What works for children experiencing homelessness and/or family/domestic violence?

Part 2: Resource Guide

Mapping programs and resources for children who have experienced homelessness / family violence

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Chapter 1. Introduction

1.1 Purpose and scope

This report represents the second part of a two part project entitled: What works for children experiencing homelessness and/or family violence? Funded by FaHCSIA under the Child Aware Approaches Initiative, the broader project aims:

- To understand the purpose and intended outcomes of service and practice approaches with children and their care-givers who have experienced homelessness and/or family violence,
- To identify what types of service models are effective with this population,
- To document and disseminate information about a range of service models and practice tools as a means of improving service responses for this population, and
- To provide evidence about practice that can inform the development of effective policy and programs for this population.

The Part 1 Report, Literature Synthesis, is a review of peer reviewed and grey literatures (government and community agency reports) on effective service models and practices with children under 12 and their caregivers who have experienced homelessness and/or family/domestic violence. It attempts to identify the means by which interventions achieve positive outcomes for this target population. The Part 1 report also presents summary findings on the impact of homelessness and/or family violence on children

This Part 2, Resource Guide, maps Australian programs, service interventions and practice for children 12 years of age and under experiencing homelessness and/or family violence.

1.2 Structure of report

This report is structured as follows:

Chapter 2 provides an overview of service system or programmatic responses at a Commonwealth, state and territory level focused on assisting children 12 years of age and under who are homeless or have experienced family violence. This overview does not include

generalist housing and homelessness responses, regardless of the fact they may include children as their beneficiaries.

Chapter 3 describes the common components of child-centred service practice in the homelessness/family violence sectors.

Chapter 4 describes a selection of service models in Australia that focus specifically on children 12 years of age and under that are homeless and/or experiencing family violence. This section includes an examination of:

- target group or focus of service the responses, including cohort and age
- assumptions underpinning service response
- components of service model, including individual and/or group work
- context in which service intervention is delivered
- eligibility and referral pathway
- funding/service stream
- resources including specific tools or practice frameworks that have been developed.

This section also includes a brief examination of relevant international experience and resources.

Chapter 5 examines the main gaps in terms of service provision to children 12 years of age and under who are experiencing homelessness and/or family violence.

While this section will focus specifically on children who receive assistance from specialist homelessness or family violence services, some attention will be paid to how this space overlaps with other service systems, particularly child protection, but also education and mental health.

1.3 Terminology

Within the literature the terminology used varies in reference to the themes central to this study. For the purpose of this mapping exercise the term 'family/domestic violence' includes: domestic violence, family violence, intimate partner violence and inter-parental violence.

Similarly, we use the term families to refer to carers, care givers, mothers, parents, and families.

1.4 Methodology

This part of the broader project comprised a desktop analysis of available websites detailing policy programs, services and resources for children 12 years of age and under experiencing homelessness and/or family violence. The desktop analysis was informed and complemented by consultations with service providers and policy makers.

Chapter 2. Program / Service System Responses to Children 12 and Under who are Homeless or At Risk of Homelessness

2.1 Commonwealth responses

Lead agency: In Australia, the Commonwealth agency overseeing service system responses for children 12 and under that experience homelessness and/or family violence is the Department of Families, Housing, Community Services and Indigenous Affairs (FAHCSIA).

Key documents:

- The Road Home – The Australian Government White Paper on Homelessness, Commonwealth Government, Australian Government, 2008
- National Affordable Housing Agreement, COAG, 2009
- National Partnership Agreement on Homelessness, COAG, 2009
- National Framework for Protecting Australia's Children, COAG 2009
- Time For Action: The National Council's Plan for Australian to Reduce Violence Against Women and their Children 2009 - 2022, FAHCSIA 2009
- First Action Plan 2010-2013: Building a Strong Foundation, COAG, 2010

Service responses: The Commonwealth's role in the homelessness and family violence space is focused on funding and framework setting for the states and territories, rather than direct service provision.

Commentary: In December 2008, the Australian Government released its White Paper on homelessness, The Road Home. This set the strategic agenda for reducing homelessness by 2020. The paper included two overarching goals:

- Halve overall homelessness by 2020.
- Offer supported accommodation to all rough sleepers who need it by 2020.

It also included three overall strategies within which investment should be directed:

- Strategy 1: Turning Off the Tap: Services will intervene early to prevent homelessness.

- Strategy 2: Improving and expanding services which aim to end homelessness: Services will be more connected, integrated and responsive to achieve sustainable housing, improve social and economic participation and end homelessness for their clients.
- Strategy 3: Breaking the Cycle: People who become homeless will move quickly through the crisis system into stable housing and the support they need so that homelessness does not reoccur.

The White Paper was the culmination of a lengthy consultation process, including forums in all Australian capital cities and some regional centres and almost 600 submissions. A key theme of feedback was the need for a comprehensive national approach within which specific service responses would be targeted at particular groups or life stages experiencing homelessness.

The needs of children accompanying their parents into homelessness were clearly identified as one of the key target groups. "Homelessness occurs among people of all ages. Young people 12-18 are the largest group of people experiencing homelessness and the highest users of specialist homelessness services (Australian Government 2009, p 4)."

The White Paper also noted an increase in the number of children 12 years of age and under who are homeless. "The vast majority of children who are homeless are with their parents. Many of these family groups are escaping violence, while a smaller group are homeless because of financial stress. Homelessness has a severe impact on children and may be the first step on a path to lifelong disadvantage (FAHCSIA, 2008 p 5)."

It also made specific mention of children in the broad strategies set out in it.

Under Strategy 1, Turning Off the Tap, key priorities include:

- "Assisting up to 9,000 additional young people between 12 and 18 to remain connected with their families"
- "Helping woman and children who experience domestic violence to stay safely in their homes"

Under Strategy 3, Breaking the Cycle, the Paper noted a need for additional specialist supports for homeless children and there was recognition of the impacts of homelessness on children, particularly disrupted schooling, can lead to issues later, lead to inter-generational disadvantage. It noted poor links between services, schools and childcare.

"Specialist homelessness services were not originally resourced with children in mind. Now there is an increasing awareness that children have needs, distinct from those of their parents." (52)

Children were also included in the interim 2013 targets set out by the White Paper:

- "The number of children who are homeless or at risk of homelessness provided with additional support and engaged in education is increased by 50 per cent."
- "Special attention must be given to the unique needs of children at risk."

Following the release of the White Paper, policy makers and service providers increasingly recognised the impact of homelessness and family violence on children, including their particular service needs. Until this point the adult carer was considered the client and his/her issues were the focus of the service response.

This shift to focus on accompanying children's needs was also reflected in the decision of the Australian Institute of Health and Welfare's (AIHW) to count children as clients in the specialist homelessness service data.

In 2009, the Commonwealth, Territory and State Governments developed the *National Affordable Housing Agreement* (NAHA). The state aim of the NAHA is to ensure all Australians have access to affordable, safe and sustainable housing that contributes to social and economic participation, based on the three strategies set out in the White Paper. This was funded for five years and supported by a number of partnership agreements, including a *National Agreement on Homelessness* (NPAH). Each State and Territory agreed to develop an implementation plan in response to the NPAH, setting out new initiatives and additional services aimed at making a contribution to achieving interim targets to reduce homelessness by 2013.

The NPAH mandated that each State and Territory will undertake responses in certain areas and that they could deliver services in others. These included:

- support to assist young people aged 12-18 years of age who are homeless or at risk of homelessness to re-engage with their families (where it is safe to do so) and engage with education and employment
- support for women and children experiencing domestic and family violence to stay in their present housing where it is safe to do so
- targeted assistance for homeless people, including families with children, to achieve sustainable housing
- support for children who are homeless or at risk of homelessness to maintain contact with the education system

The development of the NAHA and the NPAH coincided with the release of the National Framework for Protecting Australia's Children 2009 to 2020. This framework was developed in response to the increasing incidence of reports of child abuse and neglect across Australia. The agreement included six supporting outcomes:

- children live in safe and supportive families and communities
- children and families access adequate support to promote safety and intervene early
- risk factors for child abuse and neglect are addressed
- children who have been abused or neglected receive the support and care they need for their safety and wellbeing
- Indigenous children are supported and safe in their families and communities
- child sexual abuse and exploitation is prevented and survivors receive adequate support

The plan specified the development of an implication plan to be a key tool in measuring progress of the National Framework. This was to include a set of performance indicators that states and territory governments would be expected to report against.

Family Violence

The incorporation of child-centred practice by service providers in the family violence space predates that in the homelessness services sector. Funding for family violence services

originated in the nineties, when women's refuges, youth services and crisis services were brought into a common stream along with a number of state and federal programs. As part of this amalgamation the federal state and territory governments agreed to fund one position per refuge to work specifically with children. This was in recognition that children experience significant impacts from domestic violence and children actually made up the majority of clients.

It was left to individual refuges to decide what to do with funding for these workers. Some mainstreamed it into their general case management services. Others used it for childcare. While some services have used the position for child focused case management, the extent and nature of this appears to vary widely. The research was unable to locate any comprehensive national data relating to the extent, effectiveness and nature of child-centred practice in family violence services.

In addition to the commitments relating to family violence contained in the White Paper and NPAH, in May 2008 the Commonwealth established the National Council to advise on measures to reduce violence against women and their children. The Council's recommendations were contained in a 2009 report, Time for Action: The National Council's Plan for Australia to Reduce Violence Against Women and Children 2009-2021. This identified a number of problems in the provision of family violence programs, including fragmented service delivery, a failure to invest in primary preventative measures and inadequate funding.

In response, Commonwealth, State and Territory governments set up a process driven by a series of four three-year COAG sponsored action plans. The Action Plan 2010-2013 commits Commonwealth, state and territory governments to work together to reform service delivery in the family violence sector. The plan has a strong focus on reforming justice. It also looks at building primary prevention capacity, enhancing service delivery and building a stronger evidence base for family violence service interventions. Outcome four of the Action Plan 2010 – 2013 focuses on improving services for woman and their children experiencing violence and includes:

- improved housing outcomes for women and children experiencing family violence

- implementation of the Building Capacity Building Bridges project to deliver accredited 'child focus' training to workers in adult-focused services (COAG 2010, p24)

It also includes programs and reforms in the family violence sector to be undertaken by each state and territory. A National Plan Implementation Panel was also established to advise on the development and implementation of the National Plan.

2.2 State and Territory Responses to children experiencing homelessness and/or family violence

Overall, the State and Territory responses to children 12 years of age and under experiencing homelessness can best be described as unevenly distributed and poorly integrated with other programs and services, such as child protection.

While all State and Territory governments have explicitly recognised the impact of homelessness and housing insecurity on children, only some have moved to establish services specifically targeting them. Adding to this situation is the uncertainty surrounding funding under the NPAH. Due to expire in June 2013, it has been extended to June 2014 in order to give Commonwealth, State and Territory governments additional time to negotiate another agreement, although the exact quantum of funding to be provided during the extension period is uncertain.

The response to the First Action Plan 2010-2013 has been somewhat better, as it has been driven for the most part by greater political commitment, evidenced by the creation of cross departmental implementation structures at a state and territory level.

Victoria

Lead Agency: The Department of Human Services (DHS) is the lead agency for homelessness and family violence programs.

Key documents:

- Homelessness: Victorian Homelessness Action Plan 2011-2015, DHS 2011

- Family violence: A Right to Safety and Justice: Strategic Framework to Guide Continuing Family Violence Reform in Victoria 2010-2020, Department of Planning and Community Development, 2010

Service responses: Victoria has several service interventions for children 12 years of age and under in the homelessness and family violence space.

The state wide Children's Resource Program funds one Children's Resource Program worker, based in homelessness services, in each DHS region; two in Eastern Metropolitan Region. There are also two regional Aboriginal Children's Workers.

The role of these regional workers is to build the service system knowledge and capacity in relation to the issues faced by children accompanying their parents into homelessness and the family violence refuges. Specifically, they also:

- assist agencies and homelessness workers to include the needs of children in case planning and create more child friendly environments in their offices.
- assist workers to understand the effects of trauma and crisis on children.
- provide knowledge and links to child specific services that may be relevant to children's needs.

The workers also have access to a pool of brokerage funds for children's needs, particularly in relation to maintaining their attachment to education.

In 2010, a specialist service response for children was introduced to fill the gap in funded case management for children entering homelessness and family violence services. The Children's Specialist Support Service (CSSS) is based in homelessness services in four of the eight DHS regions across Victoria: Hume, Southern Metro, Northwest and South West.

In addition, the service mapping identified a number of not for profit organisations offering programs targeting children 12 and under in addition to CSSS. There were Wesley Mission Victoria's Resilient Kids program, Loddon Valley Homelessness Network's Play Connect program and, in the family violence space, the Safe Futures Foundation. These interventions will be examined in more detail in Chapter 4.

Commentary: Of all the state and territories, Victoria has the most comprehensive and longstanding service response to children in the homeless and family violence sectors.

Victoria's first homelessness strategy was established in 2002 and identified children as a priority. Following concerted debate in the sector, in 2002/3 the Homelessness Assistance Service Standards (HASS) were changed to recognise the importance of case planning for children. However, in practice, the adoption of this standard was patchy. A number of factors contributed to this including lack of time on the part of workers, difficulties with referral pathways and ongoing disagreement as to what was the priority, assisting children or their parents and carers.

The Victorian Homelessness Action Plan from 2006 to 2010 identified children as one of the groups for which specific service responses needed to be developed. This resulted in a number of child-focused programs, outlined in the discussion that follows. The Action Plan 2011-2015 targets support to three key areas:

- innovative approaches to homelessness
- early intervention and prevention
- target resources where they will make the biggest difference

Families and vulnerable children are one of several stated target groups. Outcomes for them include:

- family health issues are managed
- children attend school regularly
- children have current community health checks
- family is in safe, stable accommodation
- family is committed to their integrated plan

Victoria has been pursuing structural reforms to its family violence sector since 2005. Victoria's response to Action Plan 2010-2013 recognises the need to improve service responses to children and young people entering the family violence sector. This includes:

- "Support (for) the strengthened implementation of therapeutic approaches to children and young people in addressing the impact of developmental trauma

associated with family violence" (Department of Planning and Community Development, 2010, p35)

- increased housing and support options for women and children
- maximising the stability of children in education

Victoria's response to the Action Plan 2010 – 2013 explicitly links to the National Framework for Protecting Australia's Children and to state government reforms in the child protection area.

The focus on therapeutic interventions mirrors one of the outcomes of a lengthy inquiry into Victoria's child protection system, Protecting Victoria's Vulnerable Children, held over 2009-2010. The Directions Paper coming out of the inquiry specifically argued there was a need for "Recognising the impacts of parental problems on vulnerable children, and introducing a therapeutic approach, where appropriate (Victorian State Government, 2012, p5)."

Another reform that was related to homelessness and family violence sectors is Child FIRST (Child and Family Information, Referral and Support Teams). This was established in nine sites in 2007 as a single entry point to child family support services, including homelessness, family violence and child protection. It is focused on developing service hubs that will provide a better service response to families with complex needs, including ensuring timely child protection involvement if a child is at risk of significant harm. It covers children up to 17 years of age.

South Australia

Lead agency: The lead agency for South Australia's response to homelessness and family violence is the Department for Family and Communities. South Australia also has a cross departmental committee examining changes to its family violence services, chaired by the State Minister of Status of Women.

Key documents:

- Homelessness: Homeless to Home: South Australia's Homelessness Strategy 2099 – 2013, Department for Family and Communities, 2009

- Family violence: A Right to Safety 2011 – 2022, South Australian Office of Women, 2010

Service Responses: The key service response identified by the mapping exercise is Together for Kids, a state wide program run by Relationships Australia South Australia. The program specifically supports children experiencing homelessness and/or family violence. This is examined in more detail in section 4.5.

Commentary: After Victoria, South Australia appears to have done the most work on child centred practice in the homelessness and family violence sectors.

The State's main homelessness response to the NPAH, Homeless to Home: South Australia's Homelessness Strategy 2099 – 2013, set out a number of changes to the administration of the homelessness services sector, including the recognition of children as clients in their own right. "To improve the responses to homeless children". This principle requires individual assessment and case management for every child accompanying an adult into a specialist homelessness or domestic/Aboriginal family violence service. (Department of Families and Communities, p12)"

Child aware practice is now one of the criteria for organisations applying for state homelessness funding. Other child centred components of Homeless to Home include:

- seconding child and adolescent health workers to work in specialist homelessness services
- training for case managers across the homelessness service system improve their work with children.

South Australia is developing legislation that will mandate the inclusion of child centred principles into the operations of government and government-funded agencies. The State's response to Action Plan 2010-2013 includes:

- a focus on early intervention and preventing violence against women and children
- joined up services that better meet the needs of women and children experiencing family violence.

- better housing options and assistance for children to maintain their connection to education (Office of Women, 2010, p18)

Western Australia

Lead agency: The Department for Child Protection is the lead government agency responsible for funding specialist homelessness services in Western Australia.

Key documents:

- Homelessness: Homelessness Implementation Plan, Department of Child Protection, 2010
- Family violence: Western Australian Plan for Family and Domestic Violence 2009 - 2013, Department of Child Protection, 2009

Service response: The service mapping did not identify any programs in the homelessness sector specifically focusing on the needs of children 12 and under. A number of family violence refuges have as part of their service response a worker focusing on the needs of children.

The only comprehensive service response identified is the Patricia Giles Children's Counselling Service. This delivers therapeutic counselling for children who have experience family violence across ten refuges in the Perth metropolitan area. It is examined in section 4.8 below.

Commentary: Western Australia's response to the NPAH is contained in its Homelessness Implementation Plan. It focuses on creating a better-connected service system.
Specific aspects of that plan relating to children 12 and under include:

- support for children who are homeless or at risk of homelessness including assistance to maintain contact with the education system
- 17 specialist accommodation workers to assist homeless people, including families with children, to stabilise their situation
- support for women and children that experience family violence

There is evidence of a growing awareness on the part of many working in West Australia's homelessness service system that they need to re-orient their services so that they can work more effectively with children 12 and under. For example, Shelter WA is in the final stages of preparing a report on young people and homelessness, including children under 12. This document will be public in early 2013.

In October 2012, the Western Australian Auditor General's Office released a report into whether the state was meeting its obligations under the NPAH and if it was making a difference to homeless people in Western Australia. This report noted that while cooperation between the non-government sector and state government was good it found "no evidence of systemic change that will ensure services are better integrated, particularly as there is no certainty that the programs will continue after June 2013 (Western Australian Auditor General, 2012, p22)."

One of several principles underpinning The Strategic Plan for Family and Domestic Violence is "Children have unique vulnerabilities in family and domestic violence situations, and all efforts must be made to protect them from short and long term harm (Department of Child Protection, 2009, p7).

Queensland

Lead agency: The Department of Communities is the lead agency responsible for specialist homelessness and family violence services in Queensland.

Key documents:

- Homelessness: The Queensland Government has no formal implementation plan in response to the NPAH.
- Family violence: For Our Sons and Daughters: A Queensland Government Strategy to Reduce Domestic and Family Violence 2009 – 2014, Department of Communities, 2009

Service response: The Queensland-based service response identified by the service mapping is MICAH Projects, a homelessness and community service organisation based in Brisbane. This provides programs focusing on the health and well-being of young mothers and their

children entering the homelessness service system. This is examined in further detail in section 4.6.

Commentary: Queensland is currently holding an inquiry into child protection similar to the one undertaken in Victoria. Homelessness organisations have pointed out that housing instability underlines a lot of the presenting issues being viewed by the inquiry and are hopeful child focused initiatives in the homelessness area may be included in inquiry's recommendations.

Queensland has had guidelines in place since August 2011 for good practice for specialist homelessness service providers working with children 16 and under. MICAH Projects have Child Aware funding to work on a series of child focused practice tools, including a practice guide for homelessness staff working with children and young people, experiencing, exposed to, or at risk of exposure to family violence, mental illness and substance abuse. This is being developed in cooperation with the Parenting Research Centre: http://www.parentingrc.org.au.

For Our Sons and Daughters stresses themes common to most of the state and territory responses to the Action Plan 2010-2013, including early interventions and better service planning in the family violence area.

New South Wales

Lead agency: The lead agency for homelessness and family violence programs in NSW is the Department of Family and Community Services. Family violence policy is the responsibility of the Office of Women's Policy in the Department of Premier and Cabinet.

Service responses: The service mapping did not identify any programs in the homelessness or family violence space specifically focusing on the needs of children 12 years and under.

Key documents:

- Homelessness: NSW Homelessness Action Plan 2009-2014, NSW Government, 2009
- Family violence: Stop the Violence, End the Silence, NSW Government 2010

Commentary: The focus of NSW's homelessness action plan is realigning the homelessness service system towards greater service integration and a focus on early intervention. It explicitly recognises:

- those who experience homelessness under the 18 have an increased risk of experiencing long-term homelessness
- it is important to maintain the connection to education

The plan contains no major initiatives aimed at children 12 and under and this mapping exercise could find no evidence of specific child aware programs or services in the homelessness space in NSW.

The state does have an initiative called Brighter Futures Program. This is similar intent to Victoria's Child FIRST program, i.e., streamlining services for vulnerable children engaged with the NSW child protection system.

Tasmania

Lead agency: The lead agency for homelessness policy and programs is the Department of Health and Human Services. Family violence policy and programs are overseen by the Department of Justice.

Key documents:

- Homelessness: Tasmanian Homelessness Plan 2010-2013 Coming in From the Cold, Department of Health and Human Services, 2010
- Family violence: Tasmania has no specific document in response to the Action Plan 2010-2013.

Service response: Shelter Tasmania is not aware of any services working that are specifically working with children under 12 in the homeless or family violence space in the State.

Commentary: Coming in From the Cold focuses on similar themes to the other state and territory responses, including early intervention and improved effectiveness and connections between services.

Tasmania's response to family violence has a strong judicial and police focus. One component of this is the Safe At Home program. This aims to improve safety for adults and children who have experienced family violence and ensure that they can stay in their homes or return to them as soon as possible. The program is part of a wider, integrated Tasmanian response to family violence that includes a free and confidential (within child protection legislation limits) counselling service to children and young people up to eighteen years of age, that have experienced family violence and whose families are in the Safe At Home program.

Australian Capital Territory

Lead agency: The lead agency for homelessness programs in the Australian Capital Territory is the Department of Disability, Housing and Community Services. Two departments share oversight of family violence policy and programs, Justice and Community Safety and Disability, Housing and Community Services.

Key documents:

- Homelessness: ACT has no written strategy document in response to the NPAH.
- Family violence: Prevention of Violence Against Women and Children Strategy 2011–2017, Department of Disability and Housing and Community Services 2011

Service responses: The only child centred response in the homelessness/family violence space identified by the research is run by YWCA Canberra and is examined in more detail in section 4.7 below.

Commentary: YWCA Canberra is developing a child focused practice framework for workers in the homelessness sector. There are hopes this may be adopted by the ACT government to be mandated practice for all agencies wishing to apply for funding when the Territory's homelessness services are re-tendered in 2013.

The ACT's Prevention of Violence Against Women and Children Strategy 2011–2017 contains a similar policy focus to its state and territory counterparts. Objective three of the policy focuses on ensuring women and children's needs are met through joined up service systems,

including health, education and housing (Department of Disability, Housing and Community Services, 2011, p13).

Northern Territory

Lead agency: The Northern Territory Department of Children and Families is the lead agency responsible for homelessness and family violence policy and programs.

Key documents:

- Homelessness: Homelessness Implementation Plan, Department of Housing, 2009
- Family violence: Building on Our Strengths: A Framework for Action for Women in the Northern Territory 2008-2012, Office of Women's Policy, 2008

Service responses: The research identified no specific services focusing on the needs of children 12 years of age and under entering homelessness and/or family violence services.

Commentary: The focus of the Northern Territory's Homelessness Implementation Plan is increasing the availability of affordable accommodation. The only mentions of children are under outputs:

- support women and children experiencing family violence to stay in present housing when it is safe to do so
- support for children who are homeless or at risk of homelessness including maintaining contact with the education system

Chapter 3. Identifying Elements of Child-Centred Practice

The following section will draw out the key components of service models and practices focusing on children 12 years of age and under experiencing homelessness and/or family violence.

3.1 Difficulties and challenges

It is important to stress that such an overview, while useful, is necessarily partial. There are a number of reasons for this.

1. It is unlikely the research has fully captured the diversity of practices and models. It has not been able to examine child aware practice in relation to CALD or Indigenous child homelessness, to cite two examples. A more in-depth survey of approaches in the family violence space could also likely yield some interesting case studies and models.
2. Organisations working in this space utilise a significant degree of flexibility and innovation, tailoring approaches and developing new ones according to the particular situations and demands they face. This is a positive characteristic but it adds to the difficulties in compiling a comprehensive overview.
3. Child-centred interventions are an emerging area of work, particularly in the homelessness service sector. Many tools and practices have not been extensively documented. As noted in the literature review, there is a lack of evaluation and research pertaining to what is effective child aware practice. Much of the evaluation work that has been done is anecdotal in nature and not methodologically robust.

While the service mapping found agreement on general key principles underlining child focused interventions in homelessness and family violence, it also identified a significant confusion and a lack of agreement relating to some of the details of this practice. This included:

1. *Lack of agreement on terminology:* There is no common agreement on terminology to describe work services do with children 12 years of age and under. For example, 'child-focused', 'child aware' and 'child centred' practice, are terms used by service providers to describe what they do.

2. *No agreement on definition of child-centred practice:* There is no one commonly recognised definition of child-centred practice in the homelessness and family violence sectors, or about the components of what this practice entails. The clearest illustration of this relates to so-called 'trauma aware' or 'trauma informed' interventions that profess to include a therapeutic element.
3. *Lack of clarity about role, timing and content of trauma informed practice:* There is a widely held belief interventions need to provide a trauma informed or aware component to deal with the impacts of homelessness and/or family violence. But at what point does a child that has experienced homelessness and/or family violence need a therapeutic response? What is the best balance of therapeutic responses combined with specialist and other supports and secure housing? There is disagreement as to what stage therapeutic intervention should be undertaken. Some service workers believe it is important to delay therapeutic interventions such as counselling while the client is in crisis, i.e., homelessness. Others want to see therapeutic counselling options for children while the child is experiencing the crisis.
4. *Lack of research on efficacy of trauma informed practice:* While many service workers argued strongly that trauma informed work had secured positive results for clients, the lack of robust research in this area, including a paucity of clearly articulated intervention goals, tasks and measures that would provide useful evaluation and feedback, make it difficult to verify these claims, a fact admitted by some service workers interviewed as part of the service mapping exercise.
5. *Concern about staff capacity and skills to deliver therapeutic responses:* Concerns were expressed as to whether some homelessness and family violence services had the level of experience necessary to undertake the therapeutic practice claimed. It is one thing to offer interventions that have a therapeutic intent. It is another to achieve genuine therapeutic outcomes. Clearly not all services have the resources or expertise to offer genuine therapeutic interventions.
6. *Lack of clarity about involvement of parents in child focused work:* Another area of uncertainly relates to the role of parents/care givers in child focused interventions. While these interventions have as there starting point the needs of the child, some service interventions include parents/caregivers in their group work. Aims include building parenting skills and so-called 'filial therapy', particularly for children and their mothers. This latter approach appears to be more common in the family violence

space where there is a clear understanding that exposure to domestic violence can damage mother/child relations. Some homelessness service interventions are also informed by the recognition parents or carers face considerable pressures as a result of homelessness/housing insecurity, that mean they are often unable to provide all the supports their children need.

7. There is debate more broadly over whether it is possible to deal with the child's issues without also attending to the needs and strengthening the carer or family unit. Obviously, where there are issues around consent for younger children (around ten years of age and below depending on the child concerned), parents or carers have to play a major role. Regardless of age, however, many workers reported the active involvement of parents is important. Some reported getting good progress with children only to see these eroded or unbundled due to the parent's issues going untreated.

3.2 Areas of agreement

Core elements of child-focused practice in the homelessness and family violence sectors. Despite the caveats and disagreements listed above, based on the findings of the literature review and the overview of service interventions in Chapter 4, it is possible to highlight the following as core elements of child-focused practice in the homelessness and family violence sectors.

1. *Child as primary client:* The service response conceptualises the child as the primary client. The extent of this may vary depending on the age of the child and their family context. At the very least, child-centred practice recognises the child has particular needs apart from those of the adult they are accompanying into homelessness/family violence, and that these must be dealt with.
2. *Involvement of child in process and decision making:* Child aware assessment, case management and planning which involves the child in planning and decision-making as much as possible. This includes, where feasible, gaining explicit consent from children and reflecting the child's experiences in all records and case notes are kept. It will also take into consideration other issues facing the child, including health, nutrition, life skills, educational attachment, etc, and, where possible and necessary, include referral to mainstream or other specialist services.

3. *Staff dedicated to work specifically with the child concerned.* These staff need to be trained to deal with children and supported to make judgements about the issues they identify. Some of the training needs identified by service workers working in child focused programs in the course of this mapping included:
    - 'intentional conversation', how to get a response to a certain question from a child
    - how to introduce aspects of therapeutic care into recreational activities
    - gendered reactions in children
    - how to make services more child friendly
4. *Group work is common:* Group work is common although the particular activities will differ according to the age and needs of the child. Some group work is activity based, i.e., play, art or dance. Other groups are discussion/peer education based. Common treatment goals include helping the child recognise and process the physical and emotional issues relating to homelessness and family violence, reducing anxiety, increased coping skills and self-esteem, building social capital, improved performance in school, etc.
5. *Site of group work is recognised as important to maximize safety:* Group based activities should be offered in a regular, safe space. These include on site at the service provider or referring agency concerned, in schools, community facilities or in the child's home, i.e., crisis/transitional accommodation.
6. *'Trauma- aware' interventions where necessary, administered by an appropriately qualified professional.* The nature of the therapeutic intervention will differ according to a number of factors, including the issues identified and the age of the child.
7. *Work with the child's caregiver is important.* The nature and extent of this will vary depending on the situation of the child and family. It may involve work on parenting or life skills or how the caregiver can help the child with homework and maintaining educational attachment. Or it may involve therapeutic intervention aimed at repairing the damage caused to the relationship between parent and child as a result of their experience of homelessness/family violence.

While it is not a component of service delivery, as such, the majority of workers interviewed as part of this research noted their interventions worked best in the context of an all of

organisation commitment to child aware practice. Some of the aspects of this mentioned by service workers during the mapping included:

- child sensitive screening practices
- the adoption of appropriate policies and working with children checks
- the existence of clear protocols to deal with child protection services
- training for outreach staff on how to make judgements about children's safety
- taking children's needs into consideration in emergency assistance packages
- the configuration of offices to ensure safe spaces for children

Chapter 4. Overview of Relevant Service Interventions

The following section documents examples of service interventions at a state and territory level specifically focusing on children experiencing homelessness and family violence.

A table summarising specific service types, components of the intervention, and the age cohorts they seek to assist, is included at the end of this section.

A summary of resources and tools developed by the intervention is included in Appendix 1.

4.1 Homeless Children's Specialist Support Service

Provider: The Children's Specialist Support Service (CSSS) is based in four homelessness services across Victoria:

- Junction Support Services – Hume
- Hanover Welfare Service - Southern
- Bethany – South West
- Merri Outreach Support Service - Northwest

Purpose of service intervention: The service is an explicit recognition that children have particular needs apart from those of the adult they are accompanying into homelessness. The objectives are set out in Children's Specialist Support Services, Service Model Guidelines (DHS, p4) and include:

- "To provide flexible and immediate response to improve the outcomes (including improved engagement with education) for children accessing the homelessness service system, thereby decreasing their trauma on both their immediate and long term emotional well being."
- "To enhance the understanding and capacity of the homelessness service sector to respond appropriately to the support needs of children who are experiencing homelessness, within a systematic, family oriented framework.
- To improve access to specialist and mainstream support resources for children and families experiencing homelessness
- To increase inter-service collaboration and communication and make the best use of available resources to improve the outcomes for children and families in the homelessness service system."

Age Cohort: Children and young people 18 years of age and under.

Assumptions underpinning intervention:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence
- care givers need assistance to help their children deal with the impacts of homelessness/family violence as well as to address their own issues
- collaboration with referral agencies/other service providers enhances capacity to deliver child focused practice

Components:

- child-centred one on one case management and advocacy
- secondary consultations
- therapeutically informed group work
- referral to specialist and mainstream services
- links to social/community supports
- training on child focused practice

The service has a triage approach and is divided into three streams:

Stream 1: Assessment and case planning: All referrals to the program initially enter through this stream. In collaboration with the referring agency, the CSSS team will conduct an assessment with the child or young person (and in most instances their parent or guardian) and develop a case plan to meet their particular needs.

If the support needs can be met by the referring agency, the team will organise a hand over to go through the case plan. If the needs cannot be met by the referring agency, the child or young person will be referred to stream 2. This process will usually last between one and four weeks.

Stream 2: Enhanced case management: Based on the case plan, this will involve meeting the client and their family/guardian once a week to once a fortnight, depending on need. Activities during this process can include:

- intensive support focused on social, recreational, health, education and other needs of the child
- identifying and linking to other mainstream and specialist services
- supporting positive interactions with peers and families
- advocacy on rights of the child/young person to access service in their community

A CSSS worker might see the child three hours a week over a period of one to six months.

Stream 3: Group Work: This stream includes a range of therapeutic programs that provide space for children/young people to explore their feelings and emotions away from the stresses of their family situation. The group work usually has a therapeutic focus and includes art work, drama, games, small group discussion to explore family dynamics, understanding and managing strong feelings, self-care, strengths, etc.

The make-up of group work differs between providers. For example, Bethany runs three groups:

- 'Baby Jam': preschool kids and their mums, most of who have experienced family violence and who need their relationship with their kids repaired
- 'Kids Express': 0-18 years of age, kids in emergency accommodation, use music therapy
- 'Tune Out': specifically for adolescent girls, 11-15 years of age, most of whom have witnessed family violence

Groups run by Hanover include:

- 'I'm a Star': building kid's confidence and self esteem through artwork
- 'The Incredibles': kids who have experienced family violence
- a mums and small children's group

CSSS providers also tailor make specific groups according to demand/need. All groups organised under stream 3 must be partnered/co-facilitated with the referring agency. All agencies stressed the importance and value of this co-case management and facilitation, not just to help build a sense of shared ownership but to develop skills of workers and helping referring agencies becoming child wise.

Other activities undertaken under the CSSS program include:

- Making sure service workers have access to resources (posters, handouts) that inform parents of child specific responses and needs.
- Assisting workers with child aware case management/safety planning.
- Assisting workers to include children accurately in all data recording.
- Assist workers to understand impacts of trauma and cumulative harm on a child's development and incorporate this knowledge into their practice.

Context of service intervention: This varies according to the provider concerned. Because services must cover a certain geographical area it is usually a mixture of on-site and external locations. The latter can include community facilities, referring agencies, school, family violence refuges and crisis accommodation facilities. One on one work is often done in schools and the child's home, i.e., crisis/transitional accommodation.

Eligibility and referral pathway: Children and young people of families/caregivers accessing homelessness and family violence services, with the priority being in the region the service is based in. Some also take referrals from child protection. Those accessing CSSS must have a caseworker involved.

Funding: DHS and the NPAH

Resources/links:

- Merri Outreach Support Services: http://merri.org.au/site/bright-futures/
- Bethany: www.bethany.org.au/
- Hanover Welfare Services: www.hanover.org.au/homeless-childrens-support/
- Junction Support Services: www.junction.org.au/homeless-childrens-specialist-support-service/

4.2 Resilient Kids

Provider: Wesley Mission Victoria Housing and Crisis Service, Victoria

Purpose of service intervention: The program was established in 1996 to advocate on behalf of and address the needs of children and young people 18 years of age and under accompanying their families into homelessness and/or family violence services.

Age cohort targeted: Children and young people 18 years of age and under.

Assumptions underpinning intervention:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence
- care givers need assistance to help their children deal with the impacts of homelessness/family violence
- collaboration with referral agencies/other service providers enhances capacity to deliver child focused practice

Components:

- therapeutically informed one on one case management and advocacy, including capacity for emergency one-off sessions to address immediate problems, including a particularly traumatic event
- secondary consultations
- therapeutically informed group work
- referral to specialist and mainstream services
- training on child focused practice
- recreational and social activities including camps and holiday programs to help build self-confidence

The Resilient Kids program currently runs three groups, of which two are directly relevant to the service mapping:

'Cool Kids' is a therapeutic group run for primary school age children (5 – 12 years of age) that have experienced homelessness/family violence. Run after school for 1 ½ hours each week during school term. Using creative arts therapy, children are encouraged to identify difficult emotions and feelings and learning positive coping strategies. The group has a social skills component, including things like making friends, relationships, grief, loss, and teaching kids to keep them safe.

'Footsteps' is a therapeutically informed group for mothers and that have experienced family violence. It was established in recognition of the impact of family violence on an infant's emotional, social and physical development. It provides a safe space for mothers to talk about their experience of living with family violence and exploring the impact this has on their parenting and children.

Context of service intervention: On site and external locations such as other homelessness services, refuges, crisis accommodation facilities, etc.

Eligibility and referral pathway: Homelessness and/or family violence services in Melbourne's Eastern Metropolitan Region. Referrals also come through schools and Child First/child protection services.

Funding: The program is funded through Wesley Mission Victoria's internal resources.

Resources/links:

https://www.wesley.org.au/ourservices/crisishomelessnessandconselling.html

A detailed evaluation of the Resilient Kids program was completed in 2011 but is not publicly available.

4.3 Play Connect

Provider: Loddon Valley Homelessness Network (Victoria)

Purpose of service intervention: One on one and group work to help children and their mothers deal with the impacts of homelessness/housing insecurity and family violence.

Age cohort targeted: Children 0-5 years of age

Assumptions underpinning service intervention:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence
- care givers, in this instance young mothers, need assistance to help their children deal with the impacts of homelessness/family violence and to repair the damage caused to their relationship with their children

Components:

- Child-centred one on one case management and advocacy, including emergency one-off sessions to address immediate problems, including a particularly traumatic event
- therapeutically informed group work

The core component is a creative arts therapy program for women and their children who have experienced family violence and or homelessness or who are at risk of homelessness. The program runs for 1.5 hours each week for the length of a school term. Group numbers are kept small to ensure a safe and secure environment.

There is also the capacity for one on one work with a Creative Arts Therapist for families who have outstanding needs after they have attended the group.

Context of service intervention: On site at Loddon Valley Homelessness Network – referring agencies need to ensure they provide transport for clients as part of collaboration.

Eligibility and referral pathway: Children accompanying their parents into homelessness/family violence services or at risk of homelessness in the Loddon Mallee Region, central Victoria.

Funding: Private philanthropic funds

Resources/links:

- More information about the Play Connect program is available at the organisation's site, including a detailed evaluation of the program
- http://www.loma.net.au/childrens-program
- Other resources on the site include:
- Through a Child's Eyes, Children's Experience of Family Violence and Homelessness http://www.loma.net.au/images/lm-through-eyes.pdf
- A detailed report on the Children's Resource Program in the Loddon Valley region http://www.loma.net.au/images/finaldraftreportcrwproject.pdf

4.4 Safer Futures Foundation

Provider: Safe Futures Foundation (formerly Maroondah Halfway House), Victoria

Purpose of service intervention: The Safe Futures Foundation is a merger of three refuges. In addition to being a service for those experiencing family violence, it focuses on providing a

holistic case management response to children of women experiencing family violence, with a particular focus on their education needs.

Age cohort targeted: Flexible, children 0 - 18 years of age. The refuge has the capacity to take disabled women and their children.

Assumptions underpinning service intervention:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one work can assist children to process the experiences and emotions caused by homelessness and/or family violence
- care givers, in this instance young mothers, need assistance to help their children deal with the impacts of homelessness/family violence and to repair the damage caused to their relationship with their children
- a lot of family violence work has a strong justice and housing focus and is blind to other needs of children, particularly their education needs and can actually further disengage children from education
- the onus on supporting children and keeping them safe from family violence falls to Commonwealth and State governments, including departments other than those dealing with family violence

Components:

- child-centred one on one case management, including emergency one-off sessions to address immediate problems, including a particularly traumatic event
- therapeutically informed group work
- focus on assisting and maintaining the educational links of children accompanying their mothers into the service

Educational assistance includes employing a trained and experienced teacher on staff to assist with school readiness, liaise with schools in relation to any problems the child may have and assistance with parents helping their kids with their homework.

The service brokers in therapeutic individual and group work (mainly through the Wesley Mission Victorian Resilient Kids Program detailed in 3.2 above).

Eligibility and referral pathway: Women and their children experiencing family violence or at imminent risk of experiencing it. Mainly from across Melbourne's Eastern metropolitan region but there is the capacity to take referrals from across the state.

Funding/service stream: A mixture of state and federal government funding sources.

4.5 Together 4 Kids

Provider: Relationships Australia, South Australia

Purpose of service intervention: Together for Kids is a South Australian wide program designed specifically to support children in the homelessness sector. It is an integrated service that provides training and therapy aimed at helping homeless children process the uncertainty and distress of homelessness.

Age cohort: Children 0-12 years of age

Assumptions underpinning intervention:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence

- care givers, in this instance young mothers, need assistance to help their children deal with the impacts of homelessness/family violence and to repair the damage caused to their relationship with their children
- collaboration with referral agencies/other service providers enhances capacity to deliver child focused practice

Components:

- child-centred, therapeutically informed one on one and group work
- referral to specialist and mainstream services
- training for homelessness and family violence workers on child-aware practice

Together for Kids has the capacity to custom design training for workers/organisations in the South Australian homelessness and family violence sectors on:

Context for service intervention: One on one counselling is mainly conducted off site, homeless clients find it difficult to come to clinical appoints so one on one and group work is done in family violence refuges, crisis/emergency accommodation, etc.

Eligibility and referral pathway: Homelessness and family violence services throughout South Australia can refer a child after completing an initial assessment. Occasionally, the program will admit a child through other channels, i.e. via a school counsellor. In these cases, the program will on-refer them to a homelessness service.

In addition to the age specifications, the child must be:

- living with a parent/guardian who is homeless or in unstable accommodation.
- in need of support to process complex life experiences or the family must be in need of support to assist the child.

Funding: Funded through the South Australian government's homelessness programs and the national partnership.

Resources/links:

Information about the Together for Kids program can be found here:

http://www.rasa.org.au/

The program borrows heavily from the tool kit developed by Kids Central, a program of the Institute of Child Protection Studies, at the Australian Catholic University. "The Kids Central Toolkit aims to provide workers and services with information, resources and tools to use child-centred approaches in their work with children, young people and families. It is based around six key principles that support child-centred practice, and each principle includes a range of tools and resources." The Institute also runs training for workers and services in how to use the Toolkit and develop skills in child-centred practice.

More information is available at: www.acu.edu.au/icps.

4.6 Young Mothers and Young Children

Provider: MICAH Projects, a homelessness and community service organisation based in Brisbane, Queensland.

Purpose of service intervention: Young Mothers and Young Children, a program focusing on the health and well-being of mothers and their children entering the homelessness service system.

Age cohort: Children four years and under, Mothers up to 25 years of age

Assumptions underpinning service response:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence

- care givers, in this instance young mothers, need assistance to help their children deal with the impacts of homelessness/family violence and to repair the damage caused to their relationship with their children
- young women experiencing homelessness/housing insecurity need assistance to access mainstream health and allied services

Components:

- child-centred one on one case management
- group work focusing on mothers and their young children
- referral to specialist and mainstream services, with a focus on health and allied services
- housing support

Group work focuses on healthy relationships and parenting and includes discussion and play activities for young mothers and their children. Health supports include midwifery care, ante-natal education and obstetrics, accessed via a partnership with Mater Hospital.

MICAH Projects takes a different approach to many other service interventions and explicitly does not focus on therapeutic group work as it believes the organisation does not have the expertise or in-house resources to do it properly. Rather, the organisation attempts to connect mothers to mainstream health and allied services, including primary health care, mental health, drug and alcohol and acute health services (such as speech pathology, occupational therapy, dentistry). They also attempt to link young mothers to employment, education and training opportunities.

MICAH Projects places strong emphasis on being child aware across its entire organisation. This includes:

- a detailed intake process that examines the needs to children.
- in-house support for staff to deal with any issues they identify.

Context of service intervention: On-site, including a clinic run in partnership with Brisbane's Mater hospital.

Eligibility and referral pathway: Young mothers 25 years of age and under who are homeless or at risk of homelessness.

Funding: A mixture of state and NPHA funding

Resources and links:

MICAH Project's website http://www.micahprojects.org.au/

Additional resources on the site include the outcomes of a study of crisis intervention and planned family support with vulnerable families undertaken by the University of Queensland. This report focuses on the experiences of 88 families and their children who were homeless or at risk of homelessness. It explores their challenges and how services can best assist them and others in their situation.

4.7 Breaking the Cycle

Provider: YWCA Canberra

Purpose of service intervention: Breaking the Cycle is a program focused on the needs of children and young people accessing the YWCA's housing services in the Australian Capital Territory.

Age cohort: Children 0-15 years of age

Assumptions underpinning service intervention:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence
- housing support needs to be integrated into child focused interventions

Breaking the Cycle came out of YWCA Canberra's experience as a provider of housing and homelessness services and their lack of capacity to respond effectively to the longer-term causes of intergenerational homelessness. As well as this, in dealing with parents' needs, children's needs have often been overlooked. There was a need to focus more on child centred practice.

Components of service intervention:

- child-centred one on one case management
- housing and other wrap around supports

The program employs a qualified behaviour change professional to work with children accessing outreach homelessness and accommodation services. The worker provides specialised support to children within families experiencing homelessness and to help them respond to issues such as trauma, family violence, mental health issues and substance abuse.

It draws on a model called Circle of Security, an early intervention program for parents and children based in the United States.

YWCA is also working with staff from other services to develop child aware practice, using material developed by Kids Central, a program of the Institute of Child Protection Studies, at the Australian Catholic University (mentioned in 3.3). It is hoped that this practice framework will be adopted as mandatory requirement when ACT government tenders out homeless services in 2013.

Next year YWCA Canberra will run a program called 'parents as tutors' which will assist them with skills to help their kids do their homework.

Context of service response: Will depend on the nature of activity. Assessment and individual casework is held in a number of settings including clients' homes, i.e., crisis/transitional accommodation.

Group work is held off-site in counselling rooms, schools, homes. It is preferable to hold therapeutic activities, i.e., where there is a process in a regular venue.

Eligibility and referral pathway: Children accompanying parents into homelessness and family violence services in the Australian Capital Territory.

Funding: Private philanthropic funds.

Resources/links:
YWCA of Canberra: http://www.ywca-canberra.org.au/

Circle of Security is an early intervention program for parents and their children. It is based on the premise that secure children exhibit increased empathy, greater self esteem, better relationships with parents and peers, enhanced school readiness and increased capacity to handle emotions compared with children who are not secure. A full list of materials, including training materials is available at: http://circleofsecurity.net.

4.8 Patricia Giles Children's Counselling Service

Provider: Patricia Giles Centre, a service in Western Australia for women experiencing family/domestic violence.

Purpose of service intervention: For the last twelve years it has delivered one on one therapeutic counselling for children accompanying their mothers into ten family violence refuges in the Perth metropolitan area. They also provide counselling in outreach venues, areas where women and their children who have left the refuge but still need help, can access assistance.

As it was originally configured, the service was opened to all children who entered a family violence service with their parent and provided open-ended sessions. Children were referred to the service by the children's workers' in each of the ten refuges. This resulted in incredibly long waiting lists, up to three to four months.

Two years ago the service was evaluated and reconfigured in an attempt to reduce waiting times and place more emphasis on child workers to do some of the work.

Age cohort targeted: Children 4 – 18 years of age.

Assumptions underpinning service response:

- children suffer a number of impacts from homelessness and/or family violence, including interrupted physical, mental, emotional and education development
- children need to give voice to their own concerns and issues regarding the impacts of homelessness and/or family violence
- there is a need to intervene early to ensure children do not suffer from long term impacts of homelessness and/or family violence
- therapeutically informed one on one and group work can assist children to process the experiences and emotions caused by homelessness and/or family violence
- care givers, in this instance young mothers, need assistance to help their children deal with the impacts of homelessness/family violence and to repair the damage caused to their relationship with their children
- there is a lot of work refuge-based children's workers can do to assist children without referring them to therapeutic service.
- collaboration with referral agencies/other service providers enhances capacity to deliver child focused practice

Components:

- child-centred one on one case management and advocacy, including emergency one-off sessions to address immediate problems, including a particularly traumatic event
- referral to specialist and mainstream services, with a focus on health services
- training for service workers on child-aware practice
- recreational and social activities including camps and holiday programs to help build self-confidence

Refuge based children's workers undertake in-depth assessments of all children who accompany their mothers into their service.

- those who need it are referred to the central counselling service. These referrals are further triaged so that the most serious cases are dealt with first.

- the Centre provides eight one hour sessions per child, one a week tailing off to one a fortnight later on, with the ability to provide an additional four sessions for serious cases.
- there is the capacity to provide emergency counselling if a child requires it.
- the Centre also runs other activities, including two family camps per year.

As part of this realignment, the Centre has spent a considerable amount of resources and time training children's workers in referral refuges on child aware assessment practices and case management.

Context of service provision: On site or in referring refuges. The Centre also runs activities in secure community venues for women who have left a refuge but still need assistance.

Eligibility and referral pathway: Children accompanying their mothers into one of the ten domestic violence refuges connected to the service in the Perth metropolitan area.

Funding/service stream: West Australian Department of Child Protection

Resources/links:

http://patgilescentre.org.au/what-we-do/counselling/

4.9 Mapping service sector responses to children 12 years of age and under in the homelessness and family violence sectors

Service Intervention	0 – 2 years of age	2 - 5 years of age	5 – 12 years of age
Homeless Children's Specialist Support Service			
One on one case management		Yes – involvement of care giver/parent encouraged	Yes – involvement of care giver/parent encouraged
Secondary consultations	Yes, but focuses on the parents needs as they relate to the child	Yes	Yes
Therapeutically informed group work	Yes - focus is on repairing damage to relations between mother and child caused by homelessness/family violence, and on parenting skills	Yes – group work focuses on issues such as building confidence and esteem, school readiness	Yes - approaches/contexts differ according to the provider Strong focus on building social capital Increasing sensitivity to gender considerations, ie, girls only groups
Referral to mainstream/specialist services	Yes but much of the focus is on parents needs as they relate to child	Yes	
Links to social/community supports	Yes but much of the focus is on parents needs as they relate to child	Yes	
Training other workers/organisations in child focused practice	Yes		
Resilient Kids			
One on one case management		Yes	
Secondary consultations	Yes, but focuses on the parents	Yes	

	needs as they relate to the child		
Therapeutically informed group work	'Footsteps' group. Focus is on repairing damage to filial relations between mother and child caused by homelessness/family violence and parenting skills	'Cool Kids' After school group uses arts therapy to help children identify and deal with difficult emotions and learn positive coping strategies	
Referral to mainstream/specialist services	Yes but much of the focus is on parents needs as they relate to child	Yes	Yes
Links to social/community supports/recreational activities		School holiday programs	Camps/excursions to help kids build self confidence
Training other workers/organisations in child focused practice	The program trains homelessness/family violence workers throughout Melbourne's eastern metro area in child focused practice and therapeutic group work Also runs tailor made therapeutic groups for other organisations as required		
Play Connect			
One on one case management	Yes, child centred one on one case management including capacity for emergency ones sessions to address immediate problems or issues relating to a particularly traumatic event. Focus is on repairing damage to relations between mother and child caused by homelessness/family violence		
Therapeutically informed group work	Creative arts therapy for women and the children who have experienced family violence/homelessness		
Referral to mainstream/specialist services	Yes		
Safe Futures Foundation			
One on one case management	Yes – focus in on repairing damage to relations between mother and child caused by homelessness/family violence		

	Strong focus in 5 -12 age cohort on education assistance, liaising with schools, etc	
Therapeutically informed group work	Yes – brokers in from other service provider as required	
Referral to mainstream/specialist services	Yes	
Together for Kids		
One on one case management	Yes	
Referral to mainstream/specialist services	Yes	
Training other workers/organisations in child focused practice	Yes, has the capacity to custom design training on child centred practice for homelessness/family violence workers	
Young Mothers and Young Children Program		
One on one case management	Yes, for mothers 25 years of age and under and children 4 and under	
Therapeutically informed group work	Yes but brokered in from external organisations	
Referral to mainstream/specialist services	Yes – strong focus on assisting young mothers with referral to mainstream/specialist health/allied services and housing support	
Breaking the Cycle		
One on one case management	Yes, provides therapeutically informed case management	
Referral to mainstream/specialist services	Yes, strong focus on needs of parents in terms of health/housing	
Training other	Is developing a range of child centred practice tools to assist workers in homelessness and family violence	

workers/organisations in child focused practice		
Patricia Giles Children's Counselling Service		
One on one case management		For children 4 – 18 years of age, including capacity for emergency ones sessions to address immediate problems or issues relating to a particularly traumatic event.
Referral to mainstream/specialist services		Yes
Training other workers/organisations in child focused practice		Provides training on child centred to workers in ten refuges across the Perth metro area
Links to social/community supports/recreational activities		Runs two family camps a year

4.10 International Resources

In addition to the Australian and international resources listed previously, the following links are useful.

United States and Canada

A number of Victorian services in the homelessness and family violence space that have adopted child aware practices cited the influence of Dr Bruce Perry, the Senior Fellow of The Child Trauma Academy (CTA) and an Adjunct Professor of Psychiatry and Behavioral Sciences at the Feinberg School of Medicine of Northwestern University in Chicago.

CTA is a not-for-profit organization based in Houston, Texas working to improve the lives of high-risk children through direct service, research and education. It emphasizes the importance of childhood experience in shaping the health of the individual and offers consultation, education and training services to assist individuals and organizations in their work with high-risk and traumatised children.

CTA's website is: http://childtrauma.org/

The Centre for Children and Families in the Justice System, run by Canadian trauma expert Alison Cunningham was cited as an influence by some family violence space. The Centre has produced detailed resources for working with women and children who have experienced trauma and domestic abuse.

The Centre's website: http://www.lfcc.on.ca/alison_cunningham.html

The US-based National Centre on Family Homelessness has as one of its specific focuses, strengthening at risk and homeless young mothers and children. They are one of the participants in Safe Start Initiative, a federal government effort to prevent and reduce the impact of family and community violence on children and their families.

The Centre also provides trauma-informed clinical counselling and care for children in homeless shelters in partnership with Central Massachusetts Housing Alliance and the University of Marylands Trauma Treatment Centre.

Details of both these initiatives can be found on the Centre's website. Of particular use is:

- Trauma-Informed Organisational Toolkit, a 96 page guide on child aware practice and polices specifically for homelessness services.
- Material relating to the PEACH Initiative (Promoting Physical and Emotional Awareness for Young Children Who Are Homeless). PEACH is an innovative curriculum that teaches young children about good nutrition, physical activity, and how to deal with the stress of being homeless. Each of the 16 sessions help children identify and feel comfortable with a range of emotions and learn strategies that help them feel safe.

All these materials can be found at: www.familyhomelessness.org

The National Alliance to End Homelessness is the leading US organisation on homelessness. It has a large range of resources on children and homelessness.
www.endhomelessness.org

Europe and The United Kingdom

Shelter UK is one of England's largest homelessness charities. It runs many services, including a Children's Service, a pilot program focused on the needs of homeless and badly housed children. The program includes:

- a telephone advice hotline for agencies working with homeless families with children.
- policy work to improve the outcomes for homeless families with children and young people 18 years of age and under.
- best practice advice in relation to working with children who are homeless or in poor housing.
- highlighting good practice between housing organisations and children's services.

Although it was produced in 2001, a particularly relevant document on Shelter UK's site is Improving Outcomes for Children and Young People in Housing Need: A Benchmarking Guide for Joint Work Between Services.

Shelter UK's site is: www.englandshelter.org.uk

The European Federation of National Organisations Working with the Homeless is the umbrella organisation for not-for-profit homelessness organisations based in Europe. The website contains a large amount of useful links, toolkits and information. This includes links to work on children and homelessness across the European Union.

Their website is: http://www.feantsa.org/code/en/hp.asp

The section entitled 'Strategies to Combat Homelessness' contains links to national and local strategies across the OECD put in place to combat homelessness.

Of this, the most relevant to this study appears to be Sweden's plan, Homelessness Multiple Faces, Multiple Responsibilities: A Strategy to Combat Homelessness and Exclusion From the Housing Market.

This sets out four strategies, one of which is "The number of evictions has to decrease and no children are to be evicted (Government Offices of Sweden 2007, p5)." The plan also states: "It is important to obtain more knowledge about the situation of homeless children and their parents."

Chapter 5. Service Gaps

Interviews with service workers indicate there are a number of gaps and problems in the service system that prevent a more effective and comprehensive response to children 12 years of age experiencing homelessness and/or family violence. The following identifies key concerns. Many of the following issues are indicative of the lack of a coordinated approach to children at risk across the service system as a whole in all state and territories.

5.1 Homelessness

All the workers interviewed agreed homelessness services are not resourced at a level necessary to look after the needs of children accompanying their parents into the homelessness system. This is reinforced by a sense of anxiety over the future of NPAH funding; without this money many services, including those targeting children, will not survive.

Other issues identified:

1. Lack of services specifically targeted at children. Despite increasing awareness of the needs of children and changes in AIHW data collection to recognise them as clients, the main focus continues to be on the needs of the presenting adult. The child's needs, if they are dealt with at all, still come a distant second.
2. Transitional accommodation is not sensitive to children's concerns and can inadvertently re- traumatise children. For example a child may be in transitional accommodation for a lengthy period of time, get settled in school, only to be moved again when the family gets permanent accommodation.
3. Workers agreed some children do slip through the cracks of the homelessness service system. These children are transitory and do not have access to a regular caseworker, making them ineligible for referral pathways into the few child focused specialist homelessness services available. In such cases, the only services available are informal supports provided by church or community charities. Youth centres are another option, but these are generally not suitable for young children. Some referrals may be possible if the child is in school and engaged with a counsellor.

4. The other cohort identified by workers as not adequately serviced by the homelessness system is children that are 'not demanding', that is children who do not immediately appear to require support.
5. In the absence of adequate funding, relationships and networks assume a major importance to homelessness services being able to work effectively with children. This presents particular issues in outer suburban and regional areas with fewer services. Some workers reported difficulties sourcing appropriately qualified individuals to co-case management and facilitation responsibilities.

5.2 Family violence

Family violence workers expressed similar concerns to those in the homeless service system. Most refuge services are not resourced to look after the needs of children accompanying their parents into the family violence sector. Many services do not have designated workers to focus on the needs of children. Of those that do, concerns were expressed that many of them are not adequately trained.

5.3 Mental health services

Homelessness and family violence workers in all states and territories identified the need for improved access to child aware mental health facilities. While it is acknowledged the Commonwealth has made a major investment in youth mental health, most of this had been focused on the older cohort through services such as Headspace.

The main mental health service for children 12 and under is the Child and Adolescent Mental Health Service (CAMHS). It has lengthy waiting lists and often does not provide the type of generalist services necessary for children and young people in emergency situations. The staff are often not trained in child aware practice.

CAMHS will only take clients with moderate to severe mental problems. They argued that what is needed are services that intervene earlier before the child in question develops serious problems.

Other service options include local area mental health services, council run services, and private psychiatric providers. Some schools also have in-house counselling services that can be used if the appropriate network exists.

5.4 Child Protection

Homelessness and family violence workers had varying experiences of child protection services.

While some were positive, the majority were critical of how child protection operates. Few homelessness services appear to take referrals from child protection or be able to refer into it. Even basic aspects of collaboration, such as information sharing are problematic. This appears to be the result of:

1. Silos in the service system generally which prevent a comprehensive approach to the needs of children.
2. High turnover of child protection staff. This results in a lack of institutional memory. Workers report they have to continually rebuild relationships with new child protection staff.
3. Different definitions/thresholds of vulnerability. The child must be at immediate risk of serious harm or neglect to involve child protection and they take a 'forensic' or 'legal' approach. Being homeless, as such, is not enough to trigger the intervention of child protection. Homelessness has a much more organic, cumulative vision of vulnerability.
4. Homelessness staff are not legally mandated to take action on abuse. Their role, if any, in relation to child protection services is therefore unclearly defined and confused.
5. Those homelessness and family violence services that reported positive interactions with child protection had invested heavily in developing and maintaining good relationships across the service system generally or that had some pre-existing child protection interface. This could be in the form of family specific program links that gave them some purchase in the system.

In Victoria the Child FIRST initiative was introduced to overcome some of these problems. It was initially envisaged as a broad overlaying program and a bridge between child protection

and other service systems. But many respondents believe it has developed into a purely child protection focused response. Many reported they were unable to refer into Child FIRST and only being able to access family services if they're working with a child already in the system. This is partly the result of the huge demand for statutory child protection services, a trend that has been further increased by the recent Vulnerable Children Inquiry held in 2011.

The Victorian Office of the Child Safety Commissioner was commissioned by DHS to look into the interaction between child protection and other services systems, including homelessness. This report, which is yet to be made public, recommends an improved definition of the child protection procedures and advice to emphasise their responsibility to collaborate with different agencies.

An inquiry into child protection, similar to that which occurred in Victoria, is currently underway in Queensland. Homelessness services are arguing that not only is the child protection system unresponsive to the concerns of homeless families, it actually disadvantages them. People are not fully disclosing their situations to avoid triggering child safety procedures, which places them lower on social housing list, was one example cited.

"A cause for serious concern and a failing of the system relates to children under the age of 12 who are placed in residential care, despite department policy and the many who run away from out of home, or foster care and who end up homeless, or present to crisis support agencies. Many crisis and homelessness shelters and homelessness agencies are not funded or properly resourced to accommodate young children. There is often a slow response in providing assistance by child safety agencies, or the child protection system (Queensland Shelter 2012)."

5.5 Education

The National Partnership on Homelessness committed federal and state governments to assist young people and children who are homeless or at risk of homelessness to maintain contact with the education system. It was also identified as key by nearly all those interviewed as part of this service mapping exercise.

The majority of the information on how the education system interacts to homeless children 12 years and under relates to the situation in Victoria. The Department of Education and Early Childhood Development has previously undertaken work in this area. Its main policy document, Supporting children, young people and their families affected by homelessness: Guidelines for Victorian Schools (DEECD, 2009) contains guidelines on how schools can identify, engage and support children and young people and their families who are at risk of homelessness or homeless. This cohort was also given some attention in the state inquiry into child abuse and work done under the previous state government on alternative education settings.

Despite this, workers interviewed as part of this exercise reported patchy and uneven interaction with schools. Obviously, the transient nature of this cohort presents major difficulties for educational and engagement and support. Other issues included:

1. Engagement between housing/family violence workers and school welfare officers appears to be largely case-by-case and is often not in-depth or sustained.
2. The service delivery system is fragmented and discourages educational considerations. A clear example of this, previously mentioned, is education is not taken into consideration in housing allocation.
3. Because they are dealing with their own trauma, parents often lack the capacity to attend school appointments, ensure their children arrive at school on time and have done their homework, etc. Education can present as just another in a long line of burdens.
4. It was a common theme of nearly all the key informants interviewed as part of this paper that building relations between homelessness services and schools is a time consuming and fraught process. This is due to the pressures faced by schools and differences between the education and welfare mindsets.

In terms of service responses, Hanover Welfare Services partnered with the Brotherhood of St Laurence on a project to help 9-15 year olds who are homeless complete school. This recommended changes to current practices in homelessness and education sectors (October 2009, Brotherhood of St Laurence, Foundation for Young Australians, Hanover Welfare Services). The report set out several strategies by which homelessness services can strengthen their engagement with the education system. This includes:

- Developing policies and procedures around making better connections and relationships with local schools.
- Including the education needs of school aged children in support plans for families accessing homelessness support services.
- Establishing out of hours educational assistance programs and assisting parents to create a positive homework environment in their accommodation.
- Assistance to meet educational costs.

Research over 14 months into 88 families that were homeless or at risk of homelessness, conducted by the Queensland-based homelessness service MICAH Projects (Healy, 2011) stressed a need for the following interventions:

- The importance of high quality childcare and early learning. This should not just include place-based early childhood services, but programs targeted at vulnerable, mobile populations of children experiencing homelessness.
- Flexible education programs that can be delivered in a range of settings for children who are homeless (such as homelessness services).
- Investing in building relationships with schools and childcare centres to improve access and address barriers to participation for families.

Appendix 1. Resources / Links

Service Models	Link
Victoria	
Homeless Children's Specialist Service	Hanover Welfare Services http://www.hanover.org.au/homeless-childrens-support/ Merri Outreach Support Services http://merri.org.au/site/bright-futures/ Bethany http://www.bethany.org.au/ Junction Support Services http://www.junction.org.au/homeless-childrens-specialist-support-service/
Resilient Kids	Wesley Mission Victoria https://www.wesley.org.au/ourservices/crisishomelessnessandcounselling.html
Play Connect	Loddon Valley Homelessness Network http://www.loma.net.au/childrens-program Through a Child's Eyes, Children's Experience of Family Violence and Homelessness http://www.loma.net.au/images/lm-through-eyes.pdf A detailed report on the Children's Resource Program in the Loddon Valley region http://www.loma.net.au/images/finaldraftreportcrwproject.pdf
South Australia	
Together 4 Kids	Relationships Australia South Australia http://www.rasa.org.au/en/whatwedo/T4K.aspx
Australian Capital Territory	
Breaking the Cycle	YWCA of Canberra http://www.ywca-canberra.org.au/
Queensland	
Young Mothers Young Children	MICAH Projects http://www.micahprojects.og.au/services/working-with-families-women-children/intro
Western Australia	
Patricia Giles Children's Counselling Service	http://patgilescentre.org.au/what-we-do/counselling/
United Kingdom	
Shelter UK Children's Service	http://england.shelter.org.uk/professional_resources/working_with_children_and_young_people/childrens_service
Resources and Tools	
Kids Central Toolkit	Institute of Child Protection Studies, Australian Catholic University www.acu.edu.au/icps
Circle of Security International	US early intervention program for parents and their children http://circleofsecurity.net/
Child Trauma Academy	Not for profit US organisation specialising in working with high risk children through direct service, research and education http://www.childtrauma.org/
Centre for Children and Families in the Justice System	http://www.lfcc.on.ca/alison_cunningham.html
National Centre on Family Homelessness	Trauma Informed Organisational Toolkit, 96 page guide about on child centred practice and policies specifically for homeless services PEACH Initiative, curriculum aimed at teaching young homeless children about how to deal with the physical and mental impacts of homelessness http://www.familyhomelessness.org

Appendix 2. Informants

Interviews

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Linda Downing

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Wesley Mission Victoria Crisis and Homeless Services

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