



ACT
Government

A Step Up for Our Kids

Out of Home Care Strategy 2015-2020



**Post-Strategy Evaluation
Stage 1**

The Community Services Directorate would like to thank everyone who contributed to the development of this Report. Our gratitude extends in particular to the young people, families and carers who provided their feedback to enhance the readers' understanding of findings.

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Acknowledgement of Country

The ACT Government acknowledges the Ngunnawal people as Traditional Custodians of the Canberra region and that the region is also an important meeting place and significant to other Aboriginal groups. The ACT Government also acknowledges the Wreck Bay Aboriginal Community. The ACT Government respects the continuing culture and the contribution that Aboriginal and Torres Strait Islander peoples make to the life of this city and surrounding region and pays its deepest respects to Elders past and present.

Sensitivities

The Report contains data from a range of sources, including nationally available data, such as the *Report on Government Services (RoGS)*, as well as unpublished, operational data from funded agencies and the Community Services Directorate, which may be subject to change over time.

While the data presented in this Report may illustrate similar trends as those presented in the Mid-Strategy Evaluation (MSE) Report. It is important to note that numbers should not be directly compared, due to the use of improved measures and refined counting rules established for the purposes of data collation/analysis in the Post-Strategy Evaluation (PSE) Report.

Understanding child protection data is complex and in reading this Report, please remember the data relates to real children, young people, and their families.

Terminology and glossary

Across the course of the *A Step Up for Our Kids Out of Home Care 2015–2020 Strategy (Strategy)*, terminology has evolved. For example, the Strategy uses the term high-risk families, particularly in the domain Strengthening high-risk families. This Report uses the term for ease of reference to the Strategy but preferences the descriptor 'families'. For children and young people of these families, the descriptor used is children and young people engaged with the child protection system. The understanding and use of key concepts continue to evolve. For example, the Strategy references birth families, however, in practice many extended family and kinship relationships provide a safe and loving home for children and young people. The Report deliberately uses both terms as needed to reference the Strategy and to be inclusive of all families.

A glossary of key terms and abbreviations is provided at Appendix A.

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Director-General's foreword



Over the last 5 years, the Community Services Directorate (Directorate) has worked alongside our community partners in a shared vision that children and young people in care grow up *safe, strong and connected*.

Together, we have worked to improve outcomes and better meet the needs of children and young people in the child protection and out of home care service system by providing more flexible, therapeutic and child-focused services.

A key focus of the [A Step Up for Our Kids Out of Home Care Strategy 2015–2020](#) (Strategy) was to invest in supports for parents and families to prevent children and young people from entering care and to support children and young people transitioning out of care by ensuring they have secure and stable family connections.

The Directorate continues to progress reforms across the out of home care service system through the introduction of service delivery models such as Family Group Conferencing (FGC) and Functional Family Therapy (FFT) which support family-led decision-making.

A Step Up for Our Kids delivered a fundamental shift in the provision of services in the out of home care sector and the Directorate remains committed to the measurement of long-term outcomes. A pivotal part of this is cultivating a strong evidence-base to ensure the next iteration of the Strategy remains focused on the safety and protection of children and young people and strengthening families by responding to their needs to build a strong and inclusive community.

We know to keep children and young people *safe, strong and connected*, it takes the whole of the Canberra community. This is why the Directorate has undertaken a range of engagement and consultation activities to hear the voices of children, young people, carers, families and the community sector regarding what has worked for them over the past 5 years and what they would like to see as our reform focus going forward.

This Post-Strategy Evaluation (PSE) Stage 1 Report was prepared by the Directorate and builds on the Mid-Strategy Evaluation (MSE) released in 2019. The Report was externally validated to assure the Directorate the analysis and assumptions made are correct and the data is reliable and valid, as shown by the Statement of Validation provided by the University of Technology Sydney.

I am proud of the work and dedication that is shown every day by those responsible for keeping our children and young people safe and protected, often within a challenging environment. I commend the PSE Stage 1 Report to you and look forward to sharing the final PSE Stage 2 Report later in 2022.

Catherine Rule

Director-General, Community Services Directorate

December 2021

Statement of validation



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9 August 2021

I have independently assessed the data and analysis that underpin the ACT Post-Strategy Evaluation of *A Step Up for Our Kids* Out of Home Care Strategy: Stage 1. I have reviewed the sources of data, the data merging and matching processes, the system for ensuring confidentiality and anonymity of data, and the use of the data to make findings in the Report. On the basis of this review I find that the data are reliable and valid and are managed in an ethically informed manner.

A handwritten signature in black ink, appearing to be 'GA', is written over a light blue horizontal line.

Dr George Argyrous
Senior Manager Research and Education
Institute for Public Policy and Governance, UTS

1. Executive summary

This is the Post-Strategy Evaluation (PSE) Stage 1 Report of the [A Step Up for Our Kids Out of Home Care Strategy 2015–2020 \(the Strategy\)](#). This Stage 1 Report presents quantitative and qualitative data against an Outcomes Framework for 4 of the 5 core Strategy outcomes: *Preservation, Reunification, Stability* and *Connection*, to assist the Directorate to understand what has changed in the out of home care system.

Stage 2 of the PSE will build on Stage 1 and present data for the fifth Strategy outcome, *Participation*, and provide more extensive qualitative research to gain a greater understanding of the ‘why?’ and ‘how?’ for changes identified through quantitative data analysis.

An evaluative thinking approach was applied to the design and delivery of the PSE to enable continuous improvement, which ultimately leads to better outcomes for children and young people. The PSE has been conducted by the Directorate utilising internal resources in collaboration with partner agencies funded under the Strategy.

The PSE findings for both Stage 1 and Stage 2 will be externally validated by the University of Technology Sydney to assure the Directorate the interpretations of the data contained in the Report are reasonable and to ensure the validity of the evaluation findings.

The ACT out of home care system has seen several sustained trends since the introduction of the Strategy. These trends have occurred in the context of a growing population, with an estimated additional 10,000 children and young people living in the ACT since 2014, and in the context of increasing numbers of Child Concern Reports being made.

Over the 5 financial years 2015–16 to 2019–20, the number of children and young people entering out of home care in the ACT has decreased¹. It is not possible to establish a direct cause and effect relationship, however, the decrease coincides with provision of new preservation support services through Uniting Children and Families ACT (Uniting), Karinya House for Mothers and Babies (Karinya House), Gugan Gulwan Youth Aboriginal Corporation (Gugan Gulwan) in partnership with OzChild and the Child and Youth Protection Services (CYPS) which is a branch within the Children, Youth and Families Division of the Directorate.

Of note, the age profile of children and young people entering out of home care has also changed over the period 2015–16 to 2019–20, with fewer children under the age of 10 years old entering out of home care. At the same time, the average length of time children and young people spend living in out of home care and the number of children and young people on long-term Care and Protection Orders has increased and the number of children and young people exiting out of home care has decreased. As a result, the number of children and young people living in out of home care who are aged over 10 years old is gradually increasing.

Together, these trends have resulted in a decrease in the total number of children and young people living in out of home care, from 826 on 30 June 2018 to 806 on 30 June 2020. Since 2018–19, on average, 813 children and young people have been living in out of home care at the end of each financial quarter.

¹ Definitions and counting rules for terms used in this Report, such as ‘entering out of home care’ are provided in Appendices A and D.

Aboriginal and Torres Strait Islander children and young people

Aboriginal and Torres Strait Islander children and young people continue to be over-represented in out of home care in the ACT. The estimated population of Aboriginal and Torres Strait Islander children and young people aged zero to 17 years old living in the ACT at 30 June 2020 was 2,900 (3% of all children and young people living in the ACT)². However, 30% of all children and young people living in out of home care on 30 June 2020 were Aboriginal and Torres Strait Islander, as were 28% of children and young people entering an out of home care placement in 2019–20. The percentage of Aboriginal and Torres Strait Islander children and young people living in out of home care in the ACT who are living with kinship carers (members of their family or community) and the percentage who are living with Aboriginal and Torres Strait Islander carers (in either foster or kinship care) has remained steady over the 4 financial years 2016–17 to 2019–20, at around 60% and 40% respectively.

Preservation

- Prior to the launch of the Strategy there had been increasing numbers of children and young people entering out of home care in the ACT. Over the 6 financial years 2014–15 to 2019–20 the number of children and young people entering out of home care each year in the ACT has decreased; from 219 in 2014–15 to 124 in 2019–20.
- Since 2016–17, the age profile of children and young people entering out of home care in the ACT has changed, with a decreasing number and proportion being younger than 10 years old.
- The number of non-Indigenous children and young people entering out of home in the ACT has decreased steadily since 2013–14, while the number of Aboriginal and Torres Strait Islander children and young people entering out of home care has fluctuated but decreased in recent years. In 2018–19 and 2019–20 fewer Aboriginal and Torres Strait Islander children and young people entered out of home care than in previous years.
- Preservation services provided by Uniting engaged with 532 children and young people at risk of entering out of home care between 1 January 2016 and 30 June 2020. Ninety-one per cent of episodes of preservation service were closed with the child or young person not having entered out of home care.
- The Mother and Baby Service provided by Karinya House under *A Step Up for Our Kids*, and in collaboration with CYPS, engaged with 131 mothers and 139 children between 1 January 2016 and 30 June 2020. Fifty-five per cent of the 117 mothers who had exited the program³ did so with their goals achieved and in sustainable independent living.
- The Family Functional Therapy (FFT) program provided by Gugan Gulwan in partnership with OzChild engaged with 43 families (116 children and young people) between 1 November 2018 and 30 June 2020. Twenty-four families, involving 80 children and young people, successfully completed the program by 30 June 2020.
- The Family Group Conferencing (FGC) program provided by CYPS engaged with 46 families (98 children and young people) between 1 November 2017 and 14 January 2021. Sixty-four of the children and young people did not subsequently enter out of home care (at January 2021) and 34 entered out of home care, with decisions about best care arrangements being made by their families.

² Report on Government Services (RoGS) 2021, Chapter 16: Child Protection Services.

³ For this service, exit is defined at the point at which either CYPS or Karinya House close off their support period.

Reunification

- Children and young people exit out of home care either because they return to living with their families, or because they reach 18 years old. There has been a long-term trend of decreasing numbers of children and young people exiting out of home care in the ACT. Over the 6 financial years 2014–15 to 2019–20 the number of children and young people exiting out of home care each year in the ACT decreased; from 154 in 2014–15 to 101 in 2019–20.
- The number of non-Indigenous children and young people exiting out of home in the ACT decreased steadily and the number of Aboriginal and Torres Strait Islander children and young people exiting out of home care each year has fluctuated.
- Since 2015–16, there has been a trend for a decrease in the number of children and young people spending periods of less than one year in out of home care. There has been a corresponding increase in the number spending longer periods in out of home care.
- Reunification services provided by Uniting engaged with 227 children and young people between 1 January 2016 and 30 June 2020. Thirty-two per cent of episodes of service were closed with the child or young person having left out of home care. Ninety-seven per cent of these children and young people did not return to out of home care within 24 months of their Uniting case being closed.

Stability

- The percentage of children and young people living in out of home care in the ACT who are living in different types of placements has remained similar since implementation of the Strategy. On 30 June 2020, 53% were living in kinship care, 42% were living in foster care and 5% were living in residential care⁴. The percentage of children and young people living in residential care who are under 12 years old has decreased from an average of 24% in 2016–17 to an average of 10% in 2019–20.
- Since 2011–12, the number of children and young people for whom either an Adoption or Enduring Parental Responsibility (EPR) Order was finalised remained similar, with an average of 16 orders finalised each year, apart from in 2015–16, when 23 orders were finalised. On 30 June 2020, 14% of all children and young people living in out of home care in the ACT were on an EPR Order.
- There has been no consistent change since 2011–12 in the time taken for a child or young person entering an out of home care placement to either an Adoption or EPR Order being issued.

⁴ Definitions and counting rules for out of home care placement types used in this Report are provided in Appendices A and D.

Connection

- The percentage of Aboriginal and Torres Strait Islander children and young people living in out of home care in the ACT who are living with kinship carers (members of their family or community) or who are living with Aboriginal and Torres Strait Islander carers (in either foster or kinship care) remained steady since 2016-17, at around 60% and 40% respectively.
- The percentage of Aboriginal and Torres Strait Islander children and young people required by CYPs policy requirements to have a Cultural Plan⁵ who have one recorded at the end of each quarter has decreased from 98% at 31 December 2017, to 87% on 30 June 2020.

⁵ Aboriginal and Torres Strait Islander children and young people who are living in out of home care with Parental Responsibility residing with the Director-General of CSD are required to have a Cultural Plan. Data for Cultural Plans presented in the *A Step Up for Our Kids* Snapshot Report counts Cultural Plans when a complete and endorsed Cultural Plan has been lodged as part of a child or young person's Annual Review. Cultural Plans that are in development and Cultural Plans developed for children and young people who do not require an Annual Review are not included in this count.

2. Background

A Step Up for Our Kids Out of Home Care Strategy

A Step Up for Our Kids Out of Home Care Strategy 2015–2020 was the ACT Government’s strategy to guide delivery of out of home care services over a 5-year period, starting from January 2015, to inform planning and continuous improvement of the out of home care service system. The vision for the Strategy was ‘*children and young people in care - growing up strong, safe and connected*’. Services delivered under the Strategy were extended to June 2022 to allow the system more time to mature and for this evaluation to be conducted.

The Strategy was developed between 2012 and 2014 to address a range of challenges facing child protection and out of home care services in the ACT such as:

- continuing growth in numbers of children and young people entering out of home care
- over-representation of Aboriginal and Torres Strait Islander children and young people in out of home care
- poor life outcomes of many care leavers compared with their peers
- difficulty in recruiting foster carers
- increasing costs.

The Strategy introduced substantial reforms to the out of home care service system, which for the purposes of the PSE, are broadly categorised under 4 domains, comprising 29 activities:

A therapeutic trauma-informed care system—this domain aimed to establish a therapeutic, trauma-informed service system to address the behavioural and emotional difficulties experienced by many children and young people who have suffered abuse, neglect and sexual exploitation by adults in their lives (Strategy, pg.2). Therapeutic, trauma-informed care was provided to children and young people both at risk of entering care and already in care.

Strengthening high-risk families—for the first time in the ACT, the Strategy invested in preservation (prevention) and reunification (restoration) services. This domain aimed to prevent children and young people from entering care or re-entering care; to restore them to family whenever possible; and to identify children’s behavioural concerns and needs early to provide flexible individualised funding to address those needs (Strategy, pg.5 and pg.27).

Creating a continuum of care—for those children and young people who couldn’t live with their birth families, the Strategy focused on improving their outcomes in care by providing placement stability, suitable carers and being responsive to their needs and lived experience (Strategy, pg.33). This domain intended to reduce duplication in the roles of government and non-government services and gave service providers greater autonomy and responsibility in providing stable and long-term care for children and young people.

Strengthening accountability and ensuring a high-functioning care system—this domain aimed to reform the governance of out of home care services. The reforms aimed to ensure the care system operated safely, effectively, efficiently and sustainably (Strategy, pg.44).

The organisations funded to deliver services under the Strategy were:

- Barnardos Australia (Barnardos) as the lead agency for the ACT Together consortium delivered a continuum of care including kinship, foster and residential care.
- Uniting delivered preservation and restoration services for families with children aged zero to 12 years old.
- Karinya House delivered preservation services, supports restoration (babies under 3 months old) services and provides short-term accommodation to mothers and babies.
- CREATE Foundation (CREATE) offered children and young people engagement support services.
- Australian Red Cross Society provided advocacy support services for birth families.
- Carers ACT Ltd provided advocacy support services to kinship and foster carers.
- Gugan Gulwan Youth Aboriginal Corporation (Gugan Gulwan) in partnership with OzChild delivered the Family Functional Therapy program; and
- Curiyo in partnership with CYPS delivered Family Group Conferencing.

Post-Strategy Evaluation (PSE)

The Strategy specified an evaluation would be undertaken at key points to measure whether the objectives were being met. The Directorate engaged KPMG to develop tools to guide the monitoring and evaluation of the Strategy and to undertake a Baseline Report and Mid-Strategy Evaluation (MSE). The MSE Report was publicly released in August 2019 and noted as one of its main points that the impact of the individual reforms was still developing (MSE, pg.17).

Building on the MSE, the PSE evaluated the effectiveness of the Strategy in achieving outcomes for children and young people engaged with the child protection system and for children and young people in out of home care. The PSE focused on evaluating the two key service delivery domains: *Strengthening high-risk families* and *Creating a continuum of care*. The PSE also provided descriptive data about changes to internal capability delivered under the *A therapeutic trauma-informed care system* and *Strengthening accountability and ensuring a high functioning care system* domains.

The main **objectives** of the PSE included:

- demonstrating the impact of reforms identified in the Strategy on the intended beneficiaries, including the children and young people engaged with the child protection system, children and young people in care, their families and carers
- explaining how and why the intended outcomes were or were not achieved
- finding areas for improvement
- compiling lessons learnt
- informing the development of evidence-based recommendations for decision-making in relation to service improvement, design and delivery.

The evaluation would, at the same time, serve the interests of the key stakeholders by:

- making explicit the experiences of children and young people in care and those at risk of entering care, their families and carers
- listening to the experiences of Aboriginal and Torres Strait Islander children, young people, their families, carers and community in light of the ACT Government commitment to reduce over-representation in out of home care and the findings of the *Our Booris, Our Way* Review

- developing a better understanding of the experiences of the community partners, other non-government organisations and ACT Government Directorates in implementing the Strategy.

In this context, the PSE sought to articulate relationships and measure outcomes in a system that is both complicated (there are multiple components) and complex (defined as having various causal relationships and emergent outcomes)^{6,7}. Individual or family circumstances do not always follow causal pathways and complex systems may not perform as expected. To account for this the PSE is conducted in 2 stages. This will allow for iterative methodologies and emergent outcomes to be tested in advance of a final PSE Report.

The main goal of the first stage was to test the available quantitative data; understand the extent to which the Strategy achieved its high-level objectives; and, to inform decision-making in relation to service improvement, design and delivery. The second stage will provide additional quantitative data and will explore qualitative data obtained through case studies, interviews, surveys and consultation.

Logic Model and Outcomes Framework

The Strategy outcomes, for the purpose of the PSE, are described as:

Preservation—children and young people remain permanently and safely with their families.

Reunification—children and young people return permanently and safely to their families.

Stability—children and young people experience stability in out of home care.

Participation—children and young people actively engage in decision-making about their life.

Connection—children and young people have a strong sense of identity and are connected to culture.

The hierarchy of logic models for the PSE included a high-level logic model for the whole Strategy and 2 domain logic models (refer to Appendix B) for the 2 domains concerned with the direct delivery of services under the Strategy, which are *Strengthening high-risk families* and *Creating a continuum of care*. The logic models were developed by the Directorate and community partners during 2 workshops in early 2020 and built on the original logic model developed by KPMG. The logic models reflect the theory of change which underlined the Strategy. They depict the intended causal pathways from the activities proposed by the Strategy, to produce the enabling outcomes, the final outcomes and overall impact.

An Outcomes Framework based on the logic models was developed to guide analysis of quantitative data. The complete Framework is in Appendix C and data sources and methodology (counting rules) are in Appendix D. Indicators for data presented in this Report are in Table 1. Data for Aboriginal and Torres Strait

⁶ Rogers, Patricia (2008) 'Using Programme Theory to Evaluate Complicated and Complex Aspects of Intervention', *Evaluation*, Vol 14(1):29-48.

⁷ The Directorate has yet to fully understand the impact of the COVID-19 public health emergency on the child protection and out of home care system. The impact of COVID-19 on services and on families engaging with them is emerging. There are likely to be effects that need to be understood in data for the final quarter of 2019–20 and into future years.

Islander children and young people are presented in Section 4 and data for all children and young people are presented in Sections 5, 6 and 7.

Young people in out of home care or who had a care experience, foster and kinship carers and Aboriginal and Torres Strait Islander families with lived experience of the ACT's human services system provided some narrative to consider when reviewing the data. The purpose of the narrative is to support the reader to consider the findings from their perspective. These can be found in Boxes 2, 3 and 5.

Table 1: The four Strategy Outcomes and twelve Headline Indicators for which quantitative data is provided in this Report (Stage 1 of the PSE).

Outcome	Indicator	Sections
Preservation	Children and young people remain permanently and safely with their families.	4, 5
	Indicator 1.1: Number of children and young people entering out of home care.	Pgs.52, 88
	Indicator 1.2: Number of children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family consenting to engage with Uniting preservation services.	Pgs. 55, 90
	Indicator 1.3: Number of children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family exiting Uniting preservation services.	Pgs.56, 90
	Indicator 1.4: Number of mothers who exited the Karinya House program with their goals achieved and in sustainable independent living.	Pg. 58, 91
Reunification	Children and young people return permanently and safely to their families.	4, 6
	Indicator 2.1: Number of children and young people exiting out of home care.	Pgs. 61, 88
	Indicator 2.2: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services.	Pgs. 45, 62, 90
	Indicator 2.3: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services who did not subsequently re-enter out of home care within 3, 6, 12, 18 and 24 months.	Pgs. 63, 90
Stability	Children and young people experience stability in out of home care.	7
	Indicator 3.1: Time taken from entry into an out of home care placement to issuing of a finalised Adoption or Enduring Parental Responsibility Order in respect of that placement.	Pg. 67, 91
	Indicator 3.2: Number of children younger than 12 years old living in a residential care placement.	Pg. 69, 92
	Indicator 3.3: Number of children and young people exiting out of home care who had 1 or 2 placements (by length of time in continuous care preceding exit).	Pg. 70, 92
Connection	Children and young people in care have a strong sense of identity and are connected to their culture.	4
	Indicator 4.1: Number of Aboriginal and Torres Strait Islander children and young people in out of home care living with family and number living with Aboriginal and Torres Strait Islander carers.	Pg. 48, 92
	Indicator 4.2: Number of Aboriginal and Torres Strait Islander children and young people living in out of home care who have a Cultural Plan recorded.	Pg. 50, 92

Box 1: Guiding Principles for the PSE

1. Actively engage and partner with people affected by the Strategy

- Engagement with people and communities whose lives were affected by child protection and the out of home care system so their voices, experience and knowledge informed the PSE and were reflected in the Report.
- Evaluations provide transparency and accountability for people involved with child protection and out of home care and for the Canberra community through the public release and discussion of the PSE findings.

2. Conduct a credible and rigorous evaluation

- Government decision-making, including future policy development and the commissioning of services, is informed by evidence such as the PSE Report.
- The evaluation was largely conducted using internal capability with an independent assessor engaged to verify the integrity of the quantitative data analysis and findings.

3. Build a better child protection and out of home care system

- The further maturing of the child protection and out of home care system was in keeping with the aspirations of the Strategy and assisted by evidence.
- Promoting evaluative thinking and capability building during the development and implementation of the evaluation benefits the Directorate and our partner organisations.
- Shared governance of the evaluation process benefited the Directorate and partner organisations.

Source: CSD internal document: *Post-Strategy Evaluation Plan* endorsed 8 July 2020

3. Overview of the ACT out of home care system

This section presents quantitative data to illustrate several sustained trends since the introduction of the Strategy. This provides context for the specific outcomes data presented in the following Sections. Trends illustrated here are:

- Growth in the estimated population of children and young people in the ACT from 86,000 to 96,000.
- An increase in the number of Child Concern Reports made and the number of children and young people subject to Child Concern Reports.
- A decrease in the number of children and young people who entered out of home care.
- An increase in the average time children and young people spent in continuous out of home care.
- A decrease in the number of children and young people who exited out of home care.
- A decrease in the number of children under the age of 10 years old who entered out of home care.
- An increase in the number of children and young people over 10 years old young people who were living in out of home care.
- Stability in the types of out of home care placements children and young people were living in.

Aboriginal and Torres Strait Islander children and young people continued to be over-represented in out of home care in the ACT. The estimated population of Aboriginal and Torres Strait Islander children and young people aged zero to 17 years old living in the ACT on 30 June 2020 was 2,900 (3% of all children and young people living in the ACT). However, 30% of all children and young people living in out of home care on 30 June 2020 were Aboriginal and Torres Strait Islander, as were 28% of children and young people entering an out of home care placement in 2019–20.

The Directorate has committed to a continued focus on addressing Aboriginal and Torres Strait Islander over-representation in the child protection and out of home care systems.

Detailed data for Aboriginal and Torres Strait Islander children, young people and their families are presented in Section 4. The data presented in Section 4 relate to the PSE Headline Indicators and to related recommendations arising from the *Our Booris, Our Way* Review. The way in which the data are presented was informed by engagement with the Aboriginal and Torres Strait Islander Co-design Network (Co-Design Network).

Box 2: Young people living in out of home care Data Considerations

Young people with an experience of living in out of home care were asked to comment on the data and graphs in the PSE Stage 1 Report during a Youth Advisory Group (YAG) meeting convened by the CREATE Foundation in December 2020. Some of the things the young people wanted to convey to readers of the PSE Stage 1 Report were:

- The lives of children and young people are way more dynamic than can be shown in a graph. For example, data on placement changes does not capture the ‘changes in your relationships with people when you move out and back again, like your relationships with friends, your carers, your social workers, teachers and even your doctors’. Placement changes can also be ‘ok if you are with someone who has got your back’ during these changes.
- The data does not have information about how young people feel or what they are going through. Children and young people need services which can contribute to good mental health, help with substance use, and provide connection when they are feeling lonely or isolated. This support needs to continue as young people transition to adulthood, to have life outcomes comparable to their peers.

The YAG recommended:

- a longitudinal study of the experiences of children and young people in out of home care, through to adulthood
- an Index of Relationship Stability which captures co-living and communication with siblings, relationships with parents, their network of friends and supporters, the number of schools, case workers, carers and placement moves
- more frequent updates of the data to reflect the changes that happen in young people’s lives and the use of stories to help with telling a more complete picture.

The Directorate would like to thank all the young people who took part in the YAG for their interest and insights and did consider their recommendations as part of the next stage of the Strategy.

Preliminary planning for Stage 2 of the PSE identified the requirement to include additional quantitative data on children and young people exiting out of home care in the ACT, and qualitative research to understand how children and young people living in out of home care in the ACT experience stability in living arrangements, relationships and support to transition into adulthood.

Box 3: Carer Wellbeing Sub-Committee Data Considerations

The Carer Wellbeing Sub-Committee is part of the governance of *A Step Up for Our Kids* and members include kinship carers and foster carers. Over 2 meetings in December 2020 and February 2021, members discussed preliminary findings from the PSE and they noted:

- the findings illustrated the importance of providing support for children and young people from the moment they enter out of home care, and to provide support to their carers as well
- parents also need support, mental health services and drug and alcohol services
- the interplay of issues such as behaviour complexity, education and supports with carer wellbeing
- stability is fundamental for children and young people in out of home care

- the need for further policy discussion about restoration decisions when a child or young person is in a long-term placement
- the scope to keep working on trauma-informed strategies in school settings and to consider the intersections with disability for some of these children and young people
- the scope to also consider system approaches in addition to individualised supports for students.

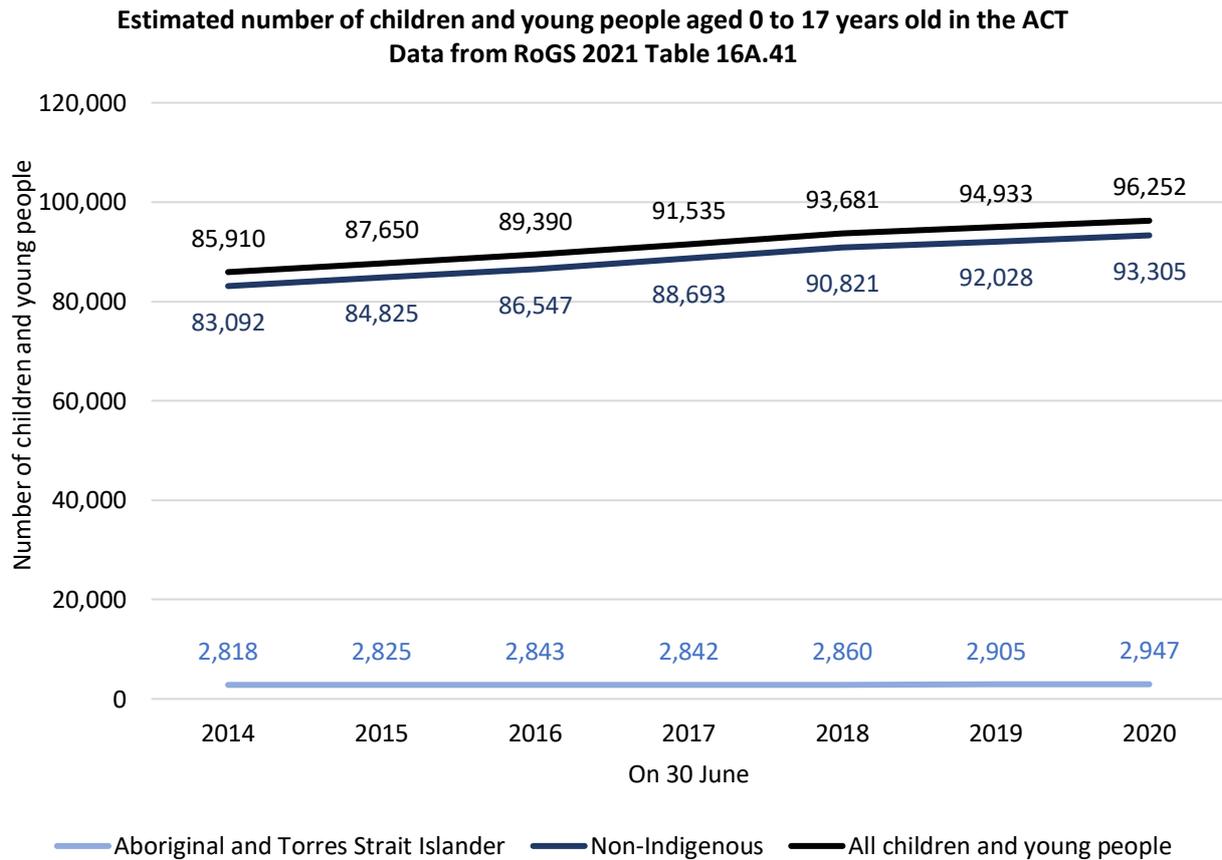
The Directorate would like to thank the members of the Carer Wellbeing Sub-Committee and note their recommendations were considered as part of the next stage of the Strategy.

Demand (Intake) in the ACT care and protection system

Population growth in the ACT

The estimated population of children and young people aged zero to 17 years old in the ACT grew at approximately 2% per year; from 86,000 in 2014 to 96,000 in 2020⁸ (Figure 1). Three per cent of children and young people in the ACT are estimated to be Aboriginal and Torres Strait Islander. Population numbers for 2017 onwards are estimates, based on the 2016 *Census of Population and Housing and Estimated Resident Population*, undertaken by the Australian Bureau of Statistics.

Figure 1. Estimated population of children and young people living in the ACT.

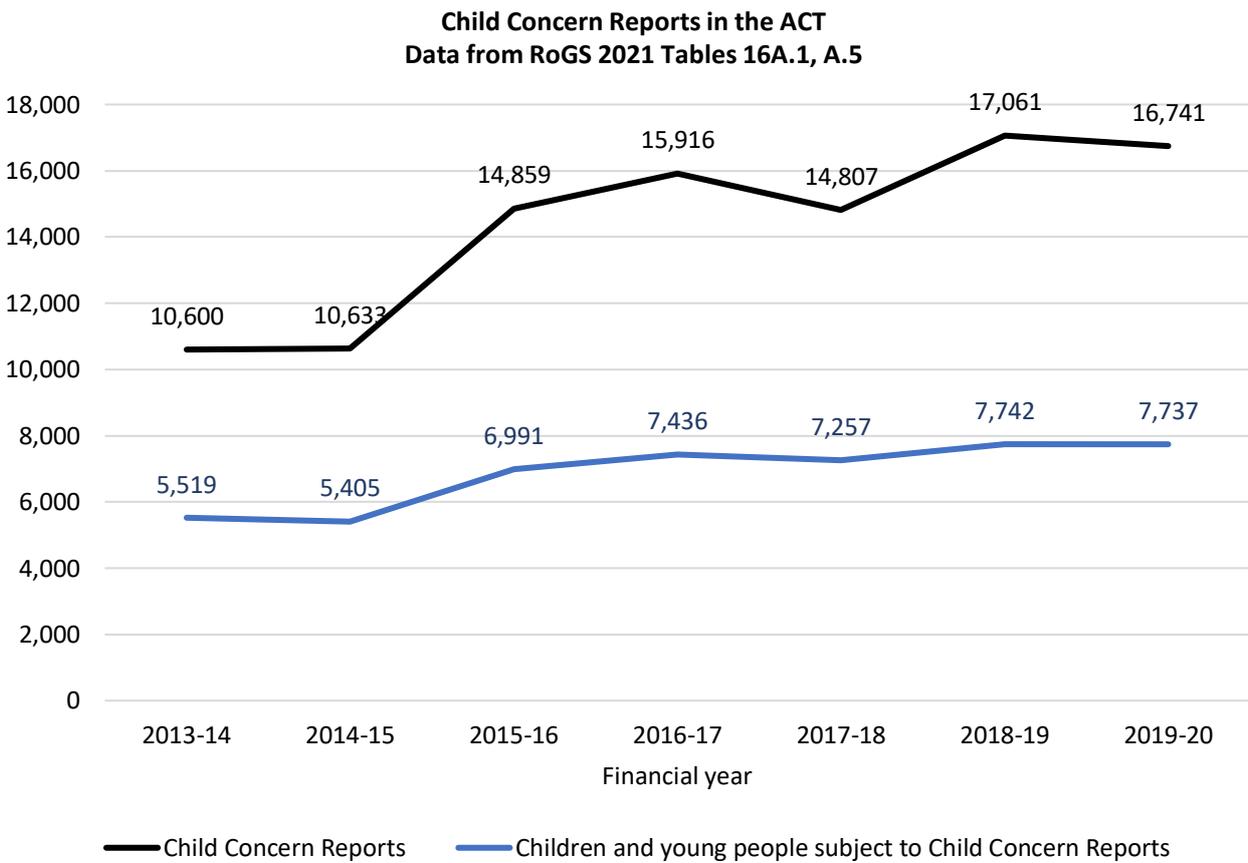


⁸ Report on Government Services (RoGS) 2021, Chapter 16: Child Protection Services.

Child Concern Reports in the ACT

The number of Child Concern Reports made in the ACT increased from 10,600 reports made in respect of 5,519 children and young people in 2013–14 to 16,741 reports made in respect of 7,737 children and young people in 2019–20 (Figure 2). Although the number of Child Concern Reports made increased over time, the number of Appraisals (child protection investigations) conducted, and the number of substantiations of children experiencing significant harm decreased since 2016–17. In 2019–20, 1,886 Child Concern Reports (11%) led to an Appraisal and 89% were resolved via other means, such as referral to services. Of all Appraisals that were finalised by 31 August 2020, 19% resulted in a substantiation, a decrease from 28% in 2016–17.⁹

Figure 2. Child Concern Reports in the ACT.



⁹ Report on Government Services (RoGS) 2021, Chapter 16: Child Protection Services.

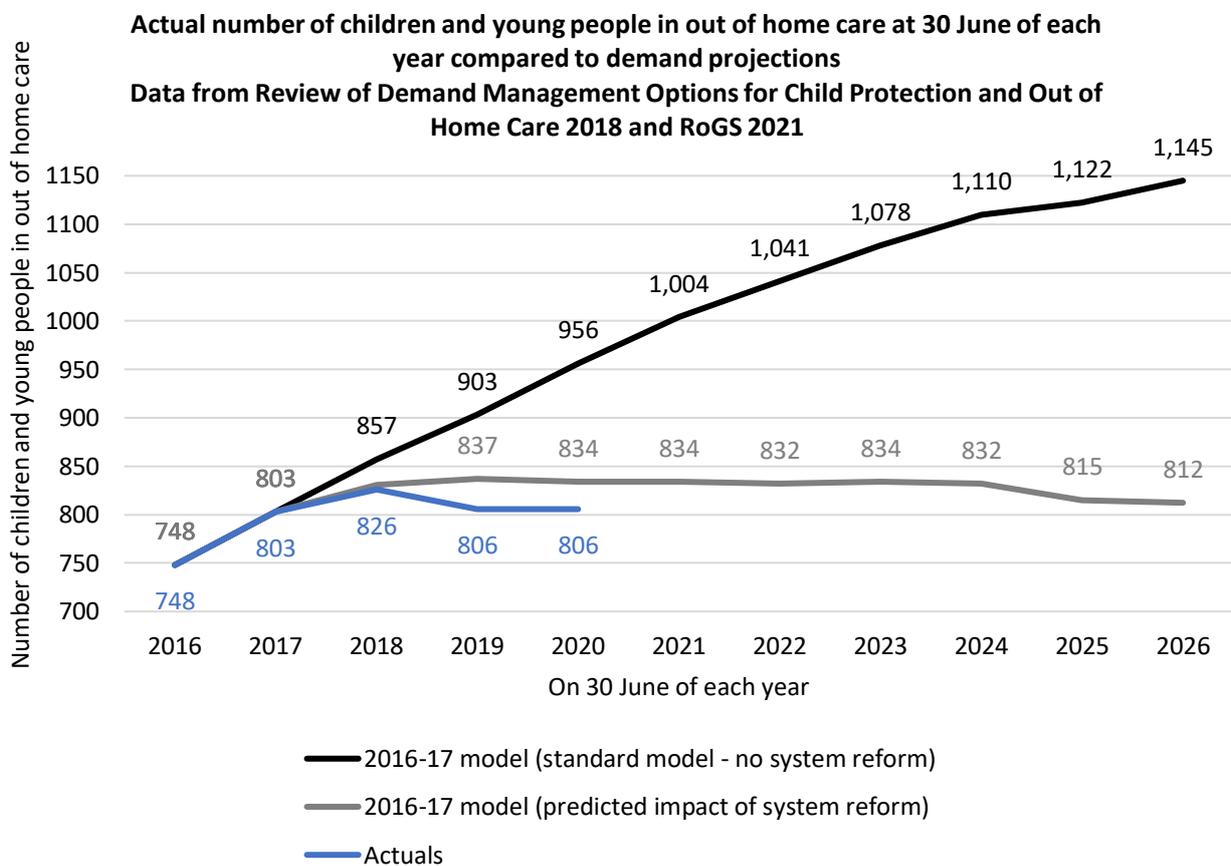
Trends in the ACT out of home care system

Number of children and young people living in out of home care in the ACT

Prior to implementation of the Strategy, the number of children and young people living in out of home care in the ACT had been increasing steadily. Initial demand modelling showed that, without the introduction of system reforms, this trend would continue (Figure 3). In 2018, the potential impacts of the reforms being implemented under the Strategy were modelled.

This modelling predicted a stabilisation in the number of children and young people who were living in out of home care in 2019 or 2020. The prediction has proven to be reasonably accurate, with the number of children and young people living in out of home care decreasing in 2018–19 and 2019–20, being 806 on 30 June 2020.

Figure 3. Number of children and young people living in out of home care in the ACT against demand modelling projections

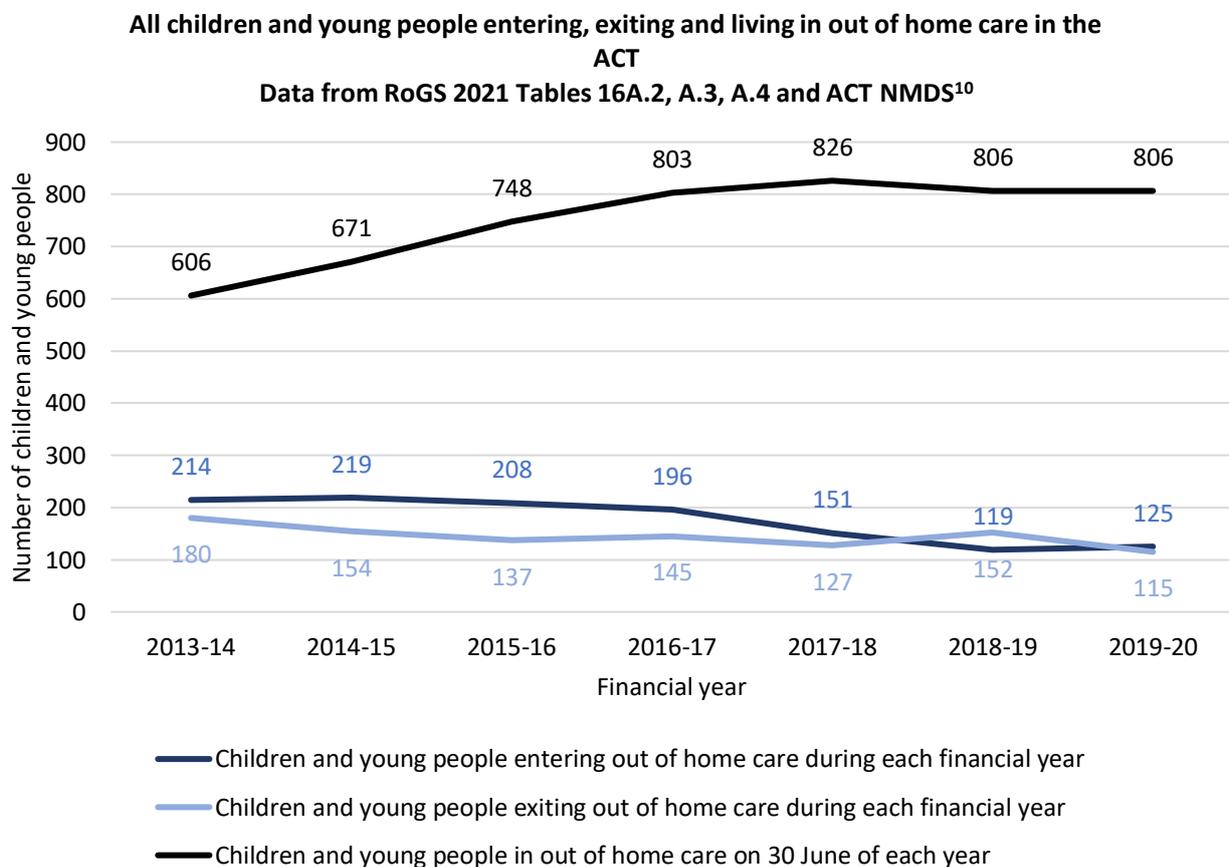


Number of children and young people entering and exiting out of home care

The number of children and young people who entered out of home care in the ACT steadily decreased since 2013–14 (Figure 4) (refer to Indicator 1.1, pgs.52, 88). A coincident trend for children and young people spending longer periods in out of home care (Figure 5), and no increase in the number of children and young people exiting out of home care (refer to Indicator 2.1, pgs.61, 88), mean the total number of children and young people living in out of home care in the ACT is predicted to decrease very gradually over time.

For each financial year, children and young people are counted as ‘entering out of home care’ when they enter a CYPs-approved kinship care, foster care or residential care placement. Each child or young person is counted once, regardless of how many times they enter an out of home care placement during that financial year. If a child or young person leaves out of home care and then returns within 60 days, this is not counted as a new entry.

Figure 4. Children and young people entering, exiting and living in out of home care in the ACT

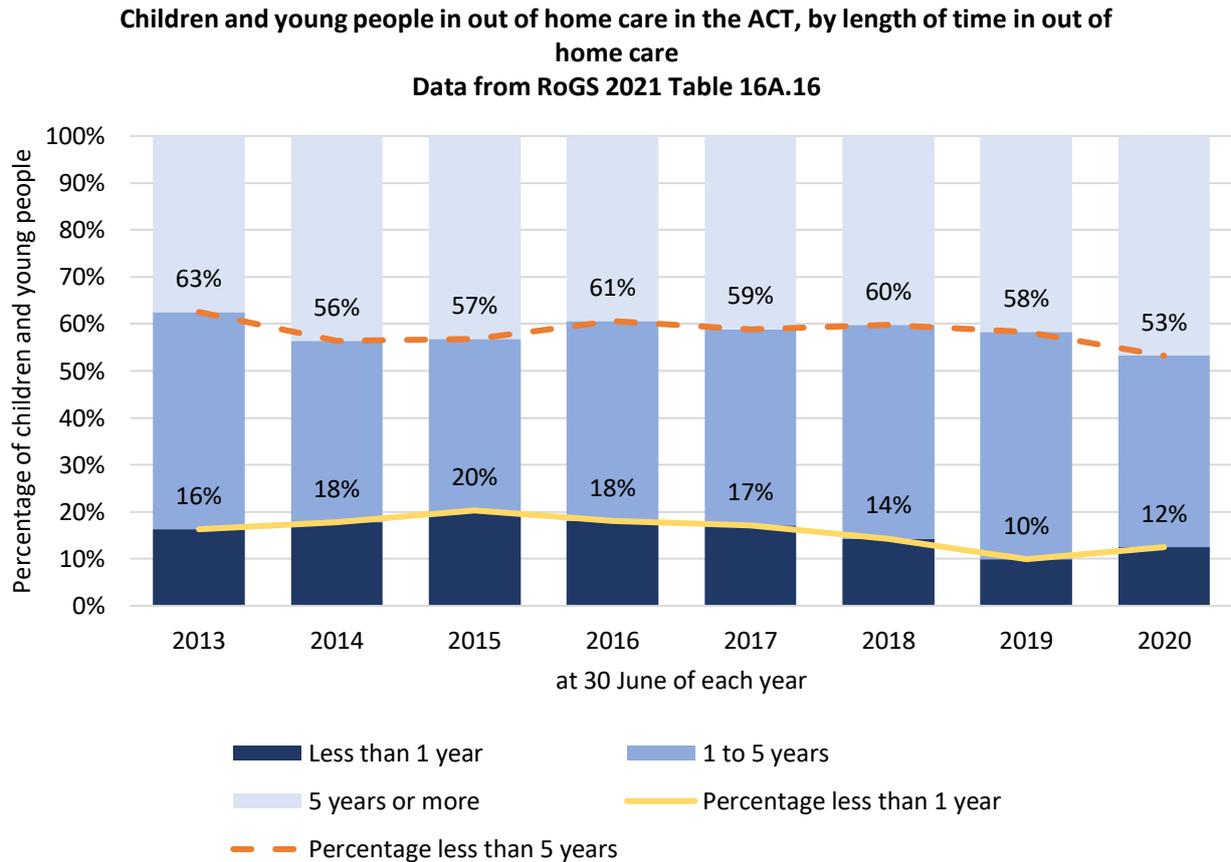


¹⁰ National Minimum Data Sets

Length of time in out of home care

The average length of time children and young people spend in a continuous episode of out of home care in the ACT has been increasing. Since 2015, there was a steady decrease in the percentage of children and young people spending less than one year in out of home care and a corresponding increase in the percentage spending longer periods of time. Of all children and young people who were living in out of home care on 30 June 2020, 12% had spent less than one year in continuous out of home care and 53% had spent less than 5 years in continuous out of home care (Figure 5).

Figure 5. Children and young people in out of home care in the ACT, by length of time spent in out of home care



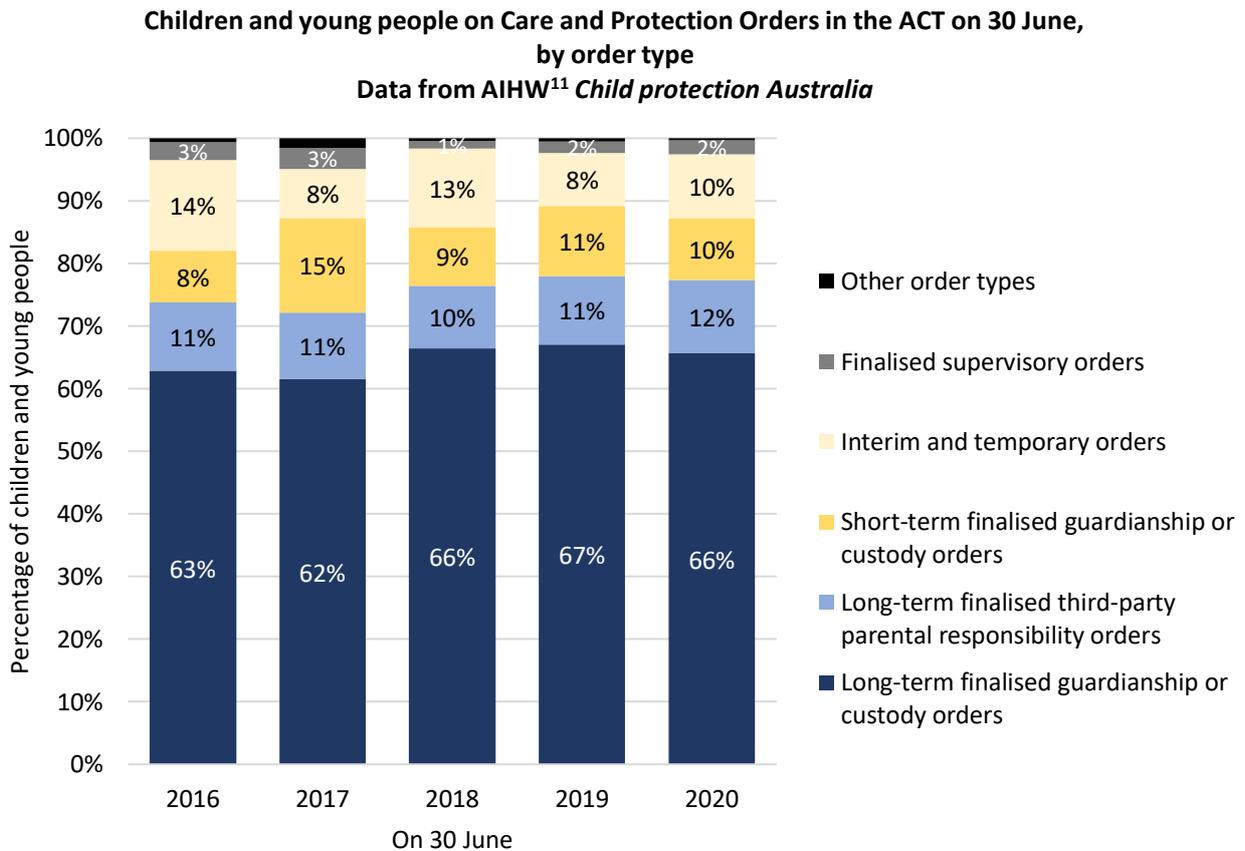
Note data for 2019–20 are not completely comparable to prior years due to a changed national definition of out of home care (refer to Appendix C for a detailed explanation of the definition change).

Children and young people on Care and Protection Orders in the ACT

On 30 June 2020, approximately 80% of children and young people living in out of home care in the ACT were on long-term, finalised Care and Protection Orders (typically to 18 years old) which includes 12% on EPR Orders. Ten per cent of children and young people on Care and Protection Orders in the ACT were on short-term finalised Care and Protection Orders (up to 2 years in duration) and 10% were on interim or temporary Care and Protection Orders (Figure 6).

See Appendix D for explanation and definition of the different types of Care and Protection Orders used in the ACT.

Figure 6. Children and young people on Care and Protection Orders in the ACT on 30 June of each year, by order type



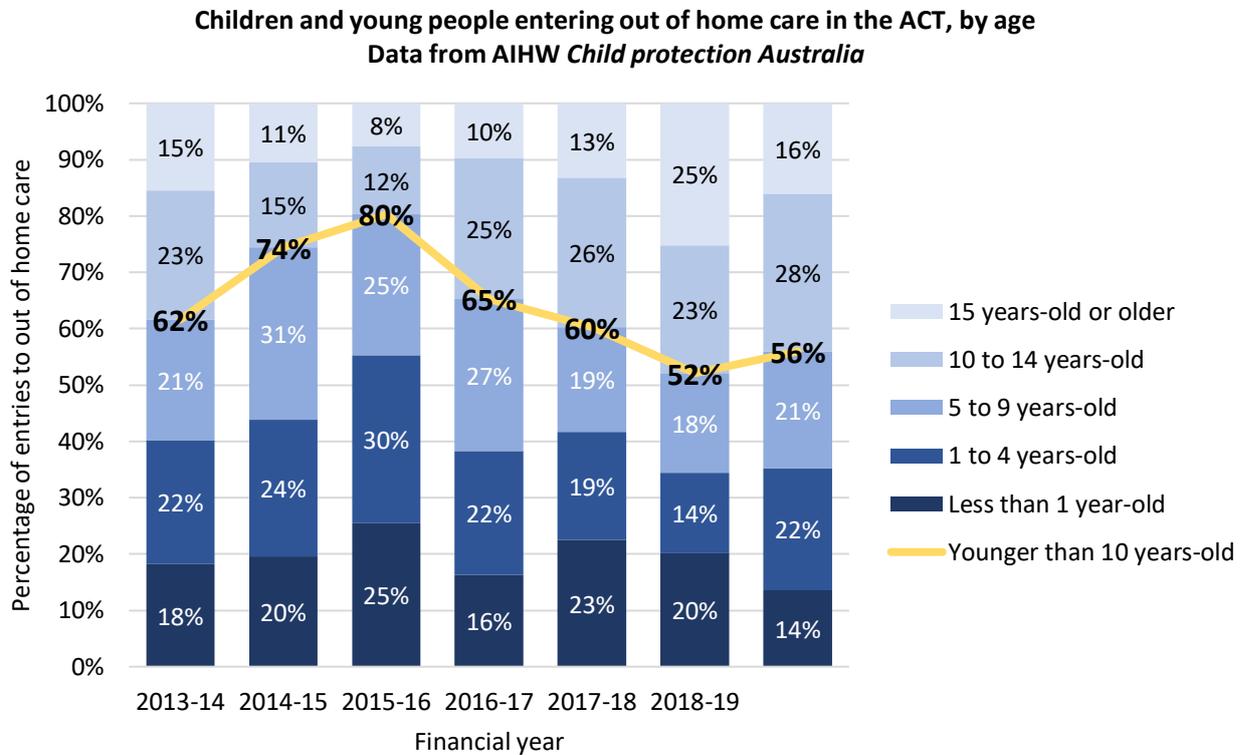
‘Other order types’ include Voluntary Care Agreements, pre-adoption and supported adoption placements and children and young people on immigration orders (unaccompanied minors).

¹¹ Australian Institute of Health and Welfare

Age of children and young people entering and living in out of home care in the ACT

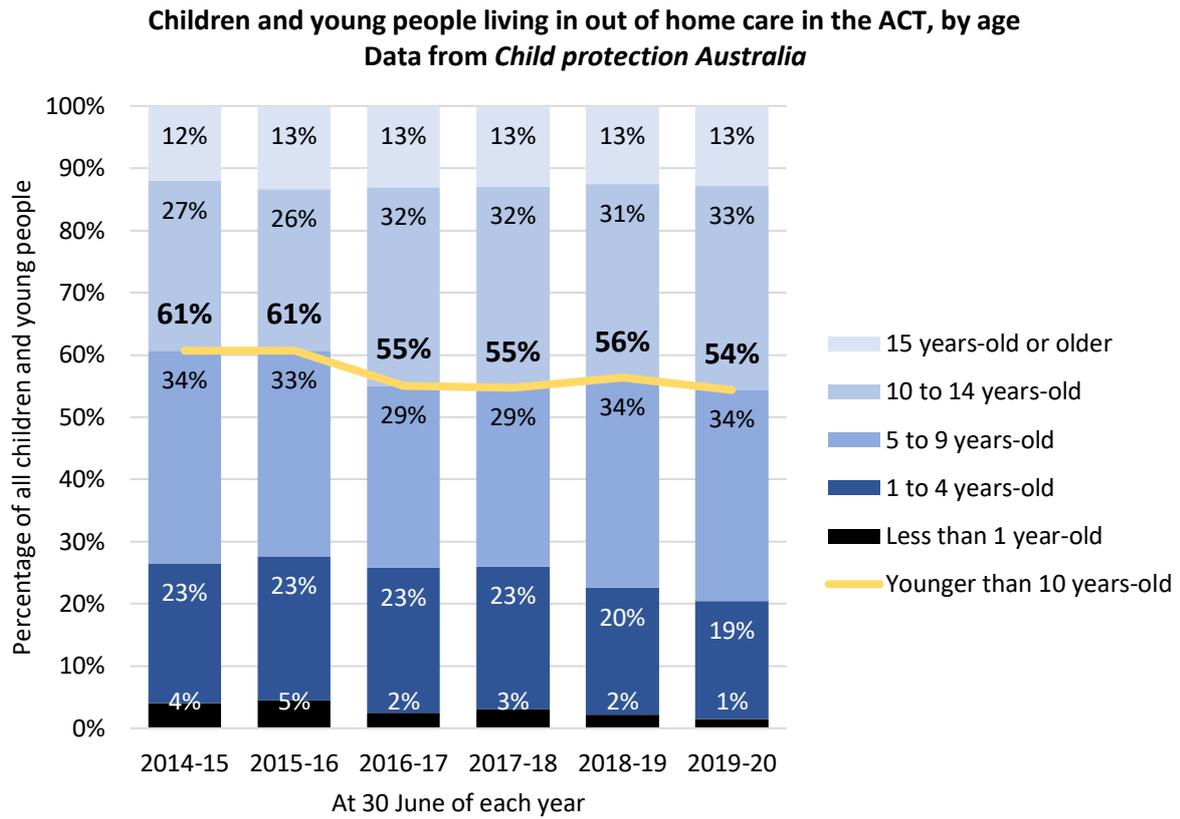
Since 2016–17, the age profile of children and young people entering out of home and living in out of home care in the ACT changed, with a decreasing number and proportion being younger than 10 years old (Figure 7).

Figure 7. Children and young people entering out of home care in the ACT, by age



Data from Australian Institute of Health and Welfare (AIHW) *Child protection Australia* Tables A31 (2013–14, 2014–15), S33 (2015–16), S34 (2016–17, 2017–18), S5.1 (2018–19, 2019–20).

Figure 8. Children and young people living in out of home care in the ACT, by age.



Data from AIHW *Child protection Australia* Tables A34 (2014–15), S37 (2015–16), S38 (2016–17, 2017–18), S5.5 (2018–19, 2019–20).

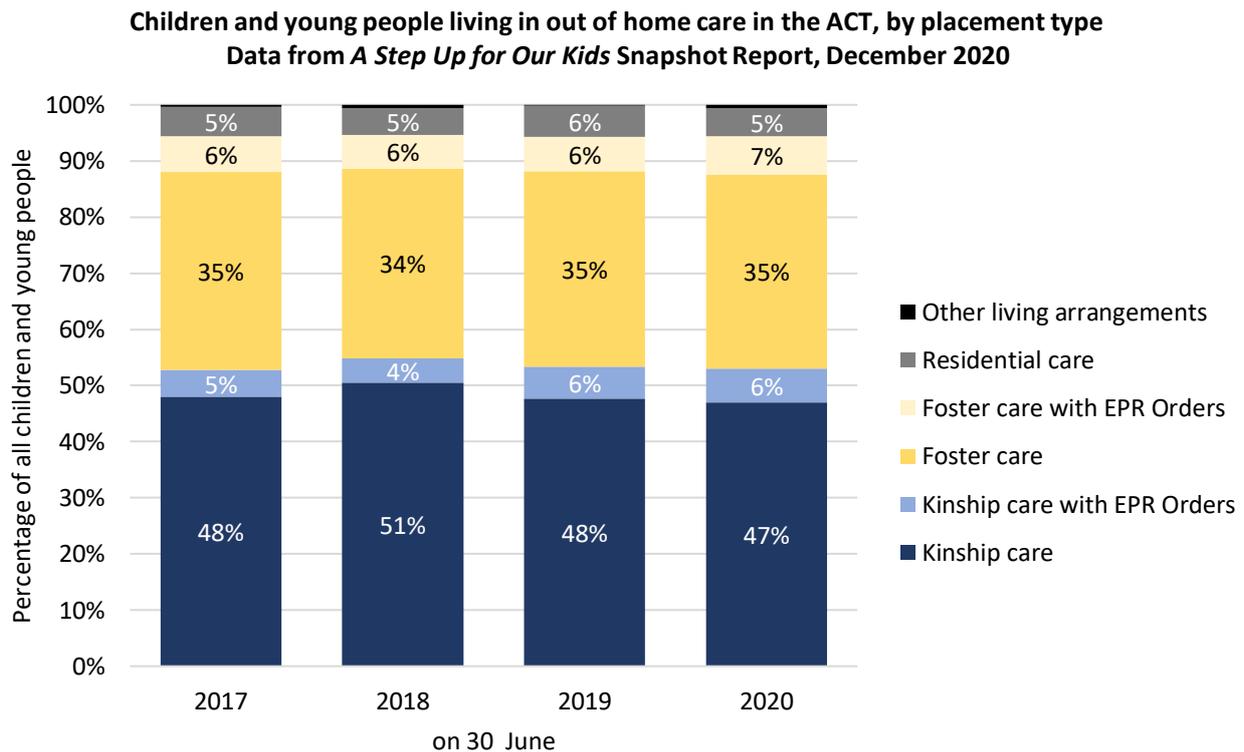
Data from 2018–19 is not directly comparable to prior years due to a changed national definition of out of home care applied from 2018–19 onwards (refer to Appendix D).

Children and young people living in out of home care in the ACT, by placement type

The distribution of children and young people living in out of home care in the ACT across different types of placements remained similar; with approximately half of all children and young people living in out of home care living in a kinship care placement, approximately 45% living in a foster care placement, approximately 5% living in residential care, and less than 1% living in other types of living arrangements (Figure 9).

See Appendix D for explanation and definition of the different types out of home care placements used in the ACT.

Figure 9. Placement types for children and young people living in out of home care in the ACT on 30 June of each year



4. Aboriginal and Torres Strait Islander children and young people

In developing Stage 1 of the PSE, the Directorate would like to acknowledge and extend appreciation to the Co-Design Network, ACT Aboriginal and Torres Strait Islander Elected Body and the *Our Booris, Our Way* Implementation Oversight Committee for their early engagement on building data capability and reviewing the data contained in the Report. Stage 2 will continue to build on this engagement to inform the data that is collected and how it is used (Refer to Section 9 – *Continuous data improvement*). This approach is also aligned to the work being undertaken by the Directorate with the *Our Booris, Our Way* Implementation Oversight Committee on the development of a data dashboard to build data capacity and capability, strengthen accountability and reporting mechanisms and increase the use of data sovereignty practice.

The forcible removal of First Nations children from their families had a profound impact still being experienced today. It has led to many First Nations people suffering a loss of identity and culture, and families living with intergenerational trauma in a cycle of abuse and violence. The first time this was brought to the Australian and international public's attention was in 1997 with the release of [*Bringing Them Home*](#), the final Australian report of the *National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*.

'This report marked a pivotal time in Australian history: it provided the opportunity for those children and young people who were forcibly removed from their families - now known as the Stolen Generations - to put their stories on the public record; it was the first time it was formally reported what governments did to those Aboriginal and Torres Strait Islander children, young people and families was inhumane and the impact has been lifelong; it led to the Apology; and it foreshadowed a greater focus on social and emotional wellbeing in Aboriginal and Torres Strait Islander communities' (Aboriginal and Torres Strait Islander Healing Foundation, *Bringing Them Home: 20 years on: an action plan for healing* (2017)).

A Step Up for Our Kids acknowledges the impact on Aboriginal and Torres Strait Islander families of intergenerational trauma arising from the history of colonisation and dispossession. Reducing the over-representation of Aboriginal and Torres Strait Islander children and young people in out of home care was one of the compelling reasons for introducing the Strategy and remains a priority. It has to be acknowledged the Strategy, at times, slowed the entry of Aboriginal and Torres Strait Islander children entering care but did not reduce over-representation overall since its introduction in 2015. Since its release there have been a range of reviews and reforms that have informed policy and practice changes. A key review has been the *Our Booris, Our Way* Review and the [*Our Booris, Our Way Final Report*](#) which comprised 28 recommendations and 8 sub-recommendations (a total of 36 recommendations). Recommendations included the establishment of an Aboriginal Child Care Association and the implementation of practice and policy changes.

Due to its importance, this section concentrated on the data holdings and trends specific to Aboriginal and Torres Strait Islander children and young people over the life of the Strategy. The Directorate sought advice and leadership on what works directly from the Aboriginal and Torres Strait Islander community. The advice was in alignment with the intent of the *ACT Aboriginal and Torres Strait Islander Agreement 2019–2028*. More specifically the core focus area *Children and Young People* and the priority focus of 'taking every opportunity to maintain children and young people with family' and 'fostering connection to a safe and strong community'.

The PSE Plan committed to:

- creating opportunities for the Aboriginal and Torres Strait Islander community to speak to their own experience of the out of home care system
- contextualising data within narrative from Aboriginal and Torres Strait Islander community, the *Our Booris, Our Way Review*, *The Family Matters Report 2020* and the *Aboriginal and Torres Strait Islander Child Placement Principle* (ATSICPP).

In recognition of this commitment, it is acknowledged that future evaluative work will be focussed on the development of shared principles to support First Nations Data Sovereignty and Governance (also known as Indigenous Data Sovereignty and Data Governance), as articulated in the bodies of work by Kowa Collaboration (Kowa)¹², Maiam nayri Wingara Aboriginal and Torres Strait Islander Data Sovereignty Collective (Maiam nayri Wingara) and the Australian Institute of Aboriginal and Torres Strait Islander Studies (AIATSIS) Code of Ethics for Aboriginal and Torres Strait Islander Research. More specifically, how the Directorate works with the Aboriginal and Torres Strait Islander community with regards to implementing data sovereignty and governance.

While the implementation of First Nations Data Sovereignty and Governance principles within the ACT is in its early stages, it is essential that the information provided in this Report reflects the intent in which the information was given and shared, and that its interpretation and the context it is placed in is appropriate.

The Directorate will continue to seek opportunities to engage with the Aboriginal and Torres Strait Islander leadership groups across the ACT to build on the data collected and the narrative around lived experience and what Aboriginal and Torres Strait Islander children, young people, families and community need to support them. In reflecting the voice of lived experience, early engagement was undertaken and will continue with the following groups:

- *Our Booris, Our Way* Implementation Oversight Committee which was established to monitor implementation of the recommendations from the *Our Booris, Our Way Review* and provide a cultural lens to guide systemic reform. The recommendations in the report seek systemic change to child protection and out of home care to safely reduce the number of Aboriginal and Torres Strait Islander children and young people entering care; improve their experience and outcomes while in care; and where appropriate, exit from care.
- ACT Aboriginal and Torres Strait Islander Elected Body which was established so Aboriginal and Torres Strait Islander people in the ACT have a strong democratically elected voice. Engagement with the Elected Body on the findings from the PSE is aligned to the obligations under the *Aboriginal and Torres Strait Islander Elected Body Act 2008*. More specifically that the Elected Body investigate the development and delivery of ACT Government policies and programs in order to best recommend policy direction on all matters affecting the wellbeing of the Aboriginal and Torres Strait Islander community of the ACT with a vision that '*all Aboriginal and Torres Strait Islander people living in the ACT are fully engaged in shaping and creating their future wellbeing*'. The Co-Design Network which brings together Aboriginal and Torres Strait Islander community members with lived experience of the human services system in the ACT region and works in partnership with the Directorate to share their experience and knowledge to inform service, practice and policy changes with the initial focus on driving change to keep Aboriginal and Torres

¹² Kowa Collaboration was engaged as an independent cultural consultant in the external validation of this report.

Strait Islander families safe and out of the child protection system. The Co-Design Network has been an important way to engage community which has seen the relationship between government and people with lived experience grow in terms of understanding policies and practices. The Co-Design Network reported:

- *“We provide advice and real case studies, real experiences to child protection, not just about the kids in care, also about the carers and community and the broader experiences, highlights the system errors. We have ideas and recommendations on how it can be fixed, realistic and achievable ideas”.*
- *“I would like to see us take care of our own business, the more we have had our meetings (Co-Design Network meetings) the more positive I feel about the process. This process helps to lead and contribute to Aboriginal people to handle their own affairs”.*
- *“I have more confidence that it is going to go further. There is follow up. We hear what they have done with it – it is reassuring – instils that confidence for us”.*
- *“We do not take on our families’ children because we are paid to. We take them on because we love them and it is our cultural way”.*

The period of the Strategy also saw the emergence and consolidation of family and community-led solutions to respond to over-representation, in particular:

- Family Group Conferencing (FGC)—A program offered through CYPS and delivered in partnership with Curijo (majority Aboriginal owned and managed organisation) to families as both a preventative and restorative service. This program works with and supports families to identify the most appropriate kinship options to ensure children and young people remain connected to family and community, their needs are met, and they are kept safe. FGC is a process where the heart of the decision-making lies with the family.
- Family Functional Therapy (FFT) Child Welfare—A partnership between Gugan Gulwan and OzChild. The program uses family-based therapy that can be adapted according to Aboriginal and Torres Strait Islander culture for families with children and young people aged from zero to-17 years who are at risk of entering the out of home care system. The program aims to strengthen families, prevent the removal of a child or young person, as well as support reunification of a child or young person from out of home care. It has the following services available:
 - a. FFT – Child Welfare—Supports children and young people aged birth to 17 and their families who face vulnerabilities. The aim is to keep children and young people in their existing homes or foster care placements. The first objective is engagement and motivation, the second is to change the problem behaviour, and the third is to generalise change.
 - b. FFT – Continuum of Care—ACT Together expanded the range of responses available to support children and young people. OzChild as a member of the ACT Together consortium deliver the FFT program for 55 families. Most referrals are made by ACT Together with a focus on where placement stability is a concern or where restoration to family is the goal.

The Aboriginal and Torres Strait Islander Child Placement Principle

The following excerpt has been taken from the [Working with Aboriginal land Torres Strait Islander families: Providing culturally responsive practice, September 2019](#) and provides an outline of how the Aboriginal and Torres Strait Islander Child Placement Principle (ATSICPP) is applied within CYPS.

Box 4: The Aboriginal and Torres Strait Islander Child Placement Principle

The ATSICPP recognises the importance of connections to family, community, culture and country in child and family welfare legislation, policy and practice, and asserts self-determining communities are central to supporting and maintaining those connections.

The ATSICPP aims to:

- ensure an understanding that culture underpins and is integral to safety and wellbeing for Aboriginal and Torres Strait Islander children and is embedded in policy and practice
- recognise and protect the rights of Aboriginal and Torres Strait Islander children, family members and communities in child welfare matters
- increase the level of self-determination of Aboriginal and Torres Strait Islander people in child welfare matters
- reduce the over-representation of Aboriginal and Torres Strait Islander children in child protection and out of home care systems.

Adoption of the ATSICPP in legislation, policy and practice across Australia's states and territories has been recognised as 'the single most significant change affecting welfare practice since the 1970s' (Human Rights and Equal Opportunity Commission, *Bringing Them Home Report* (1997)). The ATSICPP was established in 1984, as a result of years of activism by Aboriginal and Torres Strait Islander people, Aboriginal Community Controlled Organisations and others. Their focus is to address the growing disproportionate rate of Aboriginal and Torres Strait Islander children being adopted by or placed in care with non-Indigenous carers, and to prevent past practices from continuing or being repeated.

The ATSICPP is not simply about where or with whom a child lives if placed in care. The history and intention of the ATSICPP is about keeping Aboriginal and Torres Strait Islander children connected to their family, community, culture and country. The ATSICPP includes five inter-related elements, being:

- Prevention
- Partnership
- Placement
- Participation
- Connection.

These five 'core' elements combine to create the overarching element of Identification. Each element is described below.

PREVENTION

The Prevention element acknowledges each Aboriginal and Torres Strait Islander has the right to be brought up within their own family and community. Aboriginal and Torres Strait Islander children's sense of identity is preserved and enhanced when raised within their family, kinship group, community and culture. This element recognises the concept of 'family' within Aboriginal and Torres Strait Islander culture is broadly defined, extending beyond the immediate family and embracing a more collective approach to child-rearing.

PARTNERSHIP

The Partnership element acknowledges the participation of Aboriginal and Torres Strait Islander community representatives, external to the statutory child protection system, is required in all child protection decision-making—including intake, assessment, intervention and placement and care, as well as judicial decision-making processes. The participation of community controlled and led organisations recognises the best interests of an Aboriginal or Torres Strait Islander child are met by drawing on the experience and knowledge held only by family and community. It promotes the building of trusting relationships with the family and improves communication between the family and the statutory system.

PLACEMENT

The Placement element acknowledges that where the separation or removal of an Aboriginal or Torres Strait Islander child from their family is unavoidable (a decision requiring participation of community representatives), the child's continuing connection to their family, community, culture, country and identity development is the priority, as is limiting any disruption for the child. Further, placement of an Aboriginal or Torres Strait Islander child in care must be prioritised in the following way:

1. with Aboriginal or Torres Strait Islander relatives or extended family members, or other non-Indigenous relatives or extended family members
2. with Aboriginal or Torres Strait Islander members of the child's community
3. with Aboriginal or Torres Strait Islander family-based carers
4. with a non-Indigenous carer or in a residential setting—only if the preferred options above (1 to 3) are not available.

If a child is not placed with their extended Aboriginal or Torres Strait Islander family, they must be cared for within close geographic proximity to their family.

The above priority order applies to all care placement types—respite, emergency, short and long-term.

PARTICIPATION

The Participation element acknowledges Aboriginal and Torres Strait Islander children, parents and family members are entitled to participate in all child protection decisions affecting them regarding intervention, placement and care, as well as judicial decisions. Involving family members reflects their important role in child-rearing practices generally and increases the likelihood and mechanisms for identifying supports and options to address any care and protection issues. This is also a matter of natural justice, where in the administration of law, a fair process is one that affords those affected by it an opportunity to participate in the making of related decisions.

CONNECTION

The Connection element acknowledges Aboriginal and Torres Strait Islander children in care are supported to maintain connection to their family, community, culture and country, especially children placed with non-Indigenous carers. The best way to ensure Aboriginal and Torres Strait Islander children in care today do not endure the same sense of loss of identity and dislocation from family and community as the Stolen Generations, is to actively support them to maintain or to re-establish their connection to family, community, culture and country.

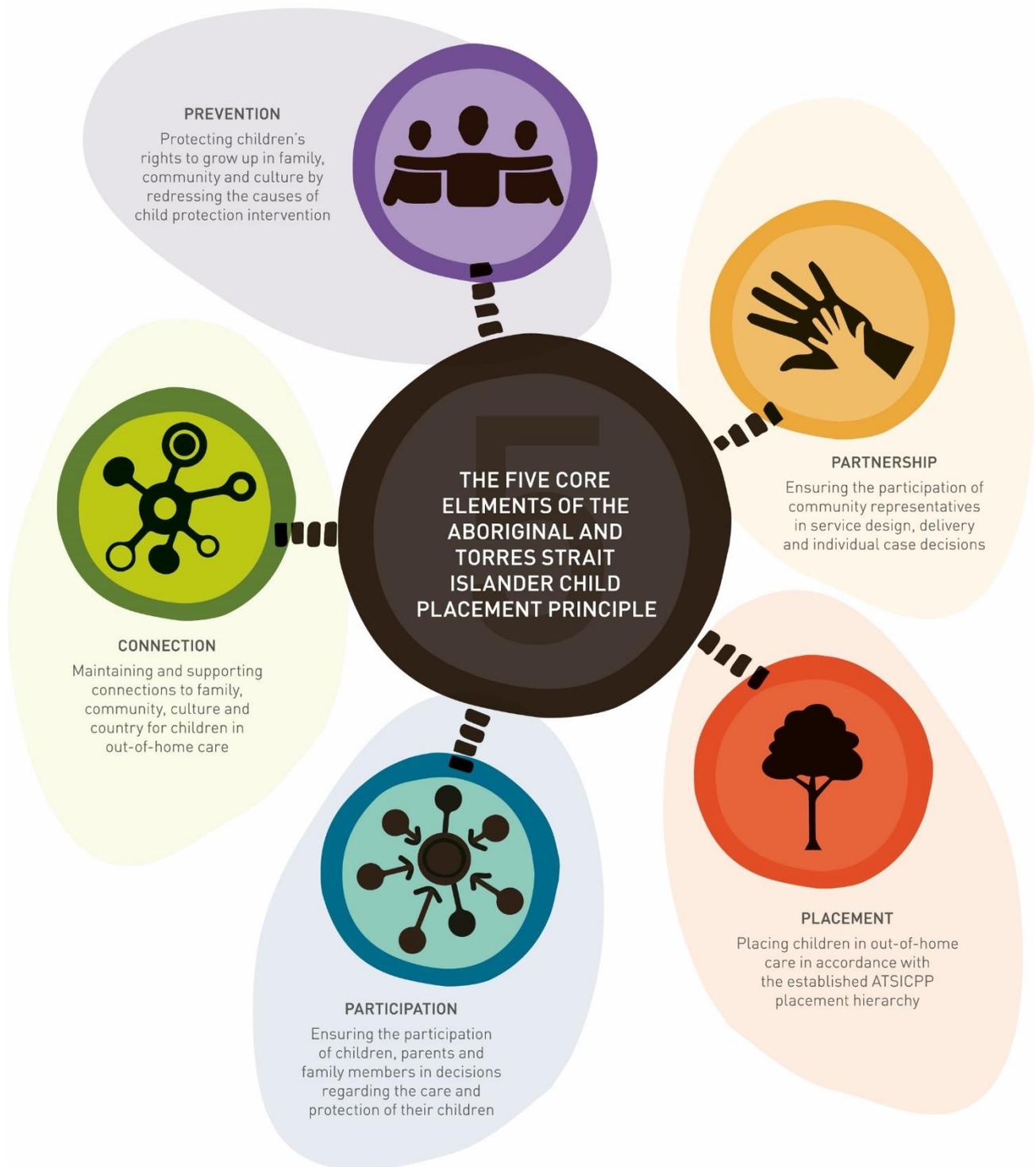
The best interests of a child are generally inextricably linked to their family and community, which means for some children, there are multiple connections to Aboriginal, Torres Strait Islander and/or non-Indigenous family and community that require ongoing attention.

IDENTIFICATION

The Identification element encompasses all 5 core elements of the ATSICPP: Prevention, Partnership, Placement, Participation and Connection. It acknowledges all children and families, including maternal and paternal extended family members, where appropriate, are asked if they are of Aboriginal and/or Torres Strait Islander background.

Without correct and early cultural identification, Aboriginal and Torres Strait Islander children are at risk of being deprived of culturally safe supports, case planning and placements. Identification seeks to enable access to culturally appropriate services in response to the specific needs of Aboriginal and Torres Strait Islander children and families.

The Five Core Elements of the Aboriginal and Torres Strait Islander Child Placement Principle



Reproduced by the ACT Government with permission from Secretariat of National Aboriginal and Islander Child Care (SNAICC)

Source: [SNAICC](#) – National Voice for our Children

Understanding and Applying the Aboriginal and Torres Strait Islander Child Placement Principle: A resource for legislation, policy and program development (2017), pg.3

Designed by: Mazart Communications

Over-representation of Aboriginal and Torres Strait Islander children and young people in the ACT child protection and out of home care system

Aboriginal and Torres Strait Islander children and young people continue to be over-represented in all aspects of the ACT child protection and out of home care system.

At 30 June 2020, the estimated population of Aboriginal and Torres Strait Islander children and young people aged zero to 17 years old living in the ACT was 2,900 (3% of all children and young people living in the ACT).

In 2019–20, in the ACT, Aboriginal and Torres Strait Islander children and young people were:

- 12% of all children and young people who were the subject of a Child Concern Report
- 22% of all children and young people who were the subject of an Appraisal
- 15% of all children and young people who were the subject of a Substantiation
- 31% of all children and young people on a Care and Protection Order on 30 June 2020
- 28% of all children and young people entering out of home care
- 30% of all children and young people living in out of home care on 30 June 2020¹³.

The number of non-Indigenous children and young people who entered out of home care in the ACT has decreased steadily since 2013–14, while the number of Aboriginal and Torres Strait Islander children and young people who entered out of home care has fluctuated (Figure 10).

In 2018–19 and 2019–20 fewer Aboriginal and Torres Strait Islander children and young people entered out of home care than in previous years. This is a highlight of the findings but needs to be tempered with the acknowledgement that much greater effort is still required.

Detailed definitions and counting rules for the number of children and young people living in out of home care are provided in Appendix D.

¹³ Report on Government Services 2021, Chapter 16 Child protection Services

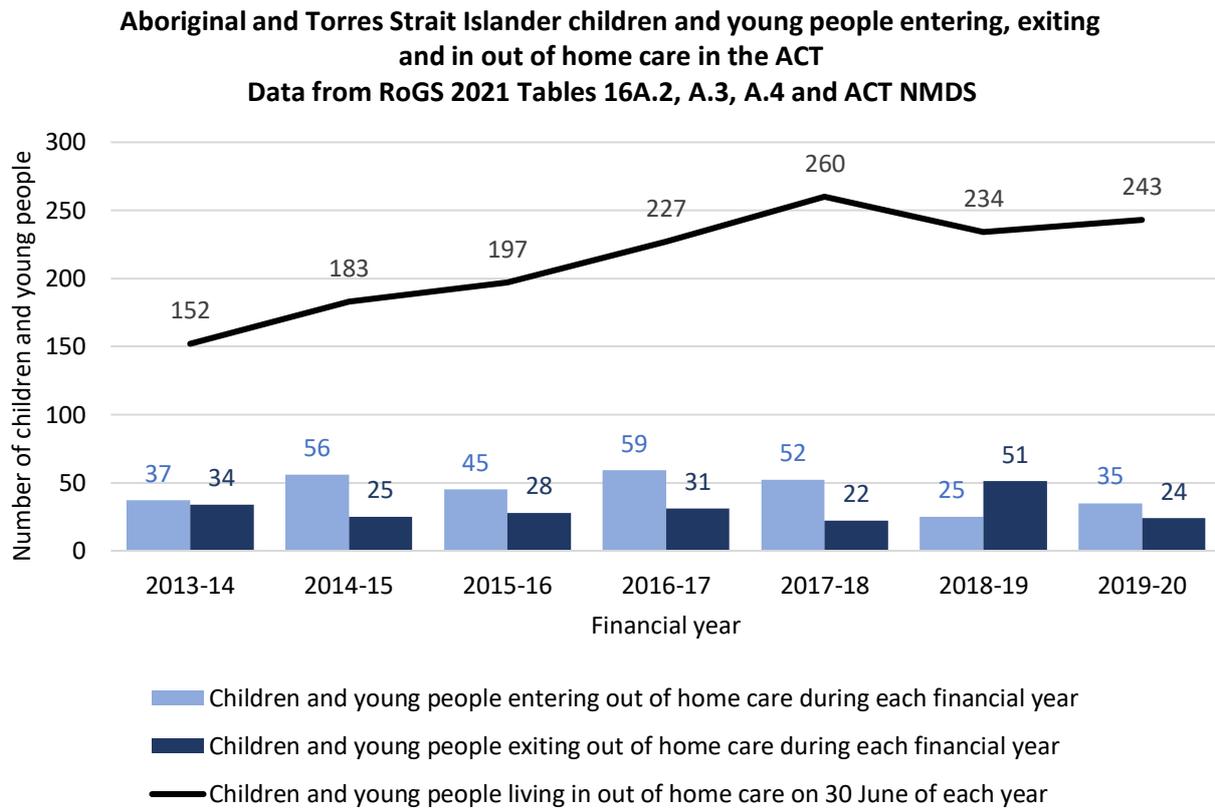
Box 5: Co-Design Network Data Considerations

The early engagement with the Co-Design Network confirmed the importance of providing a cultural context for those reading and interpreting the data contained in the Report. The Co-Design Network sought to remind readers of the following:

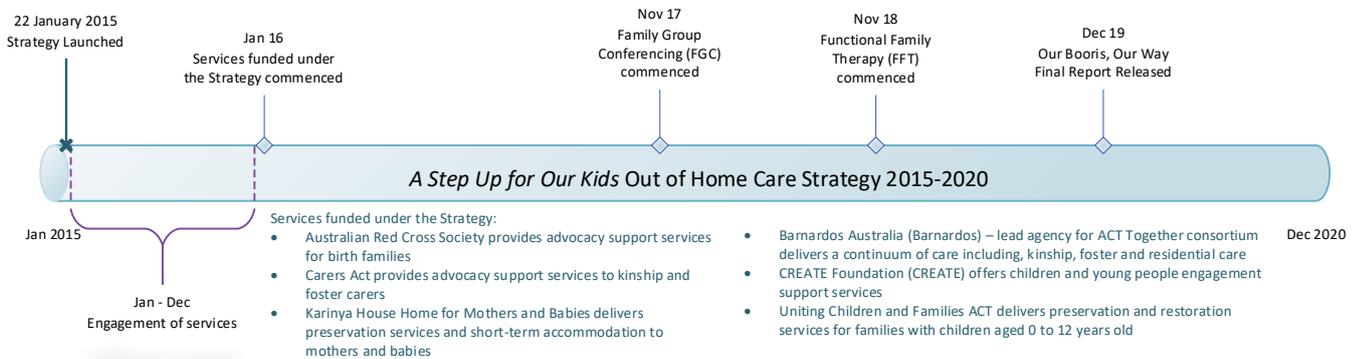
- most Aboriginal and Torres Strait Islander children are cared for in loving families, in well-connected communities
- Aboriginal and Torres Strait Islander families choose to care for their children, protect their children and they give up everything to take care of their children
- the injustice and various traumas of the continued forced removal of Aboriginal and Torres Strait Islander children from their families, communities, culture and land
- Aboriginal and Torres Strait Islander culture is resilient and strong in the face of these traumas
- Aboriginal and Torres Strait Islander culture and communities are diverse, but they are united in the love they have for, and the importance of, the children in their families
- kinship carers want to be known as grandmothers, grandfathers, aunties and uncles, godmothers or cousins because that is what and who they are
- while the data in this Report refers to placement and order types the Co-design Network would like to remind readers they are people and families first and foremost.

The services under *A Step Up for Our Kids* acknowledge the impact on Aboriginal and Torres Strait Islander families of intergenerational trauma arising from the history of colonisation and dispossession.

Figure 10. Aboriginal and Torres Strait Islander children and young people entering, exiting and living in out of home care in the ACT.



The timeline below provides an outline of when new services for Aboriginal and Torres Strait Islander children, young people and their families were implemented to further support the intent of the Strategy.



Data from RoGS 2021 Table 16A.2, A.3 and A.4. and *Child protection Australia* 2018–19 Table S5.1. Prior to 2016–17, these published data were not disaggregated by Aboriginal and Torres Strait Islander identity. Disaggregation using the counting rules from RoGS 2021 was applied to the source data, the ACT National Minimum Data Sets (NMDS) for 2013–14 to 2015–16, to provide a complete time series.

Preservation and reunification services

Since the implementation of the Strategy, Aboriginal and Torres Strait Islander families have engaged with preservation and reunification support services through:

- Uniting preservation and reunification services
- Karinya Mother and Baby Service
- Gugan Gulwan FFT program
- CYPS FGC program, delivered in partnership with Curijo.

Between 1 January 2016 and June 2020, 30 Aboriginal and Torres Strait Islander mothers and their children received services from Karinya House. The Directorate is working towards inclusion of outcomes data for children whose mothers engaged with Karinya House in Stage 2 of the PSE.

The FFT and FGC programs have both reported high levels of engagement and positive outcomes for families. The Directorate is working towards inclusion of outcomes data for children and young people who engaged with the FFT and FGC programs in Stage 2 of the PSE.

The FFT program engaged with 43 families (116 children and young people) between 1 November 2018 and 30 June 2020. Twenty-four families, involving 80 children and young people, had successfully completed the program by 30 June 2020 (data provided by Gugan Gulwan and OzChild).

The FGC program engaged with 46 families (98 children and young people) between 1 November 2017 and 14 January 2021. Sixty-four of the children and young people had not subsequently entered out of home care (by January 2021) and 34 had entered out of home care, with decisions about best care arrangements being made by the child or young person's family (data provided by the FGC Program).

Between 1 January 2016 and 30 June 2020, Uniting provided 176 episodes of preservation services for 164 Aboriginal and Torres Strait Islander children and young people and 99 episodes of reunification services for 86 Aboriginal and Torres Strait Islander children and young people. Data describing outcomes for these children and young people are presented under **Indicators 1.2, 1.3, 2.2 and 2.3**.

Uniting preservation services

Of the 176 episodes of preservation services for Aboriginal and Torres Strait Islander children and young people, provided between 1 January 2016 and 30 June 2020, 145 were closed by 30 June 2020. Of the 145 closed episodes:

- 12% (18 episodes) were closed with the child or young person having entered out of home care by the date of case closure
- 88% (127 episodes) were closed with the child or young person not having entered out of home care by the date of case closure.

With regard to the 127 episodes of services that were closed with the child or young person not having entered out of home care, by the date of case closure:

- 25% (36 episodes) were closed with all goals for the family that were planned during the episode of service met
- 12% (18 episodes) were closed due to no longer meeting Uniting intake criteria
- 31% (45 episodes) were closed due to the family not engaging

- 15% (22 episodes) were closed due to the family withdrawing
- 4% (6 episodes) were closed due to the family relocating.

Episodes of service closed due to 'no longer meeting Uniting intake criteria' include those where the family has met some of their goals and/or is accessing significant support through specialist services, such as drug and alcohol and mental health services and residential rehabilitation programs.

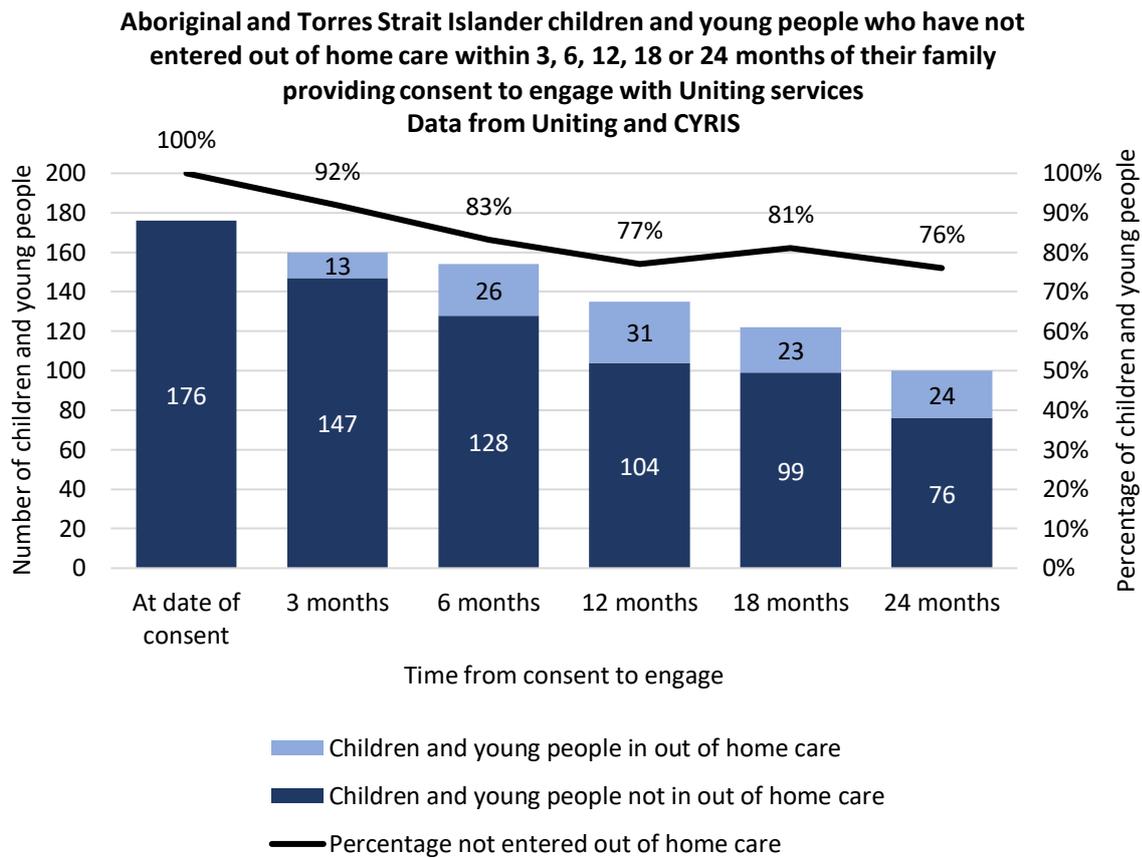
Indicator 1.2: Number of Aboriginal and Torres Strait Islander children and young who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family consenting to engage with Uniting preservation services.

This Indicator measures whether children and young people subsequently enter out of home care after their family has provided consent to engage with Uniting preservation services and received an episode of service. It provides information about the outcomes for children and young people and their families after engaging with Uniting preservation services and includes all episodes of service, regardless of the nature of the episode closure.

There have been 176 episodes in which Aboriginal and Torres Strait Islander children and young people received a Uniting preservation service (including episodes of service open or closed on 30 June 2020). For these 176 episodes, 3 months after the family had provided consent to engage with Uniting services, 92% of children and young people had not entered out of home care and, after 24 months, 76% of children and young people had not entered out of home care (Figure 11).

Note these data include all episodes of service, regardless of the length of family engagement and whether the family completed all of the goals established during the episode of service. Data are provided only for the children and young people where the time period under consideration has elapsed. For example, Figure 11 shows data for 160 children and young people where 3 months has elapsed since the family consented to engage, and data for 100 children and young people where 24 months has elapsed since the family consented to engage.

Figure 11. Aboriginal and Torres Strait Islander children and young people who did not enter out of home care after family consent to engage with Uniting preservation services¹⁴



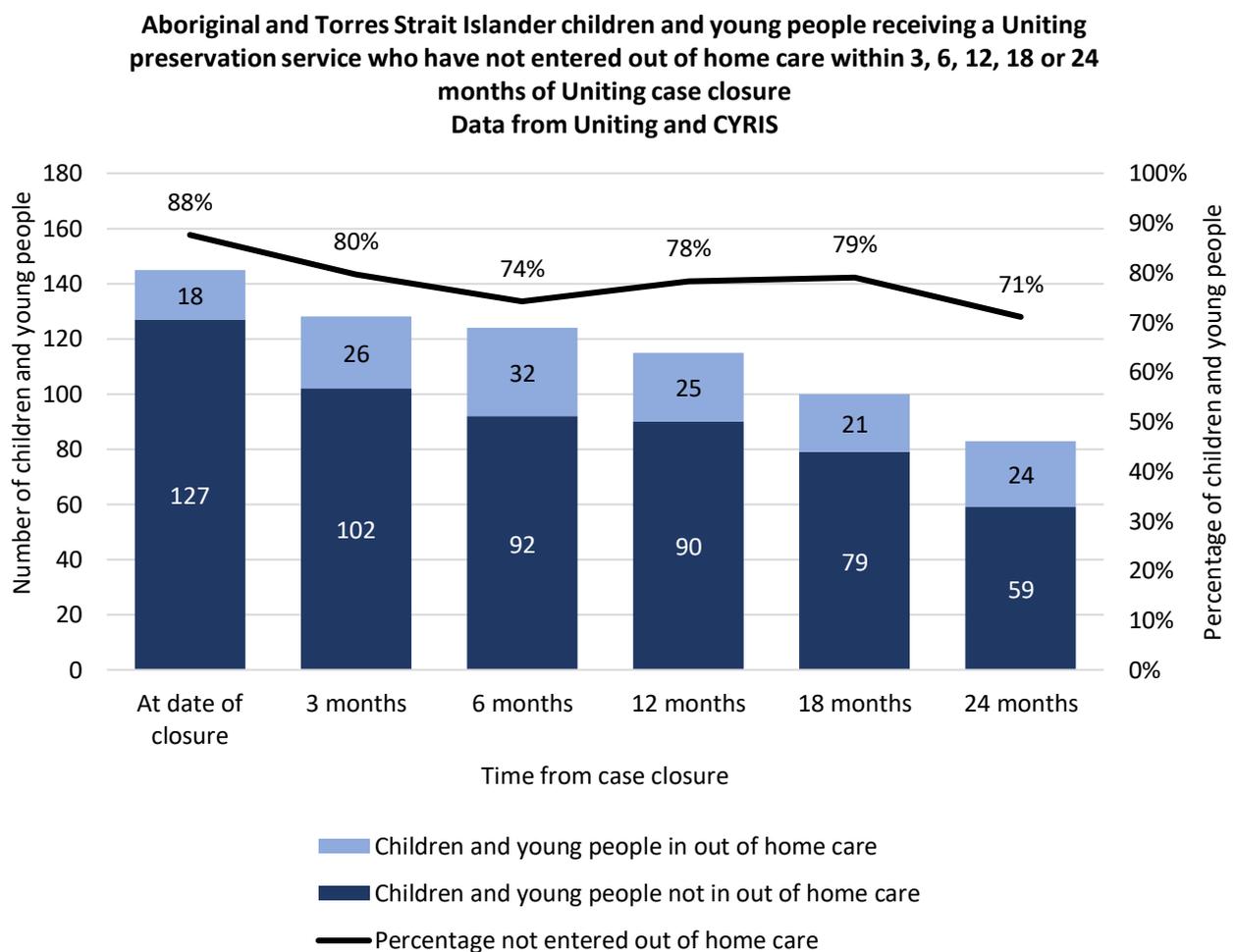
¹⁴ The number of children young people represented at each time point differs, as not all children and young people will have experienced 3, 6, 12, 18 or 24 months since their family either commenced or completed engagement with a Uniting preservation or reunification service. Data represents outcomes for all episodes of service, hence an individual child or young person may appear at multiple timepoints, if they received multiple episodes of service.

Indicator 1.3: Number of Aboriginal and Torres Strait Islander children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family exiting Uniting preservation services.

This Indicator measures whether children or young people subsequently enter out of home care after their family has exited Uniting preservation services. For the 127 episodes of service in which Aboriginal and Torres Strait Islander children and young people received a Uniting preservation service and had not entered out of home care at the time their Uniting case was closed (by 30 June 2020), the child or young person’s case was reviewed to determine whether they subsequently entered out of home care.

Three months after the date of Uniting case closure, 80% of children and young people had not entered out of home care and after 24 months, 71% of children and young people had not entered out of home care (Figure 12).

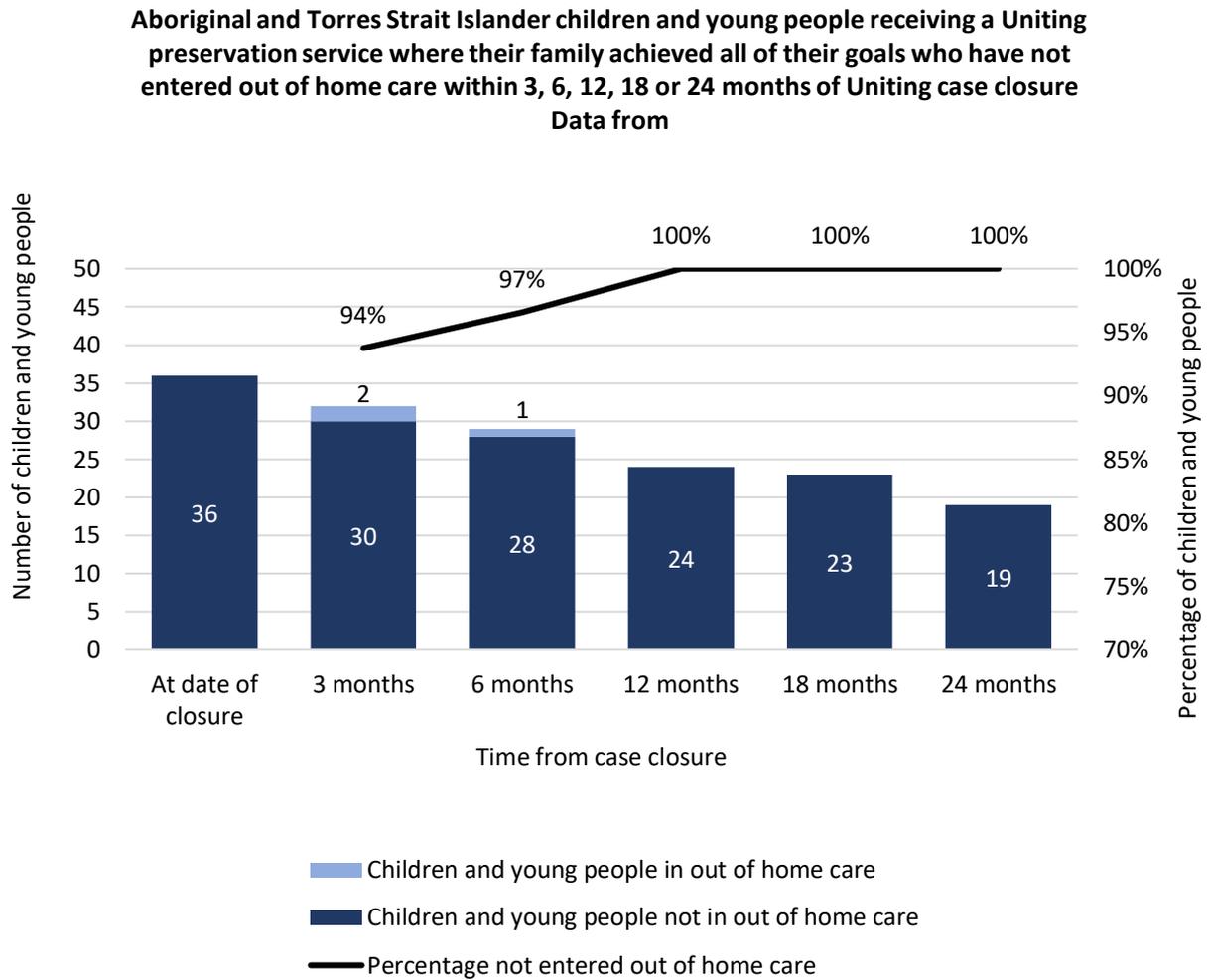
Figure 12. Aboriginal and Torres Strait Islander children and young people who did not enter out of home care after Uniting case closure



There were 36 episodes of preservation service closed by 30 June 2020 where an Aboriginal and Torres Strait Islander child or young person had not entered out of home care at the time their Uniting case was closed, and the family had met all of the goals set during their episode of service.

For these 36 episodes of service, 3 months after the date of Uniting case closure, 2 children and young people entered out of home care and, for the children and young people where data was available for 24 months, none had entered out of home care (Figure 13).

Figure 13. Aboriginal and Torres Strait Islander children and young people who did not enter out of home care after Uniting prevention case closure with their family having achieved all of the goals planned during the episode of service.



Uniting reunification services

Indicator 2.2: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services.

Between 1 January 2016 and 30 June 2020, 86 Aboriginal and Torres Strait Islander children and young people received 99 episodes of Uniting reunification service. Eighty-five episodes were closed by 30 June 2020.

- 81 closed episodes of service had commenced with the child or young person being in an out of home care placement
- 4 closed episodes of service had commenced with the child or young person being in an informal kinship care arrangement, wherein the aim of the engagement was reunification with parent(s).

On the date on which the 85 episodes of reunification service were closed:

- 31% (26 episodes) were closed with children and young people having left out of home care and returned to their families.

Indicator 2.3: Number of Aboriginal and Torres Strait Islander children and young people who had exited out of home care at the time their family exited Uniting reunification services who did not subsequently re-enter out of home care within 3, 6, 12, 18 and 24 months.

Of the 26 episodes of service that were closed with children and young people having left out of home care and returned to their families by the time of closure, only one child returned to out of home care within 24 months of case closure.

Stability

The Directorate has a policy position that adoption is not an appropriate permanency option for Aboriginal and Torres Strait Islander children and young people in out of home care. In the ACT, legal guardianship for Aboriginal and Torres Strait Islander children and young people can be transferred from birth parents through an EPR Order made by the Childrens Court.

EPR Orders transfer responsibility for day-to-day and long-term decisions for a child or young person to an approved foster or kinship carer, without severing legal ties between the child or young person and their birth family and without changing the legal identity of the child or young person.

Since 2011–12, 35 EPR Orders were finalised for Aboriginal and Torres Strait Islander children and young people in the ACT (Figure 14). Of these:

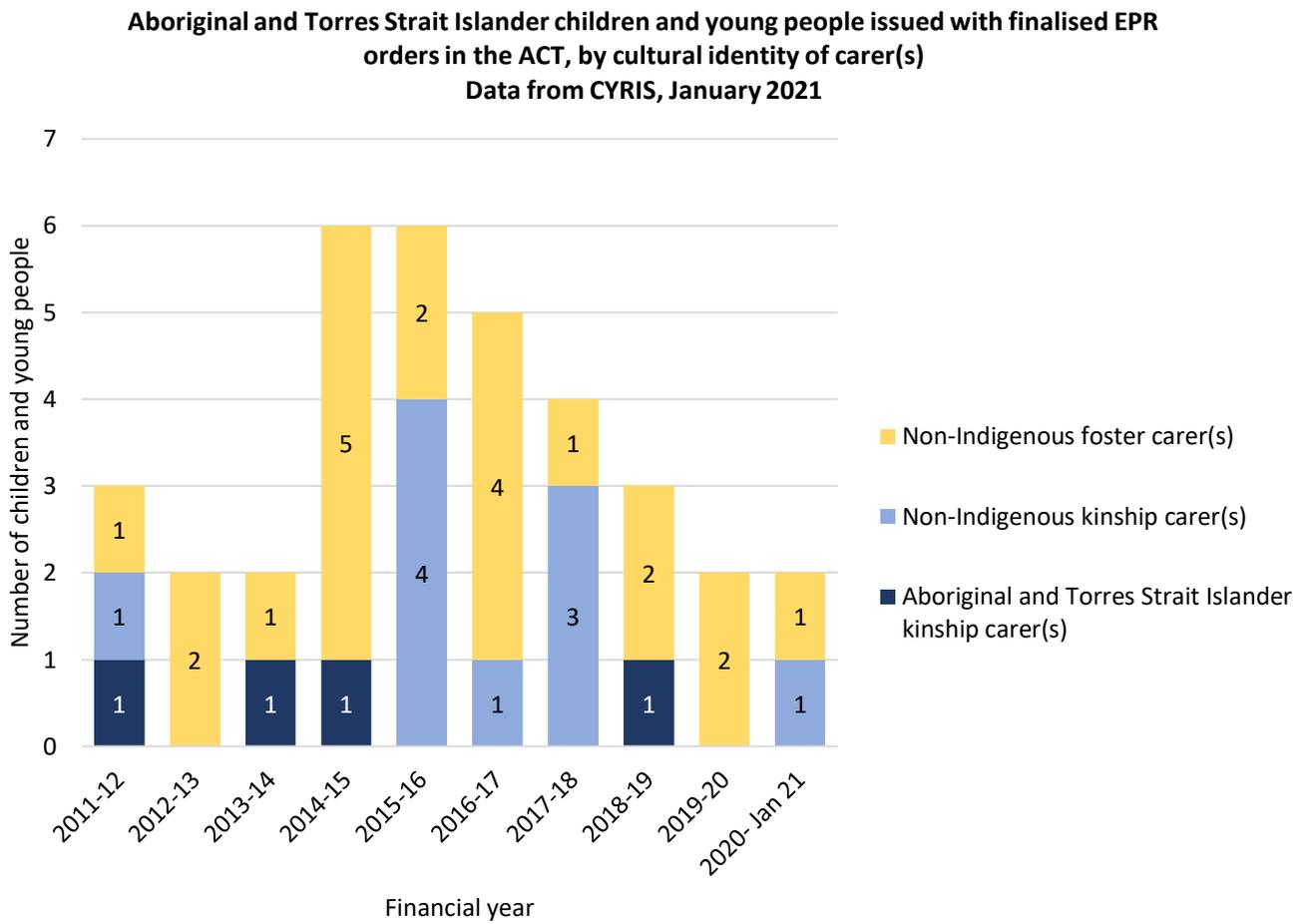
- 4 were recorded as being with Aboriginal and Torres Strait Islander kinship carers (where one or more of the carers in the household identifies as being Aboriginal or Torres Strait Islander)
- 10 were recorded as being with non-Aboriginal and Torres Strait Islander kinship carers
- 21 were recorded as being with non-Aboriginal and Torres Strait Islander foster carers.

The *Our Booris, Our Way* Review recommended EPR Orders only be available for Aboriginal and Torres Strait Islander kin and carers with clarification sought through a formal policy position from the Directorate.

While recognising the intent of this position, the ACT Government's response to the *Our Booris, Our Way Final Report* indicates further consideration of the evidence-base is required particularly where permanency and stability are considered to be central to reducing the ongoing trauma for children and young people associated with being in out of home care. Where restoration to Aboriginal or Torres Strait Islander parents or kin is not possible or is not in the child or young person's best interests, progressing a permanency arrangement through EPR may be another consideration. This view of permanency also needs to be considered through a cultural lens and in recognition of past decisions and practices that may have impacted on separation of Aboriginal and Torres Strait Islander children and young people from their family and culture.

The Directorate will assess EPR matters where an Aboriginal and Torres Strait Islander kin or carer has requested this to be considered. Supplementary work is also being undertaken to inform the policy statement, practice position and the process to consider individual EPR Orders to progress where the application is made by non-Aboriginal and Torres Strait Islander kin and carers. This decision-making process also includes how CYPS identifies and supports family placements, cultural connection and planning as well as an assessment of the impact on the child's wellbeing and the impacts of this permanency decision.

Figure 14. Aboriginal and Torres Strait Islander children and young people issued with EPR Orders, by cultural identity of carer(s).



Connection

The Aboriginal and Torres Strait Islander Child Placement Principle state placement of an Aboriginal or Torres Strait Islander child or young person in out of home care is prioritised in the following way:

1. with Aboriginal or Torres Strait Islander relatives or extended family members, or other relatives or extended family members (kinship care), or
2. with Aboriginal or Torres Strait Islander members of the child's community (kinship care), or
3. with Aboriginal or Torres Strait Islander family-based carers (e.g. foster care), or
4. a non-Indigenous carer (foster care) or in a residential setting (residential care).

Indicator 4.1: Number of Aboriginal and Torres Strait Islander children and young people in out of home care living with family and number living with Aboriginal and Torres Strait Islander carers.

The percentage of Aboriginal and Torres Strait Islander children and young people living in out of home care in the ACT who were living with kinship carers (members of their family or community) increased to 59% and the percentage who were living with Aboriginal and Torres Strait Islander carers (in either foster or kinship care) increased to 38% per in 2016–17 and has remained relatively steady since this time.

On 30 June 2020:

- 61% of Aboriginal and Torres Strait Islander children and young people in out of home care in the ACT were living with kinship carers (with either Aboriginal and Torres Strait Islander carers or non-Indigenous family)
- 39% were living with Aboriginal and Torres Strait Islander carers (79 in kinship care with Aboriginal and Torres Strait Islander kinship carers, and 5 in foster care with Aboriginal and Torres Strait Islander foster carers) (Figure 15a and b).

Figure 15a. Aboriginal and Torres Strait Islander children and young people in out of home care, by placement type and cultural identity of carers

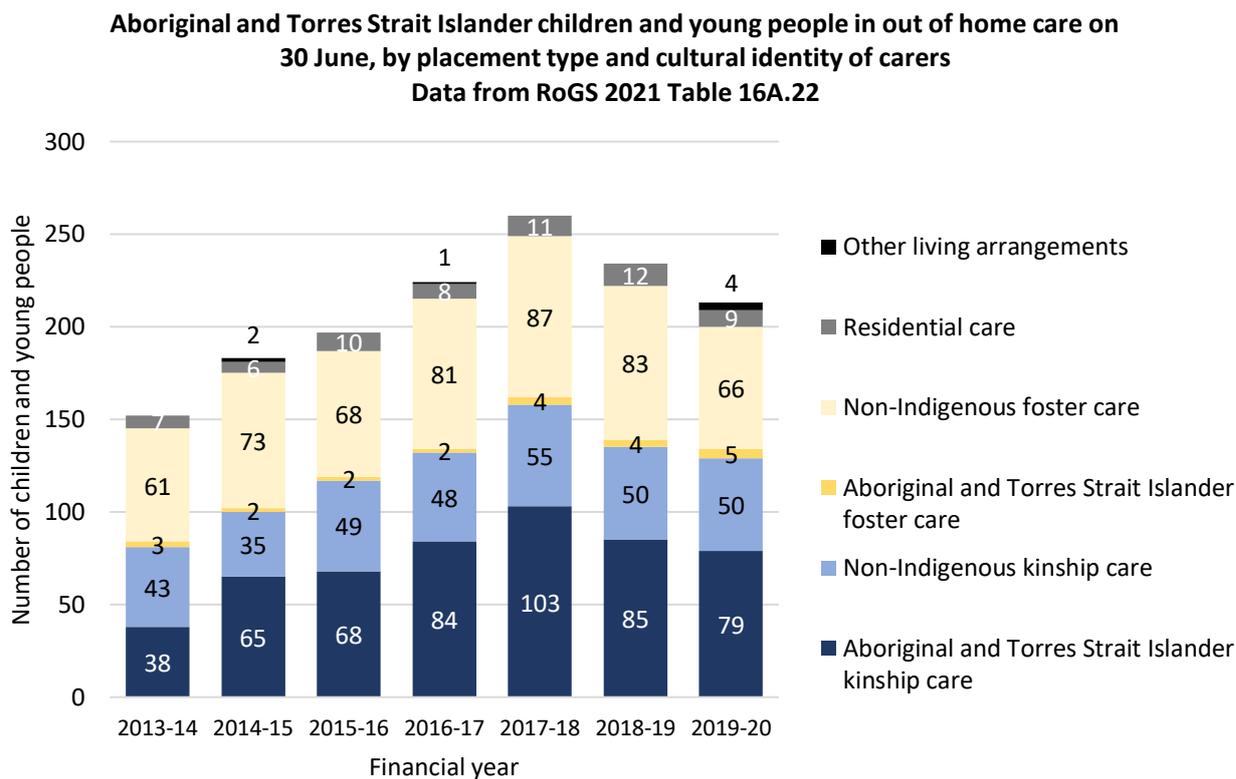
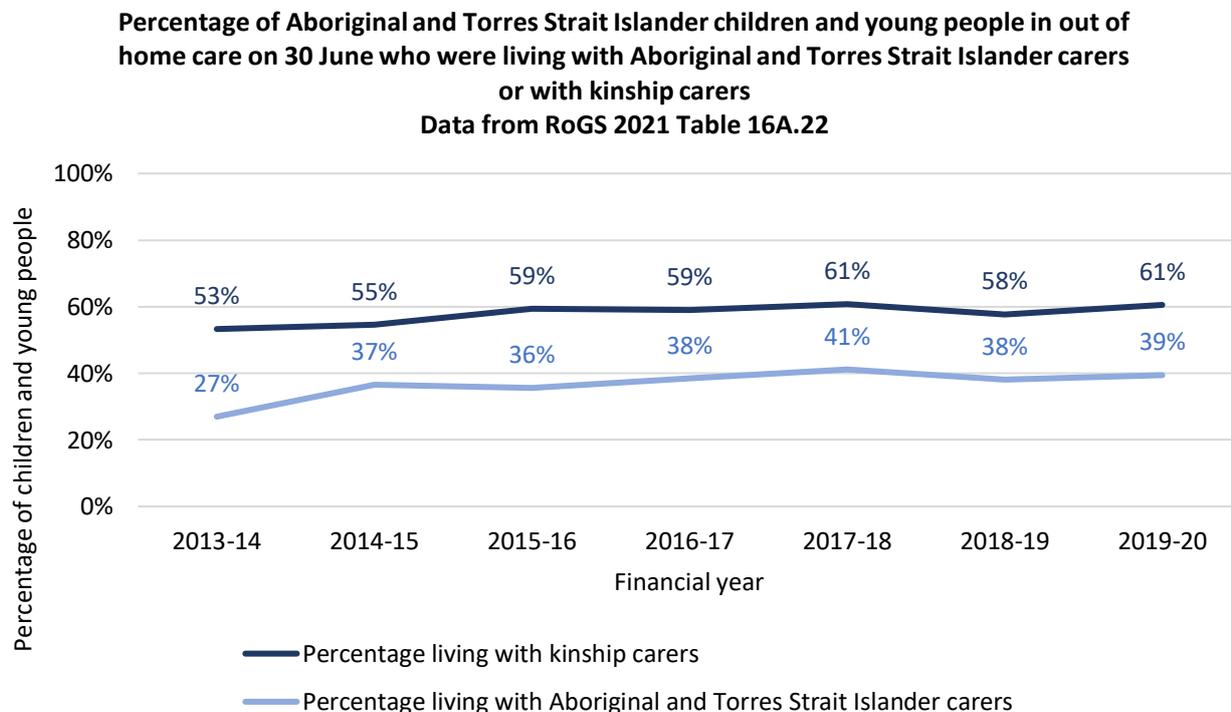


Figure 15b. Percentage of Aboriginal and Torres Strait Islander children and young people in out of home care living with Aboriginal and Torres Strait Islander carers or with kinship carers



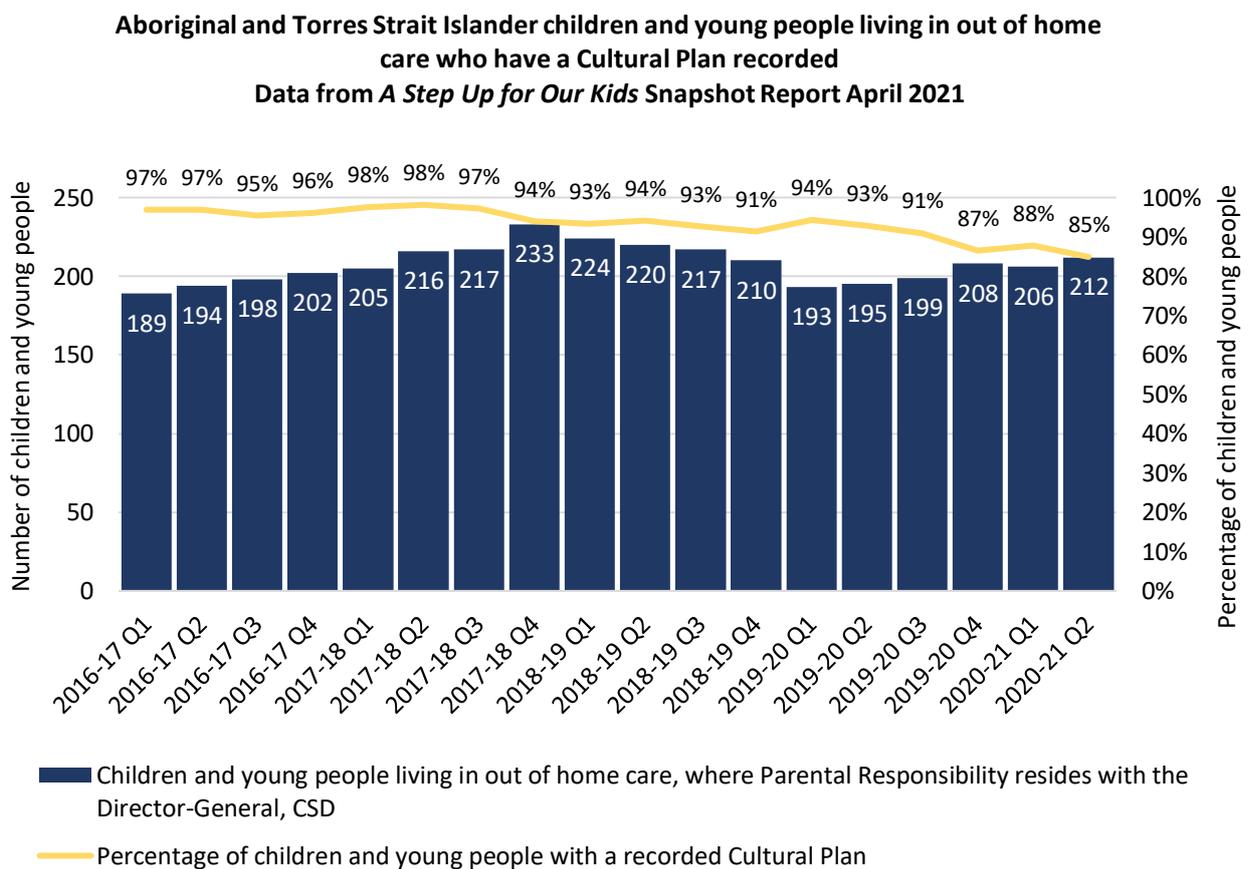
Note that data for 2019—0 are not completely comparable to prior years due to a changed national definition of out of home care (refer to Appendix C for a detailed explanation of the definition change).

Indicator 4.2: Number of Aboriginal and Torres Strait Islander children and young people living in out of home care who have a Cultural Plan recorded.

CYPS policy requires all Aboriginal and Torres Strait Islander children living in out of home care, where Parental Responsibility resides with the Director-General of CSD, either in full or in part, have a Cultural Plan to ensure a child’s identity is preserved by facilitating and maintaining their connection to family, including extended kinship networks and community; and to support a child to remain connected to their culture, including but not limited to language, cultural values, lore, beliefs and practices, Country, totem, history and stories, symbolic and cultural expressions and events.

Cultural Plans are a shared responsibility of CYPS and ACT Together. The percentage of Aboriginal and Torres Strait Islander children and young people required to have a Cultural Plan who have one recorded at the end of each quarter decreased since 2017–18 (Figure 16). On 31 December 2020, 85% of the 208 Aboriginal and Torres Strait Islander children and young people who were required to have a Cultural Plan had one recorded in the CYPS Child and Youth Record Information System (CYRIS). Stage 2 of the PSE will include additional data on the development of Cultural Plans.

Figure 16. Aboriginal and Torres Strait Islander children and young people in out of home care with a Cultural Plan recorded



5. Strategy outcome—Preservation

Strategy intent

Preservation—children and young people remain permanently and safely with their families.

The Strategy aimed to increase investment at the ‘front end’ of the care and protection system, to divert children and young people from entering out of home care. Key elements include provision of intensive, practical family support services for families whose children and young people were at risk of entering out of home care.

Implementation

Services funded under the Strategy, to support children and young people to remain safely living with their families were provided by:

- Uniting preservation services
- Karinya Mother and Baby Support Service.

Additional services, aligned to the intent of the Strategy, which support community and family-led solutions for Aboriginal and Torres Strait Islander children and young people are:

- Functional Family Therapy (FFT) (a partnership between Gugan Gulwan and OzChild)
- Family Group Conference (FGC) program offered through CYPs, delivered in partnership with Curiyo.

Prior to the launch of the Strategy increasing numbers of children and young people were entering out of home care in the ACT. Since 2014–15, the number of children and young people entering out of home care decreased; from 219 in 2014–15 to 125 in 2019–20. Data for children and young people entering out of home care in the ACT are discussed in **Indicator 1.1**.

Uniting preservation services engaged with 532 children, young people and their families, resulting in 596 episodes of service, between 1 January 2016 and 30 June 2020. Nine per cent of these episodes were closed with the child or young person having entered out of home care and 31% were closed with the child or young person remaining at home and their family having met all of the goals established during their episode of service. Outcomes for children and young people receiving a Uniting preservation service are described under **Indicator 1.2** and **Indicator 1.3**. Stage 2 of the PSE will include further disaggregation and comparison of these data, including by whether or not a family completed the program they were engaged with, the length of their period of engagement and the outcomes recorded at the end of their period of engagement.

Karinya House engaged with 131 mothers and 139 children between 1 January 2016 and 30 June 2020. Forty-seven per cent of mothers who had completed the program exited¹⁵ with their goals achieved and in sustainable independent living. Data for the Karinya House program is provided under **Indicator 1.4**.

¹⁵ For this service, exit is defined at the point at which either CYPs or Karinya House close off their support period.

This Section presents data for all children and young people. A subset of this data for Aboriginal and Torres Strait Islander children and young people is presented in Section 4 (pg.30).

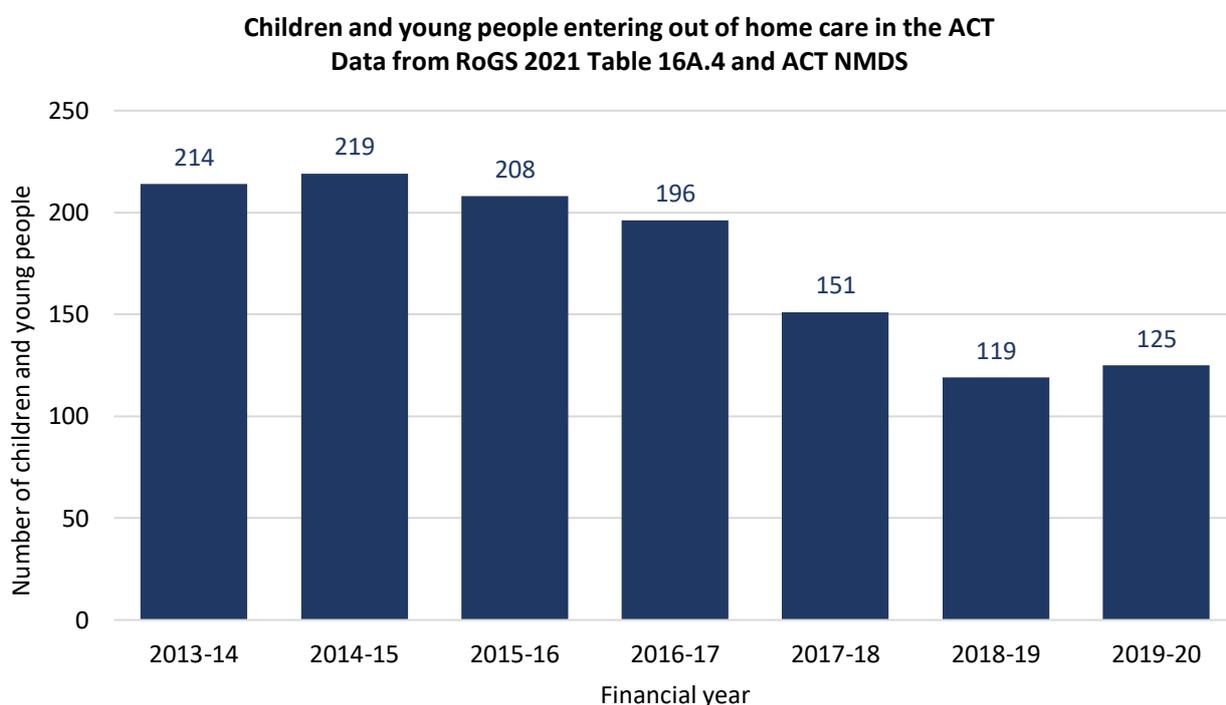
The Directorate is working towards inclusion of outcomes data for children and young people whose families engaged with the FFT and FGC programs in Stage 2 of the PSE.

Indicator 1.1: Number of children and young people entering out of home care.

The number of children and young people entering out of home in the ACT care has decreased steadily since 2013–14; slightly increasing again in 2019–20.

Since 2016–17, the age profile of children and young people entering out of home in the ACT has changed, with a decreasing number and proportion being younger than 10 years (refer to Section 3 pg.27).

Figure 17. Children and young people entering out of home care in the ACT.



Uniting preservation services

Uniting was funded to provide specialised preservation and reunification services in the ACT from January 2016. Families received up to 18 months service with the Uniting program.

Between 1 January 2016, when the service started and 30 June 2020, CYPS made 586 referrals to Uniting. Seventy per cent of these referrals resulted in a family consenting to engage. Some families were re-referred to Uniting and engaged more than once, resulting in 848 episodes of service for 720 children and young people over this period. Of these, 596 episodes were preservation services for 532 children and young people who were living at home at the time their family consented to engage.

Uniting preservation services consisted of 3 programs providing intensive therapeutic support to families whose children and young people were at high risk of entering out of home care:

- **Intensive Family-Based Service (IFBS)** provided immediate crisis intervention, focused on stabilising the home environment over an 8-week period. Families received up to 5 home visits per week and were supported to address immediate concerns and make positive changes.
- **Newpin** provided centre-based parent therapeutic sessions, parenting education groups and therapeutic family play sessions. These support parenting and parent-child interactions, including supporting parents to recognise and meet their child's emotional needs, foster secure attachment and implementing behaviour management strategies. Families attended 2 days per week, with occasional home visits to assess transference of new skills to the home environment.
- **Family Preservation Service (FPS)** provided long-term support through one to 2 home visits per week for up to 18 months, focused on harm minimisation, building parenting skills and developing parenting capacity through therapeutic targeted support. Common areas of focus were parenting routines, boundaries and attachment and management of drug, alcohol, mental health and social concerns.

Box 6: Australian Catholic University research findings

A project looking into the experiences of 22 birth parents accessing Uniting services informs a finding that parents generally received 3 broad types of support, with most parents reporting they received all 3 types of support:

1. practical support (financial, domestic, setting a routine)
2. capacity building (specific programs provided by Uniting and linking up to external services)
3. interpersonal support (listening, checking in, emotional support, 'just being there for me').

All 3 programs support parents and families to access the drug and alcohol management program at Karralika Programs Inc, a specialist alcohol and other drug treatment service, and link families to other community services, such as schools, legal services, Child and Family Centres and health services.

Box 7: Improving data sharing and outcomes measurement

The MSE recommended CYPS and Uniting continue working together to improve data integrity. Consequent collaborative development of outcomes measures and data integrity practices have achieved:

- agreed concepts and counting rules for defining the nature of a child or young person's engagement with Uniting as a preservation or reunification service
- automated reconciliation of data provided by Uniting with data recorded in CYRIS
- the ability to track children and young people outcomes over time.

The data presented in this Report for Uniting services illustrated similar trends to those presented in the MSE, however numbers are not directly comparable, due to the use of improved measures and counting rules used for the PSE.

Uniting preservation service outcomes

Of the 596 episodes of service, provided between 1 January 2016 and 30 June 2020, 471 were closed by 30 June 2020:

- 9% (42 episodes) were closed with the child or young person having entered out of home care by the date of case closure
- 91% (429 episodes) were closed with the child or young person not having entered out of home care by the date of case closure.

With regard to the 429 episodes of service that were closed with the child or young person not having entered out of home care by the date of case closure:

- 32% (153 episodes) were closed with all goals for the family that were planned during the episode of service met
- 13% (63 episodes) were closed due to no longer meeting Uniting intake criteria
- 32% (153 episodes) were closed due to the family not engaging
- 11% (51 episodes) were closed due to the family withdrawing
- 2% (9 episodes) were closed due to the family relocating.

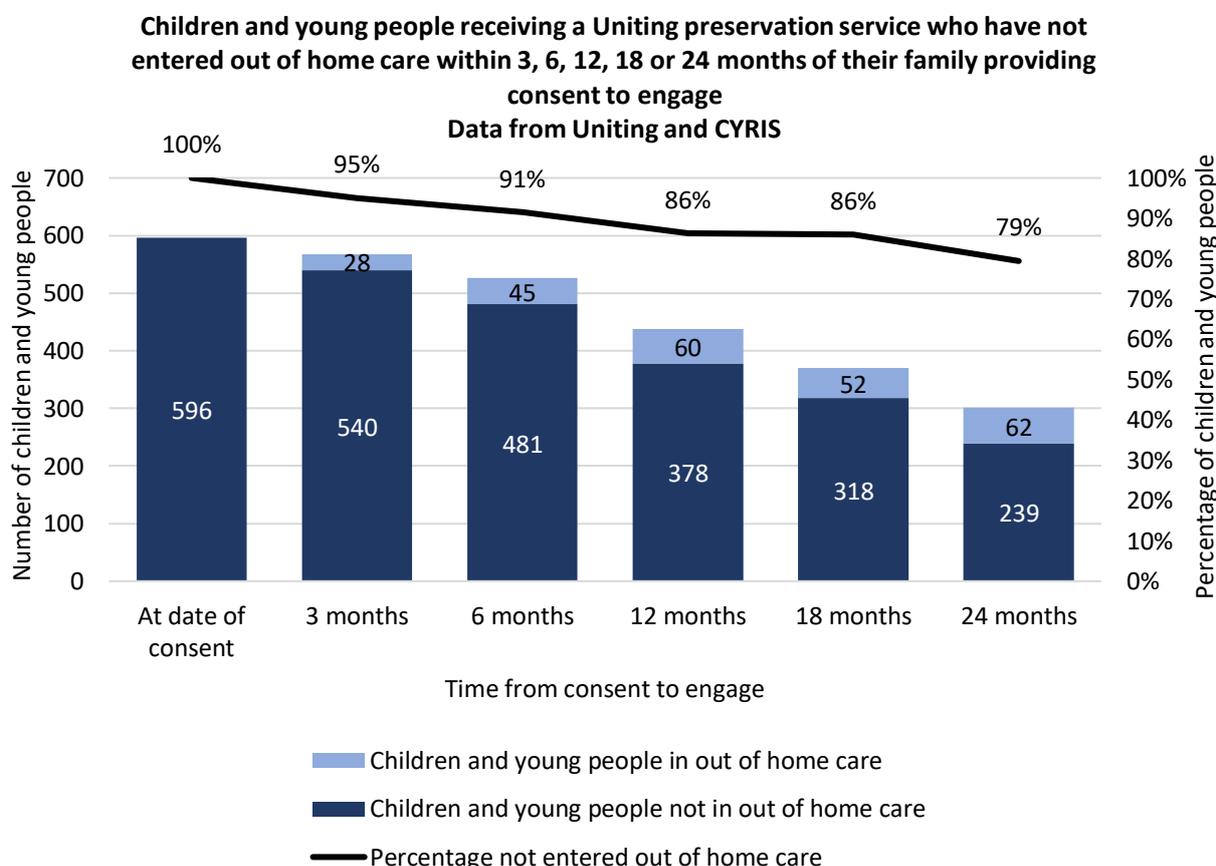
Episodes of service closed due to 'no longer meeting Uniting intake criteria' included those where the family met some of their goals and/or was engaging with another specialist service or services, as well as episodes where the family no longer meet the criteria for receiving Uniting preservation services.

Indicator 1.2: Number of children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family consenting to engage with Uniting preservation services.

For all 596 episodes of preservation service between 1 January 2016 and 30 June 2020 (whether the episode of service was open or closed on 30 June 2020), the child or young person’s case was reviewed to determine whether they subsequently entered out of home care.

Three months after the family provided consent to engage with Uniting, 95% of children and young people had not entered out of home care and, after 24 months, 79% of children and young people had not entered out of home care (Figure 18). Note these data include all episodes of service, regardless of the length of family engagement and whether the family completed all the goals established during the episode of service.

Figure 18. Children and young people who did not enter out of home care after family consent to engage with Uniting preservation services.¹⁶



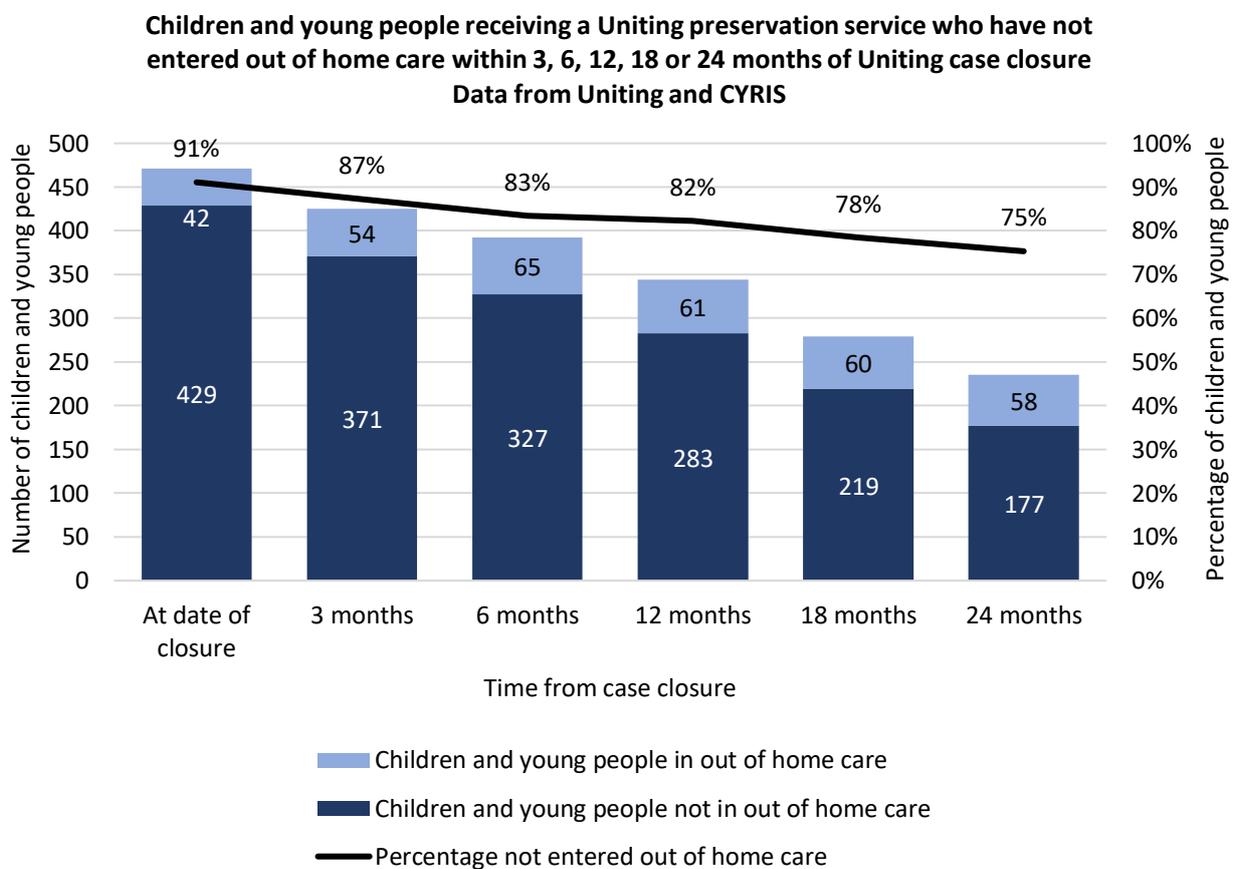
¹⁶ The number of children young people represented at each time point differs, as not all children and young people will have experienced 3, 6, 12, 18 or 24 months since their family either commenced or completed engagement with a Uniting preservation or reunification service. Data represents outcomes for all episodes of service, hence an individual child or young person may appear at multiple timepoints, if they received multiple episodes of service.

Indicator 1.3 Number of children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family exiting Uniting preservation services.

For the 429 episodes between 1 January 2016 and 30 June 2020 where a child or young person was receiving a preservation service and had not entered out of home care at the time Uniting closed their case (for all cases closed by 30 June 2020), the child or young person case was reviewed to determine whether they subsequently entered out of home care.

Three months after the date of Uniting case closure, 87% of children and young people had not entered out of home care and, after 24 months, 75% of children and young people had not entered out of home care (Figure 19). Note these data include all episodes of service, regardless of the length of family engagement and whether the family completed all the goals established during the episode of service.

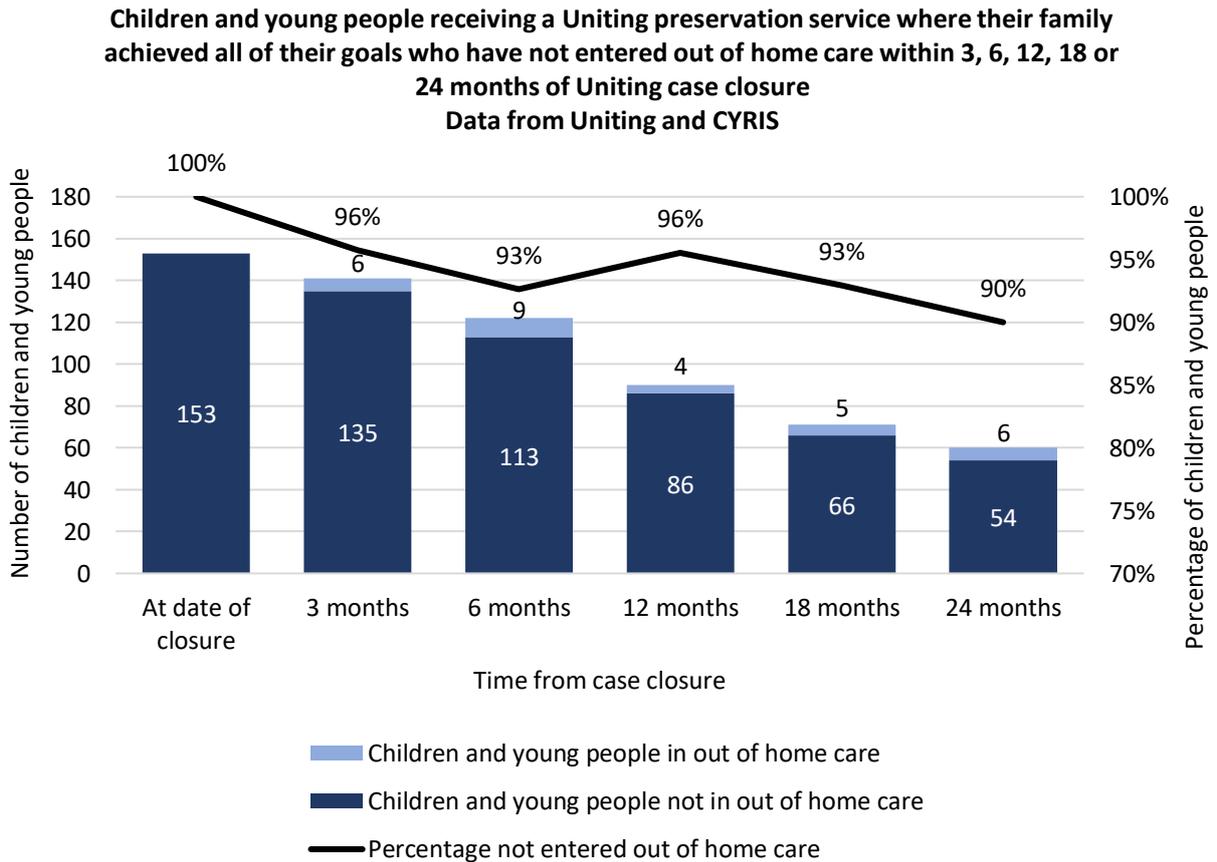
Figure 19. Children and young people who did not enter out of home care after Uniting case closure



Outcomes for children and young people whose families achieved all of their goals

There were 153 episodes of preservation service closed by 30 June 2020 where a child or young person had not entered out of home care at the time Uniting closed their case and the family had met all the goals set during their episode of service. For these episodes of service, 3 months after the date of case closure, 96% of children and young people had not entered out of home care. After 24 months, 90% of children and young people had not entered out of home care (Figure 20).

Figure 20. Children and young people who did not enter out of home care after Uniting case closure with their family having achieved all of the goals planned during the episode of service.



Indicator 1.4: Number of mothers who exited the Karinya House program with their goals achieved and in sustainable independent living.

Karinya House plays a valuable role in supporting women who are willing to care for their babies under supervision and to learn to parent in a safe environment. Karinya House has a small number of placements funded specifically under the Strategy and provides supervision, unique case planning and management and practical support for mothers whose babies are at risk of entering out of home care.

Residential and outreach support services are provided to women in Canberra and the surrounding region who are pregnant or parenting a baby under 3 months of age, upon referral. Women who receive outreach support often have older children in their care and are supported as part of a whole family unit. At times Karinya House has capacity to accommodate a woman, her baby and an older child (toddler to under primary school age), depending on the family's needs, resources and appropriate vacancies.

Support provided by Karinya House includes support for families who have no previous or current involvement with the child and youth protection system, as well as families who are actively working with, or have had previous involvement with CYPS. In supporting the intent of the Strategy, where required, support for restorative practice can also be done through outreach support where there are other intensive supports also in place. An example of this is the provision of support for women who are working towards having their baby(ies) restored to their care. Pending capacity, at times this may also include support for the reunification of toddlers as part of the residential service.

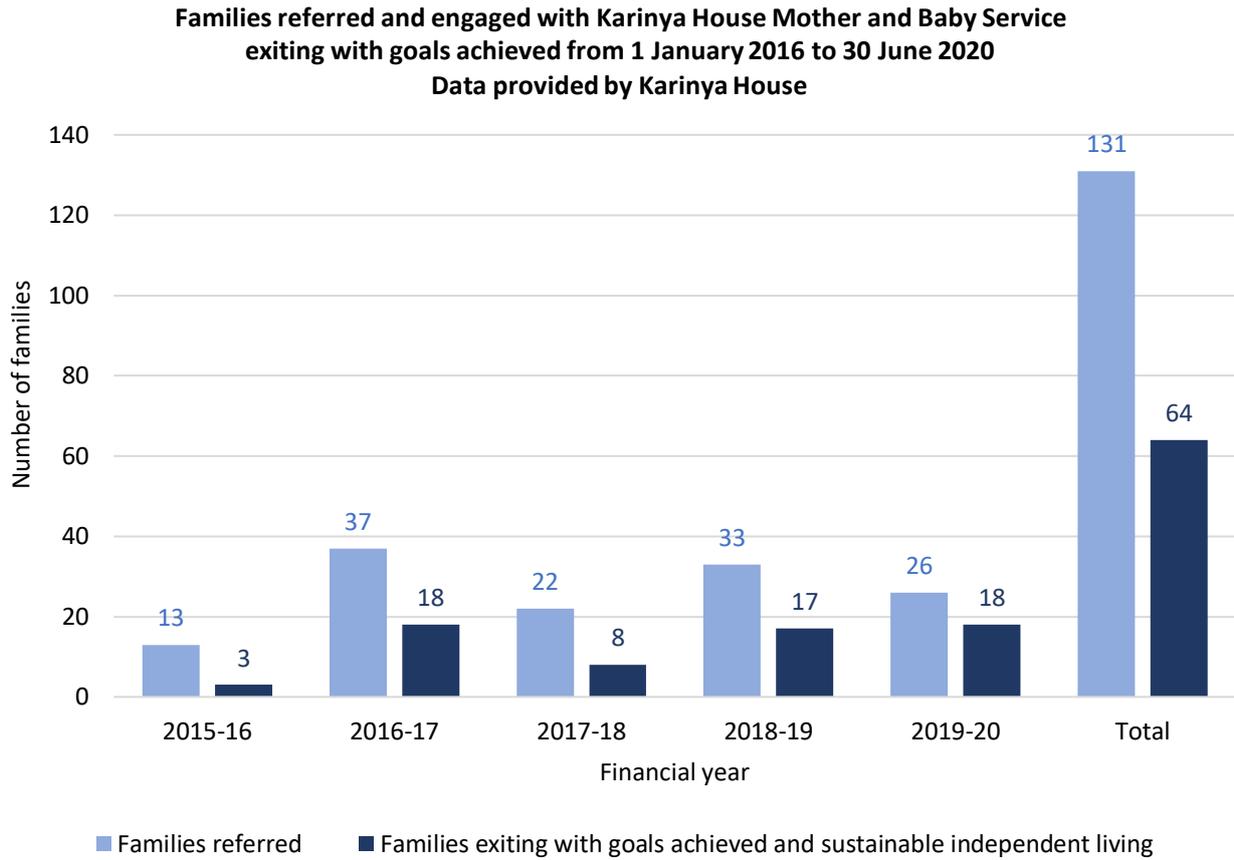
As engagement with the service is voluntary, Karinya House is able to provide either residential or outreach support for as long as required. Those who have received support from Karinya House in the past are also able to return to seek further support in the future without having to meet the eligibility criteria again.

Between 1 January 2016 and 30 June 2020 (Figure 21), Karinya House supported 131 mothers and 139 children. Over this period, 117 mothers were recorded by Karinya House as having exited the program. For this service, exit is defined as the point at which either CYPS or Karinya House close off their support period. Of these 117 mothers:

- 55% (64) exited with goals achieved and in sustainable independent living
- 11% (13) exited due to criteria for engagement no longer being met
- 12% (14) exited because the family withdrew from the program
- 3% (3) exited because the family relocated
- 20% (23) exited because the family was not engaging with the service.

Outcomes data for children whose mothers engaged with Karinya House will be presented in Stage 2 of the PSE.

Figure 21. Mothers referred to and successfully completing the Karinya House Mother and Baby Service.



6. Strategy outcome—Reunification

Strategy intent

Reunification—children and young people return permanently and safely to their families.

When children and young people have entered out of home care, the Strategy aims for families to be supported to build parenting capacity and for the child or young person to return home where it is safe to do so (reunification).

Implementation

Under the Strategy, Uniting was funded to provide reunification services, including a Supported Contact Service to facilitate safe and positive meetings between children and young people living in out of home care and their parents. This service provided non-intrusive support for parenting skills through encouragement and modelling. After a child or young person was reunified with their family, Uniting also provided ongoing support through a range of programs. Aboriginal and Torres Strait Islander families may also receive reunification support through:

- FFT Programs (a partnership between Gugan Gulwan and OzChild)
- the FGC program offered through CYPS, delivered in partnership with Curijo (refer to Section 4 pg.32).

Successful reunification results in children and young people exiting out of home care. In the ACT, the trend for children and young people spending longer continuous periods in out of home care has been associated with a trend for decreased exits from out of home care. The number of children exiting out of home care decreased by 38% from 203 in 2012–13 to 127 in 2017–18. A higher number of exits (152) occurred in 2018–19 and a lower number (115) in 2019–20. This decrease in exits from out of home care is associated with decreased exits for children and young people who have been in out of home care for less than one year and increases in the average length of stay for all children exiting out of home care¹⁷. Data for children and young people exiting out of home care in the ACT are described under **Indicator 2.1**.

Reunification services provided by Uniting engaged with 227 children and young people, resulting in 252 episodes of service, between 1 January 2016 and 30 June 2020. Outcomes for children and young people receiving a Uniting reunification service are described under **Indicator 2.2** and **Indicator 2.3**.

The Directorate is working towards inclusion of outcomes data for children and young people whose families engaged with the FFT and FGC programs in Stage 2 of the PSE.

This Section presents data for all children and young people. A subset of this data for Aboriginal and Torres Strait Islander children and young people was presented in Section 4.

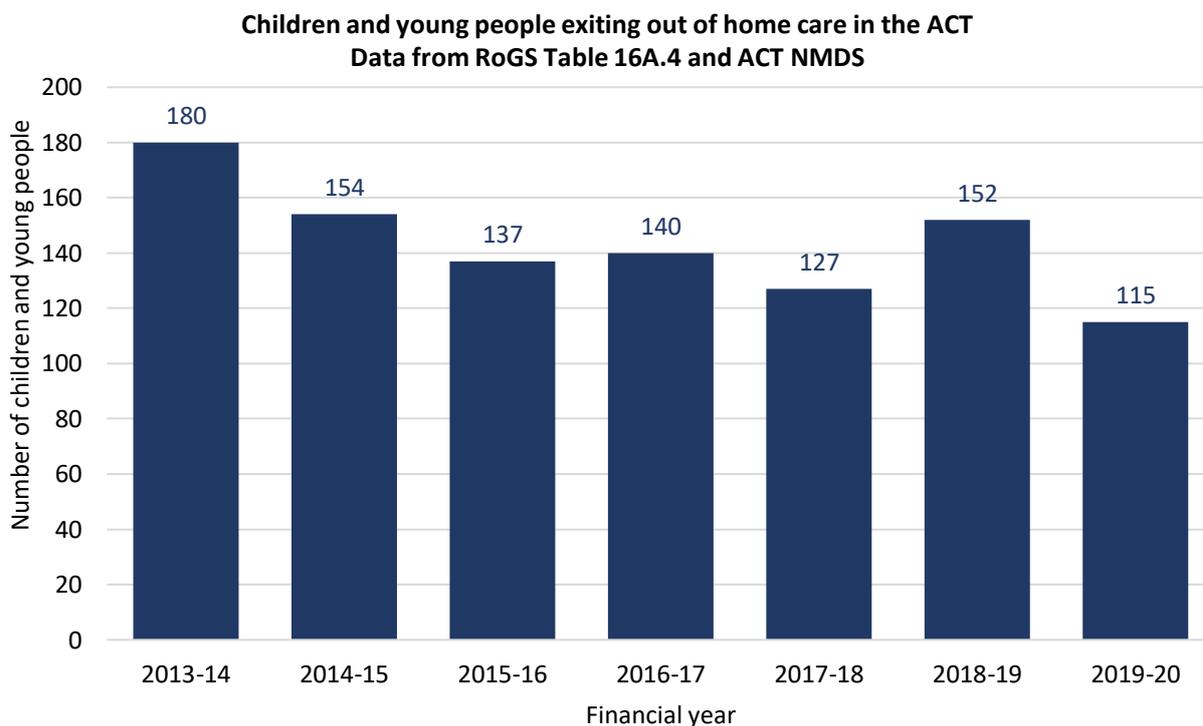
¹⁷ Internal document: Review of demand management options for child protection and out of home care, Chief Minister, Treasury and Economic Development Directorate, ACT Government, 2018.

Indicator 2.1 Number of children and young people exiting out of home care

For each financial year, children and young people were counted as 'exiting out of home care' when they leave a CYPs-approved kinship care, foster care or residential care placement, either to return home to their family or because they have reached 18 years old. Each child or young person is counted once, regardless of how many times they exit an out of home care placement during that financial year. If a child or young person leaves out of home care and then returns within 60 days, this is not counted as an exit. Detailed definitions and counting rules are provided in Appendix D.

Since 2013–14, the number of children and young people exiting out of home in the ACT care decreased; from 180 in 2013–14 to 115 in 2019–20 (Figure 22).

Figure 22. Children and young people exiting out of home care in the ACT.



Indicator 2.2: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services.

Between 1 January 2016 and 30 June 2020, 227 children and young people received 252 episodes of Uniting reunification services. Two-hundred and fifteen episodes of service were closed by 30 June 2020:

- 200 closed episodes of service had commenced with the child or young person being in a CYPS-approved and funded out of home care placement, wherein the aim of the engagement was for the child or young person to leave out of home care and return to their family
- 15 closed episodes of service had commenced with the child or young person being in an informal kinship care arrangement, wherein the aim of the engagement was for the child or young person to return to living with their parent(s).

For the 200 closed episodes of service that commenced with the child or young person being in a CYPS-approved and funded out of home care placement:

- 32% (64 episodes) were closed with the child or young person having left out of home care by the date of case closure
- 68% (136 episodes) were closed with the child or young person remaining in out of home care on the date of case closure.

For the 15 closed episodes of service that commenced with the child or young person being in an informal kinship care arrangement:

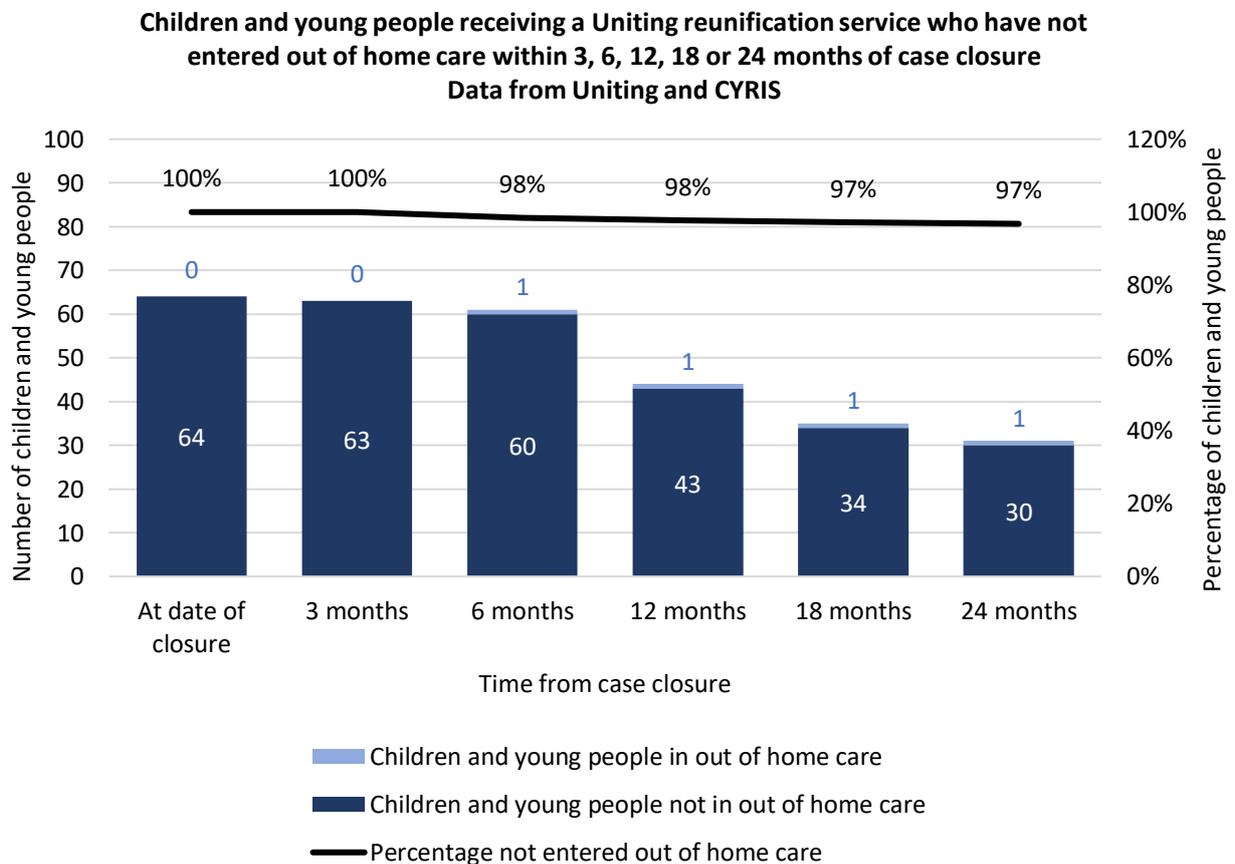
- 33% (5 episodes) were closed with children and young people having returned to their parent(s)
- 33% (5 episodes) were closed with children and young people having entered a CYPS-approved and funded out of home care placement
- 33% (5 episodes) were closed with children and young people remaining in informal kinship care or another type of living arrangement.

Indicator 2.3: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services who did not subsequently re-enter out of home care within 3, 6, 12, 18 and 24 months.

The 64 children and young people who were living in a CYPs-approved and funded out of home care placement and had left out of home care by the time their Uniting case was closed, had their cases reviewed to determine whether or not they re-entered out of home care. Only one of the 64 children and young people had re-entered out of home care within 24 months (Figure 23).

Stage 2 of the PSE will include more detailed data for children and young people exiting out of home care, to understand the nature of these exits and whether or not children and young people were reunified to their families. These data will also examine the stability of reunification, including the number who re-enter out of home care and length of time between the date of reunification and re-entry.

Figure 23. Children and young people receiving a Uniting reunification service who did not re-enter out of home care



Preservation and reunification services - early qualitative research

Quantitative data showed around one third of episodes of support provided by Uniting preservation service were closed with the family achieving their goals and children and young people not entering out of home care. For these families, 2 years after commencing engagement, 90% of children and young people did not enter out of home care.

The MSE identified the need to hear the voice of children, young people and their families in an evaluative review. The Directorate engaged the Institute of Child Protection Studies (ICPS), Australian Catholic University (ACU) to undertake a project on Uniting prevention and reunification services. The project comprised qualitative case studies (interviews with 22 birth parents from Uniting's Intensive Family Support Service) to facilitate greater understanding of the families' experience in receiving prevention and reunification services¹⁸.

The project included interviews of adult members of families who were clients in 2 types of service 'cohorts' provided by Uniting Intensive Family Support Services in the ACT:

- **Preservation services**—families with children and young people assessed as being high risk of removal from birth families
- **Reunification services**—families with children and young people in out of home care, and they were assessed as being eligible for restoration to birth families.

The overall objective of the project was to explore families' experiences of the ACT Uniting preservation and reunification services, and to identify factors that relate to families' engagement with the services. Guided by an interest in families' situations before being referred to Uniting as well as a focus on families' wellbeing during and after engagement with services, key questions were addressed throughout the interviews with parents. These questions were:

1. What are the profiles of families involved in Uniting services (demographics, health and wellbeing, protection history)?
2. How are Uniting services supporting families to keep or return their children home?
3. How do families perceive their wellbeing during engagement with services and post-services?
4. How are services supporting families to achieve preservation and restoration success?

Findings from these meetings with families, as well information provided by Uniting and Karinya House, identified factors impacting the ability of families to engage with services and achieve positive outcomes.

- *Limited specialised support for families with young people over 12 years old.*

Karinya House provides support services to mothers and babies and Uniting preservation services work with families with at least one child under the age of 12 years old. Young people over 12 years old and their families may have different needs for support and require specialist services to prevent these young people from entering out of home care.

¹⁸ Invitations to participate in the project were extended to current clients and those who had either completed or left the service. The 22 birth families interviewed self-selected to participate.

- *Access to specialised trauma-informed supports for unmanaged complex mental health, alcohol and other drug and domestic violence issues impacting on a family's ability to engage with preservation services.*

Families may need to engage with specialist mental health, alcohol and other drug or domestic violence services either before or at the same time as engaging with preservation support services, to ensure capacity for meaningful engagement with programs addressing parenting capacity and family safety. Service providers and families indicated the limited capacity of existing residential alcohol and other drug rehabilitation programs was a barrier for families engaging with preservation programs. Referral practices and co-ordination of funding across the service system could support families to access wrap-around services that best meet their individual needs.

- *Access to long-term post-service supports.*

Families may need access to long-term supports, over many years, to continue positive patterns established during engagement with intensive family support services. Such long-term supports need to meet family's individual needs, including for mental health, alcohol and other drug, parenting and behaviour management supports. Longer-term support can be provided through increased maximum periods of funded engagement with existing services and through 'step-up/step-down' models of support, that allow varying levels of engagement over time, as family needs change.

- *Intensive family support services for kinship and foster carers.*

Intensive family support services, with similar design to those aiming to keep children and young people living safely at home with their parents, could ensure long-term stability of care placements, where carers may be providing care for children and young people with trauma impacts and a need for specialised behaviour management.

- *Continued professional development and support for quality case management and engagement.*

Qualitative research with participants who have accessed the Uniting program highlighted the importance of staff interpersonal skills and practice models for their positive engagement and outcomes; including a need for a genuine approach, non-judgmental attitude and ability to gently empower parents and build trust. Barriers to engagement included lack of clear communication around goals, content and timelines of Uniting programs and lack of clarity arising from dual involvement of multiple service providers (e.g. CYPS and Uniting).

- *Collaborative, consistent support through multiple services working in partnership.*

Support services work best in a collaborative context, in which multiple different services are working with a family towards shared goals and with a shared and consistent approach. Key points of collaborative practice are between Uniting, CYPS and other support and advocacy services, such as the Birth Family Advocacy Service provided by Red Cross.

7. Strategy outcome—Stability

Strategy intent

Stability—When a safe return to birth family is not possible, children and young people in care experience:

- stability in their placements including stability in their relationships with family, carers, and community, and/or
- permanent care at the soonest possible opportunity, and/or
- experience a smooth, positive transition into adulthood.

The *Creating a continuum of care* domain of the Strategy aimed to improve stability for children living in out of home care; including stability in living arrangements, relationships, and support to transition into adulthood.

Implementation

The Strategy aimed to provide greater focus on achieving legal permanency in a timely manner for children and young people in long-term out of home care, where reunification to family is not possible. Amendments to the *Children and Young People Act 2008* were made to support placement stability and timely decision-making around permanency options:

- limiting the time a child under 2 years old may be subject to a short-term Care and Protection Order to one year
- reducing the time after which an EPR Order may be considered for a child or young person to one year of living in a long-term, stable out of home care placement.

The number of children and young people living in out of home care for whom finalised Adoption or EPR Orders have been issued and the time taken from children and young people first entering a long-term, stable out of home care placement to issuing of finalised orders in respect of that placement, are presented under **Indicator 3.1**.

Indicators 3.2 and **3.3** provide information about the use of residential care placements for children under 12 years old and about placement stability for all children and young people living in out of home care.

Indicator 3.1: Time taken from entry into an out of home care placement to issuing of a finalised Adoption or Enduring Parental Responsibility Order in respect of that placement.

In the ACT, legal guardianship can be achieved through either an **Adoption Order** made by the Supreme Court or an **EPR Order** made by the Childrens Court.

Adoption is a legal process that permanently transfers all the rights and responsibilities from a child or young person’s birth parent(s), or another person with parental responsibility for the child or young person, to their adoptive parent(s), including the issuing of a new birth certificate for the child or young person. The data presented in this section refers to adoptions from an out of home care placement only. It does not include other adoptions, for example, intercountry adoptions.

EPR Orders transfer responsibility for day-to-day and long-term decisions for a child or young person to an approved foster or kinship carer, without changing legal ties between the child or young person and their birth family and without changing the legal identity of the child or young person.

Since 2011–12, the number of children and young people living in out of home care in the ACT for whom either an Adoption or EPR Order was finalised remained similar each financial year, with an average of 16 Orders finalised each year, apart from in 2015–16, when 23 Orders were finalised (Figure 24).

There was no consistent change since 2011–12 in the time taken from a child or young person entering an out of home care placement and either an Adoption or EPR Order being issued in respect to that placement (Figure 25). However, in 2019–20 a marked increase in the under 2-year time period, was seen at 19% of children and young people.

Figure 24. Adoption and Enduring Parental Responsibility Orders finalised for children and young people living in out of home care in the ACT. Data are organised by the year in which a finalised Order was issued

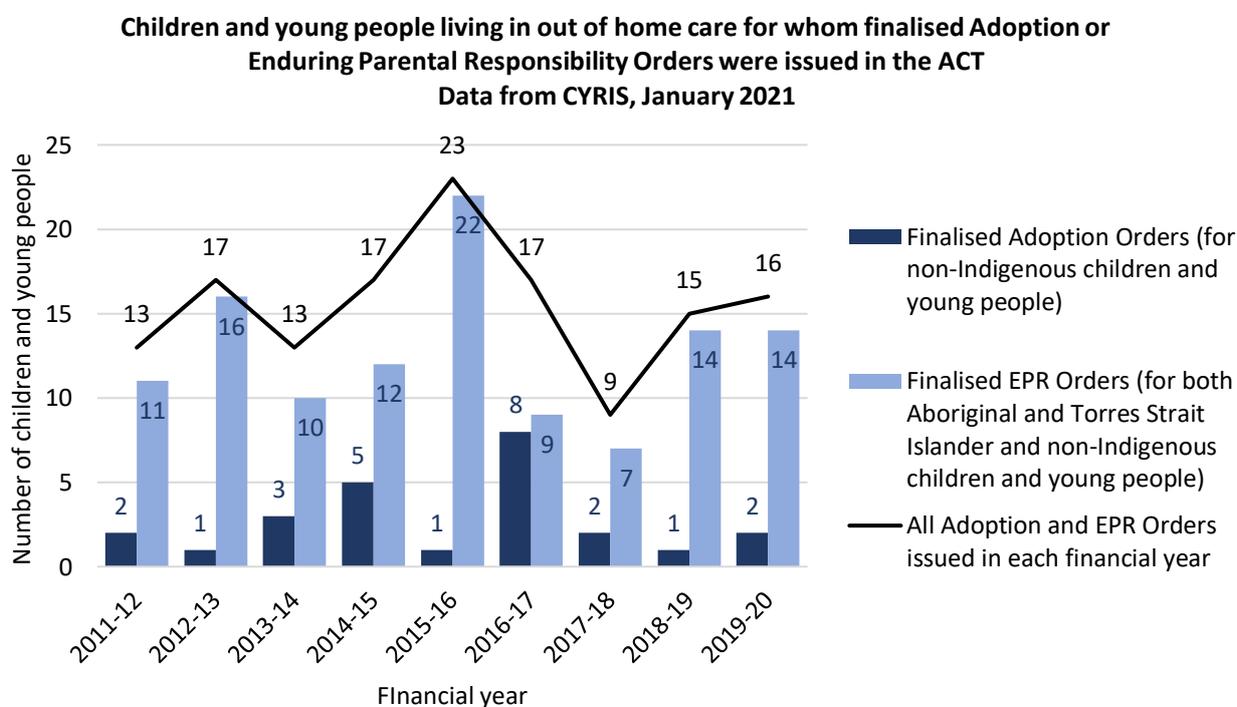
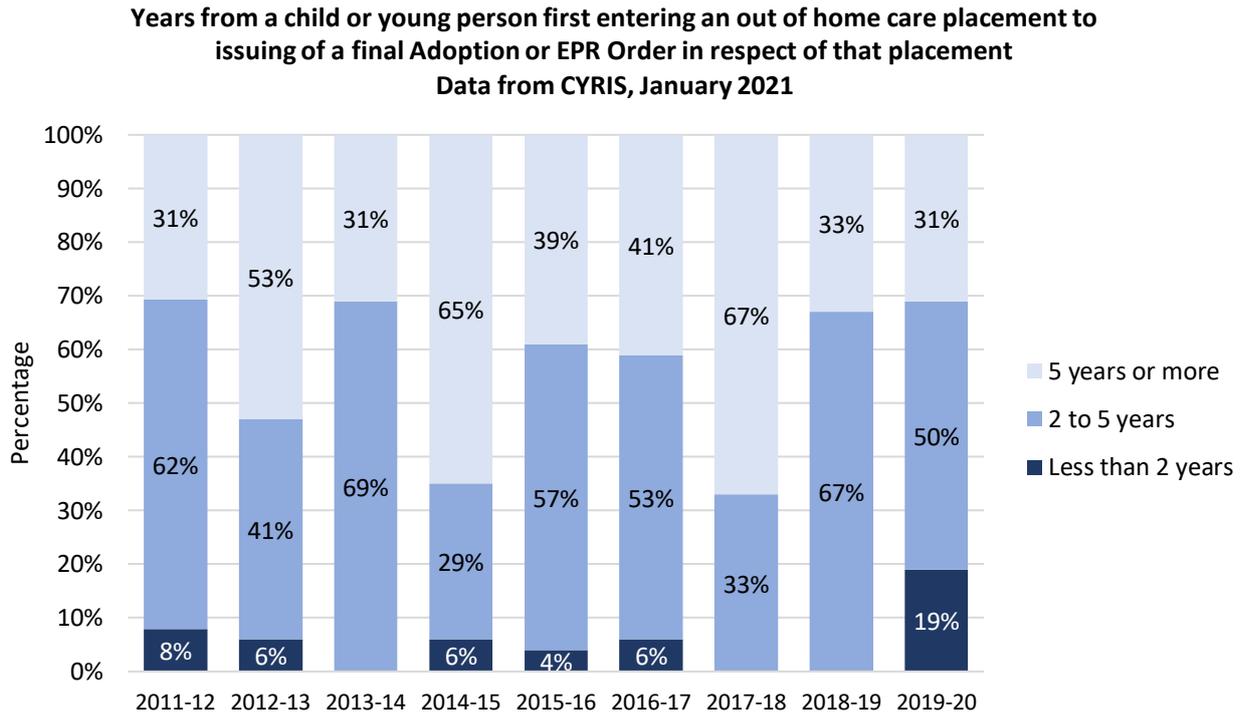


Figure 25. Time to finalisation of Adoption or Enduring Parental Responsibility Orders.



Data are the length of time (in years) between a child or young person first entering an out of home care placement and Finalised Adoption or EPR Orders being issued in respect of the carers associated with that placement.

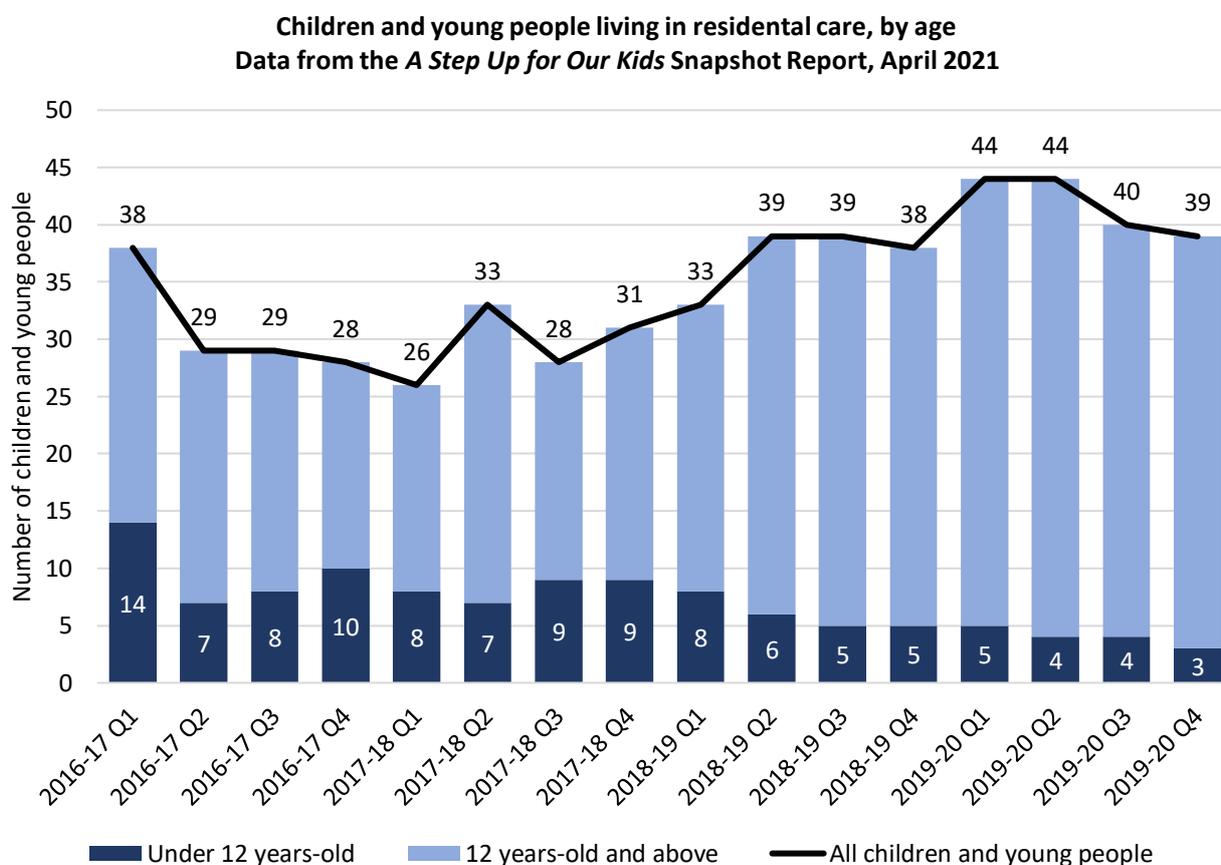
Indicator 3.2: Number of children younger than 12 years old living in a residential care placement.

Since 2013–14, on average 5% of children and young people living in out of home care in the ACT were living in residential care on 30 June of each year¹⁹.

The percentage of children and young people living in residential care in the ACT who were under 12 years old decreased from an average of 31% (10 children at the end of each quarter) in 2016–17 to an average of 10 (4 children at the end of each quarter) in 2019–20 (Figure 26).

Stage 2 of the PSE will include additional data for children and young people entering out of home care, including identifying how many children aged zero to 11 years old were placed into residential care before entering a home-based placement.

Figure 26. Children and young people living in residential care in the ACT, by age



¹⁹Report on Government Services 2020, Chapter 16, Table 16A.20.

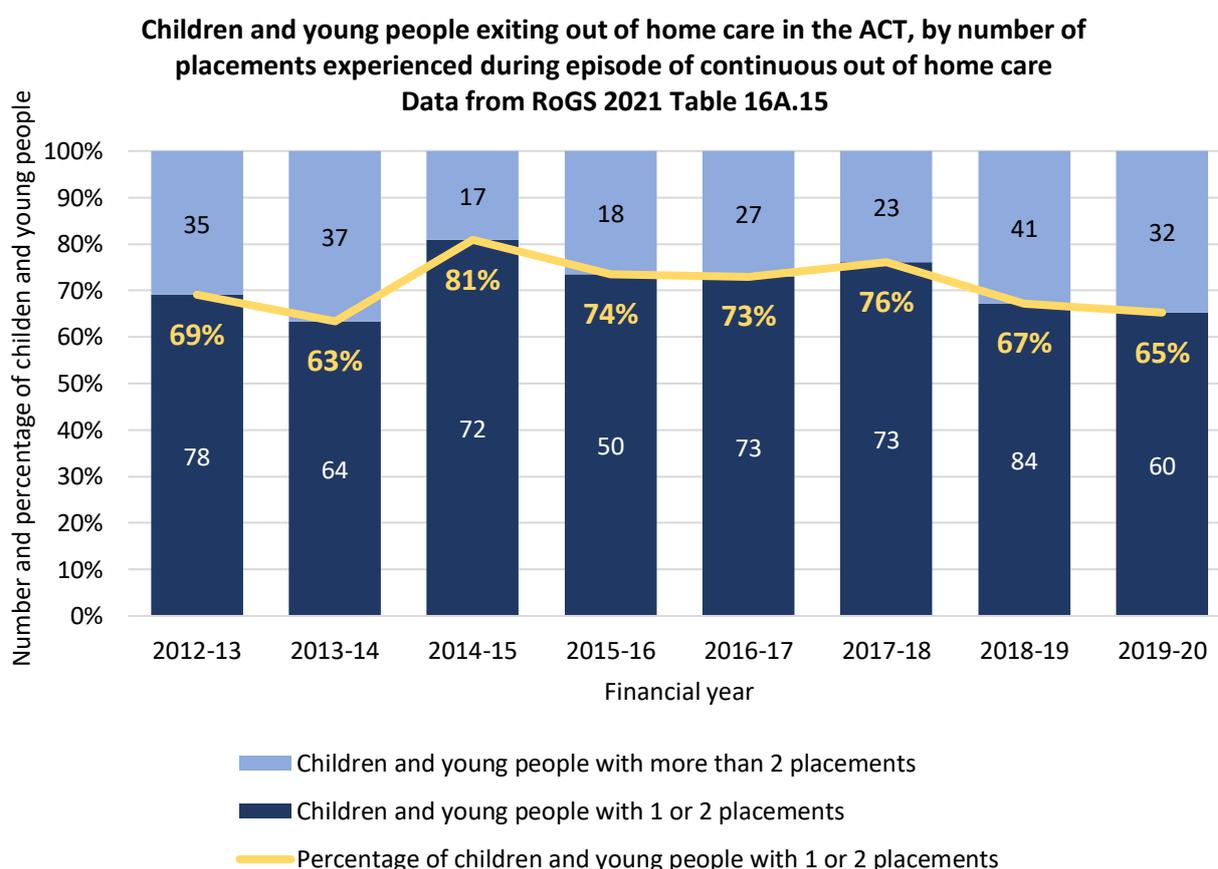
Indicator 3.3: Number of children and young people exiting out of home care who had 1 or 2 placements (by length of time in continuous care preceding exit).

For children and young people who were living in out of home care for 30 days or more, and who were on a Care and Protection Order, the number of different placements the child or young person lived in during their episode in out of home care is calculated when the child or young person leaves out of home care and reported nationally. These data show the number of different places a child or young person lived during their episode of out of home care (not the number of times they have moved between placements) and excludes placements which were solely for the purpose of providing respite.

In 2019–20, 65% of children and young people exiting out of home care during that year in the ACT had experienced one or 2 placements during their episode in out of home care and 35% had experienced more than 2 placements (Figure 27).

Young people with an experience of living in out of home care provided insight into the meaning of ‘stability’ for these young people during a Youth Advisory Group (YAG) meeting convened by CREATE in December 2020. These insights, and analyses planned for Stage 2 of the PSE, are in Box 2.

Figure 27. Children and young people exiting out of home care in the ACT, by number of placements experienced.



Note for 2018–19 and 2019–20, the changed national definition of out of home care means children and young people living in kinship or foster care placements under an EPR Order, and young people living in over-18 supported placements were included in the category ‘Other living arrangements’, therefore a child or young person issued with an EPR Order or moving to over-18 supported living is counted as an ‘exit’ from out of home care for those financial years.

8. Quantitative and qualitative research areas of focus for Stage 2

Stage 2 quantitative research

The PSE continued to measure success against the indicators that were reported against in the Baseline Report and MSE. For Stage 2 of the PSE, indicators have been refined and improved; expanding scope and disaggregation of data (see Appendix C). A continuous improvement process and maturity pathway approach will be used to further refine and nuance indicators as the evaluative work progresses. The emergence of new initiatives that support the intent of the Strategy since it was launched in 2015, such as FFT-CW and FGC, are considered in refinement of indicators.

Stage 2 qualitative research

Stage 1 of the PSE presented data for 4 of the 5 Strategy outcomes: *Preservation, Reunification, Stability* and *Connection*. For the fifth Strategy outcome, *Participation*, qualitative data from engagement with young people will be presented in Stage 2.

In developing the next iteration of the Strategy there has been extensive engagement with stakeholders undertaken by the Directorate. The views and feedback from stakeholders such as people with lived experience (young people, families, carers), community organisations including out of home care agencies and peak bodies and government services was summarised in a series of *Listening Reports* and are publicly available on the Directorate's website.

Approach for the second stage of the PSE

The overview of initial qualitative data as it pertains to wellbeing, participation, connection, therapeutic trauma-informed care and advocacy will be triangulated with the findings from Stage 1. The second stage of the PSE (Stage 2) will build on Stage 1 and contain more extensive qualitative research to gain a greater understanding of the 'why?' and 'how?' for changes identified through quantitative data analysis.

The objective of Stage 2, as the final part of the PSE, is to answer the following outcome and process questions:

- To what extent has the Strategy achieved its intended outcomes? What changes have occurred, for whom and under what circumstances and conditions?
- Have there been any unintended outcomes (positive or otherwise) for children and young people in families with high risk and for children and young people in care as a result of the Strategy implementation? What is the evidence of these causal linkages?
- Why and how has the Strategy achieved (or not achieved) the intended outcomes: preservation, reunification, stability, participation and connection? To what extent can the improved outcomes be attributed to the Strategy?

9. Continuous data improvement

Since the implementation of the Strategy in 2015 and, as shown since the release of the Baseline Report in 2018, there has been a strong commitment both from the Directorate and community partners to the collection and continual improvement of data, and towards ongoing monitoring and evaluation.

The Directorate's commitment to accountability and building data capability and capacity is evidenced through continual improvements to the way data is collected, recorded, analysed, reported and visualised. This is to: reflect the reality of people's experiences, ensure data is meaningful and relevant, and provide decision makers with the most relevant information.

Stage 2 of the PSE will contribute to the Directorate's journey towards Aboriginal and Torres Strait Islander Data Sovereignty in the child protection and out of home care service system, including Aboriginal and Torres Strait Islander-led strategic data governance.

Improved measurement of outcomes for Aboriginal and Torres Strait Islander children and young people

The Directorate is continually reviewing the mechanisms available to collect quantitative data and conduct qualitative research. In order to develop data governance principles that support and strengthen First Nations' Data Sovereignty and Governance a commitment to an 'open invitation to co-creating the next steps' is required.

In committing to a data maturity approach, several questions or subjects for further discussion have been identified. Emerging governance topics include:

- how we move from Indigenous data sovereignty principles to enacting these in practice
- the development of data governance principles with a shared terminology and understanding of what this means in practice within the ACT
- how the data remains accessible not just to the Directorate but to the Aboriginal and Torres Strait Islander community
- responsibility for holding the data and information and ensuring it is used in the spirit in which it was given and shared.

Consistent with this, as part of the continuous improvement process, the following recommendations specific to Aboriginal and Torres Strait Islander children and young people will be considered in determining future data collection. These recommendations relate to the way quantitative data for Aboriginal and Torres Strait Islander children and young people interacting with the child protection and out of home care system is collected, aggregated, reported and presented, and have been made/informed by the:

- *Our Booris, Our Way* Review
- *Our Booris, Our Way* Implementation Oversight Committee
- *Family Matters Report 2020*
- Co-design Network
- conversations with Kowa and Maiam nayri Wingara.

Future monitoring and measurement against key performance indicators

The *Our Booris, Our Way* Review recommended collaboratively developed key performance indicators be used to monitor the number of Aboriginal and Torres Strait Islander children and young people entering the care and protection system, their experiences in the system, and pathways to restoration (Recommendation 25). The Review noted these indicators should align with *Closing the Gap* targets as well as addressing key focus areas for the ACT, including establishing identity, intensive family support services, kin finding, restoration, placement with kin and contact with family. A reporting framework is in development in consultation with the *Our Booris, Our Way* Implementation Oversight Committee.

Likewise, *The Family Matters Report 2020* called on all Australian jurisdictions to address identified data gaps and the Co-Design Network identified specific areas of data that are needed to understand change in child protection practice over time.

Cultural identity

- The *Our Booris, Our Way* Review recommended the Directorate develop guidelines and processes to define its role in relation to the identification and de-identification of Aboriginal and Torres Strait Islander children that makes explicit the limit of the Directorate's role and the need for independent Aboriginal and Torres Strait Islander community oversight and assurance of the process (Recommendation 19). The Directorate agrees the cultural authority for the identification of children rests with their family and community and is developing guidelines and processes in this regard.
- The Co-Design Network noted the importance of recording and reporting the cultural identity of Aboriginal and Torres Strait Islander children, young people and carers at the level of language or tribal identity. This information is currently only available in a child or young person's Cultural Plan. The Directorate is developing the capability to capture language and tribal identity on the client record management system known as CYRIS. Once available, further work will need to be undertaken to support data integrity, such as supporting policies and training to embed processes and ensure consistency of application in practice.

Family, kin and community relationships

- The *ACT Aboriginal and Torres Strait Islander Agreement 2019–2028* identifies one of its core priority areas is for Aboriginal and Torres Strait Islander children and young people growing up safely in their families and communities.
- The *Our Booris, Our Way* Review recommended the *Family Matters* definition of kinship be used when providing data on kinship care (Recommendation 20).
- The Co-Design Network noted the importance of presenting data describing the identity of carers for Aboriginal and Torres Strait Islander children and young people living in out of home care (for example kinship relationships, such as grandparents, aunts and uncles).
- The Directorate is working to improve recording of Aboriginal and Torres Strait Islander identity for carers, and to complete genograms for children and young people prior to placement in out of home care which describes the significant people in their lives, whether biologically connected or part of their community.

Placement decision-making

- The *Family Matters Report 2020* noted data gaps in relation to how the ATSCPP is implemented in placement decision-making and recommended additional data be reported, including:
 - the proportion of Aboriginal and Torres Strait Islander children and young people in out of home care with completed genograms/family maps
 - the proportion of Aboriginal and Torres Strait Islander children and young people in out of home care for whom there was consultation with an Aboriginal Controlled Community Organisation in the determination of placement, and for whom there was a family group conference or family-led decision-making meeting regarding placement decisions
 - reporting placement types for annualised entry cohorts as well as for all children and young people living in out of home care.

Cultural Plans

- The *Our Booris, Our Way Review* and the *Family Matters Report 2020* noted the importance of measuring the quality of development and implementation of Cultural Plans. Identified aspects of quality include: plans must have input from the child and the family, and the plans should be quality-assured by an Aboriginal Community Controlled Organisation.

Children and young peoples' transitions from out of home care

- The Co-Design Network noted the importance of data describing children and young people's exits from out of home care, including:
 - How many Aboriginal and Torres Strait Islander children and young people return to their families and how many re-entered out of home care after returning to their families?
 - Detailed data for children and young people leaving out of home care, to understand the nature of their exit: *Did they turn 18 years old or did something else happen? What was it?*
 - Data for the types of supports young people have accessed before and at age 18 years old?
 - What has happened for young people between ages 18 to 25 years old who have been in out of home care?

Interactions with the youth justice system

- The *ACT Aboriginal and Torres Strait Islander Agreement 2019–2028* identifies one of its significant priority areas as Aboriginal and Torres Strait Islander peoples, their families and communities thrive in a safe environment and have equitable access to justice and culturally safe restorative justice, prevention and diversion programs.
- The Co-Design Network noted the importance of data relating to young people who have interactions with both the child protection and youth justice systems, including:
 - the number of Aboriginal and Torres Strait Islander young people who became homeless or entered the youth justice system after leaving out of home care
 - supports available to Aboriginal and Torres Strait Islander children and young people during or after interactions with the youth justice system.

Support for children and young people's health needs

- The Co-Design Network noted data is not available for how long families wait for children to receive health appointments such as paediatricians and other health services.

Levels of investment in supports for Aboriginal and Torres Strait Islander families

- The *Family Matters Report 2020* noted data gaps in relation to reporting by state and territory governments in respect of the investment in Aboriginal and Torres Strait Islander families interacting with child protection and out of home care systems. The Report recommends reporting of expenditure differentiates between Aboriginal and Torres Strait Islander-specific services delivered by Aboriginal and Torres Strait Islander community-controlled organisations and those delivered by governments and other services.
- The Co-Design Network raised similar concerns, noting the need to understand issues such as:
 - How much effort has the government made to assist children and young people to stay with or return to their families?
 - How much support and subsidy do Aboriginal and Torres Strait Islander kinship and foster carers receive in comparison to their cost of living; especially support for grandparents to care for their grandchildren?

Complaints handling

- The Co-Design Network noted data is not currently available for complaints handling, including how many complaints the government has received and how these have been handled.

Service system intersections

The Outcomes Framework for the PSE does not exist in isolation and there are a range of commitments and priorities that intersect with the Strategy at both the national and Territory level, such as the:

- *ACT Aboriginal and Torres Strait Islander Agreement 2019–2028*
- ACT Wellbeing Framework
- *National Framework for Protecting Australia’s Children 2009–2020*
- *ACT Disability Justice Strategy 2019–2029*
- ACT Restorative Cities initiative.

10. Conclusion

The finalisation of PSE Stage 1 marks the formal end of the Strategy implementation period as defined within the Strategy itself, from 2015–2020. It is acknowledged the Strategy continued to be used as the ACT’s out of home care framework and services continued to be offered beyond 2020 in preparation for a refreshed Strategy which will be delivered in 2022.

The PSE provided valuable data throughout its collection and following its completion to better inform how the Directorate and partner organisations offered services to vulnerable children, young people, families and carers. Throughout the collection of data, the Directorate took an iterative approach to continually review and consider service improvements rather than wait for the final document before proceeding. This meant system changes could occur to respond to need with some immediacy. This could be seen with the commissioning of new FFT services whereby a gap was identified in service provision and then offered to ensure families could access the supports they needed. The PSE Stage 1 in its completion now gives an opportunity to further reflect and refine the service system as it shifts into a maturation period.

The Directorate has begun working on PSE Stage 2 and, as with Stage 1, is continuing to learn from what is being said and what is being heard in relation to how people have engaged with the service system. This

forms an important conversation for the Directorate moving forward ensuring the voice of people with lived experiences are elevated in service design and delivery.

Finally, the Directorate would like to thank everyone who contributed to the development of Stage 1 PSE and acknowledge the children, young people, families and carers, and CYPS and partner organisation staff whose data is shared and considered in this report.

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Appendix A: Key terms and Abbreviations

TERM	MEANING
<i>A Step Up for Our Kids</i>	<i>A Step Up for Our Kids</i> Out of Home Care Strategy 2015–2020 (Strategy) was the ACT Government’s Strategy to guide the delivery and reform of the out of home care sector.
Out of home care	<p>In the ACT, children and young people in out of home care are those children and young people who are unable to live with their families and are living in a placement approved by CYPS, for which there is ongoing case management and financial payment (including where a financial payment has been offered but has been declined by the carer). This includes both court ordered and voluntary placements as well as placements made for the purposes of providing respite for parents and carers.</p> <p>Children and young people living in out of home care in the ACT are typically living in a kinship care, foster care or residential care placement.</p>
Partner agencies	<p>The organisations and services funded under the Strategy:</p> <ul style="list-style-type: none"> • Barnardos Australia (Barnardos) as the lead agency for the ACT Together consortium delivers a continuum of care including kinship, foster and residential care. • Uniting Children and Families ACT (Uniting) delivers preservation and reunification services for families with children aged zero to 12 years old. • Karinya House for Mothers and Babies (Karinya House) delivers preservation services and short-term accommodation to mothers and babies. • Gugan Gulwan Youth Aboriginal Corporation (Gugan Gulwan) in partnership with OzChild delivered the Family Functional Therapy (FFT) program. CREATE Foundation (CREATE) offers children and young people engagement support services. • Australian Red Cross Society provides advocacy support services for birth families. • Carers ACT Ltd provides advocacy support services to kinship and foster carers.
Therapeutic trauma-informed service system	<p>A therapeutic trauma-informed service system is one in which organisations, service providers, carers and families are aware of the impact that trauma has on a child or young person’s behaviour, health and development. The service system focuses its resources in helping children heal from trauma by building safe, stable, secure and nurturing relationships. Based on this, therapeutic and trauma-informed care and practice is provided to both children and young people both already in care and at risk of entering care.</p>

TERM	MEANING
Qualitative data	In the PSE, qualitative data refers to data obtained through survey, conversation and consultation with children, young people, families, representative bodies and service providers. These data reflect the lived experiences of families interacting with the child protection service system.
Quantitative data	In the PSE, quantitative data refers to data obtained by counting people or events, such as numbers of children and young people, or numbers of admission of children and young people to out of home care. These data reflect broad changes and trends and may not reflect the lived experiences of all families interacting with the child protection service system.
ABBREVIATIONS AND ACRONYMS	
ACRONYM	MEANING
CSD	Community Services Directorate
CYF	Children, Youth and Families
CYPS	Child and Youth Protection Services
CYRIS	Child and Youth Record Information System
EPR	Enduring Parental Responsibility
FGC	Family Group Conferencing
FFT	Functional Family Therapy
FFT-CoC	Functional Family Therapy—Continuum of Care
FFT-CW	Functional Family Therapy—Child Welfare
MSE	Mid-Strategy Evaluation
PSE	Post-Strategy Evaluation
RoGS	Report on Government Services
SNAICC	Secretariat of National Aboriginal and Islander Child Care

Appendix B: Post Strategy Evaluation logic models

Figure 1: High-level logic model for the PSE

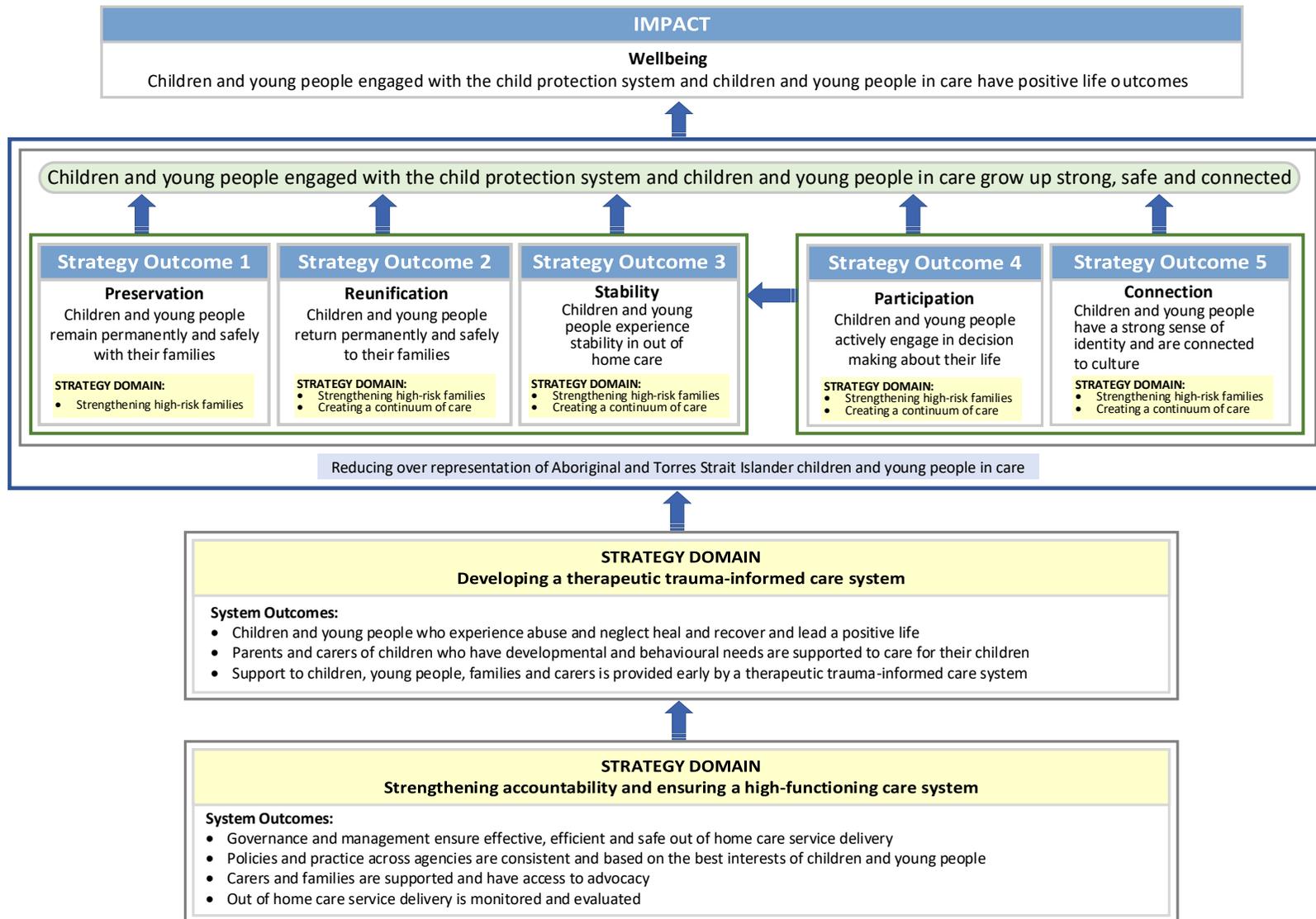


Figure 2: Logic Model—Strengthening high-risk families domain

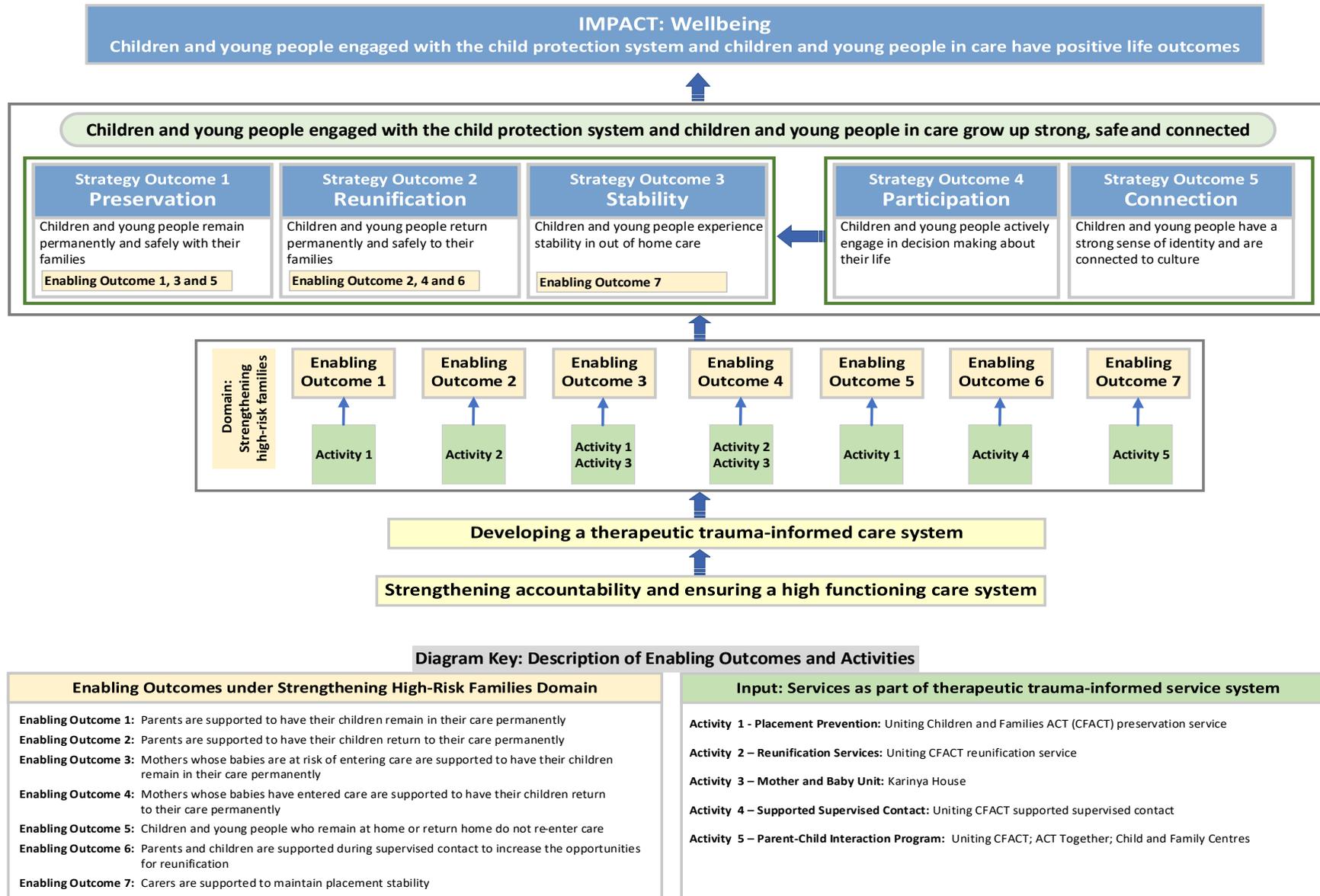


Figure 3: Logic Model—Creating a continuum of care domain

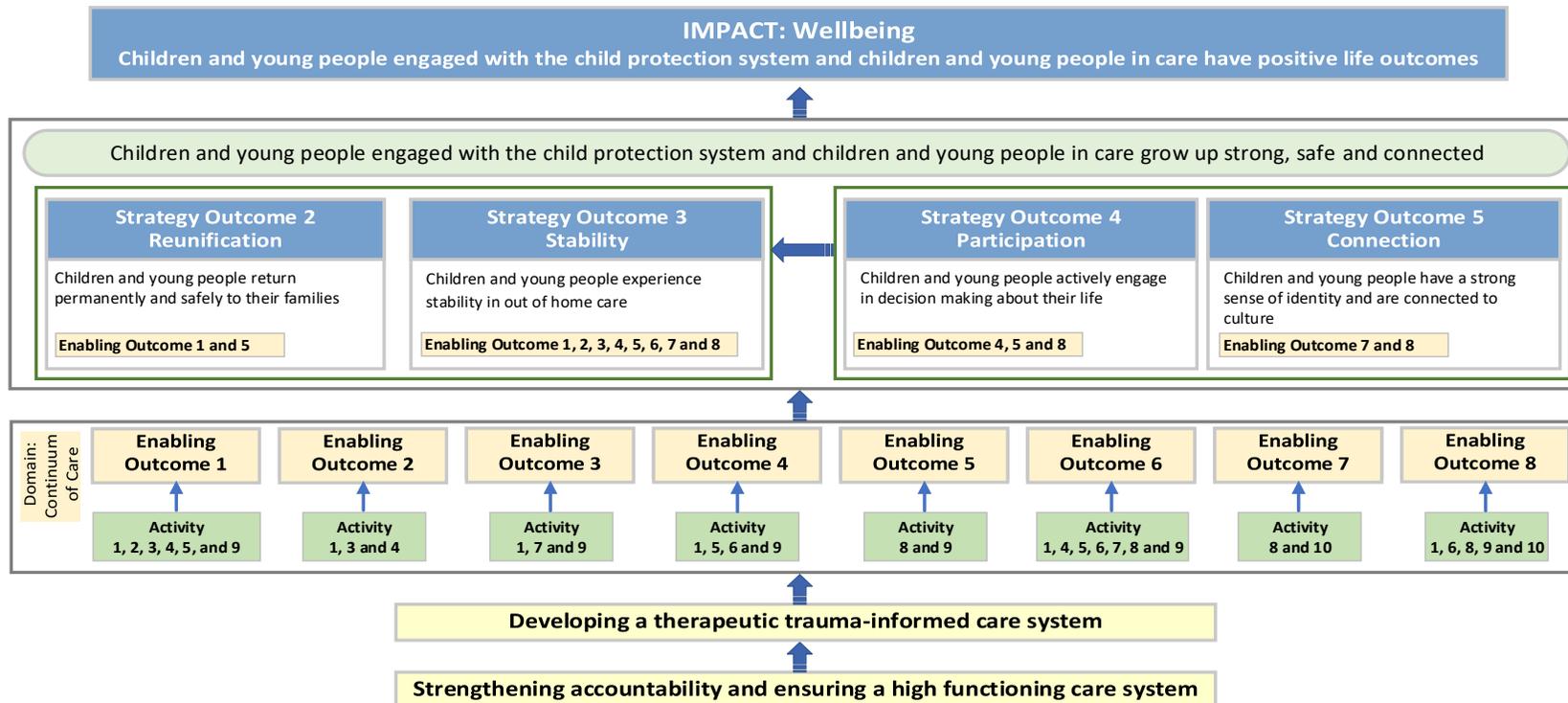


Diagram Key: Description of Enabling Outcomes and Activities

Enabling Outcomes under Creating a Continuum of Care Domain	Input: Services as part of therapeutic trauma-informed service system
Enabling Outcome 1: Children and young people in care have their care needs met	Activity 1: Continuum of Care
Enabling Outcome 2: Children and young people in care live permanently with families in a time that is responsive to their developmental needs	Activity 2: Outsourcing case management
Enabling Outcome 3: Children and young people in care have their health needs identified and addressed as early as possible	Activity 3: Supports for permanency
Enabling Outcome 4: Children and young people in care received targeted support in education and training	Activity 4: Outsourcing kinship care
Enabling Outcome 5: Children and young people in care have their voice heard	Activity 5: Revised reimbursement
Enabling Outcome 6: Children with complex needs and challenging behaviours in care experience better targeted support	Activity 6: Joint education initiative
Enabling Outcome 7: Aboriginal and Torres Strait Islander children in care stay connected to family, culture and country	Activity 7: Child health passport
Enabling Outcome 8: Young people experience a positive transition into adulthood with strong family and cultural connections	Activity 8: Empowering children and young people
	Activity 9: Therapeutic residential care
	Activity 10: Extending continuum of care

Strategy high-level logic models

The following is a description of the terms used in the high-level logic models for the PSE as shown at Appendix A: *Figure 1 - High-level logic model for the Post-Strategy Evaluation*, *Figure 2 - Logic Model—Strengthening high-risk families domain* and *Figure 3—Logic Model—Creating a continuum of care domain*.

- *Impact*: The Strategy's overall impact is the safety and wellbeing of children and young people in families who have engaged with the child protection system and children and young people in out of home care (Strategy, pg.5). The impact for the children and young people includes positive life outcomes at parity with their peers, including employment, education, health, socio-psychological outcomes etc.

If the Strategy achieved its intended outcomes as listed in Table B1 below, then the Strategy can positively impact children's and young people's safety and wellbeing. However, there are many other factors outside the Strategy's control that may also affect the wellbeing of children and young people. Therefore, the extent to which these longer-term impacts have been realised will not be the focus of the PSE.

- *Final Strategy outcomes*: In order for the Strategy to contribute to improved safety and wellbeing for children and young people, the Strategy was emphatically child-centred and aimed to ensure children and young people engaged with the child protection system and children and young people in care grew up strong, safe and connected. The 5 Strategy outcomes—preservation, reunification, stability, participation and connection (refer to Table B1 below pg.83)—define what success was for the Strategy and was the focus for understanding the effectiveness of the PSE.
- *Enabling outcomes*: These enabling outcomes are the necessary pre-conditions for the final Strategy outcomes. These enabling outcomes are the outcomes of the 2 domains: *Strengthening high-risk families* and *Creating a continuum of care*. The logic models of these 2 domains in Appendix A: *Figure 2—Logic Model of Strengthening high-risk families* and *Figure 3—Logic Model of Creating a continuum of care* depict the intended causal pathways between the enabling outcomes and the Strategy outcomes.
- *System outcomes*: The domain *A Therapeutic trauma-informed care system* aimed to foster positive, safe and healing relationships for children and young people involved in child protection and out of home care. It was informed by a sound understanding of trauma, attachment and child development (Strategy, pg.6). The implementation of this domain involved specialist teams, services and funded organisations as well as comprehensive developmental and psychological assessments for children and young people to inform the development of therapeutic plans and care plans.

As the Strategy emphasised, developing specialist capabilities and applying new approaches to practice takes time (Strategy, pg.26)²⁰. In addition, the impacts of these system outcomes on the outcomes for children and young people (refer to Table B1 below pg.83) will lag and evaluation will require improved data (compared with indicators used in the MSE such as the number of staff who

²⁰ The Strategy states that transforming the ACT out of home care services into trauma-informed, therapeutic care services will require a sustained effort over a number of years. It will require upskilling all participants in the care system, building the availability of a skilled workforce including increasing therapeutic resources in the ACT, and aligning organisational culture and service delivery practice with this approach (Strategy, pg.26)

have undertaken training). The PSE undertook preliminary evaluation in the first stage, mainly through available descriptive data and qualitative research with children and young people and their birth parents. Improved methodologies will be developed for the second phase of the PSE, given this domain does in theory contribute significantly to both *Strengthening high-risk families* and *Creating a continuum of care*.

- *System Outcomes: Strengthening accountability and ensuring a high functioning care system* provided the governance environment to the delivery of the out of home care services. The PSE will provide data on the operation of this domain in the second stage using methodologies including maturity assessment, audit and descriptive data.

Table B1: Final Strategy Outcomes

Strategy Outcomes	Explanation
Preservation	Children and young people permanently and safely remain with their families.
Reunification	Children and young people permanently and safely return to their families.
Stability	When a safe return to birth family is not possible, children and young people in care experience: <ul style="list-style-type: none"> • stability in their placements including stability in their relationships with family, carers and community, and/or • permanent care at the soonest possible opportunity, and/or • experience a smooth, positive transition into adulthood.
Participation	Both children and young people in families with high risk and children and young people in care actively engage in decision-making about their life.
Connection	Children and young people in care have a strong sense of identity and are connected to their culture.

Note: The original Strategy used the descriptor high-risk families and birth families. During the course of the Strategy, the understanding and use of key concepts are evolving. For example, the Strategy references birth families, however, in practice many family and kinship relationships provide a safe and loving home for children and young people. The PSE evaluation plan deliberately uses these terms as needed to reference the original Strategy and to be inclusive of all families.

Appendix C: Evolving Outcomes Framework and Indicators

Stage 1 of PSE uses a combination of quantitative data analysis and preliminary qualitative data gained through engagement with stakeholders, including children, young people and their families with lived experience of the child protection and out of home care system.

The PSE was structured to maximise the use of immediately available data and was thus conducted over 2 stages. Quantitative data collection for Stage 1 of the PSE was aligned to a set of Headline Indicators. These data have been externally validated to ensure credibility of findings and assumptions.

For Stage 2 of the PSE, the Indicators have been refined and improved, expanding scope and disaggregation of data (Table C1). The Indicators consider three key cohorts:

- children and young people who were at risk of entering the statutory child protection system
- children and young people who were involved with the child protection and/or out of home care systems
- children and young people who transitioned from out of home care.

Data for all cohorts was disaggregated by age and sex or gender.

Data for all cohorts was also disaggregated by Aboriginal and Torres Strait Islander identity, and Aboriginal and Torres Strait Islander-specific Outcomes and Indicators were used, where appropriate.

A continuous improvement process and maturity pathway approach were used to further refine and nuance Indicators as the evaluative work progresses.

Table C1: The Strategy Outcomes and Indicators for which quantitative data will be provided in Stage 2 of the PSE.

Outcome	PSE Stage 2 Indicator
Preservation	Children and young people permanently and safely remain with their families.
Children and young people entering out of home care (Expansion of Indicator 1.1)	Number of children and young people entering out of home care, by age, Aboriginal and Torres Strait Islander identity, nature of entry and placement.
Children and young people referred to and engaging with Intensive Family Support Services (Expansion of Indicators 1.1 to 1.5)	Number of children and young people subject to Child Protection Reports, open Child Protection Cases, Appraisal or Substantiation of reported child abuse or neglect, and/or living at home under Care and Protection Orders. Number of these children and young people referred to early support/family support services.
	Number of children and young people whose families consented to engage with services. Number of children and young people whose families completed the program or expected period of engagement (as defined by each service or program).

Outcome	PSE Stage 2 Indicator
	<p>Number of Child Concern Reports, Appraisals and Substantiations children and young people are subject to in the 12 months before, during, and in the 12 months after engagement (compared to children and young people whose families did not engage).</p> <p>Number of children and young people who enter out of home care and/or detention in the 24 months after engagement (compared to children and young people whose families did not engage).</p>
Reunification	Children and young people permanently and safely return to their families.
<p>Children and young people exiting out of home care (Expansion of Indicator 2.1)</p>	Number of children and young people exiting out of home care, by age, Aboriginal and Torres Strait Islander identity and nature of exit (including reaching 18 years-old and reunification with family).
<p>Children and young people referred to and engaging with Intensive Family Support Services (Expansion of Indicators 2.2 to 2.3)</p>	<p>Number of children and young people referred to restoration support services.</p> <p>Number of children and young people whose families consented to engage with services.</p> <p>Number of children and young people whose families completed the program or expected period of engagement (as defined by each service or program).</p> <p>Number of children and young people who do not re-enter out of home care within 24 months.</p>
Stability	Children and young people experience stability in out of home care
<p>Pathways to permanency (Expansion of Indicator 3.1)</p>	<p>Number of finalised Adoption or Enduring Parental Responsibility orders issued for children and young people living in out of home care.</p> <p>Time taken from entry into an out of home care placement to issuing of a finalised Adoption or Enduring Parental Responsibility Order in respect of that placement.</p>
<p>Stable, home-based placements (Expansion of Indicators 3.2 and 3.3)</p>	<p>Number of children and young people living in out of home care, by placement and order type.</p> <p>Number of children younger than 12 years-old living in a residential care placement.</p>
<p>Transitions from care (New Indicators)</p>	<p>Number and per cent of young people aged 15 years and older who had a transition plan to adulthood.</p> <p>Number and per cent of young people aged 18 years and older who are living in post-care supported placements.</p>

Connection	Children and young people in care have a strong sense of identity and are connected to their culture
Continuation of Indicator 4.1	Number of Aboriginal and Torres Strait Islander children and young people in out of home care living with family and number living with Aboriginal and Torres Strait Islander carers.
Continuation of Indicator 4.2	Number of Aboriginal and Torres Strait Islander children and young people in out of home care who have a Cultural Plan.

Appendix D: Quantitative data sources and counting rules

All data sets used in the Report have data available for the same time periods, and the longest informative time period is used for each data set. Data presented in this report is derived from the following sources:

- ACT Child Protection National Minimum Data Sets (NMDS)
- Report on Government Services (RoGS) 2021, Chapter 16: *Child protection services*.
<https://www.pc.gov.au/research/ongoing/report-on-government-services/2021/community-services/child-protection>
- AIHW *Child protection Australia* 2013–14, 2014–15, 2015–16, 2016–17, 2017–18, 2018–19, 2019–20. <https://www.aihw.gov.au/reports-data/health-welfare-services/child-protection/overview>
- *A Step Up for Our Kids* Snapshot Report April 2021.
<https://www.communityservices.act.gov.au/ocyfs/children/child-and-youth-protection-services/a-step-up-for-our-kids/out-of-home-care-strategy-2015-2020>
- Custom data extractions from CYRIS
- Data provided by community partners Uniting Children and Families ACT, Karinya House for Mothers and Babies Inc and Gugan Gulwan Youth Aboriginal Corporation in partnership with OzChild.

Details of all data sources, and of any limitations or qualifications to use and interpretation of data, are provided throughout the Report and in this Appendix.

Data derived from ACT Child Protection NMDS are reported annually in Report on Government Services (RoGS), Chapter 16: *Child protection services* and in AIHW *Child protection Australia*. Instances where data is sourced from summary tables in RoGS 2021 or *Child protection Australia* and instances where data is sourced directly from NMDS files are indicated in the text.

Throughout the Report, the Aboriginal and Torres Strait Islander identity of children and young people and their carers is presented, where known. It should be noted this data reflects the Aboriginal and Torres Strait Islander identities of children and young people recorded in CYRIS. As noted in the *Our Booris, Our Way Final Report*, Recommendation 19 and Recommendation 20, there are limitations to current identification of children, young people, family members and carers. Individual case review may be required to understand if the Aboriginal and Torres Strait Islander identities recorded reflect independent Aboriginal and Torres Strait Islander community oversight and assurance of the identification of children and young people (Recommendation 19) and the Family Matters definition of kinship (Recommendation 20).

Section 3 Overview of the ACT out of home care system

Care and Protection Orders in the ACT

In the ACT, ‘**Long-term**’ Care and Protection Orders are finalised orders with a duration greater than 2 years and ‘**Short-term**’ orders are finalised orders with a duration of 2 years or less.

Care and Protection Orders are either granted by the ACT Childrens Court on an **interim** or **final** basis.

An interim Care and Protection Order is usually granted at the first application to put in place short-term protective arrangements, and to provide time to evaluate the arrangements before finalising the order.

A final Care and Protection Order is granted when the ACT Childrens Court is satisfied it has sufficient information to determine a child or young person is in need of care and protection and that making a Care and Protection Order is in the child or young person's best interests.

Emergency Actions are actions, lasting for not longer than 2 working days, made under Section 410a of the *Children and Young People Act 2008*.

Long-term orders with **Third Party Parental Responsibility** include orders with a Family Group Conference Agreement (Section 390 of the *Children and Young People Act 2008*), Final Child Protection order—Enduring Parental Responsibility (Section 464 2c/Section 482) or Enduring Parental Responsibility (EPR) (Section 260).

Indicator 1.1: Number of children and young people entering out of home care and Indicator 2.1: Number of children and young people exiting out of home care.

Data are from RoGS 2021: *Child protection services*, Tables 16A.15 and A.18.

In the ACT, children and young people in **out of home care** are those children and young people who are unable to live with their families and are living in a placement approved by CYPS, for which there is ongoing case management and financial payment (including where a financial payment has been offered but has been declined by the carer). This includes both court ordered and voluntary placements as well as placements made for the purposes of providing respite for parents and carers.

Some children and young people are living in out of home care because they are the subject of a substantiation of abuse or neglect and need a more protective environment. Children and young people may also be living in out of home care when their parents are not capable of providing adequate care, when alternative accommodation is needed during times of conflict, or when parents or carers need respite.

Children and young people living in out of home care in the ACT are typically living in a **kinship care**, **foster care** or **residential care** placement.

- **Kinship care:** Children and young people living with caregivers who are members of their biological or cultural extended family, such as aunts, uncles or grandparents. These carers are authorised and receive a financial subsidy for the care of the child or young person.
- **Foster care:** Children and young people living with caregivers who are not members of their biological or cultural extended family. These carers are authorised and receive a financial subsidy for the care of the child or young person.
- **Residential care:** Children and young people living in a residential care facility under the care of paid staff. In the ACT, residential care includes children and young people living in a facility where support staff are present on-site, and also young people who are in supported independent living arrangements, as part of their transition from out of home care.

A small number of children and young people living in out of home care in the ACT are sometimes in **other living arrangements**, such as:

- **Semi-independent living:** Accommodation approved and funded by CYPS where the child or young person lives independently, such as private board or being the lead tenant in a household.

- **Other out of home care placements:** Out of home care placements that are approved and funded by CYPS but are not kinship, foster or residential care placements, for example boarding schools, hospitals or motels.
- **Children on immigration orders:** Unaccompanied minors who are living in CYPS approved and funded kinship or foster care placements.
- **Pre-adoption or supported adoption placements:** Children with additional needs where the adoptive parents receive ongoing reimbursement.
- **Over-18-years-old supported placements:** Where young people over 18 years old continue to live with CYPS approved carers and continue to receive funding support.

Children and young people are not considered to be in out of home care if they:

- enter and exit a funded placement on the same day
- are in placements solely funded by disability services, psychiatric services or specialist homelessness services
- are in juvenile justice facilities
- are in overnight childcare services
- are self-placed (in a living arrangement not approved by CYPS).

The number of children and young people **entering out of home care** each financial year includes all children who entered out of home care for the first time during the reporting period, as well as children who returned to out of home care after exiting more than 60 days previously. Children and young people who meet this definition of entering out of home care more than once during a financial year are only counted at their first entry.

The number of children and young people **exiting out of home care** each financial year includes all children and young people who leave out of home care, either to return home to their family or because they have reached 18 years old. Each child or young person is counted once, regardless of how many times they exit out of home care during that financial year. If a children or young person leaves out of home care and then returns within 60 days, this is not counted as an exit.

Note that from 2018–19 onwards, the way the number of children and young people in out of home care was reported nationally changed. Some types of out of home care that were previously counted were excluded from the national definition of out of home care (see Table D1). The ACT Community Services Directorate has continued to compile numbers for all types of out of home care, to allow comparison of numbers prior to and after 2018–19 and visualisation of trends over time. This means that the numbers of children in out of home care presented in *Report on Government Services (RoGS)* and *AIHW Child protection Australia* for 2018–19 and 2019–20 will differ from those presented in this Report, because some types of care are excluded from national reporting but are included here.

Table D1. Changed national definition of out of home care.

National definition of out of home care prior to 2018–19	National definition of out of home care since 2018–19
<p>Children and young people living in:</p> <ul style="list-style-type: none"> • Kinship care • Foster care • Residential care • Semi-independent living • Respite placements • Boarding school, hospital, motels and other uncategorised placements • Over 18 supported placements • Pre-adoption and supported adoption placements • Children and young people on Enduring Parental Responsibility Orders • Children and young people on immigration orders (unaccompanied minors) 	<p>Children and young people living in:</p> <ul style="list-style-type: none"> • Kinship care • Foster care • Residential care • Semi-independent living • Respite placements • Boarding school, hospital, motels and other uncategorised placements

Indicator 1.2: Number of children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family consenting to engage with Uniting preservation services.

Indicator 1.3: Number of children and young people who did not enter out of home care within 3, 6, 12, 18 and 24 months of their family exiting Uniting preservation services.

Indicator 2.2: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services.

Indicator 2.3: Number of children and young people who had exited out of home care at the time their family exited Uniting reunification services who did not subsequently re-enter out of home care within 3, 6, 12, 18 and 24 months.

Data for these Indicators was obtained from Uniting (dates of consent to engage with services and exit from services and case closure reasons) and from CYRIS (whether a child or young person was or was not living in out of home care at the date of consent to engage, exit from services and 3, 6, 12, 18 and 24 months subsequent to these timepoints).

Children and young people are considered to be receiving a Uniting preservation service if they are not in out of home care and are at home with their families on the date of consent to engage. Children and young people are considered to be receiving a Uniting reunification service if they are in out of home care on the date of consent to engage or if they are living in informal kinship care arrangements where the intent of the referral is reunification with parents.

Children and young people are considered to be living in out of home care if they are in a CYPS-approved and funded residential care, kinship care or foster care placement. Children and young people are not considered to be in out of home care if they enter and exit a funded placement on the same day, are in placements solely funded by disability services, psychiatric services or specialist homelessness services, are in juvenile justice facilities, are in overnight child-care services, or are self-placed. Young people aged 18 years or older are excluded from these data, as they cannot legally be placed into out of home care.

Family consent to engage with Uniting preservation support services is the date on which one or more parent(s) provided consent to Uniting to engage with services (as recorded by Uniting).

The date of exiting Uniting preservation services is the date on which Uniting recorded closing the family's case (as recorded by Uniting).

Case closure reasons are recorded by Uniting Case Workers at the time of case closure.

The number of children young people represented at each time point differs, as not all children and young people will have experienced 3, 6, 12, 18 or 24 months since their family either commenced or completed engagement with a Uniting preservation or reunification service. Data represents outcomes for all episodes of service, hence an individual child or young person may appear at multiple timepoints, if they received multiple episodes of service.

Indicator 1.4: Number of mothers who exited the Karinya House program with their goals achieved and in sustainable independent living.

Data provided by Karinya House are the total number of mothers and babies receiving a service from the Mother and Baby Service and the total number who exited the service having successfully achieved their goals and sustainable independent living (as recorded by Karinya House). For this service, exit is defined at the point at which either CYPS or Karinya House close off their support period

Indicator 3.1: Time taken from entry into an out of home care placement to issuing of a finalised Adoption or Enduring Parental Responsibility Order in respect of that placement.

Adoption Order: Adoption is a legal process that permanently transfers all the rights and responsibilities from a child or young person's birth parent(s), or another person with parental responsibility for the child or young person, to their adoptive parent(s), including the issuing of a new birth certificate for the child or young person. Legally, these are orders made by a competent authority under adoption legislation, by which the adoptive parent(s) become the legal parent(s) of the child.

Enduring Parental Responsibility (EPR) order: In the ACT, the *Children and Young People Act 2008* makes provision for issuing of EPR Orders for children and young people on Care and Protection Orders. EPR Orders transfer responsibility for day-to-day and long-term decisions for a child or young person to an approved foster or kinship carer, without severing legal ties between the child or young person and their birth family and without changing the legal identity of the child or young person. Legally these orders are described as an order transferring all duties, powers, responsibilities and authority to which parents are entitled to by law to a nominated person(s) whom the court considered appropriate.

The number of Adoption and EPR Orders issued were counted in the financial year of issue. The time period between when a child or young person first entered the out of home care kinship or foster placement for which their Adoption or EPR Order was subsequently made to the date of issuing of that order was calculated. Note that some children or young people may have entered out of home care on an earlier date than the one used in these calculations, as some children and young people may have lived in other out of home care placements before entering the placement for which their Adoption or EPR Order was made.

Indicator 3.2: Number of children younger than 12 years-old living in a residential care placement.

Data is from the *A Step Up for Our Kids Snapshot Report*, March 2021. Data are for the number of children aged zero to 11 years old and the number of young people aged 12 years old or above who have lived in a residential care placement during each quarter.

Indicator 3.3: Number of children and young people exiting out of home care who had one or 2 placements (by length of time in continuous care preceding exit).

Data are from RoGS 2021: *Child protection services*, Tables 16A.15 and A.18. For those children and young people who have in out of home care for 30 days or more, and who have been on a Care and Protection Order, the number of different placements the child or young person has lived in during their episode in out of home care is calculated. These data show the number of different kinship care, foster care or residential care placements a child or young person has lived in, not the number of times a child or young person has moved between different places and excludes placements which were solely for the purpose of providing respite.

Indicator 4.1: Number of Aboriginal and Torres Strait Islander children and young people in out of home care living with family and number living with Aboriginal and Torres Strait Islander carers.

Data are from RoGS 2021: *Child protection services*, Tables 16A.21 and A.22. Placement types and the cultural identity of children, young people and carers are recorded as at 30 June of each financial year.

Indicator 4.2: Number of Aboriginal and Torres Strait Islander children and young people living in out of home care who have a Cultural Plan recorded.

Data are from the *A Step Up for Our Kids Snapshot Report*, March 2021. Data show the number of Aboriginal and Torres Strait Islander children and young people who are living in out of home care and for whom Parental Responsibility resides with the Director-General of the Community Services Directorate and the number for whom a Cultural Plan is recorded in CYRIS, at the end of each quarter.