

Training carers

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

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

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Training carers

“I always wanted to be a carer as I thought I had a lot more to give. We had to do a couple of weekends of training. Then had self-assessments, home visits, and police checks. It took about six months. I’m glad we did all that training because it opened our eyes... They told you bad case scenarios and talked about how the department works, which is a major issue. We also did role plays.” (non-Indigenous carer)

Carers need effective, culturally-relevant training that will equip them with the knowledge, skills and confidence to meet the needs of the children who come into their care. Current training programs often fail to meet the needs of Aboriginal and Torres Strait Islander carers and non-Indigenous carers of Indigenous children.

The study

In a national study, the Australian Institute of Family Studies conducted interviews with *professionals* from government, non-government and Indigenous agencies, as well as *carers* of Aboriginal and Torres Strait Islander children and Indigenous *young people* (the *participants*). Participants were asked to talk about what kind of training would assist them in providing safe, nurturing care and continuity of cultural needs for the children in their care.

Participants told us they wanted:

- training in understanding how state and territory departments work;
- training that is timely and culturally relevant to Aboriginal and Torres Strait Islander carers’ lives; and
- cultural sensitivity training for non-Indigenous carers of Indigenous children.

Carers want training in understanding state/territory child protection departments

All carers emphasised the need to be able to understand how state and territory child protection departments work. A survey conducted by the Department of Human Services in Victoria (Victorian Department of Human Services, 2003) on carer retention found that 17% of carers left due to frustration in dealing with the department, and 18% left due to what they considered to be unreasonable demands by the system.

A universal theme from carers and agency workers was the need for carers to be provided with greater understanding about the nature of their local

department, how things work, and what departments are required to do. Carers often identified this as a more important “training need” than issues such as learning behaviour management skills, or understanding the nature and impact of abuse and trauma:

“If you’re going to recruit people in, you need to let them know something about the system and what to expect. The most important issue is to understand how the department thinks. Life experience is what makes me good at being carer. I need to understand their point of view, their legalities, their guidelines. I haven’t had anything that tells me what I can and can’t do. It’s a lack of information.” (Indigenous carer)

“Training that is needed is about how to navigate the department.” (Indigenous carer)

This was a need also identified by non-government service providers:

“If we know the system well we can negotiate the system... It took me two years to get my head around the issues: [the department], child protection and the court systems.” (non-Indigenous agency worker)

Training in understanding the department was being offered as part of carer training by many of the non-government carer support services.

Carers want timely, culturally relevant training

Timely basic training. Carers and service providers confirmed that training was generally a neglected area for carers, especially in traditional communities. Where it was provided, it was done so on an ad hoc basis. Many carers reported having children placed with them prior to their undergoing even basic training:

“I haven’t had training yet. I’ve been caring for the department for 12 months. Prior to that, I’d been doing it myself – caring for family.” (Indigenous carer)

Even non-Indigenous carers did not receive training before having Indigenous children placed in their care:

“I’m a brand new carer and I haven’t done my training yet. I had an emergency placement – two brothers turned into four brothers. My sister works for the department. So I had my police check and my husband’s sent through in the morning, then got the kids that night. They were aged twelve, six, four, and 10-months. The night stretched to a fortnight, because there was no one else. Luckily my caseworker was my sister. It ended up being a good scenario in that they went back to the care of their parents. The father had access visits for the 4-month old. It was hard for me to let him go. I’d bonded. It was strange to hand over the baby to the youth worker who was arranging the contact visit. We had behaviour issues with the stepson and the mother then didn’t turn up to an access visit. The second child had come straight from a community. She had health issues (scabies) and sleep issues. I have had her for 5 weeks now and I am going to three days training this week.” (non-Indigenous carer)

Mainstream training may alienate Indigenous carers. International research has found that minority ethnic parents are more likely to prematurely drop out of mainstream training courses than trainees from the dominant ethnic group (Holden, Lavigne, & Camerson, 1990; Farrington, 1991). It has been suggested that this may relate to the mismatch between programs designed to meet the cultural needs of western parents and the experience of being a minority ethnic parent (Barlow, Shaw, & Stewart-Brown, 2004). It is likely that foster parents have similar needs for culturally relevant training as biological parents.

This was confirmed by the participants in this study. When Aboriginal and Torres Strait Islander carers attended mainstream training courses (that is, courses designed to meet the needs of carers of non-Indigenous children) they told us that they worried about not fitting in and of being the only Aboriginal and Torres Strait Islander person present – and that this worry prevented them from attending training at all. When Aboriginal and Torres Strait Islander carers did attend training that was not Indigenous-specific, there was the potential for tension to arise due to different values around child rearing.

Mixing Indigenous and non-Indigenous trainees. On the other hand, some professionals felt there may be benefits in mixing Indigenous and non-Indigenous carers together in training programs in order to highlight similarities in parenting qualities, not only differences:

“In training of carers recently we used the mainstream training, but trained the Indigenous carers as a group. In retrospect it would have been better to mix it up so that they spent some time as an Indigenous group and some time with other carers so that they were able to see some of the similarities they had with mainstream carers.” (Departmental representative)¹

There is a lack of formal training adapted to an Indigenous context. Overall, very few documented Australian training programs have been adapted to include the values and traditions of Indigenous families. One exception is the Resourceful Adolescent Parent Program (RAP-P) (Clarke, Harnett, & Scochet, 1998; Clarke, Harnett, Atkinson, & Shochet, 1999a; Clarke, Harnett, & Shochet, 1999b). The program specifically aimed to address the trauma associated with the Stolen Generation, particularly the reduction of parenting skills, through attempting to acknowledge the link between past and present adversity facing parents so that they may develop strategies to avoid and control stresses that erode confidence and parenting ability.

Professionals told us that there was variability across and within jurisdictions in terms of who developed and was responsible for providing training to Indigenous carers and non-Indigenous carers of Indigenous children. Carers reported that training was not meeting their needs in areas where Indigenous agencies had limited input into training packages.

Carers want input into training programs. Some participants suggested that training programs that took into account the views and experiences of carers, as well as the expertise of Indigenous agencies, would be the most favourable means of providing training to carers of Indigenous children. Carers and service providers suggested that the content of training programs be a combination of both a “top down” and “bottom up” approach, with suggestions coming “down” from agencies and “up” from the carers:

“Carers [could] work with staff on what will be included in the training program for the year. There is after hours, business hours and weekend training so as not to exclude anyone. We may provide respite for children or day care or relative care for children while carers are participating in training.” (Aboriginal and Islander Child Care Agency representative)

“You can’t expect [carers] to sit through long training sessions. You have to do it to suit the audience. If you bang it on them too hard, you’ll scare them off. Break it

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

down, and make it a process. It'll go through like a bush telegraph if things go wrong." (Aboriginal and Islander Child Care Agency representative)

Non-Indigenous carers want training to provide culturally-sensitive care to Indigenous children

Non-Indigenous carers need to understand the Indigenous child's background. Non-Indigenous carers of Indigenous children told us they needed training that will enhance their ability, confidence and understanding of the cultural background and needs of the children in their care. Carers told us that cultural sensitivity training for non-Indigenous carers was crucial as there were so few identified Aboriginal and Torres Strait Islander carers and Aboriginal and Torres Strait Islander children were being placed with non-Indigenous carers.

Non-Indigenous carers of Indigenous children expressed their concerns that, without adequate training and support, they were not equipped for the task. During a focus group, carers discussed their worry that the Aboriginal and Torres Strait Islander children in their care would not know their roots:

"Do we worry about westernising the Indigenous children?" (carer 1)

"At least she'll get both sides of the world" (carer 2)

"But she won't if she stays with me" (carer 1)

"That's why it's vital to have cultural training" (carer 3).

Cultural sensitivity training for the whole (carer) family. Carers and service providers agreed that it was important for the whole family, including the carers' biological children, to undergo cultural sensitivity training when Indigenous children were placed with non-Indigenous families.

Some departments do provide cultural sensitivity training. Departments made attempts – to varying degrees – to support non-Indigenous carers of Indigenous children through cultural sensitivity training. In some jurisdictions, carers complained that there was virtually nothing supplied to non-Indigenous carers in the way of cultural sensitivity training. Where cultural sensitivity training was made available, carers were very enthusiastic about the training:

"The one-day course put on by [the Indigenous unit in the department] was great. It explained a lot of things in the culture that we don't understand. Like, there is no word for 'please' or 'thank you' in some Indigenous

languages. Finding this out gave us a good insight into the children. When they say 'brother', you can then ask: "Is that 'cousin-brother', or 'brother-brother'?" Understanding family connection is difficult. But there needs to be more. We're learning from the children, for example, learning that someone whose father was deceased, she couldn't say her father's name." (non-Indigenous carer)

Indigenous carers also need cultural sensitivity training. In one jurisdiction, cultural sensitivity training was provided by the local Aboriginal and Islander Child Care Agency for both non-Indigenous and Indigenous carers. This was seen as important, particularly as some Aboriginal and Torres Strait Islander carers were members of the Stolen Generation and had been disconnected from their culture:

"Even Indigenous foster carers need cultural sensitivity training because they can be a bit short about practices outside their connected community... Many foster parents have been foster children and lost their culture because they may have been fostered by non-Indigenous foster parents, so we need to help them re-connect with their culture and give them that strength makes them stronger in doing the role of a foster carer." (Aboriginal and Islander Child Care Agency representative)

Informal training approaches. In line with Aboriginal and Torres Strait Islander cultural and community values, a more informal approach to supplement formal training was taken by one jurisdiction using community activities such as picnics as an opportunity to provide sharing and support for carers:

"Social activities for children in care provide opportunities for informal sharing and support... for carers." (Departmental representative)

Access and eligibility. Carers and service providers in some areas told us that the only training available was provided by a non-Indigenous agency or the state or territory government. Culturally specific training was largely the responsibility of Aboriginal and Torres Strait Islander agencies. However, it appears from the stories of the participants we talked to, that many carers do not have access to this type of training.

In one area, the training offered by the Aboriginal and Torres Strait Islander organisation is made available to any carer (Indigenous or non-Indigenous) who is caring for an Indigenous child, regardless of who manages the placement. Aboriginal and Torres Strait Islander carers are also invited to training being offered by the non-Indigenous agency.

Conclusion

The most important training need identified by carers was training in understanding how state and territory departments work. Further, professionals and carers agreed that there is a lack of timely and culturally relevant training for Aboriginal and Torres Strait Islander carers and non-Indigenous carers of Indigenous children. Participants suggested ways to improve training, such as carer input into training programs and informal training such as social activities that enable sharing and support. When culturally relevant training was provided it was well received. In particular, training offered by an Aboriginal and Torres Strait Islander organisation was made available to any carer (Indigenous or non-Indigenous) caring for an Indigenous child, and Aboriginal and Torres Strait Islander carers were also invited to training being offered by the non-Indigenous agency. This approach demonstrated best practice in meeting the training needs of both Indigenous and non-Indigenous carers of Aboriginal and Torres Strait Islander children.

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