

Pathways of Care Longitudinal Study

The artist is a young person who grew up in care.

"The banner shows many pathways through the care system with a carer or caseworker acting as a guide, ultimately leading to independence for every young person. Whether we live with family or strangers, study, work, or just try our best, the paths we choose and are guided through in our youth are what we use to prepare ourselves for the happiest adulthood we can achieve" Billy Black

Experiences of Aboriginal children and young people in OOHC

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Outline

- Previous national research
- Principal areas of analysis
- Principal findings
- Study contact details





What We Know from the National Literature





Principal Areas of National Research



- Over-representation statistics
- OOHC system outcomes
- Social and family backgrounds
- Cultural identity and connections
- Developmental status: health and wellbeing
- The carers of Aboriginal children
- Services for Aboriginal children/ young people in OOHC







National Child Protection Statistics

AIHW Child Protection Statistics (2015-16)

- CP notifications: 157.6 per 1000 for Aboriginal children vs. 22 per 1000 for non-Aboriginal children.
- Substantiations: 43.4 per 1000 for Aboriginal children vs.
 6.4 per 1000 for non-Aboriginal children.
- OOHC in NSW: 71.6 per 1000 Aboriginal children vs. 6.9 per 1000 for non-Aboriginal children.







System Outcomes

- Reunification rates: There are several Australian studies which show that Aboriginal children tend to take longer to go home.
- Placement stability: Little evidence that Aboriginal children are any more likely to experience placement instability.
- Type of care: Aboriginal children are generally more likely to be placed into kinship care.









- Absolute Number of Risk Factors: Aboriginal families are statistically more likely to be affected by a greater range of family complexities (e.g., financial problems, homelessness, substance misuse).
- Specific Factors: Aboriginal children are generally more likely to be placed into care because of neglect (which may have a broader definition and be influenced by cultural assumptions?).









Importance of the Aboriginal Placement Principle

- Aboriginal children to be placed with Aboriginal families wherever possible
- Family > Kin > Community/ Home country > Foster care elsewhere
- Importance of maintaining sense of identity, 'connection to country', knowledge of cultural history
- Learning from the Bringing Them Home report









Audits of 980 case-files of Aboriginal children

- 42% of children placed away from extended families
- 25% guardianship children had no cultural support plans
- 40% of children separated from at least some of their siblings
- 60% of children not placed with Aboriginal carers
- Term kinship care extended very broadly: not really 'kin'
- Aboriginal children not always being identified in the system

Caveats: results also reflect choice of families; lack of kin carers





Developmental Status: Health & Wellbeing



LSAY Study:

- Differences in attainment in literacy and maths; Aboriginal children less likely to complete year 11 and 12
- Gap in performance gets larger as children get older

WA Aboriginal Child Health Survey:

- SDQ: 25% of Aboriginal children in clinical range vs. 15% of non-Aboriginal children
- Aboriginal parents in WA: higher % of birth complications; teenagers more likely to be engaged in 'risky' health behaviours (smoking, alcohol use)







Focus of this paper

- Developmental progress of Aboriginal children in the POCLS.
- Cultural and family connections







Data sources

- Analyses in this presentation draw upon data from Waves 1-3 of the POCLS.
- Data were drawn from interviews with carers; caseworkers and teachers and FACS administrative data.







Sample details

- A total of 1479 children are included in the longitudinal component of the POCLS (1285 in the initial wave)
- 574 (38.8%) were identified as Aboriginal (based on administrative OR subsequent carer interviews)
- 905 (61.2%) were identified as non-Aboriginal
- Equal division of boys and girls in both groups
- Mean age of 5 years upon entry to the study which makes the mean age around 8 years by Wave 3.





Developmental Trajectories







POCLS Outcome Domains

- Physical health and safety
- Physical development (fine and gross motor skills)
- Socio-emotional development (psychological wellbeing and behaviour)
- Social competence (e.g., communication skills)
- Cognitive ability (fluid intelligence)
- Verbal reasoning







Physical health

- 5-point general rating of current child health
- 1 = Excellent to 6 = Very poor.
- Around 2% in both groups (Aboriginal and non-Aboriginal) had 'fair' to 'very poor' health and this varied little across waves.
- The vast majority (98%) in both groups were rated as having 'good' to 'excellent' health.







Development Measures

CBCL = Child Behaviour Checklist which has clinical norms and cut-off scores for age 3-17 years (external behaviour and internal psychological problems);

ASQ = Ages and States Questionnaire for 9-66 months of age (developmental domains: motor, social and communication skills).







CBCL National Norms: Categories

	6-12 years	13-17 years
Internalising	13.3	16.4
Externalising	12.7	19.6
Total	14.1	18.9

From Sawyer et al. (2007), Medical Journal of Australia. National Survey of Mental Health and Wellbeing (2001).







CBCL: Internalising

- Captures: Depression/ Anxiety in children aged 3-17 years.
- Aboriginal children (15.8% clinical at both Wave 1 and 3).
- Non-Aboriginal children (18.6% clinical at W1 and 9.5% at Wave 3).
- Aboriginal children not improving.







CBCL Externalising

- Captures behavioural/ conduct problems in 3-17 year olds.
- Aboriginal children: 30.5% clinical at Wave 1 and 31% at Wave 3.
- Non-Aboriginal children: 25.5% clinical at Wave 1 and 23.2% at Wave 3.
- Aboriginal children are not improving







Ages and Stages Questionnaire

 Aboriginal children following positive trajectory across 3 waves (around 5 year period)

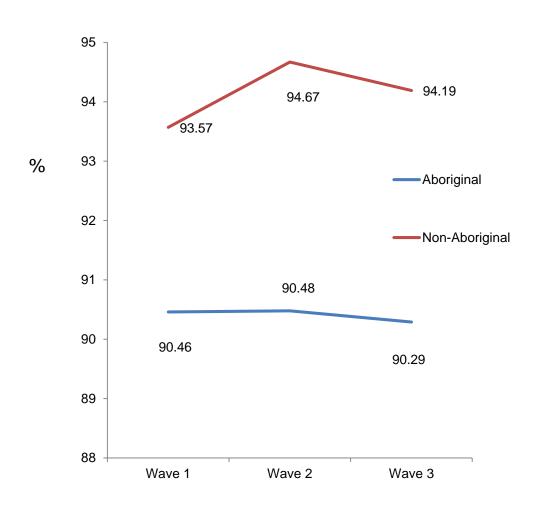
Clinical concerns	Aboriginal %	Non-Aboriginal %
Personal and social	11.1	9.8
Communication	14.2	12.8
Fine motor	14.2	17.1
Gross motor	8.7	8.1
Problem solving	9.9	12.4











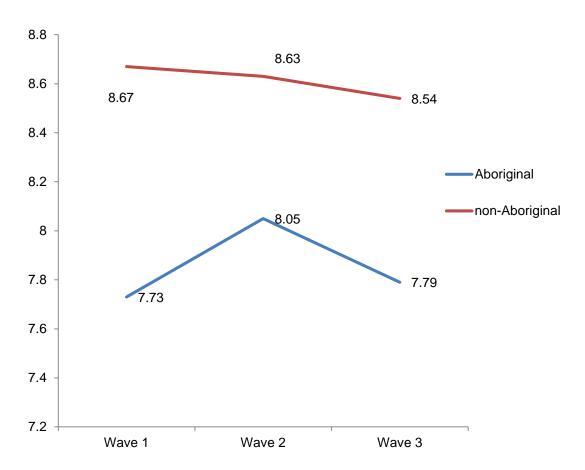
No significant Group or Wave differences. Scores stable in the lowaverage range from W1 to W3







WISC: Matrix Reasoning



Non-Aboriginal children score higher on Matrix Reasoning, but no significant changes over time in either group

Standardised scores range: 0-19 with norms similar to child age







School and Education









- Case-worker reports indicated that 87% of Aboriginal children were attending school (89% for other children)
- Aboriginal children were generally 'often' engaged with school and 'often' found it easy to manage school rules, understand the work, and get work done as required.
- 5-Point rating scale used







School adjustment

	Aboriginal N (%)	Non-Aboriginal N (%)	Chi-squared
Poor grades	55 (25.5)	71 (20.2)	1.95
Discipline / Behaviour	73 (32.9)	102 (28.5)	1.25
Attendance	18 (8.0)	19 (5.3)	1.70
Truanting	12 (5.4)	11 (3.1)	1.89
Suspension/ Expulsion	22 (9.9)	32 (9.0)	< 1

Around 25% Aboriginal may need additional educational support; 1/3 have some difficulties with behaviour at school







Placement quality (caseworkers)





Placement stability and quality (CW reports)

- 24.5% of Aboriginal children had at least 1 placement change since being in care
- For cases where placements changed, 57% of caseworkers reported that it was hard to find culturally matched placements; 48% said it was hard to maintain school continuity; 59% hard to find placements with siblings.
- Aboriginal mothers less likely to be consulted about placements (< 80%).
- 90% of placements perceived as meeting needs.



Social and family risk factors









- The 4 most common risk factors for Aboriginal families: carer drugs/ alcohol (74%); physical abuse (73%); Neglect (71%); domestic violence (65%)
- DV and drug and alcohol problems were more likely to be present than for other children in the sample.
- Aboriginal children had an average of 9 ROSH reports:
 4-5 included these main risk factors. A quarter had 7 or more risk factors.







Aboriginal children: risk factors & outcomes

 How did the presence of risk factors influence outcomes during the POCLS study

	CBCL Internalising	CBCL	PPVT
		Externalising	
Physical abuse	W1	W2, W3	
Sexual abuse	W1	W1, W2	W1, W2, W3
Neglect			
Psych abuse	W2, W3	W2, W3	W2
Carer Mental Health	W1, W2, W3	W2, W3	
Domestic Violence			
Drugs/ Alcohol			

The presence of the risk factor on left = correlated with poorer scores for the outcome measure in the table W1,2, 3 = which wave





Cultural & Family Connections

Aboriginal Children







Aboriginal Placement Principle

- Aboriginal status was determined by administrative data and carer report at Wave 3.
- Of 495 Aboriginal children where data were available, 210 or 42% were placed in an Aboriginal household (as based on whether the carer or his/her spouse was Aboriginal).
- This % did not change significantly from Wave 1 to Wave 3.
- NOTE: There may be reasons why non-Aboriginal carers were not chosen. Further analyses will look at other people in household and also look at broader ways in which the Principle may have been fulfilled.









- Case-workers were asked whether Aboriginal children have contact with relatives
- The results showed that 44% of Aboriginal children living in non-Aboriginal households had contact with at least one relative; for Aboriginal children placed in Aboriginal households, the figure was 41%; and the comparative figure for non-Aboriginal children was 45%.
- But we DON'T know if these relatives were <u>Aboriginal</u> relatives.









- It was possible to analyse contact with family for 3 different groups:
 - Aboriginal children in Aboriginal placements
 - Aboriginal children in non-Aboriginal placements
 - Non-Aboriginal children in non-Aboriginal placements
- Overall analysis: 24% of Aboriginal children in non-Aboriginal placement (n = 57) had no contact with their parents.









- Using Wave 3 data, it was found that 70.7% of Aboriginal children in non-Aboriginal placements had contact with their mothers vs. 51.1% placed in Aboriginal placements
- For fathers, the figures were 49% (non-Aboriginal placement) and 23.9% for Aboriginal placements.
- When this analysis was consolidated to consider contact with at least one parent, the contact figures were 76.2% for placements with non-Aboriginal families and 56.1% for placements with Aboriginal families.









- 36 of the 57 had face-to-face contact with at least one other significant family relative each year (grand-parents, uncles, cousins or siblings).
- Only 21 Aboriginal children out of 495 in the sample (4.2%) were both placed in a non-Aboriginal home and had no confirmed family contact with their relatives.
- But can't say if Aboriginal relatives.









- Some outcomes (e.g., CBCL scores) were analysed by placement type
- Aboriginal children placed into non-Aboriginal placements had significantly higher externalising scores (i.e., problematic behaviour)







Summary

- Aboriginal and non-Aboriginal children have similar developmental outcomes across time, although some subtle differences to note, e.g., externalising scores
- No evidence of widening gaps in development, but Aboriginal children may not be improving (e.g., CBCL scores)
- Aboriginal children at school, but 25%-33% have challenges with school and/ or behaviour
- Many children not placed with Aboriginal carers. There are questions about the quality of these connections and no information on the Aboriginal status of relatives with whom children have contact.
- Concerns about ability to find suitable placements when changes occur and the ability to place with siblings







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