

Why is there a shortage of Aboriginal and Torres Strait Islander Carers?

Perspectives of professionals from Aboriginal and Torres Strait Islander organisations, non-government agencies and government departments

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- *The Recruitment, Retention, and Support of Aboriginal and Torres Strait Islander Foster Carers: A Literature Review* (Richardson, Bromfield, & Higgins, 2005); and
- *Enhancing out-of-home care for Aboriginal and Torres Strait Islander young people* (Higgins, Bromfield, & Richardson, 2005).

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Why is there a shortage of Aboriginal and Torres Strait Islander Carers?

“We don’t have any Indigenous carers to access or available to accommodate Indigenous children or young people when placed in out-of-home care. There are lots of children with an Indigenous background presently in care across [the state]. Because there are no Indigenous carers available, non-Indigenous carers accommodate Indigenous child(ren) – it’s just a question of who has got a bed.”
(non-Indigenous agency representative)¹

Trends in out-of-home care

There is enormous pressure on the Australian out-of-home care system to meet the demand for suitable placements. At 30 June 2006 there were 27,188 children and young people living within formal out-of-home care placements in Australia. This is almost double the number of children who were living in out-of-home care just ten years ago (Australian Institute of Health and Welfare, 2007). However there are no national data available on the reasons why children are placed in out-of-home care.

Contextual setting

Out-of-home care services struggle to meet the ever increasing demand for out-of-home care placements due to a combination of factors, including the:

- reduction in placement options;
- inability to recruit an adequate number of foster carers;
- characteristics of children entering care; and
- emphasis on children’s need for stability.

The recruitment of adequate numbers of suitable foster carers is a major problem that plagues foster care systems around the world (Barber & Gilbertson, 2001; Victorian Department of Human Services, 2003). In Australia and internationally, while the need for foster carers has been rising, there are decreasing numbers of individuals willing to foster. This has been attributed to the greater participation of women in the workforce, the inadequacy of remuneration provided to carers, increasing expectations of carers, and attrition as existing carers age (McHugh, 2002; Siminski, Chalmers, & McHugh, 2005). These factors (along with other issues such as the challenging behaviours of children in care and inadequate support) have also contributed to decreased retention rates for existing carers.

Child welfare services are increasingly recognising the importance of family support and early intervention. Out-of-home care is viewed as a last resort, and the preference is always for children to be reunited with their birth parents if possible. This shift in the “hard end” of child welfare practice has meant that children who enter out-of-home care are likely to have experienced chronic child maltreatment and family disruption prior to entering care, and therefore have more complex needs than children entering such care in the past (Victorian Department of Human Services, 2003).

The negative events associated with the placement of children in institutional care in the past (Australian Senate Community Affairs Committee, 2004) and preference for family-based foster care contributed to the scaling back of residential care facilities in the 1980s and 1990s. Placement options were reduced due to the substantial reduction in residential care and group homes across the country, and consequently there was an increased reliance on foster care (Barber, 2001; Barber & Delfabbro, 2004).

Placement stability continues to be a challenging feature of most care systems in Australia and many other Western countries, and one of the strongest symptoms of what many see as the failure of current out-of-home care systems. Research areas such as into attachment theory and early brain development has highlighted the need for stable and secure placements. This means, decision-making regarding whether a child will be reunified with their parents or remain in care needs to occur relatively quickly, especially with very young children. Permanent placements are sought for those children who are to remain in care. The emphasis on achieving “placement stability” and on “permanency planning” has resulted in an increasing trend for children to enter care at an earlier age and to remain in care longer (Australian Institute of Health and Welfare, 2005). This decreases the capacity for existing carers to care for additional

¹ In quotations we have replaced the terms “Aboriginal” or “Aboriginal and Torres Strait Islander” or “Torres Strait Islander” with “Indigenous” to protect the identity of the participants

children entering the system. The combination of these and other factors has resulted in out-of-home care service systems that have reached a crisis point. There is an urgent need for research in this area to inform evidence-based approaches to problems arising as a consequence of these recent trends in out-of-home care (Cashmore, Higgins, Bromfield, & Scott, 2006).

Aboriginal and Torres Strait Islander children and out-of-home care

Aboriginal and Torres Strait Islander peoples continue to suffer the intergenerational effects of past welfare practices. Indigenous Australians also experience higher levels of poverty and social disadvantage than non-Indigenous Australians. The combined effects of past practices and current disadvantage present Aboriginal and Torres Strait Islander communities with significant challenges in supporting families to ensure children are not placed at risk of harm and are cared for in a culturally appropriate way.

Aboriginal and Torres Strait Islander children are six times more likely to be placed in out-of-home care compared with non-Indigenous children (Australian Institute of Health and Welfare, 2006). However, there is a serious shortage of culturally appropriate placements to accommodate them. Even with intensive recruitment efforts, professionals have been unable to recruit sufficient Aboriginal and Torres Strait Islander carers to meet the demand.

The study

In a national study, the Australian Institute of Family Studies conducted interviews with *professionals* from government, non-government and Indigenous agencies, as well as *carers* of Aboriginal and Torres Strait Islander children and Indigenous *young people* in care (the *participants*). Participants were asked to talk about what they thought were barriers to recruiting carers, and the strategies that worked well.

In this paper we present participants' views about the shortage of Aboriginal and Torres Strait Islander carers. In particular, participants told us:

- there are more Aboriginal and Torres Strait Islander children in care than there are Indigenous adults able to care for them;
- current carers are ageing and retiring and are not being replaced by new carers;
- there is a risk of overload and burnout of current carers; and
- alternative placement types such as respite and emergency placements are needed.

There are more Aboriginal and Torres Strait Islander children in care than there are Indigenous adults able to care for them

There is a disproportionately high number of Aboriginal and Torres Strait Islander children needing care. Aboriginal and Torres Strait Islander children comprise 22% of the out-of-home care population, yet Indigenous people comprised only 2.4% of the total Australian population in 2001. The proportion of Aboriginal and Torres Strait Islander children in out-of-home care compared with the Australian average is reduced somewhat due to the greater proportion of Indigenous people in younger age groups. According to the 2001 census, the most common age of the Aboriginal and Torres Strait Islander population was 21 years, compared with 36 years for the non-Indigenous population. Approximately half (49.1%) of the Aboriginal and Torres Strait Islander population are aged 19 years or less, with 30% between 20 and 39 years, and 21% over 40 years (Australian Bureau of Statistics, 2003).

The comparatively high number of children and young people in Aboriginal and Torres Strait Islander communities compared with the small number of older people has serious consequences for the capacity of local communities to meet the needs of children requiring out-of-home care.

No new carers. The professionals we spoke to told us that even with intensive recruitment efforts, they have been unable to recruit new carers. They expressed their concern for the capacity of the out-of-home care system to cope with the demand for placements created by the over-representation of Aboriginal and Torres Strait Islander children in out-of-home care. Participants identified an urgent need to find new ways to recruit Aboriginal and Torres Strait Islanders to become carers of Indigenous children. An Aboriginal and Torres Strait Islander agency representative described the difficulties their local agency has in recruiting new carers in that community:

Recruitment is really difficult. The way we recruit is word of mouth, putting flyers out into the community, into Indigenous organisations, TAFE colleges, the Uni, community organisations, which doesn't work... Don't get a lot of response... I had thought we could pick up new carers, but yeah the response is very minimal. We have our networks and contacts in those agencies where they could advocate on behalf of the program and talk about it... and still no response really. The coordinator goes out and talks to institutes (like the TAFEs and the Uni and the community organisations). It's hard work... basically we've covered just about every avenue possible where we could try and get the message out there that we

want carers and there is just no responses. (Aboriginal and Torres Strait Islander agency representative)

Professionals in two of the Aboriginal and Torres Strait Islander programs we spoke with reported that the number of Indigenous carers presently on their books was in single figures and that, despite extensive recruitment efforts, they had been unable to recruit any new carers in recent years. One said:

“We currently have 6 carers... the last option if children cannot be placed is that the kids have got to be locked up. [The program] is for young people 10-18 years... who are homeless, can't live with their parents or are on an order... They are a complex needs group, a lot of them are really high risk... most of them are young offenders.” (Aboriginal and Torres Strait Islander agency representative)

Carer shortage is not due to a lack of willingness to care. Professionals believed that the problem of a shortage of Aboriginal and Torres Strait Islander carers did not arise from a lack of willingness to care. Some participants claimed that those who were capable to care for children were more likely to do so than their non-Indigenous counterparts (See Paper 2). They saw the main problem was not the lack of willingness to become carers (as is the case in the non-Indigenous community), but a lack of capacity or ability – such as financial capacity or ability to meet eligibility criteria.

An Aboriginal and Torres Strait Islander agency representative explains the problem:

“Indigenous people are less than 2% of the population. We make up, in [this state], about 25-30% of children in the social welfare arena. So our capacity to recruit adequate carers out of this 2% is just not going to happen. Of those 2%, 50% for their own reasons aren't interested. Of the remaining percentage there is less than 10% who meet the department's criteria for becoming a foster carer. And even though there are lots of negotiations around value judgements about Indigenous carers, how they become foster carers, recognition of Indigenous child rearing practices and in more traditional areas and remote areas about community responsibility for raising children, at the end of the day when a minister signs off on a foster carer being registered they need to know that there are enough safety nets in place to protect the child, which is paramount... and so it makes it really difficult to get adequate numbers of Indigenous foster carers.” (Aboriginal and Torres Strait Islander agency representative)

Aboriginal and Torres Strait Islander children are being placed outside their communities. The shortage of Aboriginal and Torres Strait Islander carers has led to Aboriginal and Torres Strait Islander children being placed out of their own communities, and sometimes with non-Indigenous carers:

“Problems arise in getting an Indigenous family to take a non-relative child; the barrier here is when the child comes from a different community – the difficulty with these sorts of placements.” (Departmental representative)

Current carers are ageing and retiring and not being replaced by new carers

Current carers are getting older. As carers get older they reach a point where they are no longer able to cope with the demands of caring for young children. Retiring carers are not being replaced by new recruits:

“We are losing some Indigenous carers. I suspect it's an ageing population. Across all carers, the age range is moving upwards. We are heavily reliant on middle-aged and older women. It's becoming concentrated in older groups. The worry is that there won't be younger carers coming on board.” (Aboriginal and Torres Strait Islander agency representative)

The carers that we've got now – [the program] started in 1988... around 1990 they just went out and recruited and recruited and what's left over is what we've got now since that... and that is a problem because they have been around for so long now and they are getting old and it is time to try and get new carers in or look at other option of how can we place kids. (Aboriginal and Torres Strait Islander agency representative)

There is a risk of overload and burnout of current carers

The role of caring for Aboriginal and Torres Strait Islander children is predominantly taken on by a small group of Aboriginal and Torres Strait Islander carers, most of them women. Many professionals believed that if more carers were not recruited, current carers would suffer overload and burnout:

“There are a limited number of people on which to draw... the result is a large number of kids going through the one household. There is a risk of overloading some excellent Indigenous carers.” (non-Indigenous agency representative)

“Problems arising for Indigenous carers locally are that many with children in their care, including their own

child are just too overloaded - often with 2-3 foster children.” (non-Indigenous agency representative)

The shortage of carers means that many Aboriginal and Torres Strait Islander professionals become carers in order to meet the need for placing Indigenous children within their communities:

“A lot of the workers... who run or work in these services – many of them themselves are carers. This is unusual when you compare it to non-Indigenous services. It would be quite unusual for a white worker... to also be a foster carer. It’s very common place it seems to me for the Indigenous workers. You get these multiple role situations happening. It’s more than occasional it seems to me. The worker or the manager at the foster care service might be a relative carer... they’re also a foster carer, they’re also running the foster care program. I think there’s some significant advantages and some real risks. The advantages are that for the children, I think, is that they’re kept close with their community and generally speaking I think receive excellent care. The risks are... that the individuals concerned... get burnt out and feel overloaded. But they are intrinsic parts of their community and strong functioning people and they get called on for multiple responsibilities... Not to mention the fact that they also sit on the board of the local medical service, local Aboriginal Medical Service, the legal service, and the land council, it’s just extraordinary. I’m just so impressed with the level of responsibility that they exercise in their communities. But I’m also concerned for them, as I have seen numbers of them get seriously stressed by that.” (non-Indigenous agency representative)

Alternative placement types could alleviate pressure on current carers

Professionals have responded to the lack of appropriate carers by suggesting alternative placement types, such as emergency placements, residential care, shared care and respite, as ways to alleviate the pressure on current carers and ease the shortfall of placements for Aboriginal and Torres Strait Islander children needing culturally appropriate out-of-home care:

“We need to think much more consciously about the structure of care, and consider things like extended respite, shared care shifting between families in six monthly rotation, incentives for carers to stay in the scheme but not on a 24 hour-a-day, 365 days-a-year commitment. We need to be more inventive about not burning people out in the process.” (Departmental representative)

“We would love to have a residential care component, but managed by us. It’s good stuff - you know what is needed for the kids. The benefits for the kids are that it’s a short-to-medium term option, where the kids could be while waiting for a suitable extended family placement. It’s also good for large family groups, where people don’t have the capacity to take on a large number of kids. It’s a good ‘stop gap’ measure. It would solve a lot of problems. You would know the service is there, and you’d know the kid would have a roof over their head. It would buy you time. It should be part of an integrated continuum of care.” (Aboriginal and Torres Strait Islander agency representative)

In one region, the program was given permission to recruit non-Indigenous carers specifically for emergency and respite care with the condition that the child cannot be with a non-Aboriginal or Torres Strait Islander carer for more than seven days. The program will give the non-Indigenous carers support and training and ensure they are part of Aboriginal and Torres Strait Islander community activities so that children in their care will have community and family linkages.

Conclusion

The shortage of Aboriginal and Torres Strait Islander carers was the biggest problem in meeting the need for culturally appropriate placements for Aboriginal and Torres Strait Islander children. The small Indigenous adult populations from which to draw, the existing care responsibilities and the ageing of the current carer pool place extra stress on the out-of-home care system. Current carers who are also professionals in the child and family welfare sector may be at risk of overload and burnout. The findings from this study are consistent with previous research that has highlighted the shortage of culturally appropriate placements for Aboriginal and Torres Strait Islander children as a critical issue in out-of-home care. Participants suggested alternative placement types as ways of alleviating the pressure on the current carer pool such as emergency placements, residential care, shared care and respite.

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