Winangay Resources

Submission to the
Queensland Child Protection
Commission of Inquiry

“We acknowledge and recognise Aboriginal peoples as the traditional custodians of Australia. We acknowledge and thank the Elders (past and present) for their wisdom and care of this land. We acknowledge with respect the resilience, contributions and strengths of Aboriginal people”

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WINANGAY Resources Inc

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Winangay’s Submission to the Queensland Inquiry

Background
Indigenous children in Australia comprise 4.9% (AIHW 2012) of all children aged 0-17 years. Within the OOHC system, Indigenous children (n=12,358) compared to non-Indigenous (n=24,929) are highly over-represented with a rate over 10 times that of non-Indigenous children (AIHW, 2012). The Aboriginal Child Placement Principle (ACPP) ensures, that where possible and appropriate, all Indigenous children are placed either, with the child’s extended family; or within the child’s Indigenous community; or with other Indigenous people. In 2011, nearly two-thirds (64.2 per cent) of Indigenous children in care were placed with relatives, kin or other Indigenous caregivers. Just over half (51.8 per cent) of non-Indigenous children were similarly placed (AGPC, 2012: Table 15A.45).

Recent departmental figures for Queensland (March 2011) indicates that over “1,337 Aboriginal and Torres Strait Islander children are currently growing up without their family, community and culture” (Adams 2011:2). These figures are alarming and are continuing to grow. In QATSCIPPS Losing Ground Report (September 2011) a report on the adherence to the Aboriginal and Torres Strait Islander Child Placement Principles in Queensland, Elizabeth Adams (former Chair of the Peak) wrote This failure to adhere to the principle means that “1,337 children and their families are paying a terrible price for this failure. The whole community will continue to pay this for years to come” (Adams 2011: 2).

Existing policies and practices are likely to lead to a continuing increase in the numbers of Aboriginal children coming into care. A renewed commitment to implement the Aboriginal Children Placement Principles is required along with a commitment to provide innovative, culturally appropriate and stronger ways of working with Aboriginal children and families, which enable workers to mobilise Aboriginal peoples’ strengths resilience and determination.

Kinship – “Aboriginal Kids Aboriginal Care”

Kinship care is part of the Aboriginal way; it has always been the responsibility of extended families and communities to raise children. When children are unable to be raised by their birth parents it is family and community who provide the care. This practice has contributed to the preservation and transmission of culture and to the wellbeing of children, families and communities. The removal of Aboriginal children has contributed to the fragmenting of their families and communities and come at a huge cost for Aboriginal children, families and communities (HREOC 1997).

Where serious Child Protection concerns arise for Aboriginal children in their family of origin the Aboriginal Children Placement Principle outlines the options which need to be explored. Placement with a non Aboriginal foster carer which is recognised as a placement of last resort all too often becomes the first option, with all the attendant problems in terms of loss of culture connection and identity.

When a decision is made to place a child within their extended Aboriginal family workers are faced with significant challenges. In relation to the assessment of the potential carer the
tools the workers are obliged to utilise are generally variations of the assessment tools for foster carers. These tools fail to capture the complexities of Aboriginal kinship care, are culturally insensitive and are predicated on an erroneous assumption that the child is not known to the carer and is a stranger to the potential carer.

The reality in kinship care is that the kinship carer has often has a longstanding relationship with the child and they may have been raising that child for some time. As one Aboriginal kinship carer put it “I’m raising him not caring for him” Unlike foster carers who care for children who are not previously known to them, kinship carers are raising children who are part of their family. They know what the child has been through, they have often raised Child Protection concerns, and they have provided for the children despite high levels of disadvantage.

Consistent with findings from research in the UK and the USA, researchers in Australia (Mason, et al., 2002) identified a lack of procedural guidelines for recruiting, assessing and supporting kinship placements resulting in kinship care receives less monitoring, training, support as well as inappropriate assessments (Bromfield and Osborn, 2007). This ‘lesser’ treatment of kinship care placements is alarming as many of the children in kinship care have experienced “similar levels of trauma and loss and consequent emotional damage as children placed in home based care” (Joyce et al., 2008). Bromfield and Osborn (2007) note that “kinship care placements require the same entitlements to monitoring and support as non relative foster care”.

Current practice in relation to kinship carers mimics practice in relation to foster carers and fails to capture the difference between kinship and foster care. These differences are important and need to be acknowledged when working with kinship placements (see Table 1)

Table 1: Differences between kinship and foster care placements

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<td>1. Foster Carers choose to become foster carers</td>
<td>Many kinship carers feel they do not have a choice in deciding to care for their grandchildren or family members especially when the only other option is foster care. Aboriginal peoples’ experience of previous Child Welfare policies increases their determination to keep children with kin or within their community.</td>
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<td>2. Foster Carers are obliged to attend training prior to having a child placed with them. They have been through an assessment process designed to identify their suitability and prepare them for fostering. Foster carers have access to ongoing training and support and are provided with financial support.</td>
<td>Kinship carers rarely have an opportunity to attend training, assessment are often rushed and occur in the context of a chaotic, overstretched and a culturally insensitive child protection system. These more perfunctory assessments provide little opportunity to identify and meet kinship carers’ needs or to adequately identify the needs of children the majority of who have been traumatised and neglected.</td>
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<td>3. Foster Carers are able to access workers who can provide a buffer between the birth family and the foster family. Workers also arrange contact and can provide a</td>
<td>Many kinship carers have to navigate the complexity of kinship care arrangements on their own. For many kinship carers this is the most contentious and difficult aspect of raising the children and the one where they seek the most support (McHugh, 2009, Humphreys and Kiraly, 2011)</td>
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supervisory role in contact if required.

4. Foster Carer are generally better resourced individuals, they tend to be younger and have access to more resources (Farmer, 2009)  
Kinship carers are generally older, poorer, raising children on their own. Many have complex medical issues and do not have access to same level of supports provided to foster carers (Yardley, Mason & Watson, 2009, McHugh, 2009)

5. Foster Carer take pride in their roles and are more likely to be accorded respect by their peers given the choice they have made to care for vulnerable children (McHugh 2009)  
Kinship carers often experience guilt and shame in relation to what has happened to their grandchildren. Kinship carers experience multiple losses, their relationships are fractured, their retirement plans shelved and their connections with friends submerged under the demands of caring for abused and traumatised grandchildren. Kinship carers suffer from higher rates of anxiety, depression and isolation (Yardley, Mason & Watson 2009)

Given the significant difference between kinship and general foster care, it is imperative that the Queensland model of practice reflects the differences and is responsive to the needs of both situations.

**Kinship Care Outcomes**

Despite the enormous challenges kinship carers face the outcomes for children in kinship care compare well with outcomes for children in foster care. Mackiewicz (2009) quoted in McHugh, 2009 reviewed studies in the UK and US and found substantial benefits for children and young people in kinship care including:

- feeling loved, cared for and valued
- maintaining a sense of identity and belonging and feeling settled because they were with family;
- more stable placements than for children placed with foster carer;
- fewer placement moves; and
- maintenance of contact with family and friends

**Current Kinship Assessment Models.**

Current kinship care assessment models are “worker centred”. They are generally adapted from foster carer assessment tools and are focussed on approving kinship carers (many of whom have had the children living with them for some time prior to the assessment). The existing models tend to reinforce traditional power relationships which contributes to an imbalance in power between workers and carers.

A collaborative approach in which power and decision making is shared is seen by researchers as consistent with best practice approaches when working with recipients of child protection service (Dawson & Berry, 2002; Cooper Altman, 2005; Trotter, 2002; Trotter, 2006).
In advocating for a different approach toward assessing and supporting kinship carers Portengen and van der Neut (1999), quoted in McHugh 2009, suggest a collaborative exchange of information between worker and carers as more appropriate practice in working with kinship carers.

A process that focuses on assessing the viability of existing arrangements and on ‘enabling’ the carer, as opposed to ‘approving’ (consistent with assessing foster carers) is recommended by Waterhouse (2002).

Acknowledging families expertise, engaging in respectful, culturally appropriate collaborative relationships with kinship carers and the larger extended family at the assessment stage and beyond provides the mechanism through which Aboriginal kinship carer families can mobilise their resources to meet their children’s needs (SNAICC and AIFS 2004).

The literature suggests that kinship carers value workers who are mature supportive and provide practical assistance to enable them to meet the needs of the children they are raising. Carers noted critical aspects that caseworkers needed to bring to the assessment including:

- Maturity, experience, understanding and respect;
- Appreciation of a carer’s situation/story;
- Understanding the carer’s mixed emotions/divided loyalties with parents and grandchildren;
- Ability to involve extended family in decisions/planning; and

The increased use of kinship care can provide challenges for workers, many of whom have not had access to training or support in the provision of kinship care. Kinship care can be more challenging and more difficult for workers than working with non kin foster care.

Hunt, Waterhouse and Lutman, 2008 identified the requirement to provide workers with training and ongoing support to enable workers to respond sensitively to the unique challenges of kinship care. They identified the particular challenge for kinship carers and workers in addressing the ongoing complex family dynamics arising in kinship care arrangements. Farmer and Moyers (2008) identified the importance of developing good trusting relationships between workers and carers, and noted that, in the absence of these relationships, kin carers could resent the restrictions placed upon them by children’s services (McHugh 2009).

Consistent feedback from Aboriginal workers and non Aboriginal workers (Winangay 2011) indicates that they require assessment tools which are culturally specific and kin specific, and training to use tools which enable them and kinship carers to identify service strategies and resources to meet the needs of the children.
Development of a kinship specific tool

The obvious need for a culturally appropriate and kinship specific assessment tool and the knowledge that things needed to be different, led a small group of stakeholders to form a development co-operative, and create what is now known as the Winangay Assessment Resources.

The belief was that the only way to devise a culturally appropriate tool was to work with Aboriginal people in a process which respected their knowledge, drew on their ideas, experience and opinions. An Aboriginal reference group was formed and met several times providing comments and suggestions. Dr Marilyn McHugh (UNSW) and Professor Marianne Berry (Director and Chair Centre for Child Protection generously provided support and feedback (pro bono) throughout the process. Professor Marianne Berry spent time with the development team (Aunty Susie Blacklock, Gill Bonser and Paula Hayden supported by Karen Menzies and Flic Ryan ) in January 2011 and contributed enormously to the validation of the tool in particular the strengths and concerns component.

Underpinning the resources is an acknowledgement that there is a difference between kinship and foster care and these tools are specifically designed to meet the needs and aspirations of kinship carers and the children they are raising. They provide the means through which kinship carers strengths and concerns can be addressed. Practical action plans are created which focus on meeting needs of children and carers. The impetus for changing and improving outcomes is maintained throughout the process via a review process.

Children’s rights to be heard and to participate in decision making is embedded in the process through the “Kids SAY” interview this ensures that children’s concerns are heard and an Action Plan is developed to address those concerns.

As one First Nations worker at the international foster and kinship care conference BC Canada 2011 described it “the Winangay Aboriginal kinship care assessment tool creates a seismic shift in the way assessments are done by distributing power from workers to carers” Consistent feedback from kinship carers and workers is that the tools are culturally appropriate, they identify strengths and concerns and contribute to positive change and the building of constructive relationships between carers and workers. As one kinship carer put it : ‘What’s important to us is included in the Action Plan. We work with the worker to decide what we all have to work on’.

The WINANGAY Aboriginal Kinship Care Assessment Tool and the subsequent general WINANGAY Kinship Care Assessment Tool was informed by research (national and international) and the knowledge and experience of Aboriginal and non-Aboriginal kinship carers, workers, academics and service providers.

The initial tools were for new and existing carers and were specifically developed for Aboriginal carers. However pressure from the field has subsequently led to customised versions for non Aboriginal carers as well as a review tool that can be used in an ongoing way to monitor and review placements.
The principle of empowerment enunciated under sections 83 of the Queensland *Child Protection Act 1999* are embedded in this tool and have shaped its development.

A number of other principles underpin these resources:

1. Aboriginal Kinship carers have a right to be assessed by Aboriginal workers who have been trained in the use of culturally appropriate tools which are strength based flexible and reflect Aboriginal ways (SNAICC 2004 & AIFS 2004).

2. Assessments need to be informed by culturally appropriate thresholds and standards and community knowledge, norms and expectations (Higgins et al., 2005).

3. Tools need to be collaborative, enabling and respectful and recognise kinship carer’s commitment, wisdom and prior knowledge of the child.

4. The process needs to be enabling, allowing kinship carers to identify unmet needs, strengths and concerns and work with the worker to generate strategies to meet those needs and address concerns (Waterhouse 2002)

5. The needs of children are paramount and assessment provides opportunities for children to participate in decision making (Higgins et al., 2005)

6. Review mechanisms should be built into to the process to monitor outcomes for children and the ongoing support needs of the kinship carer (O’Brien, 2006)

The Winangay Aboriginal Kinship Care assessment seeks to redistribute power, between workers and carers enabling kinships carers to take the lead in the assessment process and determine with the workers the goals for action.

**How Winangay is used**

The *WINANGAY Kinship Care Tool* uses plain English and focuses on strengths of the carer family, safety for the child, and solutions required to meet needs (Turnell & Edwards, 1999).

WINANGAY is a collaborative transparent tool which involves carers and workers using a conversational yarning format to talk about key aspects of kinship care.

The WINANGAY assessment focuses on four key competencies:

1. Environment and meeting needs.
2. Staying Strong as a Carer.
3. Growing our Kids Strong.
4. Safety and Working Well with Others.

The yarning interviews incorporate the use of a set of visual cards aligned to each competency which identify key factors for a successful placement. During the discussion with the family, these are placed on a colour coded continuum from a ‘deadly’ strength (dark green) to a significant concern (dark red). The visuals on the cards reflect Aboriginal humour and are designed to engage Aboriginal Kinship carers in a culturally appropriate ways to enable them to fully participate in the assessment process deciding what works; what’s OK, and what concerns they might have.
A specific session for children allows them to be heard and participate in the assessment process.

The assessment of strengths and concerns is designed to be a mutual process. Through the use of collaborative engagement, a strengths based framework and solution focussed questions, workers provide opportunities for kinship carers to identify strengths, which enable them to meet the children's needs, and to identify unmet needs and concerns which may negatively impact on their capacity to meet the child’s needs. From this conversation emerges an Action Plan to jointly identify strengths, unmet needs and any concerns as well as identifying services and support which may be required. A review mechanism is built in to evaluate the extent to which carers and children needs have been met and concerns have been addressed. The resource includes workers guides, strength and concern graphs and a final report for the file.

What others have said about these resources

When the resources were launched Dawn Wallam Chair of SNAICC (18th Nov 2011) said “The use of Winangay has the potential to reduce the numbers of Aboriginal children in non Aboriginal care and to contribute to closing the gap between Aboriginal and non Aboriginal children and families”.

Professor Marianne Berry in her foreword to the resources wrote “The Winangay Tool captures the day-to-day experiences, challenges and strengths of Indigenous families, and in a way that engages respects and values the input and perspective of the families who care for children. No other assessment and case planning tool, to my knowledge, has been developed with as much involvement and critique by the population for which it is intended. Australia should be proud of this contribution to the advancement of assessments that are sensitive to the needs of unique populations.”

According to Aunty Susie Blacklock “The resource means Aboriginal people will be listened to and be equal in the process, so kids and kinship carers can say what they need”.

The National Framework for Protecting Australia’s Children Newsletter 2012 stated: “The Winangay Indigenous kinship carer resource was successfully trialled in 2011 and states and territories will now incorporate the resource into their carer practice, where appropriate. The Australian Government recognises the valuable role Indigenous kinship carers play in supporting vulnerable and at-risk Indigenous children and will provide one-off funding for the production of the resource.”

A letter to Winangay from Minister Jenny Macklin stated: “The Community Housing and Disability Services Ministers agreed in March that Winangay Aboriginal Kinship Care Tool should be incorporated into practice in all states and territories as a culturally appropriate good practice guide”. The letter went on to say “I anticipate this resource will support Aboriginal Kinship Carers, leading to improved outcomes for carers and children in care, and ultimately for the broader Aboriginal population”
On the 13th December 2011 QATSCIPP wrote a letter to the Department of Families, Housing, Community Services and Indigenous Affairs to “highly recommend the funding of the Winangay Assessment Resources to be made available for use across Queensland”

Conclusions

• There is a need for culturally appropriate assessments and support for kinship carers which reflects the complexities of kinship care and is distinct from the resources used for foster carers.

• That best practice involves a power sharing and mutual relationship between carers and workers that enables better outcomes and specific support for unmet needs.

• The Winangay Assessment tools are culturally appropriate, have been piloted nationally have been endorsed by SNAICC and QATSCIPP and validated by Professor Marianne Berry and Dr Marylyn McHugh. Winangay assessment resources would add a much needed culturally appropriate set of resources to increase the effectiveness of child protection and care in Queensland and to contribute to the reduction of the over representation of Aboriginal and Torres Strait Islander children in care and provide better outcomes for children who are in care.

Recommendations

1. That urgent action be taken to reduce the number of Aboriginal children in care and to adhere more closely to the Aboriginal & Torres Strait Islander Placement Principles.

2. That culturally appropriate proactive and capacity building strategies be introduced at the earliest opportunity to ensure Aboriginal & Torres Strait Islander children are not placed in care.

3. That consideration be given to implementing (or piloting) the Winangay kinship assessment resources in Queensland.

4. That the Queensland child protection processes identify the different support needs of kinship and foster carers and create practice systems that reflect those understandings.

5. When Aboriginal and Torres Strait Islander children are likely to be taken into care, identifying possible kin placements should always be the first option explored in an expedited and streamlined way to minimise the risk of culturally inappropriate placements.

6. That workers be trained and given the resources to enable them to work in culturally appropriate strength based ways with kinship carers which embeds in practice, new ways of working which reflects the uniqueness of kinship care and is more responsive and sensitive to carers, children, families and the communities they serve.
References


Winangay Resources Attachments to the Queensland Child Protection Commission of Inquiry

Attachment 1  The Winangay Team

Attachment 2  Letter from QATSCIPP

Attachment 3  Chair of SNAICC forward (Dawn Wallam)

Attachment 4  Professor Marianne Berry’s Forward to Winangay

Attachment 5  FAHSCIA report December 2011