



Victorian Aboriginal
Children & Young
People's Alliance

Referring 100% Unborn Reports to Aboriginal Community Controlled Organisations

November 2019

Executive summary

The Victorian Aboriginal Children and Young People's Alliance (The Alliance) supports *Wungurilwil Gapgapduir* and The Aboriginal Children's Forum (ACF) KPI 7: 100% unborn reports referred to Aboriginal Community Controlled Organisations (ACCOs). However, there are issues that need to be addressed prior to this KPI coming into effect to ensure that we not only reach the target of 100% of unborn reports referred to an ACCO, but both Child Protection and ACCOs are supported to work together to achieve the best outcomes for expecting parents and their babies.

KPI 7 was initially developed in late 2015 and has since morphed to better reflect the aspirations and growth of ACCOs and the full implementation of *Wungurilwil Gapgapduir*. In early 2016 the proposed targets for KPI 7 were; "The proportion of Aboriginal unborn reports that are substantiated within six months of birth is no greater than for the non-Aboriginal unborn reports", and "The proportion of Aboriginal unborn reports that are followed by placement in out of home care within twelve months of birth is no greater than for the non-Aboriginal cohort". However, through the years the horror stories of Aboriginal babies being removed from their mother's without a single conversation with the ACCO continues to happen. In 2019 the KPI changed and is now "100% of unborn reports referred to an ACCO."

The focus of an unborn report is to provide supports to the expecting parents to reduce the need for Child Protection intervention upon the child's birth. In order to do this it is critical that ACCOs are advised of a report straight away to allow time to engage with the parents, identify the services it is they need and to encourage and support them to attend and participate in the programs.

As the policy stands now, when Child Protection receive an unborn report it is not a requirement for them to refer the report to an ACCO if the expecting mother identifies as Aboriginal or is non-Aboriginal and is expecting an Aboriginal baby. Our members have reported that it is often Community who are informing staff of any known Child Protection reports or concerns regarding an expecting family. This sadly means it is often too late to effectively intervene and can result in the child being removed at birth, which has significantly traumatic effects on the family.

Victorians ACCOs are currently leading the nation in self-determination, and are best placed to design and deliver early intervention and prevention programs to Aboriginal families who are at risk of Child Protection intervention. Our Members have identified it is the consistency of ACCO staff being there for the family; through building and maintaining trusting relationships, taking clients to appointments and giving families hope that their child will be able to remain with them that they are most suited to work with families in their Communities who have received an unborn report.

About Us:

The Victorian Aboriginal Children and Young People's Alliance (the Alliance) is an alliance of 14 ACCOs registered to deliver child and family services through the Human Services Standards under the Child, Youth and Families Act (2005).

We are for Community, by Community: our members have been delivering health, wellbeing and safety services for more than 45 years to Aboriginal communities across



Victoria. We are informed by the Aboriginal definition of health and wellbeing, and we have incorporated this holistic approach into our service design and delivery to see the whole being, not the sum of the parts. To varying degrees our organisations have become cultural and community hubs, offering wrap-around services to close the gap in health and wellbeing inequalities in Aboriginal communities. In addition to providing primary health services some of our Member organisations offer:

- Family Support Services: including early intervention & parenting supports
- Out-of-Home Care (OOHC) services
- Early learning and early years programs
- Family Violence prevention programs
- Drug & Alcohol Services
- Maternal and Child Health
- Women's Groups and Men's Groups
- Youth Groups
- Justice Programs
- Social and emotional wellbeing support

In 2014, we formed the Victorian Aboriginal Children and Young People's Alliance, with the belief that together we are stronger and with one unified voice we can positively influence the future for Aboriginal children and young people living in Victoria. The Alliance has a crucial role in driving change to achieve better outcomes for Aboriginal children and young people.

Context

In the two-year period between April 2017 and March 2019, there were 702 unborn reports made to Child Protection regarding Aboriginal children. Of these, 21% resulted in substantiation and progressed to out-of-home care within 12 months of the child's birth (DHHS data, 2019). That is 146 children and their families our Members could have worked with to prevent further trauma and cycles of disadvantage in their Communities. Under the *Children, Youth and Families Act 2005* (the Act), Child Protection do not have any legal powers to intervene without the mother's

consent prior to birth, with the usual functions of an investigation only applying once the child has been born, including authority to refer to culturally- appropriate support services. This has negative impacts on expectant Aboriginal parent's as they do not necessarily understand the purpose and process of unborn reports and the significant impacts this can have when their baby is born.

The Aboriginal Child Specialist Advice and Support Service (ACSASS) was established to provide expert advice and case consultation to Child Protection about culturally appropriate intervention in respect of all reports regarding suspected abuse or neglect of Aboriginal children. Child Protection are required to consult with ACSASS when it is known the unborn child is Aboriginal, with this referral being able to occur without the mothers consent. It is important this consultation takes place as Aboriginal families are less likely to engage with Child Protection due to past government policies that led to the forced removal of Aboriginal children from their families.

Connecting families with an Aboriginal service as early as possible can completely change the trajectory of a person's life. ACCOs build on the parent's connection to culture, family and Community, which is fundamental in the work they do to provide wraparound support services for expecting vulnerable families.

Challenges

Our Members have highlighted the bias and power Child Protection practitioners can hold over cases based on prior history of parents rather than their current circumstances. There are no consequences or accountability to Child Protection staff who are using outdated information to influence decisions, with ACCOs left asking the question 'how do we hold this power to account?' This act of power not only shows concerns for the safety and wellbeing of the expecting parents but also the ACCO staff who are working with the families.

The disconnect between policy and practice of some Child Protection staff, and their ability to



influence other organisations policies, such as hospitals, is setting Aboriginal families up to fail. Without the strong and consistent advocacy of our Members, the percentage of Aboriginal children entering out of home care within 12 months of birth would be much higher. Our Members go above and beyond the activities they are funded to do with the onus and burden being put on ACCOs to improve the day- to-day practice of child protection.

Whilst the Alliance applaud the Victorian Government for working towards 100% of unborn reports referred to an ACCO it must be made clear that change in policy places additional burden on already existing programs within ACCOs. Expecting mothers may need access to a range of different services such as; Family Violence, Alcohol and Other Drug treatment, Mental Health, Koori Maternity Services (KMS), Maternal Child Health and Cradle to Kinder as well as a Family Services caseworker who provides ongoing support. This requires a large team of professionals who are working together to ensure the needs of the expecting parents are being met. The exploration of what a 'key worker' in ACCOs could look like is needed as they can play a crucial role in keeping expecting parents engaged in programs as they provide consistency by building and maintaining a trusting relationship. Currently, this type of role takes place outside of what ACCOs are funded to do but plays a major part in their day-to-day activities of providing wrap around services to help keep Aboriginal babies with their families once they are born.

The Victorian Government and *Wungurilwil Gapagpduir* has a heavy focus on the need for early intervention and prevention programs that will address the over representation of Aboriginal children and young people in out of home care. The current child protection system lacks the investment into early intervention programs with the Family Matters report showing that only 17 percent of child protection funding goes towards early intervention measures (Family Matters Report, 2018).

A committed investment to ACCOs to develop and adapt early intervention and prevention programs that are Aboriginal led and delivered is critical to reducing the amount of unborn reports for an Aboriginal child becoming substantiated. Data provided by DHHS highlighted that in 2014 families who were subject to an unborn report had a history of alcohol and drug use and/or family violence. Instead of focusing on the risks associated to the child, ACCOs address the drivers behind the need for child protection intervention by linking the expecting parents into support programs that are relevant to their needs. This includes services and activities that are targeted for groups or individuals experiencing disadvantage and aim to enhance family functioning and increase parenting skills and knowledge to prevent maltreatment occurring (Family Matters Report, 2018).

Recommendations

The Alliance calls for the following recommendations to achieve KPI 7 of 100% unborn reports to ACCOs, and to assist child protection and ACCOs to work together to achieve positive outcomes for expecting parents and baby:

1. Developing a clear child protection policy and practice advice on referring unborn reports to ACCOs
2. Mapping of existing services in ACCOs with DHHS data, including alternative supports available for parents (i.e. AoD, Family Violence Counselling etc.)
3. Ongoing investment and expansion of Cradle to Kinder, Koori Maternity Services, Maternal Child Health and Integrated Family Services to cover the state including supporting workforce planning in ACCOs
4. Exploration of additional funding to ACCOs for unborn reports post engagement with the family
5. Exploration of a 'key worker' in ACCOs who can work across multiple programs to provide support to expecting parents



6. Invest in flexible early intervention, prevention and family strengthening models at ACCOs through funding that is flexible, long-term and outcomes based
7. Culturally appropriate resources developed for families who receive an unborn notification i.e. FAQ

ensure culturally safe supports are available to ACCO staff

References

SNAICC (2018), *Family Matters Report*. Melbourne, Griffith University.

Wungurilwi Gaggapduir Objectives

The Alliance believes that this work is best oriented to Objective 2: Resource and support Aboriginal organisations to care for Aboriginal children, families and communities. We recommend a future ACF re-focus on Objective 2 to consider the issues raised at the Unborn Reports Workshop.

In addition activity towards achieving KPI 7 can be included in the priority areas for Objective 3 & 5 as follows:

Objective 3: Commit to culturally competent and culturally safe services for staff, children and families

- Reduced risk of child protection placing their 'unconscious' or 'conscious' bias on families
- Expecting parents having access to culturally appropriate support services
- Extra resourcing to ACCOs to prevent the over burden of existing programs

Objective 5: Prioritise Aboriginal workforce capability

- Increase the Aboriginal workforce in key programs such as Cradle to Kinder, Koori Maternity Services
- Offer training and support on Child Protection Practice for ACCO staff to better respond and communicate with Child Protection and other services
- Recognise the impact un/conscious bias has on Aboriginal workforce and

