

**Post Placement Support Service (Vic) Inc
Foster Care Association of Victoria Inc**

**Carer Information
and Support Service**

**CARER SUPPORT NEEDS
SURVEY REPORT 2010**

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September 2010

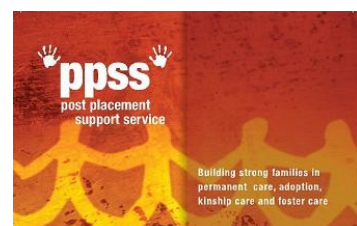
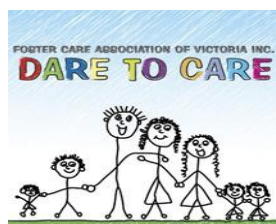


TABLE OF CONTENTS

Executive Summary	2
Introduction	5
Background	8
Methodology	9
Response Demographic	10
Results of Data Collected and Discussion	12
Section 1: Carers' Results	
1.1: The impact of caring on carers and parents	12
1.2: Support	14
1.3: Services deemed unavailable	19
1.4: Future support and service needs for carers, parents, children & young people	20
1.5: Future training needs for carers, parents, children & young people	22
1.6: Factors influencing carers' ability to continue <i>caring</i>	24
Section 2: Professionals' Results	
2.1: Professionals—breakdown of respondents	27
2.2: Training and professional development	28
2.3: Training and support services deemed unavailable	29
Section 3: Final Responses	31
Recommendations	32

*Please note: In this document, the term 'carers' includes foster, kinship and permanent carers. The term 'parents' refers to adoptive parents.

EXECUTIVE SUMMARY

The Post Placement Support Service (Vic) Inc (PPSS) is an early intervention support and training service which serves anyone who has a personal or professional connection with kinship care, permanent care, adoption and long term foster care. Particular emphasis is placed on offering services to children and young people (under 18 yrs) who have moved from one family to another, permanent parents/carers of children who were born to other parents, and the professionals who serve these individuals and families.

The Foster Care Association of Victoria Inc (FCAV) is a non-government organisation providing support to foster carers and permanent carers. The Association is established for the public charitable purposes of advancing and promoting the care of children and young people who are fostered, or are in other forms of home based care, including encouraging contact and exchange of ideas and information between those persons involved in foster care.

The FCAV/PPSS Carer Information and Support Service or 'CISS' (previously known as the FCAV/PPSS Carer Help Line) is available to all carers of children and young people living in home based care in Victoria. In addition, the Carer Information and Support Service is available to Community Service Organisations (CSOs) and government workers for information on issues impacting carers.

In April 2009, the CISS Advisory Group was convened to oversee the running of the Carer Information and Support Service. The CISS Advisory Group consists of representatives from the Office of the Child Safety Commissioner, FCAV, PPSS, The Mirabel Foundation, The Centre for Excellence in Child and Family Welfare, Department of Human Services, Berry Street Victoria and Salvation Army Westcare.

In May 2009, funding was sought through the Ian Potter Foundation for a project to enhance the FCAV/PPSS Carer Information and Support Service through the introduction of a 1300-number phone line, training of phone line volunteers, continued production of regular, in depth, analytical reporting and enhancement of the Carer Information and Support Service pages on both organisations' websites. This funding request was granted in August 2009.

In September 2009, we sought to amend the project parameters as further research indicated the Service may struggle to support the ongoing financial impacts of a 1300 phone number service. This amendment was granted. As such, we are committed to maintaining the Carer Information and Support Service in its current operational format, without utilizing the services of volunteers on the phones and as such maintaining a consistent message and information flow to carers.

As part of the amended project brief PPSS and FCAV committed to the following:

- Ongoing development of a series of information sheets for targeting key issues for carers in the home based care sector; (See the FCAV website at www.fcav.org.au under *Carer Resources* for copies of the information sheets developed throughout the project). This information is also to be made available on PPSS website currently undergoing redevelopment.
- Continued high quality and informative analytical reporting of data captured through the Carer Information and Support Service; (See the FCAV website at www.fcav.org.au under *Carer Support Service* for copies of CISS reporting).
- Development of a stand-alone Care and Information Support Service website directory with links to both the existing FCAV and PPSS websites as well as other relevant sector organisations and support groups. The new stand alone web-directory can be viewed at **www.carer.org.au**.
- The design, delivery and analysis of survey of the needs of carers and professionals across the home based care sector. Thus allowing for planned, relevant and practical support needs and services to be identified and developed within the sector.
- Dissemination of the survey results through a journal article. (A draft copy of the article submitted to Children Australia can be viewed at www.ppss.org.au).

Key findings from the Home Based Care Support Needs Questionnaire for Carers, Parents & Professionals are:

- The high response rate from local and inter-country adoptive parents may be an indication of their need for ongoing support and advocacy in a sector that is largely quiet on issues pertaining to their needs.
- The low response rate amongst kinship carers may indicate both a lack of formal support options within the sector along with a lack of connection to kinship and/or informal care networks;
- Some carers/parents reported they found the support offered by their agency worker to be unhelpful;
- Carers/parents have found it extremely difficult to identify, access and afford effective mental health services for either themselves or the child/young person in their care;
- Carers/parents have found it difficult to attend training or information opportunities due to the demands of their caring role, leaving many at a loss to understand or work with the challenging behaviours being displayed by the child/young person in their care;
- Many carers/parents have found their ability to cope has varied throughout the time the child/young person has been in their care, with many reporting that adolescence triggered difficulties within the home that had not previously existed;

- Many carers/parents have found their caring role to be an isolating and lonely experience;
- Many carers/parents spoke of the joys that parenting had brought to their lives;
- Many carers/parents identified that the support of friends and family had greatly assisted them in their roles as carers/parents.

Key Recommendations

Detailed recommendations are presented from page 32 of this report. A brief summary of the recommendations is outlined below:

- The development of a kinship carers peak body in Victoria is paramount if kinship carers are to be effectively supported and their needs voiced within the sector;
- Identification of the true number of formal and informal kinship care arrangements in Victoria is needed, together with analysis of the long term viability of these arrangements. Currently, there are no firm statistics around the number of children living in informal care arrangements with extended family and friends across Victoria.
- Enhancement of inter-country adoption support networks through both government services and the community;
- PPSS and FCAV to continue to provide effective and targeted training and information opportunities for carers and parents;
- Review of agency worker ratios to ensure the support element of their role is not lost;
- Increased engagement between the CREATE Foundation, the peak body representing children and young people in out-of-home care, and carers/parents across the sector as a support option for children and young people;
- Increased accessible and affordable mental health and counseling services to be identified and/or developed across the sector;
- Enhanced education, information and support for carers/parents across the sector;
- Increased focus on carer retention including acknowledgment and respect for the role of carers in the sector;
- System orientation for professionals working in home based care and adoption;
- Development of effective permanent care support networks for both permanent care parents and 'transitioning' foster care to permanent care parents.

INTRODUCTION

State wide standardised training programs such as *Step by Step* and *Shared Stories Shared Lives*, ensure foster carers entering the home based care sector do so with significant training and insight into the impacts, which trauma and displacement can have on children who come into their care.

However the steady increase in statutory kinship placements and informal relative care arrangements has led to a significant support need for relative carers who are not only new to the welfare sector, but who are also grappling with the complexities of trauma-related behaviours in the children they are caring for. In addition, permanent carers and adoptive families have their own particular support needs, related to the background trauma experienced by their children. Inter-country adopted children will have further support needs in addition to those experienced by children adopted within Australia, especially given the growing number of older children being adopted who have spent extensive periods of time in institutions overseas..

Whilst many carers raising children in home based care are connected to and supported by Community Service Organisations (CSOs), many carers report seeking the assistance and support they need from other carers when it comes to coping with the day to day trials and tribulations of caring for someone else's children.

For some years now, the Foster Care Association of Victoria (FCAV) and the Post Placement Support Service (PPSS) have been aware of, and have responded to, the need for carers to have an independent and informative support service, initially in an informal manner, and more recently in a structured, managed and staffed telephone support service. In 2008, FCAV and PPSS allocated resources for the employment of a part time service coordinator thus enabling the establishment of a telephone information and support service.

FCAV/PPSS Carer Information and Support Service – Statement of Purpose

The FCAV / PPSS Carer Information and Support Service, is a joint venture operated by the Foster Care Association of Victoria Inc and the Post Placement Support Service (Vic) Inc. The service operates in addition to the supports and advocacy offered to statutory foster, kinship and permanent carers through their funded care agencies, thus providing carers with an independent referral and assistance point should they need one. In addition, the FCAV/PPSS Carer Information and Support Service provides support, information, referral and advocacy services to non-statutory kinship carers and adoptive parents, ensuring these carers are supported in their roles as carers and parents of children and young people in Victoria.

FCAV/PPSS Carer Information and Support Service: Purpose

The FCAV/PPSS Carer Information and Support Service provides information, support, referrals and advocacy to all carers of children and young people living in home based care. Through support and advocacy for carers, we aim to represent the needs of children and young people living in home based care.

The FCAV/PPSS Carer Information and Support Service has four main aims:

- Provision of accurate and clear information via phone calls, both organisations' websites, newsletters and information sheets;
- Referrals to appropriate agencies for specialised & targeted support and assistance;
- Phone conversations, one on one meetings and (occasional) attendance at meetings for support;
- Advocacy with CSOs and government on themes and serious issues impacting carers and children and young people in home based care.

FCAV/PPSS Carer Information and Support Service: Target Constituency

The FCAV/PPSS Carer Information and Support Service is available to all carers of children and young people living in home based care , and parents of adopted children in Victoria. In addition, the Carer Information and Support Service is available to CSO and government workers for information on issues impacting carers, or for the support of carers of children and young people living in home based care.

How the Carer Information and Support Service makes a difference

"Since the late 1990's, the preferred out-of-home care option for children and young people removed by child protection is within their wider family or community. On any given night, there are currently around 2150 children and young people living placed with relatives or 'kin'; 1550 in foster care , 500 in residential care and 1550 living in permanent care¹". .

(Source: Directions for out of home care—May 2009, Department of Human Services)

Services such as the FCAV/PPSS Carer Information and Support Service provide carers/ parents with a source of hope and understanding. In many cases, carers are largely in need of someone they can 'de-brief' with in times of increased stress within their household. There are many other instances, however, when they need to turn to someone who can provide objective and supportive assistance at times of great family upheaval.

1. Average occupancy for 2008-09 financial year, for nine months through to 30 March.

As these children in care reach adolescence and begin to explore their own identity many of the 'ghosts' of their past come back to haunt them, and disturbing issues of parental abandonment, drug abuse, physical, sexual and psychological abuse, mental illness and other realities can emerge for them. At these times, it is vital to have someone to go to who can objectively offer advice and guidance, point them in the direction of appropriate assistance and resources, help to lobby and garner support for whatever may have gone wrong, and help find an effective resolution.

Without the commitment and dedication of foster, kinship and permanent carers, and special needs adoptive families many of Victoria's most vulnerable children would have nowhere to go. The social impact of this is almost immeasurable. With a safe home and a loving and secure family environment many of these children can and do overcome their past to lead productive and positive lives. The existence of the Carer Information and Support Service helps the carers of these children in their challenging task and assures them that they are not alone while doing it. Instead they are acknowledged as part of a highly valued group in our community, committed to protecting and nurturing children when, for whatever reason, their parents cannot.

Having someone to talk to, however, is not always enough. In too many instances, particularly in the areas of non-statutory kinship care, permanent care, and also local and inter-country adoption, carers/parents are left to navigate inadequate services while seeking to advocate for and act in the best interest of the children in their care. More needs to be done in the placement phase of home based care to ensure families are able to tap in to effective and targeted supports and services to meet the ongoing and ever changing needs of these often damaged children and young people. Without such support, many children and families face the tragedy and heartbreak of the breakdown of long term placements and adoptions.

The FCAV/PPSS Carer Information and Support Service believes asking carers about what they consider as most supportive is a positive and effective start to identify the training and support service needs across the sector.

BACKGROUND

Home Based Care Support Needs Questionnaire for Carers, Parents* & Professionals

In order to plan, deliver and advocate for the most relevant and practical support for home based carers/parents the Foster Care Association of Victoria and the Post Placement Support Service developed and circulated a survey in the months of April to June 2010 to seek information relating both to current levels of support and satisfaction and key future needs in the sector. The survey was created in *Survey Monkey* and was advertised via email and hard copy to individuals and community service organisations. The survey was completed online with support offered if individuals needed assistance in working with/completing the survey online. All electronic responses were encrypted to ensure privacy.

The aims of the survey were to:

- Identify the key support and training needs of foster/kinship carers and adoptive/permanent care parents of children and young people in adoption and home based care across Victoria;
- Explore satisfaction levels of foster/kinship carers and adoptive/permanent care parents in Victoria;
- Identify professional views of the supports currently available to foster/kinship carers and adoptive/permanent care parents of children and young people in adoption and home based care across Victoria;
- Identify the professional development needs of workers across the Victorian adoption and home based care sector; and
- Publish and disseminate the key findings of the questionnaire across the Victorian adoption and home based care sector.

* Please note: As stated earlier in this document, wherever the role of 'parent' was referred to within the survey, it was a specific reference to adoptive and/or permanent care parents.

METHODOLOGY

A questionnaire was developed by PPSS and FCAV staff and committee members. The survey allowed for both quantitative and qualitative responses, thus allowing for detailed analysis of the needs of carers, parents and professionals.

The decision was made to utilise *Survey Monkey* for the administration of the survey, ensuring a secure and private survey collection tool, as well as ease of data analysis and reporting.

The survey was piloted amongst PPSS Committee Members and FCAV Directors who had not been involved in the initial survey development. After final changes were made, the survey was issued to all PPSS and FCAV members and sector professionals (not including the Department of Human Services) via promotion through hard copy and electronic newsletters and direct email networks.

A copy of the full questionnaire can be viewed on the FCAV website to www.fcav.org.au under *Carer Support Service* and also on the re-developed PPSS website.

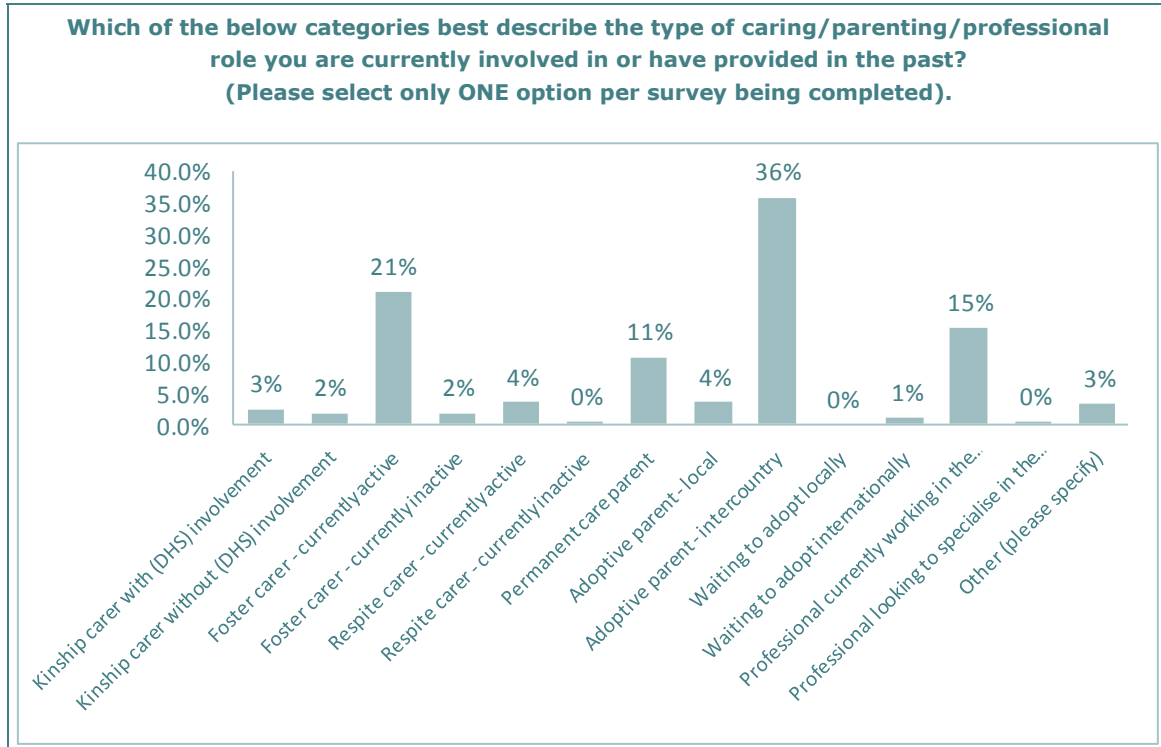
RESPONSE DEMOGRAPHIC

The response rate to the survey was pleasing with 296 responses received in the three months the survey was available online, although not all respondents answered all available questions.

The response rate recorded a high number of respondents from inter-country adoption support groups resulting in 36% of overall respondents being inter-country adoptive parents, with a further 4% of respondents being local adoptive parents. This is likely to be because there are no existing formal supports for these families and the need is therefore very high.

A further 21% of respondents were active foster carers, with 11% being permanent carers and only 4% being either statutory or non-statutory kinship carers. This low response rate from kinship carers, despite kinship care now dominating the home based care sector in terms of care type, may be indicative of the low number of kinship carers aligned with available, recognised support networks/organisations. This low response rate may also be indicative of kinship carers having less access to the internet and email. The full response demographic is detailed in Table 1.

Table 1: Response Demographic¹



1. Typical response rate to surveys is 10% to 30%. (Source: CustomInsight.com)

Of the 238 respondents who indicated where they lived, 76% resided in metropolitan Melbourne, with 31% of the metropolitan based carers and parents residing in the North West Metropolitan Region. This figure is in line with the size and placement rates across the regions (as defined by the Department of Human Services).

80% of respondents indicated that they lived in a two carer/parent household, while a further 17% were identified as single carers/parents.

Adoptive and permanent care respondents were most likely to have been parents for 6-9 years (15% of adoptive parent respondents had been parents for over 20 years), while 45.8% of foster carers had been caring for between 3 and 9 years.

Interestingly, 33% of kinship carers had only been caring for less than a year and 86% of kinship carers had been in a caring role for less than 5 years. Again, this speaks to this very new demographic of carers in Victoria, for whom representation and support is lacking, and for whom, during the relatively short period of 'caring time', services and supports have yet to be identified and resourced.

Table 2 details responses regarding the length of time respondents had been in care roles.

Table 2: Length of active caring/parenting

Please indicate below the length of time you have been actively involved in each applicable carer/parent* role.								
	Length of active caring/parenting							Response Count
	Less than 12 mths	1 - 2 yrs	3 - 5 yrs	6 - 9 yrs	10 - 14 yrs	15 - 19 yrs	20 yrs or more	
Foster care	11 (11.7%)	14 (14.9%)	23 (24.5%)	20 (21.3%)	13 (13.8%)	8 (8.5%)	5 (5.3%)	94
Kinship care	7 (33.3%)	5 (23.8%)	6 (28.6%)	2 (9.5%)	1 (4.8%)	0 (0.0%)	0 (0.0%)	21
Permanent care	6 (14%)	7 (16.3%)	9 (20.9%)	10 (23.3%)	5 (11.6%)	5 (11.6%)	1 (2.3%)	43
Adoption	14 (12.4%)	9 (8%)	19 (16.8%)	32 (28.3%)	18 (15.9%)	4 (3.5%)	17 (15%)	113
							Question Totals	
							<i>answered question</i>	232
							<i>skipped question</i>	64

64% of respondents said they were carers/parents for life with a further 10% indicating they would be caring/parenting for 10 years or more. The comments below were typical of those received:

- "They are my grandchildren";
- "She deserves a family and we are hers—a choice and commitment were made";
- "The commitment we have made as permanent care parents is for life".

RESULTS OF DATA COLLECTED AND DISCUSSION

SECTION 1: CARERS' RESULTS

1.1 The impact of caring on carers and parents

Respondents were asked to describe the main issues contributing to the psychological impact of being a carer/parent.

A range of strong themes, both positive and negative, were evident in the 208 qualitative responses, as demonstrated in the following comments received:

Positive themes

The joys of being a parent:

- *"The energy and brightness of the children always provide an amazing amount of hope and faith that they will be alright. Seeing them grow despite the difficulties is both fascinating and joyful";*
- *"My sense of self worth as a parent";*
- *"I love being a mother";*
- *"Although it was hard to see at the beginning, love does eventually have a very positive impact. Holding strong families and beliefs and role-modelling them at all times. Being consistent, fair, honest and truthful. Being compassionate, empathetic and supportive".*

Support from family and friends:

- *"A supportive partner, great friends";*
- *"An affirming family and neighbourhood";*
- *"The support of extended family and school";*
- *"Extended family support is paramount as are understanding friends";*
- *"I think support is very important and having family and close friends that understand, can't get anything better than that".*

Good professional support:

- *"Finding an approach that works with having a child with a trauma background has had the greatest psychological impact for us";*
- *"I have a wonderful delightful child with excellent attachment - the best thing. Second, lots of friends in the inter-country adoption community. Third, my own access to professional resources and CBT training - this helped a lot!".*
- *"The PPSS runs some fabulous seminars which are helpful on a personal and professional basis".*

Negative themes

Attachment difficulties:

- *"Parenting inter-country adopted children with attachment disorders is much harder on a daily basis than I ever could have imagined. There have been very few resources to assist our family and even fewer that know what the real issues are. We have become depleted as a couple, as we have very little time away from our very needy children".*

Complex behaviour:

- *"Violence, threats, shouting, swearing, absconding, alcohol and drug abuse, school absence";*
- *"Protecting myself from violence and anger and not taking it on and becoming the same".*

System issues:

- *"Sick of banging my head against brick walls – high worker turnover both at DHS and agency levels";*
- *"Feeling unheard ... not being involved in access decision";*
- *"No access to specialised (DHS funded) services because of non-statutory (kinship) status".*
- *"Workers not being available".*

Lack of professional and family recognition of the complex difficulties brought into the family with the child:

- *"Nobody understands how difficult all this is ...there is always the feeling you are being judged and why you are not coping";*
- *"I need support, respite and help for my daughter before she hurts someone else";*
- *"I've found lack of understanding by family and friends disappointing and tiring".*

Parenting issues:

- *"Feeling unsupported – without other inter-country families around and without extended family support, you sometimes feel very alone. This vulnerability underpinned a lot of my poor parenting approaches";*
- *"My doubts and second guessing (about whether behaviour) is an adoption issue or normal child development";*
- *"The assumption by others that I was a competent parent and would cope just fine".*

Personal issues:

- *"Less time to be intimate with (my) husband— (it is a) challenge to find time to be alone together".*

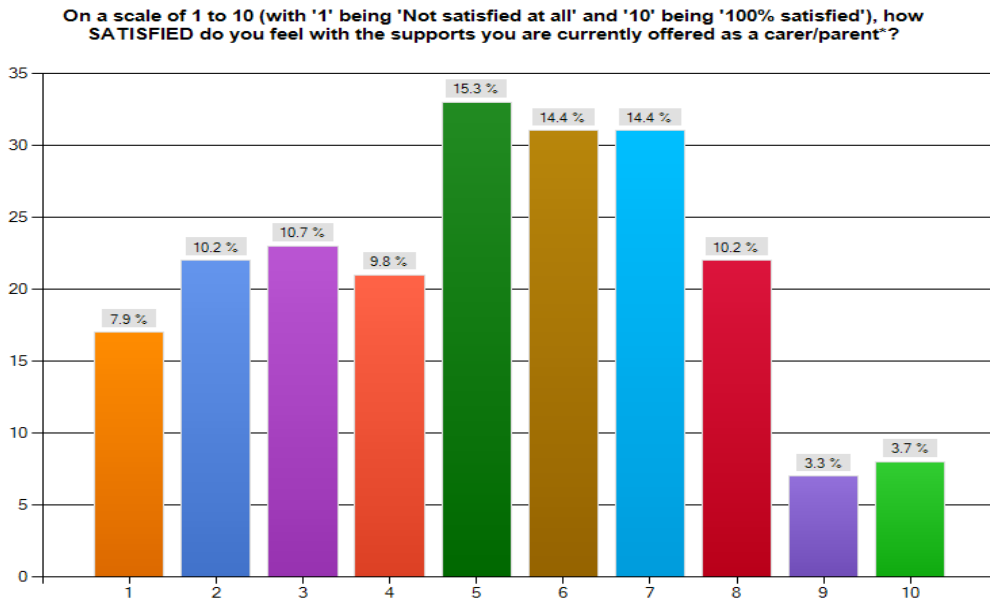
1.2: Support

Support satisfaction

Respondents were asked how satisfied they were with their current support. On a 10 point scale (0 = not satisfied at all; 10 = 100% totally satisfied), responses were mostly scattered between 2 and 8, with 44% located between 4 and 7. Refer Table 3: Support satisfaction.

Most respondents indicated that they were coping well with their chosen role - 43.7% said that they were coping better now than in the past, 19.2% were coping less well and 37.1% reported no change in coping ability.

Table 3: Support satisfaction



A range of themes (in the 120 qualitative responses) showed the kinds of factors which influenced carer/parent coping:

- For those respondents who were coping well, they said that they had grown more confident over time; that a Permanent Care Order had given the family greater stability; that they understood the needs of their children better; that they were more open to seeking external help; that they valued training and peer support; that they had found good agency workers and therapists for their children and themselves.
- Those who were not coping so well identified factors such as the increasingly challenging behaviours as children moved towards, and through, adolescence; lack of agency and professional support; inadequate finances to seek support in the private system; tiredness, stress and resignation that circumstances would never improve.

Support for carers and parents

Respondents were asked what kinds of support they had accessed in the past for themselves as carers/parents and how helpful these had been. The results detailed in Table 4 indicate carers/parents found their family and friends to be the most helpful source of support with 93% of respondents indicating *somewhat helpful* or *very helpful* for this support option. 81% of respondents indicated they found workshops, forums or seminars as helpful, while 75% indicated they had found their agency worker a helpful support. 71% of respondents found carer/parent support groups of use, and 70% found organisation newsletters to be of assistance.

Table 4: Useful supports for carers and parents

Please indicate what kinds of support you have used to assist YOU as a carer/parent* and how useful you have found them to be.

Support Option	Un helpful	Un helpful %	Somewhat Helpful	Somewhat Helpful %	Very Helpful	Very Helpful %	N/A	N/A %	Response Count
Friends and/or extended family	10	5%	68	31%	135	62%	5	2%	218
Agency worker	31	16%	80	41%	65	34%	18	9%	194
Agency newsletter/ information kit	26	14%	97	54%	20	11%	37	21%	180
Agency after hours support	30	17%	41	23%	24	14%	82	46%	177
Agency training	23	13%	68	39%	42	24%	43	24%	176
Agency support groups	23	13%	50	29%	21	12%	77	45%	171
Workshops, forums or seminars	10	5%	77	39%	82	42%	26	13%	195
Carer/parent* support groups	11	6%	49	25%	91	46%	47	24%	198
Internet chat rooms/email discussion groups	21	12%	32	18%	38	21%	90	50%	181
Search/reunion services	17	10%	7	4%	2	1%	139	84%	165
Birth family contact supports	26	15%	23	13%	6	4%	116	68%	171
FCAV/PPSS Carer Info & Support Service (previously known as the Help Line)	13	8%	27	16%	28	16%	102	60%	170
Other telephone help line (e.g. Parent Line)	12	7%	14	8%	6	4%	137	81%	169
Member organisation newsletters (e.g. PPSS, FCAV, Mirabel)	7	4%	77	42%	51	28%	48	26%	183
Individual adult therapy	8	5%	14	8%	37	21%	115	66%	174
Couple therapy	11	7%	5	3%	18	11%	133	80%	167
Family therapy	8	5%	9	5%	24	14%	130	76%	171
Parental guidance	12	7%	22	13%	16	9%	119	70%	169
Other counselling	9	6%	18	11%	30	19%	105	65%	162
Other (please specify)									29
									answered question 224
									skipped question 72

In terms of support options that respondents found *unhelpful*, 16% indicated their agency worker, 17% cited agency after hours support, 14% nominated agency newsletter/information kits and 13% indicated agency training and agency support groups as unhelpful

For each of these responses, the *Not Applicable* response was high, indicating that the support

options may not have been available to the respondents. This would certainly be the case for kinship carers, permanent carers and adoptive parents.

Services such as *search/reunion services, birth family contact supports and other telephone help lines, (such as Parentline)* received low responses in terms of usefulness, indicating the very specific nature, of support offered through these services.

Couple therapy, family therapy, parental guidance and other counseling all reported high *not applicable* responses. While this could point to these services not being needed, it is more likely an issue of carers/parents not knowing about or being able to access these services within the private sector or being able to afford such services.

Some of the 29 responses received citing *Other* included:

- *"Paediatrician and local GP's very helpful and supportive";*
- *"My daughter's paediatric psychiatrist has been very helpful";*
- *"Australian Childhood Foundation—therapeutic worker";*
- *"We have been 'lost' to the system—they 'left us to it' after the first year. We have had to source and pay ourselves for ongoing private psychiatry to help our child";*
- *"Reading of relevant internet sites and books sourced from local libraries";*
- *"Dyadic therapy with me present for my permanent care son is extremely helpful in building attachment and respect";*
- *"Maternal and child health service was very helpful";*
- *"Some great books"*
- *"Access to professional psychiatric services for children in my care has been the most helpful";*
- *"Mirabel support groups".*

Support for children

Question 7 of the survey asked carers/parents to indicate what supports (if any) had been helpful for the child or young person in their care. See Table 5 on page 18 for the full response detail.

The results for this question were interesting, with *agency worker* recording the highest *helpful/somewhat helpful* result at 65%, *support groups* at 56% and *agency after hours support* at 34%.

Child/young person focused support organisations such as CREATE Foundation and the Mirabel Foundation rated at 10% and 8% respectively which is surprising and may be indicative of carers not tapping in to these 'external' supports for the children/young people in their care. In addition, the demographic for Mirabel Foundation — supported children/young people is narrow, both due to the eligibility criteria (child/young person has been orphaned or abandoned due to parental illicit drug use), and the overall survey response rate from kinship carers which was only 9%.

Of the 28 qualitative responses received to this question, 43% stated there had been a need to tap in to psychiatric /psychology services. Overall, 14% of the responses stated specific 'attachment disorder' psychiatric help was required but was extremely difficult to find, with the majority of attachment services being provided by US trained professionals. While this feedback is clearly stating that carers and parents are seeking support services for the children/young people in their care, it also seems to be in contrast to the N/A results collected in the survey for the following services:

➤ Child outpatient psychiatric services	87%
➤ Child inpatient psychiatric services	93%
➤ Adolescent outpatient psychiatric services	94%
➤ Adolescent inpatient psychiatric services	94%
➤ Intercultural psychiatric services	96% (high considering high response rate from adoptive parents)
➤ Therapeutic support services	74%

This contrast in the statistics may be an indication of the difficulty carers and parents have had in locating and securing assistance for these types of services; that is, they have answered N/A because they have had no opportunity to gauge whether the service could be of use/benefit to the child/young person.

Inter-country support and play groups factored highly in the qualitative results as helpful services, as did privately sought assistance through schools and paediatric services.

Table 5: Useful supports for children and young people

Please indicate what kinds of support you have used for CHILD/REN and/or YOUNG PEOPLE in your care and how useful they have been.

Answer Options	Un helpful	Un helpful %	Somewhat Helpful	Somewhat Helpful %	Very Helpful	Very Helpful %	N/A	N/A %	Response Count
Agency worker	23	13%	68	38%	48	27%	41	23%	180
Agency after hours support	22	13%	37	22%	22	13%	88	52%	169
CREATE Foundation	8	5%	7	4%	9	6%	135	85%	159
Mirabel Foundation	2	1%	3	2%	6	4%	146	93%	157
Additional (secondary) professional consultation (e.g. START, Aust C/hood Fn)	9	6%	11	7%	14	9%	126	79%	160
Workshops (e.g. art therapy, music therapy, playshops)	6	4%	35	21%	26	16%	99	60%	166
Support groups	8	5%	40	23%	56	33%	68	40%	172
Internet chat rooms/email discussion groups	14	9%	15	9%	20	13%	111	69%	160
Remedial education services	9	6%	14	9%	20	12%	118	73%	161
Search/reunion services	9	6%	5	3%	1	1%	144	91%	159
Birth family contact supports	11	7%	14	9%	4	3%	127	81%	156
FCAV/PPSS Carer Info & Support Service (previously known as the Help Line)	9	6%	14	9%	14	9%	121	77%	158
Other telephone help line (e.g. Life Line)	4	3%	2	1%	2	1%	147	95%	155
Child psychotherapy	13	8%	30	18%	24	14%	101	60%	168
Adolescent psychotherapy	10	6%	8	5%	17	10%	128	79%	163
Family therapy	5	3%	12	8%	21	13%	122	76%	160
School counselling	22	13%	29	17%	15	9%	103	61%	169
Mental health services	11	7%	20	12%	15	9%	119	72%	165
Child outpatient psychiatric	8	5%	9	6%	3	2%	136	87%	156
Child inpatient psychiatric services	7	5%	3	2%	1	1%	144	93%	155
Adolescent outpatient psychiatric services	7	5%	1	1%	2	1%	144	94%	154
Adolescent inpatient psychiatric services	6	4%	2	1%	1	1%	147	94%	156
Intercultural psychiatric services	4	3%	1	1%	1	1%	147	96%	153
Therapeutic support services	8	5%	20	13%	13	8%	117	74%	158
Other (please specify)									28
<i>Number of respondents who answered this question :</i>									215
<i>Number of respondents who skipped this question:</i>									81

1.3 Services deemed not available

Respondents were asked to identify services that they would have used in the past, but which were not available. Themes arising from an analysis of the 154 qualitative responses were:

- Counselling and therapy for attachment and trauma issues;
- A range of supports for children and young people – counselling, respite, techniques for managing violence and other challenging behaviours;
- Training for carers, parents and professionals (including teachers) on attachment, trauma, managing challenging behaviour, etc;
- Information about available supports, that is: what supports exist and how carers/parents are able to access them; what supports and services are subsidised by the government and what costs are associated with private services; what state/federal government assistance is available with certain services and what is the eligibility criteria for each?
- Support which is independent of the placement agency;
- Very little relevant support in rural areas;
- Funding support – basic child needs, counselling, education, equipment, home help;
- Legal support;
- Emotional support – *“we needed people to actively understand how emotionally damaged our son was (and is). We needed people to empathise with us, rather than judge us. We desperately needed strategies to manage our son’s behaviour so that the whole family wasn’t torn apart by him”.*

Other comments received from carers/parents included:

- *“I would have liked to know more about what was/is available to us. I find a huge lack in communication and support in general. The answer “we are short staffed” or “I don’t know” is very difficult when you are living with broken children 24/7”.*
- *“The funding for 3yo kinder for children. My daughter should have been eligible but I was not advised of the full eligibility criteria until it was too late. I had been assured by the kinder association that I would be eligible but they did not advise me of the “fine print” that had to be complied with, and as a result, my daughter was excluded from receiving the funding”.*
- *“Supports to help us at times when she became physically violent and/or threatening to us. Ideas and techniques for how best to help her to manage her anger and defuse the physical threat to our safety”.*
- *“How best to provide information to birth family, what to write and who to involve in the process”.*

1.4 Future support and service needs for carers, parents, children and young people

Carers/parents were asked to indicate what types of support services they would consider utilising in the future for both themselves and for children and young people in their care. (See Table 6) Unfortunately, 90 participants did not respond to this question, however there seems to be consistency across the responses from those who did respond.

Table 6: Future supports for carers, parents, children and young people

What type of supports (either for yourself or the child/ren) might you use in the future if available?							
Answer Options	Definitely	Definitely %	Maybe	Maybe %	Unlikely	Unlikely %	Response Count
Agency worker/supports	84	46%	52	29%	46	25%	182
FCAV/PPSS Carer Info & Support Service (previously known as the Help Line)	66	37%	67	38%	45	25%	178
Other telephone help line	20	12%	62	38%	80	49%	162
CREATE Foundation	19	12%	49	31%	90	57%	158
Mirabel Foundation	12	8%	37	24%	104	68%	153
Respite	56	33%	23	14%	89	53%	168
Funded babysitting	65	39%	25	15%	77	46%	167
School liaison	68	39%	62	36%	43	25%	173
Counselling services	88	45%	86	44%	22	11%	196
Mental health supports	55	32%	62	36%	56	32%	173
Discussion groups	66	38%	80	46%	28	16%	174
Training for carers/parents*	114	61%	59	32%	13	7%	186
Workshops for young people & their carers/parents*	83	45%	68	37%	32	17%	183
Workshops for children and/or young people	81	44%	76	41%	27	15%	184
Camps for children and/or young people	87	47%	65	35%	32	17%	184
Access to a home based care resource library	80	45%	60	34%	37	21%	177
Internet chat room/ email discussion groups	57	33%	61	35%	56	32%	174
Search & reunion services	43	26%	52	31%	72	43%	167
Other (please specify)							11
Number of respondents who answered this question:							206
Number of respondents who skipped this question:							90

93% of carers/parents indicated they would (definitely/maybe) utilize training opportunities for themselves or their children/young people in the future, with 85% stating they would use workshops for children/young people and 82% saying they would use workshops geared towards children/young people and their carers. These results point to the commitment and determination of carers to educate themselves as to how they can effectively help the children and young people in their care. It will be important to ensure that future training not only provides carers, parents and children/young people with the latest in local and international best practice and teachings, but that it is done so in an affordable and accessible way.

89% of carers/parents indicated that they would utilize counseling services in the future, 84% indicated they would utilize discussion groups and 82% were likely to use camps for children/young people. 68% of carers/parents indicated they would seek mental health supports in the future.

While 77% of carers indicated that they would utilize support through their agency worker, the reader should be mindful that this option does not exist for many carers/adoptive parents.

75% of respondents indicated that they would seek assistance and support through the FCAV/PPSS Carer Information and Support Service, with a further 68% advising they would access support via internet chat rooms and email discussion groups, indicating the importance of services that 'can come to you' rather than the carer/parents having to leave the house to seek the assistance required.

Interestingly, 57% of respondents stated that they were *unlikely* to seek assistance or support through CREATE Foundation, with only 13% indicating they would definitely use the service. More work is needed to promote the services offered through CREATE Foundation to ensure young people in care are aware of and are tapping into this significant support service. CREATE Foundation's [CREATE Report Card 2009 Transitioning from care: Tracking progress](#) highlighted a significant gap in the readiness of young people in foster care to transition out of home based care and into independent life. Increased involvement and exposure to the supports offered through CREATE will help to build a culture of "independence readiness" in young people leaving care. The *CREATE Report Card 2009 Transitioning from care: Tracking progress* publication can be viewed on the CREATE Foundation website at www.create.org.au.

1.5 Future training needs for carers, parents, children and young people

Respondents were asked to identify areas in which they would welcome training. See Table 7 on page 23 for the full response details.

The following areas received a 'definitely' response:

- 63% Attachment issues
- 63% Managing difficult behaviour
- 51% Learning difficulties
- 50% Child development
- 45% Mental health
- 43% Cultural identity
- 43% Managing birth family contact
- 42% Therapeutic play and activities
- 36% Art therapy
- 36% Play therapy
- 35% School refusal/disengagement

The qualitative responses received from carers/parents to this question indicated some of the restrictions faced by carers/parents in trying to access training opportunities including:

- Cost: particularly to see visiting lecturers and guest speakers from overseas. It should be noted also, that permanent carers, adoptive parents and non-statutory or informal kinship carers are not aligned with a support agency and will not have access to agency-subsidised training.
- Location: many carers/parents stated it was difficult and sometimes impossible to leave the house because of the high needs and dependence of the child in their care. Location also played a factor for carers and parents living in remote or regional areas, and also for those time-limited by the school hours of their children. For example, training that was conducted from 9am to 4pm was challenging to access for carers and parents of school aged children.
- Child care: for those carers and parents with children not yet in school, the issue and expense of child care was prohibitive and another factor making attendance at training difficult.
- Awareness: many carers/parents indicated they had been unaware of various training opportunities or regular workshops. Effective marketing and advertising initiatives need to be considered to ensure effective promotion of training and workshop opportunities for carers and parents.

Table 7: Carer/parent seminar and workshop needs

With regard to workshops/seminars, what topics might you be interested in?							
Workshop/seminar option	Definitely	Definitely %	Maybe	Maybe %	Unlikely	Unlikely %	Response Count
How the child welfare system works	50	30%	49	30%	67	40%	166
Child development	90	50%	54	30%	37	20%	181
Attachment issues	118	63%	47	25%	21	11%	186
Managing difficult behaviour	122	63%	49	25%	22	11%	193
Mental health	82	45%	68	37%	33	18%	183
Preparing children for school	52	30%	43	25%	76	44%	171
Learning difficulties	92	51%	52	29%	38	21%	182
School refusal/disengagement	62	35%	60	34%	55	31%	177
Life story work	60	34%	72	41%	44	25%	176
Therapeutic play & activities	71	42%	53	31%	46	27%	170
Cultural identity	79	43%	63	35%	40	22%	182
Managing birth family contact	79	43%	68	37%	36	20%	183
Returning to child's birth country	51	29%	46	26%	79	45%	176
Search & reunion (birth family)	50	28%	63	35%	65	37%	178
Music therapy	62	35%	64	37%	49	28%	175
Art therapy	63	36%	60	35%	50	29%	173
Playshops	61	36%	53	31%	57	33%	171
Other (please specify)							17
Number of respondents who answered this question:							204
Number of respondents who skipped this question:							92

Below is a snapshot of the qualitative comments received to the question of workshop and seminar needs of carers and parents:

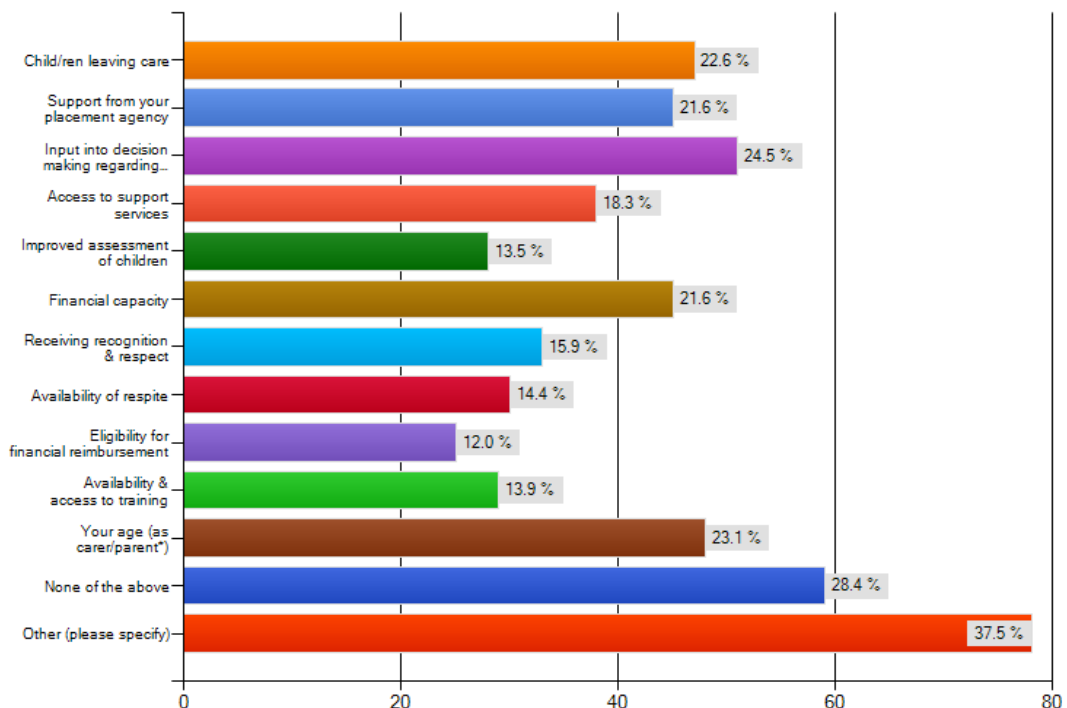
- "With two children that have major attachment issues, it has been almost impossible to get to external workshops".
- "It is not easy to attend workshops. In the case of our first child, separation was such an issue that a workshop was out of the question. We would appreciate information from workshops being available on the internet. At times, this was our only access to help".
- "Attachment and attachment disorders and therapeutic parenting, that is affordable and within sensible driving distance, as the session held last year was out of my price range".
- "Training/studies in the child's birth language for both child and parents. NO FACILITIES are available in rural Victoria!"

1.6: Factors influencing carers/parents' ability to continue *caring*

Respondents were asked to indicate which factors will influence their ability to continue in a caring role in the future. Table 8 details the results received.

Table 8: Factors influencing care

Please indicate which of the below factors influence your intentions with regard to how long you will continue to be a carer/parent* (Please tick all responses that are applicable).



With 38% of respondents ticking *Other* and a 28% ticking *None of the Above*, it can be accurately stated that there are many, many factors influencing carers/parents and their ability to continue as a carer or parent to a child or young person. Of the more specific data collected, the top 5 responses were:

25% Input into decision making regarding the child's life: this response would apply primarily to foster carers and statutory kinship carers;

23% Your age (as carer/parent). This response is significant and possibly acts as a warning in terms of the high number of children currently residing in formal and informal kinship arrangements with extended family. As stated in the Introduction, kinship care is now the largest form of home based care in Victoria, and anecdotal evidence suggests that the majority of these placements are with either single or partnered grandparents. *Child Welfare Series Number 45, Child Protection Australia 2008-09* reports that, of the children

residing in home based care in Victoria as at 30 June 2009, 21% were aged between 1-4, 27.9% were aged between 5-9 and 29.9% were aged between 10-14. If we then estimate the average age of a grandparent kinship carer at 65yrs, we are faced with concerning statistics in terms of carer age in the next 10 years, assuming that the carer/s are not prevented from effectively caring for a child due to their own declining health.

It will be vital for current kinship models and placement practices to effectively address the issue of advancing age for grandparent carers when considering the placement of children and young people in kinship care, if we are to avoid further displacement of the child due to grandparent inability or death.

23% Children leaving care: While this is a positive and 'normal' reason for carer responsibilities to decrease, it is imperative that all young people leave placements, well prepared for a life of independence beyond the placement.

22% Support from your placement agency: It is of concern that this response has rated in the 'top 5' reason why carers would consider leaving a carer role, and it presents an opportunity for welfare agencies to engage with and learn more from their carers about what supports are needed to maintain long term carer/agency relationships.

22% Financial capacity: The issue of financial capacity and the 'payment' of carers will always be an issue until the role of carers is viewed as one of skill, technique, education and ability rather than that of a volunteer. In addition, more needs to be done to ensure there is affordable and available public support services to ensure that carers and parents are not faced solely with a private, and therefore expensive, support system.

18% Access to support services: As stated above, more work is needed to expand and enhance the services available to carers and parents of high need, vulnerable and traumatized children. An increased partnership is needed between government and welfare agencies to maximize the standard and service capacity of services to ensure both greater availability and greater results for users.

Of the 78 responses received citing Other, 45% stated very clearly that they viewed their parenting/caring role as being for life. Some of the other reasons given for considering leaving care were:

- *"Sick of multiple changes in workers and having so many strangers in my home".*
- *"Child getting into later mid to late teenage years and no longer requiring respite. Becoming busier with our own growing family".*
- *"Legislative changes (are needed) to enable me to do the already difficult enough task of parenting young people, without bureaucratic nonsense getting in the way".*

- *"I would not take on another child without better, more open and honest assessment and better agency support - in a written guarantee!, as well as the guaranteed provision of respite! I would also want financial reimbursement for the special education requirements which was promised but has not been forthcoming!"*
- *"DHS respecting our right to know and be informed of what is happening external to our house with children. For example, what is happening in the hours from when they leave our house to when they get home i.e. at school and visitations. We want and need to know this information to best deal with and help the children in our care. There needs to be some kind of restriction on what parents are allowed to feed their children at visitations. The number of times that I have cooked a lovely dinner only to have children come home saying they are not hungry because they have eaten too many lollies from a parent is frustrating. Also children coming home that are on a no colours and no preservatives diet and mum, dad or DHS has fed them soft drink and McDonalds. These are the types of things that will eventually lead me to stop foster care".*
- *"...I would love to parent again but am single and am worried about the lack of supports. More support e.g. funded babysitting and respite would enable me to parent again".*
- *"We are a lesbian couple with joint and equal guardianship of our permanent care child. If her mother dies in the future our child will be available for adoption but as a lesbian couple we are unable to adopt her. How the law will view our parenting role in these circumstances is a huge worry to us. It was believed until recently that a single lesbian could engage in "familial adoption" but the courts are currently questioning this in cases where the parent who will adopt is in a lesbian or gay relationship".*

SECTION 2: PROFESSIONALS' RESULTS

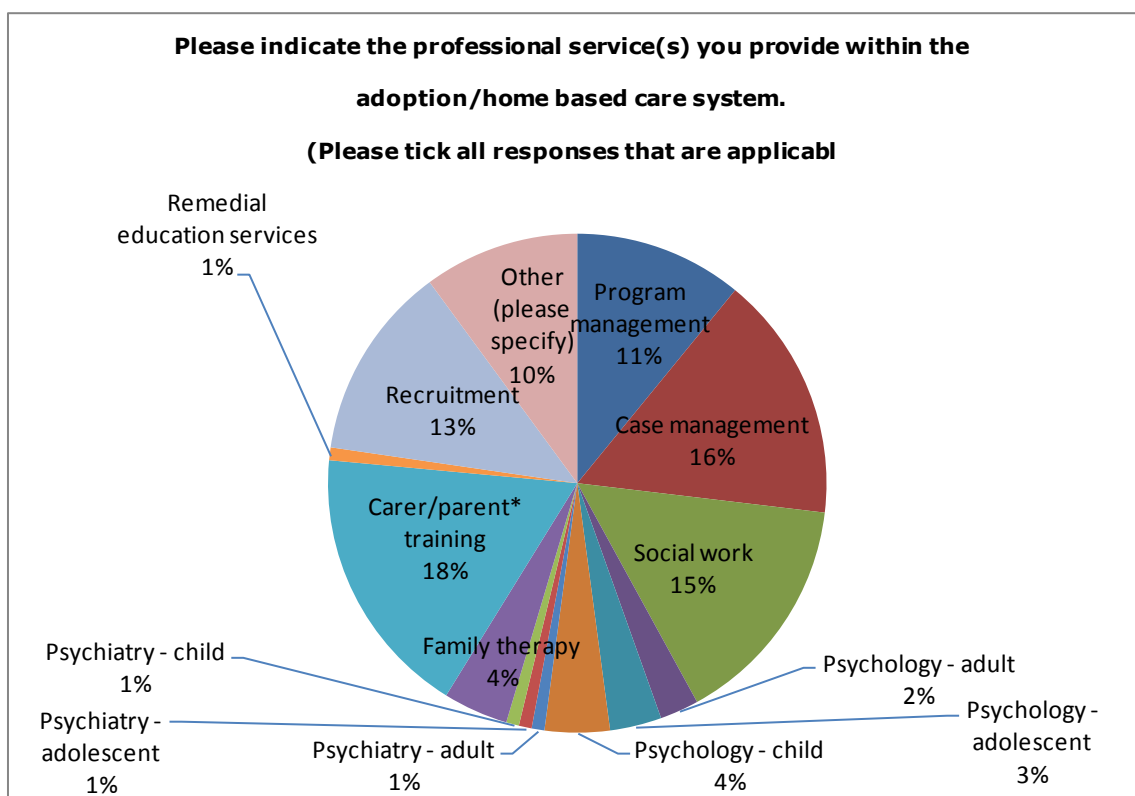
2.1: Professionals—breakdown of respondents

Professionals were asked a range of questions concerning their area of work, length of time in this context, the services they provide and their own training needs. A summary of their responses follows:

- Of the 43 respondents, 30 were from metropolitan Melbourne with a further 13 respondents from outside Melbourne;
- 76% of respondents were working in non-government organisations, with 22% working in government and 9% in private practice.
- Professionals had been involved in the sector for an average of ten years;
- 81% of respondents had attended professional development in the area of home base care over the previous 12 months;
- 21% of respondents had attended sessions run by PPSS and the majority had found these very helpful.

Table 9 provides a breakdown of the professional areas represented by the professional respondents to the survey.

Table 9: Professional service role of respondents



2.2: Training and professional development

The professional development and training opportunities professionals indicated would be of value to either them or their staff are detailed in Table 10 below. Interestingly, 40% of respondents indicated that 'System Orientation' training for staff would not be of value, however carer/parent feedback indicates a frustration with misinformation provided by agency workers/professionals.

Table 10: Professional development and training opportunities

With regard to professional development and training, what topics might you be interested in accessing either personally or for your staff?							
Answer Options	Definitely	Definitely %	Maybe	Maybe %	Unlikely	Unlikely %	Response Count
Round table discussions	12	44%	10	37%	5	19%	27
System orientation	6	24%	9	36%	10	40%	25
Child development	20	69%	7	24%	2	7%	29
Attachment issues	22	76%	7	24%	0	0%	29
Managing difficult behaviour	26	87%	3	10%	1	3%	30
Mental health	16	55%	11	38%	2	7%	29
Learning difficulties	19	68%	7	25%	2	7%	28
Life story work	18	58%	11	35%	2	6%	31
Therapeutic play & activities	19	66%	7	24%	3	10%	29
Cultural identity	25	83%	4	13%	1	3%	30
Managing birth family contact	13	43%	15	50%	2	7%	30
Other (please specify)							9
<i>Number of respondents who answered this question:</i>							33
<i>Number of respondents who skipped this question:</i>							263

The training needs ("definitely" and "maybe") for professionals are similar to that of carers/parents, particularly in the areas of:

- 100% Attachment issues;
- 97% Managing difficult behavior
- 96% Cultural identity
- 94% Life story work
- 93% Learning difficulties
- 93% Child development
- 93% Mental health
- 93% Managing birth family contact

2.3: Training and support services deemed unavailable

Professionals were asked to identify any networks, training or supports they felt would be of benefit to carers and parents, but were not available within the community.

The following statements detail in part the qualitative results collected:

- *"Professional counsellors who really understand the issues (not many do)".*
- *"Independent (of agencies) placement and post-placement support - sometimes families need to be able to access support outside of the placement agency - workers mostly know this but it's hard to know where to refer them. We hear good things about Post Placement Support Service workshops and Journal Club - I think that our families need much more of this".*
- *"Centrelink sessions regarding the way carers can go about applying for Family Tax Benefit".*
- *"A caregiver support group".*
- *"I think that some couples like to meet up as couples on an informal basis at dinner so they can talk about the things they have in common".*
- *"Therapeutic group work that aims to support carers/parents to implement therapeutic parenting ideas with the children in their care".*
- *"More simplistic information about the impact of trauma. Practical strategies for managing behaviour. Q&A re: difficult behaviour with (provided by) psychologists".*
- *"Informal peer get togethers which are low key with other foster agencies".*
- *Young people—networks/informal social peer get togethers for young people related to specific interest issues such as health and human relationships/transition from foster care to supported and independent living".*
- *Training through the Australian Childhood Foundation that is cost friendly for the families we work with".*
- *"Financial support for informal (non-statutory) carers".*
- *"A package of information for new carers (provided by DHS for those involved with child protection) detailing what services and supports are available for them".*
- *"Respite!"*
- *"Free and easily accessible contact centres for family access visits".*
- *"More networks for carers to meet others in the same situation".*
- *"Need for more respite options".*
- *Understanding of SIDS for carers who have babies in their care".*
- *"Carer support groups across the regions".*
- *"Yes—there are limited networks in the rural areas. I try to put couples in touch with others just informally but regional networks would be beneficial".*

- *"Information sessions, rather than 'training' would be beneficial esp in areas of grief, loss; strategies to help with teenagers; understanding the internet and all the forms of social networking on the internet; strategies to help with challenging behaviour of children; understanding the ways of Child Protection & the Children's Court; how to access Centrelink; understanding the legal system".*
- *"One thing I have noticed is the huge benefits of networking with other carers/parents, yet clients report that it is hard to seek out such supports within the community".*
- *"Comprehensive statewide post placement support provided by an organisation independent of the placement agencies".*
- *"Easily available respite for carers".*
- *Access to SIDS and First Aid training through other agencies (we can only hold a limited amount and some carers may miss out on this important training)".*

Some of the feedback received from professionals highlighted the restrictions and difficulties carers/parents face when trying to access training and support services:

- *"Carers: training often is during the day which impacts on their ability to attend. If training could be held after hours then carers may be able to attend more".*
- *"Carers find it too difficult to travel into Richmond for the training. The various training events offered at Richmond are fantastic...it would be great if they were able to be held in Southern ie in Dandenong where so many Home Based Care services are based".*
- *"More local options required".*
- *Transport badly needed to support access (between children and natural families)".*
- *"More low cost or free training sessions".*
- *"More training on weekends and evenings so that more carers can access training such as the START training".*

SECTION 3: FINAL RESPONSES - CARERS AND PROFESSIONALS

The final survey question asked respondents whether there was anything else they wished to share regarding their experience in the Victorian home based care and adoption sector. There were 138 responses to this section of the questionnaire, with the data collected falling into the following categories:

- 35% 'The System' (DHS, carer agencies, government)
The general feedback in this section was critical of the systems around home based care and adoption;
- 27% Services and supports
The feedback called for an increase in effective, accessible and affordable services and supports for carers, parents and children/young people;
- 21% General comments
This feedback centered around how carers/parents had felt about their role in the lives of the children they had supported;
- 8% No
These respondents had nothing further to add to the questionnaire;
- 7% Financial entitlements
All comments received called for an increase in caregiver reimbursement rates, with a number of comments drawing comparisons between Victoria and other states (in particular NSW), and noting that Victorian carers receive low reimbursements compared with most other states across Australia.
- 1% Legal
Comments focused on the need for access to legal services as well as for changes to legislation to more fully recognise permanent carers as, exclusive legal guardians.
- 1% Birth family issues
Comments focused on the complexity of ongoing birth family involvement in permanent care situations, and the need for more support around birth family reunions for inter-country adoptive families.

RECOMMENDATIONS

- There is a need for a peak representative for kinship carers to be established to enable advocacy and intensive support issues to be effectively followed up. While the response rate from kinship carers to the questionnaire was low, the increased reliance on kinship care within Victoria for the placement of vulnerable children and young people makes the development of such a peak body a matter of significant urgency. Without effective representation within the sector and with government, kinship carers run the risk of being forgotten.
- PPSS has recently been funded to set up a Post Placement Support Centre from 2011. This will provide support, advocacy and training to home based carers and parents.
- Urgent work is needed to fully understand the true number of formal and informal kinship placements, including the long term viability of these placements across Victoria, so that work can begin on informing and representing this ever-growing carer group. This work will need to incorporate the identification of kinship-specific services and support needs, including family dispute resolution, respite and support care, and carer information and training into trauma and its effects for children and young people.
- Work is required within the inter-country adoption sector to improve not only the timeframes involved in assessment of adoptive parents but also to further educate workers on the importance of effective support and education of parents throughout the process. Integration of prospective parents into already established support networks prior to the placement of a child will lend strength to the supports around parents during the assessment and 'waiting' phases of inter-country adoption, and should enhance their understanding of the complexities involved in parenting inter-country adopted children.
- While it is recognised that family and friends provide significant support for carers and parents, this cannot and should not be seen as 'enough'. PPSS and FCAV remain committed to ensuring that comprehensive, useful and targeted training and information sharing opportunities are delivered to carers and parents through workshops, seminars, network groups and forums. In addition, FCAV will seek additional funding through DHS to enable the continued production of high quality, informative and relevant newsletters for carers in a full colour format.
- Carers/parents stated clearly that they saw their agency worker as a valuable support. However the message was also clear that workers were often too busy to act in a 'support role'. Agency worker ratios need to be reviewed to ensure workers can increase this support role for carers.

- It was clear in the data collected from these carers and parents that they do not see the CREATE Foundation as an effective support for themselves or for the children and young people in their care. Further work is needed to ensure that CREATE Foundation is engaging with families and promoting to them, the services and supports available to carers, parents, children and young people. This engagement is particularly important if the statistics around leaving care and the readiness of young people to transition to independent living is to improve.
- Significant work is needed to improve mental health and counseling services and supports for home based care and adoptive families. Accessible and affordable services need to be identified (or developed where they do not already exist) with availability of services then effectively promoted to carers and parents.
- Continued and coordinated carer/parent training and information sharing opportunities need to be identified and delivered in formats suited to carers and parents and their needs. Increased initiative is required in terms of identifying alternative ways of imparting information to people, rather than requiring them to attend sessions. Carers and parents are saying very clearly that it is difficult to get out of the house to attend training, so why can the training not be delivered to them via books, CDs, DVDs, podcasts, video-casts, 'live-streamed' specialists/training, webinars and other web information portals, etc? In a time when technology can streamline so much of what we do, work needs to be done to identify how we can work in different ways to educate, inform and support carers and parents across the sector.
- The Centre for Excellence in Child and Family Welfare have done significant work in recruiting carers, and as a result, recruitment is currently faring well in the sector. Agencies now need to focus on retention of carers through effective support, training recognition and respect for the significant role carers/parents play in the home based care sector.
- Agency and DHS workers alike need to be more aware of 'the system', their roles within it and the interactions and best practices required when working with carers, parents and families. While those professionals surveyed do not feel system orientation is needed in the sector, the carer feedback indicates very clearly that it is.
- The development of permanent care support networks both for permanent care parents and 'transitioned' permanent care parents (from foster care) is required to ensure effective post placement support is available for this cohort of parents.
- The State has a collective role in supporting statutory placements. This extends beyond DHS and child protection, to health, education and community services.

“It changes you.

It’s your choice whether you let it be for better or worse.

Bearing witness to these children’s pain is humbling.

The cracks in you that their anger and hurt can cause, particularly when it comes to reflecting on their world experience and your response can only be healed if you are forgiving of yourself and them and willing to grow with them.

I think care-giving either makes you or breaks you as a person.

It’s the hardest thing I’ve ever done in my life.

It’s the best thing I’ve ever done in my life”.

— A Carer, 2010

FCAV/PPSS Carer Information and Support Service

Providing care for carers
Mondays—Thursdays, 9am to 5pm
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