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Learnings from a child-centred approach to Intensive Family Support Services

Sally Kirk – Safer Family Services

Henry Pharo – Pathways, Evidence and Partnerships

Acknowledgement

Marni Ngadlu Tampinhi Ngadlu Kurna Yartangka Inparrinhi
Ngadlurlu Iyangka Yaitya Miyurnaku Taikurtirna kuma Parnaku Pirkurna-Purrutyi
Karrpanthi, Parnaku Tapa-Purruna-itya
Kumartarna Yaitya Miyurna iyangka yalaka ngai tampinhi

It's good that we acknowledge that we are meeting on Kurna land

We are here to support Aboriginal families and their communities in their way of life

I also acknowledge all other Aboriginal people here today

Overview and Housekeeping

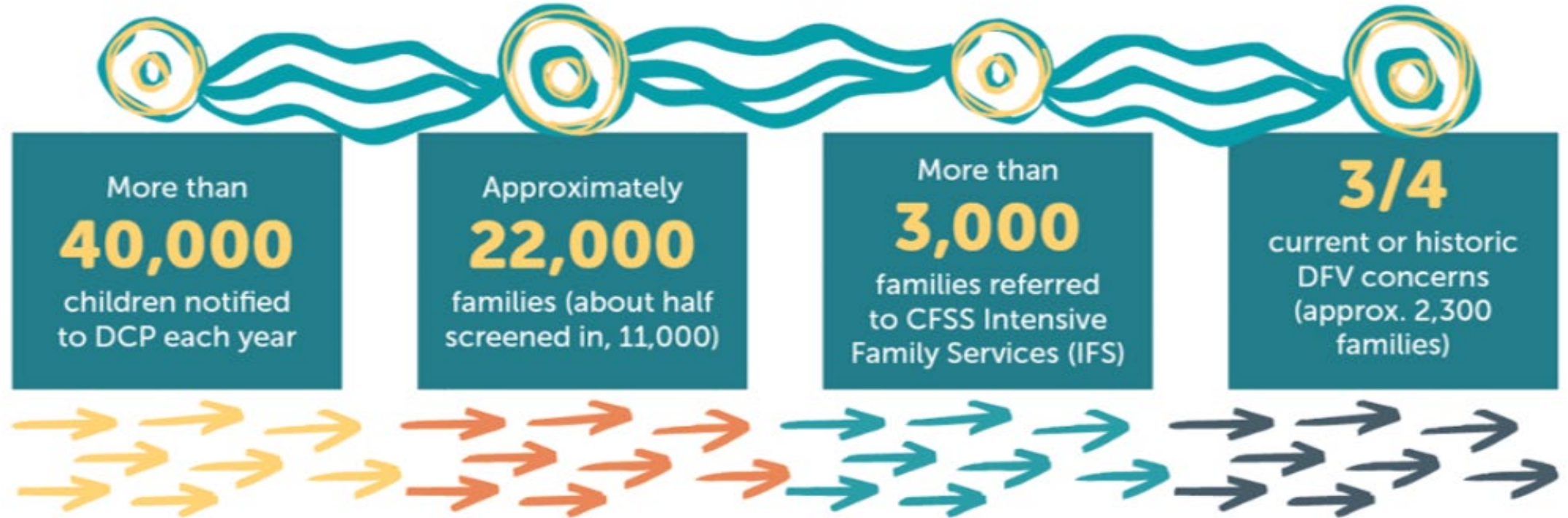
Focus of the presentation

- Building on past Child and Family Support System learning insights
- Safer Family Services practice insights

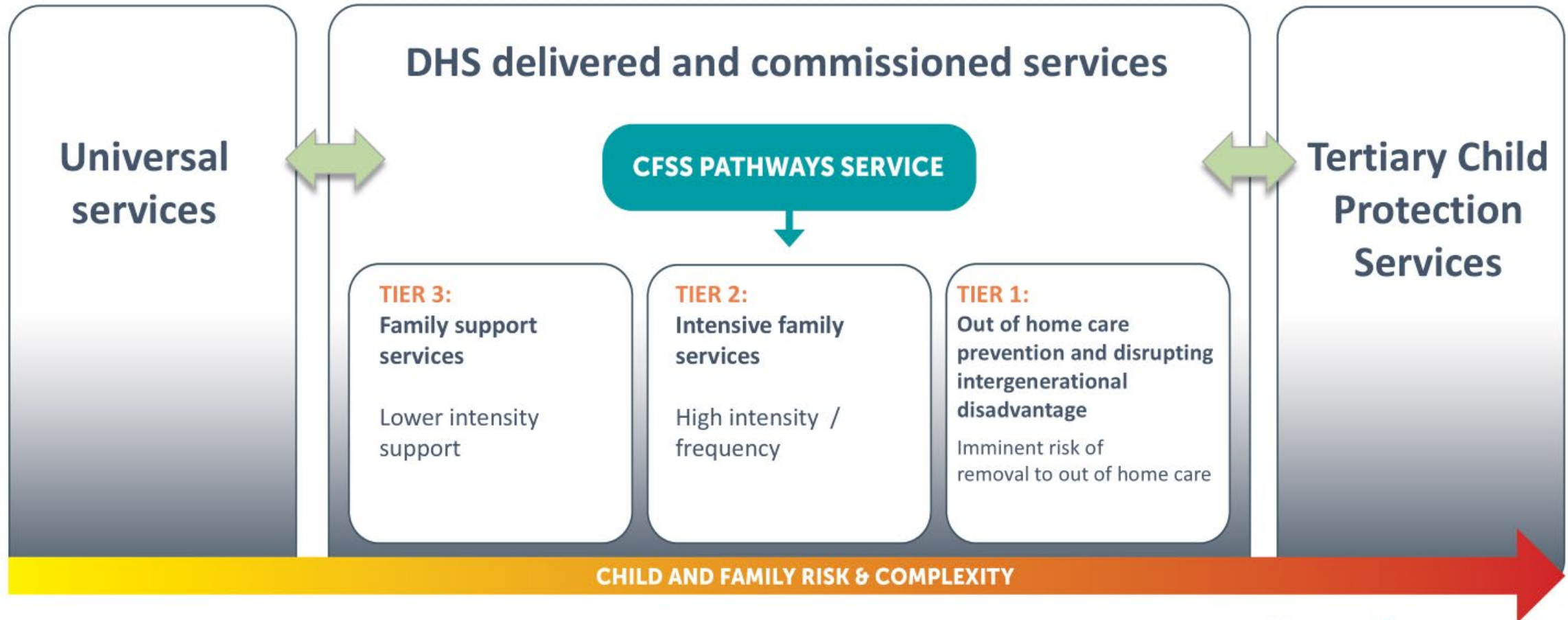
Townhall format and Q&A

Want to know more about the Child and Family Support System? Check out the DHS Website

South Australian Context



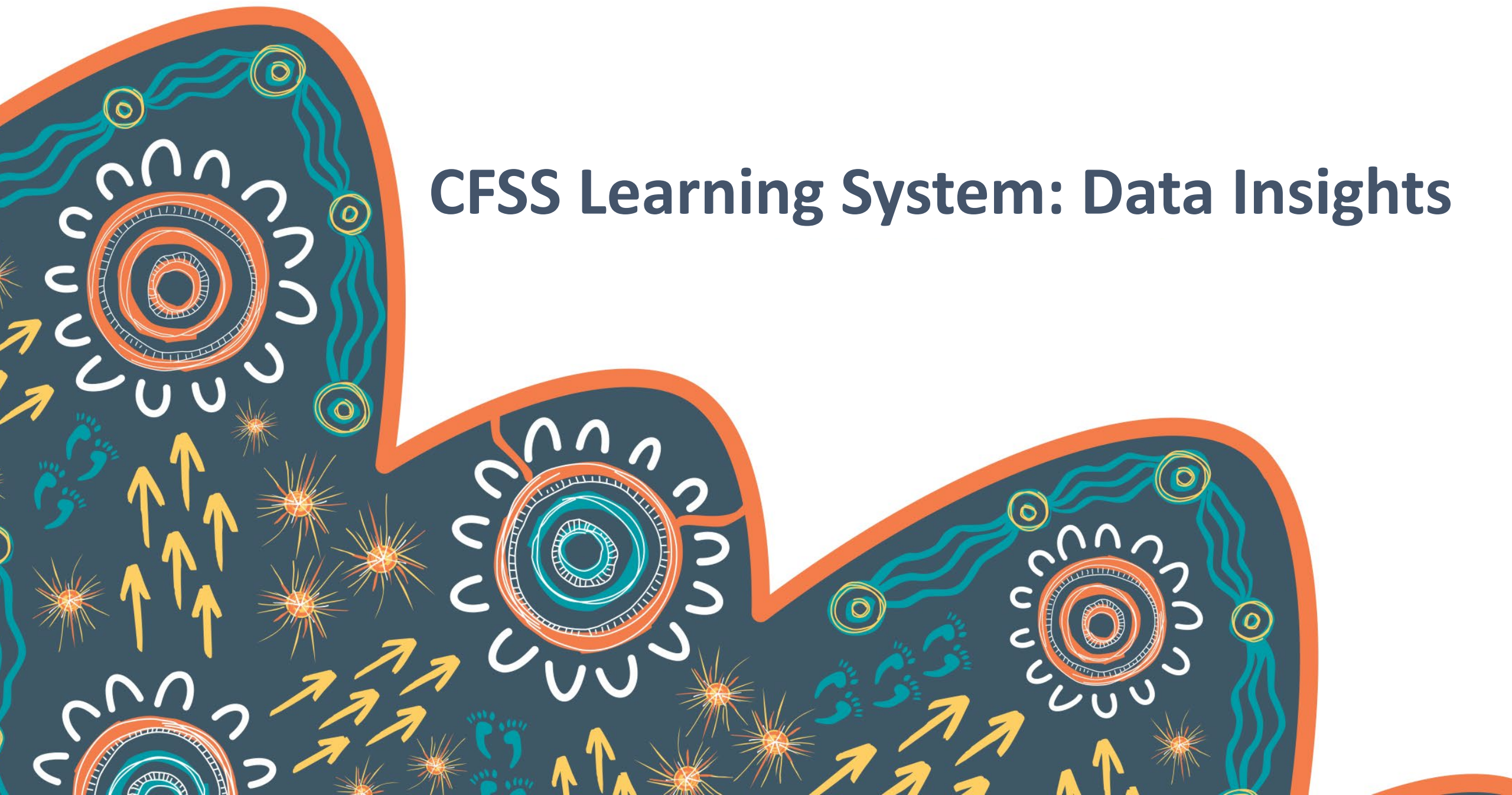
Child and Family Support System (CFSS) Overview



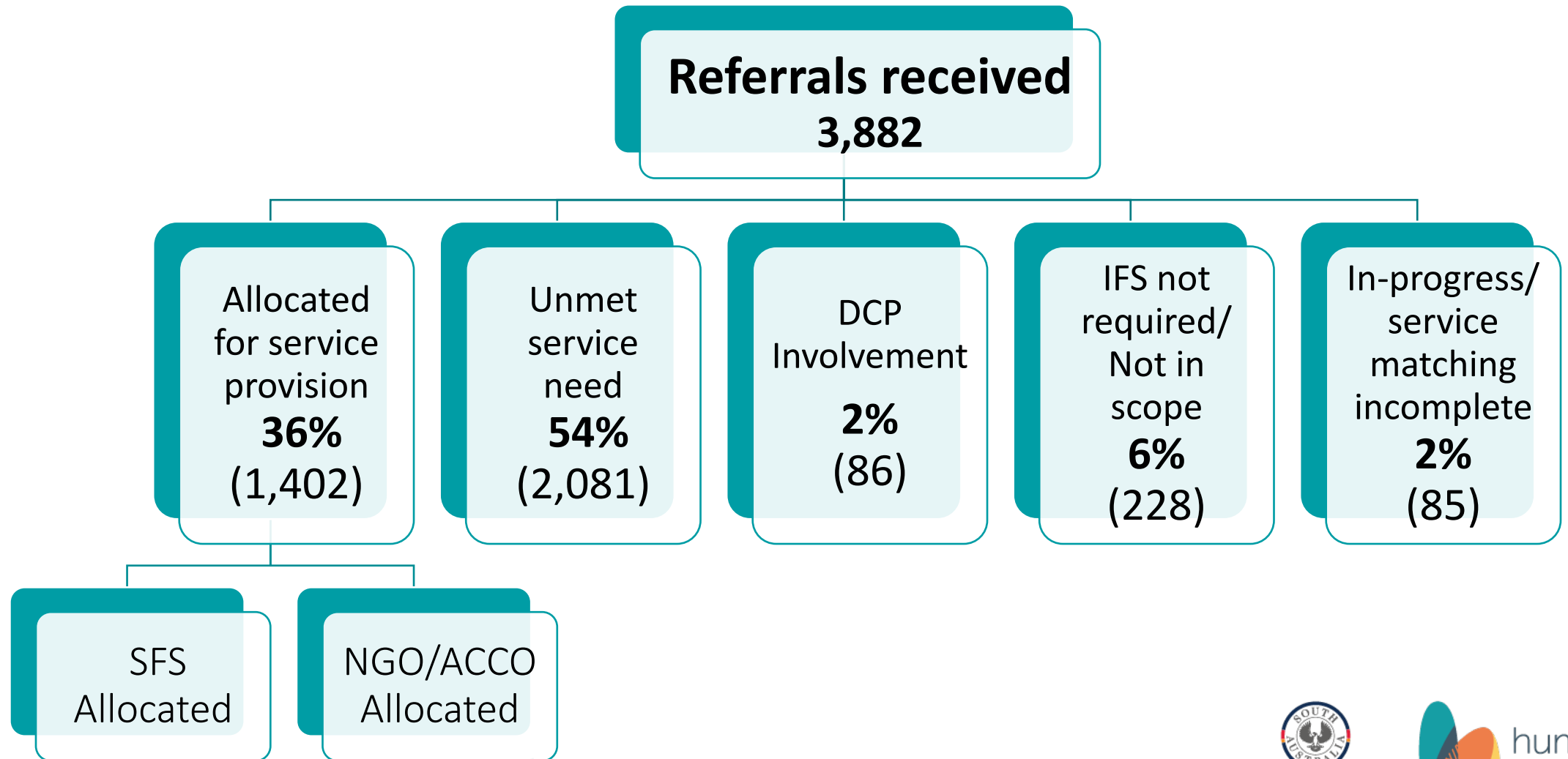
CFSS Learning System



CFSS Learning System: Data Insights

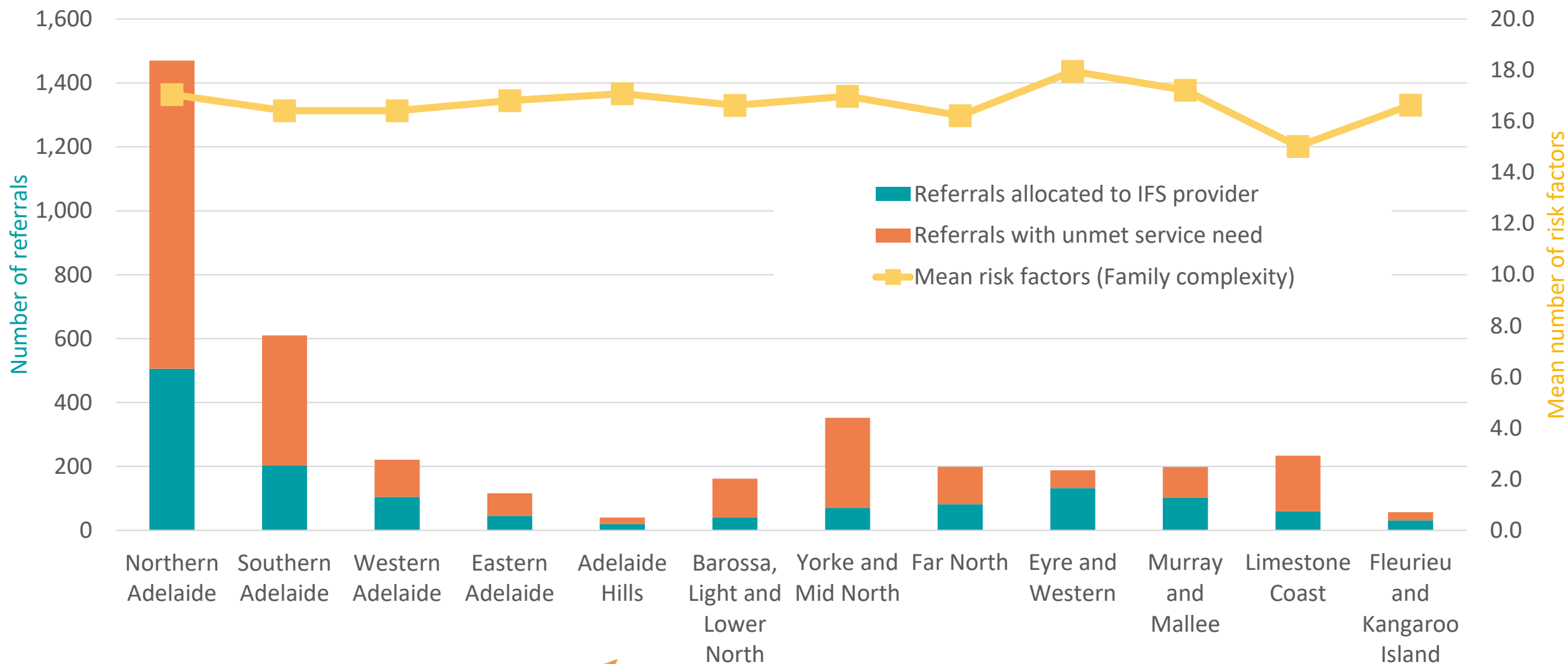


Intensive Family Service Referrals - 2023/24



Monitoring service reach across regions

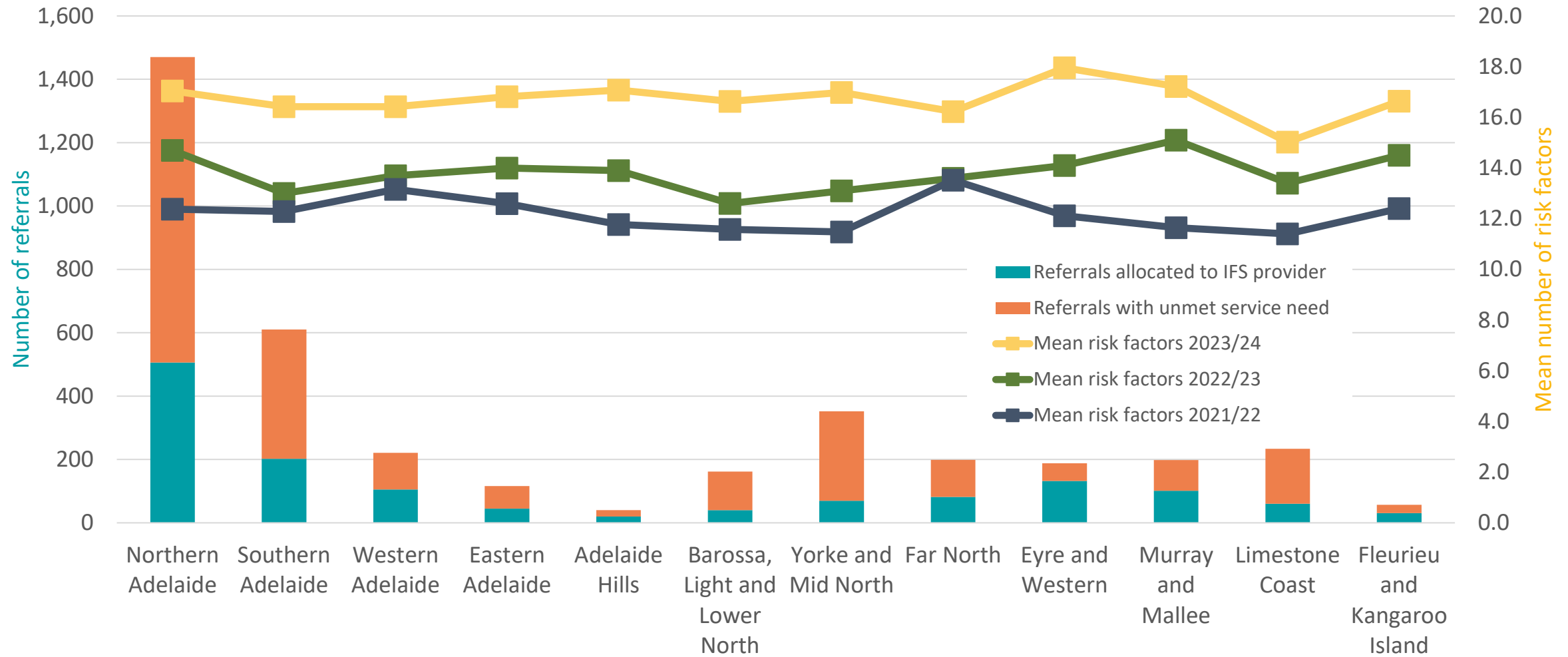
Number of referrals and Family complexity (mean number of risk factors by allocation outcome and region, Tier 2 referrals 2023/24)



Source : CFSS Data (DRAFT): Tier 2 IFS referrals processed by Pathways during 2023/24. Analysed by EIRD, Dr DN Teusner. Referral counts exclude referrals with unknown residential address (n= 35). Mean risk factor estimates exclude referrals with incomplete family complexity (n =35).

Changes in Family Complexity over time

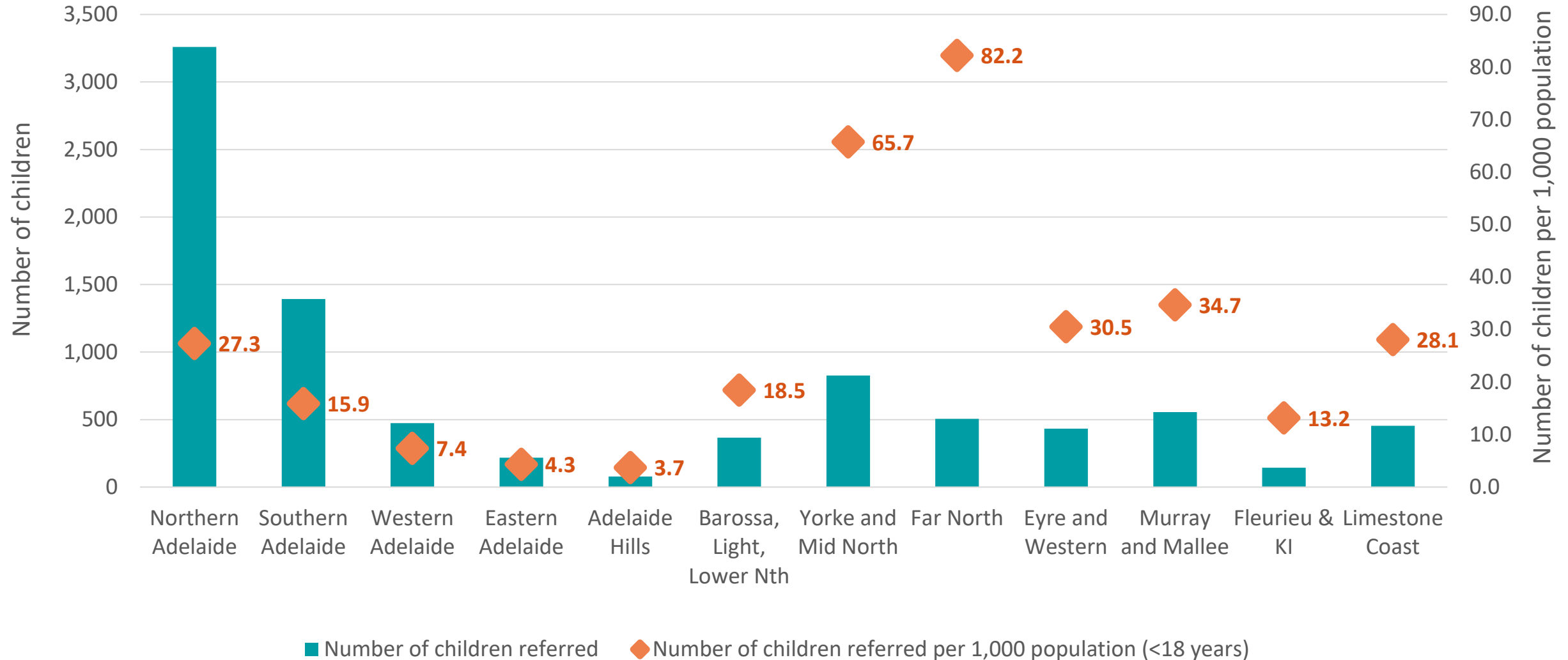
Number of referrals and Family Complexity (mean number of risk factors) by allocation outcome and region, Tier 2 IFS referrals 2023/24



Source : CFSS Data (DRAFT): Tier 2 IFS referrals processed by Pathways during 2023/24. Analysed by EIRD, Dr DN Teusner. Referral counts exclude referrals with unknown residential address (n= 35). Mean risk factor estimates exclude referrals with incomplete family complexity (n =35).

How service need vary by region

Number of children referred and rate per 1,000 population by region, children included in Tier 2 IFS referral 2023/24



Source : CFSS Data (Final): referrals processed by Pathways during 2023/24. Analysed by EIRD -Dr DN Teusner.

Referral counts exclude referrals with unknown residential address. Child counts exclude unborn children subject of the referral. Estimates are not counts of unique children; some children may be referred more than once during the year. Population estimates 2023 PHIDU Social Atlas, Unincorporated areas excluded.

Safer Family Services

Our North Star



curious

brave

accountable

reliable

unconditional positive regard

SFS Intensive Family Services

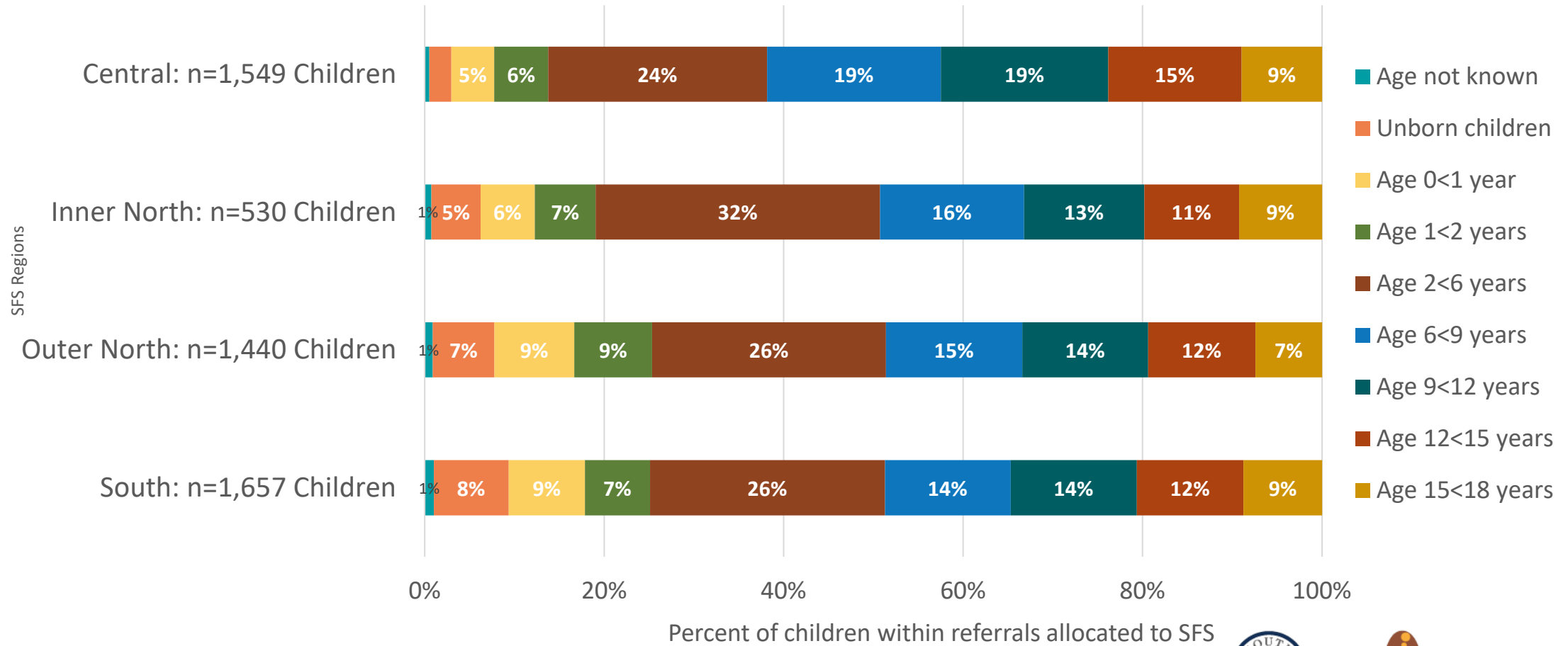
Our Vision all children are safe and well at home, in family, community and culture.

- SFS Intensive Family Services provides **direct services to families** through the antenatal period, infants, children and young people up to 18 years of age who are presenting with high level risks and complexities
- The SFS Intensive Family Services provide **intensive case management** support to address child safety and risk and build parental capacity and resilience in the longer term.



Who are the children we work with?

Proportion children referred by age group (at time of referral), SFS allocated Tier 2 IFS, 2021-22 to 2023-24

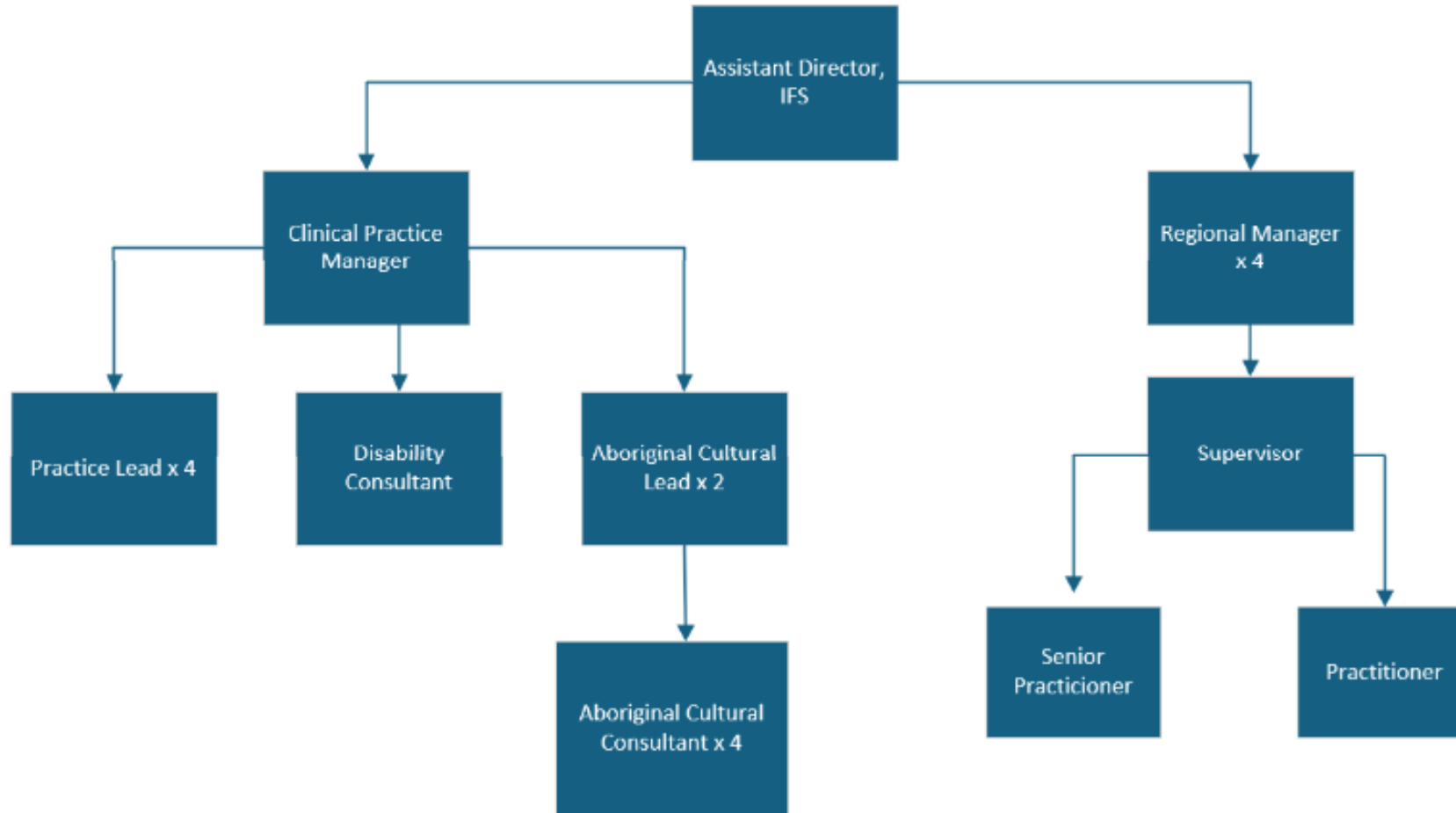


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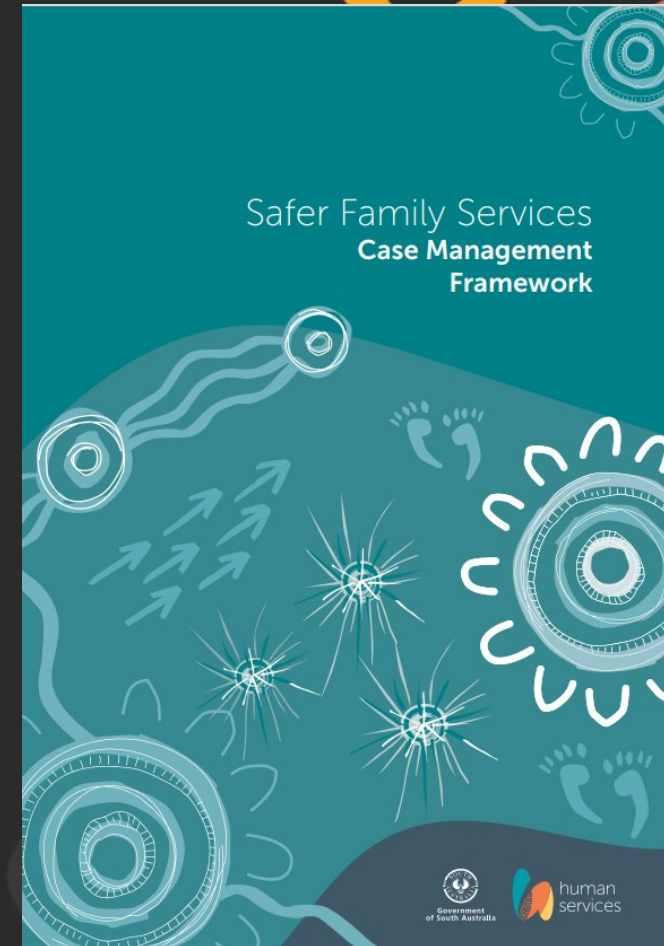
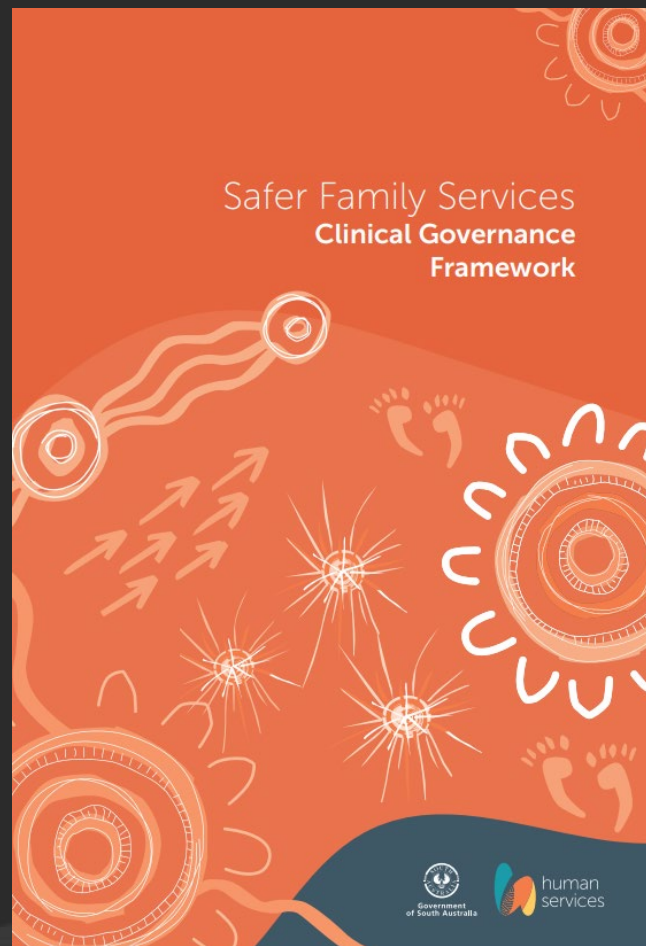
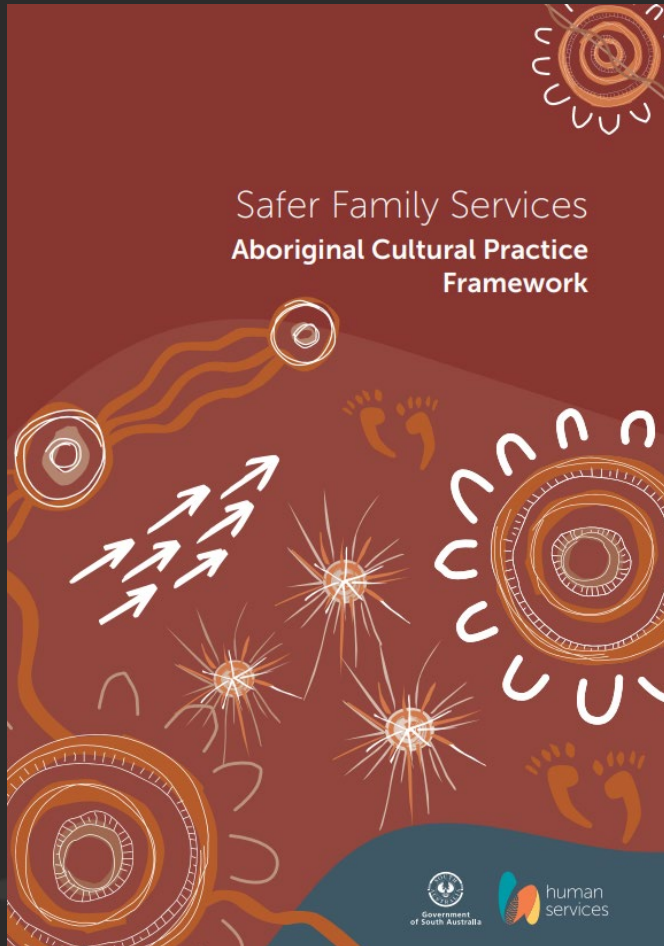


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SFS Intensive Family Services



SFS Frameworks + Practice Resources

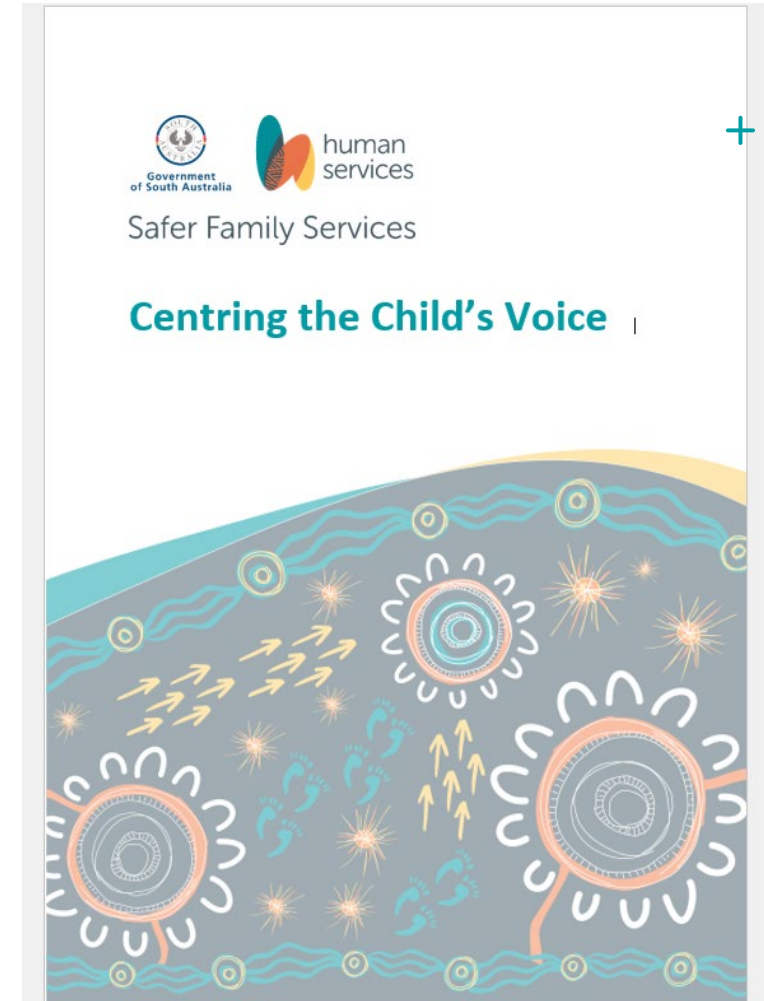


SFS Case Management Framework: principles

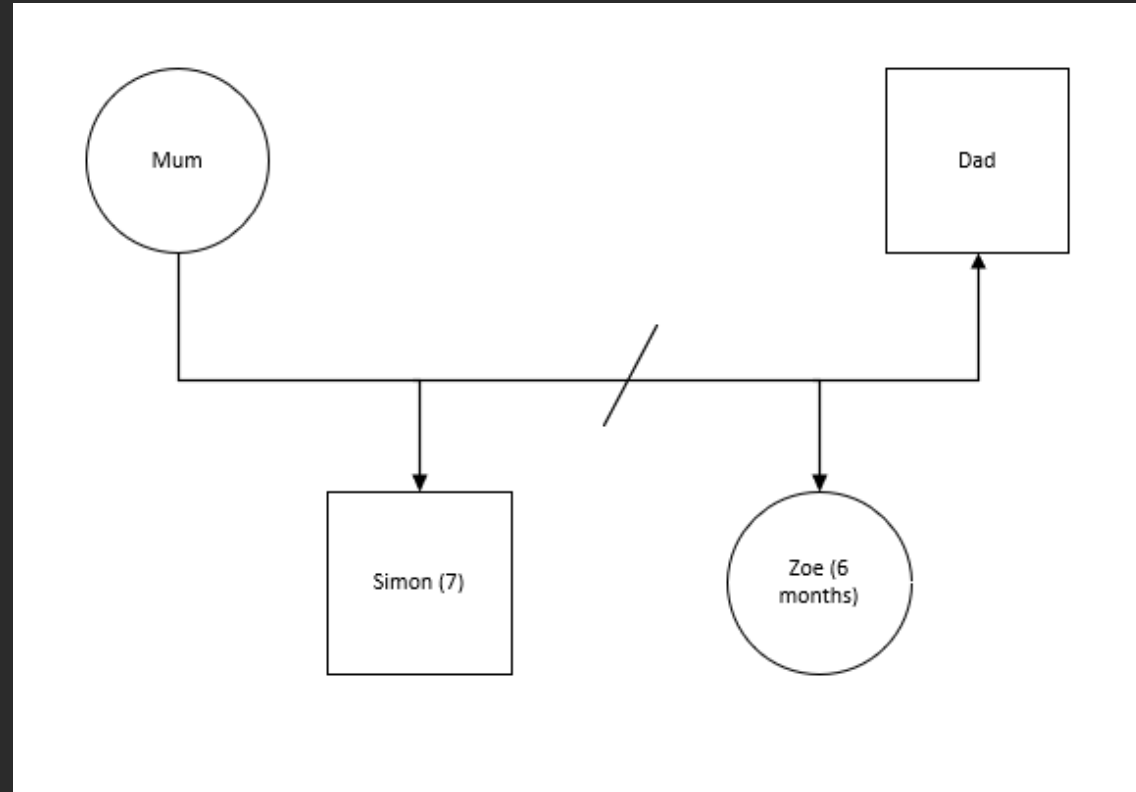
- | Locates the child and young person at the centre of the work
- | Upholds the safety of children and functioning of families
- | Utilises a cultural and intersectional lens
- | Advocates for the rights of children and families
- | Is purposeful, strengths based and proactive
- | Supports self-determination and sustainable solutions
- | Incorporates partnership approaches and effective communication



Practice Guidance for centring the child's voice



Case study



The referral...

Mum was identified as a victim of DFV (financial, emotional & physical abuse, coercive control)

Mum and Dad had separated but continued to live in the same house

Concerns around Dad's amphetamine use

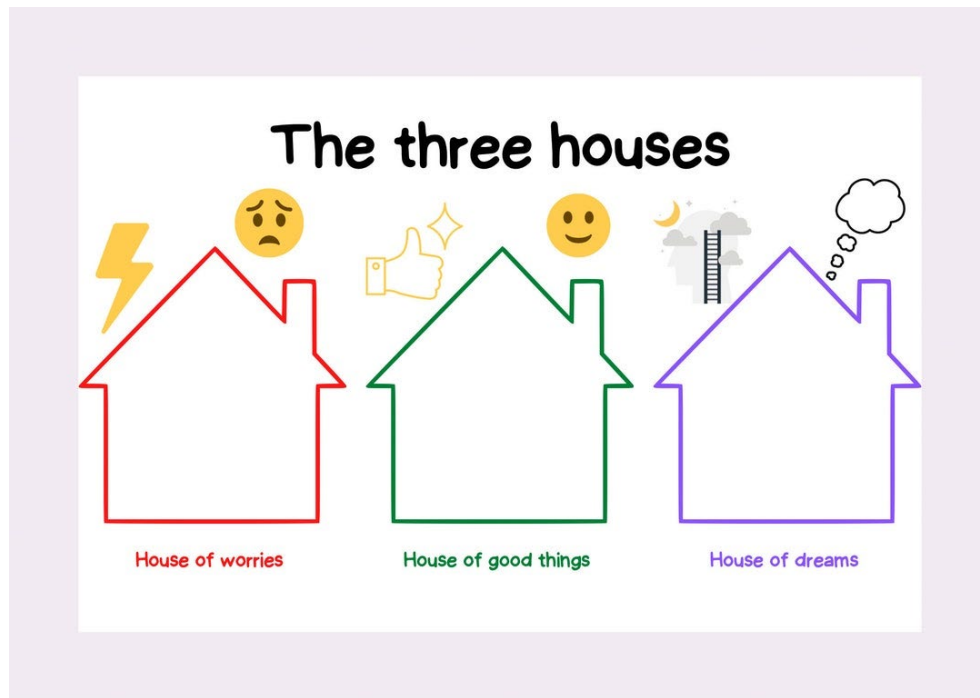
Dad has had no service intervention / support to change his behaviour and did not engage with the Practitioner despite the Practitioner actively attempting engagement.

Limited information about either of the children, and their views



Simon

Safety planning



Our Safety Plan
Your Plan for Safety - CHILD'S PLAN ONLY

Sometimes it's hard to feel safe at home. You have a right to feel safe at home.

Part of our job is to support you to be safe by speaking with you about:

- when things are not feeling safe
- who can support you to keep safe and how
- what you can do to keep safe

What are you worried about?

- Bad dreams
- Mum + dad squabble
- Worry at school about Mum [redacted] at home & wanting to be with them

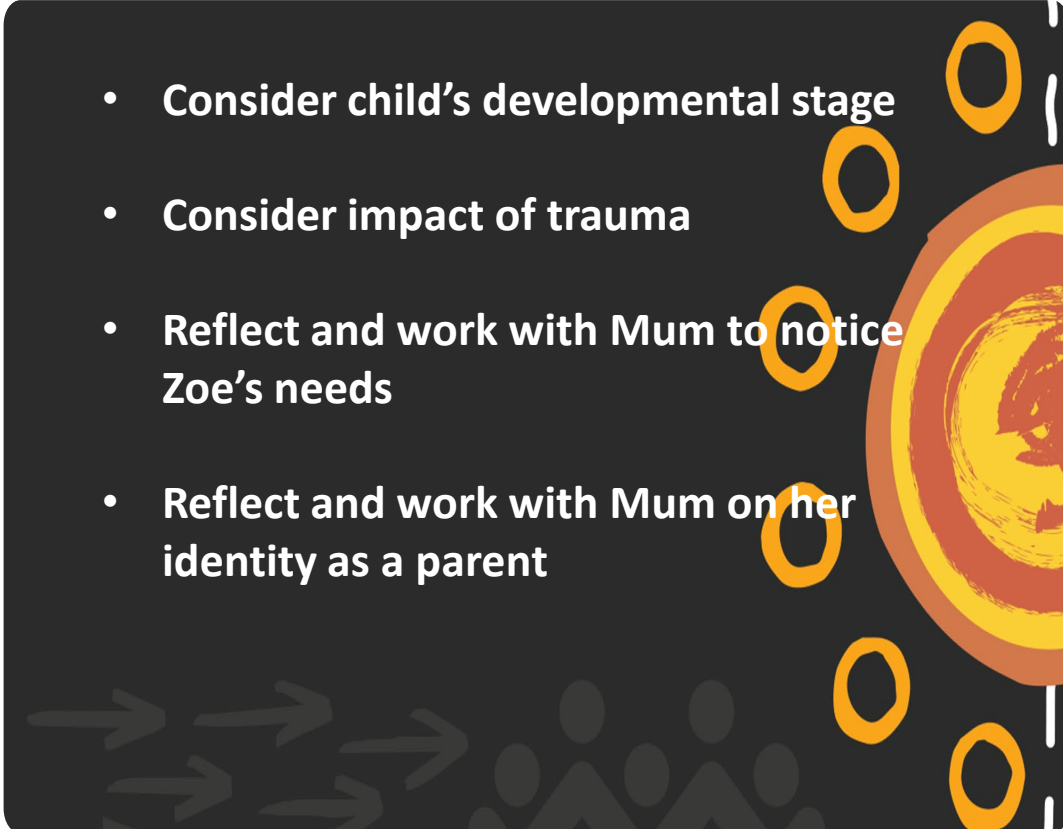
For each worry, what can we do, and who can help us?

Teacher [redacted] Dad [redacted] Police officer [redacted]

Mum [redacted] Auntie [redacted] Mum [redacted]

I would tell Mum if I was worried about something with her.

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- 
- Consider child's developmental stage
 - Consider impact of trauma
 - Reflect and work with Mum to notice Zoe's needs
 - Reflect and work with Mum on her identity as a parent

Zoe

Listening to an infant

Developmental considerations:

- **By 6 months:**
 - Uses carer for comfort and security as attachment increases
 - Is likely to be wary of strangers
 - Sits without support
- **Possible indicators of trauma**
 - Lack of eye contact
 - Arching back/inability to be soothed
 - Increased startle response

Breaking the web of control

Multi agency work

- School
 - Yellow Gate (therapeutic work specifically for D&FV survivors)
 - Indigo (legal support)
 - Housing – private rental
 - Mental Health Support (GP, mental health plan, psychologist)
- Safety planning – developing one agreed upon plan with all services involved.

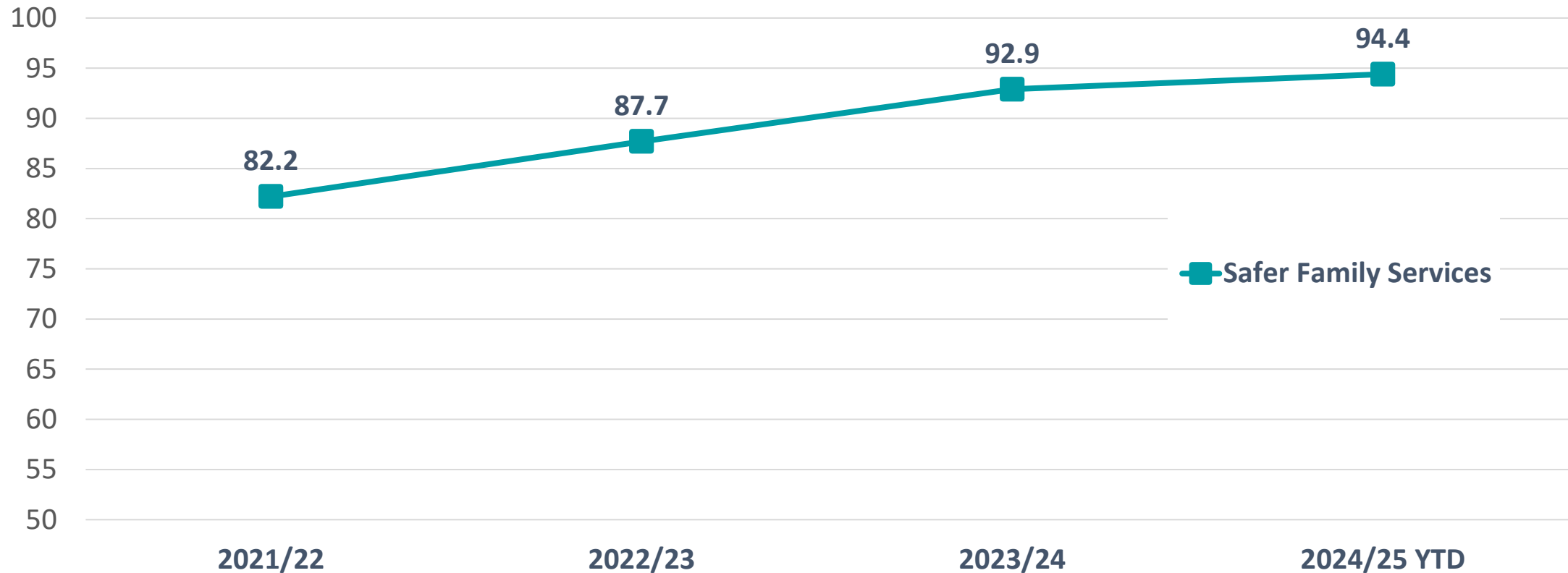


Engagement rates for Intensive Family Services



Engagement outcomes:

Allocated IFS referrals successfully engaged in service provision (per cent) by year



Source : CFSS FAROSE as at 31/12/25, n=27 allocated referrals not included, engagement still In-progress. IFS Tier 2 referrals. Analysed by EIRD, Dr DN Teusner.

Intensive Family Services (Tier 2) Referrals 2021/22 - 2023/24

Analysis sample (n=4,186)

Successfully engaged in
service provision – 72%

Attempted engagement, but
not successful – 24%

Engagement not
attempted/not possible - 4%

CFSS Pathways Service

Referrals received
11,584

Allocated for service
provision
40%

Unmet service need
46%

Service not allocated/
Not required/ Other
14%



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Engagement was not associated with
referral characteristics



Are engagement rates different for different types of families?

Model-adjusted prevalence ratios of being successfully engaged in Intensive Family Services (Tier 2)

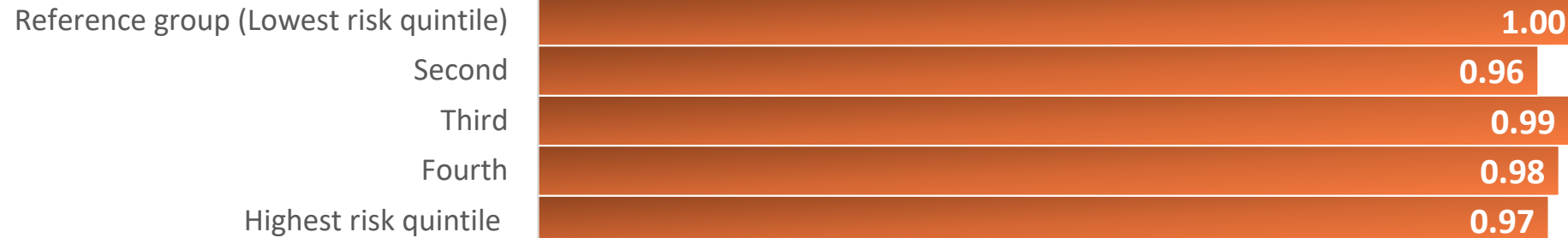
Referrals with unborn child concerns



Aboriginal family



Family Complexity: Risk factors at time of referral



0.0 0.2 0.4 0.6 0.8 1.0 1.2

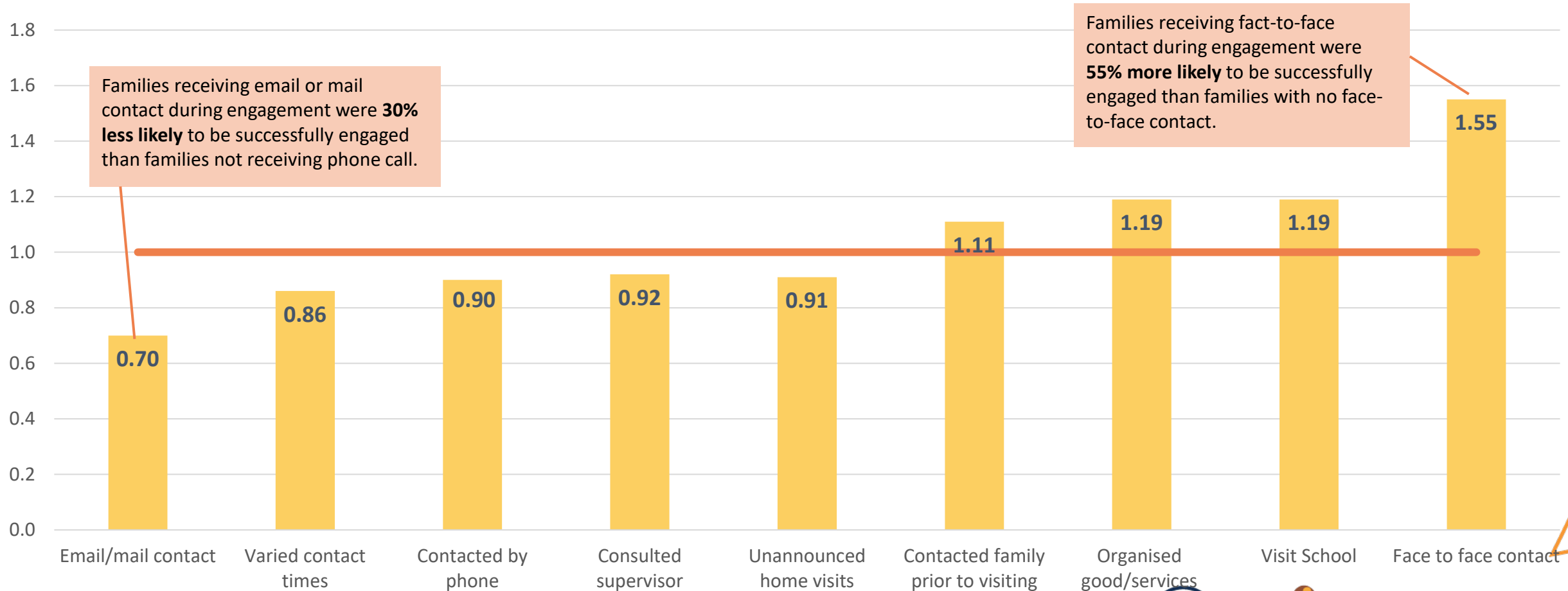
Prevalence ratios of successful engagement in Intensive Family Service



**Various engagement strategies
were associated with engagement
outcomes**

Engagement by engagement strategies

Model-adjusted prevalence ratios of being successfully engaged in Intensive Family Services (Tier 2)



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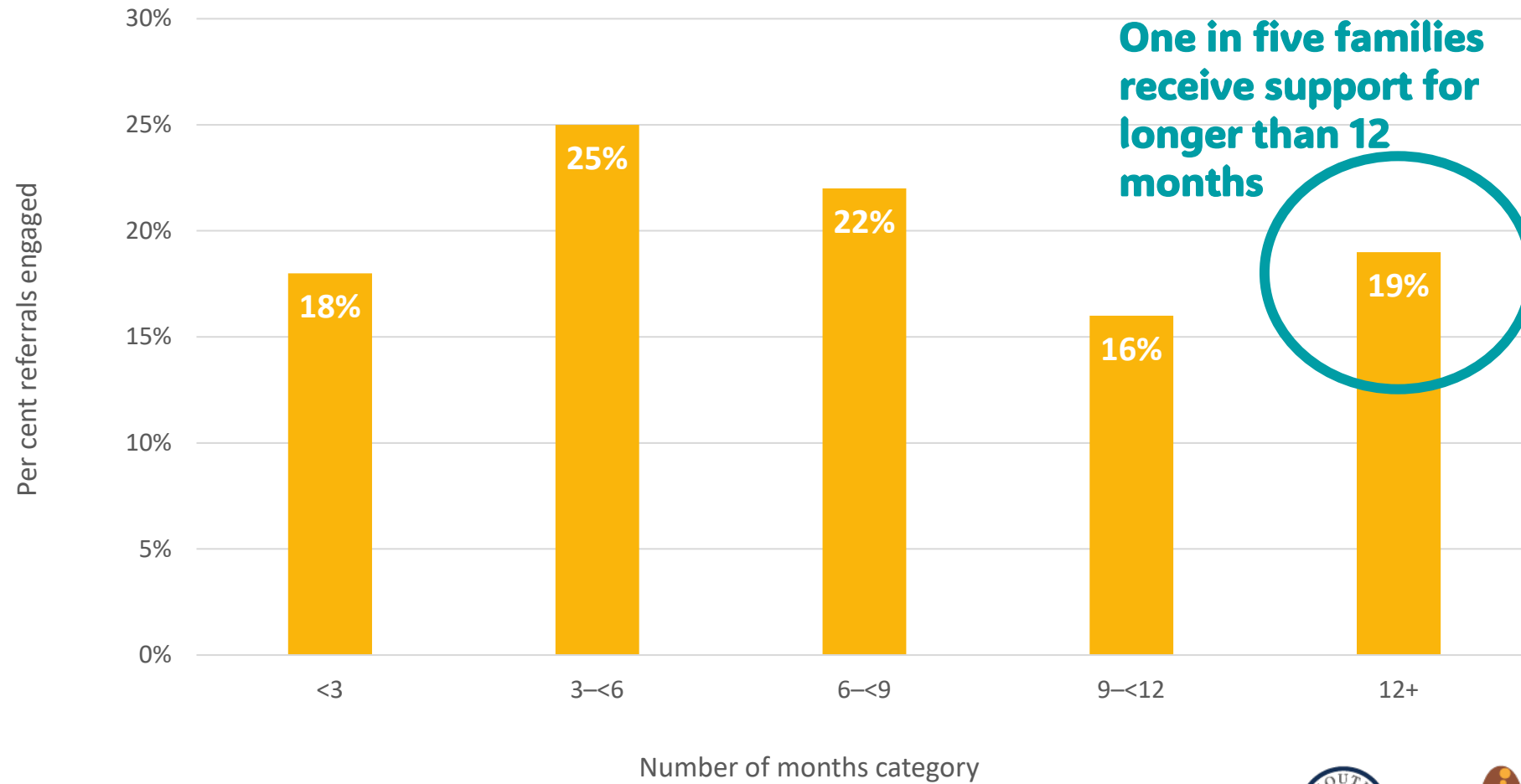
Source : CFSS Data as at Aug 2024, Allocated IFS Tier 2 referrals where engagement attempted and complete data available (n=4,186). PR of successful engagement adjusted for engagement strategies and referral characteristics. Analysed by EIRD, Dr DN Teusner.

Outcomes at service closure



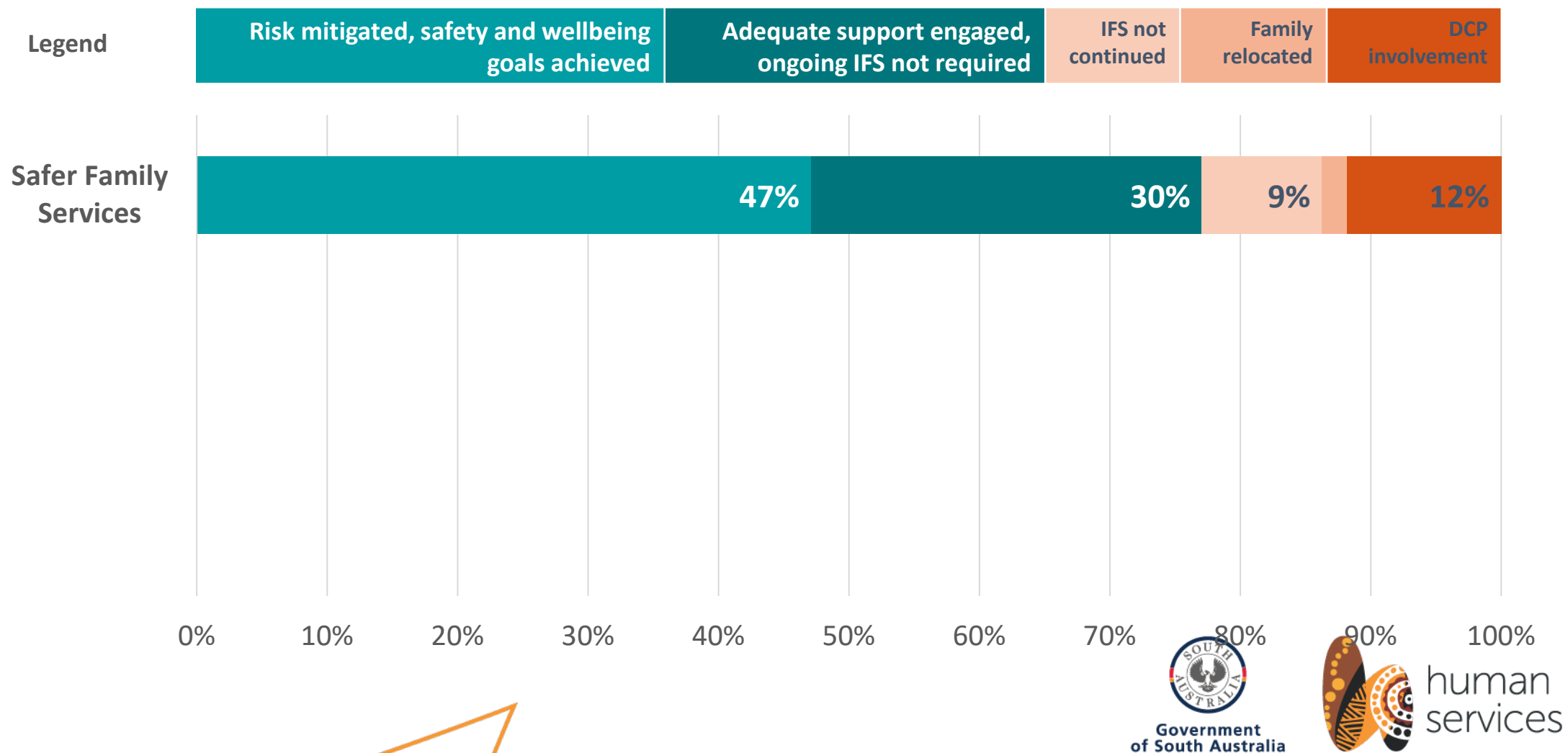
How long do we work with families?

Service episode length by months category, SFS Tier 2 IFS referrals, 2022/23



Service Outcomes

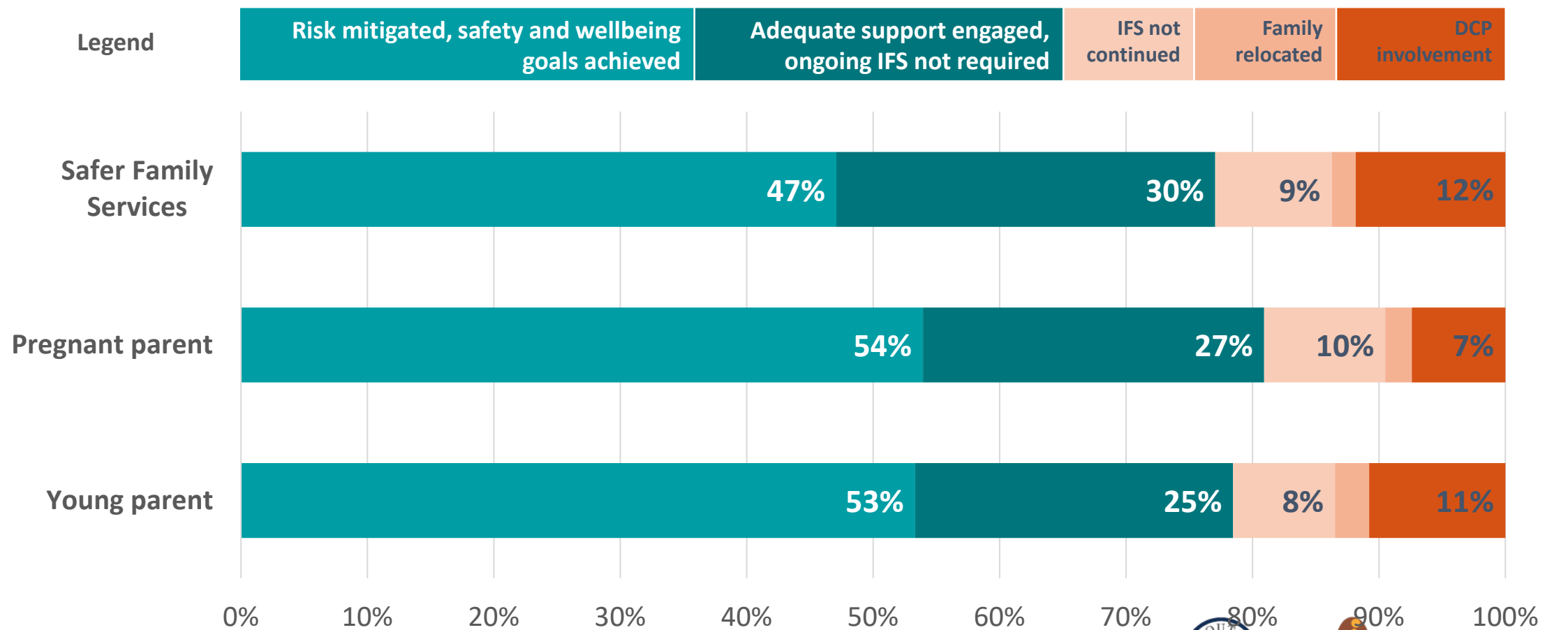
Closure reasons by referral characteristics, engaged SFS IFS Tier 2 referrals, 2022/23



CFSS Data 2022/23, SFS Tier 2 engaged referrals, Closure reports submitted as at Dec 2024 (total referrals engaged n= 587)

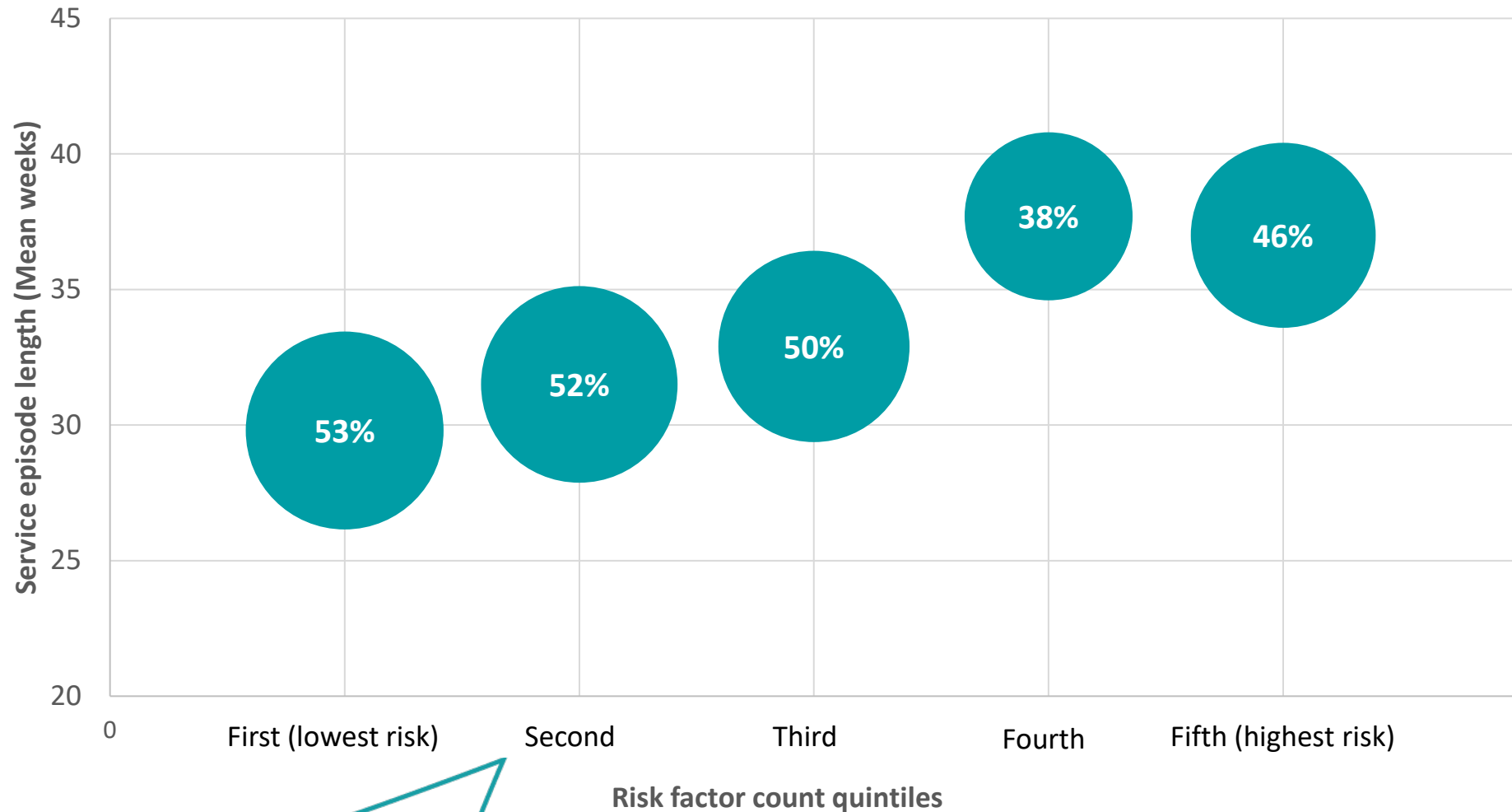
Service Outcomes

Closure reasons by referral characteristics, engaged SFS IFS Tier 2 referrals, 2022/23



Do *Safe and Well* outcomes vary by family complexity?

Proportion Risk mitigated/goals achieved by mean service length (weeks) and Risk quintile (at time of referral), SFS Tier 2 IFS referrals, 2022/23



CFSS Data 2022/23, Tier 2 engaged referrals, Closure reports submitted as at Dec 2024
(total referrals engaged n= 587)

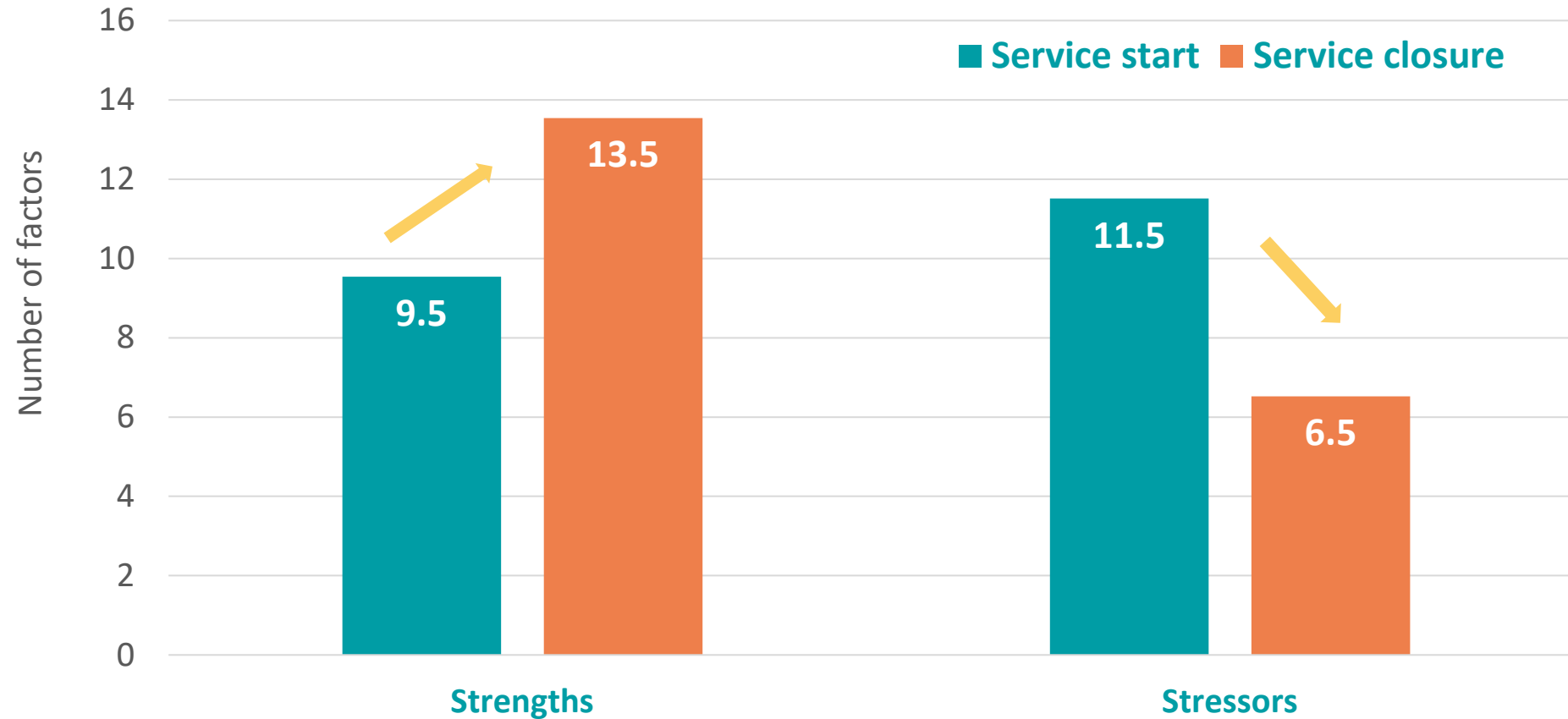
A stylized illustration on the left side of the page, featuring a dark blue background with orange borders. It contains several concentric circles in orange and teal, white wavy lines, yellow arrows pointing upwards, and small orange starburst patterns. The overall style is reminiscent of traditional Indigenous Australian art.

Family Snapshot

Monitoring change in safety and well being

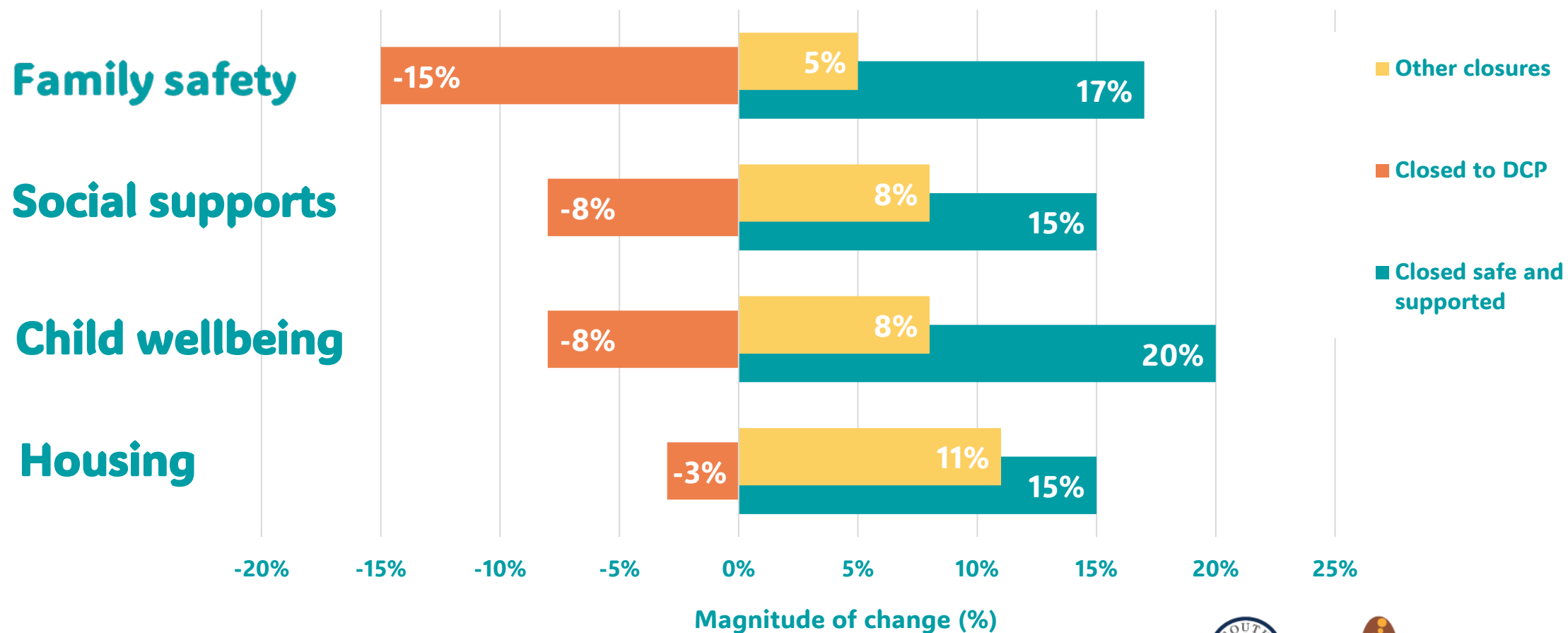
SFS Family Snapshot

Mean number of Strengths and Stressors reported at service start and closure, Family Snapshot SFS Tier 2 referrals 2022/23



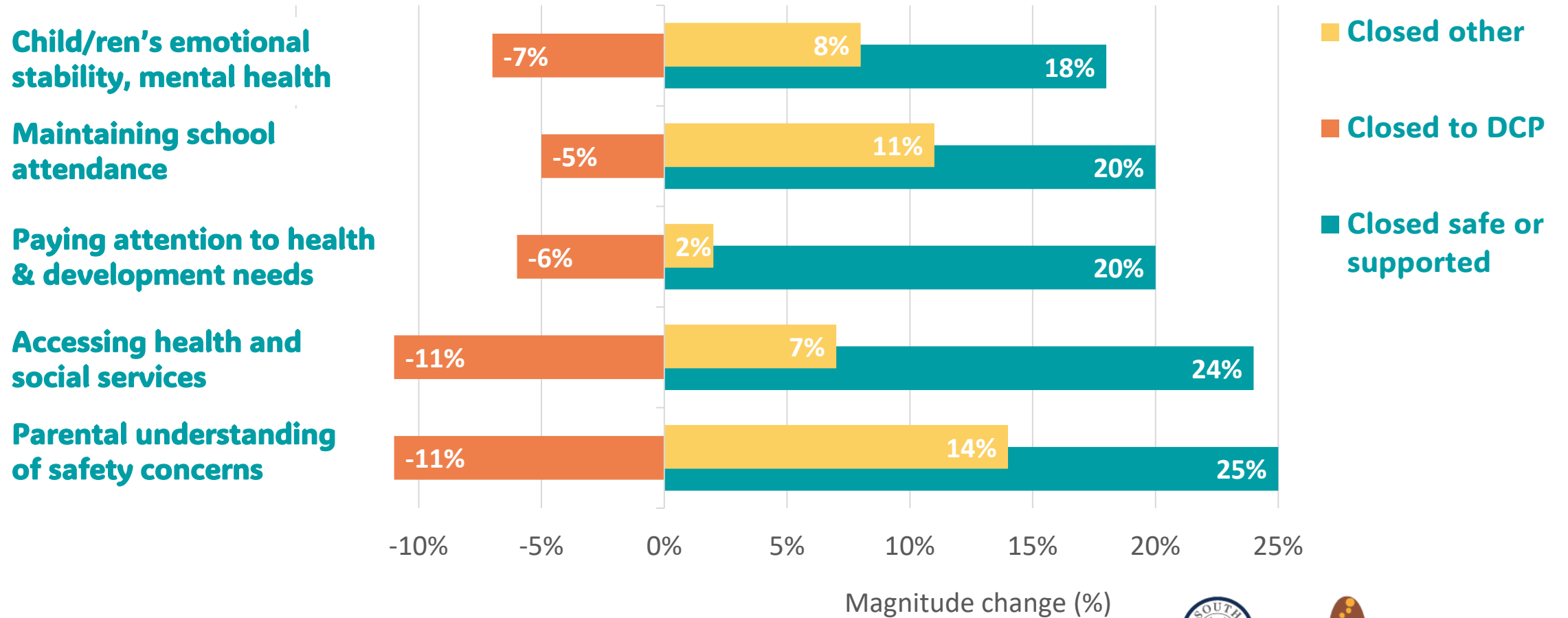
Do we see more change across different Snapshot domains?

Magnitude of change by Family Snapshot domains by service closure reason, SFS Tier 2 referrals 2022/23



Where are we seeing the most change in child well-being?

Selected Child wellbeing items magnitude of change (%) in Family Snapshot scores at service closure, SFS Tier 2 referrals 2022/23



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Ngaityalya (Kurna – Thank You)

