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Service provision and support

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Children in out-of-home care (OOHC) are a vulnerable group who have high levels of need, due to their experiences before coming into OOHC, the challenges of being a child in OOHC and, for some, ongoing physical and psychological conditions. The provision of services, ranging from the provision of medical services to case planning and caseworker support, is one of the most crucial ways that governments and non-government organisations can foster children's wellbeing in OOHC. Additionally, research has indicated that service use and support may differ between foster, relative/kinship and residential care, with relative/kinship carers potentially lacking access to support services (McHugh, 2013).

This chapter examines different types of services and support received by children and caregivers and the perceived adequacy of these resources among participants in the Pathways of Care Longitudinal Study (POCLS). It also investigates the degree of unmet need for services and support experienced by children and caregivers. The chapter addresses aspects of Key Research Question 4: 'What are the placement, service intervention and case planning pathways for children during their time in OOHC?'¹.

¹ Please see Chapter 2 for a description of the data analysis undertaken in this report.

8.1 Services and support provided to children and caregivers

Access, adequacy and barriers to health services for children

Table 8.1 shows that, according to caregiver reports, the vast majority of children across all age groups had attended a general practitioner (92%), with the highest attendance among children aged 9–35 months (96%) and 3–5 years (92%). Over half (56%) of children of all ages had attended a paediatrician, with rates slightly higher among children aged 5 years or younger (58% of 3–5 year olds and 62% of 9–35 month olds). Higher proportions of younger children, particularly those aged 9–35 months (55%), had visited an Early Childhood Health Centre, and children aged 3–5 years were the most likely to have attended a speech pathology service (43%). Higher proportions of older children aged 6–11 years and 12–17 years had attended a dental hospital/local dentist (74% and 71%) and counsellor/psychologist (51% and 63%) than younger age groups. Overall, just over one in five (22%) children had accessed another type of specialist or service, and the most common services/specialists reported by caregivers were eye specialist/surgeon and/or having an eye test, having a hearing test, attending an occupational therapist and attending a physiotherapist.

Table 8.1: Caregiver reports of child health services attended, by child age

	9–35 months		3–5 years		6–11 years		12–17 years		Total	
	n	%	n	%	n	%	n	%	n	%
A general practitioner	546	96.3	244	92.1	291	88.4	105	84.7	1,186	92.3
A paediatrician	351	61.9	154	58.1	168	51.1	47	37.9	720	56.0
A dental hospital or local dentist	105	18.5	159	60.0	244	74.2	88	71.0	596	46.4
An Early Childhood Health Centre	314	55.4	71	26.8	26	7.9	3	2.4	414	32.2
A hospital emergency department (or casualty)	222	39.2	69	26.0	65	19.8	40	32.3	396	30.8
Counselling or a psychologist	30	5.3	72	27.2	169	51.4	78	62.9	349	27.2
A speech pathology service	76	13.4	115	43.4	77	23.4	10	8.1	278	21.6
An Aboriginal Medical Service	85	15.0	27	10.2	40	12.2	17	13.7	169	13.2
Hospital for an overnight stay or longer	104	18.3	22	8.3	24	7.3	16	12.9	166	12.9
Behaviour management services	10	1.8	21	7.9	25	7.6	18	14.5	74	5.8
Other specialist or service ¹	124	21.9	65	24.5	65	19.8	25	20.2	279	21.7
Total	567		265		329		124		1,285	

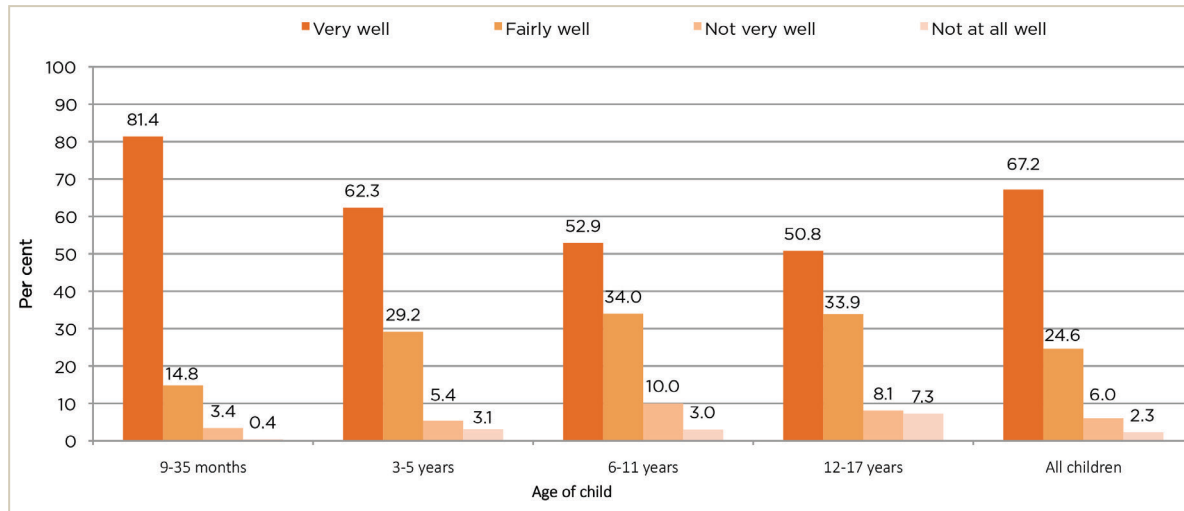
¹ This combines two variables: attendance by the study child since placement at 'other specialist' and 'other service'. The total frequency for this new variable is lower than that for these two individual variables combined, given that some caregivers identified both an 'other specialist' and 'other service'.

Overall, as shown in Table 8.2, approximately two thirds of caregivers felt that children's needs had been 'very well' met by professional services, and only 8% of caregivers felt that the children's health needs had not been well met (6% reporting 'not very well' and 2% reporting 'not at all well'). Perceptions that children's needs had been 'very well' met were most common among caregivers of the youngest children aged 9–35 months (81%) and decreased to 51% for children aged 12–17 years. The most common reason reported by caregivers for the children not receiving the professional services they needed was long waiting lists (24%).

Table 8.2: Caregiver reports of how well the child's needs were met and barriers to receiving professional support, by child age

	9–35 months		3–5 years		6–11 years		12–17 years		Total	
	n	%	n	%	n	%	n	%	n	%
Health needs met by professional services										
Very well	456	81.4	162	62.3	174	52.9	63	50.8	855	67.2
Fairly well	83	14.8	76	29.2	112	34.0	42	33.9	313	24.6
Not very well	19	3.4	14	5.4	33	10.0	10	8.1	76	6.0
Not at all well	2	0.4	8	3.1	10	3.0	9	7.3	29	2.3
Total	560		260		329		124		1,273	
Barriers to receiving professional support										
Long waiting lists	44	17.3	46	30.9	63	29.0	17	20.2	170	24.1
Too far to travel	10	3.9	11	7.4	10	4.6	2	2.4	33	4.7
Cost of the service	13	5.1	10	6.7	8	3.7	1	1.2	32	4.5
No appropriate services	3	1.2	10	6.7	6	2.8	1	1.2	20	2.8
Problems with transport	5	2.0	6	4.0	6	2.8	1	1.2	18	2.6
Other reasons	19	7.5	13	8.7	21	9.7	14	16.7	67	9.5
Total	254		149		217		84		704	

Figure 8.1: Caregiver reports of how well the child's health needs were met, by child age



Caregivers' experiences of professional services and support for the child

For all caregivers (Table 8.3), the most common types of support received by caregivers to assist them in their caregiving role were childcare (27%), respite care (22%) and caregiver support organisations (20%). Caregivers of 3–5 year olds had higher rates of childcare or before/after school care (35%), while caregivers of both 3–5 year olds and 6–11 year olds were more likely to use counselling/psychologist services. Caregivers of 9–35 month olds were also less likely to have used respite care (16%) than the caregivers of children aged 3 years or older (25–30%). Overall, 60% of caregivers reported receiving at least one type of service or support, with caregivers of 3–5 year olds reporting the highest level of professional support (70%).

Table 8.3: Caregiver reports of professional support received, by child age¹

	9–35 months		3–5 years		6–11 years		12–17 years		Total	
	n	%	n	%	n	%	n	%	n	%
Childcare/Before and after school care	133	26.2	92	34.9	86	26.2	12	12.5	323	27.0
Respite care	93	16.4	65	24.5	90	27.4	29	30.2	277	22.0
Carer support organisations and groups	107	21.1	54	20.5	61	18.6	16	16.7	238	19.9
Transport	92	16.2	49	18.5	47	14.3	14	14.6	202	16.1
Carer support teams	65	12.8	37	14.0	43	13.1	10	10.4	155	13.0
Counselling/ Psychologist services	39	6.9	41	15.5	52	15.8	10	10.4	142	11.3
Foster carer advisory groups	42	8.3	17	6.4	29	8.8	8	8.3	96	8.0
After hours and crisis support	27	5.3	21	8.0	24	7.3	5	5.2	77	6.4
Financial advice	7	1.2	2	0.8	4	1.2	0	0.0	13	1.0
Interpreters	2	0.4	0	0.0	0	0.0	1	1.0	3	0.3
Another type of support	13	2.3	6	2.3	8	2.4	1	1.0	28	2.2
At least one type of support received	308	54.5	183	69.6	210	64.2	52	53.6	753	59.9
Total	508–567		264–265		327–329		96–97		1,196–1,258	

¹ Column percentages do not add up to 100%, as caregivers may have received multiple types of professional support.

When comparing foster and relative/kinship carers (Table 8.4), foster carers reported receiving services and supports more frequently than relative/kinship carers, with 68% of foster carers receiving at least one of type of support compared to 51% of relative/kinship carers.

Table 8.4: Caregiver reports of professional support received, by placement type¹

	Foster care		Relative/ Kinship care	
	n	%	n	%
Childcare/Before and after school care	162	26.4	161	27.7
Respite care	185	28.0	92	15.4
Carer support organisations and groups	192	31.3	46	7.9
Transport	135	20.4	67	11.2
Carer support teams	112	18.2	43	7.4
Counselling/Psychologist services	77	11.7	65	10.9
Foster carer advisory groups	79	12.9	17	2.9
After hours and crisis support	72	11.7	5	0.9
Financial advice	5	0.8	8	1.3
Interpreters	2	0.3	1	0.2
Another type of support	13	2.0	15	2.5
At least one type of support received	449	68.2	304	51.2
Total=1,257	614–661		582–596	

¹ Column percentages do not add up to 100%, as caregivers may have received multiple types of professional support.

Table 8.5 shows that 64% of caregivers reported that they continued to require services or support, with caregivers of 3–5 year olds and 6–11 year olds having the highest rates (77% and 70% respectively). The greatest needs overall were for respite care (29%), childcare or before/after school care (28%) and support from carer support organisations/groups (20%). Not surprisingly, caregivers of children aged 9 months to 5 years had a greater need for childcare, while the need for respite care was lowest for children aged 9–35 months.

The most common reason caregivers selected for not being able to get the professional support that they felt they needed was long waiting lists (15%). Overall, 40% of caregivers indicated at least one reason for not obtaining the professional support required.

Table 8.5: Caregiver reports of professional support needed and reasons for not getting the support required, by child age¹

	9-35 months		3-5 years		6-11 years		12-17 years		Total	
	n	%	n	%	n	%	n	%	n	%
Whether support still needed from service										
Childcare/Before and after school care	158	30.8	85	32.3	81	24.8	14	14.7	338	28.2
Respite care	124	22.0	90	34.0	111	33.7	35	36.8	360	28.7
Carer support organisations and groups	103	20.0	54	20.5	65	19.9	17	17.9	239	19.9
Transport	86	15.2	49	18.5	46	14.0	14	14.7	195	15.6
Carer support teams	63	12.3	42	16.0	49	15.0	11	11.6	165	13.8
Counselling/Psychologist services	40	7.1	52	19.6	54	16.4	6	6.3	152	12.1
Foster carer advisory groups	49	9.6	25	9.5	29	8.9	8	8.4	111	9.3
After hours and crisis support	27	5.3	17	6.5	17	5.2	4	4.2	65	5.4
Financial advice	12	2.1	4	1.5	3	0.9	0	0.0	19	1.5
Interpreters	1	0.2	0	0.0	1	0.3	2	2.1	4	0.3
Another type of support	12	2.1	10	3.8	8	2.4	3	3.2	33	2.6
At least one type of support received	319	56.8	203	76.9	228	69.7	59	60.2	809	64.4
Total	513–565		263–265		327–329		95–98		1,198–1,257	
Reasons for not getting professional support needed										
Long waiting lists	39	10.3	37	16.9	51	21.3	9	15.0	136	15.2
No appropriate services	32	8.5	22	10.0	18	7.5	5	8.3	77	8.6
Too far to travel	23	6.1	18	8.2	22	9.2	3	5.0	66	7.4
Cost of the service	19	5.0	12	5.5	15	6.3	1	1.7	47	5.2
Problems with transport	10	2.6	11	5.0	14	5.8	1	1.7	36	4.0
Another reason identified	61	16.1	29	13.2	26	10.8	13	21.7	129	14.4
At least one reason identified	143	37.8	91	41.6	104	43.3	24	40.0	362	40.4
Total	378		219		240		60		897	

¹ Column percentages do not add up to 100%, as caregivers may have required multiple types of professional support and/or had multiple reasons for not getting the support needed.

Overall, caregivers of children from culturally diverse backgrounds were less likely than caregivers of Aboriginal children and other Australian children to continue to require at least one form of professional support and to identify at least one reason for not receiving the professional support required (Table 8.6).

Table 8.6: Caregiver reports of professional support needed and reasons for not getting the support required, by child's cultural background¹

	Aboriginal children		Culturally diverse children		Other Australian children	
	n	%	n	%	n	%
Whether support still needed from service						
Childcare/Before and after school care	128	29.0	39	39.0	155	26.4
Respite care	141	30.4	25	23.2	180	29.4
Carer support organisations and groups	83	18.8	20	20.0	118	20.0
Transport	75	16.2	24	22.2	91	14.9
Carer support teams	76	17.2	17	17.0	63	10.7
Counselling/Psychologist services	47	10.1	8	7.4	87	14.2
Foster carer advisory groups	43	9.8	8	8.0	56	9.5
After hours and crisis support	21	4.8	6	6.0	36	6.1
Financial advice	7	1.5	4	3.7	6	1.0
Interpreters	0	0.0	4	4.0	0	0.0
Another type of support	14	3.0	2	1.9	14	2.3
At least one type of support received	307	66.3	62	56.4	401	64.6
Total=1,195	441–464		100–110		587–621	
Reasons for not getting professional support needed						
Long waiting lists	55	16.2	7	9.5	68	15.5
No appropriate services	25	7.4	3	4.1	47	10.7
Too far to travel	24	7.1	5	6.8	34	7.7
Cost of the service	10	3.0	5	6.8	30	6.8
Problems with transport	22	6.5	2	2.7	12	2.7
Another reason identified	47	13.9	7	9.5	68	15.5
At least one reason identified	140	41.3	20	27.0	188	42.7
Total=853	339		74		440	

¹ Column percentages do not add up to 100%, as caregivers may have required multiple types of professional support and/or had multiple reasons for not getting the support needed.

Table 8.7: Caregiver reports of helpfulness of the professional support used

Service type	Very helpful		Fairly helpful		Not very helpful		Not at all helpful	
	n	%	n	%	n	%	n	%
Childcare/Before and after school care (n=323)	260	80.5	61	18.9	2	0.6	0	0.0
Respite care (n=277)	210	75.8	59	21.3	8	2.9	0	0.0
Carer support organisations and groups (n=236)	156	66.1	77	32.6	3	1.3	0	0.0
Transport (n=201)	148	73.6	48	23.9	5	2.5	0	0.0
Carer support teams (n=154)	117	76.0	32	20.8	5	3.3	0	0.0
Counselling/Psychologist services (n=141)	103	73.1	36	25.5	2	1.4	0	0.0
Foster carer advisory groups (n=96)	62	64.6	24	25.0	9	9.4	1	1.0
After hours and crisis support (n=77)	58	75.3	19	24.7	0	0.0	0	0.0
Financial advice (n=13)	12	92.3	1	7.7	0	0.0	0	0.0
Interpreters (n=3)	3	100.0	0	0.0	0	0.0	0	0.0
Another type of support (n=28)	20	71.4	8	28.6	0	0.0	0	0.0

Caregiver ratings of the helpfulness of professional services or supports received are shown in Table 8.7, with most of the services or types of support found to be ‘very helpful’ or ‘fairly helpful’ (over 90%).

Caregivers’ experiences of support in raising the child

For all caregivers, irrespective of child age (refer to ‘Total sample’ in Table 8.8), the majority (71%) ‘often’ or ‘always’ received support from their spouse/partner in raising the child, with this being not applicable (i.e., the carer did not have a spouse or partner) for 28% of caregivers. Therefore, for caregivers who did have a spouse/partner, the vast majority (98%), reported receiving their support ‘often’ or ‘always’. The majority of caregivers (69%) also indicated that they ‘often’ or ‘always’ received support from other family members, and just over half (53%) indicated that they ‘often’ or ‘always’ received support from friends (with 74% of carers indicating at least ‘sometimes’). Just under half (47%) of caregivers reported receiving support from their own parents at least ‘sometimes’.

When examined according to child age, caregivers of younger children (i.e., aged 5 years or younger) received more support from their spouse/partner, their own parents, and their spouse/partner’s parents, in comparison to caregivers of children aged 6 or more years, and most prominently in comparison to caregivers of 12–17 year olds. Caregivers of children aged 6–11 years were more likely than other caregivers, however, to ‘always’ or ‘often’ receive support from neighbours (at 27%, with the corresponding figures being 22% for caregivers of both 9–35 months and 3–5 year olds and 17% for carers of 12–17 year olds). While the levels of support caregivers reported receiving from various people/groups were often lower for caregivers of 12–17 year olds, almost one quarter of these caregivers reported that community organisations ‘always’ or ‘often’ provided support in raising their children, which, in comparison, was at 14–16% for caregivers of the younger age groups.

Table 8.8: Caregiver reports of support received in raising the child, by child age¹

Person providing support	Never/ Rarely		Sometimes		Often/ Always		Not applicable		Total
	n	%	n	%	n	%	n	%	n
9–35 months (n=567)									
Spouse/Partner	0	0.0	6	1.1	425	75.0	136	24.0	567
Own parents	91	16.1	69	12.2	243	42.9	164	28.9	567
Spouse/Partner's parents	96	16.9	56	9.9	126	22.2	289	51.0	567
Other family members	52	9.2	80	14.1	412	72.7	23	4.1	567
Friends	99	17.5	121	21.3	326	57.5	21	3.7	567
Neighbours	326	57.5	70	12.4	124	21.9	47	8.3	567
Other carers	236	51.2	71	15.4	82	17.8	72	15.6	461
Community organisations	288	50.8	51	9.0	88	15.5	140	24.7	567
Church	193	34.0	40	7.1	69	12.2	265	46.7	567
3–5 years (n=265)									
Spouse/Partner	0	0.0	4	1.5	201	75.9	60	22.6	265
Own parents	42	15.9	20	7.6	108	40.9	94	35.6	264
Spouse/Partner's parents	50	18.9	28	10.6	46	17.4	141	53.2	265
Other family members	35	13.2	37	14.0	182	68.7	11	4.2	265
Friends	65	24.5	57	21.5	131	49.4	12	4.5	265
Neighbours	156	58.9	29	10.9	59	22.3	21	7.9	265
Other carers	149	56.7	29	11.0	50	19.0	35	13.3	263
Community organisations	142	53.6	23	8.7	38	14.3	62	23.4	265
Church	82	31.1	12	4.6	30	11.4	140	53.0	264
6–11 years (n=329)									
Spouse/Partner	0	0.0	6	1.8	224	68.5	97	29.7	327
Own parents	61	18.6	27	8.2	101	30.8	139	42.4	328
Spouse/Partner's parents	61	18.7	20	6.1	35	10.7	211	64.5	327
Other family members	51	15.5	47	14.3	225	68.4	6	1.8	329
Friends	70	21.3	73	22.2	171	52.0	15	4.6	329
Neighbours	169	51.4	43	13.1	90	27.4	27	8.2	329
Other carers	172	52.9	60	18.5	42	12.9	51	15.7	325
Community organisations	169	51.5	42	12.8	45	13.7	72	22.0	328
Church	82	25.0	18	5.5	39	11.9	189	57.6	202
12–17 years (n=124)									
Spouse/Partner	2	1.6	1	0.8	60	48.4	61	49.2	124
Own parents	14	11.5	8	6.6	28	23.0	72	59.0	122
Spouse/Partner's parents	23	18.6	6	4.8	12	9.7	83	66.9	124
Other family members	19	15.3	8	6.5	69	55.7	28	22.6	124
Friends	29	23.4	15	12.1	50	40.3	30	24.2	124
Neighbours	53	42.7	15	12.1	21	16.9	35	28.2	124
Other carers	52	52.5	19	19.2	12	12.1	16	16.2	99
Community organisations	54	43.6	16	12.9	30	24.2	24	19.4	124
Church	15	12.1	5	4.0	12	9.7	92	74.2	124

Person providing support	Never/ Rarely		Sometimes		Often/ Always		Not applicable		Total
	n	%	n	%	n	%	n	%	n
Total sample (n=1,285)									
Spouse/Partner	2	0.2	17	1.3	910	70.9	354	27.6	1,283
Own parents	208	16.2	124	9.7	480	37.5	469	36.6	1,281
Spouse/Partner's parents	230	17.9	110	8.6	219	17.1	724	56.4	1,283
Other family members	157	12.2	172	13.4	888	69.1	68	5.3	1,285
Friends	263	20.5	266	20.7	678	52.8	78	6.1	1,285
Neighbours	704	54.8	157	12.2	294	22.9	130	10.1	1,285
Other carers	609	53.1	179	15.6	186	16.2	174	15.2	1,148
Community organisations	653	50.9	132	10.3	201	15.7	298	23.2	1,284
Church	372	29.0	75	5.9	150	11.7	686	53.5	1,283

1 Column percentages do not add up to 100%, as support may have been received from multiple sources.

As can be observed in Table 8.9, caregivers of Aboriginal children more commonly reported that they 'often' or 'always' received the support of other family members (74%, in comparison to 63% and 68% of caregivers of children from culturally diverse and other Australian backgrounds), but were slightly less likely to report 'often' or 'always' receiving the support of their spouse/partner (68%, in comparison to almost three quarters of caregivers of children from culturally diverse and other Australian backgrounds). Caregivers of children from culturally diverse backgrounds less commonly reported 'often' or 'always' receiving support from their own parents, their partner/spouse's parents, other family members, friends and other caregivers, in comparison to caregivers of Aboriginal children and other Australian children. However, caregivers of children from culturally diverse backgrounds, as well as caregivers of Aboriginal children, more commonly reported 'often' or 'always' receiving support from their neighbours (28% and 25%), in comparison to caregivers of other Australian children (21%).

Table 8.9: Caregiver reports of support received in raising the child, by child's cultural background¹

Person providing support	Never/ Rarely		Sometimes		Often/ Always		Not applicable	
	n	%	n	%	n	%	n	%
Aboriginal children (n=425–465)								
Spouse/Partner	0	0.0	5	1.1	316	68.0	144	31.0
Own parents	76	16.4	46	9.9	179	38.7	162	34.7
Spouse/Partner's parents	82	17.6	44	9.5	77	16.6	262	56.3
Other family members	53	11.4	59	12.7	345	74.2	8	1.7
Friends	100	21.5	93	20.0	244	52.5	28	6.0
Neighbours	262	56.8	38	8.2	115	24.7	48	10.3
Other carers	236	55.5	55	12.9	80	18.8	54	12.7
Community organisations	237	51.0	51	11.0	74	15.9	103	22.2
Church	133	28.6	19	4.1	61	13.1	252	54.2
Culturally diverse children (n=92–111)								
Spouse/Partner	1	0.9	3	2.7	82	73.9	25	22.5
Own parents	17	15.3	13	11.7	35	31.5	46	41.4
Spouse/Partner's parents	10	9.0	8	7.2	14	12.6	79	71.2
Other family members	7	6.3	28	25.2	70	63.1	6	5.4
Friends	28	25.2	27	24.3	50	45.1	6	5.4
Neighbours	54	48.7	14	12.6	31	27.9	12	10.8
Other carers	37	40.2	23	25.0	7	7.6	25	27.2
Community organisations	60	54.1	11	9.9	16	14.4	24	21.6
Church	51	46.0	16	14.4	15	13.5	29	26.1
Other Australian children (n=566–626)								
Spouse/Partner	1	0.2	8	1.3	458	73.4	157	25.2
Own parents	108	17.3	60	9.6	238	38.1	218	34.9
Spouse/Partner's parents	128	20.5	57	9.1	112	18.0	327	52.4
Other family members	87	13.9	75	12.0	427	68.2	37	5.9
Friends	122	19.5	132	21.1	343	54.8	29	4.6
Neighbours	344	55.0	93	14.9	133	21.3	56	9.0
Other carers	303	53.5	86	15.2	89	15.7	88	15.6
Community organisations	320	51.2	61	9.8	86	13.8	158	25.3
Church	165	26.4	36	5.8	64	10.2	361	57.7

¹ Column percentages do not add up to 100%, as support may have been received from multiple sources.

Table 8.10 shows the support received from different people according to placement type. In general, greater proportions of foster carers reported receiving support from their spouse/partner and their spouse/partner's parents (although these results are likely to be primarily attributable to a higher proportion of relative/kinship carers not having a spouse/partner), as well as their own parents, friends and other carers. For example, almost half (46%) of foster carers 'often' or 'always' received support from their own parents compared to 30% of relative/kinship carers. In addition, there was

also a tendency for foster carers, in comparison to relative/kinship carers, to more commonly receive support at least 'sometimes' from their neighbours (39% compared with 32%) and from community organisations (29% compared with 21%). Foster and relative/kinship carers did report relatively similar levels of support, however, from other family members and their church.

Table 8.10: Caregiver reports of support received in raising the child, by placement type¹

Person providing support	Never/ Rarely		Sometimes		Often/ Always		Not applicable	
	n	%	n	%	n	%	n	%
Foster care (n=598–661)								
Spouse/Partner	2	0.3	10	1.5	515	78.0	133	20.2
Own parents	92	14.0	78	11.8	300	45.5	189	28.7
Spouse/Partner's parents	126	19.1	82	12.4	156	23.6	296	44.9
Other family members	77	11.7	92	13.9	462	69.9	30	4.5
Friends	93	14.1	147	22.2	402	60.8	19	2.9
Neighbours	353	53.4	97	14.7	163	24.7	48	7.3
Other carers	268	44.8	126	21.1	139	23.2	65	10.9
Community organisations	326	49.4	79	12.0	109	16.5	146	22.1
Church	194	29.4	49	7.4	80	12.1	338	51.1
Relative/Kinship care (n=549–598)								
Spouse/Partner	0	0.0	7	1.2	395	66.2	195	32.7
Own parents	116	19.5	46	7.7	180	30.2	254	42.6
Spouse/Partner's parents	104	17.4	28	4.7	63	10.6	402	67.3
Other family members	80	13.4	80	13.4	426	71.2	12	2.0
Friends	170	28.4	119	19.9	276	46.2	33	5.5
Neighbours	351	58.7	60	10.0	131	21.9	56	9.4
Other carers	341	62.1	53	9.7	46	8.4	109	19.9
Community organisations	321	53.7	48	8.0	79	13.2	150	25.1
Church	178	29.9	26	4.4	70	11.7	322	54.0

¹ Column percentages do not add up to 100%, as support may have been received from multiple sources.

Caregivers' experiences with caseworkers

Table 8.11 shows that across all children, the number of caseworkers seen by the caregivers since the study child's placement varied from 1 to 10, with approximately equal proportions having seen one, two, or three or more caseworkers, according to caregiver reports. Almost three quarters (73%) of caregivers had face-to-face contact with the child's caseworkers once a month or less, although the majority (58%) did have phone or email contact with caseworkers at least once a month, and 40% had fortnightly or more frequent phone/email contact. On the other hand, 12% of caregivers reported no face-to-face contact with caseworkers since the start of the placement, and 6% reported no phone or email contact (note that this may reflect aspects of how parental responsibility is allocated). While the majority of caregivers were 'very satisfied' or 'satisfied' with their access to caseworkers and with the

assistance they had received from caseworkers, approximately a quarter of caregivers were dissatisfied with access to and assistance from caseworkers.

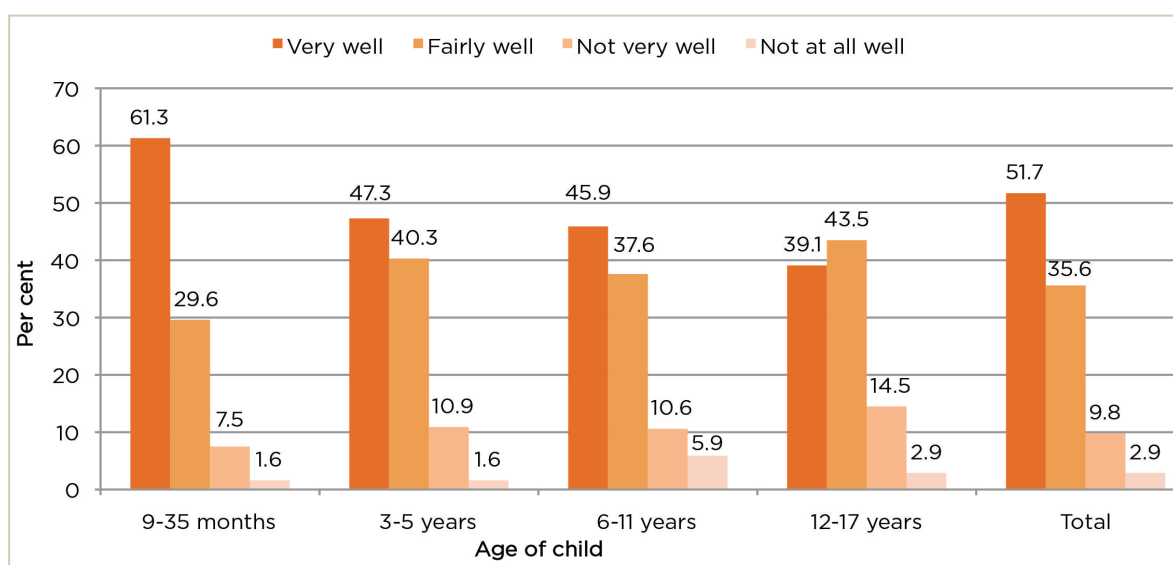
Table 8.11: Caregiver reports of caseworker assistance since the start of the placement, by child age

	9-35 months		3-5 years		6-11 years		12-17 years		Total	
	n	%	n	%	n	%	n	%	n	%
Number of caseworkers seen since the child was placed										
One	221	39.2	87	33.0	113	34.4	42	34.2	463	36.2
Two	189	33.5	80	30.3	114	34.7	49	39.9	432	33.8
Three or more	154	27.3	97	36.7	102	31.0	32	26.0	385	30.1
Total	564		264		329		123		1,280	
Amount of face-to-face contact with caseworker										
At least weekly	43	7.6	10	3.8	11	3.3	12	9.8	76	5.9
About once a fortnight	60	10.6	21	8.0	28	8.5	12	9.8	121	9.4
About once a month	111	19.6	42	15.9	53	16.1	25	20.3	231	18.0
Less than once a month	286	50.4	160	60.6	193	58.7	62	50.4	701	54.6
Never	67	11.8	31	11.7	44	13.4	12	9.8	154	12.0
Total	567		264		329		123		1,283	
Phone or email contact with caseworker										
At least weekly	90	20.2	50	18.9	68	20.7	44	36.1	252	21.7
About once a fortnight	85	19.1	58	21.9	54	16.4	12	9.8	209	18.0
About once a month	80	18.0	49	18.5	56	17.0	23	18.9	208	17.9
Less than once a month	166	37.3	96	36.2	124	37.7	34	27.9	420	36.2
Never	24	5.4	12	4.5	27	8.2	9	7.4	72	6.2
Total	445		265		329		122		1,161	
Satisfaction with access to caseworkers when needed										
Very satisfied	209	36.9	98	37.1	118	35.9	46	37.7	471	36.8
Satisfied	175	30.9	70	26.5	102	31.0	42	34.4	389	30.4
Unsure	47	8.3	17	6.4	18	5.5	4	3.3	86	6.7
Dissatisfied	80	14.1	43	16.3	54	16.4	16	13.1	193	15.1
Very dissatisfied	55	9.7	36	13.6	37	11.2	14	11.5	142	11.1
Total	566		264		329		122		1,281	
Satisfaction with assistance from caseworkers										
Very satisfied	192	34.0	81	30.7	103	31.3	38	31.2	414	32.4
Satisfied	195	34.6	71	26.9	112	34.0	46	37.7	424	33.2
Unsure	47	8.3	24	9.1	36	10.9	7	5.7	114	8.9
Dissatisfied	82	14.5	51	19.3	45	13.7	21	17.2	199	15.6
Very dissatisfied	48	8.5	37	14.0	33	10.0	10	8.2	128	10.0
Total	564		264		329		122		1,279	

When examining caseworker assistance by child age, Table 8.11 shows that caregivers of children aged 3–5 years were the most likely to have seen three or more caseworkers since the study child had been placed with them (37%). With regard to the amount of face-to-face and phone/email contact with caseworkers, caregivers of children aged 12–17 years were more likely to have at least weekly contact with their caseworker. There were only minor variations for child age in regard to caregivers' satisfaction with access to caseworkers when needed and the assistance provided by caseworkers. A slightly higher proportion of caregivers of 12–17 year olds, however, were 'very satisfied' or 'satisfied' with access to caseworkers when needed (72%), in comparison with caregivers of children from other age groups (64–68%). For the amount of satisfaction with all assistance provided by caseworkers, a smaller proportion of caregivers of 3–5 year olds reported being 'very satisfied' or 'satisfied' (58%), in comparison with the other age groups (ranging from 65–69%).

A higher proportion of caregivers of the younger age groups thought that the case plan met their child's needs 'very well' or 'fairly well'. For example, 91% of carers of 9–35 month olds, compared with 83% of carers of 12–17 year olds, thought the case plan had met the child's needs 'very well' or 'fairly well' (Figure 8.2).

Figure 8.2: Caregiver reports of whether the case plan meets the child's needs, by child age (n=621)



As is shown in Table 8.12, almost nine out of ten caregivers (87%) reported being 'very satisfied' or 'satisfied' with the working relationship with the other agencies (e.g., education and counsellors) assisting their child. Only 3% were 'dissatisfied', and 1% were 'very dissatisfied'. When comparing satisfaction in these working relationships across child age, the differences were minimal, although one point of difference was that the caregivers of 12–17 year old children were slightly less likely to be 'very satisfied' (46%), than the caregivers of younger children, with the highest proportion of 'very satisfied' caregivers being for 3–5 year olds (56%).

Table 8.12: Caregiver reports of satisfaction with their working relationship with other agencies related to the child (e.g., education, health), by child age

	Very satisfied		Satisfied		Unsure		Dissatisfied		Very dissatisfied	
	n	%	n	%	n	%	n	%	n	%
9–35 months (n=476)	254	53.4	155	32.6	60	12.6	3	0.6	4	0.8
3–5 years (n=244)	137	56.1	81	33.2	17	7.0	7	2.9	2	0.8
6–11 years (n=312)	156	50.0	119	38.1	13	4.2	18	5.8	6	1.9
12–17 years (n=114)	52	45.6	46	40.4	9	7.9	7	6.1	0	0.0
Total (n=1,146)	599	52.3	401	35.0	99	8.6	35	3.1	12	1.0

Children's experiences with caseworkers

When asked about their experiences with caseworkers, Table 8.13 shows that at least half of the children aged 7 to 17 years interviewed reported that their caseworker 'always' or 'often' provided them with each of the forms of support, with the exception of talking to the child in private, which occurred less frequently (22% of 7–11 year olds and 32% of 12–17 year olds). In addition, just under half of 12–17 year olds thought that the caseworker 'did what they said they would do'. On the other hand, a sizeable minority felt they had 'rarely' or 'never' received support from their caseworker in these different areas.

For 7–11 year olds, the areas in which children had most frequently 'always' or 'often' received support were caseworkers listening to them (56%), the provision of help (56%), and explaining decisions made about them clearly (54%). For 12–17 year olds, the most common areas in which they had 'always' or 'often' received support were explaining decisions clearly (58%), receiving help (58%), and being listened to (55%).

Table 8.13: Child reports of support from their caseworker, by child age

	Always		Often		Sometimes		Rarely		Never	
	n	%	n	%	n	%	n	%	n	%
7–11 years old (n=197–201)										
Talk to you by yourself	24	11.9	21	10.5	47	23.4	37	18.4	72	35.8
Listen to you	89	44.3	24	11.9	24	11.9	13	6.5	51	25.4
Explain decisions made about you clearly	71	36.0	35	17.8	22	11.2	12	6.1	57	28.9
Help you	79	39.9	31	15.7	27	13.6	10	5.1	51	25.8
Do what they say they will do	82	41.6	19	9.6	30	15.2	10	5.1	56	28.4
12–17 years old (n=85–88)										
Talk to you by yourself	17	19.3	11	12.5	15	17.1	24	27.3	21	23.9
Listen to you	36	41.4	12	13.8	10	11.5	12	13.8	17	19.5
Explain decisions made about you clearly	37	43.5	12	14.1	9	10.6	11	12.9	16	18.8
Help you	38	43.2	13	14.8	12	13.6	10	11.4	15	17.1
Do what they say they will do	26	30.2	16	18.6	11	12.8	18	20.9	15	17.4

Figure 8.3: Child reports of ‘Always’ or ‘Often’ receiving support from caseworker, by child age



8.2 Caregiver experience, satisfaction and training to be a carer

Caregivers' length of experience at the time of interview and satisfaction in their role can have a large impact on children's ease of settling into the placement as well as the long-term stability of the placement. Table 8.14 shows that the most common length of experience as a caregiver (with any OOHC placement) was one year (27%), followed by two to three years (25%). Only 19% of caregivers had less than one year of experience, while 29% had four or more years of experience. More caregivers of 9–35 month old children had less than one year of experience than caregivers of older children (24% compared with 11%–19%). Conversely, a greater proportion of those caring for 12–17 year olds had over 10 years of experience (15%) in comparison to caregivers of 9–35 month olds (8%).

Over 90% were 'satisfied' or 'very satisfied' with being a caregiver, and only 3% were 'dissatisfied' or 'very dissatisfied' with being a caregiver. Similarly, almost all caregivers were either 'likely' or 'very likely' to continue as a caregiver (98%). Caregivers of older study children tended to have a larger number of their own children (i.e., 38% had raised four or more children compared to 27% of carers of 9–35 month old children). As displayed in Figure 8.4, the great majority of caregivers reported that they were 'satisfied' or 'very satisfied' with balancing care for the child with the family's schedule (93%), although the proportion that were 'very satisfied' was lower for carers of older children.

Table 8.14: Caregiver reports of their caregiving experience, by child age

	9-35 months		3-5 years		6-11 years		12-17 years		Total	
	n	%	n	%	n	%	n	%	n	%
Experience as a caregiver¹										
1-3 months	15	2.7	5	1.9	6	1.8	0	0.0	26	2.0
4-6 months	44	7.8	15	5.7	19	5.8	8	6.5	86	6.7
7-11 months	74	13.1	30	11.3	28	8.5	5	4.0	137	10.7
1 year	133	23.5	84	31.7	109	33.1	24	19.4	350	27.2
2-3 years	136	24.0	58	21.9	72	21.9	53	42.7	319	24.8
4-10 years	118	20.8	40	15.1	55	16.7	15	12.1	228	17.7
11 or more years	47	8.3	33	12.5	40	12.2	19	15.3	139	10.8
Total	567		265		329		124		1,285	
Satisfaction with being a carer²										
Very satisfied	392	69.5	172	64.9	198	60.4	50	51.0	812	64.7
Satisfied	133	23.6	71	26.8	103	31.4	39	39.8	346	27.6
Unsure	24	4.3	15	5.7	20	6.1	7	7.1	66	5.3
Dissatisfied	11	2.0	5	1.9	4	1.2	1	1.0	21	1.7
Very dissatisfied	4	0.7	2	0.8	3	0.9	1	1.0	10	0.8
Total	564		265		328		98		1,255	
Whether likely to continue as carer²										
Very likely	515	91.3	244	92.1	294	90.5	80	86.0	1,133	90.9
Likely	38	6.7	14	5.3	29	8.9	11	11.8	92	7.4
Unlikely	5	0.9	4	1.5	0	0.0	2	2.2	11	0.9
Not at all likely	6	1.1	3	1.1	2	0.6	0	0.0	11	0.9
Total	564		265		325		93		1,247	
Number of own children raised²										
None	89	15.7	48	18.1	48	14.6	9	9.2	194	15.4
One	85	15.0	23	8.7	26	7.9	6	6.2	140	11.1
2-3	240	42.3	113	42.6	146	44.4	46	46.9	545	43.3
4 or more	153	27.0	81	30.6	109	33.1	37	37.8	380	30.2
Total	567		265		329		98		1,259	

1 Asked of both carers (foster and relative/kinship) and residential care workers.

2 Residential care workers excluded (n=26).

Figure 8.4: Caregiver reports of their satisfaction with balancing care for the child with the family's schedule, by child age (n=1,259)

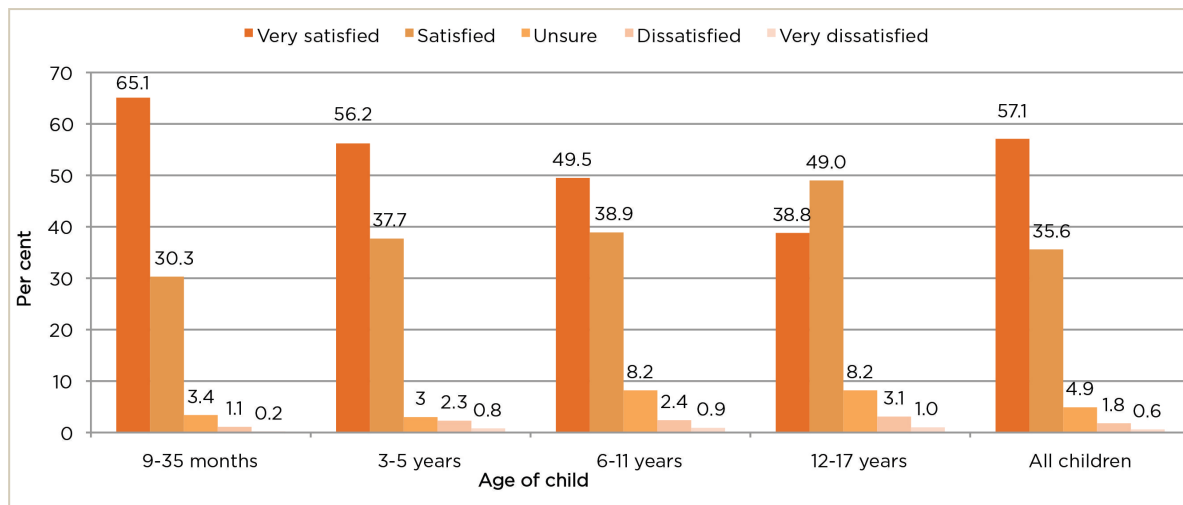


Table 8.15 shows that foster carers tended to have more experience in caring for a child in OOH than relative/kinship carers. For example, 43% of foster carers had four or more years of experience compared with 14% of relative/kinship carers. Similarly, the most common length of experience as a carer across the placement types was one year for relative/kinship carers (39%) and 4–10 years for foster carers (28%). In general, foster and relative/kinship carers had similar levels of satisfaction with being a carer and their likelihood of continuing to be a carer in the future, although foster carers were more likely to report being ‘very satisfied’ with being a carer (70%) in comparison to relative/kinship carers (59%). On the other hand, relative/kinship carers reported raising a higher number of their own children in comparison to foster carers, with 37% of relative/kinship carers and 24% of foster carers having raised four or more children.

Table 8.15: Carer reports of their caregiving experience and satisfaction, by placement type

	Foster care		Relative/ Kinship care	
	n	%	n	%
Experience as a carer				
1–3 months	12	1.8	14	2.3
4–6 months	51	7.7	35	5.9
7–11 months	43	6.5	94	15.7
1 year	118	17.9	232	38.8
2–3 years	154	23.3	139	23.2
4–10 years	183	27.7	45	7.5
11 or more years	100	15.1	39	6.5
Total=1,259	661		598	

	Foster care		Relative/ Kinship care	
	n	%	n	%
Satisfaction with being a carer				
Very satisfied	460	69.6	352	59.3
Satisfied	165	25.0	181	30.5
Unsure	23	3.5	43	7.2
Dissatisfied	11	1.7	10	1.7
Very dissatisfied	2	0.3	8	1.4
Total=1,255	661		594	
Whether likely to continue as carer				
Very likely	587	90.0	546	91.9
Likely	56	8.6	36	6.1
Unlikely	6	0.9	5	0.8
Not at all likely	4	0.6	7	1.2
Total=1,247	653		594	
Number of own children raised				
None	160	24.2	34	5.7
One	104	15.7	36	6.0
2–3	239	36.2	306	51.2
4 or more	158	23.9	222	37.1
Total=1,259	661		598	
Balancing care for the child with their family's schedule				
Very satisfied	401	60.7	318	53.2
Satisfied	222	33.6	226	37.8
Unsure	22	3.3	40	6.7
Dissatisfied	12	1.8	11	1.8
Very dissatisfied	4	0.6	3	0.5
Total=1,259	661		598	

Caregiver training

Overall, 30% of carers reported having a carer development plan, with a higher proportion of foster carers having a plan (40%) compared to relative/kinship carers (19%) (Table 8.16). While 37% of caregivers reported attending a training program in the previous 12 months, there was a large discrepancy between foster carers (56%) and relative/kinship carers (14%). Figure 8.5 shows that of all the relative/kinship carers who had attended a training session in the previous 12 months, only 5% attended two or more sessions, while about one third of foster carers attended two or more sessions.

Overall, the most commonly attended types of training attended over the past 12 months were parenting programs (12%) and OOHc carer training/information (10%).

Not having enough time was the most common barrier to attending training (24%) followed by the training not being held at a convenient time (22%) and not having anyone else to

care for the child (20%). When comparing across the placement types, greater proportions of relative/kinship carers than foster carers felt that appropriate training was not offered to them (25% compared with 13%), and a higher proportion of relative/kinship carers were not interested in participating in training (24% compared to 8% of foster carers). Not being able to find someone to care for their child, and the training being held at an inconvenient time and too far away were more salient barriers for foster carers.

Table 8.16 Carer reports of carer development plans, carer training received and barriers to carer training, by placement type^{1, 2}

Characteristic	Foster care		Relative/ Kinship care		Total	
	n	%	n	%	n	%
Carer development plan						
Yes	169	40.1	67	18.8	236	30.4
No	245	58.2	281	78.9	526	67.7
Don't know	7	1.7	8	2.2	15	1.9
Total³	421		356		777	
Training sessions attended in last 12 months						
Parenting program	85	17.9	19	4.8	104	11.9
OOHC carer training/information	76	16.0	15	3.8	91	10.4
Trauma, attachment or impact of abuse	49	10.3	10	2.5	59	6.7
Behaviour management	43	9.0	7	1.8	50	5.7
Child and young person health development and wellbeing	38	8.0	6	1.5	44	5.0
Cultural understanding	35	7.4	2	0.5	37	4.2
First aid	25	5.3	4	1.0	29	3.3
Mental health/illness	24	5.0	3	0.8	27	3.1
Training through your OOHC agency	23	4.8	1	0.3	24	2.7
Life story work	21	4.4	2	0.5	23	2.6
Contact with birth family	19	4.0	1	0.3	20	2.3
Shared Stories Shared Lives	16	3.4	0	0.0	16	1.8
Adoption/Ageing out/Restoration	16	3.4	1	0.3	17	1.9
Autism and aspergers	16	3.4	0	0.0	16	1.8
Disabilities	12	2.5	0	0.0	12	1.4
Difficult conversations/Communication	11	2.3	1	0.3	12	1.4
Cyber-bullying/Computers	11	2.3	2	0.5	13	1.5
Drugs and alcohol	10	2.1	2	0.5	12	1.4
Legal information/Court processes	9	1.9	3	0.8	12	1.4
Impact of fostering on carers children and family	8	1.7	2	0.5	10	1.1
Stress management for carers	8	1.7	2	0.5	10	1.1
Other	34	7.1	6	1.5	21	2.4
Total	476		400		876	
At least one training session attended in last 12 months						
	268	56.3	55	13.7	323	36.9
Total	476		400		876	

Characteristic	Foster care		Relative/ Kinship care		Total	
	n	%	n	%	n	%
Reasons why hard to take part in training						
Not enough time	120	25.2	92	23.0	212	24.2
Not at a convenient time	140	29.4	54	13.5	194	22.1
No one else to care for the child	126	26.5	48	12.0	174	19.9
Appropriate training not offered	64	13.4	98	24.5	162	18.5
Not interested	36	7.6	97	24.3	133	15.2
Too far away	77	16.2	23	5.8	100	11.4
Other reason - Don't know what is available ⁴	2	0.4	4	1.0	6	0.7
Other reason - Transport issues ⁴	4	0.8	1	0.3	5	0.6
Other reason - Insufficient notice given ⁴	5	1.1	1	0.3	6	0.7
At least one barrier	330	69.3	291	72.8	621	70.9
Total	476		400		876	

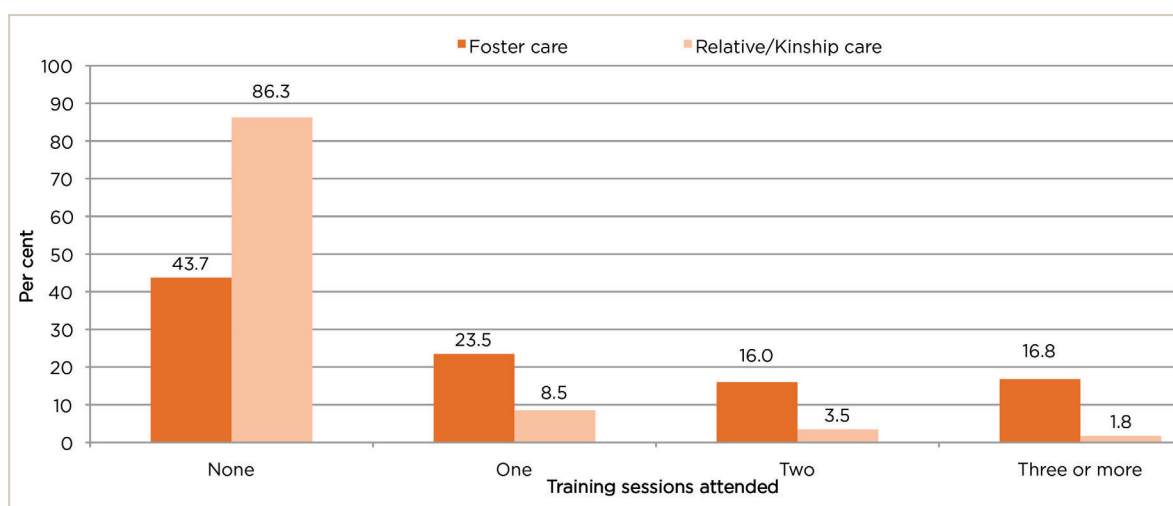
1 Column percentages do not add up to 100%, as caregivers may have attended multiple types of training and have multiple reasons for why it is hard to take part in training.

2 Unit of analysis is the carer.

3 Excludes missing cases (n=99).

4 Responses coded from 'Other (specify)'.

Figure 8.5: Carer reports of number of training sessions attended, by placement type (n=876)



8.3 Summary of key findings

Services and support provided to children and carers

- The most common health service provided to children was a general practitioner consultation followed by consultations with a paediatrician and receipt of dental services.
- Children aged 12–17 years attended dental and counselling/psychological services more often than younger age groups, while younger children aged 9–35 months attended a paediatrician consultation or an Early Childhood Health Centre more often than older children.
- The majority of carers felt that children's needs had been very well met by professional services, while fewer than one in 10 carers felt that their child's health needs had not been well met.
- The most common types of support received by carers to assist them in caring for the child were childcare, respite care, and carer support organisations/groups.
- In terms of services needed and not yet accessed, the greatest need overall was for childcare or before/after school care, respite care and support from carer support organisations/groups. The most frequently identified reason that prevented access to services was long waiting lists.
- Carers also commonly received support from their spouse/partner, family members and friends in raising the study children.

Caseworker support

- The number of different caseworkers seen by the child since starting the current placement varied from one to 10, with relatively similar proportions having been seen by one, two, or three or more caseworkers.
- The majority of carers had less than monthly face-to-face contact with their caseworker and approximately 1 in 8 carers never had face-to-face contact with their caseworker. However, phone or email contact with caseworkers was more frequent (40% had fortnightly or more frequent phone/email contact).
- Overall, approximately two thirds of carers were satisfied with their access to caseworkers when needed, and similar proportions were satisfied with the assistance they had received from caseworkers.
- Over half of children aged 7–17 years thought their caseworker frequently listened to, helped them and explained decisions clearly, but did not as frequently talk to them in private.

Carer experience, satisfaction and training

- Approximately half of carers had 1–3 years experience in caring for a child in OOHC, and over a quarter had four or more years of experience in caring for children in OOHC.
- Most carers were satisfied with being a carer and almost all carers were likely to continue as a carer.
- Overall, 93% were satisfied with balancing care for the child with the family's schedule, but satisfaction was slightly lower among carers of older children.
- Just over a third of carers had attended a training program in the previous 12 months, and just under a third had a carer development plan in place.
- More foster carers than relative/kinship carers reported having a carer development plan in place and had attended training in the past 12 months.

8.4 Conclusion

Children and caregivers participating in the POCLS had received a broad range of services, support and information since the start of the placement. Overall, caregivers felt that their needs and those of the study child had been well met by the services received. However, a number of service needs remained. Caregivers also identified a range of reasons that prevented their ability to access services for the child and themselves. Generally, caregivers were satisfied with their access to caseworkers and the assistance that had been provided. However, children were less likely to report being satisfied with caseworker support.