

# Newsletter

Spring Edition - Nov 2015

Do you have new and pre-loved baby and maternity goods?

Please donate on Fridays at the offices listed overleaf.



## What a year!

Check out our work in our annual report.
The report tells you about how we support families to create safe and nurturing environments for their children.

Download it at: www.caroline.org.au/aboutus

#### From the CEO

Last newsletter, I wrote to you about our operations in Goulburn Valley. And before that, about Moonee Valley. This time, following our AGM, I can take the chance to tell you about us a whole organization and that inevitably results in discussing our work that concentrates in Caroline Springs. Why? Because of all the areas we work in, the outer west of Melbourne has the greatest growth in young families seeking our help and support.

We managed to have best practice at the front of our minds, despite a remarkable year for the families we support, whose lives are always complex. Partly due to the public profile of family violence, the number of our families declaring current domestic violence has doubled. Family Services staff are some of the few working with intact families. Also, our statistics suggest social isolation has also doubled amongst our clients, and that was on top of an already high base.

As a result, we are advocating that the allowable use of integrated family services funding for group work to accompany our home visiting case management be supported. Over the years, the administrators of this funding have oscillated between thinking group work is a solid evidence based intervention and suggesting it's an inapporpriate use of the funds designed for case management.

Volunteering?

At Caroline Chisholm Society, we believe group work is a critical early intervention that supplements case management and provides a bridge between universal services and the family services sector. This also has the benefit of clients who are not already being visited at home or coming to our office accessing our support in the local neighbourhood.

We know the demand is out there; I cite the remarkable demand for our playgroup in Tarneit. The numbers have grown so high that our team has had to recruit volunteers to help them with crowd control. Yet, the funding will cease because it was linked to educational outcomes rather than social ones and now requires a health care card to illustrate disadvantage rather than allowing those facing vulnerability in other forms to attend.

Along with family services, our family support program includes our homelessness program, mentoring, and home maintenance programs. All are important programs that we use to help families raising their children in our communities. But families are complex and while we do our work to the best of our ability, we need to ensure that we are at the cutting edge of research in practice to operate more effectively. In that context, we are partners in "Brimbank Melton Connect" the project resulting from the then Victorian Government's Services Connect project.

I remarked in the Annual Report that we have been highly engaged with continuous quality improvement, through

the special project "Brimbank Melton Connect", a three-yearly quality review and further implementation of outcome measures.

I hope you are able to read the report, it tells you quite a lot about the work we do and that informs what we should be doing into the future.

In the spirit of Caroline Chisholm,

To express interest in volunteering in Melbourne,

03 9361 7000 secretary@caroline.org.au To express interest in volunteering in Shepparton, please contact:

- 03 5821 0826 gv@caroline.org.au

Helen Cooney

#### VOX POP—INSIGHT

The Victorian Council of Social Services (VCOSS) recently asked our CEO, "What are your current biggest priorities and challenges?" for their magazine, Insight.

Here is her reply:

I want to quote Thomas Piketty or someone to show I'm well-read, but our biggest priority is actually helping parents provide nurturing environments for their children. That is often freeing them from poverty, violence and homelessness, but they also need help with psychosocial development.

In the context of recent epigenetics, it is hard to find a higher priority than strong mother-infant interacat cellular and physiological levels tells us about the environmental factors turning genes on and off. To reditary and this research shows that you can break that genetic cycle if you change the environment in which babies grow. If you haven't already done so, do track down the "Lick Your Rats" study (from the Genetic Science Learning Center at the Baby rats with better care, grew up to be better carers. Not that human babies are the same as rats!

The challenge? For Caroline Chisholm it is balancing the demand for high volume early intervention services (such as parenting groups) in the face of increasing demand from complex families (who we help with home-visiting integrated casework). We have always done both, but the balance is shifting in the wrong direction. That's expensive for everyone

Insight, VCOSS, Issue 13, Page 15



Are you a facebook user?

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Please share our updates too!

### Spotlight on... Advocacy

The Victorian Government has begun another process to reform the support service system for vulnerable children and families, called a "roadmap".

This comes in the context of a Victorian Auditor General inquiry into ChildFirst and Integrated Family Services. As this is a large proportion of Caroline Chisholm Society funding, the Society is actively involved in advocacy to help keep families together.

We offer these excerpts from our recent letters and papers:

On 6 August 2015, Jenny Mikakos, Minister for Families and Children announced that Deloitte would independently review early intervention policies and practices in response to the Auditor-General's report, "Early Intervention Services for Vulnerable Children", as part of a "Roadmap for Reform: Strong Families, Safe Children project" project.

The Society supports significant reform to residential, foster and kinship care as we believe there is a need to support children entering and leaving care.

However, if such reform is to succeed, it must be matched with a focus on

- easier to access early intervention services (e.g. short term appointments and/or groups co-delivered with universal services),
- 2) greater casework capacity (e.g. early intervention home-visiting caseworkers helping keep families

together) and

3) better planning and information systems (e.g. resolving issues with IRIS our mandated database).

These can only occur if community capacity is increased.

With regard to greater casework capacity, we offer these remarks; case management is what we do to keep families safe for children – and it has two different contexts, namely as risk management (measured by reduction in risk at Child Protection or 'outputs') compared to therapeutic action (measured by changes or 'outcomes'). We are currently funded for the earlier. Both are reasonable but it is challenging to see how one would fund prevention of engagement with Child Protection using the latter paradigm.

With regard to the need for community capacity, we offer these remarks; just as Child Protection needs "community based" workers to reduced duplication, so too do secondary services like ChildFirst and Integrated Family Services need workers dedicated to supporting universal services like midwives and maternal and child health nurses. New resources could help services make early referrals rather than waiting and making reports to Child Protection.

#### What does "prevention of engagement with Child Protection" mean?

Avoiding forgotten and stolen generations and keeping families together.

#### Contact us ...

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