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Closing the gap clearinghouse

Community development approaches to safety and wellbeing of Indigenous children

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Summary

What we know

What works

There is evidence that the following principles and practices show 'promise' for preventing and responding to maltreatment of Aboriginal and Torres Strait Islander children:

- actions that take into account the historical context and prioritise cultural safety
- control of services and responsibility for outcomes resting with Indigenous-managed agencies that provide holistic services, and which are appropriately resourced and supported
- providing support for all families when they need it, as well as targeting services for vulnerable families that address the risk factors for child maltreatment, including parental risk factors such as substance misuse, family violence, mental illness, and poor parenting skills
- empowering families to make decisions to protect children or create safe arrangements for their care
- community-level strategies based on social inclusion and situational crime prevention principles.

What doesn't work

- Current data trends regarding child protection service activity (i.e. escalating demand for services, represented by increases in notifications, substantiations, and children placed in out-of-home care) show the limitations of adversarial risk-management-driven/forensic systems that do not support families in need.
- Evidence is lacking to show that voluntary child health screening is useful in identifying child sexual abuse, or that alcohol bans or pornography restrictions alone are useful responses.



What we don't know

Currently, we don't have evaluation data to know whether:

- economic strategies to improve the financial wellbeing of families (e.g. employment, income support, income quarantining, voluntary income management, housing, etc.) actually reduce the incidence of child abuse or, in particular, neglect, in Indigenous communities (Ring & Wenitong 2007)
- 'promising practices', if coordinated and comprehensively rolled out, lead to reductions in actual rates of child abuse and neglect at the community level.

Introduction

In this resource sheet, Dr Higgins examines child abuse and neglect in Indigenous communities from a societal perspective: applying a community development framework to understand effective strategies for reducing risks and enhancing children's safety and wellbeing.

To be effective, strategies to address the problem of child abuse in Indigenous communities need to consider the known risk factors for child maltreatment in a way that acknowledges the historical context, is culturally 'safe' and emphasises support for families.

This resource sheet is not a systematic review of all options, but rather, focuses on the principles of community development and culturally competent practices for Indigenous communities, and identifies some promising Indigenous programs and services. There are also non-Indigenous-specific programs that may be suitable for translation into an Indigenous context; however, the suitability of such programs would need to be determined in consultation with the local community, and program approaches and materials redeveloped to ensure cultural appropriateness.

Background

What is 'child maltreatment'?

Child abuse and neglect (or 'maltreatment') is commonly divided into five main subtypes:

- physical abuse
- emotional maltreatment
- neglect
- sexual abuse
- the witnessing of family violence.

For more information see Appendix, item (a).

The problem of abuse and neglect of Aboriginal or Torres Strait Islander children in Australia

There is no national study of the prevalence of child abuse/neglect in Australia. Therefore, it is not possible to say with confidence whether any activities to prevent child abuse and neglect are ultimately effective. Instead, to understand the extent of the problem in Australia (including Indigenous communities), and what are the best ways to prevent and respond to maltreatment of children, we rely on other indicators:



- data on use of statutory child protection services show rapidly increased demand over the past decade, with many experts identifying this as creating an unsustainable system. Most efforts have been focused on investigation and assessment, and little resources allocated to family support and other prevention services. Often, the same child/family repeatedly comes to the attention of the department. These issues are currently the focus of reform efforts in many jurisdictions
- compared with non-Indigenous children, Aboriginal and Torres Strait Islander children are more likely to have concerns about them reported to state/territory departments. These reports are more likely to be substantiated, and the children are more frequently removed from the care of their parent(s)
- on 30 June 2009, there were 10,512 Aboriginal or Torres Strait Islander children in out-of-home care (30.9% of all children in out-of-home care). This is a 9.2-fold over-representation (AIHW 2010).

For more information see Appendix, item (b).

In April 2009, the Council of Australian Governments (COAG) agreed on a National Framework for Protecting Australia's Children. The national framework identifies two issues that underpin better responses to children in need of protection:

1. Effective responses to child abuse and neglect are based on a public health model.

In response to the problem of increasing notifications to child protection services, a number of experts in the field, such as Scott (2006), have recommended the adoption of a public health approach, which emphasises the need for a continuum of services:

- primary (or universal) prevention services—such as maternal and child health services, or intense home visiting
- secondary services—targeting support services at those families identified as at-risk or in need
- tertiary services—including statutory child protection interventions and out-of-home care, as well as therapeutic services to facilitate healing, and to interrupt the intergenerational transmission of trauma and child abuse (Holzer 2007).

2. There is a tension between seeing child abuse and neglect as a personal problem or part of a broader societal issue.

Unless broader societal factors are understood, little progress will be made in the prevention of child abuse and neglect in Indigenous communities. Looking at broader structural contributors (such as poverty, discrimination, poor housing or unemployment) does not diminish accountability for individual behaviour, nor are the consequences for children lessened. The purpose is to look at structural solutions to preventing child maltreatment (Stanley et al. 2003:3–4).

For more information see Appendix, item (c).

Risk factors for child abuse and neglect

In all parts of society there are characteristics of children, their families, and/or their communities that increase the likelihood of child maltreatment occurring, including:

- economic factors (poverty, unemployment, overcrowding or unstable housing)
- social factors (racism, discrimination)
- community factors (dangerous, disadvantaged or socially excluded communities)
- parental problems (mental health, substance abuse, poor parenting skills or family/domestic violence)
- challenging child characteristics (low birth weight, disability or other special needs)
- family characteristics (poor relationships, large number of children, single parenthood or early parenthood)
- previous experiences of abuse/neglect (of either parents or children).

For more information see Appendix, item (d).



Although socioeconomic factors are significant contributors to child maltreatment (particularly neglect), child abuse and neglect occur across all family types and social strata.

These risk factors can be concentrated in particular sections of the community. National statistics show that compared with the non-Indigenous population, there are significantly higher rates of child abuse and neglect for Indigenous children and young people (Al-Yaman et al. 2006).

Historical or contextual factors have led to trauma and intergenerational disadvantage, which contribute to the individual and community characteristics that continue to place children at risk of harm.

These include:

- effects of colonialism, institutional racism and ongoing discrimination
- disadvantage in areas of health, education, employment, housing, and social inclusion
- cultural dislocation (forced removals, disconnection from family, country, and cultural practices)
- residential school systems (e.g. the impact on Canada's Indigenous population has been well documented) (Chansonneuve 2005)
- past 'welfare' practices that led to widespread removal of Aboriginal and Torres Strait Islander children from their families (the Stolen Generations).

When children are removed from the care of their parents due to risk of abuse or neglect they also experience the trauma of separation from family and community through culturally inappropriate placements. Past and ongoing trauma can affect children's healthy development, and can have long-lasting effects throughout life. Trauma can be 'transmitted' from one generation to the next—for example, through poor parenting skills (Atkinson 2002; Higgins 2005).

For more information see Appendix, item (e).

Current responses

From a public health framework, the various services and activities that are needed to promote the safety of children are focused on three broad areas: (a) prevention, (b) alleviation of known risk factors, and (c) intervention, where abuse and neglect has already occurred, to ensure the ongoing safety of children (Holzer 2007).

Prevention and early intervention strategies that are targeted at specific risk factors for child abuse and neglect can be effective, such as:

- programs addressing parental problems such as substance abuse (see: <http://www.aifs.gov.au/nch/pubs/issues/issues29/issues29.html>)
- intensive family support and parenting programs (see later section on pp. 6–7)
- night patrol services to protect children from abuse and neglect through the promotion of law and order and ensure the safety of families in remote communities (see: <http://www.ironbark.org.au/>).

In each state/territory in Australia, the departments with statutory responsibility for identifying children at risk of abuse and neglect have experienced escalating demand. These services have been criticised for their focus on forensic investigations, adversarial processes, and risk-averse approaches. What appears promising is where the policies and procedures shift the focus from detection of maltreatment to provision of support for families in need (Higgins & Katz 2008).



A particular focus on voluntary child health checks as a way of detecting child abuse was a central feature of the Northern Territory Emergency Response (NTER), which commenced in June 2007. Publicity around the problem of child sexual abuse was the catalyst for this community-wide strategy in one jurisdiction in Australia. However, a Health Impact Assessment of the NTER by the Australian Indigenous Doctor's Association (2010)* found that voluntary child health screening is not a good way to identify and respond to child sexual abuse. Other than child health screening, they noted that there were no other measures in the NTER that were explicitly aimed at improving the role of the health sector to identify or respond to child sexual abuse. They also found no evidence that alcohol bans or pornography restrictions alone are effective in preventing child sexual abuse.

* Based on four community consultations, but supplemented by limited stakeholder interviews and expert reviews.

[For more information see Appendix 1, item \(f\).](#)

A family support approach

There are two broad approaches to statutory child protection systems around the globe:

- a child protection/forensic approach is aimed at identifying abuse/neglect, or those children who are at high risk. It is characterised by an adversarial legal framework, and is focused on the criminal nature of child maltreatment
- a family support approach involves looking at some of the underlying problems experienced by families that may place a child 'at risk'—this approach treats child safety as a societal issue, and recognises the importance of cultural safety. The focus is on the supports that are needed to be able to overcome structural disadvantage, skills deficits and lack of social support in the role of parenting and caring for children (Spratt 2001; Tomison & Stanley 2001).

Many continental European countries have adopted a family support approach to protecting children, whereas a child protection/forensic approach has been adopted in most English-speaking countries, including Australia.

A shift in the focus of the statutory child protection system (from a public health perspective, the 'tertiary sector') from forensic investigations to family support, is not likely to address the problems identified unless the change of focus is backed up by adequate support and child-focused services for vulnerable families. These improvements to the 'secondary' or 'early intervention' sectors are vital for overcoming the issues that place children at risk of harm, such as parental substance abuse, family violence or mental illness (Higgins & Katz 2008).

In Australia, few jurisdictions are structured towards family support, although recent legislative changes in Victoria provide for integrated community-based support. Families who require support can access this without being notified through the statutory system. However, the degree to which this leads to changes to the 'on-the-ground' practices of both community agency and statutory workers is yet to be determined (Higgins & Katz 2008).

Protecting children is more than ensuring that statutory child protection departments do a better job of detecting and responding to concerns about children's wellbeing. Family support and whole-of-community approaches have been shown to reduce the demand on statutory child protection systems, and to reduce the problem by focusing on universal prevention and targeted secondary service systems to support all families, particularly those with high needs.

[For more information see Appendix, item \(g\).](#)



Cultural safety: culturally competent policies and practices

Central to Indigenous perspectives on child protection and child safety is an understanding of ‘the important role culture can play in developing resilience for Aboriginal children’ (Higgins & Butler 2007:12).

The term ‘cultural safety’ was developed in New Zealand, based on the assumption that the people most equipped to provide a culturally safe atmosphere are those from the same culture (Williams 1999). Williams claimed that ‘culturally safe environments for Indigenous peoples are rare, in any area of service delivery’ (p. 4), and provided an outline of the basic principles of cultural safety, starting with the overarching one of respect for culture, knowledge, experience and obligations. It involves the ability to feel safe expressing one’s culture, and feeling ‘listened to’. One of the key challenges in applying the concept of ‘cultural safety’ to child protection casework is having shared understandings of cultural safety across diverse organisations that play a role in preventing and responding to families where children are vulnerable (Zon et al. 2004).

Cultural safety needs to be embedded in understandings of all efforts to prevent and respond to child maltreatment. For example, in a study on issues for Indigenous children in out-of-home care (Higgins et al. 2006a), the three most important issues for the 16 young people who participated were:

- connection to family
- connection to community
- connection to culture.

Interestingly, the young people’s first response was not ‘keep me safe’. The desire to maintain their connections to family, community and culture was foremost in their minds. Cultural safety involves ensuring these young people are culturally safe while they are placed away from the care of their parent(s). The Aboriginal and Torres Strait Islander Child Placement Principle, which is endorsed across Australian states/territories, requires consideration of placement with the child’s extended family, their immediate community or other Indigenous person. Cultural safety also means taking all necessary steps to provide the best chance of reunification with family. The extent to which the principle is followed, and whether this leads to culturally safe placement outcomes, needs to be evaluated.

The Western concept of a nuclear family should not be seen as the ‘natural’ building block of Indigenous Australian kinship systems. It is necessary to take seriously the complex familial structures of Indigenous societies (Morphy 2006). Indigenous families are larger and younger than non-Indigenous families (Gray 2006).

In developing culturally safe services, useful questions to guide policies and practices are:

- do they have legitimacy and credibility with both governments and Indigenous peoples?
- is there ‘two-way’ accountability to government and to Indigenous peoples and communities?
- is there transparency in all processes?
- does the policy or practice reflect or truly represent the diverse range of Indigenous peoples (Cox 2008; Westerman 1997; Williams 1999)?

According to the Australian Indigenous Psychologists Association (2010):

‘The term cultural competency refers to a long-term, developmental process that moves beyond cultural awareness (the knowledge about Aboriginal and Torres Strait Islander people primarily gained through media resources and workshops) and cultural sensitivity (knowledge as well as some level of direct experience with Aboriginal and Torres Strait Islander people).



Cultural competency emphasizes the idea of effectively operating in different cultural contexts: knowledge, sensitivity, and awareness programs do not include this concept. Cultural competence aims to reduce barriers to high quality care experienced by Indigenous people and is directly linked to improving social and emotional wellbeing and mental health outcomes.'

For more information see Appendix, item (h).

Indigenous community development approaches

The strategies to address abuse and neglect need to take into account the recent history and circumstances of Indigenous Australians that have contributed to the high rates of child maltreatment. Principally, this involves considering poverty and community disadvantage, as well as the issues of parents and families that place children at risk (e.g. family violence, mental health or substance misuse). This moves beyond forensic/statutory systems that focus on identifying cases of children at risk. It focuses instead on empowering communities to tackle known risk factors, and prevent abuse/neglect before it occurs.

Community development implies an awareness of exploitation and oppression. It is based primarily on the notion that people are capable of finding solutions to their problems. Experts in child abuse prevention can best contribute by supporting initiatives decided collectively by communities which have identified their own particular needs and priorities. Key principles of an Indigenous approach to community development include:

- community empowerment (local knowledge and cultural appropriateness)
- Indigenous leadership
- trust
- flexibility
- leverage
- sustainability (Burchill et al. 2006).

For more information see Appendix, item (i).

Indigenous community control

Researchers often highlight the importance of Indigenous leadership, and Indigenous organisations and communities maintaining control of services to ensure they are 'community-based' and addressing the priorities and needs of local communities (Burchill et al. 2006; Higgins 2005; SNAICC 2005). However, Hudson and McKenzie (2003) argue that, in relation to the Canadian experience, the creation of Indigenous community-based child and family services alone does not solve the significant problems of child safety in Indigenous communities. It requires a substantial injection of additional funds to address the underlying socioeconomic disadvantage, as well as providing the additional services that are needed. This is consistent with the conception of child safety as a societal issue.

Consistent with the principles of community development, it is not sufficient merely to give Indigenous agencies responsibility for child protection issues. Instead, Indigenous services should be expanded to provide a comprehensive wrap-around suite of supports that are not focused solely on the statutory end of the child protection continuum (SNAICC 2005). It is also vital that there is integration between Indigenous-managed services and other non-Indigenous services (including the statutory child protection system), with appropriate referral pathways, mutual engagement and commitment ('buy-in') from all agencies involved. There also needs to be professional support for practitioners and organisations (such as with governance and accountability requirements).

Examples of holistic approaches to service provision for Aboriginal and Torres Strait Islander families and children in need:

Indigenous Family and Child Support Service (IFACSS), Brisbane, QLD

IFACSS is a partnership across a range of agencies that aims to build their capacity, and to support a coordinated service for parents, families and communities to ensure the safety and wellbeing of children and young people.

See: <www.atsichsbrisbane.org.au>.

Lakidjeka Aboriginal Child Specialist Advice and Support Service, Victorian Aboriginal Child Care Agency (VACCA)

This service works cooperatively with the state child protection department to develop ways of keeping children safely with their families or helping them to be reunited. Staff members are consulted about all statutory child protection notifications concerning Indigenous children and young people in Victoria. Where removal of children is necessary, VACCA's Lakidjeka service is responsible for ensuring compliance with the Aboriginal and Torres Strait Islander Child Placement Principle. This is critical for keeping Indigenous children with their extended families and/or communities in order to maintain their connection to culture.

See: <www.vacca.org>.

Family support programs

Holzer et al. (2006) reviewed evidence in relation to the effectiveness of 14 different parent education programs. These programs showed improved parenting competence, effectively addressed risk factors for child maltreatment, and in some instances where direct measurements were made (e.g. through child protection service data), resulted in fewer incidents of child maltreatment. They concluded that practitioners and policy makers have reason to be optimistic about the effectiveness of parenting education programs, though none of these were Indigenous-specific, so the degree to which they are culturally safe and effective in meeting the needs of Aboriginal or Torres Strait Islander families needs to be assessed. However, Magistrate Sue Gordon noted the existence of an empirically supported parenting program that has been adapted for Indigenous communities—the Indigenous Group Triple P (Gordon 2006).

Indigenous Group Triple P (Positive Parenting Program)

This is a version of the Group Triple P behavioural family intervention, which has a strong evidence base to support its effectiveness. The group program has been tailored for Australian Indigenous families presenting with concerns about their parenting, or about their child's behaviour or development. Indigenous health and child health workers conducted the parenting group training and support in community settings. The randomised control trial evaluation showed that the Indigenous parents attending Group Triple P reported significantly lower rates of problematic child behaviour, relied less on dysfunctional parenting practices (such as an authoritarian disciplinary style) and displayed less anger and irritability than those on a waiting list (Parenting and Family Support Centre 2008).

See: <www16.triplep.net/?pid=2027#list3_item5>, <<http://www.triplep.net/>>.

See Appendix, item (j).

Another way of providing family support is through home visiting programs. Out of the range of home visiting program evaluations reviewed by Higgins et al. (2006b), only one program (the Nurses Home Visiting Program) was successful in reducing the prevalence of child maltreatment and improving mothers' and children's measurement outcomes on health, wellbeing and behavioural variables.



Although much of this evidence does not come from Indigenous families, there have recently been evaluations showing that a home visiting program for families of Aboriginal and Torres Strait Islander children is effective in meeting the support needs of vulnerable families (Sivak et al. 2008). Whether this translates into reduction in rates of child abuse notification, or the actual incidence of abuse/neglect, however, is still to be determined.

The South Australian Children, Youth and Women's Health Service Family Home Visiting Program for Families of Aboriginal and Torres Strait Islander Children

Adapted from the USA, the program uses professional (qualified) nurse home visitors and Indigenous Cultural Consultants (ICCs), supported by a multidisciplinary team of psychologists, social workers, Aboriginal health workers and family brokers. The aim is to provide children with the best possible start in life and to assist families in providing the best support possible for their children.

See: <<http://w3.unisa.edu.au/childprotection/documents/FHV.pdf>>.

Australian Family Partnership Program

The Australian Government is rolling out an intensive home visiting program across five sites, aimed at supporting women pregnant with an Aboriginal and/or Torres Strait Islander child and their families.

See: <<http://www.anfpp.com.au/about>>.

Intensive family support services and other family preservation programs are also important aspects of early intervention for vulnerable families. They can assist by:

- teaching parenting skills
- providing vulnerable families with support for parenting and childcare tasks (including support from professionals, mentors, or peers)
- addressing the familial and parental factors that place children at risk of abuse or neglect (particularly family violence, substance misuse, or mental illness).

For further information about home visiting and parent education programs, please see:

<www.aifs.gov.au/nch/pubs/issues/issues24/issues24.html>.

<<http://www.parentingrc.org.au/index.php/about-prc>>.

The peak body advocating for the needs of Aboriginal and Torres Strait Islander children has a directory of Indigenous family and children's services:

<<http://services.snaicc.asn.au/>>.

A 1999 audit of child abuse prevention programs can be seen at:

<<http://www.aifs.gov.au/nch/pubs/reports/audit2001/auditreport.html>>.

Family decision-making models for responding to abuse/neglect

Family decision-making models have grown out of the New Zealand experience, based on Maori and Pacific Islander understandings of family and the responsibility that this wider group can take for ensuring the safety and wellbeing of children and young people (Harris 2008). After information is shared with the family group by child protection workers and other professionals, the family is given space to 'confer' on their own about what needs to happen to keep a child safe. In his comprehensive review of family group conferencing on both sides of the Tasman, Harris (2008) noted a particular innovative practice in Victoria (the development of an Indigenous-specific family decision-making model), which he sees as a way of empowering Indigenous families and communities.



According to Ban (2005):

‘The family group conference is a meeting held by extended family members following a crisis regarding a child of that kin network. Professional service providers involved with child protection also attend to inform the family network of their legal mandate, assessments and potential resources to resolve the issue at hand... The intention of this process is to transfer the power and authority of decision making for children into the hands of the people who have a life-long connection with them and who have to live with the outcome of the decisions made’ (pp. 389–90).

Ban (2005) identified that family group conferences are a way of meeting the objectives of the Aboriginal Child Placement Principle. When children who are at risk of harm in the care of their parent(s) need to be removed, the principle stipulates the priority of placing the child with extended family, the child’s community, or, finally, another Aboriginal person. The problem with implementation of the principle is that for non-Indigenous agencies (or in fact, anyone without detailed local knowledge of community and kin), it is difficult to know who may be appropriate and available to take responsibility for the care of the child/ren. Family group conferences provide a mechanism for addressing this issue.

One of the fundamental principles on which family group decision-making models are based is the belief that if they are brought together and given appropriate information, families are capable of making responsible decisions about a child who is at risk of abuse or neglect (Ban 2005). This is consistent with the principles of community development, and Indigenous community control.

Based on a number of international evaluation studies, Harris (2008) concluded that family group conferences ‘lead to greater feelings of empowerment by families, are usually able to produce a plan that is acceptable, mobilise greater informal and formal support for families, and would seem to increase the safety of children and other family members where violence is a concern’ (p. 2).

Rumbalara Aboriginal Co-operative—Family decision-making program

Since 2002, the program, which was developed in partnership with the Victorian Department of Human Services and Rumbalara Aboriginal Co-operative, has allowed Aboriginal workers to play a primary role in coordinating a conferencing process with Aboriginal families. An evaluation of the pilot program showed positive results. The role of Aboriginal communities in decision making has subsequently been enhanced and formalised in Victoria’s child protection legislation (Harris 2008).

See: <www.aifs.gov.au/nch/pubs/issues/issues27/issues27.html>.

Child-safe communities and situational crime prevention principles

The principles of child-safe organisations and situational crime prevention can be used to inform approaches to broader community safety. In the Little Children are Sacred report, many of the issues and recommendations were based on a situational crime-prevention model (Anderson & Wild 2007). This involves addressing factors at a range of levels:

- ‘distal’ factors, such as underlying poverty, community-wide levels of alcohol usage and the availability of community infrastructure
- more ‘proximal’ factors, that is, factors that might trigger someone to engage in the crime of child abuse (e.g. an individual parent’s gambling problem)
- the most immediate and direct risk factors, such as children being left unsupervised or inadequately supervised
- systemic issues, such as organisational or community-level policies and structures that could be used to keep children away from adults or older adolescents who may pose a risk.



Creating child-safe communities moves beyond the individualistic conception of the problem by looking at the broader enablers and constraints that can be drawn into the net of protecting and safeguarding the wellbeing of children (Irenyi et al. 2006; SNAICC 2008). These are consistent with the recommendations made in the Little Children are Sacred report (Anderson & Wild 2007). Situational crime-prevention strategies focus on modifying environmental characteristics that can either facilitate or impede crime (Wortley & Smallbone 2006).

These strategies include a range of ways to make it harder for potential offenders to access children, such as:

- supervising and controlling access to facilities such as school grounds
- providing locks on doors for children
- teaching children personal safety strategies
- increasing other adults' awareness of the nature of sexual offending
- reducing access to pornography, drugs and alcohol
- enabling potential offenders to seek help
- providing suitable monitoring of known offenders in a community
- changing community-wide attitudes that may lead to minimising or excusing offender behaviour.

These basic principles of situational crime prevention are not foolproof; however, it is likely that many perpetrators of sexual abuse are engaging in what is known as 'situational' offending. The risk can be reduced by having sufficient barriers that deal with the preconditions that allow sexual offending to occur (Finkelhor 1984).

Many of the strategies noted above would serve to make children safer from a range of potential harms, including abuse and neglect.

For more information see Appendix, item (k).

Communities and Families Clearinghouse Australia—Promising Practice Profiles

A range of promising culturally appropriate programs that assist in preventing child abuse and neglect in Indigenous communities are profiled on the website. For example, the Early Childhood Coordinator initiative of one Communities for Children site (Dubbo/Narromine/Wellington, north-west New South Wales), where four Early Childhood Coordinators were employed to engage, connect and support children, families and service providers, and the wider community. One of these positions is an identified Aboriginal position and is auspiced by Centacare Wilcannia-Forbes.

See: <www.aifs.gov.au/cafca/topics/targetgroup/targetgroup.html>.

Facilitators and barriers

Across the literature, a range of factors that can support efforts to keep children safe can be identified. These 'facilitators', include:

- organisations and communities that adopt child-safe principles
- coordination of strategies between governments, agencies and communities—to reduce duplication and prevent gaps in service delivery, and build on existing strengths and infrastructure
- harnessing goodwill by focusing prevention efforts on community-identified priorities and/or solutions.



Some of the most significant barriers to protecting children are:

- past trauma and ongoing economic hardship and isolation leaving whole communities without hope
- community dysfunction—where hopelessness is reflected in widespread community and family violence, alcohol abuse, and disengagement from positive community norms, such as education and employment or culturally-valued activities
- poor access to services, including the appropriateness of ‘mainstream’ (not Indigenous-specific) services, and availability of services in rural and remote areas.

Conclusion

This resource sheet demonstrates how a community development framework can assist with identifying ways in which Indigenous children’s wellbeing can be improved. This moves the debate beyond frameworks that individualise the problem to instead look at broader risk factors (such as socio-cultural disadvantage), as well as protective factors (connection to family, community and culture).

A community development approach to responding to the problem of child abuse, including Indigenous communities, recognises that it takes time to get to know communities. As demonstrated by Burchill et al. (2006), interventions are perceived as more effective when they enhance the capacity of local Indigenous grassroots organisations and community groups, and build local knowledge and confidence. Although local solutions are needed, it is equally important to have sustainable implementation—not just a series of pilots that raise expectations but end up contributing to a sense of helplessness when funding ends and the program is discontinued (Higgins 2005).

The over-representation of Aboriginal and Torres Strait Islander children in child protection and out-of-home care statistics is a reflection of the wider problems of economic disadvantage, lower education and employment levels, poorer health outcomes and shorter life expectancies experienced by Indigenous Australians (ABS 2008). The material disadvantage and trauma associated with past welfare practices, such as the removal of children from their parents, also need to be considered in developing strategies for ensuring the safety and wellbeing needs of children (Higgins et al. 2005).

For more information see [Appendix, item \(I\)](#).



Appendix

Further information references

- (a) National Child Protection Clearinghouse resource sheet on definitions of child maltreatment: <<http://www.aifs.gov.au/nch/pubs/sheets/rs6/rs6.html>>.
- (b) National Child Protection Clearinghouse information on child protection and Aboriginal and Torres Strait Islander children: <<http://www.aifs.gov.au/nch/pubs/sheets/rs10/rs10.html>>.
- (c) COAG National Framework: <<http://www.coag.gov.au/node/224>>.
- Australian Research Alliance for Children and Youth (ARACY) report on how to enhance Australia's systems for protecting children: <<http://www.aracy.org.au/publications-resources/area>>.
- National Child Protection Clearinghouse description of a public health approach to child protection: <www.aifs.gov.au/nch/pubs/sheets/rs11/rs11.html>.
- (d) National Child Protection Clearinghouse bibliography on risk factors for child maltreatment: <www.aifs.gov.au/nch/bib/risk.html>.
- (e) Statistics on abuse/neglect of Aboriginal and Torres Strait Islander children: <www.aifs.gov.au/nch/pubs/sheets/rs10/rs10.html>.
- Prevalence, impact and services for responding to family violence among Aboriginal and Torres Strait Islander peoples: <www.aihw.gov.au/publications/index.cfm/title/10372>.
- Results from the WA Aboriginal Child Health Survey show the ongoing impact of the Stolen Generations: <<http://www.ichr.uwa.edu.au/waachs>>.
- Canadian Aboriginal Healing Foundation's research on the impact of the Indian Residential School system—'Reclaiming Connections: Understanding Residential School Trauma Among Aboriginal People': <<http://www.ahf.ca/publications/research-series>>.
- Specific resources for understanding and responding to child/adolescent trauma, loss and grief for Aboriginal and Torres Strait Islander families and communities: <http://www.earlytraumagrieff.anu.edu.au/resource_hubs/aboriginal_tsi_indigenous_hub/>.
- (f) Report of the NTER Review Board (September 2008): <<http://www.nterreview.gov.au/report.htm>>.
- (g) Higgins & Katz (2008): <www.aifs.gov.au/institute/pubs/fm2008/fm80/hk.pdf>.
- Victorian Department of Human Services: <www.cyf.vic.gov.au/every-child-every-chance/library/publications>.
- (h) Cultural competence training: <<http://www.indigenouspsychology.com.au/news/181/aipa-will-be-offering-cultural-competence-training-in-2010>>.
- Indigenous Cultural Competency in Australian Universities Project: <<http://www.indigenousculturalcompetency.edu.au/html/Intro.html>>.
- (i) Principles and examples of programs drawing on principles of Indigenous community development: <<http://www.aifs.gov.au/institute/pubs/fm2006/fm75/mb.pdf>>.

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- (j) Other promising parent education and support programs include:
The Boomerangs Parenting Program:
<<http://www.sswahs.nsw.gov.au/mediacentre/mediareleases/2009/090717b.pdf>>.
- SDN Children's Services' Partnerships with Parents (PWP) project:
<http://www.aifs.gov.au/cafca/ppp/profiles/la_pwp.html>.

- (k) Organisational risk factors and strategies for preventing abuse of children in organisations:
<www.aifs.gov.au/nch/pubs/issues/issues25/issues25.html>.

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Indigenous: 'Aboriginal and Torres Strait Islander' and 'Indigenous' are used interchangeably to refer to Australian Aboriginal and/or Torres Strait Islander people. The Closing the Gap Clearinghouse uses the term 'Indigenous Australians' to refer to Australia's first people.

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