

Adopt Change **NATIONAL RECOMMENDATIONS PAPER** for **A HOME and HEALING for Every Child**

Following the **THRIVE 2023** A Home and Healing for Every Child Conference Release Date: September 2024

Acknowledgement

Adopt Change acknowledges the Traditional Owners of Country throughout Australia and pays respect to Elders past, present and emerging.

Part A: National Collective Call to Government for Commitment to A Home and Healing for Every Child, with Recommendations

The purpose of the *National Collective Call (NCC)* to *Commitment with Recommendations* is to seek bringing about substantive and meaningful change to policy and practice to improve the out-of-home care (OOHC) experience for children and young people in Australia through the support of key organisations, peak bodies and leaders in child welfare and protection across the nation. The intent is for children that enter the care system to have positive outcomes – via Home and Healing.

There is an over-representation of Aboriginal children in OOHC, and with the deterioration of the OOHC system creating a disastrous trajectory and terrifying outcomes for children, and a terrible legacy for our society as a first world country, the time has come for collaboration and unification to drive URGENT action within child-centred timeframes.

The issues faced by children and young people in OOHC are well documented in countless reviews, inquiries, committees, focus groups, and research papers. The time has come to shift the needle toward *immediate* action to drive decision making within child-centred timeframes. As such, Adopt Change puts forward the following achievable key recommendations and subsequent action points to halt the catastrophic implosion of the child protection system nationally.

The following four recommendations form the framework of the NCC.

<u>Recommendation 1</u>: Prioritising a home and healing for every child in government care to allow them the best possible life outcomes. This includes all children being cared for in home-based-care with therapeutic assessment and supports.

The over-reliance by governments on crisis models of care is significant. When Government removes children from birth family, due to deeming them unsafe, the premise is that the child will then be provided an upbringing in an authorised family home. Unfortunately, too many of these children are being institutionalised in non-home-based and crisis models of care, thus compounding their trauma. They are being set on a trajectory that impacts their mental health, physical health, education and social outcomes. The residential model of care should be used as an *intervention* for the small number of youths it was designed to

support, not to be misused as a fall-back *placement* model. The fallout for the children, families and society are terrible, and the costs to the Commonwealth and state governments will continue to escalate and be spent on attempting to mop up the mess rather than set in place solutions that benefit all.

There is major overspend on these crisis models instead of investment in the much more beneficial care options that would provide family-based homes for children. AIHW data suggests 80% of children entering care do not return home, yet the latest Adoptions Australia report highlights only 73 known carer adoptions were processed last year¹. The number of children discharged from OOHC has shown a downward trend over the past three years, with **1.9 per 1000** recorded nationally in 2021-2024². This indicates permanency planning is currently not prioritised by state and territory governments. Children who are moved through to permanency – returning home, guardianship or adoption where possible and suitable - alleviates some of the strain from a burgeoning system and delivers better outcomes for children.

Children need to be raised by families, not systems. Every child deserves to be raised in a loving, home-based environment. Furthermore, children in OOHC are also in desperate need of therapeutic services to heal from their trauma, and yet many children are denied access to these vital measures. Whilst respective states have introduced legislation giving effect to Case Plans and Care Plans, departments and agencies are not always prioritising their development and, as such, practice is not in alignment with legislation. Currently there is no national standard that a child or young person in care should automatically receive a therapeutic assessment and, if required, have resources allocated to that child for ongoing or as-needed therapeutic care.

Call to Commitment from Government that:

- 1. All children taken into the OOHC System are provided with 'family' home-based care, not placed in unsuitable institutional options residential care or motels with shift workers. While there may be some instances where truly therapeutic options are required for children with particular needs, this does not include the majority of children in non-home-based care currently.
- 2. All children and young people are to be provided with a **Case Plan** within **six to twelve months** of entering care:
- a) Permanency Plan (according to the continuum of care) with that includes **Family restoration** (when safe to do so); or **Guardianship (typically with kin / relatives) / Permanent Care Order** (until age 18); or where suitable, **adoption**. The Case Plan should be implemented within the **first two years** of a child or young person entering care.

¹ Australian Institute of Health and Welfare (AIHW), 2024. Adoptions Australia. Retrieved from: https://www.aihw.gov.au/reports/adoptions/adoptions-australia/contents/about#

² Australian Institute of Health and Welfare (AIHW), 2022. AIHW-CWS-92-Child-protection-data-tables

- b) Every child entering care is assessed with funding for **trauma-informed therapeutic supports**. This funding and support is to be allocated to each individual child, and not provided as a 'pool of funding' to agencies (as is current common practice).
- c) For **cultural planning** to be included in the case plan, conducted by those qualified to do so
- 3. Early investment in support of parents, or then kin / relatives, as well as sincere early efforts and investment in family finding.
- 4. Access to, and funding for, trauma-informed therapeutic supports for every child in care is to be prioritised. This funding and support is to be allocated to each individual child, and not provided as a 'pool of funding' to agencies (as is current common practice).

<u>Recommendation 2</u>: Increased supports, including financial support, for foster and kinship carers to provide better outcomes for children in care

The lack of support received by foster and kinship carers across the country is severely impacting the viability of the role as well the ability of agencies to recruit potential new carers. The carer 'workforce' is voluntary, and many are impacted by a lack of support, struggling to access vital services and treatments needed for the children in their home. Carers can feel overwhelmed, isolated, and unsure of where to go for help when their caring role becomes challenging. This impacts carers' ability to maintain stable placements, their own wellbeing, and the longevity of their caring role.

The increased cost of living, low subsidy rates and the time demands placed on carers are some of the reasons why recruiting and maintaining carers is difficult across all jurisdictions. Carers have been calling out for years for access to therapeutic support for the children in their care, for improved supports and financial assistance to make their role viable and sustainable, and yet they are often ignored for various reasons. It is not rare for carers to raise their hands for supports and for a child to be moved, even into a residential placement, rather than providing the lower cost supports being requested. Evidence-based models for trauma healing must become an easily accessible part of life for these children and their carers.

As many carers have also identified they are unable to work fulltime (if at all) due to the specific needs of the children in their care, it is worth noting the minimum wage in Australia of \$45,905.60 per annum is up to *three times more* than the average annual carer allowance. The national cost-of-living crisis is not offset by the low carer allowance, leaving many carers out-of-pocket and unable to afford basic necessities for the children in their care.

One of the contributing factors to the increasing use of crisis care models is the lack of family-based foster and kinship carers who are readily willing and able to take on the demanding role of a carer. This is not about transforming all family-based carer roles to a

"professionalised" model, rather ensuring carers (and potential carers) can afford to support a child in their home and removing barriers to this.

It is recommended the following action points are implemented across ALL jurisdictions.

Action points:

- Increase in the carer allowance across all states and territories to a level that offsets
 the current cost of living crisis and out-of-pocket expenses experienced by carers. It
 is recommended this amount is raised nationally, with each jurisdiction establishing
 a viable amount as a 'package' for carers, including supports such as a housing
 allowance to combat rising rental costs.
- Timely pathways for carers to access therapeutic supports for the children and young people in their care, including services for counselling and psychological support, behavioural support, medical and educational supports required.
- Access to a carer support function enabling carers to receive personal support, guidance and training to better provide for the children and young people in their care.
- Improved service delivery alignment, removing barriers to enable carers and families better access to federal supports and healthcare systems, such as Medicare and NDIS.

<u>Recommendation 3</u>: Investment in the sector workforce and their wellbeing to better support children in care

Departments and agencies across the country are losing more staff than they can employ. Evidence suggests departmental caseworkers are leaving for better paid jobs elsewhere, resulting in a workforce of relatively inexperienced caseworkers with more than a quarter still in their first two years of employment³. Consistent feedback from carers indicates that the high level of caseworker turnover negatively impacts the children and young people in OOHC, particularly in relation to understanding the trauma history and needs of each child. Carers often report having to 'start over' with a new caseworker multiple times a year due to staff turnover. Young people in care are reporting the significantly short time they have with each caseworker, with only seven percent care supported by their current caseworker for more than a year⁴.

Recruitment of caseworkers in regional and remote areas is a major challenge, and there are not enough social workers graduating each year considering child protection as a career pathway⁵.

³ PSA (2024). Child Protection in Crisis. Retrieved from: https://psa.asn.au/campaigns/child-protection-in-crisis/

⁴ CREATE (2023). What Young People Said About Caseworker Support. Retrieved from: https://create.org.au/wp-content/uploads/2024/03/Key-message-document-Caseworker-Support-VIC-2023.pdf

⁵ Arthur, M & Thompson, L. *National Analysis of workforce trends in statutory child protection*. Australian Government Department of Social Services.

It is recommended the following action points are implemented across ALL jurisdictions.

Action points:

- To futureproof the sector workforce, **significant recruitment drives** are undertaken at senior high schools and all major Australian universities to encourage students to consider a career pathway in child protection.
- Legislated 'on the job' trauma-informed training for caseworkers to ensure they are trauma-aware and informed in daily practice. To ensure this training is sustainable and supplements case work, it should occur as part of day-to-day operations during the caseworker's paid employment.
- The wellbeing of caseworkers is prioritised, providing greater access to supports to prevent caseworker burnout and the subsequent high staffing turnover.

Recommendation 4: Focus on National Collaboration

With state and territory governments responsible for statutory child protection in their respective jurisdictions, the differing policies and procedures have created disparity in approach. Nationally there is no unified process, whereas there is in fact an opportunity for the jurisdictions to leverage off each other's learnings and assets. There is acknowledgement of the need for better sharing and linking of data across different levels of government and with non-government agencies, which can improve our understanding of children and young people's experience of child protection and other service systems and of the service design and models that are required. The systemic issues in each state and territory are similar – if not identical in nature – and a collaborative, coordinated approach toward resolutions in the OOHC system nationally to prioritise a home and healing for every child is long overdue.

It is recommended the following action points are implemented across ALL jurisdictions.

Action points:

- A commitment from key organisations, peak bodies, Aboriginal Community
 Controlled Organisations (ACCO's) and leaders in child welfare and protection across
 each state and territory to prioritise a Home and Healing for Every Child as part of
 everyday practice.
- A 'Coalition of Leaders' among key organisations, peak bodies, ACCO's and leaders in child welfare and protection to drive change with the federal, state and territory governments to better provide for children, young people and families who have interactions with the OOHC system. It is imperative this 'Coalition of Leaders' contains young people with an experience of OOHC to provide their insight from their time growing up within the confines of the system.

Support of the National Collective Call to Government for Commitment to A Home and Healing for Every Child, with Recommendations

Adopt Change Shine for Kids National Foster and Kinship Care Collective







The National Foster and Kinship Care Collective consists of the CEO's of carer representative bodies across Australia:

- Connecting Foster & Kinship Carers SA Inc
- Foster Care Association of Victoria
- Queensland Foster and Kinship Care QFKC
- Foster Care Association WA
- Foster and Kinship Carers Association NT Inc
- Foster and Kinship Carers Association Tasmania
- My Forever Family NSW (Adopt Change)

Letters outlining areas of agreement:

Queensland Family and Child Commission PeakCare

Queensland Family & Child Commission



Telephone: 07 3900 6000 Reference: TF24/702 – D24/9127

Ms Renee Carter Chief Executive Officer Adopt Change PO Box 595 Dulwich Hill NSW 2203

Via email: renee.carter@adoptchange.org.au

Dear Ms Carter,

I write to confirm my strong endorsement of the *National Recommendations Paper for A Home and Healing for Every Child*. I was pleased to contribute to this work as part of your national conference where I observed children and families engaging in its design.

As Principal Commissioner of the Queensland Family and Child Commission (QFCC) and as Chair of the Queensland Child Death Review Board, I have seen the negative consequences of current placement policies and legislation.

If enacted the recommendations will make meaningful change. Through too many reviews I have made similar recommendations emphasising the need to improve connections and stability in the lives of children in State care.

I agree that Australian governments should commit to:

- 1. Prioritising a home and healing for every child in government care to allow them the best possible life outcomes
- Increasing supports, including financial support, for foster and kinship carers to provide better outcomes for children in care
- 3. Investing in the sector workforce and their wellbeing to better support children in care
- 4. A focus on national collaboration.

I emphasise the importance of listening to the insights from children, young people and those with lived experience of the system when proposing reform. The QFCC report, "I was raised by a checklist" was the product of consultation with young people who provided their perspectives on the impact of growing up in residential care in Queensland. The words of one young participant, Malakai, who said "I wanna see the care system actually care", inspired the



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title of the QFCC report, "A system that cares". In providing my endorsement to your campaign it is the voices of children in care – that I think of.

If you have any queries in relation to this matter, please don't hesitate to contact me directly on 0427 621 626 or via email at principal.commissioner@qfcc.qld.gov.au.

Yours sincerely

Luke Twyford

Principal Commissioner

Queensland Family and Child Commission

20 August 2024



qfcc.qld.gov.au

Monday, 9 September 2024

Michelle Stacpoole Adopt Change Michelle.stacpoole@adoptchange.org.au



National Recommendations Paper for A Home and Healing for Every Child

PeakCare would like to formally offer its support to Adopt Change for some of the recommendations on the *A Home and Healing for Every Child*. The National Recommendations are to be commended and PeakCare supports Recommendation 2, 3 and 4 and supports the national call to Government for a commitment to enact these recommendations.

PeakCare supports the following:

Recommendation 2: Increased supports, including financial support, for foster and kinship carers to provide better outcomes for children in care

PeakCare along with the Queensland Family and Children Commission (QFCC) highlighted in the Queensland Foster Care Demographic insight report the critical need for Foster and Kin Carers. Despite strong population growth, Queensland is facing a shortage of traditional foster carers. This issue is not due to ineffective marketing campaigns but rather a result of demographic tightening. The very first opportunity in the demographic insight report is for an increase in financial support for foster carers to alleviate the cost burdens that deter prospective foster carers. This includes increasing allowances to meet the actual cost of care and providing superannuation payments on all foster carer allowance payments.

Recommendation 3: Investment in the sector workforce and their wellbeing to better support children in care

PeakCare is leading the Residential care workforce roadmap work for the Queensland Government. This work will develop a workforce strategy for the sector including increasing training and support programs for foster and kin carers. Workforce is the number one issue facing all sectors across the nations and the demographic insights report highlighted the need to tailor recruitment and retention efforts towards the carer person as with the greatest growth trajectories and align messaging with identified generational value sets. To achieve this, we need government to immediately undertake a comprehensive overhaul of the foster care recruitment and retention strategies to address the identified demographic tightening over the next 10-years.

Recommendation 4: Focus on National Collaboration

PeakCare welcomes a partnership approach to national collaboration on A Home and Healing for Every Child and supports key organisations, peak bodies, ACCO's and leaders in child welfare and protection working together to drive change with the federal, state and territory governments to better provide for children, young people and families who have interactions with the OOHC system. PeakCare holds the voice of children and young people at the centre of all we do. This coalition of leaders would also include the young people themselves sharing their voice and knowledge from lived experience.

To ensure that every child has the opportunity and right to a safe and secure environment in which to grow up, is essential to the success for future generations. PeakCare supports the premise by ensuring that every child in the nation has the opportunity to be on a pathway to prosperity. It should not matter where a child lives, they should have access to the same opportunities as any other child in our nation.

PeakCare offers their support to Adopt Change in lobbying the federal government under these recommendations so that children, young people and families are a priority of federal, state and territory government policy development and funding decisions to implement positive social change and impact.

Yours Truly

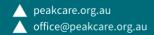
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Part B: Background

State of the Nation

The child protection system is no longer at crisis point. We are now seeing unsustainable, catastrophic outcomes. Currently across the Australian states and territories there are **45,393** children and young people who have been living away from their birth parents, usually due to abuse or neglect, in the OOHC system, unlikely to ever return home⁶. Nearly 70% of these children have been in OOHC for **two years or more** and many children are frequently moved around from placement to placement, some over twenty times, suffering in the child protection system. The negative outcomes for children and young people in OOHC and into adulthood have been well documented for decades, and include difficulties with education and relationships, interactions with the justice system, poor health, early pregnancy, homelessness, and reliance on other government systems and supports for the duration of their adult life. There is a significant over-representation of First Nations children in care, with Aboriginal and Torres Strait Islander children removed from their home at ten times the rate of non-indigenous children⁷.

Almost 4,500 (10%) of children and young people in OOHC are currently living in non-home-based care, such as motels and residential group settings, being looked after by workers on shift. Whilst these crisis placements are designed to be a temporary solution until home-based care can be sourced, some children have been living under these conditions for nearly two years, further exacerbating their trauma. In Queensland, the reliance on these crisis care models has seen the number of children housed in non-home-based care far exceed other states and territories, currently sitting at 1,5828.

With the annual costs associated with a crisis placement reported as between \$350,000 and \$1 million per child per annum, with some reported in excess of \$3 million per child per annum⁹, Adopt Change estimates the total cost to Australian taxpayers to house children in motels across the country at between **1.5 and 4.5 billion dollars per annum**.

In comparison, foster or kinship carers of children and young people receive, on average, **\$15,000 per annum** to provide for the children in their care. For carers in Victoria, the amount of the carer allowance is less, and falls behind other states and territories, even as age-based increments occur.¹⁰ Furthermore, the NSW Carers Survey Report of Findings¹¹ reports carers being unable to access additional financial supports, behaviour support and counselling and psychological support necessary for the children and young people in their

⁶ Australian Institute of Health and Welfare (AIHW), *Child Protection Australia*, 2021-22. 6 June, 2023. Retrieved from: https://www.aihw.gov.au/reports/child-protection/child-protection-australia-2021-22/contents/about

⁷ SNAICC , The Family Matters Report 2023. Retrieved from: https://www.snaicc.org.au/wp-content/uploads/2023/11/Family-Matters-Report-2023.pdf

⁸ Allsop, T. (2023) Queensland's over-reliance on residential care. Presentation.

⁹ Public Service Association. *Minister Washington's child out-of-home care reform push welcomed.* November 20, 2023. Retrieved from: https://psa.asn.au/minister-washingtons-child-out-of-home-care-reform-push-welcomed/

¹⁰ The Victorian Care Allowance is too low to cover the cost of living. Foster Care Association of Victoria (FCAV). November 8, 2023. Retrieved from: https://www.fcav.org.au/news/victoria-has-the-lowest-care-allowance-rate-in-the-country

¹¹ NSW Carers Survey 2022 Report of Findings. *My Forever Family NSW*. Retrieved from: https://www.myforeverfamily.org.au/wp-content/uploads/2023/04/MFF-2022-Carer-Survey-Report FINAL.pdf

care. Whilst carers in Queensland and South Australia received a boost to their carer payment in 2024 (7.9%¹² and 4.8%¹³ respectively) carers are still out of pocket and absorbing the escalating cost of living which exceeds the percentage increase¹⁴.

Carers are the cornerstone of the child protection system, yet the financial pressures they face are significantly impacting their ability to provide home-based care, with many exiting the system across all states and territories, placing extra pressure on governments to find alternatives. Efforts to recruit more carers across the country have proved challenging. Whilst 'word of mouth' is still an important carer recruitment strategy, due to the current experience of existing carers it can also be highly influential in the decision *not* to become a carer¹⁵. AIHW data indicates that in the last five years there has been an 11% decrease in the number of available carers across Australia and a 53% increase of children and young people placed in residential care facilities¹⁶. In Tasmania, with so few carers being recruited to the role, it has been reported the state will face a 'cliff effect' when carers 'age out' of providing care in the next five years¹⁷. According to NSW Office of the Children's Guardian (OCG) data, there were 2,684 Carer Household exits in NSW the year prior to 30 June 2023¹⁸, while in Victoria during the 2021—2022 period 621 households withdrew from being foster carers while only 317 household commenced their foster care journey¹⁹.

There is also evidence that there are authorised carers with vacancy or capacity to take children into their home and provide them care. Carers are somewhat 'owned' by the agency they are authorised with, so if a carer has a vacancy and they aren't found in time by the department referring to an agency, or the agency doesn't choose to make them available, then this opportunity is missed. There are also cases of children being moved across states and territories and away from their regular support network due to carer and kin constraints. This disparate system is out of sync with the times where there is highly capable technology available (and yet not used) and is coming at an expense to children and their futures.

Conversely, across the nation caseworkers are overworked amid a critical staffing shortage. In the Northern Territory, the team within the Territory Families department dedicated to approving and reauthorising carers was dissolved in 2021, thus placing extra pressure on case managers to also perform recruitment functions²⁰. In Western Australia it was reported

¹² Queensland Government (2023). Carer Allowances. Retrieved from: https://www.qld.gov.au/community/caring-child/foster-kinship-care/information-for-carers/money-matters/carer-allowances#fortnight-allow

¹³ South Australian Government Department for Child Protection. *Payment boost for foster and kinship carers in SA.* 9 June 2023. Retrieved from: https://www.childprotection.sa.gov.au/carers/carer-news/payment-boost-for-foster-and-kinship-carers-in-sa

¹⁴ Connecting Foster & Kinship Carers SA Inc, *Minister announces Carer Payment increase for new financial year*. 9 June 2023. Retrieved from: https://cfc-sa.org.au/news/carerpaymentincrease/

¹⁵ Richmond, G & McArthur, M, (2017). Foster and kinship carer recruitment and retention. Institute of Child Protection Studies. Retrieved from:

https://acuresearchbank.acu.edu.au/download/e6a214257dfcbf0ecf087ad0726bacec5494b25f47b68ece297fec0ef9a84f59/843748/Richmond 2017 Foster Kinship Carer Recruitment and Retention.pdf

 $^{^{16}}$ Australian Institute of Child Welfare (AIHW), 2023. Child Protection Australia 2021-22. Retrieved from:

 $[\]underline{https://www.aihw.gov.au/reports/child-protection/child-protection-australia-2021-22/contents/insights/supporting-children.}$

¹⁷ Rojahn, M. & Napier, K. (2023). Tasmanian foster care to face dire shortage in five years as foster carers 'age out'. ABC News. Retrieved from: https://www.abc.net.au/news/2023-05-12/tasmania-foster-care-faces-dire-shortage-in-five-years/102331356#

¹⁸ NSW Government, Office of the Children's Guardian, Carers Register

 $^{^{19}}$ AIHW, Child Protecion Australia 2021-2022, data table 7.2

²⁰ Middap, C. (2023). *NT Government move creates backlog in foster family approvals*. The Australian. Retrieved from: https://www.theaustralian.com.au/nation/nt-government-move-creates-backlog-in-foster-family-approvals/news-story/b50485b0a7e9200e7f542f1ca8b4f907

in 2022 that more than 1000 at-risk children do not have a case worker, instead listed on what has been referred to amongst the carer community as a 'ghost list' to be 'queued' or 'monitored' by the department²¹. In the ACT, critical staff shortages may have led to over half of foster and kinship carers not holding a valid Working with Vulnerable People (WWVP) registration whilst caring for children²². In NSW, the caseworker vacancy rate has increased by 500 percent over the past 18 months²³.

Expenditure in the OOHC sector across the country is crisis driven, with a focus on service delivery rather than support or early intervention²⁴ and the system as a whole is adversarial, slow to change¹⁹, and doesn't give enough weight to lived experience voices. The 2018 Tune Report identified the New South Wales system as ineffective and unsustainable, with the department having minimal influence over 'drivers of demand' and 'levers for change' and calling for a review of the carer allowance²⁰.

About THRIVE 2023 A Home and Healing for Every Child Conference

Founded in 2008 as National Adoption Awareness Week, **Adopt Change** exists to ensure a home for every child that is safe, nurturing and stable so that all children can grow learn, play and thrive, and that families caring for children who have experienced trauma are well supported.

The Adopt Change **THRIVE 2023 A Home and Healing for Every Child Conference** was held on 13 and 14 November 2023 at the Sydney Cricket Ground (SCG). The Conference has been held by Adopt Change annually since 2017, to call on government around the country to provide updates on their 2016 commitment to prioritising permanency for children and young people in OOHC. In 2023, the focus was on solutions to provide *all children* with access to home-based care and healing, with particular attention to the almost 4,500 children and young people living in non-home-based care.

Speeches at the conference were delivered by the Hon. Amanda Rishworth MP, Minister for Social Services, Australian Government; the Hon. Kate Washington MP, NSW Minister for Families and Communities; The Hon. Ryan Park MP, NSW Minister for Health; the Hon. Sabine Winton MLA, WA Minister for Child Protection; Leanne McLean, Commissioner for Children and Young People in Tasmania; Luke Twyford, Chief Executive and Principal Commissioner of the Queensland Family and Child Commission (QFCC); Zoe Robinson, NSW Advocate for Children and Young People, as well as headline speakers Brenda Matthews, The Last Daughter; Candice Butler, SNAICC; and Ursula Elisara, CEO Immerse Charitable Trust New Zealand. Panel speakers included Tom Allsop, PeakCare Queensland; Dr Lisa Griffiths, OzChild; Steve Kinmond OAM, NSW Children's Guardian; Dr Sylvia Corish, NSW Department

²¹ Cross, D. (2022). *The 'ghost list' grows: 1000 WA children at-risk do not have a caseworker.* WA Today. Retrieved from: https://www.watoday.com.au/national/western-australia/the-ghost-list-grows-1000-wa-children-at-risk-do-not-have-a-caseworker-20220728-p5b5hl.html

²² Uibu, K. (2003). *Kids in state care left with carers who haven't got working with vulnerable people check*. ABC News. Retrieved from: https://www.abc.net.au/news/2023-05-09/child-protection-workers-leaving-kids-with-carers-no-checks/102304240

²³ PSA (2024). Child Protection in Crisis. Retrieved from: https://psa.asn.au/campaigns/child-protection-in-crisis/

^{24, 20} Tune, D. (2018). *Independent review of out of home care in NSW*. Retrieved from: https://www.acwa.asn.au/wp-content/uploads/2018/06/TUNE-REPORT-indepth-review-out-of-home-care-in-nsw.pdf

¹⁹ Lund, S. (2020). *Is our model of foster care outdated and unsustainable?* The University of Western Australia. Retrieved from: https://www.wa.gov.au/system/files/2021-10/OOHC-Disruptive-Social-Ideas.pdf

of Education; and Jason May, Bawamara Cultural Services. Additional presentations were delivered by Jane Vidavaloo, Children's Ground; and Belinda Coleman, Curijio. A full list of speakers can be found here.

After engaging in presentations, panels and workshops, delegates were asked to respond to the four key questions below as part of a National Roundtable. A sample of answers has been provided.

Q1 Part a) What should the commitment be in relation to ensuring every child removed from their family goes into home-based care? When we have 10% of children in care not in a home environment, what should we be expecting from government in relation to this?

"National plan for improved carer support and retention" NSW Team Leader carer engagement and support and Adoptive parent

"Pay Carers a fulltime salary (not a stipend) to be fully available to provide the care for these children. It is a fulltime job to manage the therapy, school relationships, medical, and 1:1 connection time" Carer, Queensland

"Transparent and timely permanency or reunification planning"

"True budgetary commitment for the support of family-based care. We need the resources to do this properly".

Q1 Part b) How do we make becoming a carer a more viable option for people to consider, and how do we retain more carers?

"Care for the carers better!! Give them the resources/information/training they need! Support them so they can support the children! So they don't have to fumble their way through the system."

"Pay carers better. Move with the times a take into account the cost-of-living crisis."

"Consider suitability requirements for carers and being more open to applicants with varying backgrounds."

"We need to provide higher levels of carer payments for children who have been in non-home-based care and high levels of training and therapeutic care for children in non-home based care. Better relationships with the care team, more access to therapeutic services and carer support."

Q2. Permanency planning legislation varies nationally. There are also different practices implemented which may not keep up with legislation changes. How do we prioritise permanency across the continuum in a timely way, beginning with children staying at home?

"National approach to care is so desperately needed."

"Capacity building in the intervention services and Child Protection services."

"Hear the voice and wishes of the child and lend it more weight."

"Family preservation programs and then implement set compliance where permanency conversations are required to start." Carer Support, NSW

Q3 Despite effort in cultural planning and following the Aboriginal and Torres Strait Islander Placement Principle, Aboriginal children are still overrepresented in the care system. How do we overcome this?

"Allow Aboriginal and Torres Strait Islander communities to be the decision makers and provide the direct supports for their own mob - a 'white' lens and the bureaucratic child protection space are inherently discriminatory."

"Better support for non aboriginal carers caring for aboriginal children."

"Build connection between agencies (government and NGO) and the local aboriginal services, community and elders."

"Listen to children, their family, community and mob. Involve them in leading in all decisions, cultural consultations, build upon strengths. Say sorry when something goes wrong. It's not about trying to fit Aboriginal families into a system that is not made for them."

Q4. Children who enter care have experienced trauma. One of the highest commitments from government should be to provide adequate therapeutic assessments and supports. How can we ensure this happens for every child entering care?

"ALL children placed in OOHC should have automatic access to therapeutic services."

"Involve the carer and empower carers to co-drive this. I am in NSW and our little one who arrived non-verbal and fine motor delayed through trauma has been supported by all in NSW health. He has now 4 and has caught up to his cohort."

"Have developmental trauma recognised as a stand-alone diagnosis which can then qualify for NDIS funding. Have all the trauma support therapies available on the NDIS."

"Providing training and support for all caseworkers doing direct work with children to allow them to provide this support and connection.

The Voice of Youth

Following the Thrive conference, input was sought from young people with an experience of the care system. The following statement surmises their sentiment:

"Within this generation Young People are having more contact with other young people in Australia in the out-of-home care system then [sic] ever before. Because of this we are noticing the disparity between states and funding, making it harder than ever to feel like our federal government have our best interests at heart. Having been to a number of conferences in many years - the statement from young people has always been the same. Stop trying to get down to our level and start raising us up to speak so that we can help make significant progress and change in the areas that affect OUR lives."

Part C: Conclusion

Whilst some jurisdictions have commenced systems reform, the levers of change are slow and not in child-centred timeframes. Meanwhile children and young people continue to be caught up in a system that - whilst intended to protect them and support a positive growth trajectory – can further compound a child's trauma.

All children have a right to grow up in home-based care and receive the love and support they need to flourish throughout their childhood and into adult life. The money exists in the system to overhaul the default crisis care options provided and create better outcomes for at-risk children by investing *properly* in securing and retaining home-based care and permanency. In fact, as well as the outcomes being far superior in a system that works and is based on families, the costs on governments in both the short and long term will be significantly lessened. It is not possible for governments to be a good long-term parent and Australia needs to act now to stem the impacts of the decades-long issues within the OOHC system.

Children, young people and families should be a front and centre priority of federal, state and territory government policy and funding to implement positive social change and impact. Children who enter the child protection system are some of our most vulnerable citizens and deserve serious investment in terms of providing them with safe homes and the resources to recover from their traumatic experiences.