

drummond street services Submission
Australian Law Reform Commission
Review of the Family Law System
Discussion Paper No 86 (2018)
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This submission responds to proposals elaborated in the Australian Law Reform Commission, *Review of the Family Law System*, Discussion Paper No 86 (2018). The submission has a focus on Chapter 4 *Getting Advice and Support*.

drummond street services concurs with a number of suggestions proposed in the Discussion Paper. Specifically, we endorse the necessity for multi-level reforms to redevelop and design a Family Law system that reflect the contemporary needs and lives of Australian families and children. (1.52). The norm of family separation, repartnering and parental roles needs to be viewed as much more than a legal matter, but foundational to an individuals' families' and children views of their wellbeing, often over their lifetimes. Therefore, responses and supportive structures for families who are contending with separation and changes to their parental relationships must reflect efforts to address issues that compromise wellbeing across well-known and uncontested multiple health domains. Consequently, drummond street encourages in the strongest possible terms the adoption of a Public Health approaches to frame the plan for further changes. (1.53)

The use of a Public Health approach, that positions science, evidence and cross-sector collaboration at its nexus to achieve the greatest benefit for the highest number of people; specifically, children in the context of 'the best interests' principle and importantly places an emphasis on prevention and early intervention. It is driven by research indicating the factors which increase or reduce likelihood of wellbeing for children and adults, families and communities over the long term. These risk and protective factors relate to 'ecological domains' of the individual, their family, their peers and/or school, unanticipated stressful or adverse (or beneficial) life events, their community, and broader societal influences. Risk and protective factors also arise or reduce over time with new developmental stages and family life course transitions. Research indicates risk factors inter-relate and cumulate over time, with the more risk factors present the increased likelihood of poorer outcomes.

Public health approaches are implemented by working actively and collaboratively between services, professionals and sectors with individuals, families and communities. A developmental perspective is also important to support individuals and families through vulnerable transitions, such as separation.

Prevention strategies aim to reduce occurrence or recurrence of risks in the first place; they are more effective and efficient than treatment and recovery interventions for individuals. Relationships with parents have a key influence on the impact that life events and transitions have on children. Children who experience loving, nurturing and caring relationships with their parents through transitions such as separation are more likely to capably move through such experiences without lasting detrimental impact on their developmental processes. Separating families face risks such as financial distress, mental health, family violence and drug and alcohol issues that can compromise the care that parents are able to provide to their children. Timely supports based on thorough whole of family assessment can reduce the risks to children that emerge as a consequence of compromised parenting, thereby preventing harmful impact on children. Some communities or groups are at higher risk of mental ill-health due to a range of social and economic factors outside their control. It is important to assess any reforms in relation to access and support experiences of those marginalised by current legal and service processes against a Public Health framework.

(4.5) We support the proposal to offer both community-based services through the Family Hubs and court-based services through the expanded Family Advocacy and Support Service. Families seeking assistance from the Family Law System have a range of intersecting legal and support needs and the

current legal and support systems intending to respond are fragmented and siloed. We encourage that the practice models underpinning these services as outlined in the discussion paper be expanded even further, proposing that services have the resources and flexibility to respond both to individual family members and, where warranted, whole family units, when assessing and planning to address people's support needs. A family unit identifies the system of relationships of care givers, siblings and extended family that are part of a child's developmental ecology or world, where a family can be intact, not intact or in the process of separating.

The Family Law system must not be separate and distinct, but one aspect of the wider systems and processes that promotes or undermines health and wellbeing.

The challenge for families is not only to navigate access and engagement with the complex fragmented service system but also for the service system to deliver service responses in a way that takes account of the intersections between the different issues to which each service is responding. Put simply, services need to respond to families as people inextricably embedded in complex, multilayered relationships, not as a presenting issue. Any reform processes must centre and compel services and systems to organise themselves around families, rather than expect families to construct themselves and their lives around service's needs. It is integration, not only connection and coordination, that underpin any real and tangible efforts to address service fragmentation. Consequently, we propose that the Families Hubs share with the Family Advocacy and Support Service a capability to provide a service response to families who experience multiple and complex needs, such as family violence, mental health and drug and alcohol issues.

4. Getting Advice and Support

Families Hubs

Proposal 4–1 The Australian Government should work with state and territory governments to establish community-based Families Hubs that will provide separating families and their children with a visible entry point for accessing a range of legal and support services. These Hubs should be designed to:

- identify the person's safety, support and advice needs and those of their children;
- assist clients to develop plans to address their safety, support and advice needs and those of their children;
- connect clients with relevant services; and
- coordinate the client's engagement with multiple services.

We agree with the proposal to establish community-based Families Hubs that will facilitate families to access the right services, at the right time by the right people, based on a thorough assessment of their needs, aspirations, risk and protective issues. However, we believe that assisting a person with their connection and coordination with multiple services will not be sufficient to meet every separating families' needs. Rather, the intensity of intervention for individuals and families need to be matched to their specific support needs.

When responding to separating families with multiple and complex needs, assessment of a persons' safety and support needs is incomplete if a whole of family approach that engages with all family members is not adopted (4.8). An integrated service response is required, established on the platform of a thorough assessment of the conditions of families' lives, one that is child centred and situates a dispute about children in the wider context of a child's developmental world. Considered assessment,

not just limited to administrative or systems management response seeks to identify and develop strategies to address risk and protective factors for children and young people. Given the importance of parents or caregivers to a child's developmental processes, a focus on the matters that impact on their capability to be the kind of caregiver that promotes healthy child development is essential to resolving family disputes between parents about children guided by a principle of "best interests of the child". Thorough assessments can provide the basis for a coordinated care plan that can include strategies for managing engagement with other support services both to respond to immediate needs and issues but sustained over time acknowledging that reformation of the family unit and parenting post separation shifts, changes and adapts over time. This process may also provide a basis for the design and provision of support to families navigating court processes, assisting families to manage engagement in multiple jurisdictions.

We agree with the proposal to develop Families Hubs but encourage that an approach that offers two distinct levels of servicing be considered.

Brief Responses (aligning with the ideas set out in 4.15 – 4.43 of the Discussion Paper). These brief responses would suit those separating families with low or medium risks and safety issues where an intake/triage process identifies initial risks and needs, in turn establishes engagement between a single case manager and a person seeking support, and together they develop a case plan that provides direction and intention to connection with other Hub based services. Importantly, Brief Responses can include engagement with multiple family members.

We agree that the service will benefit from use of a web-based client record management system which provides comprehensive demographic, risk, safety and intervention data at family, individual and service report levels (4.25).

In cases where family violence is present along with other co-occurring health and wellbeing risks, we propose that an Intensive Response be provided, one that offers 1) a separate case specialist to engage with the perpetrator, 2) a case specialist to engage with the victim/survivor, and their children and significant others, and 3) an intensive case coordinator who can support a comprehensive family assessment, collaborative case planning and review and the delivery of individual tailored support services and interventions through the specialist Victim/Survivor and Perpetrator Case Specialists.

International and local evidence creates a strong argument for integrating both victim and perpetrator programs within a family level assessment and interventions and processes to reflect the complexity of family violence presentations. Given the inter-relational nature of family violence i.e. children and adults as victim survivors and adults as perpetrators, are inherently linked to risks at the individual and family setting level, effective service responses must identify and respond to the needs of all family members through thorough assessment, safety planning, case management and individualised and co-ordinated responses for all.

Barriers to timely and early service engagement and the navigation of complex systems to meet the diversity of needs of a family impacted by violence are shown to be the greatest impediments in addressing violence, reducing episodes of harm and recovery. Effective safety planning, care coordination and case management must join up, put the victim at the centre and hold the perpetrator to account rather than silo the needs of victims versus perpetrators – whilst their individual and

differential service needs are met. This includes holding perpetrators responsible for their violence within a restorative justice framework. Key restorative justice principals underpin our approach in that:

- Crime causes harm and justice should focus on repairing that harm.
- The people most affected by the crime should be able to participate in its resolution.

The Integrated Service Response model ensures effective response to the risks, needs and issues impacting both on victims and perpetrators.

We propose that a Families Hub requires capability to deliver both Brief and Intensive Responses, while the Family Advocacy and Support Service has a focus on delivery of Intensive Cases.

Proposal 4–2 The Australian Government should work with state and territory governments to explore the use of digital technologies to support the assessment of client needs, including their safety, support and advice needs, within the Families Hubs.

We agree that there is a strong case for use of digital technologies to facilitate access, engagement and delivery of services both to those who don't have local services or for whom engagement with supports needs to fit in with their and their families' lifestyle.

Proposal 4–3 Families Hubs should advance the safety and wellbeing of separating families and their children while supporting them through separation. They should include on-site out-posted workers from a range of relevant services, including:

- specialist family violence services;
- legal assistance services (such as community legal centres);
- family dispute resolution services;
- therapeutic services (such as family counselling and specialised services for children);
- financial counselling services;
- housing assistance services;
- health services (such as mental health services and alcohol and other drug services);
- gambling help services;
- children's contact services; and
- parenting support programs or parenting education services (including a program for fathers).

The Families Hub as proposed in the Discussion Paper will improve the capability of the current system to provide such a response – a case manager will provide better support for service coordination; less complication with travel to access multiple services; improved working relationships between services as a consequence of co-location and cooperation. These reforms go some way to alleviating the problems caused by service fragmentation and siloes, however the proposal to structure responses around individuals and, where needed, their children will continue to see responses organised around parts of families, rather than joined up responses to family units. Effective outcomes require a family focused response, rather than a person focused response.

Achieving this requires a multi-agency response where services work together at points that are safe rather than just co-locate or work alongside. An integrated service response is required, one that responds to the family as a system and which pulls together the different service interventions as a system. A multi-agency response requires both an intake process that identifies a person's safety, support, and advice needs and those of their children *and* an assessment process that can identify how that person's needs intersect with the needs of other family members. All relevant agencies need to work together in the same room, with engaged staff identifying risks and issues, problem-solving, and planning a coordinated response to all members of family units, adults and children. This joined-up response is a coordinated process involving timely decision making, focused actions, and on-going reviews.

We agree that there needs to be reforms to the relationships between services if the service system is to prevent separating families from having to repeat their story. However, much more is required in order that separating families experience responses to their situations that are sensitive to the specific needs of each family unit. To limit the extent to which families are required to repeat their story is an important system reform and will improve families experiences of a system that is cooperative and coordinated. However, the service system needs to take responsibility for the development of a genuine system, not merely a collection of services.

For family units, an integrated response is required in which different agencies work collectively for the safety and developmental outcomes of all children and adults. In cases where there has been family violence this will require services to participate in collaborative meetings, where all agencies involved with the family unit engage in identification of risks and issues, problem-solve, and plan a coordinated response to victim/survivors, children and perpetrators, review case progress, supported by case management.

Proposal 4–4 Local service providers, including Aboriginal and Torres Strait Islander, culturally and linguistically diverse, LGBTIQ and disability organisation's, specialist family violence services and legal assistance services, including community legal services, should play a central role in the design of Families Hubs, to ensure that each hub is culturally safe and accessible, responsive to local needs, and builds on existing networks and relationships between local services.

Partnerships rely on a good shared understanding of goals and outcomes which are at best mutually beneficial or at least complimentary. drummond street supports the principle that local services, including those that respond to the needs to diverse communities, must be involved in the design of Families Hubs. Importantly, differential funding and capacity within different local service providers will have an impact on the extent to which this principle is realised.

drummond street believes it would be very useful for ACCO's to receive the funding they require to build the right partnerships for the most positive outcomes and for government to identify a role in supporting and facilitating this work. This would assist agencies identify ways to collaborate in contributing to the development of culturally safe and accessible Families Hubs.

An expanded Family Advocacy and Support Service

Proposal 4–5 The Australian Government should, subject to positive evaluation, expand the Family Advocacy and Support Service (FASS) in each state and territory to include:

- an information and referral officer to conduct intake, risk and needs screening and triage, as well as providing information and resources;

- a family violence specialist legal service and a family violence specialist support service to assist clients who have experienced or are experiencing family violence; and
- an additional legal service and support service, to assist clients who are alleged to have used family violence and clients who are not affected by family violence but have other complex needs.

Proposal 4–6 The FASS support services should be expanded to provide case management where a client has complex needs and cannot be linked with an appropriate support service providing ongoing case management.

Proposal 4–7 The level and duration of support provided by the FASS should be flexible depending on client need and vulnerability, as well as legal aid eligibility for ongoing legal services.

Proposal 4–8 The Australian Government should, subject to positive evaluation, roll out the expanded FASS to a greater number of family court locations, including in rural, regional and remote locations.

drummond street supports the plan to expand the Family Advocacy and Support Service outlined in Proposals 4-5 to 4-8 but encourages that the model be further developed better to support an integrated service response.

We support the development of a specialist FASS Legal and Support Services, enhanced by the introduction of a case management capability where needed. It is appropriate to structure the two specialist support services to improve response to family violence around the differing needs of victim/survivors and perpetrators of family violence. As has already been indicated earlier in this submission, we encourage that the service model for FASS be further extended beyond the model proposed in the discussion paper by implementing an integrated service response, one that includes the Integrated Service Response Case Manager who is responsible for ensuring the provision of Integrated Case Management, Victim/Survivor Recovery Plans and Perpetrator Case Management Plan. This includes initial risk and safety screening, integrated engagement with Victim Case Specialist and Perpetrator Case Specialist. This approach ensures case coordination planning, linkage to and the provision Intensive Case Management support for higher risk cases. It requires that legal and support services work together, prioritising safety and recovery, formulate