriginal regional coordinator, Aboriginal Affairs, Office of Communities
The idea for *Got Ya Back Midiga* came when I was working on a child sexual assault project with a local area reference group. The group was Aboriginal people who identified the need to support, in a culturally appropriate way, what was being taught in primary schools. We know that child sexual assault is under reported in Aboriginal communities.

One of the reasons is that communities don’t always have an understanding of what it actually is, and it’s such a difficult and emotional subject. The reference group thought the best method to increase children's understanding of what sexual abuse is would be through a puppet show.

We developed the show and approached a local school to put it on but the school knocked us back.

They said they were happy for us to do a show on bullying but they didn’t want us to talk about sexual assault.

That sent us back to the drawing board.

We thought, 'well okay, we should work with staff so that they feel comfortable to support the children.' And then we thought, 'why not work with parents too so they know what’s going on?' In the end, with the follow up sessions we’d devised for the children themselves, we had a program where the kids were being supported both at home and at school. It turned out to be a much better concept than our original. It lets us work with the whole Aboriginal primary school community.

After the redevelopment, instead of going directly to schools, we went to the District Office of Education to get their support. They said that it really comes down to the school principals but they were behind the idea. We also approached a number of other agencies like Joint Investigation Response Team, NSW Police, Salvation Army, Aboriginal Affairs and so when we finally went back to the schools, they were really open to the program.

They were comforted I think by the fact that it was well thought out and supported. They saw the structure around it. It wasn’t just us coming in and doing stuff with the kids.

An Aboriginal lady who used to be a primary school teacher and a child sexual assault counsellor wrote the script. She has a program called Yarramundi Kids on NITV. She was the ideal person to run the program. She worked with another person to create the puppets.

‘Midiga’ means friend so the title *Got Ya Back Midiga* suggests that we all should look after each other. Basically we wanted to raise awareness and model good friendship. There’s a male and female puppet, Max and Nikita, and during the show Nikita shares her experiences with her friend. Through their conversation, the children learn what child sexual assault is, about indicators, barriers to disclosing and where to get support.
It’s amazing how effective the puppets are in dealing with such sensitive information.

Teachers and parents are learning at the same time as the children. The school staff education session focuses on disclosure, especially the barriers faced by Aboriginal children. Our session with parents is all about providing an opportunity to explore the concepts their children are learning, and to give them the tools to manage the conversations.

The follow up sessions with the students run for four weeks. They give children a safe place to engage with the subject and learn protective behaviours. The groups are small (one facilitator for six children) so good rapport is quickly built. Sometimes disclosures are made during these sessions which allows support and follow up to be provided immediately.

There was one case where a child said she had a secret but she wasn’t willing to talk about it with one of the counsellors. The facilitator asked if she’d like to draw it in her workbook instead, and she did. After drawing, she shared her secret with the facilitator and a report was made to Community Services. A Joint Investigation Response Team interview was conducted the next day. Later we heard that the child had been told she’d be hurt if she told anyone, but she thought that drawing her secret wasn’t actually ‘telling’, and she’d be safe. This little girl had an older sister and after she and Mum had counselling, the sister also disclosed and is now getting help.

Another case involved a boy who told a teacher that what happened to the puppet had happened to him, but because the boy had a history of ‘telling stories’, the teacher was unsure what to do. In this instance, the child also shared his story with our program staff who made a report. The allegations were substantiated and his Mum, who was very distressed, was given support throughout the process.

We have had great feedback about the program from students, teachers and parents. The schools really appreciated the support that came from our interagency connections, and the parents were very relieved to have help in how to support their kids.

I’m not saying that parents don’t know how to support their children, but they often don’t know how to start the conversation or answer questions about what is okay and what is not okay.

Getting families talking is really one of the best outcomes of Got Ya Back Midga. It reduces the child’s vulnerability and it increases the possibility that if something’s happened already, the kids feel comfortable to tell Mum or Dad and it will get dealt with earlier.
Got Ya Back Midiga (GYBM) is a program that was developed by Aboriginal Affairs as a result of the Focus Community work that came from the New South Wales Interagency Plan To Tackle Child Sexual Assault in Aboriginal Communities. The Breaking the Silence report (2006) indicated that child sexual assault within Aboriginal communities was under reported and one of the reasons for this is that the community did not have an understanding of what child sexual assault is.

Reflection

What a great story about innovative and creative practice! I admire the dedication and persistence of the people who believed in this project. They aimed to protect Aboriginal children from sexual harm and were not going to take ‘no’ for an answer. They brought together, and successfully involved, children and families as well as multiple agencies in a cooperative way with the safety and wellbeing of children as their focus.

This story about practice demonstrates that, for all of us who work to keep children safe, the stronger the partnerships we build with different agencies – both government and non-government - the more able we are to ensure that children grow up not only safe under the protection of their parents and carers but with the skills to provide protection for themselves.

Margaret Jones, caseworker, Department of Family and Community Services, Community Services
Mary Joy: Father and son

“Initially it seemed we were going against the opinion of other professionals and that was really stressful. But in the end we had great support. It’s the team that makes the difference.”

Mary Joy, caseworker, Department of Family and Community Services
We were really challenged to think outside the square with this case. We faced opposition and refusal from the psychiatrist working with the child and also from another agency we enlisted. It challenged our own biases of working with men who have been violent and have a considerable history going against them. But in the end we decided to follow the one possibility we had of keeping a child with family. It turned out to be the best choice.

Dale was eight and the eldest of three boys in a family where there was a history of domestic violence. The parents had separated some time before and Mum couldn’t manage the aggressive and violent behaviour of the two oldest boys towards each other. Both parents had a history of drug use. Dale was seeing a psychiatrist at the Children’s Hospital and had a lot of labels attached to him like ADHD, anxiety and oppositional defiant disorder.

A family arrangement saw Dale placed with Grandma in a house shared by his father who was the perpetrator of violence. It was initially a short-term agreement but his mother never came back to see him. The two youngest boys remained with Mum who was in a new relationship and so, despite our efforts, contact between Dale and his brothers didn’t happen.

It wasn’t an ideal placement. The house was overcrowded. Dale slept in his Grandma’s bedroom and she had health issues. I visited weekly and she was struggling. She would often come into the office and say she couldn’t do it anymore but in the end she’d say, ‘I’ll keep trying.’ School was having trouble with Dale for being violent towards other children and challenging for teachers. He was suspended a lot and this made it difficult for Grandma too.

Dad on the other hand, kept telling us he wanted to care for his son. At this stage the safety plan wouldn’t allow him unsupervised contact and he wanted our help. We approached an agency to work with Dad but they refused because he had been a perpetrator. They agreed to work with Grandma, which was good because she needed support, but the agency could not be persuaded to work with Dad. The psychiatrist withdrew his support too. We received a letter making it clear that he wouldn’t continue to see Dale while he was in the care of any of his family. My manager and I talked and thought a lot and in the end decided we had to give Dad a go. Dale was a little boy who had already lost his Mum so we wanted to help Dad step in and be at his best for him.

Dale was very indifferent when I first met him and would only reply to questions with one word answers. Often he’d say the exact opposite of what was clearly true.

For example, he’d be sitting there in his soccer uniform and I would ask, ‘did you have soccer today?’ and he’d say no. He didn’t trust us and mostly took an opposite view, like a defence.
On paper it didn’t look good for Dad but in our meetings his commitment showed through. We asked him what he thought unsupervised contact would look like and how he could manage Dale’s behaviour without becoming aggressive himself. He told us about a time he had spent in a mental health facility where he learnt strategies to manage his own behaviour and how he could use these ideas to help Dale. He was able to give many examples of how he was using those strategies already. He told us he really wanted to be a good father and having grown up surrounded by violence himself, wanted to break the pattern for his son. He showed a lot of empathy and took responsibility.

Even though it was hard at that stage to get Dale talking, when we asked him about whether he liked spending time with his Dad, he told us that Dad would take him bike riding or to the beach. Dale seemed happy to be with him. It wasn’t a quick, easy decision for us to go ahead with the restoration and looking back, it was a really stressful time. We had many consultations and got lots of feedback from different specialists, but in the end we all felt confident that if Dad was given the right support he could do it.

We linked Dad with the Dad’s Good Weekend program and suggested he get more involved in Dale’s school. He was willing to work and was also in a relationship which I think was changing him for the better.

About half way through we invited his girlfriend to come to meetings. Then they started coming together to the school meetings. We saw how willing they were to work with us and how committed they were to raising Dale in a positive, healthy way.

One important issue we had to sort out was accommodation. Dad needed to be set up in his own house, living independently, before Dale could move in. We worked well with Housing and they found him something in just three weeks. We assisted with new bedding and toys to make a nice bedroom for Dale.

I think any doubts anyone had disappeared when we saw how Dale blossomed with his Dad.

Before the move the assistant principal at Dale’s school was always calling me about his conduct or a suspension. Then one day she rang and said: ‘oh, he’s doing well, we’re so impressed.’ She said they were all so happy with how Dad was managing. She said they’d noticed that when Dale was acting out Dad was able to tell him calmly what he did was wrong without judgement – he separated the boy from his behaviour.

Before the restoration Dad wasn’t working and he wasn’t driving. Now he’s doing both. He’s enrolled Dale in after school care and he can organise his work schedule around him. Dad was open to exploring opportunities for Dale to have contact with his Mum and two siblings and we supported Dad with strategies
to maintain these relationships. We’ve closed the case now. Dale still gets anxious sometimes but a mental health assessment determined that he didn’t need any more intervention.

On my last home visit it was amazing to see a totally different child. Dale showed me his room, talked about school and listened to what I said. He was really quite charming and happy. On his bedroom walls there were photos of outings he had with his Dad and Dad’s girlfriend, including trips to the beach and birthday celebrations. Dale took them all himself.

As he chatted to me about his pictures and his birthday toys, I remembered those one word answers I used to hear and I thought ‘wow, is this the same boy?’

This is a story of hope, of second chances and of persistent and courageous casework. Mary Joy could see the benefits of Dale being with his father and she and her manager took a risk in supporting restoration despite the past violence. It’s a challenging case to think about – it would be easier for everyone to feel comfortable about Dale’s safety if he was placed with a carer where there was no history of violence. But would it have been better? Families come with their problems and their histories, and their love and their motivation. Mary Joy tapped into both – she kept clear bottom lines with Dad in helping him with other strategies and in taking responsibility for his past violence. I take my hat off to her.

Lisa Tesoriero, Casework Specialist and Practitioner Advisory Group member, Department of Family and Community Services, Community Services

How do I remain open to seeing the strengths and attributes of a child/young person or parent when they come with negative labels and/or diagnoses?
“It became a massive juggle trying to help both of them. Sometimes they would ring me in the middle of an argument and I’d speak to them on the phone, individually, to get them into their corners. I’d remind them what we’d talked about. ‘Can you do it today?’”

Helena, caseworker, Department of Family and Community Services
My program Safe Home, Safe Futures is targeted at early intervention level but Tiffany and Steve's needs were very complex. They both came from backgrounds with a lot of trauma. He'd had a horrific childhood. I first met them through a police referral to our Family Violence Service. Steve perpetrated the violence which included pushing, verbal abuse, degradation, threats and actions to self harm and obsessive, controlling behaviours.

In the beginning, Tiffany was extremely depressed but still coping better than Steve. I remember probably the first or second time I met with them, he told me he had up to 1,000 thoughts a day about how he would commit suicide. Just getting that idea through my head was a big challenge but that's how clear and sincere he was about it. When I think about that, the fact he walked through my door at all was huge.

Their 15 month old boy seemed anxious and was not eating or sleeping well. Just hanging off Tiffany. She was trying to work but Steve did everything to sabotage her job. He was very controlling; he didn’t really want Tiffany to work with me. He probably didn’t want either of them to be a part of it but he went along, all the while unsettling things quite a bit along the way. Often they didn’t return my calls and scheduling meetings took a lot of negotiation. It was very frustrating and required a lot of patience. You have to
persevere but not push too hard. Have faith that even if now is not the right time, one day they’ll come back. Each meeting I knew could be our last so I’d try to say one thing that might stick in their heads and click later on.

At home Steve’s violent rages continued, as did his drug abuse. At that point they both really wanted to make the relationship work and my job was to help them move towards their goal of a violence free family life and to focus on the baby and his safety.

In our meetings, we’d sit and talk about how it had been since we last met, what was good, what worked, what didn’t work. I got them to focus on the future. ‘This is where you are today’, I’d tell them. ‘Yes today is a tough day. But what do you want to be happening in your life down the track? What do you want for your child’s future? What do you want your child to be saying about you when he’s 20 years old?’

At times Steve would get quite angry. ‘Maybe it’s time to just go outside and have a little walk and settle down’, I’d say. I treated him very respectfully but very firmly. Tiffany could see I was doing everything possible to get him on his feet and this helped build trust.

You have to offer practical solutions as well as emotional support, don’t you? Together we wrote a plan to help him manage his suicidal thoughts. He had to take responsibility; Tiffany had to realise his constant suicide threats were a way of manipulating her through fear and guilt. In this plan, he gave her permission to ring Triple Zero when he was saying ‘I’m going to get the rope’ or was cutting himself. I typed it up and they had it on the fridge. He did try to stick with it but it didn’t always work.

It was a real turning point for Tiffany though. The plan gave her power to act. She could call the police without the guilt and worry he might die. It made her realise there were people around who could help them.

As Tiffany grew stronger, Steve went backwards. We tried everything – a nearby mental health service called Headspace, Brighter Futures, fathers’ programs and financial counsellors. But he always found excuses not to attend the meetings and support groups I got him into. I’m not saying he didn’t want to; he just didn’t have the capacity then.

It became a massive juggle trying to help both of them but I had to keep focus on the baby. Sometimes they would ring me in the middle of an argument and I’d speak to both of them on the phone, individually, to get them into corners. I’d remind them what we’d talked about. ‘Can you do it today?’ I’d ask. ‘If not, one of you should get out now because this situation isn’t good for you or your boy.’

After I’d been seeing the family for about eight months, Tiffany decided there was no future in the relationship. She could see we had made many attempts to help Steve but he wasn’t responding. It was very testing for her because she had to bring in the police again and go through the court process to protect herself and her son. Steve was leaving her messages, saying all this horrible stuff
that she once would have felt responsible for. She would ring me, distressed, and we were able to put a plan in place around her, because at that point she was falling down again.

Our job was to protect and support Tiffany and the child to ensure the child’s safety but at the same time I didn’t want to totally abandon Steve, so I invited him to see me. After the split, he was in a very bad way, missing Tiffany and his child. He’d come in crying and I’d talk to him for a while then say, ‘why don’t you just stay in the office. Just sit here and try and get through this time.’ I’d walk him across to Headspace because he just couldn’t step through the door on his own. I haven’t seen him now for about 15 months. I don’t think he’s doing very well but he knows we’re here, at least.

As for Mum, she’s amazing, just amazing! She’s gone through her own trauma therapy and is finishing a Diploma in Community Services at TAFE. She wants to become a Family and Community Services’ caseworker to help other families make positive changes to live without violence. She’s a true advocate.

These days I ask much more of her than she asks of me. Can you do this training for us? Can I put this submission in about you for the Good Practice Guide? When I rang her the other day about something she was having a bad day. ‘You know what I need?’ she said ‘chocolate.’ That was our motto for bad days: just have some chocolate. You might get fat but who cares: tomorrow you’ll be alive and you can do what you like. The two of us laughed then. ‘Oh I’m so glad you rang me today’, she said.

The child is four now and honestly you just can’t believe he’s the same boy.

I run a music group called Mothers for Music, it’s all about building attachment and having fun, and he came to that. His confidence has grown so much from being in a safe and secure home. He has responded well to therapy so far and I hope that he won’t carry his trauma into adulthood, like his father. His manners are beautiful and he’s just a lovely, happy little boy.
I got through it

My name is Tiffany; I am a 23 yr old single mother of a 4 yr old boy. I live independently in our own home where I pay my own bills, my own rent; I work part time and am currently studying at TAFE.

My life as it is wasn’t always this great with things on track and going my way. In 2010 I was introduced to the Family Violence Service. I had been suffering mental and physical abuse for the past year perpetrated by my then partner/father of my child, and had never spoken out about it. I remember it like it was yesterday. I finally had the courage to report his abuse to the police, however I still wasn’t strong enough to leave him. A few days after I reported him I received a phone call from a woman known as Helena. She sounded extremely nice and made me feel at ease, I now had someone to talk to about all he had put me through. At first I insisted that I wanted to work on the relationship for our son’s sake and continued in the relationship for a further six months with Helena’s support as case worker for my partner and I, but the abuse didn’t stop. Instead he became more controlling, until it became clear to me I was the only one working our relationship. At this stage I had been seeing Helena for 7 months and with her unfailing assistance and counselling, I was finally able to find the courage and strength to leave and move on with my life with my little boy. In my opinion the Family Violence Service is invaluable as it offers families like ours an essential service, without which I wouldn’t be where I am today. I feel I owe the wellbeing of myself and my son to Helena and the Family Violence Service.

Today I am two years removed from the violent relationship with my son’s father and have an AVO still in place (once again thanks to Helena and the service). Working with Helena and the Family Violence Service inspired me to be the best I can be. I now walk outside my front door without fear and I hold my head high. I GOT THOUGH IT! I have a good circle of friends and great support from my family. I work to support my son which I do on my own. And the best thing of all I am currently at TAFE completing a Cert 4 in Community Services. Eventually I hope to complete a degree as I aim to be a FaCS (DOCS) worker with the intention of supporting families to make positive changes as a unit and live without violence of any form.

Thanks to everything the Family Violence Service has done for us, my son and I now have a very positive future. Yes, I’m sure there will be a few bumps along the way, but at least I now know, I got through this, I can get through anything!

Thank you from the bottom of my heart to the team at the Family Violence Service you helped change my life for the better.

 Signed

  16-4-13.
Reflection

Reading about Helena’s work with Tiffany, Steve and their baby makes me so proud to work for FACS. I often think that people don’t realise how important the work we do is, and, at times how hard it is to strike the right balance of support and empathy for both parents while prioritising the needs of the child. Even harder still when one parent is the perpetrator and progress is so elusive despite the efforts of a highly skilled practitioner.

This story shows how hard our staff work and the absolute dedication, patience, understanding, skill, engagement and sound decision making required to do our work. We don’t always succeed but I hope the future is bright for this Mum and her little boy who could so easily have ended up in the vicious cycle of intergenerational trauma and abuse that we so frequently see. Despite Steve’s struggles it is important that he was treated with empathy and respect and that his son can have the opportunity to grow and thrive.

Lisa Charet, District Director, Department of Family and Community Services, Community Services

Effective responses to domestic violence includes engaging with the perpetrator of the violence to enable them to acknowledge the impact of their behaviour and make the changes needed.

In cases like this where the father has a history of violence:

• how do I identify and manage the impact of my personal biases, values and feelings to work safely and respectfully with men?

• how do I remain open to the possibility that he may change while holding a clear focus on the risk of further violence?
“The fact is most people don’t want to socialise with the families of prisoners; kids with a parent in prison get excluded. They never make birthday party lists or the weekend sleepover of other children. That’s why for our last school holiday outing I made it a birthday party theme: to give the kids a chance to be part of a celebration.”

Trish, education & mentoring project worker, SHINE for Kids
SHINE for Kids offers a range of support services for the children of prisoners, whose families often end up moving to towns where they know no one, to be nearer the prison. That’s what Kylie did when her partner, David, was sentenced for drug related offences and sent to a prison away from home. She really wanted her three children to be able to see their Dad so they all moved to a totally new area.

There’s so much shame and embarrassment attached to having a parent in prison that families often hide the fact. Kids are told not to tell their friends or teachers or doctors, even though talking to these people might actually help. It’s very isolating. Our main goal is to get these families feeling part of the community through a variety of different programs. The biggest issue for them is loneliness – they typically isolate themselves from others because of the embarrassment and shame of having a family member in the prison system. There’s lots of stigma too, of course. The community can be quite judgemental and often children are told not to tell their friends at school, their teachers, their doctors. They feel like they won’t get a fair go.

The welfare department of the prison referred the young Aboriginal family to SHINE. The Mum, Kylie, didn’t know anything about local services and was really glad to be offered support. On weekend visits to the prison the couple’s children, Johnny, Tamara and Jake, started going to our Child and Family Centre. After half an hour with their Dad, they’d head to the centre, where they could play and bond with other kids in the same situation as them. The aim is to make the visits fun and draw the children’s attention away from the prison walls to something more positive.

The family was invited to join in a range of community programs. Mum started going to our weekly Carers Support Group where she could learn about local organisations and advocacy services. Through this group Kylie completed a three week parenting program, Magic 123, along with a six week confidence and self esteem building workshop, Harnessing Wisdom.

Johnny, 13, and Tamara, 10, were both paired with mentors who took the kids on fortnightly outings. Our mentoring program really helps the kids feel less isolated and it’s also a way of making sure their needs are being met. After each outing the mentor, a trained volunteer, writes a report, noting any changes in the child’s outlook or behaviour. Any new issues that are picked up can then be written into the case plan. The children weren’t used to going anywhere because the family didn’t have a car and so they loved these outings.

To help with school, Tamara and Jake, seven, were put onto our education program. Mum had low literacy levels and wasn’t able to give the kids much support in this way so Tamara liked to do her homework during these weekly sessions.
Jake, who has some learning challenges was put into a special needs class where they focussed on his speech. SHINE supported him to have speech therapy for six months and staff or volunteers would take him to his appointments. His teacher was given regular updates which meant that Jake got proper support in the classroom.

Not long after Dad was released from prison, the family was evicted from their rental property. It was pretty traumatic for them to be homeless all of a sudden, especially as Kylie was pregnant with their fourth child. With help from SHINE and other local agencies, they found a good home.

Since then a lot of positive things have happened. Both Mum and Dad got their driving licences, which has opened up opportunities for the whole family. Kylie has enrolled in TAFE to improve her literacy skills. The children have done really well; they’ve hit all their goals on the case plan and no longer need our support. They’re happy and settled. The really nice thing is that they decided to keep seeing their mentors, even though they’re no longer on the program.

Their lives have really turned around. I’m proud of them and also what we did to help the family create change. SHINE helped them through a tough time and now the family has made a fresh start.

SHINE for Kids is a not for profit organisation supporting children, young people and their families affected by parental involvement in the criminal justice system by providing a range of proven programs that focus on building resilience in children to give them the foundations for a healthy future. They do really important work and this story reflects that.

Reflection

It’s so lovely to read a story where practitioners talk about their work and outcomes for families with such pride. This is a story of hope and it’s a story of a battling family getting the help they need to get on rather than spiral down which could so easily have happened.

Kylie Coldwell, Director Aboriginal Services Branch, Department of Family and Community Services, Community Services
Greg:
In the bin

“Their new rules included some which were ‘set in concrete’ like... “We don’t hurt each other, we don’t yell and scream and we honour our Hindu culture and religion.”

Greg, caseworker, Department of Family and Community Services
One of the big challenges we often have is engaging with the parent. In this case, right from the start, the parents recognised what they were doing was wrong (their word, not mine) but they just had no idea of how to change it. It was one of those rare situations: a case of get in, assess safety at the same time as setting things in motion and then, ‘oh wow, it’s working really quickly!’

We were called in when teachers and another parent saw two brothers being hit by their mother when she came to pick them up from school. The children were often rough with each other and with peers and broke the rules repeatedly. The family was identified to be of Indian ethnicity.

My colleague Carolyn and I went out to interview both boys. They told us that their parents did hit them and often threatened to send them away if they were ‘naughty’. Those were the two things that they said they’d like to be different. Later, when we went to visit the parents, they were fortunately both at home. It was great timing.

We were met with a lot of suspicion at first but I think the thing that changed their attitude most dramatically was when they answered the door, we offered to take our shoes off. Then as we walked down the hallway, I saw at the end of it this rather large figure of the elephant-headed god Ganesh. This family were devout Hindus.

I’d spent the best part of a year in India some time ago and I’d been intrigued by the culture. If I had a favourite Hindu god, Ganesh would definitely be it and I commented on what a beautiful sculpture they had.

They saw we were curious about their culture and honouring to their Hindu deities. Things improved very quickly.

Both the mother and father were very honest in answering our questions. They admitted using a belt and other things to punish the children and said, ‘yes, that’s what we do.’ There was no apologising about it: no bargaining, rationalising, justifying.

They basically told us that they had got to the stage where they had ‘lost the plot.’ When we said, ‘all right, well let’s work out some strategies about where we go from here’, they were appeased. They were a professional couple and there very much seemed to be an equality between them.

The thing that impressed me was that they realised they needed to work together to fix things.

And that’s what I mean about good timing. It was all in our favour.

Firstly there was the fact that we spoke to them both at the same time. It could have been only one or the other and I’m suspecting if it had been Mum for example, she would have been insisting Dad should be present. He would have
They got very excited very quickly about the possibilities for change and started talking about having a family meeting that very night to begin the new regime.

My colleague Carolyn and I were initially thinking, ‘whoa this is moving a bit fast’. We didn’t want to dampen their enthusiasm but we didn’t want it to be half baked either. The parents had some simple ideas about how it would go so we needed to work on that and find a way to help the kids recognise deep change was on the way. And would stay.

I asked about the implements they used to beat the children. I said, ‘can you show us what they are?’ They got them out. It was a kitchen ladle and a leather belt. Then I suggested, ‘okay, what do you reckon if when you have your family meeting, you tell them you have been doing the wrong thing and that it’s going to change. You can ask if each of them would like to take one of the implements, go to the wheelie bin outside and chuck it away.’ Of course Mum then said, ‘I still use that ladle for cooking.’ And the Dad said, ‘but that’s my good belt’ but we said nothing more. And you could see the eye contact between them as they thought about it and realised it was the symbolism which was important. They said, ‘I’ll get another belt’ and ‘I’ll get another ladle.’

The next morning Dad rang me early and he told me the kids had strutted their stuff outside and chucked the things away ceremoniously.

received the information from her later that night and the result could have been different. As it was, they were able to respond together and immediately commit to a plan.

The other bit of good timing was that I’d discovered in my research that this was the time of the Hindu festival of Diwali. Diwali signifies renewal and thanksgiving and is one of the most important events on the Hindu calendar. As it turned out, the parents were able to use this celebration to start on the changes which needed to be made. It made sense to them and to their boys. It was an opportunity to make improvements which everyone could embrace.

Our discussion with the parents centred around two things: their physical punishment of the boys and their constant threats of calling external authorities like the police or the ‘children’s home’ if the children didn’t follow their rules.

From our experience, the boys’ behaviour was fairly normal but to the parents it was very ‘naughty, rude and defiant.’ They had been trying to correct it with threats ‘you’ll go to gaol, you’ll go to the boys’ home’ and of course it wasn’t working. We explained in detail that by using external power figures, they were sabotaging their own roles and power in the family. And the boys were going to undervalue them. The parents got the idea immediately. You could see them looking at each other, their minds ticking away. We spoke about setting limits, being a united tag team and essentially setting the agenda for the way they wanted the boys to behave. They saw that their own physical discipline was triggering aggression in the boys too.
He told me he had used the Diwali festival to explain why these changes were happening now and the kids recognised from that point, things would be different.

Of course, we all know that as a parenting issue, it’s a lot more complicated than that but for this family it was a workable and effective beginning. Dad also told me he and his wife had come up with 20 new rules and we suggested that 20 is a lot for young kids and helped them prune them back. But the intention was there and the belief in their power to change things. Both parents were taking responsibility now for how they had punished their children. They saw there were better ways and had moved on.

I continued to work with the family intensively for a short period of time before lessening contact and closing the case. The last time I heard from Dad, I was absolutely amazed to hear his wife had decided to resign from her current job. It was a long commute and she realised it was increasing family stress. She planned to take up a new role closer to home and was looking forward to more time with the boys.

I took Mum’s decision as a sign she was recognising the struggle she’d had and it didn’t have to be that way. It was a great result and I imagine, a very different Diwali.
Reflection

This case highlights some important points for our casework with culturally diverse families. I was struck by the message that to engage effectively with a family it is important to identify and be respectful of their cultural background and religion, in addition to using an interpreter if needed. We need to be aware of differences in traditional parenting and discipline practices, the traditional gender roles of parents, differences between generations, and explore those differences with the family to get a clear picture of how they see the situation. When developing a safety plan with the family, the caseworker realised that it was valuable to incorporate their cultural practices and strengths.

Echo Morgan, Manager Multicultural Services Branch, Department of Family and Community Services

The children’s experiences were at the centre of discussions about what needed to change and implementing a plan for the future.

How do I ensure that children and young people’s experiences are central in my practice?

Casework practice is enhanced by respect for a family’s cultural practices and beliefs, considering how these might influence parenting style and family functioning.

In what ways do I incorporate cultural consultation into my practice?
Rebecca and Laura: Sam comes home

“It was a struggle in himself, part of him was saying ‘well, they didn’t want me so I’m not going back.’ But another part was saying, ‘I miss my parents and I want to be with them.’”

Laura, caseworker, Department of Family and Community Services

This story is told by the manager casework, Rebecca and the caseworker, Laura.
Rebecca, manager casework

Sam was only 11 when police charged him for assaulting his mother. He had very violent behaviours and he intimidated Karen, his Mum, so much that she was scared to live with him. The parents were adamant that they couldn't have Sam in the house the way he was. Because he was so young, Juvenile Justice couldn't accommodate him and he came to us. We found Sam a six month placement with an NGO youth service.

From the very start we knew that the best thing for Sam would be to get him back home. But we also knew there was a lot of work to be done before that could happen.

It was a hard case, and an unusual one. The parents weren’t causing direct harm to Sam; rather the threats were from him towards them. With Sam’s repeated assaults, Karen became powerless and was unable to manage his behaviour. Sam was the dominant figure in the household especially when his Dad, Warren, wasn’t around. Warren did shift work and most of the time it was just Karen and Sam. We talked with Warren about changing his hours to be home more but with his job this just wasn’t possible.

Laura, the caseworker, worked out we needed to focus on two things. Firstly, we had to build up Karen's confidence and both parents’ capacity to manage Sam. Secondly, we needed to get a more definite idea of what was happening for Sam, whether there was an underlying problem and if there was, how to manage it. There were a lot of services involved supporting Sam in his placement and working with Sam and his parents as part of the longer term goal of him returning home.

Laura, caseworker

I stayed with Sam in a motel that first night. The first contact with someone is really important and early on I was able to develop a good relationship. We went out to dinner and we talked a lot. He was respectful; he really did listen to what I had to say. He was quite honest with me so that made it a lot easier too.

The next day I went to Sam’s school to let them know what had happened and find out how things were going. I knew his attendance had been poor and he’d taken off all the time but I was shocked by their poor opinion of him. So we held some meetings with the Department of Education and got Sam referred to a different school. We wanted a clean slate for him.

We talked a lot with both Sam and his parents and one of the big issues we identified was that Karen and Warren weren’t really united. They had very different parenting styles. Sam’s behaviour had understandably put a huge strain on them and their relationship wasn’t fabulous when we first met them. Sam could see they weren’t a united front and he played on that.

Sam’s parents had run out of ideas and the focus was on helping them look at things a bit differently. For example, the family home was a two bedroom unit so there wasn’t a lot of space. We talked
about rearranging the lounge room so that Sam could bring friends over to watch a movie; re doing his bedroom so he really felt part of the family. Practical things like that.

Once a week Sam would go home and stay for dinner. He also visited his parents on weekends. This contact was really important to move towards the goal of reuniting the family. Karen was still very fearful about Sam returning and it was important that she could see for herself the improvements in his appearance and behaviour.

Burnside, one of the agencies involved in this case, did a fantastic job. Through their Family Preservation Program they worked with Karen and Warren for about 12 months. The focus was on safety planning, parenting skills, setting boundaries and building routines and strategies to manage Sam’s behaviour more effectively.

Sam missed his parents and did want to be with them but at the same time the placement was working out well. Sam’s a kid who gets bored very easily. When there wasn’t much happening at home, he used to wander off and hang out with friends. His mobile phone was never on and half the time his mother didn’t know where he was. The placement gave him structure and routine and lifted him up to be really involved in what happened during his week. We fed those routines back to his Family Restoration worker and they were put in place in his family home. A chore chart helped him structure his day, a reward chart gave him an aim. Even though Sam was
taking it out on Karen, a lot of his anger was actually about his Dad. This came out as we talked and when we explored his behaviour with him. Sam badly wanted a relationship with his Dad but when he was home from school, Warren was at work. On weekends, Warren would either catch up on sleep or go off and play golf. Warren loved his son but he didn’t know how to show him that love. The two of them never did anything together.

Getting Warren involved was essential. Initially he didn’t want to be part of the case plan, citing work commitments. I made sure to schedule meetings and family therapy sessions around his shift work. Warren began to see that he had a really important role to play.

From the start the different agencies involved with the family were committed to working together. That’s how we managed to achieve such a good outcome. Initially the police were reluctant to bring Sam home because of the risk he might pose to his mother. But they also understood that there were risks for Sam in the future if they didn’t. We held regular meetings that were attended by the school, the police, Sam’s doctors and specialists and our discussions about his progress were very frank.

By the time Sam moved back home, six months later, everyone felt it was right. I’d been able to reassure Karen that she would be supported.

Both parents felt much more able to manage his behaviour and noticed significant changes in him.

They found him more open and honest with them and he respected the new routines and rules. With Karen we’d worked on the idea of introducing safety measures without restricting his freedom too much. It’s such a fine balance for a parent, especially with a kid like Sam. So he was allowed to go out - on the condition he kept his phone on and rang his mother if he was going to be a bit late.

The new school has been amazing for Sam. He’s developed really good relationships with his teachers who deal with him in a firm and positive way. And the school’s also very supportive of Karen. They have almost daily contact now that Sam is back home. Karen will call the school and say, ‘look, this is what happened this morning, he may be a bit agitated when he arrives’. And the school does the same thing ‘Sam’s left school now. This is what happened today.’ So each side can have a bit of warning and understand where Sam’s coming from. They know what to expect, they work as a team.

I’m not saying we fixed everything. Sam is a kid who pushes boundaries but we definitely put strategies in place to help him and his parents and they’re in touch with services that can give them ongoing support.

This family was in so much pain and together with the other agencies, we helped bring them back together.

We closed this case in January 2013 and since then we haven’t had any reports. Given Sam’s history that’s got to be a good sign.

He’s back home where he belongs.
I really like this story because it shows how relationships based on persistence, respect and clear bottom lines can lay the foundations for getting kids back home. As I was reading it I thought that things could easily have turned the other way – with Sam forming new connections in his placement that could have taken him further from his family. Laura’s hard work paid off – she put time into getting to know Sam and she supported his parents with practical help, structure and support. They shared the same goal and had a genuine partnership in working to get Sam home. It’s a great ending and its great casework.

Ed Apon, Practitioner Advisory Group member, Manager Client Services, Department of Family and Community Services, Community Services

Working collaboratively with interagency partners provides practitioners and families with expertise and services to meet the needs of the family.

How do I work collaboratively with other agencies to the benefit of families?
Kristen & Winsome: Finding home

“When you’re a caseworker, it’s almost like you’ve got two families. You’ve got your own kids at home and your other kids at work. Yesterday, a worker said to me, ‘how’re your children going?’ and I started talking about the kids I’m working with. She laughed and said ‘No, Kristen. Your own kids! How are they going?’”

Kristen, caseworker, Department of Family and Community Services

This story is told by the caseworker Kristen and the senior regional strategies officer, Winsome.
I’d worked with the family for over a year so it was very hard when we had to remove the children. It was one of the hardest things I’ve ever done. The kids were so attached to their Grandparent’s and so attached to their young Aunts and Uncles... but the risk just got too high.

Kristen, caseworker

Mum was staying at the Grandparent’s house with her three children when I started on the case. They had experienced a lot of transience and homelessness. The little fella was six, the oldest girl was two and the youngest was just one. Mum, 22, was pregnant and an Apprehended Violence Order (AVO) was in place against her partner. We were worried about drug use, medical neglect and domestic violence, including an incident where Mum’s partner threatened her with a knife.

We put a safety plan in place and tried for some months to work with Mum but we weren’t confident that she could protect the kids. She loved her kids but she kept reuniting with her violent partner and continued to use drugs. We made an application for the children to be removed and the court ordered that they could stay at home in the care of Grandma.

I was nervous. We knew the vulnerabilities of that placement. Grandma had a history of crime: she had health complications and had four other children of her own. But alongside the worries, there were a lot of strengths in the placement too; there was a lot of love and joy. At this stage, we didn’t have any other family. This was the only family we had.

We tried everything we could. We organised for a service to go to the house daily to help Grandma with the care of the children; we took the kids to the childcare around the corner; a community nurse was going out to help with Grandma’s health; we got the little fella into school and into Strong, Proud and Deadly, an Aboriginal after school playgroup. We were really happy that he was going every week.

We tried referring to services like Bridging the Gap, Intensive Family Support, Aboriginal youth workers and other support lines. But when the new baby was born and it also needed to come into care, the family grieved. This meant the trust Grandma had for me was damaged and she stopped working with the services.

This meant that the kids weren’t safe so we looked for a placement for all four kids or at least the three older ones to go to together. It was so difficult deciding the best way to go. Do we hold out and keep trying? Do we separate them? How much time do we have? How do we find more kin?

I had found out early on that there was family in South Australia but Mum refused to give us details or numbers or even the names of the fathers of the children. And Grandma said that no one in South Australia would help. So I went on this search myself.

I started through Centrelink, with interstate files, contacting people, one by one.
I would ring one woman and she’d say, ‘you should probably speak to this Aunty’ and then I’d ring that Aunty and she’d say, ‘you know what? You should speak to this person.’ I was just ringing everybody.

It was months of just being patient, but I’d get so excited when I’d get another number. As I discovered more family members, I started organising assessments for possible placements.

I’d been going to the Cultural Awareness Panel for support and guidance from the beginning and they gave us incredible advice, especially with cultural understanding around respecting the way Aboriginal families work and who you need to talk with when a child comes into care.

We decided that that we would go to South Australia to meet with family and include them in the conversation about the children’s future. I wanted to show respect and to say, ‘this is what’s happening. The children are in NSW and now they’re in care. You tell us what you think is best for them and we’ll try and see if that’s a possibility.’

It took weeks to organise and then suddenly it was a reality. Just before the placement with the Grandparents broke down, it was approved for me to travel to South Australia with Winsome, an Aboriginal Senior Regional Strategies Officer from the Panel.

So off we went on our little road trip and we drove and drove and drove…

I was so worried it wouldn’t work because I didn’t have much of an idea who would turn up. But on the day, it was overwhelming. Everyone was there: the Aunt, the Grandmother, the great Grandmother, the Great-Great-Grandmother, the Grandfather, more Aunts.

We sat down and Winsome spoke about her role on the Panel and the fact that Aboriginal people were overseeing the work. They really loved that we had come so far to see them and that Winsome, this amazing Aboriginal woman, was saying that the Panel were there to make sure things were done right.

You could see they were empowered. They were all sitting there, thinking about solutions and putting their hands up to help care for the children. Winsome was able to open a conversation, a very difficult conversation, about what might inhibit the children being placed with them.

And they were able to speak openly about how their own experiences impacted on their own parenting and how their current situations would impact on helping now.

I wanted to be very up front about the assessments and how we might get over some barriers but not get over others. I took photos of them to show the little fella. ‘Oh look, these people love you,’ I told him when I got back.

I’ve never left a meeting about children in care where I was being cuddled and
hugged all round. It made me so hopeful for the children and I came back home with a sense of okay, there’s a lot to be done but there’s certainly a light at the end of the tunnel for these kids.

As I tell the story, the process for long term placement with the family is continuing but we do have a positive assessment. The children are all still living in Sydney and have had to be separated while we are progressing that but they are all happy in their new homes with beautiful families.

The little fella had the hardest time at first. Within one week, he’d been moved twice because emergency placements hadn’t worked out. He was living apart from his sisters and was so unhappy. We didn’t have anything for him and then suddenly, like magic, one of the after school care workers at Strong, Proud and Deadly stepped in to help. We have completed an assessment of this fantastic woman and it’s been a great placement.

That was the beginning. Then it was all telephone conversations. The beauty of Kristen’s role in all this was how she sustained the good communication lines for the business to get done proper. I know my people: if they weren’t bothered, they would never have answered that phone from her or never taken the calls…but they did.

There has been a growing affection for Kristen with the mob in South Australia because of the respect and dignity she brought.

Those calls were integral to the forming of a relationship and that’s fundamental to Aboriginal people. The culture is relationship.

Unbeknownst to Kristen, she was demonstrating a real, natural cultural competency. I take my hat off to her.

By the time we got to South Australia, I was pretty much just a gap filler in terms of actual face to face, on the ground, cultural practice. She’d enabled my engagement. My role as an older woman, and an Aboriginal woman, was to fill the cultural void and to ask the hard questions. I suppose it’s better that the hard questions come from a black face than a white face.

We managed a deep conversation with the family where they were able to talk about what stood in the way of having the children returned to them. Things like the roles and behaviours of adult men in the house where their own children might be residing.

Winsome, Senior Regional Strategies Officer

The first thing Kristen needed to do was seek out the location of this mob and over two months she came back to the Panel with lots of knowledge. She’d located the matriarchs of the clan.
They talked about their experiences, particularly negative experiences, that have led to drawing a line in the sand for their own values and creating better well-being for themselves.

These are hard things to talk about. They would never risk the kinship of family and relatives but in this brand new world, where the care and protection of children is paramount, there are certain conditions that need to be laid down amongst the clan. Conditions that give viability to you as an Aunty to do your job.

The caring and rearing of children, family and community is proper woman’s business and those women were stepping up to their responsibility. They were remembering their sister and saying, ‘I know she would do this for me.’

So the leadership were there to do the business, forming a collective of inter-generational women to care for and share these children.

The Aboriginal Cultural Awareness Project Panel is all about creating bridges so children can be returned to that tribe – to their kinship systems.

The Strong, Proud and Deadly afterschool playgroup that the little fella was going to is one of those bridges. All the Aboriginal children in foster care, whether they’re with Aboriginal or non-Aboriginal carers have the opportunity to come together and see positive role modelling of Aboriginality back to them.

It increases the strength, practice and pride in their identity and cuts across their worrying about their family. They’re able to talk about how they feel and they so get it. It breaks my heart that they’re so young and they get it.

When we had an absolute emergency in finding a good place for the little fella, one of the workers from that centre was able to open up her home to take him in. It’s a great example of how a cultural bridge can provide lots of good normality

When Kristen dropped him off, his new carer offered him a didgeridoo. She said, ‘welcome to my country, welcome to my home and this is my gift to you.’

That little fella is so happy, he’s raging around in that place now.

And I’m thinking, ‘oh my God, that young woman knew just what to do. We should be writing this woman’s practice up as a standard. As a way to begin.’

Someone said it takes a village to raise a child. Well, in Aboriginal context, it takes a clan and a tribe. And a bridge to get us there. ●

* Since writing this story we are pleased to report some excellent news. One of the Aunts in South Australia has been assessed and approved to have all four children in her care. Kristen will support her with this move so the children can settle in with her as smoothly as possible.
Before working together with this family, Kristen and Winsome did not know each other and it has been amazing to watch how their one common goal of wanting the children to be placed with kin has brought them together. The outcome for the placement of this case is still unknown however what is known is that through Kristen’s tenacity and determination and Winsome’s knowledge and communication style, no stone has been left unturned.

The Aboriginal placement panel is the forum which brought these two workers together; it has supported and provided guidance on the work that has occurred increasing not only Kristen’s cultural competence but the cultural competence of her colleagues during group supervision. It has been such a lovely journey to be involved in and I am so proud of their work.

Angela Tarlington, Manager Client Services and Practitioner Advisory Group member, Department of Family and Community Services, Community Services

Kristen and Winsome have demonstrated the importance of the children’s kin and community being able to participate in the decision making for the children. How does your practice reflect the Care and Protection Practice framework principle “We respect culture and context” when working with Aboriginal families?
Margaret: Room to Let

“I’d been a sole parent myself but I had a lot of family around to support me. Sarah had no one in Australia, absolutely no one. Except us. We were her family.”

Margaret, caseworker, Department of Family and Community Services
Sarah’s problems began back in India when her family forced her into marriage with a man sixteen years older, her cousin. They became engaged when she was just 14 and came to Australia on Sarah’s student visa. Her husband was very controlling in their home country but the physical abuse began here. They have two daughters and both times Sarah was pregnant, she was taken home to have the baby and both times she was pressured by her husband to leave the child with family.

With the second baby, little Mala, Sarah was able to defy her husband and bring her back. From what I can understand, life in India was very repressive and with little opportunity for education. I think Sarah’s time in Australia opened her eyes to what is possible. She also came to understand that she didn’t have to live with domestic violence.

Sarah decided to leave her husband after an assault where the police were called and an Apprehended Violence Order (AVO) was issued against him. Our team is located within a police station in Sydney and we work side by side with them as an interagency domestic violence response team.

I’m a child protection caseworker and I knew in order to help three year old Mala, we first needed to help Sarah. She was just 23 and under intense pressure from her family in India.

Returning home was not an option for her and she said she was afraid she would be ostracised and punished. All financial support from the family was cut off when the marriage ended, including her college fees. Sarah had a few subjects already paid for and she was determined to keep on with her studies. She was working for cash in a café, working the longest hours she could and trying to keep studying at the same time but it wasn’t going well.

With her husband continuing to breach the AVO, we had real concerns for the safety of Sarah and Mala but no refuge would take them because she was on a student visa and she wasn’t entitled to financial support. We fished around everywhere including local councils but there was nothing, absolutely nothing. We supported Sarah with clothing and food. She is a very resourceful woman though, she’d put notices in the letterboxes of apartment blocks and sublet a room.

Sarah worked and worked and saved every cent she could. The situation wasn’t ideal for Mala, who was cared for by neighbours, but at that point there was no other option. It was heartbreaking - Sarah just wanted Mala to be educated and she wanted an education for herself. I guess I saw in her a lot of potential but for a while there, it was very shaky because she was in this strange country on her own - second language and all that comes with it.

We knew the only way to keep Mala safe was to empower Sarah and support her application for a Protection visa. We
started learning all we could about how to make it happen. I discovered there’s a family violence prohibition program and under certain circumstances, a victim of domestic violence can eventually get some concession from immigration with the right evidence. The AVO was our essential proof. I found someone locally who gave me lots of advice including a Tribunal we could contact if we weren’t successful with the Department of Immigration.

We knew it would be a long journey and the last thing we wanted was for the college to suspend Sarah’s student visa in the meantime. Because she was working so many hours, her studies were suffering and she couldn’t continue to pay fees until her financial situation improved. I got on the phone and told the administration that Sarah had a few legal issues to sort out because of the domestic violence. They agreed to let her defer and hold the money she paid in advance over to the next semester.

We worked closely with Sarah throughout the process. Lots of visiting, telephone contact, texts and going along to services to support her, especially with her English. She would ring and say, ‘Margaret, can you come with me?’ and of course I did.

Our first visit to Immigration to have her matter heard was unsuccessful. It was a terrible experience. We saw how easy it is for non English speakers to be misunderstood and suffer badly for it. In one of the hearings, when the interviewer asked Sarah what it would be like for her if she had to return home, she said she would be ‘teased’. The interviewer didn’t delve deeper and so he took away a wrong impression. I knew what she meant because of what she had told me. She meant that she’d be subject to sexual approaches and abuse and her little girls would be vulnerable and looked down upon because they didn’t have a father. Sarah was hesitant to say that, so she just said ‘tease’ and the interpreter left it at that.

The solicitor said, ‘don’t worry about it, we’ve still got the Tribunal’ and that was good advice. We received a wonderful hearing there with a good interpreter and a sympathetic reception.

The process took 16 months but Sarah eventually did get her visa which meant she and Mala could apply for Australian passports straight away. We’d been able to support her during her divorce proceedings too and it was granted by the Family Law Court the very same day. We had a lot to celebrate.

I think Sarah was so strong to do what she did. I’m not saying life is easy for Sarah as a single parent, she has to work really hard to pay the rent and there’s never a lot of money left at the end of the day. But she and her daughter are safe and free and of course, we’re still in touch. We’re the family now.
Margaret clearly understood the risks in this case, the very real danger Sarah and Mala faced at the hands of her violent partner but also the way this risk was complicated by her isolation and the obstacles she faced in trying to look after herself and Mala alone in a new country. This story really highlights Margaret’s understanding of Sarah’s situation and how this was impacting on Mala. Margaret was a strong advocate for Sarah and I admire her tenacity in helping her to negotiate a range of very complex bureaucratic and legal systems to help her with immigration, family law and her studies. It is fantastic to celebrate this work because without the support of Margaret there may well have been tragic outcomes for Sarah and Mala.

Pam Swinfield, Assistant Director Community Services Child Deaths and Critical Reports unit and member of the NSW Domestic Violence Death Review Team

Caseworkers need a solid understanding of the dynamics of domestic violence and often need to advocate for clients who are negotiating complex systems.

What helps me to learn about and negotiate complex systems when this is needed?

What skills or support do I need to be an effective advocate for my clients?
Carol and Rebecca: The white car

“Mary called me a few months ago even though I’m no longer her caseworker. She said that she wanted to talk to me before she called anyone else. She needed some support and she trusted me enough to ask.”

Rebecca, caseworker, Department of Family and Community Services

Carol is a PACT (Protecting Aboriginal Children Together) cultural support worker and Rebecca is a Community Services caseworker. They are working alongside each other in a pilot site for PACT.
Rebecca
We’d been called to see Mary, a Mum with four kids under six. Carol met us there. It was the house of an Aboriginal family well known in the community. The paternal Grandmother answered the door. When Mary saw us she was very agitated.

Carol
Mary couldn’t listen to anything. She was just screaming. All she wanted to know was whether we were going to take her kids and that was a question Community Services couldn’t answer at that point. I tried to introduce myself as a PACT worker and asked what I could do but she declined my help. She was so worked up so I said ‘I’m going to sit in the car for a minute, in case you change your mind.’ And off I went.

Rebecca
I tried to answer her questions about why we were there and what the process would be. She was panicking but as I was talking it was like she suddenly remembered Carol. So she asked, ‘that lady in the car? What does she do?’ I said ‘why don’t you talk to her and find out?’ And she said ‘yep, I want her!’ It was then that she started to calm down and we started to get through.

Carol
I stood in the yard alone with her, talking quietly. I was able to explain what was happening and told her about the importance of keeping calm and listening. When we went back to Rebecca and the other caseworker, I said in front of them, ‘Mary, it’s really important that we be honest today. When they ask questions, answer them honestly because that’s something Community Services can work with.’

Rebecca
There were three police there at the time and that made it more difficult for us and must have been overwhelming for Mary. They weren’t going anywhere though
because they had a warrant for the arrest of a man who lived in the house. He was the father of Mary’s oldest child and is extremely violent. He is known to hide in places around the house so the police were checking it, making sure we were safe.

It’s always difficult in this sort of predicament. We’re there trying to make an assessment to decide if we can work with this person. And obviously, when we do that we’re coming from a very logical point of view. Whereas for the other person it’s emotional, and they’re shocked and feeling blamed and judged.

Carol
Mary’s anxiety went up and down throughout the whole process, didn’t it Rebecca? It was a whole day we were there. It was a long day. Grandma helped as much as she could, especially with the two littlies and she made a phone call to bring other family down to the house as well.

Rebecca
But it was quite devastating for Grandma. She was trying to be protective of Mary but this was the house where her own son lived too. She didn’t know where to turn.

Carol
She was asking us what to do. The thing was that she didn’t want Mary to stay there because she didn’t think she could control her son enough to protect her.

Rebecca
She wouldn’t have admitted that if Carol hadn’t been there. No way.

Carol
Grandma didn’t have the heart to tell Mary she couldn’t stay there because she was her only support. It was a very hard thing for her to do.

Rebecca
By the end of the day, Carol was able to get Mary to agree to our safety plan. She got the extended family on board too. Our assessment showed that the children were in immediate danger and we needed to get them into overnight accommodation and then into a refuge. Mary’s agreement was the crucial first step for us to be able to work with her.

Carol
I remember Mary was trying to pack and it taking ages so I told her, ‘I’m going into the house and I’m going to pack your bag myself.’ I can say that sort of stuff. I’m community, you know, so it’s really beneficial.

Later, Mary and the kids were in the car with me on the drive back to the office when Mary said, ‘I’m sorry.’ I said, ‘that’s okay. It’s been an emotional day for you and we’ve gone with the ups and downs.’ And then she said, ‘I didn’t know Community Services done this helping stuff. When I lived at home, police and white cars came to my house and took some family…’

I realised that had been the trigger for her. The white car had brought it all back.

Rebecca
The only place we could find refuge accommodation for her and the kids was in a town down the coast. We were worried about that. We’d identified that one of the biggest fears Mary had was
that she didn’t have any real support or anyone to trust. Carol was able to look into the new community, link her up with support services and find out if Mary had any family down there. She engaged quickly.

Carol
One of the main things I needed to do along the way was to help Mary trust Rebecca. And we were able to do that. In the end, she would bypass me and ring Rebecca direct!

Rebecca
It was up and down for a while. I remember once, after talking to someone, Mary got quite cross with me about how much help I could offer. It was hard because we’d been making really good progress. Carol was able to talk to her about our role, what we could do and couldn’t do and help her understand, in a culturally acceptable way, what was okay and what wasn’t. Mary called me back later and apologised. I was so happy. We’ve developed a really nice relationship based on mutual respect.

Carol
You take it little by little. When there’s a communication gap, I’m the middle person. Sometimes that might mean asking a question that the person isn’t confident enough to ask. That happens a lot. A family will sit there real quiet and I can see they’re not understanding what’s being said so I ask the caseworker to explain it to me. It’s like I’m asking but it’s the family who are listening.

Rebecca
Our case with Mary has closed now because her kids are safe. She has her own house. The refuge assisted with that and we wrote support letters for her. In the end, she wanted to stay in the new area – that told us how well she and the kids have settled. She has her own caseworker now and the family are getting a lot of support.

This was a great case and one we all talk about often to show the value of PACT and Community Services working together. I don’t know how things would have turned out if Carol hadn’t been there but I know it all would have taken longer. And considering how it started out, I don’t think we would have had the results we did.

Protecting Aboriginal Children Together (PACT) is an advisory service assists those Aboriginal children, young people and families who engage with the NSW Child Protection system to support their decision - making in the best interests of the child and young person.
Reflection

This is a great example of how hard our staff and agencies work together in engaging families to build trust and help break down barriers. While Community Services has come a long way in changing how difficult it can be for many Aboriginal families to work with us, there is still fear and trauma associated with the child protection system and the work we do. Having Aboriginal services, like PACT, involved can really help to bridge the gap and provide the additional support that many Aboriginal families need to help them through the process.

Bianca Jarret, Manager Aboriginal Services Branch, Department of Family and Community Services, Community Services
“In this job you don’t often get thank you’s, and you don’t expect them either. But in this particular case at the end of the process, the mother actually came in and gave me a card and some biscuits and she said, ‘Thank you for all your support and understanding.’”

Yvonne, caseworker, Department of Family and Community Services
This is a story about a family in crisis made up of five young children whose parents couldn’t cope with their varied needs. The children and parents were in conflict over their unhappy circumstances, which culminated in Mum hitting Maxina, who was 10 years old. The police placed an Apprehended Violence Order (AVO) on Mum that excluded her from the family home. This meant the Dad was suddenly responsible for the total care of the children.

Community Services became involved due to concerns the children were at risk and to provide support services. The initial safety and risk assessment of the family showed real difficulties. One of the children has cerebral palsy, two were on medication for anxiety and depression, and the older kids weren’t attending school. Dad’s trucking business had gone bankrupt and the family ended up losing their house as well. They’d been jumping from rental property to rental property, with no permanent place to call home.

We organised an interagency meeting and brought together disability and respite services that knew the family. This was important in gaining an understanding of all the issues and not simply responding to the one violent incident. Offering real help, not blame. The family didn’t have a long history of problems; the parents didn’t hate each other. They were just overwhelmed and crying out for support. But they also didn’t want to make it obvious they weren’t coping and it was almost a matter of giving them permission to not cope, of saying ‘It’s okay, given your situation.’

We all know that having Community Services turn up on your doorstep can be a scary thing. As soon as people hear you say Community Services they get defensive. They don’t always want to tell you the whole story in case you use it against them. And initially Mum did feel everyone was blaming her. But you know, I could see how hard it was for her. She was only 29, three years older than me, with five kids all under the age of ten including one with disability and two with behavioural problems. That’s so much. There’s no way I could have coped with all that she had to deal with.

The key to the case plan we developed with the family was involving other agencies. In total, seven services worked with them directly and indirectly. The aim was to reunite the family and to make it possible for the children to enjoy one on one time with their parents. Simple activities like having a hot chocolate or going to the local park.

The Barnardos’ worker was a real gem. He developed a 12 week program and visited the family at home twice a week. He introduced them to rewards charts and the thermometer idea so that when voices became raised in the house they knew to bring them down a notch. These were practical tools that the kids could really understand.
So there was good work going on but the big problem remained. Mum couldn’t come home and that meant Dad was on his own struggling with the children. We paid for Interchange to do extra hours and provide domestic help, as well as respite care, but he still got to breaking point. I mean, a sole parent looking after five children with lots of different needs and having no experience doing it on his own – honestly, how long is that going to last?

We had concerns for Mum too. She had engaged so well and was meeting all her goals on the case plan but several agencies were due to withdraw support from the family at roughly the same time. This meant that when the AVO was lifted, she would return home with little support. We worried that we weren’t giving the parents enough of a chance to put into practice the things they’d learned.

So I liaised with the other services working with the family and we wrote to the Magistrate asking for the AVO to be amended to allow Mum to return. I got them all on board; the school, Interchange, Barnardos, Disability, the whole team. We reasoned that if Mum was allowed back home we would have time to observe and support her with the children, while still keeping them safe, and deal with any problems that might arise before the matter was closed. And yes, we got the AVO amended so Mum came home and we all started working together. We made sure that once we closed the matter, the family would be picked up and supported by the Brighter Futures program.

This sort of cooperation between agencies - combined with support workers who love their job - gets great results. Here’s an example. I knew the police were going to go and check on Maxina, the 10 year old, to see how she was going, because she’s the daughter Mum hit. And I knew that at this stage she was getting into trouble for stealing stuff from home like her Mum’s jewellery and her sister’s school lunch and so I said to the police, ‘next time you go to see her, can you please have a little chat to Maxina about the consequences of stealing? It would be good to get to this now before it turns into serious shop lifting.’ The police officer said, ‘sure, no worries.’ Off he went and gave her a gentle word on what it meant to be caught stealing, which was so perfect.

One of the most positive things about this particular case is how Mum took advice on board. With all my clients I try to set up a really honest relationship. I’ll say: ‘Sometimes I’m going to tell you things you don’t want to hear and sometimes you’ll tell me things I’m not particularly happy about. But we’re going to work through it, that’s part of the process’.

She was happy to accept my phone calls, happy for me to tell her things she didn’t particularly want to hear. She would actually call me and say, ‘hey this is what happened on the weekend, is this okay?’ She was always trying to do better.’

During visits, I used to take the children to the park to play and we’d look for
crocodiles and pretend to be pirates. I loved those times because they made me realise the kids were happy where they were. Things were okay, there was love, we just needed Mum to manage her stress better.

The family situation has changed a lot since then. Now the older children attend school happily, the toddlers go to day care twice a week and the two who could be hard work have been taken off medication. The family never used to do nice things together because the parents found being out with five children too stressful. Now if the children are good during the week, on Fridays they all have movie night and the kids are allowed junk food.

I’m the newest caseworker in this office; I’ve been in the job for just three years. On the thank you card the Mum gave me at the end of our casework, she wrote: ‘P.S. The kids miss seeing you.’ How beautiful is that?

I’m struck by the quality of Yvonne’s empathy – really putting herself in the place of the Mum, especially, and the Dad. From that, and a close understanding of the family and its dynamics, comes the ability to suspend judgement and work on what can change for the better. She then took responsibility for closing the gaps in support, or perhaps joining the dots so the sum of everyone’s efforts with the family was far greater than the individual parts. Getting the Police Officer to nudge Maxina and make gentle use of the authority of the uniform was inspired.

Michael Coutts-Trotter, Director-General, Department of Family and Community Services
Chanel: Two sons

“No agency is more important than the other; we undermine ourselves when we think we are. It doesn’t take a star in each field – it takes people willing to work together. “

Chanel, manager casework, Department of Family and Community Services
Max is 15 years old, academically gifted, talented in art and blessed with good looks. He’s got lots of friends and a mother and father who adore him. Max wants to study engineering and arts in three years’ time. Yet five days ago he attempted to take his life.

Max has a secret and once he begins telling it there’s no turning back: his words set a process in motion. We receive a report with some of the background. Between the age of 5 and 14, Max was the victim of sexual abuse by his brother, Bill, who is now 19 years old.

Max’s mental health is fragile and we are very concerned about him. He has been having counselling for five months and we get more information from the counsellor, who is relieved to have support.

This type of cooperation is vital and invaluable. We have to work together with Max at the centre.

As pieces of the puzzle emerge we start to get an idea of the complexity of the situation. We learnt Max is depressed, has bulimia, is questioning his sexuality and doesn’t feel good about himself. He has alluded to the abuse but not fully disclosed it. His parents became aware of it some months earlier via a letter from Bill which referred to the abuse. Their world will never be the same again.

Since then they have been trying to desperately deal with the issues themselves. They are hardworking, nurturing and loving parents, whose world has revolved around giving both boys the best opportunities. Understandably they do not know how to deal with this situation.

Dad shuts down. Mum wants ‘to make things right’ as she has always done but this time she can’t fix things. No one can speak about the ugly truth. The parents understand they need help but they’re also fearful of the secret about their family getting out.

We know we have to act quickly. First we make contact with the mother who is so distressed that we’re concerned about whether she can cope. She has depression and is a survivor herself – another family secret. She’s a Mum who has spent her whole life raising her beautiful boys and they are both precious to her. She cannot sacrifice one for the other; she’s fighting to keep the two of them alive.

Sibling abuse cases are incredibly difficult for the parents because within a very short space of time we expect them to share our vision of safety for the victim and to do what we ask of them.

But they often swing between the needs of the victim and those of the offender, and for this Mum and Dad it’s an impossible position. It’s even worse for Max because he loves all of his family, including his brother.
Bill, who has been getting counselling, is remorseful and feels very exposed and guilty. He knows that Max has tried to take his life and he has a strong sense of the role he played in that. Bill is also threatening suicide.

In cases like this we can’t draw on our familiar coping strategies. Our usual practice is to ‘demonise’ the offender as a way to stay focussed. We draw our lines in the sand and march forward. But in these matters we need to humanise the offender. Max was 5 and Bill was 9 when the sexual behaviours started and they progressed from there, for nine years.

We also can’t ignore the fact that Bill’s life is at risk now too but Max is our priority and his immediate needs are our absolute focus. We get the parents to agree that there will be no contact between the brothers in the immediate future and during the assessment phase. We breathe a small sigh of relief; getting the parents to cooperate is a significant step forward.

The next challenge is to get Max to consent to an interview. He needs to know his rights, he needs to be given the chance to speak about his experiences – he’s never spoken of the details before. It’s important for children and young people to tell their story. Even if they decide not to pursue things like counselling or criminal action at least their story would have been heard.

I work in a tri-agency setting consisting Family and Community Services, NSW Police and NSW Health. We’re all under the same roof, which is a huge advantage. We can access each other quickly and draw on the skills and expertise of the team leaders and staff of the different agencies. All three agencies spend hours briefing, debating, consulting and discussing how to proceed. We go through all possible scenarios for our meeting with Max; we script the interview. Our immediate goals are to engage and empower him through our intervention. We need to understand his experience to know the best pathway for him and what services he might need and things like whether a medical examination is necessary.

The three agencies discuss what a good outcome would look like and we agree that the immediate goal is to preserve life.

Just imagine if, in a family of two adults and two children, both boys committed suicide? That would be an absolute tragedy. Ultimately we have no control but we are responsible for doing our best. These young lives weigh heavily on us; we’re really conscious of the need to get it right. No amount of coaching or training truly prepares you for this kind of responsibility, it’s a bit unreal.

Max arrives at our unit accompanied by his counsellor and his parents and consents to being interviewed. Afterwards, he feels a sense of relief and so do we; so far so good. Mum and Dad ask if Max is going to be removed from their care; all they know of Community Services is what they read.

They no longer see themselves as good parents and they now question their entire parenting history. Everything they thought they knew no longer seems
valid and in front of us they begin to unpick the history of their family.

We reassure them that Max needs to be with them and that removing him from the home was never part of any discussion. They are relieved but still shattered. They leave our unit committed to attending counselling, which is an encouraging sign. They know they have to do it, if they are to have a future as a family.

After our interview, Max has another session with his counsellor. Mum, Dad and Max now want to access more counselling with NSW Health. They all want to stop the secrecy that has debilitated their family and the parents are ready to have the conversation with Bill and get him help. Max doesn’t think he would be helped by taking criminal action against his brother and because of his age, his wishes and confidentiality are respected. In time he may make a different decision; in time he may understand better the dynamics of abuse. For now he has made a good decision to speak up and that’s already enormous.

Child protection can be all consuming and overwhelming. It’s complicated and emotive work but it can be so satisfying. Skilled, sensitive and capable people working together on the front line can really get great outcomes for children and young people. Some cases affect you emotionally more than others. I’m glad I can still feel their impact.

We should be proud of the work we do. Like the day of the interview when Max said, ‘I’m glad I’m still alive’ and thanked our service for the care and compassion he has received. Moments like that make you kind of go ‘wow’, we know we are making a difference.
Reflection

It is hard to think of something more confusing than sibling sexual abuse because we generally think about sexual abuse, boundaries and ambivalence in terms of adult perpetration. There isn’t a lot of research into sibling sexual abuse however the research available indicates the victim is more likely to make suicide attempts, especially between the ages of 14 and 16 years and will frequently be re-victimized throughout life, including physical abuse, rape, and domestic violence. I read with admiration the compassion with which the interview process was planned and how carefully this interaction was managed. It also brought home to me how critically important our interventions can be in the lives of children and families – as echoed by this young man’s comments, ‘I’m glad I’m still alive.’

Deirdre Mulkerin Deputy Chief Executive, Operations, Department of Family and Community Services, Community Services
Robert and Letitia: Once upon a time

“Once upon a time is a term used in a fairytale, a story where the unbelievable happens and there’s a happy ending. This isn’t a make believe tale full of magic and made-up creatures. This is my real life fairy tale, full of truth and life changing events, and of course with a real happy ending.”

Robert, caseworker, Department of Family and Community Services
Robert, caseworker

Letitia, who is an Aboriginal girl, will tell you that her birth family were just not able to care properly for her or her siblings. All the children in the family were abused and were removed when she was 12. They all showed various signs of trauma including night terrors and problems with their behaviour. When they came into care they were separated between three homes.

Letitia and her brother went to live with Letitia’s school teacher and her family. It was only meant as short term respite while we looked for more permanent care however weeks went into months and months went into years. And then the carer wrote us a letter. She said, ‘look, I’d like to keep these kids with me, can the two sisters join us as well?’

From the first meeting, I wanted to give the foster carer as much information as we could. The more information a carer’s got about a child, the more understanding they have to help them. They know where the child’s coming from, they can be empathic and they’re not in shock when they sit down and the child tells them things they never could have imagined.

This carer would contact me and talk to me if she needed to and I supported her in every way that I could. And Letitia would call me whenever she wanted to talk. I had both their trust and could work with them as a new family.

Letitia never hides the fact that she is in care. She says ‘if I didn’t come into care, I wouldn’t be where I am today.’ And now she’s planning to be a social worker herself.

The real stars of this story are Letitia and her carer. They made my work easy. They’ve done the hard yards. Letitia is 17 now and has written the rest of this story. All the words are her own.
Letitia, foster child

Once upon a time in a small rural town there lived a family of four – a mother, a father and two young adult daughters. Let’s call them the Jones. Both parents worked, the eldest daughter had just recently headed off to begin her own life attending university and the younger daughter was at the local school. They lived on a small hobby farm, with lots of your average farm animals - dogs, cats, sheep, chickens and fish. They were an ordinary family and lived an ordinary life but this was about to change.

In another bigger town, lived another family, not quite as small. This family contained a mother, a father, five daughters and a son. Their lives were not ordinary. The parents did not work. All the children went to school and appeared untroubled however they were suffering traumatic events and had many secrets to hold. Things in this household were not right, and people knew it. This family’s lives were about to change too and this happened the day the children were taken away from their parents and moved to new homes.

One evening, a car pulled up outside the Jones’. It held two children from the second family. There was a young girl, only 12 years old called Letitia, and her little brother, only 5 years old called Joe and they had come to stay. Letitia was nervous. She knew she had to be brave for her little brother; it was her duty to protect him. The Jones’ were very welcoming and from the moment the children stepped into the house, they felt the kindness. Letitia didn’t know how long they would stay with the family. At first she was told it was for a few days, then weeks, then months. Over time Letitia and her little brother learnt to trust their new family. As time went on, a bond developed, where the children were able to love and be loved in a safe manner.

Letitia struggled to realise that this was her new family, full of people who were set to protect her from any more harm and to ensure that she was happy. When the Court decided that they could stay permanently with the Jones, the girl felt a sense of relief: they had been placed in the care of a wonderful and caring family.

Birthdays and Christmas’ passed filled with love, joy and of course presents, but the greatest gift of all was the gift of a new family. This family now contained six people, a mother, father, three daughters and a son. However; this was not the end.

The family remembered that Letitia had four other sisters – two of them living many hours away from her with the other two living closer. After many long discussions, the Letitia’s two youngest sisters were to be given a new home at the Jones’ too.

As the Jones family grew bigger and stronger, so did the drama. Because the household now contained seven people, sacrifices needed to be made. Mr Jones gave up his job to be a stay at home Dad, the car needed upgrading, and the bedroom settings changed. This process wasn’t easy and took time, as the two girls had to adjust to the new rules. Letitia would help guide them and be a good role model and help her new Mum adjust to dealing with her younger siblings. Letitia
never imagined how different things were going to be, and then the reality of being in a ‘safe’ environment hit her. She began struggling to cope with her emotions; she was experiencing post-traumatic stress disorder and didn’t know what was wrong with her. This was where her counsellor and foster or new Mum stepped in to help her deal with her emotions and this required real trust. As time went on, the process to inner harmony was reached. It had been just two years and so much had happened. The process of the children developing into adolescence was well on its way; more changes were set to occur. There were many challenges including confirmation that Joe was ADHD too but the mother knew she couldn’t give up, and kept trying. Her determination is one of her well-known personality traits.

Letitia was 14 and in year nine at the local school. She was doing so well at school and had such big dreams that her new family decided it was time for her to transfer to another school one hour away. The long bus trip was worth it. Letitia was able to excel academically and culturally. She was comfortable putting forward her Aboriginal identity, building upon leadership qualities and entertaining through dance, singing and acting. Things were looking great for the girl as she had the potential to shine.

It has now been four years since the family began expanding. Mrs Jones works and is a lovely, caring, trustful, reliable, honest and supportive person. She loves all her children and has set rules and standards as she wants the best for her children. She is the rock of the family. As time has passed, the father has learnt new things and has adapted to all the changes, accepting the children willingly into the family.

The eldest biological daughter is now 22 years old and soon to be married. She has a teaching degree and loves her new brother and sisters dearly. The second biological daughter is now 19 years old, living with her partner and enjoying life with her four-month old baby.

Letitia, is now 17 years old and is completing her HSC. She is an Indigenous Youth Leadership Program scholar and on the Student Representative Council. In the past year she has taken on many opportunities and this is all thanks to the support from her family.

Joe is now 10 and beginning to realise what a family and love is. The second foster daughter is now 13 years old and is developing into a beautiful young girl even though she thinks she knows everything! The youngest foster daughter now 11 years old is a lovely girl too although she doesn’t know how to stop talking and has many lessons to learn still.

This is my story, this is my family, and I’m proud to say I’m in foster care as it was the best thing that has ever happened to me. I have achieved so much and overcome so many obstacles. I will be in debt to my new parents forever. I hold so much respect for my family and my love is never ending. ●
Reflection

My first reaction is that I can feel how much Robert wanted this to work, the transparency, support for the carer and the acknowledgment of how powerful knowledge can be, this was vital to Letitia’s early success in her foster family. His actions were setting them up to succeed. I hope he has a great sense of pride about this.

It struck me that for Letitia, the ordinary was extraordinary, a house, a family, loving relationships, not being bound by secrets. These are the ordinary things that can be taken for granted, but for a child who has lived with trauma these simple things are extraordinary. Knowing the value of stability and certainty for children like Letitia, I did wonder how the system could have given these children a greater sense of certainty sooner.

The importance of family together, the bravery and openness of Letitia’s foster family to value this for these children is incredible. There are very obvious sacrifices for great benefit. Their consistent child and family focus is awe inspiring. Clearly this is not the end of the journey. The achievements of the whole family, the absolute love and respect radiates off the page. I feel great optimism for Letitia and her siblings and although it’s down the track this story gives me hope for their success with their own children.

Simone Walker, Executive Director, Out of home care, Department of Family and Community Services, Community Services

This story reflects the hope and optimism of the children and young people in this family. How do I work with children, young people, their families and carers to create hope and optimism?

How do I support and encourage sibling relationships in my practice?
Michelle: Hope is born

“She is a three year old who has experienced terror...Her eyes flicker when she is scared... She has been so badly hurt she will not let doctors touch her, so her health needs are unknown... She is not violent but will cower from men and growl if they come near her... She is mute... We have grave concerns for her safety and well-being...”

This story is told by Michelle, director, The Salvation Army Young Hope Program
As long as I live, I don’t think I’ll ever forget the first day I met Layla. It was just a very distressing day. She was at her carer’s home and when we pulled up outside, I could hear screaming inside the house and I thought, ‘what am I going to do?’ It was one of those moments where all you know about trauma seems like nothing.

My knock on the door stopped the screaming: the carer came to answer and behind her I could see little Layla in the corner, like a frightened animal really. Cowering. We were two and a half days in and she still hadn’t allowed the carer to hold her. She’d been screaming non-stop for two days with no sleep; constantly dissociating, accepting only dry bread and bananas. She didn’t know how to play with toys.

I got down on my knees in the doorway and laid my hands open in my lap. I told Layla who I was and said I wasn’t here to hurt her. I said I wanted to help her and that she was very safe. I said I would just like to meet her. She walked up and put her arms around my neck and well, I didn’t anticipate that. She stayed there for nearly three hours, shaking but the screaming stopped. By the end of that visit, Layla allowed the carer to hug, hold and comfort her for the first time. She was still shaking and refusing eye contact yet on that day, I felt hope for her.

Layla had been placed in care because her father had sexually abused her. Our service, Young Hope is very new and when Layla came to us she had experienced four placement break downs in eleven days: three because the carers couldn’t handle her behaviours but the fourth one, the one that was most stable broke down because there was a male in the house and that was causing Layla significant distress.

We knew we needed a special carer and luckily, we found Angela. She’s a single woman who’d only cared for one child with us before Layla. That was a little boy who'd been extremely neglected and she’d only had him for two nights. It was a big call to be honest and it was a nervous one but Angela has been magnificent. It was understood from the first day that the relationship between her and Layla was the most critical relationship of all. All our planning and thinking was around how to support her and to keep Layla in a protected environment.

From the beginning, we knew Layla’s needs would be best served through a collaborative, highly supported and therapeutic approach. We recognised Angela would need significant times of respite and so we supported her decision wholeheartedly that she would get the best respite by being able to continue working three days a week. We began to consider the most appropriate care for these days. Attending a childcare facility wasn’t an option: we needed a trauma-informed, consistent presence in Angela’s own home. We wanted to maintain the familiarity and security of the environment. We found two exceptional women, one an early childhood teacher and one a youth and children’s worker with a degree in
psychotherapy. They were committed to both the Mirror Family and Trauma Informed Care practice frameworks which underpin Young Hope's operations.

We decided any person engaging with Layla would do so only out of absolute necessity. We knew we needed to limit direct contact for this already overwhelmed toddler.

The many services we worked collaboratively with supported this. We worked with the Community Services’ caseworker, Joint Investigation Response Team, NSW Health Child Protection Unit social worker, Child Protection Unit paediatrician and Angela in identifying the critical needs and establishing a case plan and framework of engagement with Layla. As part of those discussions, it was agreed Layla would not meet with every professional involved with her care but rather it would be limited to weekly visits with the Child Protection Unit caseworker and very regular contact with me. The Community Services caseworker managed the parental responsibility aspects, birth family matters and court aspects of the case but this was done through intensive communication with Young Hope and the Child Protection Unit instead of direct involvement with Layla and Angela.

Regular case conferences involving all professionals were established from the outset to provide a holistic and integrated approach. These conferences also gave us an invaluable opportunity for reflective practice and support of the care team in what was proving to be a very challenging case of complex trauma. The Child Protection Unit caseworker who has worked in child protection for over 20 years said she had never seen a child more traumatised and the paediatrician said the same thing. I have my Masters in Trauma but to be honest I felt it wasn’t worth the paper it was written on when it came to this little person. That’s why we all needed each other to figure out the best way to proceed.

It was like we were all sitting there saying, ‘we all think we’ve seen a lot and then in walks this child who has experienced something so horrific and there’s no precedent for knowing what comes next.’ It’s been such a strong reminder that kids don’t fit in boxes.

Everyone has been ready to stand back and do what’s best for Layla even though it might mean changing the way they normally do things. I think the outcome would have been very different and much messier if this wasn’t the case. That is, if it had been less collaborative and everybody had felt they wanted their piece of the pie. This way has been so much less intrusive: everyone having their role and doing their part but doing it together.

As I tell this story, Layla has been with us for just 83 days but she’s made significant and unexpected progress. For a long time, she didn’t speak. The first words we heard came several weeks in when Angela’s phone beeped and Layla turned around and said, ‘what’s that noise?’ And we let out a big sigh of relief: ‘oh, you can talk!’
Now she’s learning to use language appropriately; she’s begun to play spontaneously and age appropriately; she enjoys the bath; is eating well and can express affection towards the people close to her. There is much laughter, fun and warmth in her interactions.

The thing I am most proud of in this story is the carer. We’ve shared parts of the load with her but she’s the one who’s done it 24/7. She’s described to me times when it was 3 or 4 in the morning where Layla is screaming and crying and Angela’s been sitting with her on the floor and they’re just both looking at each other and they’re both crying and thinking, ‘what do we do now?’ And I think about those moments and how she has come through them with such resolve and commitment. I don’t think she slept more than two hours a night for the first month or so. Angela has said she would like to be a long term carer for Layla should the court orders enable it.

The success of the journey with Layla so far has depended on many things. The collaborative and transparent approach of the agencies, the decision to provide supported respite for Angela, and our commitment to her education and understanding about trauma. If I read an article or see a YouTube clip I flick it straight onto her to build her understanding and frame it within the changes she sees every day. These little things can make such a difference.

As we work day by day, it’s easy to forget how far we’ve come especially when some days are still so hard. We’re obviously still very protective of Layla and there are still some things that she isn’t ready for yet. She still hasn’t been able to have a full health check with the Child Protection Unit paediatrician because she won’t let the doctor near her. We have settled on the out of home care nurse coming next week to try instead.

I consider myself so lucky to be her caseworker. As the director of the Young Hope program, normally, I would not have been the one involved. But when the case came up, we were still a new service in Sydney and my operations manager was overseas, so I said ‘I’m going to take this one on myself.’ I’m so glad I did. It’s been such a privilege for all of us to be involved in the care of this vibrant and determined little girl: to be able to sit with her in the unimaginable difficulties and then celebrate her amazing victories and achievements.

The Salvation Army’s Young Hope program provides safe and nurturing environments for children and young people in out of home care. Our aim is to see children and young people along with their carers, experience the richness of relationships in their community. We are passionate about seeing our children and young people find a safe place to be themselves, express themselves and find the freedom to reach their full potential.
I like that the relationship between Layla and the carer, Angela, was seen as pivotal – I don’t think this is as often the case as it probably needs to be. Considering the carer’s lack of experience in caring for children and the precariousness of placing a child with her with such trauma, as Layla, not seeing the importance of this relationship would have been perilous. I doubt the progress would have been anywhere near as positive. I liked how the number of workers in direct contact with Layla was kept to a minimum with lots of work being done behind the scenes and everyone being clear about their roles and that a therapeutic approach was at the forefront. From the time Layla began to trust and was making progress it was lovely to see that the small steps were recognised and celebrated.

Kathryn Small, Manager Casework, Department of Family and Community Services, Community Services

In cases where there is no plan to restore a young child to their parent it is important to think about safe and preferably permanent options, including adoption so as to give children a family for life and a strong sense of stability.
Michelle and Melissa: I remember now...

“The hard part for an Aboriginal worker is that we know our connections to family and community but these little kids don’t. They are lost in care. Those times that we do find the family, it warms your heart.”

Colin, cultural support planner, Life Without Barriers

This story is told by Michelle, an Aboriginal cultural support worker and Melissa, Tali’s case manager.
Melissa

Tali is an Aboriginal girl. When I first met her she was 13, in out of home care and very sad. Her self-esteem was low and she was having suicidal thoughts. She had no contact with family. She’d been in touch with her siblings until a few months before when her previous placement had broken down. Tali felt she had nothing. She was very alone.

There was a lot to sort out in order to reunite Tali with her brother and sisters and get regular contact in place. After five supervised visits, outside in a park, we were able to set up with the carers that the children would meet unsupervised at least monthly. Tali felt connected again.

The next phase came about after an accidental meeting with Tali’s father and his side of the family at a NAIDOC Day event. We were able to take photos and start a photo album for her.

A powerful and emotional reconnection for Tali followed. It was with her Great Grandmother, Aunty Dot, the matriarch of this huge family. Aunty Dot is well-known and loved in the community. She’s got 75 grandchildren, 145 great grandchildren and four great, great grandchildren.

Aunty Dot was a really important person for Tali to have a connection with. My colleague Colin said that to see Aunty Dot was to follow cultural protocol and that absolutely meant we had to go to visit her first and for her to let us in. She would then advise where to next and who would be appropriate for Tali to see.

We went to Aunty Dot’s house and explained that we had Tali in our care and what we were doing for her cultural needs. Aunty Dot was very happy and asked us to bring Tali to her house. We knew that Tali’s Grandfather and Aunties were creating an artwork across the road at that time so we were able to assess how many family members would be there for her visit and who she could see. When we spoke to her to ask her how she felt about meeting her great Grandmother and her Grandfather, she was really happy.

Colin, Michelle and I were there to support Tali. We documented the process for her and ensured she felt safe.

I remember once when I’d taken Tali to see the counsellor, she was asked about what memories she had from when she was younger and how she came into care. It turned out that she had buried so many memories. She could only remember that there was a banana chair outside the house and she used to hide underneath it. That was the only memory she had.

On the day we went to visit Aunty Dot, the most incredible thing happened. We were driving over this bridge and Tali turned to me with this surprised look on her face and said ‘Mel, I remember this.’ She was amazed at herself. ‘There’s a club up here, I remember Mum taking me…’

You could see how excited she was to be getting the memories back. It was so
touching. We turned a corner and she remembered the post office. Then we got a little bit further and she was looking around at everything and she said, ‘I know where it is, I know where the house is’. I’m no good at navigating (I’ve always got to rely on my Navman!) so Tali was really happy she could show me the way. ‘There’s a park on the left hand side that we all used to go to… and there were two houses…’ All these memories that she’d shut down were flooding back, and emotions too.

When we got to Aunty Dot’s house, we sat in the lounge room with Aunties and Uncles and great Aunties and Uncles. Aunty Dot was able to talk to Tali about many things. She recounted a story about a time just before Tali came into care. She said that Tali’s mother had turned up with the children. The Mum was drunk and little Tali had wanted to stay with Aunty Dot but the Mum wouldn’t let her. Tali kept asking her Mum, ‘can I stay, please can I stay?’ and Aunty Dot had been trying to persuade Mum by saying, ‘she can just stay tonight; let her stay, she’ll be fine.’ But her Mum wouldn’t let her. She took Tali home and just after that Community Services came and took the kids away.

**Aunty Dot was very sad as she re-told this story. She said to Tali, ‘If you’d stayed that night you would never have left here.’**

After that Aunty Dot went into another room and brought out a painting. She’s an artist, there are many artists in the family. The painting she showed us was her story, it describes where her people come from and where she met her husband, and their totems and bush medicine. She said to Tali, ‘this is your story too’ and she used it to explain where the various members of her family are and their connections. It was so strong for Tali especially with her memory coming back. She was just sitting there, surrounded by family, soaking it all in.

**Michelle**

Aunty Dot also told a very emotional story that happened to her at the Koori Knockout. The knockout is an enormous football festival across NSW, Queensland and Victoria. All the Aboriginal areas put in sides and they play a huge round of football every year. They call it a modern day corroboree.

Anyway, in 2012 Aunty Dot was at the Knockout and a little boy came up to her and said, ‘I know you.’ And Aunty Dot said, ‘do you darling?’ And he said, ‘yep, you’re my Nan.’ It turns out he was Tali’s brother and because they were in care, the family had lost contact with him. She said it broke her heart. ‘These children are mine and I don’t know them. He’s mine and I would have walked straight past him.’ That happens a lot. A big part of our job is finding families. Often, the extended families don’t even know where the children are or who they are with. Sometimes, the family member who was involved in the court proceedings doesn’t relay any of the information to the extended family. They might not be in contact with the rest of the family or they might have sort of given up. Sometimes
they haven’t been involved in any of the decisions about their children, they feel powerless and that’s when the relationships break down.

Melissa
It was so sad when Aunty Dot told that story. Being there, as a non Aboriginal person, feeling the family connection and hearing those stories... I can’t even describe it.

Michelle
After that Aunty Dot took us across the road to where Pop was. Pop is Tal’s Grandfather and since the time she was removed, they’d never had contact. Mum was having her own feud with him at the time so he had no rights to the children. He’s a tribal man. He practices his culture and when the kids went into care he did not agree, in his words, ‘that he should have to fight a white man’s law for his own children’.

The first thing he did when he saw Tal which choked us all up (particularly poor Mel) was that he gave her a big cuddle and he told her that he never turned his back on her and would never turn his back on her. He told me a couple of days later that he knew that his grandchildren would come back to him and he knew that the ancestors would keep him alive to see that day happen.

We’re blessed that he is very good with us, very accepting and we have a respectful relationship with him. His main concern, when we were talking about meeting Tal’s cultural needs, was that there is nothing we can personally do to meet those needs. As a tribal man, he should be the one teaching his grandchildren their culture.

The way they teach their culture, is to live their culture.

He was upset that at 13 there is so much Tal should already have known and experienced that she hasn’t. He was worried that she’s so far behind her cousins and as an adult, she’ll see her cousins and the knowledge that they hold and she’ll be upset.

We are now working towards giving regular, unsupervised contact. Tal needs private time with her family to meet her cultural needs but we need to make sure she is safe and secure. It’s a process that is somewhat slow, slower than some people would like, but it’s part of building a rapport with the family and finding a way through.

Melissa
Tali once asked me, ‘Mel, will you still be in my life after I’m 18?’ Tali needed to know that when she leaves care she’ll still have a sort of parental, caring, nurturing bond with someone she can trust. Someone who will be looking out for her.

Now that we are finding her own family again, Talia is learning that there will be many people to love her and look after her. She’s learning who she is, where she fits and who is around her who will make her stronger and feel supported. We’re still working on her family tree, it’s enormous.

These connections with family are going to heal some of that grief and loss that she felt when she first came to us.

Michelle
As Aboriginal Cultural Support Planners, it’s very hard to see a child in care when
she has such a huge Aboriginal family. Our role is to try and help Tali understand she’s part of a bigger picture, a bigger family and a bigger community.

The key is not just Aboriginal workers but non Aboriginal workers like Mel. She’s been so enthusiastic, so involved, so passionate. She feels the power of this new family contact for Tali and has been able to share that enthusiasm with the carers as well.

I’ve often had foster carers ask me why we bother with Aboriginal Cultural Support, particularly if the child is fair skinned. They say, ‘but she doesn’t even look Aboriginal.’ We are at the end of the Stolen Generation and it’s our responsibility as an agency to ensure that these children have the opportunity to know their family and their country.

Melissa
I remember when we were walking away with Tali at the end of the visit with Aunty Dot, she kept looking back at her Grandfather.

When we got back into the car, she had the biggest smile on her face. Honestly, I can’t explain the smile she had and she turned to me and said, ‘thank you for taking me, Mel.’ But after that, her face clouded over, ‘I feel bad for my Pop. Did you see him crying?’ She was worried about him.

Tali was happy and sad at the same time. And me? I was already a mess (thank goodness I was wearing sunglasses that day!) because when I saw her connecting with her Pop, when they had that cuddle, I could feel the power between them. I knew absolutely, it was right.

Life Without Barriers (LWB) provides out of home care for over 1000 children and young people across NSW, including over 200 Aboriginal children and young people. Life Without Barriers is committed to providing Aboriginal Cultural Support Planning for every Aboriginal and Torres Strait Islander child in care with Life Without Barriers.
I think Tali’s story as told by Melissa and Michelle reinforces strongly the need to keep at the heart of our casework with children their need to be connected to their family, community and culture as this is so important to their sense of belonging.

Michelle and Melissa in supporting Tali to connect with her family and culture were able to open up to Tali a sense of identity and connection with her past. As Melissa describes Tali had a memory of her childhood, ‘you could see how excited she was to be getting the memories back’.

What Tali’s journey shows is that her journey does not finish when she turns 18 but rather the work that we do when a child is in care and how we can support those critical connections earlier can help shape their future. If we are able to make the time and commitment to connect with a child’s family and culture we can help support the early part of this journey which can have life long outcomes.

This story makes me think about those children who leave care without such connections and how critical a role we have in building resilience and connections to ensure this is successful.

Anne Campbell, Deputy Chief Executive, Policy, Programs & Strategy, Department of Family and Community Services, Community Services

Aboriginal cultural support planning recognises connections to kin, culture and country for Aboriginal children as fundamental.

How does my practice reflect the importance of cultural connection for Aboriginal children and young people?

What is my understanding of the role of kinship, culture and country for Aboriginal children and young people?

What would help me to ensure children and young people I am working with are able to stay connected to their kinship groups, community and culture?

How can I help a child who has lost these connections to find them?
“Sometimes I’d come out of a session with Tara and think, ‘What’s going on?’ We were having the same conversations, literally, week after week. I wanted her to know her real story... Something in black and white that she could always keep with her...”

Kim, caseworker, Department of Family and Community Services
Tara was 16 and had been in care for many years when we decided to start Life Story Work with her. It seemed the only way to help her move past the stories she told herself about her family. These stories were leaving her constantly disappointed and anxious. I felt it needed to be done before she turned 18 or the opportunity would be lost.

Tara was living in a therapeutic residential program, the most contained world she would ever know. I knew Life Story Work was going to be traumatic for her so I organised for a counsellor to sit beside us right through the process.

Her Mum had an intellectual disability, undiagnosed schizophrenia and was really young when Tara was born. Tara was brought into care when she was two and then placed with her Dad until she was about six when Dad had a stay in prison. Tara went to live at her Aunt and Uncle’s where she disclosed her Dad had been sexually abusing her.

A Joint Investigation Response Team investigation found that while there was not enough evidence to proceed with criminal charges the abuse was confirmed by Community Services. There was a mixed reaction in the family: her paternal Grandmother who Tara had the closest relationship with, did not believe the allegations. Her Aunty did but her Uncle was not convinced.

Over the years, Tara’s behaviour had become increasingly challenging until she finally came into our care. In the first six months she moved between six residential placements. About the time her last placement was breaking down, she was diagnosed with Type 1 diabetes.

This time in her life is a good example of how Tara’s recollections differ from what really happened. In Tara’s mind, the carer just dumped her at the hospital because she was sick.

Tara remembers she had to stay in hospital for a year, never seeing the carer again. The reality is she was in hospital for a month and while the placement ended early, it was not just cut off.

During the next four years, Tara didn’t see her Mum at all. Her contact with the rest of the family was inconsistent and unhappy but Tara could not, would not give up on her dream that if she was with them, everything would be okay.

Tara would go through each member of her huge family methodically and try to make a connection or relationship. When it didn’t work out, she moved onto the next one and then the next.

She did this particularly with her Mum and Dad. She would reach out to Mum and keep calling and writing and when that didn’t work, she’d get angry and disappointed and do the same thing with her Dad. As he was the perpetrator of sexual abuse against her, this came with all sorts of difficulties and we certainly weren’t supportive of that.
But inevitably Tara’s efforts would be fruitless and so then she’d start all over again, with Mum.

There’s an added problem too around Tara’s level of coping. She didn’t have a great memory and blocked out what was painful. She would revise history to make what she wanted to be true because she desperately wanted it to be like that.

The way I work as a caseworker is to be upfront and honest and my honesty helped me build a strong relationship with Tara.

She would argue constantly with me, ‘no this is how it was... no this is what happened’ and when I’d say, ‘no, this is what happened’ it was very confronting because she honestly believed in her mind that it was true. But she trusted me.

Our team thought a possible solution was to produce Life Story books, based on research with members of her family and her extensive collection of photos. These books would be hard copy and unchangeable. We did Life Story sessions with her before we started where we went through her family tree, to give her some history around other people. We hoped this would also help us to understand the things she had experienced, and what others had been through too.

She asked questions including, ‘why me? Why am I the only one to be left out and unhappy?’ But she definitely wasn’t the only one experiencing the same thing.

Tara’s family is complex and blended. We developed a genogram mapping relationships between 91 people across four generations and then split it up into family chunks and story scripts detailing particular individuals and groups. These were explained to Tara during a planned series of sessions. I ensured she was provided with casework and counselling support before, after and between sessions.

One of my managers at the time, Kerry, went and did interviews with a whole lot of family members and then wrote transcripts for me. That’s what I used to write the stories and then I used Tara’s vast collection of photographs to work with her to build a visual story too.

I thought it was important to always put in who had given us the information, again to support the reality of it. Tara had to understand that this was not just something Community Services had made up.

I certainly found the book quite challenging to write because they are not very nice stories and it was really difficult to put them in a way that was true but not defeating. I thought a lot about the albums from my own childhood where everyone’s happy and they’re nice memories: of course, Tara’s wasn’t going to be like that. It took me a long time to find the right tone and in the end I wrote the stories to her not for her. Direct and natural, ‘we went to speak to your Mum and she told us...’

When we’d go through the books together, two things amazed me. Firstly, how it
only takes a little bit of evidence to break down fantasy. Tara wanted so badly for the hard stuff not to be true and she would try to rationalise but then she would quickly admit, ‘yes, I get it.’ However it didn’t take long for her get back to the fantasy. Week after week, we would take one step forward and two steps back.

But that was exactly why I knew a properly printed hard cover book was crucial for her – something that was there in black and white. Something permanent and unchangeable. We made electronic copies and they’re attached to her files so if in the future she ever loses them, she can get them back.

Tara is 18 now and her first months out of care were difficult for her. She went straight back to her home city trying to get those relationships going and predictably, it didn’t take long for her efforts to fall apart.

She is now back and has settled into the best sort of placement for her, voluntary Aged and Disability Care service with 24 hour support.

She’s hanging in and she has her books to keep her connected to reality.

I worked with Tara as her caseworker for two years and I’m still in touch with her. Our relationship will gradually change because she is no longer formally in our care but I want to show her relationships can end positively. I always saw it as crucial that she could depend on me to do what I said I’d was going to do and turn up when I said I was going to turn up. Through everything she had experienced, I was the constant in her life. She knew she could trust and rely on me. It was all about being true.
Reflection

Life is never really black and white but having something concrete like a Life Story book can help children in out of home care to make sense of their history, their identity and significant relationships. Kim understood that although this hadn’t happened for Tara, this was something that she could do to help her now. Kim was honest, caring and thoughtful. She understood the potential for Tara to be distressed by such a process but she persevered with what she thought would be most helpful for Tara and was guided by Tara. Kim also made sure that Tara had the right supports around her. There was a strong connection between Kim and Tara and Kim has demonstrated that relationships do change and that they can change positively.

This story also highlights two other things for me. One is the many effects that trauma can have on children and young people such as distorted thinking, changes in attachment and emotional regulation and the various ways they cope with these events. The view of ourselves and the world can become altered and the stories we tell ourselves become stuck and unhelpful (‘I am unlovable, the world is unsafe’). The other thing is the strong need we have to belong, to feel connected and to be part of a family. There is a fine line between fact, fiction and fantasy but Tara’s story book will help her understand the past, make sense of the present and secure a better future.

Sandra Heriot, Director, Psychological Services, Department of Family and Community Services, Community Services

Tara’s caseworker recognised she needed support to understand her history and make sense of relationships with her family. She recognised the importance of Life Story Work, as a tool to help Tara.

Are there children I am working with who might benefit from developing a stronger sense of their history, family and identity?

How can I work creatively to prepare and support children and young people when they are learning about their family?
Julie: Who am I?

“I used Life Story Work to answer those essential questions that kids in care often have. Who am I? Why did this happen to me? Does anyone know I’m here or even care?”

Julie, caseworker, Department of Family and Community Services
A man came into our office a little while ago asking if we had any information about his childhood. He was in his 60s and he told us he'd been in care as a young boy. It was a good placement apparently, he loved his foster mother, but then one day she had a heart attack while she was hanging the washing out on the line. All he remembers is that same day, or the next day, a black car pulled up and took him away. He told us he'd spent his whole life thinking that he had killed her or hurt her and that's why he was removed. It was heartbreaking. But it's a story that has stuck with me and reminded me how important Life Story Work is for a child in care.

Some foster children grow up knowing very little about their past and carrying all this pain and grief. Peter was a little boy like that. When he was three he was placed permanently with foster parents and by the age of six, he started to say and do some things that worried his teachers and his new family. In the classroom he couldn't focus. During recess and lunch, he would sit on his own near the garbage bins. When a teacher suggested he could play somewhere else, he said, 'this is where I belong because I am rubbish'. At home he was saying that he had been 'thrown away' and that he'd had a terrible life.
I met with Kevin and Sue, his foster parents, and we talked about their concerns and what information they’d been given when he’d been placed with them. They were trying to work out what was going on - does he have ADHD? What was he exposed to when he was younger? Why is he like this? How could they help? I realised they knew almost nothing about his past, and it was the same for Peter.

I went away and looked through the files and gathered all the information that was appropriate for me to give them. Then we talked about things like who should give this information to Peter, when we should start and how we should explain it. Sue and Kevin told me what it was he really needed to know.

It turned out Peter had no idea about his birth family and who was who, even though he still saw some of them. His natural father would bring Peter’s sisters along to visits that were supervised by Kevin and Sue. But Peter thought his birth sisters were just friends and didn’t understand that the man was his natural father.

It’s really difficult to explain relationships and issues like drug abuse to kids. The hope is that when they’re older and ready, someone is going to be around to give them more details. But caseworkers move all the time and many years later often no one is able to tell them what really happened.

It was obvious to me that Peter needed to understand how he came to be in out of home care, as well as to trust the love his foster parents felt for him. He needed to know his own story to heal and grow. When I visited him at home he was saying distressing things, like, ‘my mother must hate me, she didn’t want me.’

We got his foster parents involved, along with members of his birth family and the school. Keeping everyone informed was really important because we knew Peter’s behaviour might regress initially, as he took in the information and experienced hurt and loss. We made sure that he would be supported through the process with counselling sessions.

The 3-5-7 Model developed by an American social worker, Darla Henry, really informed my work. It’s a great model to help foster children work through their grief and identity issues.

I collected all the information I could about his early years and a student social worker helped me put ‘Peter’s Life Story Book’ together. We used photos to tell his story as well as letters. I also did a genogram of everyone in Peter’s family. Instead of circles or boxes I used pictures from Clipart so that it would be easy for him to follow. I put in pictures of old people for third generation grandparents and one of a younger man for his father and pictures of children to represent the kids.

On my visits I’d show it to Peter and we’d go through it. ‘See this person here,’ I’d
say, ‘that’s Grandma, she was married to so and so.’ We’d have a break and play a game of chess and then I’d say ‘let’s have another look, who’s this?’ Peter’s a very bright child and he could soon point out who was who.

As part of the process I wrote him letters. We’d read them out together when I went to see him and then we’d discuss them. The letters gave answers to the sorts of questions he was asking his foster parents, things about his Mum and Dad and why he couldn’t visit them. I had to write in a way he’d understand. If I used the word ‘divorce’ I had to explain, ‘divorce is when two people who love each other and get married decide later on that they don’t love each other anymore and want to live apart’. I decorated the letters with pictures of Spiderman to make them look appealing to a little boy.

It was so crucial to have great support from Peter’s foster parents. They made our work possible.

Sometimes carers don’t want to acknowledge birth families, they want to sweep the past under the carpet, ‘this is a clean slate, your life starts now’ sort of thing. But Sue and Kevin saw that Peter really needed to know. They took lots of photos for the Life Story book and gave us plenty of pictures of Peter’s special events – Christmas, his first day at school, going on camp, contact visits with his birth family. Peter helped choose which ones to put in his book. I also put in photos I’d taken of his favourite toys, the ones Peter had when he was placed with his foster parents. As well as one of his bedroom, Peter with his carers and one of his home.

Peter’s now eight and the school counsellor says he’s a changed boy. His self esteem has grown, he’s excited about what’s happening in his life, he’s much more mature and his concentration at school has improved. He now enjoys spending time with his birth father and sisters and he knows who they are and where he came from.

Every foster child needs a Life Story book to carry with them through life. When I hear how happy and confident Peter is and think back to the little boy sitting on his own by the rubbish bins, I’m so happy we have done this. ●
Life Story Work is vital in a child’s life for their ongoing well being and personal identity. What I liked about this story is that Julie used an evidence base to support her practice. The importance of child centred practice for children and young people in out of home care is one which enables collaboration, understanding, empathy and relationships between children, families and those of significance in their life. Julie kept Peter at the centre of her practice by helping him creatively get a sense of family history that would support his social and emotional development and sense of belonging.

The need for relationships with carers enhances the life of a child or young person in care and requires commitment by workers to engage carers, the child, the family and stakeholders in the process of decision making and life story work. Julie achieved positive outcomes for Peter which can be attributed to her compelling and respectful approach to her work.

Leonie Booth, Director Practice Standards, Department of Family and Community Services, Community Services

It is important that carers and practitioners have age appropriate conversations with children and young people regarding the reasons they are in out of home care. When planning these conversations with children and young people what do I need to do to ensure that they feel safe and supported?
Kelly: Where’s Matthew?

“We tried hauling him back, kicking and screaming for a really, really long time and it wasn’t working. He just kept wanting to return to Mum. We needed to try a non traditional approach. We didn’t have a script or a plan or strategies that had been successful in other places... we just decided to try.”

Kelly, residential care worker, CatholicCare
Matthew is an Aboriginal boy who came into care when he was 11 years old. His previous kinship placements had broken down mainly due to his challenging behaviours and his mother’s difficulties in caring for him. He started in a supported residential care setting and then moved to a residential care bed with other young people. But he missed his family so much and kept running home.

We’d bring him back and he’d run again. At first, his Mum would bring him back or call us. She’d spent a little time in prison and part of her parole conditions were that she be drug and alcohol tested every day and that she couldn’t have her children with her. She would have been breaking the law by holding onto Matthew and she wanted to do everything right... so yes, at that stage she was always bringing him back. Matthew knew that the court orders had changed, then he returned to her more often. I think it got harder for him to stay away and harder for Mum to send him back.

We did a lot to try and support family visits because they had such a good effect on him.

If Mum saw him on the Wednesday and then on a Saturday visit, Matthew would be good with getting to school and with his participation with the program. But if Mum didn’t turn up or she wasn’t answering her phone, Matthew would always think something bad was happening and he’d go downhill again.

We initially tried family contact in a community based setting, but these visits were hard to sustain and keep positive. So we adapted the contact to host the family in the residential care home. Other young people in the house were allocated a staff member and taken out for the day and Matthew’s family were picked up and dropped off and offered food and support by carers. Matthew was very involved in preparing for these visits too. He’d choose the menu and do the shopping and baking. It was as normal a situation for them all as we could manage. We’d be trying to give the family space when things were going well and stepping in when something was happening and offering games or conversation or a DVD. It was a good opportunity to do some modelling for Mum too. I’d try to model ways to manage Matthew’s behaviour. Whether Mum was there or not, you know, Matthew is a handful.

After a while though, the visits started to work less well. The family became more difficult to engage, not returning phone calls, not being home to be picked up, some siblings not coming, cutting visits short or conflict during their stay. We offered support to the family but this was often declined and we found it hard to engage them. With the disruptions, Matthew’s longing for his family increased and with it, there were more challenging behaviours and he ran away more often. There was a lot more aggression and behaviours which involved the police and unfortunately he was introduced to the legal system. Then there was breaching
of bail and time in custody and a more strained relationship with the family. Eventually Matthew returned to live with his Mum and siblings which meant an increase in tensions because of their difficulties in caring for him.

The one thing we had going for us was the strong relationship we’d built up over the previous 18 months so I continued to visit Matthew in the family home.

Generally, he and I were pretty tight and when he was in the residential house, getting him to come out with me for a milkshake was normal practice. But when he was staying at Mum’s, he didn’t want to leave and spend time with me. Once for example, I had some tickets to a car show that I knew he would have loved to go to but he wouldn’t leave with me. That was when I realised, ‘he thinks we’re going to take him away again.’ It was a trust thing. I also realised that even though we were now working with him at home, he was still different from everyone else in the family and was not relating to them.

This is when we decided to do something completely new. The family definitely needed support and I thought, ‘if I can get Mum to trust me and I can get his sisters to trust me then maybe Matthew would drop his defences too.’ I started to focus on helping them.
I began by dyeing his eldest sister Tara’s hair and just building up a rapport with her, talking about fashion you know the sort of things. She revealed that she’d been cut off from her family payments and I set out to help her get them back and get on the right ones. I made an appointment at Centrelink and took her to see the social worker and basically I was helping her in that fundamental way. She’s now in a great TAFE course for Aboriginal students and she’s making friends and getting good support. Any improvements for her of course assist the family as well.

When Tara was sorted, I worked with Mum on her payments and then got Matthew’s brother back into the school system. He hadn’t been to school for nearly two years, he’d fallen through the cracks. I got him enrolled again and now he has a really great teacher so if there are any problems, he can call her or me and that keeps him going.

As things for the family got better, my relationship with Matthew started to improve. He saw them trust me and he started to trust me again. I could see him thinking ‘things are better. My brother’s going to school and my sister’s done a few training courses and is looking for a job, and my Mum can relax because she’s on the right payment and it’s going to be there every fortnight...’

He’s seeing his doctor and psychiatrist now and he’s getting their help. He hasn’t had anymore trouble with police and so he has no more supervision orders with Juvenile Justice. He’s been to school more times this year than he has in the past five years. He’s improving in so many ways.

There’s been a lot of trial and error and the way we’re working is difficult to communicate to people, including other services. But by focusing on the whole family, and working on the big picture, we’ve seen outcomes we’ve never seen before. Including great changes for Mum.

I’m trying to help her do the role I’m doing. The more empowered she gets, the more likely the kids are to go to her for help rather than coming to me. And that’s so rewarding.

We had hoped to introduce some of the structures we knew had worked in out of home care to the family, and it feels like we’ve achieved that. I get a lot of calls from kids and they tell me, ‘you won’t believe it Kelly, this happened or that happened... and then Mum said exactly the same thing you would have said.’ I love that.

CatholicCare out of home care services provides care for children and young people from 12-18 years of age who are not able to live with their own families. These services provide many of the supports around health, education, living skills, and community involvement that enable children and young people to develop into happy, safe and well adolescents and grow into responsible adults and parents of their own children.
Reflection

Practitioners and service systems can be rigid in their approach to addressing the needs of the individual client, based on a variety of factors. What I like here is that Kelly wasn’t so rigid in her approach and had the foresight to operate creatively and tailor the case management to meet the needs of Matthew. By acknowledging Matthew’s priority as connection to family and supporting those around him Kelly was able to build the necessary trust required for Matthew to be receptive to any change required of him. This journey was not a quick one, but by building the case management around Matthew and the perseverance of Kelly, the breakthrough occurred in time, when Matthew was comfortable and ready.

Paul Coe, Acting Manager Client Services, Chair Aboriginal Reference Group and Practitioner Advisory Group member, Department of Family and Community Services, Community Services

Effective family work includes a willingness to reflect carefully when things are not working and to work in innovative and creative ways to provide support that will reduce risks.

What helps me to reflect when things are not working and try out creative approaches with a family?

What strategies have I found to be particularly effective in developing relationships with families?
“For the adults, writing the after care plan was an achievement. We could tick it off: done that! But the young person looked simply terrified. She turned to us and said ‘But what do I do now?’”

Angela, team leader, Youth Care UPA
When I started in this position, it was the very first time I’d worked in out of home care and one of the things I thought about a lot was the finality of kids leaving care. I kept wondering about them. Are they ready? Do they know enough? What must it feel like to suddenly be on your own?

At that stage, to fulfil our Agency Leaving Care obligations, we relied heavily on the Family and Community Services’ leaving care plan but it became more and more evident that the young people needed to be better prepared.

One day, I went with a young person and her carer, to a meeting with her Community Services caseworker to write her after care plan. We discussed a lot of financial details and a few of the ‘supports’ that the young person could think of that she might need during the following year or two. At the end of the meeting, the completed after care plan was printed off and for the adults, it was like a sense of achievement, ‘great, that’s done. We’ve successfully completed that.’ But for the young person, it was simply terrifying. She took the paper, looked at it, looked at us with this scared look on her face and said, ‘but what do I do now?’

I went back to the office and got the rest of the team together and when I told them what had happened at the meeting, our responses were the same.

It wasn’t good enough to be sending our kids off at 18 with nothing but a few sheets of paper detailing the financial support they would or wouldn’t have.

The kids aren’t thinking like that anyway. When they’re leaving care, they’re not thinking ‘well, in the next year I might need a pair of glasses or I might need braces.’ They’ve got so many other things going on in their heads. They’re thinking, ‘holy crap, what am I meant to do when suddenly I don’t have my carers anymore? How do I look after myself?’ We take for granted that they know a lot of practical life skills but often they miss out because the focus for these kids often is, ‘are they still going to school’ or, ‘are they still at risk?’ It’s not, ‘do they know how to make an omelette?’ They’re not like other kids. They don’t have a Mum and Dad at home, who they can ask once they’ve left the nest. They are suddenly on their own.

I realised they needed and deserved a lot more than they were being given and suddenly I was on a mission. I knew we needed to create a skills and knowledge based process that would empower young people with confidence and make their after care plans meaningful. I just didn’t know how we’d do it.

The team decided to hold weekly meetings and with our agency’s accreditation coming up in three months’ time, we had a natural deadline.

We met at least once a week for two hours and as the ideas flowed, we got
really motivated and excited. We knew it was going to be a huge effort but everyone could see the benefit.

We spoke with a couple of young people who had recently left care and a few in the leaving care age range to find out what would be useful to know when they’re out on their own. We drew from our own experiences as well.

A lot of those basic things don’t change from generation to generation or from family to family. For example, I had a glory box from the time I was 12 but my Mum had never showed me how to turn on the washing machine. When I went to university, I had all these wooden spoons but I couldn’t actually wash my clothes!

After we’d settled on the topics and who would write and compile them, we discussed how we should present it to the young people. We decided we would give the information in three stages so as not to overwhelm them. They would receive information on turning 15, turning 16 and the last on turning 17. It would be age appropriate and presented in a file to keep it all together safely. The file would also act as secure storage space for the young people’s precious documents such as original birth certificates and passports. We wanted it to be easy for them to keep everything together if they had to move from place to place.

The file would include three skills based books and a recipe book. We didn’t see it as something caseworkers would sit down and read word for word with the kids or that would be just handed to them and forgotten. It’s not like they have to finish it section at a certain time; it’s not like homework. We saw it as a way to start conversations, invite questions, and the responsibility for learning would be shared between the caseworker, the carer and the young person. We told the caseworkers they could be as creative and flexible as they wanted to ensure each young person could get the information and skills they need to help their transition to independence.

After our first roll out, we decided to offer some of the topics as practical skill days to involve the kids even more. We now run cooking classes, job skill and health sessions to increase their confidence in what they can do and to show their carers they are ready for more learning opportunities in the home. Our first day was a cooking class because we knew carers were a bit nervous about giving the kids responsibilities in the kitchen. It was like, ‘I don’t want them to touch the knives’ and, ‘I don’t want them to be near the stove.’

At the end of the cooking day, carers were invited to share the food the young people had cooked. The kids were so proud of themselves. They knew they could do it and the carers now knew they could do it as well.

And we’d been the guinea pigs! We could assure the carers ‘yes, they can handle knives appropriately; yes, they were fantastic at following instruction.’
And then the carers said ‘okay, then maybe we should do it at home as well.’

One of my favourite sessions was our job skills program. We ran that for two days. We went through everything - resumes, cover letters, telephone etiquette. We actually organised for two of the staff that our kids had never met before, to pretend to be potential employers. The kids had to submit their applications for these ‘fake’ jobs and then we had the workers phone the kids individually, as if we weren’t there, and arrange an interview. So the kids had that experience of talking to someone they didn’t know. That night they had to go back and put together their portfolio with all their certificates from their practical days, and their school reports and references.

The next morning they came in and we gave each of them a $50 budget and took them shopping. They had to buy their own interview outfit within the budget and that was so fantastic.

They all bought really appropriate, nice stuff and came the next day into our office where they sat around and went through potential interview questions. The kids were giving each other feedback, ‘you could say this.’ They’d had homework to check out the company of the job. One by one they went and got interviewed and then at the end of the day the interviewers came out and gave them really good, useful feedback.

We received excellent feedback when we first presented our leaving care plan to other agencies. It was overwhelming actually. Many people said they’d wanted to do the same thing for a long time but they didn’t have the time. We revised the planner based on the needs and feedback we received from these agencies; we added additional topics, photos, self assessments, checklists. It took the better part of seven months until we were satisfied it was good enough to present to other agencies. After the next presentation we got an order the same afternoon and we went about getting it printed professionally.

We’ve now had orders from seven agencies in our area and they are using our leaving care plan as a tool. We encourage everyone to incorporate their own cultural information and activities and make it their own.

The process has been everything we hoped it would be. We are so proud of it. It’s helping young people not only plan their future but better still, believe they have a future to plan for.

Youth Care UPA is a program managed by UPA Far North Coast. The program provides safe, secure and caring alternative living arrangements for young people who cannot live with their natural families.
Reflection

We should never take for granted how the experience of leaving home can be smooth and supported for some kids and not for others, and in this day and age kids leave home and before you know it they are back! I was so impressed with the energy and passion in this story. And with the sheer hard work and high standards to give kids in care a shot at what other kids have when their parents are there for them as they step out into the world.

Planning for leaving care with young people means you need to understand what their worries and hopes are and you need to provide information in a planned manner over a period of time.

Young people also need to be provided with opportunities to develop life skills and to be taught the basics. As a parent I have supported five kids to leave our home and I have welcomed them when they have come back and have been there all the way. It’s sad when you think our kids in care don’t have that but that’s what is so great about this story.

Deb Cornale, Practitioner Advisory Group member and Manager Client Services, Department of Family and Community Services, Community Services