

POLICY FUTURES

A Reform Agenda



Safe, Healthy and Thriving: How culturally safe health care hubs can close the gap for Aboriginal children in care.

The child protection system is not meeting the health needs of Aboriginal children in care. Aboriginal children are ten times more likely to be in out-of-home care than the general population. These rates are rising. Deep deficiencies in the funding and oversight of health care means that few children in out-of-home care access even the minimum standard of care in national guidelines.

Health and wellbeing must be at the centre of child protection policy in Australia. We need to reorient toward a more integrated health and wellbeing framework that is preventative, supportive, strengths-based and culturally safe. This urgently requires a national strategy, self-determination, a robust regulatory and reporting framework, and stronger collaboration between the child protection and health systems. By keeping health and wellbeing at the heart of child protection policy and practice, we have the potential to change the trajectories of children in care.

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Key Policy Recommendations

1

The Australian Government should develop a national health and wellbeing action plan for children in out-of-home care to accompany *Safe and Supported: The National Framework for Protecting Australia's Children 2021-2031*. This plan should act as a roadmap on how to implement the *National Clinical Assessment Framework (2011)* (NCAF) for children and young people in out-of-home care. The plan should be co-designed with the Aboriginal Community-Controlled Health Organisations (ACCHOs).

The plan should:

- mandate health assessments for every child in out-of-home care in line with the NCAF
- clarify the statutory responsibility, funding, and resourcing for health care
- include a robust statutory and regulatory framework that includes national health indicators to measure and report on the health and wellbeing of children in the child protection system, including those in out-of-home care, and specifically address the health of Aboriginal children in care, aligning with the socio-economic targets in the *National Agreement on Closing the Gap (2020)*.

2

The Australian Government should invest in and develop specialised multidisciplinary integrated care hubs for vulnerable children (including those in out-of-home care) within ACCHOs and community hubs, to deliver integrated, culturally safe and trauma-informed primary health, specialist, mental health and supportive care.

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Closing the Gap

Recommendations support the following targets for Aboriginal and Torres Strait Islander people¹:

Target 4

Children thrive in their early years

By 2031, increase the proportion of Aboriginal and Torres Strait Islander children assessed as developmentally on track in all five domains of the Australian Early Development Census to 55%.

Target 5

Students achieve their full learning potential

By 2031, increase the proportion of Aboriginal and Torres Strait Islander people (age 20-24) attaining year 12 or equivalent qualification to 96%.

Target 11

Young people are not overrepresented in the criminal justice system

By 2031, reduce the rate of Aboriginal and Torres Strait Islander young people (10-17 yr) in detention by 30%.

Target 12

Children are not overrepresented in the child protection system

By 2031, reduce the rate of over-representation of Aboriginal and Torres Strait Islander children in out-of-home care by 45%.

Target 14

People enjoy high levels of social and emotional wellbeing

Significant and sustained reduction in suicide of Aboriginal and Torres Strait Islander people towards zero.



Indigenous kids in OoHC have high & unmet health needs

An audit of a VAHS paediatric clinic of 103 Aboriginal children in OoHC found²:

66%
mental health problems

46%
developmental delay

37%
hearing problems

40%
dental caries



However, a study in Victoria of 5,676 children (<13 yrs) in foster or kinship care found³:

<1%

received all health services recommended within 12 months of entry to OoHC.



Benefits of early intervention

'Australian governments are spending **\$15.2 billion** each year on high-intensity and crisis services for problems that may have been prevented had we invested earlier and more wisely.'

Of this, **\$5.9 billion (39%)** is spent on child protection.

Early intervention in a child's quality of life - including meeting their health needs - is a smart investment in a stronger Australia.

¹National Agreement on Closing the Gap. Australian Government. ²Shmerling, E, Creati, M, Belfrage, M, & Hedges, S. 2019. The health needs of Aboriginal and Torres Strait Islander children in out-of-home care. <https://doi.org/10.1111/jpc.14624> ³McLean, K, Hiscock, H, & Goldfeld, S. 2022. Timeliness and extent of health service use by Victorian (Australian) children within first year after entry to out-of-home care: Retrospective data linkage cohort study. *Children and Youth Services Review*, 134, 106359, <https://doi.org/10.1016/j.childyouth.2021.106359>. ⁴How Australia can invest in children and return more: A new look at the \$15bn cost of late action. Report.