Early Intervention Research Directorate Charter

Background

EIRD was established as part of the Government’s response to the Royal Commission into the Child Protection System and in particular recommendation 50, which outlined the role of EIRD as being to:

Rec 50

- Prepare a Prevention and Early Intervention Strategy that is updated at least every five years:
  
  i. to identify service models that have proved effective or show promise in promoting the health, safety and wellbeing of children in South Australia;
  
  ii. to serve as the basis of decisions by South Australian Government agencies to fund prevention and early intervention services;
  
  iii. to form the basis of negotiations with the federal and local governments, with a view to coordinating funding priorities;

- Establish research partnerships and fund evaluations of innovative service models to determine their effectiveness and value for money; and

- Focus on the prevention and early intervention investment priorities identified in this report.

EIRD is also the lead on responding to the other early intervention recommendations in the Royal Commission:

Rec 29

Establish a postdoctoral fellowship program in conjunction with the tertiary education sector to advance areas of research relevant to the Agency.

Rec 49

Institute longer term funding arrangements for prevention and early intervention services, subject to evaluation and performance criteria.
Rec 192

Use the proposed Early Intervention Research Directorate to identify evidence-based service models for early intervention that meet the needs of Aboriginal children and families.

The Royal Commission identified that:

- One in four children in South Australia have contact with the child protection system, with Aboriginal children significantly over-represented in the child protection system.

- Many notifications screened out as not warranting a response revealed children left in unacceptable circumstances in which they needed help.

- Early intervention offers an opportunity to interrupt painful, adverse experiences for children; experiences that could profoundly damage their later development and opportunities. Child abuse and neglect can have life-long impacts on a child’s developmental, emotional, social, and physical wellbeing and these impacts are difficult to undo.

- Early interventions are often a cost-effective and prudent use of public resources – “the lifetime cost of children experiencing abuse or neglect in Australia…was estimated at $6 billion”, with “a potential [estimated average] saving $245,000 per child … for each case of maltreatment prevented.”

- Prevention and early intervention services in South Australia are often: fragmented; poorly coordinated; not informed by evidence; underfunded.

The South Australian government’s response to the Child Protection Systems Royal Commission report: The life they deserve accepted these insights and committed to implementing the above early intervention recommendations. The response is premised on a public health response to child protection. South Australia is also a signatory to the National Framework for Protecting Australia’s Children 2009–2020, which is premised on a public health approach to child protection and has early intervention as one of its action areas. EIRD’s work will build upon these frameworks/recommendations to contribute to broader reform in the child protection sector.

**Vision and Objectives**

EIRD will work to ensure that SA children will be safer and have a greater opportunity to thrive.

EIRD’s strategic and operational objectives contribute to improving the wellbeing of children and families that are vulnerable to child abuse and neglect by assisting government to fund early intervention and prevention programs and services that work. EIRD also pursues a specific vision to reduce the overrepresentation of Aboriginal children in the child protection system.

EIRD will achieve these objectives through growing the evidence base about the services children and families need, when and where they need them, and which services are most likely to work, and the application of data systematically to plan services state-wide.
In achieving this, the EIRD undertakes to reflect the following principles:

- outcome-focused
- collaborative
- evidence-based
- transparent
- achievable but ambitious
- child-centred

**Strategic Priorities of EIRD**

- EIRD will lead the provision of advice to government regarding what is the best early intervention approach to children at risk of being in the child protection system.

- EIRD’s work will consider policy and funding frameworks and will make recommendations that do not necessarily require a net increase in expenditure allocation across government. Rather, EIRD’s work will seek to maximise the benefit of government expenditure.

- EIRD’s work program will reflect the priorities of government, and will prioritise across-government, multidisciplinary efforts.

- EIRD will have a specific focus on early intervention and research that will improve child protection outcomes for Aboriginal children.

**Benefits**

- Vulnerable children and families receive extra support when they need it, before they reach crisis point

- Vulnerable children and families receive the support they need and that effectively addresses the issues they are facing

- Services are effective, coordinated and collaborative across service providers

- Government resources are spent efficiently

- Increased knowledge base about “what works” in early intervention.

**Scope**

EIRD adopts a public health approach to child protection and early intervention whereby the ideal expenditure and resources on child protection are weighted in decreasing amounts
from universal (primary) services, targeted (secondary) intervention, and tertiary services respectively.

Public health informed redistribution of resources on child protection

**EIRD**'s focus is on the secondary or targeted intervention level whereby services are targeted at children and families that are vulnerable to child abuse and neglect.

**Early intervention**, in the context of EIRD, refers to:

Programs or services that are designed to directly or indirectly prevent child abuse and neglect, and entry or re-entry into statutory child protection services or out-of-home care. That is, intervention early in the life of the problem rather than intervention early in a child’s life.

Children and families that are vulnerable to child abuse and neglect refers to:

Children and families that display the early signs, symptoms or predispositions that may lead to child abuse or neglect requiring formal child protection services.

While universal services would fall outside of these definitions, universal services become central in that they provide valuable mechanisms for identifying vulnerable children and families and for providing non-stigmatised targeted intervention services.

**Population Groupings in child protection:**

**Level 1**
Families who are meeting their children’s needs. They will benefit from formal and informal supports available to all families (primary intervention).

**Level 2**
Families who are meeting their children’s needs, but are vulnerable to future problems.
They will benefit if they are supported with targeted assistance to prevent problems from occurring (secondary intervention).

**Level 3**
Families who are not meeting all of their children’s needs (i.e., children are experiencing abuse and/or neglect), but are open to receiving support and can meet their children’s needs if they are provided with assistance (tertiary intervention).

**Level 4**
Families who are not meeting all of their children’s needs (i.e., children are experiencing abuse and/or neglect), but may be able to meet those needs with assistance. They are not open to receiving support, but will comply with statutory involvement (tertiary intervention).

**Level 5**
Families who cannot or will not meet their children’s needs (i.e., children are experiencing abuse and/or neglect), or cannot make the changes to meet those needs in the child’s developmental timeframe. The state is in loco parentis and is required to facilitate children’s needs being met (tertiary intervention).

**In Scope**
- Children and families that display the early signs, symptoms or predispositions that may lead to child abuse or neglect (ie levels 2-4 above)
- Level 1 when a service or program has a stated objective of reducing directly or indirectly child abuse or neglect.

**Out of Scope**
Children in out of home care (unless they are having or have a child) and out of home care services.

**Workplan**

**Phase 1**
EIRD has partnered with the Office for Data Analytics (ODA) and an External Expert Consortium (EEC) comprising child protection and child development academics, to provide independent, expert advice to government to support the work program of EIRD.

The work program for the first 18-24 months of EIRD is:
- A minimum of 100 target group-to-outcomes desktop evaluations of existing early intervention and prevention programs and services
- Identification of early intervention system gaps including recommendations for improvement
- Evaluations of the new government initiatives in child protection, including the Child Safety Pathways, the Child and Family Assessment and Referral Networks, and the Multi-Agency Assessment Team
• An ongoing assessment tool built on the principles of the evaluation framework to inform all new funding decisions

• Establishment of a fellowship program and research agenda, including three key research projects and case file reviews focusing on:
  o Pregnancy and the first 1000 days of life
  o Children with repeat involvement in the child protection system
  o Aboriginal over-representation in the child protection system

• A data linkage and analytics system that will increase our understanding of children involved in the child protection system and support better case management (including community risk profiles)

• An interim Prevention and Early Intervention Strategy outlining a whole-of-government, evidence-based approach to early intervention in child protection.

Phase 2

To be developed further but key areas of focus will include:

• Develop long term Early Intervention and Prevention Strategy

• Use data to influence early intervention activities across South Australia

• Continue to contribute to the evidence-base on early intervention and prevention strategies that are effective.

Key Assumptions, constraints, dependencies

Key Assumptions

• Continued political support for EIRD

• Across-agency support for EIRD

• NGO sector support for EIRD

Key Constraints

• Resources to produce outcomes on time

Key Dependencies

• The deadlines in the EEC Service Agreement are met

• This is a new approach to early intervention and hence will be iterative with learnings on the way
Key Stakeholders

- Vulnerable children and Families
- The NGO Sector:
  - South Australian Council of Social Services (SACOSS)
  - Child and Family Welfare Association (CAFWA)
  - Community Centres SA (CCSA)
  - Multicultural Communities Council of SA (MCCSA)
  - Youth Affairs Council of SA (YACSA)
  - Volunteering SA & NT (VSA&NT)
  - CREATE Foundation – advocacy
  - Aboriginal Family Support Service
  - Department for Child Protection

Department for Education and Child Development
Department for Communities and Social Inclusion
Department for Health and Ageing
South Australian Police
Aboriginal Affairs and Reconciliation, DSD (inc. SA Aboriginal Advisory Council (SAAAC))
Commissioner for Children and Young People
Guardian for children and young people
Child protection reform implementation team
Child Protection reform Portfolio Management Board
Commissioner for Indigenous Consultation
Child Safety and Wellbeing Advisory Panel
Peak Aboriginal organisations as identified in the Aboriginal Research Engagement Strategy
EIRD Governance Committee
Child protection reform cabinet committee
Minister for Child Protection Reform
Minister for Aboriginal Affairs and Reconciliation
Minister for Education and Child Development
Minister for Communities and Social Inclusion