



Evaluation of the Family Relationship Services for Humanitarian Entrants Initiative

Prepared for the Department for
Families, Housing, Community
Services and Indigenous Affairs

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Executive Summary

Urbis was engaged to evaluate the Family Relationship Services for Humanitarian Entrants (FRSHE), an initiative of the Department for Families, Housing, Community Services and Indigenous Affairs (FaHCSIA). FRSHE is located within the Family Relationship Services Program (FRSP) and shares the FRSP aims:

- To enable children, young people and adults in all their diversity to develop and sustain safe, supportive and nurturing family relationships
- To minimise the emotional, social and economic costs associated with disruption to family relationships.

Under the initiative a total of six sites located in Perth, Brisbane, Sydney (two sites) and Melbourne (two sites) received funding for a three-year pilot period. This is the report of the evaluation.

Aim of the evaluation

The main task of the evaluation was to assess the extent to which FRSHE has met FRSP goals with humanitarian entrant families, incorporating three broad aims:

- to evaluate the initiative in line with the Department of Finance and Administration (DoFA) Terms of Reference for lapsing program evaluations (i.e. examining the appropriateness, effectiveness and efficiency of the program)
- to conduct a process as well as an outcome evaluation
- to explore and identify the models and approaches utilised by funded services, their strengths and weaknesses, and the key learnings that have emerged as the program has developed over time.

During the course of the evaluation Lapsing Program Evaluation requirements were rescinded by the DoFA. The impact of this on the conduct of the evaluation was to reduce the emphasis on seeking data about administrative efficiencies from within FaHCSIA state offices. The efficiency of program administration at the pilot and departmental levels is addressed in the report.

A more significant event for the pilot sites was the decision by the then Minister for FaHCSIA to extend all funding agreements with FRSP providers for a further three years. The research phase of the evaluation was complete when this announcement was made. There was no real impact on the methods or analyses use in the evaluation.

A central focus of the evaluation has been the extent to which FRSHE was the appropriate response to the needs of the target group, including the extent to which FRSHE remains consistent with Government priorities; the nature and extent of any continuing community need; any alternative strategies available to address the need or problem, and any implications for future delivery of the FRSHE; and the likely consequences of not addressing the need or problem. This element of the evaluation is reported in Section 2.

Section 3 addresses the assessment of the effectiveness of FRSHE, with a focus on the outcomes to which FRSHE contributes. To this end, the evaluation has:

- assessed FRSHE's achievements against the program performance indicators
- explored any unintended consequence as well as the links between FRSHE and other programs
- assessed the adequacy of the existing performance indicators relating to the effectiveness of the FRSHE
- assessed whether the performance indicators need to be improved if FRSHE is to be continued.

In assessing efficiency, the evaluation focused on delays in implementation of FRSHE and reasons for those delays, and areas where FRSHE could be improved and/or simplified to increase its efficiency and effectiveness.

Overview of findings

The FRSHE initiative has demonstrated that the relationships of humanitarian entrant families can be strengthened through highly tailored and specialised responses. There is no ideal model emerging from the evaluation but rather key components which should feature in any expanded response. These are discussed in detail in Section 3 which focuses on effectiveness, and in Section 5 where the approaches used and lessons learned are reported.

People from cultures where counselling is not a familiar concept will rarely present to counselling services, and are even less likely to present with specific family or relationship problems. In the case of humanitarian entrants, people are more likely to approach services for practical support needs, but issues relating to the family will emerge as trust and connection is built with skilled workers.

Specialist services for humanitarian entrant families are needed to ensure humanitarian entrants are supported. FRSHE achieves this by being flexible in service delivery, working in a range of ways that build trust, link in, reach out and build community around vulnerable families.

The evaluation considered unintended consequences – the ripple effects of adding to the service system. One demand is, however, particularly noteworthy – that placed on FRSHE sites by statutory child safety agencies, seeking advice and assistance from FRSHE sites in engaging and working with humanitarian entrant families. This is complex and time consuming work. This demand suggests an absence of resources at the state agency level to develop cultural competence with emerging communities. It may be that FRSHE is the appropriate source of this advice and, if so, the consequences for resourcing would need to be considered.

Limitations of the evaluation

The key limitation of the evaluation is the small number of pilot sites. With only six sites funded under the initiative there are obvious limitations in terms of: the data available; the range of approaches which could be tested; the range of contexts and settings the pilots operated in, for example, all sites were located in metropolitan areas leaving out the issues which arise for families and for service delivery in regional areas; and the numbers of clients using the services.

Future Directions

The specialist FRSHE program allows for a level of flexibility in service delivery that mainstream services cannot achieve. The cultural makeup of humanitarian entrant communities is diverse and one model cannot suit all cultures, but there are common threads to be carried through a FRSHE expansion.

Family and relationship problems are intimately connected with the refugee and settlement experience and cannot be dealt with in isolation. To be effective, services must be located in the heart of settlement areas, with intimate networks established skilfully and strategically to make workers known and available through the local settlement service system. Over time, networks with the mainstream system are also important, but the specialist ethno-specific services remain the key network in the early years of a target communities establishment period.

While this study has not considered future demand in terms of numbers, the evaluation has identified the resource-consuming lead time inherent in establishing humanitarian entrant family services and, in particular, the resources (time, skill, program development) required to orient and to respond to new and emerging communities in Australia.

In any expansion of the FRSHE approach it will be critical for the lessons of the FRSHE initiative to be applied, avoiding the slow start-ups experienced by the pilots, and the 'trial and error' phases which have resulted in great learning, and need not be re-learned.

1 Introduction

1.1 Background

In 2004, the Minister for Citizenship and Multicultural Affairs announced an additional \$276.6 million over four years to deliver an increased Humanitarian Program and expand Settlement Services. This marked an acknowledgement by Government that entrants under the Refugee and Humanitarian Program “often require specialised settlement assistance before they can become fully active members of our community ... families can be placed under pressure due to the loss of traditional family support structures and changing expectations ... this additional funding will help these families make a smooth transition into Australian life.” (Minister Hardgrave 2004)

The 2004-05 Budget Papers detail the Government's investment in Settlement Services for Migrants and Humanitarian Entrants, which included additional funds for a number of areas. The aim of the budget measures was to enhance settlement and other services for humanitarian entrants and migrants, including those settling in regional Australia. These measures were part of the Government's response to the report entitled *Review of Settlement Services for Migrants and Humanitarian Entrants*.

Measures under this announcement included:

- increased assistance to humanitarian entrants
- increased tuition
- additional funding to community services
- maintaining funding to the integrated humanitarian settlement strategy
- job placement, employment and training and reconnect services
- the family relationship services
- language literacy.

1.2 The humanitarian program

In the past 50 years, more than 620,000 refugees and displaced people have been resettled in Australia. Permanent entry to Australia can be through the Migration Program or the Humanitarian Program. The current Humanitarian Program is comprised of three components:

- the Refugee Program for people classified as refugees under the terms of the 1951 Convention relating to the status of refugees
- the Special Humanitarian Program for people who are outside their country of origin and have been identified as having experienced, or fear, gross discrimination amounting to a substantial violation of their human rights
- the Special Assistance Category for groups with close family or community links to Australia who are in particularly vulnerable situations overseas and who do not meet the criteria for the other categories.

Refugee numbers overall have remained fairly consistent in the last 15 years, ranging between 12,000 to 15,000 people coming into Australia under the Humanitarian Program. The countries of origin have, however, changed significantly over this time.

During the post-war years refugee programs brought some 170,000 displaced people from Central and Eastern Europe to Australia. In the 1950s and 1960s, the highest numbers of people arrived from Hungary and Czechoslovakia. In the late 1970s and 1980s, a large number of refugees came to

Australia from Southeast Asia and Latin America, and in the early 1980s, Vietnamese people represented around 40 per cent of all refugees.

Between 1 July 2006 and 30 June 2007, the top five countries from which Australia accepted humanitarian entrants were Sudan, Iraq, Afghanistan, Myanmar (Burma), and other Central and West African countries. The ten most common language categories for humanitarian entrants in the same time period included the following, bearing in mind that multiple dialects are captured within a single language category:

- Arabic
- African Languages
- Dari
- Burmese
- Assyrian
- Dinka
- Karen (spoken in lower Myanmar and around the Thai border)
- Swahili.

The population of humanitarian entrants is overwhelmingly young, with over 80% aged 39 years or younger, and half of which were aged 19 years or younger.

1.3 Services for humanitarian entrants

The range of services provided by the Australian Government reflects the current understanding of the needs of people who are humanitarian entrants. These needs relate to both practical assistance in establishing their families in a new country, but also, and importantly, addressing people's pre-arrival experiences. Common experiences for individuals and families include an unplanned departure, living in hiding, long periods of time in refugee camps, long periods of limited or no access to health services, high levels of loss and grief, as well as the traumatic experiences that lead to the decision to flee their country of origin.

The range of services humanitarian entrants are entitled to includes:

- income support which recognises an entrant's inability to plan ahead for their financial well-being
- housing which is central to safety, family functioning and secure settlement
- medical assistance to address the high incidence of health needs common amongst entrants
- specialist torture and trauma counselling
- English language instruction which is central to settlement and particularly to employment
- employment services in response to traditionally high unemployment rates amongst refugees.

1.4 The Family Relationship Service for Humanitarian Entrants Initiative

The Family Relationship Services for Humanitarian Entrants (FRSHE) initiative is part of a Government package developed in response to the *'Report on the Review of Settlement Services for Migrants and Humanitarian Entrants'*. In the 2004-05 Federal Budget, the Australian Government provided \$5.2 million over three years to community organisations under the Family Relationships Services Program (FRSP). The intention was to make available the existing suite of family relationship supports to humanitarian refugee families. To this end the FRSHE initiative has the same broad aims as the whole of the FRSP:

- enable children, young people and adults in all their diversity to develop and sustain safe, supportive and nurturing family relationships
- minimise the emotional, social and economic costs associated with disruption to family relationships.

1.4.1 Selection of pilot sites

Through a competitive tendering process six sites were selected to pilot a range of models over a three-year period. The pilot sites are each located in a high need area, determined by Department of Immigration and Citizenship Settlement Data on humanitarian entrant populations. Details of the six service providers and their catchment areas are provided in Table 1 below. The ongoing relevance of these locations is discussed in section 2.2.

Table 1

| Organisation | State | Catchment Areas (Statistical Subdivisions) |
|---|-------|---|
| Anglicare NSW | NSW | 10520 – Canterbury/Bankstown 10525 – Fairfield/Liverpool |
| Relationships Australia (NSW) (RANSW) | NSW | 10540 – Central Western Sydney 10553 - Blacktown |
| Brotherhood of St Laurence Ecumenical Migration Centre/ Adult Multicultural Education Services Consortium (BSL EMC) | VIC | 20510 – West Melbourne 20530 – North Middle Melbourne |
| South Eastern Region Migrant Resource Centre (SEMRC) Migrant Information Centre (MIC) | VIC | 20575 – Greater Dandenong City 20580 – South Eastern Outer Melbourne |
| Queensland Program of Assistance to Survivors of Torture and Trauma Inc (QPASTT) | QLD | 30505 – Brisbane City 30530 – Logan City |
| Relationships Australia (WA) (RAWA) | WA | 50515 – North Metropolitan |

1.5 Methodology

1.5.1 Rationale

The evaluation began as a lapsing program evaluation and was guided by the DoFA guidelines, addressing the appropriateness, efficiency and effectiveness of the initiative. A number of indicators were developed against each measure, and data was gathered in line with these indicators.

The evaluation was also designed to capture the process aspects of implementation and service delivery ensuring the lessons learnt within the pilot sites were captured for future application.

To address the requirements the methodology combined qualitative inquiry with data review:

- group discussion and in-depth interviews with program managers and staff and clients, external stakeholders plus Departmental personnel (see Appendix A)
- provider forums – one in which we were participant/observers and the second which we convened and facilitated
- documentary and data analysis - program data held by FAHCSIA; FRSHE documentation including funding applications, contracts and ongoing reporting; analysis of action research findings; sites own activity evaluation and data; and analysis of written material.

Participatory action research was selected as a suitable method to capture the learning process– with a focus on establishment, recruitment, engagement, and the development and trial of the various models. Each site was oriented to action research as a method through a brief presentation at the first national FRSHE forum, and more substantially through one on one coaching provided by the evaluation team, primarily conducted over the phone and via email. The action research guide for sites is included in Appendix B.

In addition to direct contact with the evaluators, a dedicated web page was set up for the period of the evaluation. The purpose of the website was to provide ease of access to information about the evaluation, as well as to facilitate contact between the pilot sites. While the web page was not subject to independent evaluation, feedback from the sites indicated that it was most useful in orienting new staff to the evaluation. The intention had also been to post the completed action learning templates to the web page so other sites could read and potentially follow up on other sites experiences. In reality a number of barriers arose to this working, which included: delays in sites completing templates; a lack of confidence amongst sites to share their action research templates; and fundamentally, the fact that web access and utilisation of the web as a source of information remains patchy across community based settings.

1.5.2 Data collection methods

Status reports: Outcome Achievement Reports and Status Reports from FRSHE providers were analysed to track the progress and achievements of FRSHE providers.

FRSP Online: FRSHE providers are required to enter client data for casework and courses and provide general descriptions for community development activities into FaHCSIA's FRSP information management system, FRSP Online. Analysis of this data was used to gain greater understanding of:

- client numbers
- client activity types
- community development and support activities
- client details (for example, gender, country of birth, year of arrival, main language spoken at home, marital status, highest education level, current employment status, current earnings)
- presenting details, source of referral, client's family living arrangements, presenting needs

- service strategy, setting and use of interpreters
- referrals from the service
- client activity outcome (reason for completion of service, needs addressed)
- client feedback.

Provider forums: Two FRSHE Provider Forums were convened through the evaluation period. The first was held in November 2006, which aimed in part to start identifying good practice, establish a learning community and support the evaluation process. This forum was coordinated and run by FaHCSIA. The second forum in April 2007 was coordinated and run by the consultants (Urbis). The evaluation report is included in Appendix C.

Analysis of evaluation reports and data collected by FRSHE providers: Some FRSHE providers have conducted their own evaluation activities and data collection to monitor their performance. This material was reviewed and incorporated into the findings of this report.

Fieldwork visits and in-depth interviews: Field visits were made to each of the six FRSHE providers. In-depth consultations were held with:

- management and staff of the FRSHE initiative
- management of the host organisation/agency
- internal and external stakeholders who are in a position to comment on the local FRSHE initiative
- a small number of former clients of FRSHE.

Participants were provided with discussion guides in advance of consultations, so they could consider the issues beforehand. Consultations were conducted face to face, individually or in small groups. A consent form was provided to clients of services who agreed to participate.

Client interviews: A small number of clients who have participated in the program were interviewed. These clients were identified by FRSHE providers. Urbis provided a script to explain the purpose of the interview to clients; the fact that the interview will be confidential, the questions that would be asked of them and how the information would be used. Former, rather than current, clients were invited to participate and interpreters were engaged where necessary.

Stakeholder Consultations: In addition to consultations with stakeholders at a service level, a number of consultations were undertaken with selected stakeholders at a *program* level.

2 Program appropriateness

This section reports on the evaluation findings of the extent to which the FRSHE initiative has been an appropriate response to the family relationship needs of humanitarian entrant refugees. In assessing appropriateness, consideration has been given to the objectives identified by the Government at the time of the FRSHE's initiation in order to establish:

- the extent to which FRSHE is currently consistent with Government priorities
- the nature and extent of any continuing community need or problem that needs to be addressed
- alternative strategies available to address the need or problem, and any implications for future delivery of FRSHE
- the likely consequences of not addressing the need or problem.

The evaluation has also sought to identify any similar State Government programs/measures in order to establish the extent to which need is addressed by the State Government programs/measures, whether there is any overlap between FRSHE and State programs/measures, and the potential for integrating or aligning FRSHE and State programs/measures.

This section also reports on the ongoing appropriateness of the location and the targeting of pilot sites, as well as the continuing community need.

2.1 Consistency between FRSHE and Government objectives

Each FRSHE pilot has articulated a set of objectives for their program that are consistent with the core priorities of FRSP, while specifically targeting the needs of humanitarian entrants. While each site designed objectives relevant to their approach, they all followed similar themes along these lines:

- to provide culturally appropriate counselling services that are integrated with other settlement support services
- to support men in their transition to the new culture and through changes that may occur in family structure and roles
- to support people across generations, recognising the intergenerational transfer of issues
- to provide counselling services that are supportive of the needs of children and young people in humanitarian communities
- to help people build an individual and family support system
- to reduce violence and sexual abuse within families
- to support people and families who have experienced torture and trauma.

The themes expressed through these objectives address the key family relationship issues for humanitarian entrants. These themes include the acculturation issues commonly experienced by men; need to link isolated individuals and families to informal social networks; to address intergenerational tensions; to target the specific needs of children and young people; and to address the specific issues of sexual and domestic violence and the impacts of trauma and torture.

The sites reported no difficulty in developing and delivering services within the FRSP aims, observing that the aims are broad enough to allow the flexibility required in a pilot initiative, where trial and error, 'false starts' and experimenting with new approaches are all appropriate. Developing objectives at the site level was noted as an important step in focusing on local need, building on staff skill and interest, and locating the work within the local context.

2.2 Location and targeting of pilot sites

2.2.1 Target populations

The population groups targeted by FRSHE programs to date have been:

- Humanitarian entrants from African countries
- Middle Eastern families, particularly those from Afghanistan and Iraq, including Assyrian families.

To consider the ongoing relevance of these target categories, the evaluation considered the most recent data available through the Department of Immigration and Citizenship 'settlement database'. This database contains information such as the numbers, countries of origin, and language groups¹.

Between 1 July 2006 and 30 June 2007, the top five countries from which Australia accepted humanitarian entrants were Sudan, Iraq, Afghanistan, Myanmar (Burma), and other Central and West African countries.

This is consistent with the 2006-07 priorities within the program, which remained focused on Africa, followed by the Middle East and South West Asia, with an increased focus on Asia.

The ten most commonly spoken first language categories for humanitarian entrants in the same time period (bearing in mind that multiple dialects are captured within a single 'language category') included the following:

- | | |
|---------------------|--|
| ▪ Arabic | ▪ Assyrian |
| ▪ African Languages | ▪ Dinka |
| ▪ Dari | ▪ Karen (spoken in lower Myanmar and around the Thai border) |
| ▪ Burmese | ▪ Swahili |

The majority of humanitarian refugees continue to come from sub Saharan Africa, and significantly, over 80% of entrants arriving in Australia were aged 39 years or younger (n=10,082), and 50% were aged 19 years or younger.

The key *emerging* community identified by the pilot sites was people from Myanmar (formerly Burma), and this is supported in the data. In the twelve months between July 2006 and June 2007, humanitarian entrants from Myanmar represented the largest number of humanitarian entrants settling in Melbourne, and among the top three largest groups in both Perth and Brisbane. The largest groups in Sydney continue to be from Iraq, Sudan, Afghanistan and Sierra Leone, with Myanmar the fifth largest group.

This is significant because the establishment phase for a new community to Australia raises many challenges for the service system – these are discussed further below.

The evaluation has considered the location of the FRSHE pilot sites (specifically the auspice rather than the flexible outreach locations used by sites) against the local government areas where humanitarian entrants arriving during 2006-07 were most likely to settle. Five of the six pilot auspice agencies continue to be located in highly relevant areas in terms of people arriving in the last twelve months. The one exception is BSL EMC, which is located in Fitzroy. Melbourne city was a key location area in the two previous years, and continues to have a significant population of humanitarian entrant families.

Table 2 below includes the most significant settlement areas for humanitarian refugees arriving in 2006-07. The middle column identifies the FRSHE pilot site located in that area, and the final column provides the distance the Local Government Area (LGA) and the FRSHE auspice service.

Table 2 also reveals that three of the more significant local government areas do not have a specialist humanitarian entrant family relationship service within the location.

¹ DIAC database, extracted on 11 September 2007

Table 2

| Settlement LGA | FRSHE pilot site | Proximity to Settlement LGA |
|-----------------------------|---------------------------|-----------------------------|
| Greater Dandenong, Victoria | SEMRC, Dandenong | Within LGA |
| Brisbane, QLD | QPASTT, Woolloongabba | Adjacent LGA |
| Fairfield, NSW | Anglicare NSW, Cabramatta | 12 kms |
| | RANSW, North Parramatta | 9 kms |
| Auburn, NSW | Anglicare NSW, Cabramatta | 6 kms |
| | RANSW, North Parramatta | 6 kms |
| Stirling, Western Australia | RA WA. West Leederville | 8kms |
| Wyndham, Victoria | No local FRSHE | |
| Hume, Victoria | No local FRSHE | |
| Brimbank, Victoria | No local FRSHE | |

2.3 Continuing community need

There is a distinct set of recognised family and relationship issues confronting humanitarian entrant families which sit outside the general experience of mainstream Australia, and are different again in some respects to earlier waves of refugee populations. For this reason, family and relationship programs that are not designed with the specific needs of humanitarian entrants in mind are unlikely to provide an adequate or appropriate service. Therefore the need for dedicated services remains to support the key areas of need including: intergenerational conflict, parenting skill and confidence, domestic violence, relationship stress, and psychological stress.

In this section the relationship issues facing humanitarian families and communities are discussed, as well as the particular challenges of working with emerging communities, and the question of when support is most usefully introduced.

2.3.1 Small and emerging communities

Pilots reported that the challenges of resettlement are felt by all the refugee communities the pilots engaged with. There were, however, particular challenges and difficulties for the very small communities. A community may be small by virtue of a community being scattered broadly with only a small number of people in one area, or it may be by virtue of a new group starting to resettle in Australia.

The two key challenges for working with emerging communities were reported as:

- fledgling or no leadership structures existing which places responsibility and strain on relatively young people, with pathways into communities difficult for services to navigate
- an absence of cultural and language competency in the service system to meet the needs of emerging communities, for example, interpreter services, knowledge of cultural practices and norms, and understanding of the refugee experiences particular to new communities.

The absence of social capital within communities was consistently reported by stakeholders to be felt by community members. Many experience severe social and emotional isolation in the absence of the kinship and social networks:

.... the cultural adjustment is huge. The fact that what would normally be the family and the community support around relationships is simply not present, so where there is a dispute between two parties to a marriage there is a whole cultural approach to resolving that dispute. It can't be done here. That community doesn't have the structures to do that. For example, the African communities are very youthful communities – you don't see any elderly people, and it is interesting speaking to Sudanese colleagues who are seen as elders, and they say "I'm only in my 40s, I would normally be looking towards someone who is much older than me to provide me with guidance and wisdom about how to deal with the

problem. I don't have that here – I feel completely at sea”, and the responsibility is actually quite crushing to those 40 year elders. (AMES NSW)

With each emerging group comes an education and orientation phase for the services. This is prompted by a growing awareness within a service that requests for help are increasing – either directly from community members, or more likely, from other members of the service system. As a humanitarian-refugee-specific service, FRSHE sites are assumed by other agencies to be expert in emerging communities as soon as a community is recognised. However, as many FRSHE sites are very small services with between three to five staff positions, this is an unrealistic expectation.

There is therefore room for improvement in developing responsiveness to new communities. The focus of the FRSHE sites would need to be broadened in line with new population groups identified by the Department of Immigration and Citizenship (DIAC), and the resources invested in FRSHE would also need to increase to allow for:

- the lead time required for internal education and orientation to an emerging community
- the time needed to review current models and methods of working to test suitability with a new community
- the development of information and resources which are culturally attuned and provided in community language(s)
- the initiation of the lengthy community engagement and trust building phase which necessarily precedes effective service provision
- responding to the demand for cultural advice to non-specialist services in the first years of a new community establishing in Australia.

The Myanmar community is a good example of the complexities of orienting a family relationship service to a new community, and demonstrates the critical importance of careful preparation to really grasp the complexities and range of cultures, identities and experiences from within a single country. In Myanmar the major ethnic group is the Burman (Burmese), however, there are a number of indigenous groups, the largest being the Karen, with a further five groups including the Shans, Chins, Mon, Rakhine and Katchin. There are ethnic tensions between the Burman and minority ethnic groups, there are twelve dialects, and four religions including Christianity, Buddhism, Muslim and Animism. Understanding these complexities, as well as gaining knowledge in respectful ways of how families see themselves, is a skilled and complex undertaking.

2.3.2 Timing of service provision

The most appropriate time for family relationship support to be made available is a point of contention amongst stakeholders. There are essentially two schools of thought.

The first is that family and relationship issues really only emerge once families are settled and safe, and their immediate practical needs have been met. This may be some time after settlement and possibly when families are no longer directly engaged with settlement services. Engaging families earlier in the settlement period is thought to risk ‘crowding’ families, and placing extra strain when their concerns are for practical support and resources.

The second perspective is that all humanitarian refugees require early access to relationship support, even if only as a pre-emptive, or preventative measure. This is based on the view that enough is known about the likely impact on family relationships of the years of uncertainty, degradation and trauma which is the common experience of this group of refugees. According to this view, a pre-emptive approach highlighting the challenges and strains likely to be encountered and, importantly, how and where to seek support, is the best way to equip families. On this basis some FRSHE programs have linked in with The Australian Migrant English Service (AMES) to develop the skills amongst AMES staff to include relationship issues in the general course of discussion with students, as well as utilising AMES classes as a ready audience for leading discussion on key issues such as parenting in Australia, gender

differences, and other issues that are going to impact on all people through the settlement and adjustment periods.

....my perception is that families arrived here having somehow kept body and soul together for 'x' number of years as refugees and when they first come through the asylum under extremely difficult circumstances, it is often that an outside/external threat to the family that keeps the family together even though there may be possibly at the core of the family some fairly serious dysfunction.

Arriving here a lot of the external physical threats to them are removed – I mean the absolute dangers of physical assault or even death, or being returned to your own country – being kicked out of wherever you might be. People, often after a couple of months, actually start to feel a little bit safer, and when they start to feel a little bit safer they start to explore other things about themselves and their relationships with those around them, and that's often the point where some of the dysfunction within the family will start to become visible....(The Australian Migrant English Service Victoria).

When family relationship services are offered earlier in the settlement period it is likely that families will be in the phase where very practical and direct assistance is required, more along the lines of casework. Workers using this approach described the benefit being the opportunity to build trust through providing practical assistance. It also requires skilled workers who can balance the role of practical helper with the promotion of healthy family functioning, rather than being drawn into the casework role available to high needs families under the intensive Integrated Humanitarian Support Service (IHSS) case management.

The findings of the evaluation do not provide a 'right answer' to the question of the best point of intervention. The evaluation found that the point of intervention depends on a range of factors, including the partnerships available to the FRSHE site in any particular area, for example, AMES, or an IHSS, and the networks and knowledge available within the FRSHE auspice. It is also driven by the expertise of the team, for example, workers with a settlement background who understand the early period may be more likely to engage and initiate trust building through practical assistance. Workers from therapeutic backgrounds may be more likely to value engagement that is initiated by a client, for example, through attendance at a group. Indeed, it would be fair to say that the overall approach or model developed by each site is also influenced by the discipline and experience of the workers. This is discussed further in Section 5 *Approaches and lessons learned*.

Overall, whether the needs of a family arise early, later or after some years, the refugee experience is likely to remain central to the expression of that need, and to indicate a specialist response.

2.3.3 Adapting to new cultural expectations

Any culture holds a set of unwritten rules or cultural norms that are often difficult for newcomers to a country to interpret. Learning to live in an unfamiliar cultural environment can be difficult and stressful for individuals and families. Moreover, each individual family member may have a different response to the process of adjusting to life in a new country (Australia). In some cases, this can cause problems within the family. For instance, children and teenagers may adapt more quickly than their parents to Western culture, and develop different expectations of their role in the family to those held by their parents. Women may also develop greater financial and social independence than they had in their country of origin, shifting the dynamics between men and women. As expectations and relationships change with the process of adjusting to the new culture, families can come under pressure.

There is a lot of difficulties with relationships, the balance of the family changes here ... between men and women and parents and children, and I could see the difficulties with parenting here ... Having a service who understands what is happening in these families, it is really good because they will talk to these mums, parents and fathers as well about how they have to look at the situation here, how they can manage their children here, how they can be happy together because there are a lot of divorces and separated families parents and partners. (Family Support Worker NSW)

Men often face a number of issues through the process of settlement, including loss of self-esteem if they are unable to secure work (or only menial work) and fulfil their traditional role as family provider. Uncertainty about different gender expectations across cultures, alongside increased social freedoms and social security support for women and children in Australia, can alter family dynamics, and be confronting for men:

Families actually undergo a shock initially. They feel it's a fantastic country. They feel that life is going to be fantastic over here, but soon they discover unemployment, getting into a job; language is a barrier. There are degrees and certificates so their qualifications are not recognised, and along with that some of the issues that come through our case work are the change of roles and men going through extreme depression. They feel that the women link in very quickly with some of the services and the men are left behind. (FRSHE worker)

When you come here you are all over the place. You are overwhelmed with everything that is happening around here, and this really affects your relationship a lot, especially from the husband side - like the women are more accepting, but the men back home they used to look after the family. They are used to providing everything to the family. They come here to this country and the balance of the power plays, and the husband sometimes think they have lost the power. They can't control their kids, they can't hit their kids, they can't punish their kids, and this all affects their relationship. That is why you can see in the Assyrian community a lot of separated families. We have a lot of divorce - divorce and separation is high at this stage. (Family Support Worker NSW)

Family violence is a problem across Australian communities, including among humanitarian entrants. Family violence issues may be exacerbated through the trauma of the refugee and resettlement process or as a result of the stress which comes with adjusting to a new culture. Violence brings families into contact with the child protection and/or criminal justice systems, and many humanitarian entrants have limited knowledge of the laws in this area or where to access support. Many stakeholders link the levels of violence to the difficulties experienced by men in adjusting to a new country and, in particular, a changed role and perceived reduction in status and power:

The men are very challenged because they see themselves traditionally as being the providers, and so they have difficulties to face acquiring living skills, finding a job, finding a level of acceptance in the Australian community, they might be unemployed for a period of time, they learn English at a slower rate than their children do. They feel that the Western service typically support and empower their wives and their kids. All that means that they feel quite threatened and that can be a real challenge to them. They understand, and have been told before they come here that they can't hit their wives and kids and that domestic violence isn't okay, and yet they find that the resources that they have to avoid that kind of physical violence is quite limited, such as other ways of managing their issues with their kids or tensions between themselves and their wives. (FRSHE worker)

Refugee children also have particular needs, which may relate to the experience of torture or trauma, being forced to take on adult roles within the family, disrupted education and the process of adjusting to a new school system and language. Children are likely to have a different set of experiences to that of their parents and a distinct set of needs with regard to support both within the family and as an individual.

The referrals and inquiries from schools and from statutory child safety agencies to the FRSHE sites indicate an unmet need amongst mainstream child-focused agencies for advice and support in working with traumatised children and families. A number of sites have developed programs to be run in and with schools. This has proved to be an effective way to link in with communities, as it provides access to parents via the children's engagement.

2.3.4 Parenting and intergenerational conflict

There is a great deal of fear expressed by both services and by clients themselves in what their children will be exposed to in Australia. The cultural constraints and limits placed on the behaviours of children and young people, particularly in public spaces, are at times not visible to parents from entirely different cultures. Some parents interviewed in the course of the evaluation reported that at times they see no constraints at all on how children are permitted to behave, and react to this by attempting to control their own children:

Definitely Assyrian parents want to learn how to parent their kids because they are feeling the stresses about the freedoms in this country – I mean a lot of it is just normal stuff that teenagers go through, but also a lot of it is not the normal stuff parents have experienced. Like in our community you always respect elders. The parents respected their grandparents, they were respecting their parents even when their parents weren't around, in terms of how they behaved and what they did, but there is a different standard here.
(Youth Worker, NSW)

I didn't let my children go to parties because I thought there would be drugs given to children – even small children I thought this is what happened in Australia. (Family Support Worker and Refugee, NSW)

Children tend to become comfortable with language and cultural norms more quickly than their parents, and family dynamics are challenged by children's increasing exposure to the new culture. As a result, intergenerational conflict is common. Parents often have to find new ways of relating to their children, and in some cases parents also need support and assistance to find new ways of disciplining their children when physical punishment has been the common means of discipline in their own country. Workers described the risks of parents 'hanging onto' old practices, which risk driving young people away from their family:

If parents do not maintain a significant role in the family and their authority is undermined, their confidence in parenting is diminished – then the outcomes for the children can be profound. For example, Afghan parents [we work with] experience a reversed hierarchy with teenagers on top... and not experiencing any limit setting [followed by] problems at school, dropping out. Parents are losing confidence about their role and capacity to parent. There needs to be continuing community education about the rights and roles of parents – you can set limits, you can discipline your children – but without physical abuse. (FRSHE worker, NSW)

2.3.5 Mental health

The refugee experience is recognised as one of great psychological strain. For humanitarian refugees, the likelihood of trauma is even greater, and the likely impact on mental health is increasingly recognised. For example, the 2007 Federal Budget package included increases in funding to mental health services specialising in the treatment of trauma and torture. It is not, however, only the trauma of the pre arrival years, but the added strain of leaving family members in their country of origin or in refugee camps, living in dangerous conditions. Family members left behind can be an overriding concern for humanitarian entrants, and for some people, takes precedence over any other issue. This is reported to have a particular impact on the mental health as well as the financial status immediately in and throughout settlement in Australia:

....the biggest issue by far is not so much the service delivery but the fact is that a lot of these refugees still have relatives, whether it's brothers, adults, siblings, parents, immediate like first cousins, living as refugees. So even though they have made it to Australia, they're still very restless about the condition of their family. ... The reason why that is such a big problem is because it doesn't allow them to rest, to settle, to focus completely on needing to move ahead...there is still a large amount of energy being put towards thinking and worrying about their people and family, and it also means that they allocate a portion of their income to assist their families overseas, so you have got, I don't know, how many

hundreds of thousands or millions of dollars going out from Australian Assyrians in support of their families overseas. (Youth Worker, Community Association NSW)

The strains on individuals and inevitably on families are multiple, and the consequences of not addressing these needs are discussed in the next section.

2.4 Consequences of not addressing need

The possible consequences of not addressing the needs could include increased likelihood of family breakdown, along with more children at risk of harm.

A definitive measurement of the extent to which the FRSHE program has contributed to a reduction of humanitarian entrants within the family court or child protection systems would require long-term study and is beyond the scope of this evaluation. However, the observations of stakeholders attest to the problems encountered among many humanitarian entrant families before they access FRSHE programs, and which would be likely to continue without intervention and support. If the needs of humanitarian entrants are not addressed it is likely that humanitarian entrant communities would experience:

- greater likelihood of family breakdown
- greater, ongoing intergenerational conflict
- increased/continued presence in family court as a result of family breakdown
- increased/continued engagement with child protection services as a result of family violence
- increased mental health problems as a result of no or inappropriate service responses
- possibly a higher school drop out rate among young people.

Where family breakdown is inevitable or unavoidable, it is still important that humanitarian entrant families have access to culturally appropriate mediation and dispute resolution services. To be effective, mediation must be run with consideration of cultural constructions of gender relationships and relationships between parents and children.

2.5 Need for a specialist response

Stakeholders were convinced of the importance of, and need for, a specialist FRSP program for humanitarian entrants. The reasons cited for this include:

- Knowledge of humanitarian issues and the capacity to connect with specific humanitarian entrant communities is essential for this service to work. Mainstream FRSP services do not necessarily have this knowledge or capacity.
- The flexibility built into the FRSHE models ensures people are engaged in support wherever they are located – at the service, in their home, or at another service location. This flexibility is critical to build trust between workers and the communities and helps to introduce the idea of family counselling to communities and individuals who are unfamiliar or uncomfortable with seeking relationship and family support.
- In some communities counselling is highly stigmatised or considered something that only ‘crazy’ people need and it takes a long time for FRSHE workers to gain acceptance for the idea that counselling might be helpful for some families. Outreach and flexible models of service delivery may not be part of the service delivery approach of all counselling agencies, yet without this, humanitarian entrants are unlikely to access the service.

2.6 Related or similar State Government measures

There are few, if any, family and relationship counselling services that work specifically with humanitarian entrant families. There are some overlapping services, for example, some youth services provide adolescent and family counselling. But the focus for these youth services is on supporting the young person, rather than a whole of family focus.

Mainstream family and relationship services can and do work with humanitarian entrants and some have developed specialist skills. However, for the majority of services the barriers remain managing the general demand, lack of skilled workers, scattered communities, and the cost of specialising.

Furthermore, counselling is not a familiar concept in refugee communities. Many humanitarian refugees feel affronted by the suggestion that they need counselling, and would be extremely unlikely to discuss their family issues outside of their intimate networks. Family and relationship services are generally not equipped to address the specific needs of humanitarian entrants due to lack of language-appropriate services and/or lack of staff training in the area. Another barrier is waiting times. A key issue for engaging with clients raised by each site is timeliness – the ability to respond quickly – on the same day that an approach is made to a service. Importantly, such an approach may be very informal, rather than a phone call requesting an appointment. Mainstream services do have systems for prioritising vulnerable clients, but may require a person to make contact, leave details, attend an assessment, be allocated a counsellor and wait a number of weeks for their appointment.

2.7 Limitations/difficulties with service delivery

Building trust with communities takes time and demands that FRSHE workers become closely connected with communities on an informal level. It is different to mainstream counselling models where counsellors work with individuals, couples or families. A community development and outreach element is central to the success of the FRSHE program. However, this raises some difficulties:

- It may not always be possible to find workers who are able to connect with a diversity of communities. Language or cultural barriers may prevent workers from one background working effectively with communities and clients from other cultural groups. Some services deliberately hire workers on the basis of their counselling skills alone, rather than their language skills or knowledge of specific communities. The workers can then share their knowledge of Australian culture while building connections with various communities. However, this approach requires a heavy reliance on translators. It is also a lengthy process for workers to build connections with communities, and may be complicated by staff turnover.
- The flexible delivery of counselling and support services utilised in FRSHE programs requires resources for such things as food or child-care to encourage attendance at group programs or, in some cases, transport so people can attend groups, or for workers to conduct outreach.
- Workers become much more closely engaged with clients than they would be doing 'sessional' counselling. Hence the demands for them to be available full-time are high and professional boundaries are more easily blurred. While this is part of the job satisfaction for workers, it can be difficult to manage and requires highly skilled supervisory and support mechanisms for staff.

Further challenges for services have been where drug and alcohol issues are present in families, and they have not had the skills to work on these issues with families or individuals. Access to culturally skilled workers in mainstream services has been a barrier and led to frustration for FRSHE services in responding to families' needs. One service reported that around 25% of the families they work with would include at least one parent abusing alcohol.

3 Program effectiveness

3.1 Overview of achievements

Following is an assessment of the extent to which the FRSHE program has met the objectives of the FRSP program in relation to humanitarian entrants.

3.1.1 Develop and sustain safe, supportive and nurturing family relationships among humanitarian entrants

Stakeholder interviews, project reports and evaluations of individual programs conducted by services have indicated that the FRSHE program has contributed to developing and sustaining safe, supportive and nurturing family relationships among humanitarian refugees with whom they have worked, in the following ways:

- FRSHE workers have provided support to families with complex issues, including families who have experienced torture and trauma, families in which violence has occurred or is occurring, families experiencing conflict between parents and children, as well as families enduring a number of these issues in combination.
- FRSHE services have successfully conducted parenting programs for humanitarian entrants using a number of forums, both group-based and individual/couple counselling. The programs have assisted parents to develop their skills and confidence in parenting within in a new cultural environment. Parenting assistance has been a major focus of the program. It is clearly an ongoing issue among humanitarian entrant communities.
- A number of FRSHE programs have successfully run men's groups. This has been a difficult task to introduce to men who are unfamiliar with seeking help, uncertain about counselling and reluctant to speak about personal issues. However, where groups have run they have been popular with clients and provided a forum for men to discuss parenting and relationship issues, as well as a social and support avenue for men from humanitarian entrant communities.
- The FRSHE program provides non-judgmental support to families, which may not be available informally within communities. Many humanitarian entrant communities are small and concerns about confidentiality often prevent people speaking about personal issues within their social or family networks. FRSHE provides an opportunity for people to receive confidential, non-judgemental support to people who feel they do not have access to this elsewhere.

The FRSHE program has gained credibility and acceptance within humanitarian entrant communities. This has been achieved via a number of avenues including community forums, informal networking between workers and community leaders, successful group sessions and programs including parenting and men's groups, making connections with other settlement services and local schools.

3.1.2 To provide family relationship support within a holistic service delivery framework, including networking with and referral to key settlement and other specialised services

Stakeholder interviews, individual FRSHE project reports and evaluations of individual programs conducted by services have indicated that the FRSHE program has made connections with other settlement services as well as with mainstream counselling services. Stakeholders noted that there is room for improvement in the coordination of referrals across the sector. Additionally, competition for funding in some cases creates an antagonistic relationship between services, preventing joint-projects and programs. However, on the whole, the FRSHE has been well-integrated with other settlement services and a number of services have successfully initiated joint programs with other services.

- All FRSHE services have used forums and informal networking to engage community leaders and service providers. This successfully promoted the FRSHE program and established connections between FRSHE and other settlement and migrant support services.
- A number of FRSHE programs have provided training in family relationship issues for workers in settlement services. This has increased the awareness among settlement services of the particular family and relationship issues humanitarian entrants may be confronting during the settlement process, and increased the likelihood that settlement services will make referrals to FRSHE or other counselling services.
- Where FRSHE programs are based in mainstream counselling services, such as Relationships Australia, the FRSHE program has increased awareness of issues facing humanitarian entrants and increased the capacity to provide culturally appropriate counselling across the service as a whole.
- The FRSHE program has worked closely with other settlement services to provide practical support for humanitarian entrants.
- The FRSHE program has made some connections with welfare and support services more broadly, for instance, in some cases women have been supported to access family violence services. FRSHE workers have also assisted humanitarian entrants to understand and engage with the Australian welfare system. Government agencies such as DOCS in NSW have made referrals to the FRSHE program.
- FRSHE is not necessarily well-connected to the broader family relationships sector, except where they are located in mainstream family counselling services such as Relationships Australia. In general, FRSHE has been more closely aligned to migrant and settlement services than FRSP services. This has assisted FRSHE programs to engage with humanitarian entrant communities and ensured referral networks are established between FRSHE and other services working with newly arrived migrants.

3.1.3 Minimise emotional, social and economic costs associated with disruption to family relationships among humanitarian entrants

The extent to which six FRSHE pilots have minimised the range of costs associated with disruption to family relationships is difficult to evaluate without a much broader study. Nevertheless, the evidence collected within the scope of the evaluation does suggest that the services provided under the FRSHE initiative are valued by humanitarian entrant families, and that the emotional and social burden experienced by individuals and families has been reduced.

The societal costs of violence against women and against children are well-documented elsewhere. The preventative education-based work, the parenting education, and the co-working with family violence and child protection work by the FRSHE services can only be described as a 'drop in the ocean'. But it can be said that for the individuals and families who have had access to these programs there has been a reported benefit.

3.2 Achievement against performance indicators

3.2.1 Establishment phase

In the establishment phase it was expected that services would recruit staff, advertise and promote the service, and begin the networking and integration of their service within the local service system.

Notwithstanding efforts on the part of each site, all struggled to recruit staff, and all recruitment processes were delayed. However, although this created a delay in project start times for some sites, all did ultimately recruit appropriate staff. In cases where staff were not as highly qualified in some areas as was hoped, plans for training and supervision were put in place.

Recruiting staff who are suitably qualified and have experience working with culturally and linguistically diverse communities, and specifically refugee communities, is challenging. The service models using workers with community languages had only very small communities to recruit from, and faced even greater challenges in this early phase.

For most services the FRSHE workers were being recruited into an existing family-focused team, for example in QPASTT, BSL EMC, SEMRC and RANSW the FRSHE pilot was supported within an existing model. Anglicare NSW had intended to develop their FRSHE pilot within the context of the IHSS program they ran. Anglicare NSW were, however, successful in securing the ongoing provision of the IHSS, leaving the FRSHE pilot as a stand alone service.

Pilot sites reported that the benefits to being located within an existing structure included the systems in place to support new staff, from induction, to supervision, training and development, and peer support. The credibility of the auspice agency also provided benefits, in terms of access to existing networks, as well as direct experience of working with refugee communities.

In the establishment phase some sites developed advisory or reference groups to guide the programs, whereas others drew on the existing internal mechanisms and experience of the auspice.

Each service undertook a two-pronged promotion campaign, through the service networks, as well as within the target communities. The launch of each service was a good opportunity to engage with colleagues, as well as community leaders. Each service also developed written material, some within target languages.

While the promotion of the new family relationship programs was initially a relatively straight forward matter, over time it became evident that promotion would place a continual demand on the services, and was not a one-off activity. The turnover within the service network generally was identified by pilot staff as the key reason for the repeat promotion efforts, as well as the need to keep the service 'front of mind' for mainstream agencies to remember to refer the occasional humanitarian refugee client they did see.

Into the second year of operation sites were reporting that while they continued to promote the service, there was a general view that the place of the service was becoming embedded in the service system.

Participation in the local networks concerned with families and with refugees was another focus for FRSHE staff. Networking was in itself seen as valuable in order to promote, connect, gain credibility and engage with communities. Through networking, and the building of trust, referral pathways were more likely to establish and become sustained.

Interestingly, sites all reported that their key relationships continue to be with other migrant or refugee services, or ethno-specific community services. This is of significance because one of the longer term aims of FRSHE has been to develop learning which is applicable to mainstream family relationship services. One way the FRSHE sites thought this may happen initially was through working collaboratively with mainstream services. Well into the second year of the pilot this has not proved to be the case.

3.3 Commencement of service provision

3.3.1 Counselling

Introducing communities to the concept of family relationship support was reported to be in itself a cultural challenge, and was for most sites a lengthy engagement with senior community members to establish credibility, followed by a series of 'false starts'.

It has taken all services a long time to establish counselling services in communities where counselling is not a familiar concept. Introducing the idea of counselling, and increasing acceptance of support services, has been a major part of the program. This has been a process of establishing trust with community members, consulting the community on what their needs are and working out ways to introduce individual and group counselling programs in a culturally appropriate way.

All services have provided counselling to families within the range projected for client numbers, however, the time consumed when counselling with interpreters is not captured in reports of numbers of clients or sessions alone.

3.3.2 Mediation and dispute resolution

'Mediation' in the contemporary Australian sense is not a familiar concept in many cultures. It is predicated on a common desire to reach a mutually agreed solution; it is confidential; utilises an independent mediator; and most significantly, it assumes equal 'say' in the process and in reaching resolution. As such it presents challenges on many levels to families structured on patriarchal lines. In this context, the concept of equal power in resolving a conflict, between for example a parent and their child or between husband and wife, can be seen as disrespectful and inappropriate. An example from SEMRC illustrates the difficulty of introducing Western style interventions to cultures who have maintained traditional power structures within families:

[When] we talk about mediation in our Anglo sense, mediation is an equal plan between all of the members. There was an informal complaint by one of the clients who was a father, and he was working with the worker who he was really happy with. The worker helped mediate between the father and the son as the son had run away from home and had no intention of coming back home.

After a couple of mediation sessions there was an agreement for the son to come back home, based on the agreement the father would not discipline the child. It worked well; the son came back, everyone was really happy. It was a really nice ending. But then in a couple of months, the father said that he felt that he was being disrespected by sitting at the table and being treated equal to his son, although the end was great ... although we got a good result, and it was because the son felt like he was being heard and he had some say in the family that he was able to come back home ... the feelings from the father were worse, so what do you judge as a good outcome and was the mediation good or not good?

Maybe if the mediation was done when the worker was guiding the son and telling him what he should do and what he shouldn't do, the son may not have come back home, so there are a lot of challenges. And these are new concepts to a lot of people and it is a lot to take in, especially the men. When the man is the head of the family - what they say goes. Suddenly to be put in a position where he is just an equal to his 16-year-old son, it is a big thing to have to step down to.

Mediation in its pure sense under the FRSP has not proved a central plank of the models developed by the pilot sites. Cultural barriers and preferences have been one reason for this, but the absence of qualified mediators with specialist expertise is another. It is possible that this may change The extent to which this could change through a workforce development strategy targeting bi cultural counsellors, and increased cultural competence amongst the mainstream mediation workforce.

3.3.3 Group work

Group work has developed at each site into a core component of the service offering. Group settings range from ones established by the service for a specific series of sessions, through to less formal group work offered to groups who meet independent of the service, like a parent group run by a child and family health service

Services reported they have found group settings to be culturally relevant, and overcome the challenge of individual work. Across the sites, all groups within communities have participated in group sessions, and these are described in detail here. A group setting also overcomes the gender barrier, for example, male workers are too well-placed to offer individual counselling to many refugee women, but male workers reported a great deal of ease with their participation in group settings, where there is a key female worker in attendance.

Men's Groups

Men's groups have been implemented by SEMRC, RAWA, MIC and BSL EMC. Most services report that it is difficult to convince men of the need to attend a men's group – support-based services are not seen as necessary for men in most cultures, but also for some communities family and parenting issues are seen as the responsibility of the mother. Some services have used social and recreational activities as a way of engaging with men. Topics raised in the groups include, Centrelink, child protection issues, cultural change, managing conflict and anger, Australian laws, child discipline, and men's roles.

Women's Groups

BSL EMC runs a Mother's Support Group for women from the Horn of Africa, quilt making and social/support and relationship discussion. RANSW runs a Dafur women's support group, cooking group and relationship focus at the same time, aiming to reduce social isolation and depression. RANSW runs mother/daughter nights, with quiz nights as a way of finding out about each other, assumptions and aspirations - fun but with a relationship focus.

Anglicare NSW ran a scrap booking group for Assyrian women, in which different topics were covered each week relating to self-care, love and relationships and self-esteem. Scrap booking using photos and mementoes encouraged reflection on their families.

Social Support Groups

BSL EMC ran social support groups for African couples. They were run successfully twice, and involved 3 x 3 hour sessions. RANSW ran a camp for families with support from the Department of Sport and Recreation, as well as barbeques for families during the school holidays.

Parenting programs

Parenting programs have been implemented by all FRSHE services. Attendance at these has been reported to be consistent and actively sought after by community members.

Services have found innovative ways of engaging communities in parenting programs. They have also sought feedback from communities on the type of programs that best meet their needs.

Some organisations report that it took time for some communities to accept parenting programs, but over time they came to be accepted and appreciated. In some cases other skills-based workshops, such as quilt-making and photo 'scrap booking', were used as a way to make contact with communities and provide a forum through which relationship and family issues could be raised once trust was established.

This conflict is children going out and learning something and coming back and parents clinging to their cultures and languages. There is the conflict in the house. This needs to be resolved before the family can function as a unit and there is a need to understand the children as well because they are learning things, and some things are good for them ... So how do you help your child? You need to have some tools in your hand and this is what we can offer in the parenting, so you guide them through what they are facing and bring them up to reality – which is good to have one-to-one support, but also it is good to be in a position to help yourself because it is not always that you find that help so you need to get a

point that you are able to help yourself, and this is what we are doing in parenting. (FRSHE worker)

Some services have found running parenting groups to be costly, as often transport, catering and child-care costs need to be factored in. In some cases, this problem has been solved by partnering with other services that can share costs and provide additional resources.

Humanitarian Entrant Information Sessions

These have been run by SEMRC, and RANSW. Some services found the number of sessions they intended to deliver to be unrealistic given existing staff and resources and had to limit these sessions. Forums have covered information such as child protection and domestic violence, Australian culture, family and relationship challenges, accessing community resources and support.

Sessions have been attended by community members, and community leaders, as well as staff from services that work with humanitarian entrants.

Community Forums

Community forums have been held by a number of services (SEMRC, BSL EMC) to raise awareness of family and relationship issues within humanitarian entrant communities and to promote the service.

Services have also held forums and engaged in extensive informal community consultation to ensure the services being offered are appropriate to community need.

Youth Groups

RANSW run a young Afghan men's group providing sessions based on the group's interest, and helping to bridge a cultural experience.

RAWA ran an emotional intelligence group with humanitarian entrants at Majella Catholic Primary School where 50 per cent of students are from humanitarian entrant families. The project was run collaboratively by RAWA and the school, and is being independently evaluated.

Education

Most services have implemented some form of training for the family relationships sector on issues relating to humanitarian entrants. This has occurred informally through one-on-one sessions with staff from other services, and through formal presentations, particularly at community forums which are open to both community members and staff from other agencies. RANSW has held workshops with RA therapists to educate the service more broadly about humanitarian entrant issues. BSL EMC presented a paper 'Challenges of working with African Communities' at the Family Therapy Conference. Two services use the local radio to promote their service and to provide education to the community about family issues.

3.4 Data reporting

Pilot sites were required to participate in the FRSP Online data system. The sites experience of this is discussed in the next section.

The first year of data collection was 2005-2006, which included the start up period for the sites. The delays and complexities of this period, the need for training, the difficulties experienced by some sites with aligning the on-line system within their existing infrastructure, all contributed to deliver low participation in the 2005-06 collection period. The activity between years is not comparable due to changes in approaches and or staff numbers. Participation increased in 2007.

Reports provided by FaHCSIA to the evaluation indicate that in the 2006-07 period 366 clients were recorded on the system as registered clients and a further 246 were recorded as unregistered. In addition a further 906 people were recorded as having participated in community development programs and activities. Unregistered clients are those who have been part of a one off group, for example, information session or course, seminar or community education activity, and for whom individual client details (demographics) are not collected.

The 366 figure for registered clients is significantly less than that reported by pilot sites in relation to clients who would meet the criteria for being registered on the on-line system. The site-reported figure was over 4000 individual and family groups in counselling, group work, or intensive family support. This does not include people who participated in the myriad community development activities run by sites, which exceeds the 906 recorded in FRSP on line reports.

The reason for the disparity in data is important – for both the meaningfulness of the analysis, as well as consequences for how future pilots may be better engaged in data reporting. One factor was that a number of sites were new to the Family Relationship Services Program and experienced a significant learning curve in complying with requirements. While training was available, some sites started from a low base of knowledge and comfortability with an on-line data system, which along with staff turn over, slow systems, reticence by clients to complete forms for reasons of low literacy or privacy concerns, and worker's prioritising of client work over administration, all combined to contribute to poor overall participation.

On the basis that the pilot figures are accurate, under 10% of clients who could qualify as 'registered' have been recorded. As such, it is perhaps most appropriate to treat the on-line report provided to the evaluation as a sample of the client group.

Considering the presenting need, where more than one category can be nominated, it is interesting to note that 20% of need relates to some kind of specific relationship issue, while 5% pertained specifically to adult violence – domestic violence or sexual assault. 5% of the presenting need pertained to issues of concern to children (neglect, abuse, separation of parents, while 8% included parenting as the presenting need. Mental health issues – whether trauma, mental health issues specifically, grief and loss, self harm, or suicidality made up 15% of presenting need.

Nearly one third of clients were adults living with a partner and children, while the balance were mainly living alone with children, and a small number living with extended rather than immediate family. 46% of clients were from Africa. Significantly, of the 259 clients whose English proficiency is recorded, 35% are in the 'Not at all' category, 36% in 'Not well' category.

A further feature of the data report is that the rate of completion for the field 'Need addressed' is negligible, with a total of only 13 items entered, making it impossible to report on the outcomes of the interventions.

A challenge for the evaluation has been to understand how each site approached their data collection in terms of the understanding of the data items, the counting rules applied, and how activity has been defined, for example, community development/information/groups. Ultimately, each site provided data to the evaluation about the range of activity and participation rates. The following table provides the extent to which sites met their indicators.

Table 3

| Indicators | Objectives Met | |
|---|--|--|
| <p>Anglicare NSW</p> <p>Service provided to a minimum of 515 clients with an anticipated 1800 sessions per year and a minimum of 18 groups education sessions per annum</p> | <p>2006 Report</p> <p>14 clients for counselling</p> | <p>2007 Report</p> <p>172 clients in group work 99 clients in counselling 1100 community members involved in community development</p> |
| <p>BSL EMC</p> <p>Information and referral, 25-35 clients</p> <p>Support groups, 10-15 families per group (6 groups per year)</p> <p>Community development forums, 30-35 per session, 2 per year</p> <p>Education groups, 40 people</p> <p>Skills training, 10-12 per group</p> <p>Counselling, 80 families per year</p> <p>Dispute resolution, 15-20 families per year</p> | <p>2006 Report</p> <p>Family therapy sessions to 56 families 60 people attended community forum</p> <p>Projected client numbers proved to be too high given resource and staff allocations for some services, and difficulties recruiting staff in some services leading to delays with project start up.</p> | <p>2007 Report</p> <p>Information provided to 488 community members</p> <p>Counselling and support provided to 88 families</p> <p>Two community forums attended by a total of 175 community members and service providers</p> <p>Facilitated 29 groups for African communities</p> |
| <p>RAWA</p> <p>Up to 250 clients – between 160-180 individuals, 50-60 through groups and community development, 6 families in dispute resolution service</p> | <p>2006 Report</p> <p>271 clients</p> | <p>2007 Report</p> <p>292 clients</p> |
| <p>SE MRC</p> <p>Information and referral, 125 per year</p> <p>Individual support services, 50 per year</p> <p>Counselling, 30 clients per year</p> <p>Mediation, 20 clients per year</p> | <p>2006 Report</p> <p>20 families with information and referral</p> <p>Intensive family support to 8 families, with an average of 12 contacts per family for intensive family support, 65 contacts in total.</p> <p>13 families supported by community development workers, with over 96 contacts in total across these families</p> <p>22 counselling clients</p> | <p>2007 Report</p> <p>35 families with information and referral</p> <p>Intensive family support to 16 families</p> <p>46 counselling clients</p> |
| <p>QPASTT</p> | <p>2006 Report</p> <p>105 counselling clients</p> <p>40 clients attended 20 group sessions</p> | <p>2007 Report</p> <p>126 counselling clients</p> <p>62 clients group session</p> |
| <p>RANSW</p> | <p>2006 Report</p> <p>Over 120 clients per year received face-to-face case work and/or counselling sessions</p> <p>Over 64 people per year attended seminars and/or workshops about family relationships issues across cultures and after migration</p> <p>At least 2 support groups from the Afghan,</p> | <p>2007 Report</p> <p>1,248 individuals were seen for counselling and family therapy</p> <p>256 students participated in a series of workshops on parenting</p> <p>15 and 17 people joined the</p> |

| | | |
|--|---|---|
| | <p>African and Iraqi communities respectively are organised and/or facilitated per year</p> | <p>Afghan Mothers and Daughters Group respectively; on average 11 Afghan young men participated weekly in group activities; 216 women attended the Darfur Women's Group and, on average 6 women from Somalia attended weekly gatherings</p> |
|--|---|---|

3.4.1 Adequacy of existing performance indicators

The key limitations of the performance indicators was reported to be the inability to record activity central to the pilot sites operation. The length of time it takes to build trust and connection with communities was one example of where resources are expended but cannot be 'officially' recorded. Another example is the 'informal' counselling and community development work that sites undertake, which is generally not recorded by workers. Over time sites increasingly reported this activity in status reports in terms of the program's achievements. The time consuming nature of data entry, for the reasons discussed elsewhere, was another key constraint.

Sites also noted the initial start up effort cannot be captured in the indicators, and will be a factor for new providers or new areas should there be an expansion of FRSHE. Sites also reported that there is likely to be a 'dip' in numbers with each new community engagement process, and that at present the engagement phase of entering a new community does not have a relevant indicator.

3.5 Link between FRSHE and FRSP services

Stakeholders reported that the FRSHE program did not have clear links with other FRSP services because the strategies required to engage communities and facilitate culturally appropriate counselling and mediation are often quite different to mainstream models of counselling practice. The exceptions to this are the two FRSHE programs run by Relationships Australia, where the FRSHE program provided an opportunity to educate the service as a whole about culturally inclusive practice and the needs of humanitarian entrants. In general, FRSHE services reported stronger links with other settlement and migrant services and relevant welfare agencies than with other FRSPH services. Some relevant points to note are:

- Training of staff across settlement services in family and relationship issues has occurred both formally and informally.
- Establishing a counselling program within migrant services ensures the program will be better tailored to the needs of migrant communities, and will be more connected with settlement services. However, it may mean that a counselling service is more isolated and there is less professional support and supervision for counsellors.
- Where the FRSHE program has been based in relationship services, the program has allowed for cross training between staff within the agency. The agencies have become more aware of refugee issues. However, it was also important that the FRSHE program had flexibility to work in ways that other FRSP services may not, such as organising social events, camps, barbeques and other outreach programs and being highly responsive to community needs and requests.
- It was noted that FRSHE seems like 'a square peg in a round hole' in comparison to the rest of the FRSP sector. The way of working is quite different, and much less based on 'sessional' delivery of counselling services. Community development is more of a focus for FRSHE programs. This has made it hard to record program delivery in the FRSP Online system as the delivery of services are not as 'neatly packaged' as other services.

4 Efficiency

Efficiency within the pilots and the administration of the initiative overall are discussed in this section. Of particular interest are the findings in relation to efficiencies within pilot settings which may have broader application for future pilot programs.

4.1 Pilot efficiency

All sites experienced delays of one kind or another in the start up period. The difficulty encountered by most was that of recruiting suitable staff, followed by engaging clients to utilise the service. WA was an exception in this regard in that the partner agency, ASeTTS, had an existing group of clients awaiting support and the FRSHE pilot allowed this group immediate access. Once this group was addressed, similar delays were experienced in the broader client engagement phase.

Over time a number of services also reported difficulty meeting targets within budget due to the costs involved in running groups with harder to reach target populations. Often the provision of transport, food and in some cases child-care was necessary to ensure attendance, and these costs had not adequately been accounted for, or lateral cost-sharing solutions were yet to be found.

While most sites retained senior staff through the pilot period, for the two sites that did not there were fairly significant frustrations in gaining an understanding of the program and the expectations of FaHCSIA. For example, a lack of paper trail in one site left the new coordinator struggling to understand the program, while in another site the requirements to be part of an evaluation remained unclear until late in the piece. While the FaHCSIA state offices were able to provide some information, the internal knowledge about the pilots had been for the most part lost.

It is worth noting that generally the proposals to participate in the pilot through the competitive tendering process, were put together by senior staff or by external consultants engaged to coordinate a consortium bid. As a result the staff responsible for running the programs were not immersed in the early concepts, ideas and approaches explored in that early phase. In future, the link between the proposal and the development of the program on the ground could be better supported by both auspices and by FaHCSIA, i.e. state offices.

4.2 Relationship with FaHCSIA

Most services have reported a productive working relationship with FAHCSIA staff.

FAHCSIA's funding of and participation in the FRSHE forum in Melbourne in April 2007 was well-received, and considered by FRSHE workers to be very useful. The information exchange between pilot sites, the practice discussions, and the opportunity to discuss in detail aspects of working with families was reported to be of great benefit.

4.3 Administrative burden

A particular inefficiency for pilots was reported to be participation in the on-line data system. All sites reported it was a time consuming requirement which generally did not meet their own needs for client records. A further problem for some sites was fairly inadequate information technology (IT) infrastructure which struggled to support the on-line data system, resulting in frustratingly slow screen changes, lost data, and system 'freezes'. While the benefit of being part of the larger FRSP was noted, further work would be needed to support an expanded FRSHE to participate meaningfully in the on-line data system.

A number of sites reported that staff did not have the capacity within their work hours to keep up with reporting requirements, advising that it would take up to two days a week if they were to comply with all the on-line requirements, which is simply not viable in a small team and with client demands considered

the priority. The services which did not find the on-line system problematic had the IT resources to build their reporting around the on-line system or were already a large well-supported FRSP provider.

5 Approaches and lessons learnt

5.1 Overview of approaches

A wide range of initiatives have come under the FRSHE program, from social support, to creating recreation opportunities and brokerage. While a number of these initiatives may be provided by settlement-type services, the direct involvement of the FRSHE workers allows for the development of trust between workers and communities. FRSHE workers will also work towards raising relationship and family issues throughout the course of other activities. The implications of this in terms of funding and service delivery are:

- The FRSHE program relies on a flexible, and often informal, model of counselling. Outreach is an important component as communities may be reluctant or unable to come into services. Counselling 'sessions' may take different forms. For instance, a worker meets one of her clients for breakfast and drives her to school once a week as this serves a practical need and ensures the client keeps the appointment. Performance indicators and reporting requirements need to accommodate this flexible approach.
- There is probably more scope for integrating the FRSHE program with other services and developing more partnerships so as to avoid overlap between FRSHE and other services and programs. A number of services are already doing this and have formed partnerships with services to run groups and activities.
- As well as providing relationship counselling the FRSHE program is also introducing communities to mainstream counselling services by building trust and familiarising and normalising the concept of family and relationship counselling. FRSHE workers also educate counsellors and other staff in mainstream services about humanitarian entrant issues. In this way the FRSHE program also works as a 'bridge' between humanitarian entrant communities and mainstream services. This role should be reflected in performance indicators and reporting.

5.1.1 Family work

Family work was identified by FRSHE workers as a critical approach to working effectively with humanitarian entrant families. This is in contrast with models of intervention which focus on the individual, and better recognises the impact of the well-being of the whole family on the health and well-being of each member.

Participants were invited to consider the principles which underpin their work with families, including their learning in relation to practical elements such as venues, and to capture the challenges they had encountered in doing this work, as well as the ways in which they were achieving success.

Table 4

| | |
|----------------------------|--|
| Principles for family work | <p>First stage is reactive (be helpful); second stage is reflective (share what you observe); third stage is to become responsive (provide what is needed)</p> <p>Flexibility</p> <p>Recognise the uniqueness of each family</p> <p>Be curious</p> <p>Build your cultural courage</p> <p>Client focused</p> <p>Learn as you go</p> <p>Self-determination – let the client decide what form of support they need</p> <p>Feels like 'reactive work' but goal is to be responsive</p> |
|----------------------------|--|

| | |
|---|--|
| Locations/settings | School, home, anywhere the family is comfortable |
| Challenges | Boundaries when you are part of the community Intergenerational and gender issues Settlement issues impact on relationships Relationship issues impact on settlement |
| Elements of the work to achieve success | Hierarchy of needs – understand what is wanted and who can best respond Task-oriented (dealing with practical issues first) Having all members in family counselling session – must hear from each other Settlement is where family support begins Break/bend rules of family to get in there (courage) Recognise roles of family members Casework is essential for engagement of families Gender issues affect the way family work is delivered Men are more difficult to engage but family work is more effective if men are engaged Have brokerage available → makes family work more effective. |

5.1.2 Group work

All of the pilot programs included an element of group work. This again reflects the cultural context of the client group, and importantly, the value to well-being of sharing with people who have had similar experiences.

The results of this discussion reflect the central challenges and lessons in this area of work, particularly the length of time required to really engage with clients and engage clients in a group and the demand on resources of preparing and running a group well. However, a number of elements were identified that have proved effective in group work programs.

Table 5

| | |
|---|---|
| Principles for group work | Consult/plan/consult/offer Think outside the square Slow paced Expect change! |
| Locations/settings | Joining existing group – think outside the square Went into elder woman's home to run group, create trust and comfort Flexible service. Home visits important. Go where people are – schools School-based |
| Challenges | Logistics Maintaining participation People come late - do we wait or start? Promoting group/project. Get more connected to community. |
| Elements of the work to achieve success | Narrative approach Exchange within group Early intervention programs into schools Involvement of Elders Common issues approach Focus on survival skills for healthy families Limit number of weeks Each week can be in isolation Ownership of group rules |

| | |
|--|--|
| | <p>Creative responsive</p> <p>Cooking group – metaphor → ingredients for healthy family</p> <p>Use of stages: Stage 1: Consulting target communities – what works; Stage 2: Planning; taking necessary actions (depending on consultation); learning</p> <p>Tool of NORMALISATION – not suffering alone.</p> <p>Replicate groups so that those who couldn't get there can come.</p> <p>Interactive psycho-education</p> <p>School - whole school emotional intelligence over 3 terms - managing emotions</p> <p>Common issue put them together - ask their concerns</p> <p>Consulting community</p> <p>Focus on family wellness; parents in charge</p> <p>Narrative approach (story) (who are we) WISE MAN</p> <p>Very slow approach to keep group with me</p> <p>Slow and careful: Mothers and daughters to see what they want, how to get into workforce</p> <p>Concrete, targeted</p> <p>See the benefit - inspire them!</p> <p>Clear theme</p> <p>Lead times with reminders.</p> |
|--|--|

5.1.3 Getting in touch with communities

A particular challenge for services, including specialist services such as QPASST and Migrant Resource Centres, is gaining access to newer communities to offer services. This is a critical lesson for future service provision, in that all new communities will require a planned, resourced, and well-paced engagement process before the ‘real work’ can begin, and even then, engagement will take time. The methods being developed by services are innovative and proving effective. One particular example of a fortnightly column in a community language newspaper was proving a highly effective way of engaging in opportunistic conversation by the worker while out and about in their community, covering topics of family life, roles within families and other key issues.

Table 6

| | |
|---|--|
| Challenges | <p>Phone calls and initial contact</p> <p>Lack of connection to draw on</p> <p>Blurred boundaries for workers from small/new communities</p> <p>Time and money expended with no obvious benefit seen in short – medium term</p> |
| Elements of the work to achieve success | <p>Dinner invites</p> <p>Drawing on existing knowledge and connections</p> <p>Practical programs that show value of the service</p> <p>Networking through any activity as well as existing networks – get involved, be seen</p> <p>Invite 2-3 representatives – don't single out</p> <p>Collaboration - partner with ethno-specific workers, with schools that children from community attend</p> <p>Information sharing</p> <p>Support work with a database of contacts – not relying on an individual's knowledge</p> <p>Use radio as a medium of engagement - promote, promote, promote</p> <p>Use ethnic press in promoting programs and activities, profiling self and issues</p> |

5.1.4 Collaborating with other agencies

The success of FRSHE services lies, in part, in achieving and maintaining effective relationships with a broad network of services. Several positive aspects of collaboration were identified, with three elements particularly noted: the opportunity to raise awareness both broadly and on specific issues while networking; the skill sharing for FRSHE workers and for those in the network who were willing to engage; and the ongoing positive relationships which are being built.

Challenges also remain, with the central issue being the misperception by mainstream services of what FRSHE services do. In the immediate sense this leads to inappropriate referrals and running around for clients. The key lesson for services is that time and resources need to be invested in engaging and staying engaged with the broad networks required to support families.

Table 7

| Positives | Challenges |
|--|---|
| Information sharing | Connecting with other providers |
| Invitation | How/when to collaborate |
| Dovetailing with pre-existing service | Staff turnover!! |
| Audience | Lack of experience and awareness for new staff |
| Complementary services | Differences in service provision |
| Value-add combination | Time per client |
| Flexibility with other providers | Specialist needs |
| Community support | Misperception by the mainstream - objectives of service not clearly understood by mainstream i.e. "crisis service"* |
| Novel, curiosity, new model, less competitiveness: PILOT | Staff turnover restart/reskill/inform* |
| Agency visit | Constant – time consuming* |
| Opportunities, raising awareness* | Appropriate referrals – overstretched services |
| Pilot and establish service | A shared client having multiple workers in another agency with no coordination. |
| Up-skilling on both sides* | |
| Working in partnership environment | |
| Strong connections, plan agenda, organising activities | |
| Training: cross-cultural | |
| Networking | |
| Improved service | |
| Building ongoing relationships* | |
| Developing continuous | |
| Identification of unique services i.e. tutoring | |
| Monthly agency visits – drip feed | |
| Refresher annually for key services | |
| Centrelink as hub | |

* = Significant learning

5.1.5 From learning to advice

Translating the learning that is occurring within pilots into advice that will help mainstream family relationship services to work with humanitarian entrant families is critical. FaHCSIA officers interviewed for the evaluation reported they see an increasing interest in the mainstream setting about working with refugee families, and have fostered this interest through featuring this area of practice as part of conference programs. There are, of course, limits to how effectively six small pilot sites can promote their work, and a focused and resourced strategy will be required to take the learning to the general FRSP sector.

In developing programs and approaches, the resource considerations that services encourage others to consider include having a cross-cultural consultant on the staff team, as well as people with group and individual skills. Knowing who the Elders are in each community is critical, enlisting their help and

drawing on the pre-existing structures within communities are all ways of building relationships that become entrees to meeting more community members.

Investing time in engaging with community Elders over time, for example attending events and showing interest in matters other than one's own particular program, and gathering and building on ideas from communities are all important. A key realisation is that with families, the essential ingredient of trust was most likely to be achieved through first offering practical help. Only once this trust has been established can any more therapeutic work be offered.

The single most identified 'pre condition' to being effective in cross-cultural work was cultural competence - achieved, in part, through cross-cultural training, which includes general awareness of one's own culture and how this is interpreted by clients, as well as ethno-specific knowledge and skill in supporting refugees from particular parts of the world.

The next section details the models as they have developed over the last two – two and a half years. The key elements of each approach are provided, along with an overview of the model.

6 FRSHE pilot approaches

6.1 Strength to Strength, Relationships Australia WA and ASeTTS

6.1.1 Key elements of the model

- Partnership between a mainstream service and a specialist service
- Activities include referral between services as well as training of staff
- Both organisations collaborated to deliver a program at a local primary school.

6.1.2 Overview

The model of the Strength to Strength program in Western Australia represents a partnership between a mainstream relationships service, Relationships Australia WA (RA WA), and a specialist service, the Association for Services to Torture and Trauma Survivors (ASeTTS).

Relationships Australia is the funding recipient for the program, and is responsible for providing integrated family relationship services to families who have recently arrived in Australia under the Humanitarian Entrants program. These services include mediation, counselling support, education and skills training, and specialist domestic violence responses. ASeTTS is responsible for information and referral services and counselling. Both services share responsibility for support services and community development activities.

The program proposal submitted to FaHCSIA for this program identified program funding as providing 1.5 equivalent full time staff (EFT), as well as the costs of other activities (such as mediation and conduct of skills training etc).

6.1.3 Approach

- Partnerships
- Build worker skills to take to client community (capacity building)
- Run family orientated skills workshops
- Emotional intelligence for children/school-based and link them to other school relationship programs and referrals

6.1.4 Auspice/partnership

RA WA is a reasonably large non-government organisation with 154 staff, with two-thirds of the staff involved in direct service delivery. ASeTTS is a small to medium non-government community organisation with 25 EFT. Relationships Australia identifies itself as promoting a 'holistic, community and interagency approach to relationship support services'. ASeTTS uses a recovery model in its services which is premised on 'building trust, working within a family systems framework, and utilising the ... resilience of ... clients, with an aim to assist new arrivals and their families settle and integrate ... while maintaining important aspects of their own culture'.

6.1.5 Program target group/s

The Strength to Strength program in WA (initially named Humanitarian Entrants Lifeline Program, HELP) primarily targets humanitarian entrant families from Africa, although the 2006/2007 Status Report indicates that an increase in the number of Burmese clients into the Humanitarian Entrant program is likely to result in an increase in the number of Burmese clients into the counselling program.

The program primarily focuses on entrants who have recently arrived in Australia and have specific and complex relationship needs that require further intervention during or following the settlement period.

At the time of establishment, ASeTTS was working with the majority of new entrants through the Integrated Humanitarian Settlement Services (IHSS). Entrance into the program is based on ASeTTS assessment procedures under the Department of Immigration, Multicultural and Indigenous Affairs (DIMIA) program. ASeTTS uses a case management approach to working with its clients, providing a single point of contact.

6.1.6 Core activities

The activities undertaken by the Strength to Strength program include the following:

- Information, referral and advocacy support to families
- Counselling for family relationship issues (including cross-generational issues, raising children in a new setting, marital difficulties, changing gender roles in a new cultural setting)
- Relationship education
- Parenting groups
- Community development
- Mediation for family members in a culturally appropriate manner

The establishment of the Strength to Strength WA program included cross-training between the two organisations, with Relationships Australia providing ASeTTS staff with training and skills development in areas such as counselling and group facilitation, and ASeTTS providing training and skills development to Relationships Australia staff in culturally appropriate ways of working.

A significant element of the Strength to Strength (WA) program is the 'Emotional Intelligence for Children' program run at the Majella Catholic Primary School. The Majella Catholic Primary School has a significant number of families from African Humanitarian Entrant families (50%). The school had approached RA WA with a request to conduct anger management skills development. An eight-week course for students focused on emotional intelligence was developed and runs as part of the Strength to Strength program. The Emotional Intelligence for Children program at Majella includes parent and teacher sessions, and is provided to all students in a class and is run in Years 1-6.

Other group activities include the Family Wellness program, which provides training and skills development on 'making and keeping families healthy, sharing ideas for solving family difficulties and meeting other families'. This program includes a component for young people (aged 11 upwards). Other groups have targeted the Bari community and South Sudanese men.

Community development activities include participation in relevant forums, presentations in relevant community settings or issues such as parenting, communication skills etc. Other activities include mediation, and individual and group counselling.

6.2 Strength to Strength, Relationships Australia NSW

6.2.1 Key elements of the model

Significant resources have been allocated to developing a model of best practice for working with humanitarian entrant families. A consultant with expertise in the area of family relationships and therapy has been working with the team on a fortnightly basis to develop a model of working effectively with humanitarian entrant families.

6.2.2 Overview

Strength To Strength is a family relationships program which assists humanitarian entrant families. Humanitarian entrants who settle in Australia experience a range of pressures. These include a lack of information and life skills within the context of Australian society, the loss of traditional family support structures and changing expectations in a new cultural setting. These pressures undermine family stability and consequently these families often experience challenges raising children in a new cultural setting and have relationship difficulties.

Strength To Strength supports these families as they seek to strengthen their family relationships. It provides assistance in a culturally appropriate way by matching bilingual, bi-cultural family workers with families.

6.2.3 Approach

- Partnerships – capitalise on each other’s expertise
- Using pictures and art and other media to help pass the messages on
- Draw on the community for staff
- Facilitate exploring the area (geographic) as a way of learning about Australian life and culture
- Skills up workers to meet needs.

6.2.4 Program target group/s

- African humanitarian entrants with a focus on families from Sudan; and
- Middle Eastern humanitarian entrants with a focus on families from Iraq and Afghanistan.

6.2.5 Core activities

Strength To Strength provides:

- Family counselling about parenting and changing roles in the family
- Parenting groups about child discipline, conflict resolution and effective communication
- Workshops about relationships after migration
- Workshops for young people about the challenges of living between two cultures
- Support groups, casework, information, referral and advocacy.

More specifically:

- The Afghan bilingual worker facilitated ‘parenting across cultures’ sessions for the Afghan Hazara community in Central Western Sydney. This is a partnership between RANSW and the Afghan Community Settlement Services worker at Baulkham Hills Holroyd Parramatta MRC.
- Strength to Strength is currently offering programs on parenting, and focusing on developing workers’ skills through narrative therapy approaches.
- In partnership with Service of Excellence in Diversity Health Care and Baulkham Hills Holroyd Parramatta MRC, an information session was held at Auburn Hospital in May 2006 regarding the Afghan Community. The aim of the session was to highlight to health care workers the needs of, and issues faced by the Afghan community in their resettlement. The focus for the session was the health needs (including psychological) of Afghans and how health workers can appropriately deliver services to this group. Information was provided on Afghans in Australia including: History; The Land; People; Religion; Culture; Settlement Needs & Challenges; Family & Relationships Challenges; Health Needs; Recommendations and Community Resources.

6.3 POUCH Centre, Queensland Program of Assistance to Survivors of Torture and Trauma

6.3.1 Key elements of the model

- Practical services such as child-care and transport services.
- Developing links with community organisations with which communities are already connected such as schools.

Given that the model of this project is a 'Community Capacity Building' model, a considerable amount of time has been spent in training and professional development for the staff. This in no way diminishes the considerable skill that the counsellors bring with them – both in terms of cultural appropriateness of the notions and style of 'helping' that their communities turn to them for, and the status and wisdom they hold as 'Elders' in their own communities.

The capacity building model includes a dedicated budget to bridging the gap between the cultural skills of the bilingual counsellors and the professional counselling community who in general recognise skill as being linked to formal tertiary qualifications.

The project began in October 2005 and the next three months were dedicated to engaging with the communities of humanitarian entrants (primarily from Africa). Community consultations were undertaken and input was sought from community leaders about the Family Relationship Support needs of the refugee communities and the shape of the project. The process of recruitment did not commence until this had been completed in March 2006. Staff were recruited and commenced employment in April 2006. The coordinator of the project was required to be innovative in the way recruitment was undertaken, to utilise a range of promotion and marketing strategies and also to provide training and support to potential applicants about the vagaries of the Australian recruitment system, for example, notions of responding to selection criteria was, in many cases, an unknown process.

Opening hours are in line with the normal business hours of QPASTT. In order to accommodate participants' needs, however, services are delivered in a flexible manner. Both night and evening group sessions have been offered to enable as broad participation as possible.

6.3.2 Approach

- Finding and adopting tried models such as Parenting Across Cultures
- Use organisations the community already have attachments to (for example, schools, home)
- Offering extras such as child-care, food, transport to attend programs
- Enhancement focus – building on the clients' current skills
- Counselling services are underpinned by principles of centred practice, respecting resilience and strength, empowerment, as well as respecting the cultural and world view of the refugee survivors of torture and trauma.

The approach of the project is to provide whole of family support strategies to families experiencing extreme distress, including multiple losses of loved ones, countries of origin, cultures, employment etc. In addition, the clients of this project are survivors of torture and trauma and the usual coping mechanisms that families draw upon in times of stress are stretched to the limit.

6.3.3 Auspice/partnership

The POUCH Centre:

- a program of QPASTT, which is a non-profit, non-government organization that provides counselling, advocacy, support, group and community activities to survivors of torture and trauma from refugee backgrounds.
- a Family Relationship Service for survivors of torture and trauma from Africa. It aims to deliver a family-based approach to support and to assist individuals, families and communities in the development of respectful, rewarding and lasting family and community relationships.
- Staffed by qualified professionals including African bi-cultural counsellors. Interpreters are also utilised where necessary.

6.3.4 Program target group/s

The program is available to humanitarian entrants who have recently arrived in Australia.

It has formed collaborative links formed with the Sudanese elders committee, the Burundi community and the emerging Africa Council (an advocacy body representing the interests and needs of African communities in Queensland).

6.3.5 Core activities

The FRSHE program has included:

- Development of a comprehensive manual outlining assessment, counselling and support processes, principles and practice.
- Group sessions covering topics such as: the impact of torture and trauma on the family; the impact of migration and acculturation on the family; Australian law; parenting and child rearing.
- Community forums. For example, as the final session for a series of psycho-education workshops, POUCH held an education evening titled, 'What we should look out for in ourselves and each other' for a number of African community groups. The event was held to consolidate, strengthen and share the learning and experiences of many clients who had participated in POUCH workshops. Over sixty people attended the event and it was the first time a number of different communities had been brought together.
- QPSATT and the Queensland University of Technology have received an Australian Research Council Grant to evaluate the POUCH family therapy model.

6.3.6 Strengths and weaknesses of the model

POUCH has earned respect and support from communities.

The local communities with whom POUCH works understand and appreciate the family-oriented model. This works well in conjunction with a community development model.

The model allows for early intervention and prevention strategies to be put in place and builds bridges with central agencies.

6.4 Stronger Families Program for Humanitarian Entrants, Brotherhood of St Laurence, Ecumenical Migration Centre, Victoria

6.4.1 Key elements of the model

- Programs located within community areas
- Links with other community services, including legal services
- Provision of education to other counselling and community services about the needs of humanitarian entrants.

BSL EMC works with 'newly emerging' communities – characterised as small in number and often dispersed across regions, with only developing community leadership and very limited infrastructure and resources. EMC's unique position in working with a state-wide and non-ethnospecific brief means that the Centre is well placed to identify and respond to settlement-related issues, provide advice to governments and respond quickly to emerging needs.

6.4.2 Approach

The approach utilises the existing relationship between EMC and community leaders to:

- Engage families from refugee and humanitarian communities
- Deliver joint community development activities
- Utilise community radio in relevant languages to promote the programs
- Utilise existing settlement programs where new arrivals actively participate to introduce family relationship work as a key service to assist families in their resettlement
- Provide training and support to generalist service providers of family relationship work to better engage humanitarian entrants.

The service utilises a flexible model of service delivery that is tailored to the needs of local communities and sensitive to confidentiality issues often present in small communities. The model operates from a number of local sights. A range of integrated programs ensures that clients can access the service from multiple entry points.

As the program develops, the focus will shift from engaging communities to providing family support, parent information and referrals into counselling, family therapy and mediation services.

The model uses action research strategies to contribute to existing knowledge within the sector on culturally responsive approaches to family therapy accessible to humanitarian entrants.

The staff hired by the BSL EMC for the FRSHE program are not members of local humanitarian entrant communities. It was a deliberate decision to hire staff based on counselling and community development experience rather than local community knowledge, as previous experience showed confidentiality issues can become a barrier to service provision when staff are members of small communities. Additionally, because humanitarian entrant communities are so diverse, hiring a local community member does not necessarily guarantee all humanitarian entrants will feel comfortable accessing the service. The drawbacks of this model are that staff must rely heavily on interpreters and engaging local communities can take a long time.

6.4.3 Organisation/s

BSL EMC works with 'newly emerging' communities – characterised as small in number and often dispersed across regions, with only developing community leadership and very limited infrastructure and resources. EMC's unique position in working with a state-wide and non-ethnospecific brief means that the Centre is well placed to identify and respond to settlement-related issues, provide advice to governments and respond quickly to emerging needs.

6.4.4 Program target group/s

- Humanitarian entrant communities, with a particular focus on African families
- Generalist services.

6.4.5 Core activities

Program activities have included:

- Social support groups (SSGs)
- Men's groups
- Support groups for women, including one in which local women from the Horn of Africa requested a quilt making group which then became a forum for discussion and support on relationships and parenting.
- Protocols for working with the legal system established. A law student from The University of Melbourne took on the job of establishing protocols and communicating with the legal services.
- An important aspect of the work of the Stronger Families Program (SFP) has been the development, recruitment, facilitation and evaluation of SSGs for African couples. The title of these sessions was 'Change, Roles and Responsibility', underlining the major theme of strengthening family coping mechanisms in response to the changed social, political, economic, educational and employment environments in which humanitarian entrant families now find themselves. The design of the SSGs required 3 x 3 hour sessions for each seminar series.
- A community forum in which community leaders had the opportunity to ask questions and raise their concerns about the delivery of specific services. This was attended by: Sudanese Community Association of Australia leader; Liberian Community Representative in Victoria; Somali Community leader; South Sudan Bahar El Ghazal Community leader; South Sudan Equatoria Community leader; Congolese Community representative. The community forum constituted a major organised community development event as it was also designed to foster connections between community members and service providers so as to improve communications and remove barriers to access of services.
- SFP practitioners facilitate education activities ranging from one on one consultancies with staff from other agencies to guest speaking engagements. Workshops have been designed to assist agencies to work effectively with humanitarian entrant families through culturally sensitive interventions.

6.4.6 Strengths and weaknesses of the model

Flexibility of service delivery is a strength of the model. It allows staff to work with communities in ways that are appropriate and responsive to their needs and requests. It also allows staff to engage individuals who do not present with family relationship issues, but whose broader issues relate to their family situation, as one staff member relates:

In a school I was asked to work with a couple of girls who faced very difficult family issues as well as struggling to live normal lives on the estate. (One girl was raped and another severely bashed.) Neither young woman wanted to discuss the issue but both said that they wanted to talk about life in Australia. With them I have begun to look at career planning because this is something they want help with. In the meetings we have begun to build a relationship and the girls are talking about how different Australia is from their home. They are seeking support with managing their safety and they are talking about the difficulties they have as families because they do not eat together or have time to discuss things as families. (FRSHE worker, BSL EMC)

Informal evaluation conducted by the service indicates that clients appreciate the information provided by the service.

BSL EMC has made connections with a number of other services through the FRSHE program. Projects such as social support groups have been jointly coordinated and funded. Good working relationships have also been built with local schools.

6.5 Humanitarian Counselling Program, Anglicare NSW

6.5.1 Key elements of the model

- Family-oriented counselling
- Partnerships with other agencies to deliver specific programs
- Wide range of counselling services and programs.

6.5.2 Overview

Anglicare's Humanitarian Counselling Program (HCP) provides services to refugees in the Fairfield/Liverpool, and Canterbury/Bankstown Local Government Areas.

HCP aims to address the range of pressures refugees face that can undermine family stability while transitioning to life in Australia.

6.5.3 Approach

- Work to strengthen families
- Work with the group/family/community – not the individual.

6.5.4 Program target group/s

Referrals from a variety of cultural backgrounds: Sudanese, Burundi, Congolese, Ethiopian, Sierra Leone, Iraqi (Mandan), Guinean.

6.5.5 Core activities

HCP assists refugees to achieve and sustain valued family relationships, and manage relationship difficulties on an individual, couple and/or group level. HCP utilise face to face and over the phone interpreters, so people can communicate in the language they feel most comfortable with.

- Parenting children and teens
- Strengthening family communication
- Conflict resolution
- Marital issues
- Family separation, and
- Anxiety and stress.

Assistance is offered to refugees through a range of services, including:

- Individual, couple and family counselling
- Relationship enhancement services
- Creative therapies
- Parenting groups
- Children and teenager groups
- Information forums.

More specific activities include:

- Partnerships being developed to establish group education and therapy groups
- Culturally appropriate parenting groups to provide clients with alternatives to traditional parenting styles: Sudanese Burmese, Assyrian
- Parent / Relationship groups which assist adjustment to Australian family life
- Mixed African Parent Program
- Working collaboratively with Green Valley Domestic Violence Team to establish a group for children who have been exposed to domestic violence
- Some counselling sessions provided in home environment and in school environment
- Referrals made where appropriate to services such as: housing, English classes, child-care.

6.6 African and Humanitarian Family Relationship Service, South East Region Migrant Resource Centre, Victoria

6.6.1 Key elements of the model

- Provision of a range of information, referral and counselling services to ensure clients can access support in a way that is appropriate to their needs, and that they are most comfortable with
- Both individual and group counselling is available
- Information can be obtained through drop in or formal appointments
- Flexible approach to service delivery.

6.6.2 Overview

The Migrant Information Centre (Eastern Melbourne) in partnership with the South Eastern Region Migrant Resource Centre is implementing a counselling service to strengthen family relationships amongst newly arrived refugee families.

The program 'Family Relationships Services for Humanitarian Entrants Program' provides individual and couple counselling as well as group therapy programs.

The aims of the programs are to:

- Enhance capacity of the target group for achieving and sustaining valued family relationships
- Enhance target group capacity to manage relationship difficulties
- Enhance relationships for target group clients.
- Improve family relationships
- Reduce intergenerational conflict between parents and their children
- Encourage positive communication between parents.

6.6.3 Approach

Try as many techniques as possible, such as:

- Parent focused
- Children/parents' rights focus
- Culturally appropriate environment and food
- Creating a 'new story' (for example, men are no longer warriors, so change their story to that of wise men and leaders)
- Anger management – youth drumming group
- Women's support groups (photos)
- Men's groups
- Employing bilingual staff, including admin staff
- Use pre-existing groups and workers.
- Use community consultation / focus groups to develop programs.

- Flexibility in service delivery.

6.6.4 Auspice/partnership

The South East Migrant Resource Centre aims to advocate and empower ethnic communities to promote participation in the Australian community, while maintaining cultural individuality and aspirations.

The Migrant Information Centre aims to take a lead role in the coordination of current, relevant information and the provision of services that will strengthen and stimulate opportunities to enhance the lives of new and existing migrant populations living in the Eastern Region.

6.6.5 Core activities

- Information and referral services, allowing drop in as well as appointment-based access to assessment and information
- Individual support services to clients after assessment. Workers negotiate with clients regarding support needs and assistance
- Run eight-week support programs
- Run family relationships forums
- Run orientation sessions (Humanitarian Information Sessions), covering issues such as Australian families and the law and parenting in Australia
- Provision of family counselling services
- Mediation services for families

Two examples of the groups run include the parenting program called 'In Home Parenting Pilot' where the MRC engaged the services of a local Sudanese community member to organise a group of people in her home to which FRSP staff can deliver the parenting program. Other programs have been delivered in collaboration with local schools. The MIC groups included a Family Relationships Skills Program for Southern Sudanese Young Men – using a therapeutic approach MIC developed an eight week young men's group therapy program. The aim of the group was to support young Sudanese men to strengthen their understanding of family relationships and their leadership skills. The group was evaluated by MIC.

7 Conclusions

7.1 Appropriateness

The FRSHE pilot has successfully demonstrated the relevance of family relationship support to the wellbeing of humanitarian entrant families in the post arrival period. The needs of humanitarian refugee families are ongoing within the current communities and can be anticipated to be the case in emerging communities. These needs are broad and often substantial, and place pressure on many points in the service system. However, the FRSHE focus on family wellbeing and in particular the negotiating of new cultural, social and legal norms should remain a feature of the family relationship support sector.

While there is no ideal model emerging from the pilot, there are crucial elements to inform service and program design. These elements all flow quite logically from the fact that formal sources of family relationship support are a misnomer for the majority of cultures represented in Australia's humanitarian entrant population. Keeping this fact in mind, the most effective approaches start from first principles of the helping relationship ie understanding the point in life and the point in a problem, as perceived by the person seeking assistance, in other words, 'where the client is at'. This involves negotiating each step in the interaction, building a common understanding of the individual's priorities as well as the role of the service. This process of alignment between needs, wants and what is available can take considerable time, and may need to begin again as new issues emerge. Through this relatively slow process of engagement, the trust established between the worker and the individual becomes key to the relationship, and can translate into credibility for the service with a community more broadly.

A further challenge of aligning expectations between services and their workers, and the communities and individuals, relates to agreeing on what the priority issues are – those of the client or others evident to the worker. The main tension identified in this evaluation relate to child safety concerns and violence against women. It is highly skilled work to raise, inform, support, educate, and counsel on social norms and the legalities that pertain to the private domain of family life in Australia. These issues in particular raise the challenge for services of supporting the community as a whole, but also the obligation to support – and if necessary act to protect – vulnerable members within communities. It also highlights the need for FRSHE-type services to be supported in establishing and maintaining protocols with statutory and other child safety agencies, as well as the network of family violence – and in particular, migrant women's support services.

A further area where support could be introduced is professional supervision for workers, beyond the day to day task management and debriefing. Workers tend to work alone, often in very small teams, which are not always resourced with senior practitioners skilled in supporting staff from diverse cultures working with new communities, developing new methods of practice. This is an area for FaHCSIA to consider in any expansion of the model, both in terms of design requirements and funding arrangements.

7.2 Effectiveness

FRSHE services have each gained credibility in their local networks and with key members of communities. This credibility is based on respectful engagement practices, and effective work with communities, individuals and other services. The investment in networking and positioning services within the local service system took up to a year for some sites, with the second year seeing effective interventions and services being provided in line with plans. The difficulty identified for all sites was the inability to record the start-up effort on FRSP On-line. In contrast to the general FRSP sector for whom FRSP On-line was developed, the FRSHE sites are far less based on sessional delivery of services, and for the majority, continued throughout the evaluation period to struggle with the data requirements. As a consequence, data available for the evaluation was highly patchy, leading to only indicative findings from the FRSP On-line data set.

7.3 Efficiency

Efficiencies within the program pertain primarily to size, and the culture of flexibility and responsiveness. As a result, people seeking support are generally able to be responded to quickly, with services engaging with families or individuals as the opportunities arise.

Inefficiencies occur at other points, however, particularly in relation to what sites describe as the 'administrative burden', brought about by a data system which is not well supported by the low-key technology platforms in many community based agencies, and the time involved in navigating the system to complete client entries. As a result of extremely slow connections, lack of training, and lack of confidence in using the system, the majority of services reported the perception that if they met all of the requirements of FRSP On-line, more time would be spent entering data than with clients. The level of support to sub-programs by auspice agencies can also be quite varied, and for some FRSHE sites the pilot operated very much in isolation from the broader auspice's systems and potential supports.

A further area of inefficiency was brought about in some sites through a lack of internal coherence in regard to the original bid to participate in the pilot, through to the point of service delivery. This risk arises when the bid is written in one part of an organisation – or even by an external party, and when won, the conceptual thinking and assumptions that informed the bid are not passed over to the direct service part of the agency. There is potential for FaHCSIA State Officers to play a greater role in supporting this coherence, as well as greater responsibility by auspices to ensure new staff are appropriately oriented to the history and the requirements of a new program.

Any future FRSHE services will benefit from the learning of the pilot sites, and are likely to achieve some efficiencies in the start-up period. However, it needs to be noted that each refugee community requires a planned, resourced and carefully paced engagement process to enable individual, group and community work to begin.

7.4 Future directions

The findings of the pilot suggest that family relationship support is best provided to humanitarian entrant families from services which:

- locate their workers (either as a base or through outreach models) close to their target communities, taking into account the likely lack of transport and the need for workers to take up opportunities as they arise at the local level
- have pathways into the broader family support and refugee service network, including local ethno-specific services which allows for rapport to build, facilitates referral, and promotes opportunities for integrated projects
- ensure that as a whole, the service offers cultural competency, relevant languages to the extent possible, and skilled practitioners to engage in family relationship support
- demonstrate creativity in service design, skill in identifying and being responsive to opportunities as they arise, which may range from group work across all ages, to community development strategies, to health promotion, and individual and family counselling.

The child safety issues identified through the pilot were not anticipated, and have brought to the surface a significant area of need. FaHCSIA may be in a position to raise with state and territory child safety agencies this finding, and the need for state agencies to develop a better understanding of culturally relevant ways of working with humanitarian entrant families.

The other specific area where FaHCSIA may be able to effect change is in relation to the administrative burden experienced by small sites, and the subsequent issues identified in the report regarding the quality and quantum of data.

The Family Relationship Support Program represents a substantial sector within the Australian service landscape, and there are within this sector 'mainstream' services which have developed their practice to be meaningful to refugee families and individuals. On the whole, however, humanitarian refugees

remain a group unlikely to actively seek support from mainstream services, and a targeted pro active model remains the most appropriate response to providing preventative and early intervention support. Components of a model need to include education, group work and community development, as well as therapeutic interventions where the expertise is held within a service.

Any expansion of the FRSHE initiative to other areas of concentrated humanitarian entrant refugee settlement will benefit from the findings of this evaluation. It is recommended that any future sites be linked into the existing network of services, and that this engagement inform the development of local models. In this way the learning from the pilot can be maximised for the benefit of humanitarian entrant refugee communities.

Appendix A Research tools

A.1 Question guide for clients

1. Can you recall how you heard about the service? Broadly, what sort of help did the service give you?
2. Tell me about what it was like to meet the workers from this service for the first time?
3. Can you give me some examples of how the service has been helping you or is now helping you?
4. Are there more things the service could be doing to help you?
5. What do you think are the things the service does well now?
6. Is there anything that could be done better? Can you give me an example?
7. Do you think that the service could be helpful to other families?
8. What do you think are the main problems that the community has, that a service like this could help with? How big do you think these problems are, and how many families in the community do you think may have these problems?
9. What do you think would happen if there was no help for these community problems?
10. The idea of this service was to help with family stability while you are getting used to living in Australia. How well do you think the service is doing this?
11. Do you have any other comments you would like to make about the service?

A.2 Interview/Discussion Participant Consent Form

Thank you for taking part in this interview/discussion, which will help Strength to Strength understand what support you may need and how they can do it better.

Please sign at the bottom of this paper to show us that you:

- understand what the project is about, had someone explain this project to you, and you have been able to ask any questions
- can tell us that you want to stop any time
- can leave anytime you like if you want
- do not have to answer any questions you do not want to
- understand that anything you tell us or any information about you, will be kept totally secret, and will not be given to anyone without your permission
- feel happy that we have given you information about:
 - the people that will keep any information about you and what you talked about totally safe
 - the people who will look at the information you have given
 - any other people who may see the information
 - how the information will be kept safe
- freely give your consent to take part in this project to improve the Strength to Strength service and other services like it that work with families who are humanitarian entrants
- have been told who you can speak to if you are worried about anything to do with this project
- have had your questions answered.

I (print name)

Contact details:.....

Signed Date

If you have any further questions please contact:

Claire Grealy, Associate Director

Urbis

Level 12, 120 Collins Street

Melbourne, VIC 3000

Tel: (03) 8663 4888

A.3 Question guide for external stakeholders (agencies)

Introduction

1. Can you tell me briefly what is the nature of your organisation's relationship to the program being evaluated? How do your activities and those of this program interact?
2. How long have you been involved in your present role? How familiar would you say you are with FRSHE *overall*?

Appropriateness

3. One task of the evaluation is to look at the *alignment* between the original objectives of the FRSHE initiative and the models that have been piloted. To what extent do you think the program is consistent with these priorities? Where has consistency been maintained or not? Why is this?
4. What do you see are the main *continuing* community needs or problems that need to be addressed? How prevalent do you think these needs and problems are? Why do you think that?
5. What *alternative strategies* do you think could be used to address these needs? To what extent does the FRSHE initiative allow for such a range of activities/strategies?
6. What do you think would be the *impact* of not addressing the continuing community needs and problems that you identified earlier?
7. What *other strategies* do you know of (for example, State Government strategies) that target similar needs? To what extent do you think these strategies meet identified community needs?
8. How much, and in what ways, do these other strategies *overlap* with FRSHE activities? Have you come across *inconsistencies* between the program and other strategies that target similar needs? If so, how do you think these impact?
9. Do you think the FRSHE initiative and other initiatives could be better *integrated*? How so?
10. Are there any possibilities for *rationalisation and/or greater integration* between the FRSHE initiative and other programs?

Effectiveness

11. In terms of its *impacts* on the need discussed earlier, what have you observed to be the main *achievements* of the program? Where would you say there have been any *limitations* or *gaps* in its achievements?
12. How well *do you think* the program has achieved the desired objectives for the community? How do you know the program has contributed to achieving these objectives?
13. Are you aware of any incidental or unintended *consequences* of the program – either positive or negative? If so, what are they?

Efficiency

14. Have there been any unforeseen *flow on effects* or impacts on the community, or clients or on other governments as a result of the program running (for example, increased demand on services in the area etc)?
15. Do you think there have been any delays in the implementation of the FRSHE initiative? If so, why do you think these delays occurred? How were any problems resolved?
16. How familiar are you with the model being used by this program? What do you think the *strengths* of this model are? What do you think the *weaknesses* of this model are?
17. To what extent do you think the approach of this program has *broader application* (for example, specialist/generalist combination; specialist only)?
18. Do you think the service delivery approach of the program has changed since it started? If so, in what ways has it changed? Why do you think the program has changed in these ways?
19. Do you think that the *reasons* clients seek assistance from the program have changed since the program started? If so, in what ways do you think these reasons have changed? Why do you think this is?

Other

20. Are there any other comments you would like to make about the program or the FRSHE initiative?

A.4 Question guide for FAHCSIA National Office

Introduction

1. How long have you been involved in your present role? How familiar would you say you are with FRSHE *overall*?

Appropriateness

2. One tasks of the evaluation is to look at the *alignment* between the original objectives of the FRSHE initiative and the model that has been piloted (see copy of objectives). To what extent do you think the program is consistent with these priorities? Where has consistency been maintained or not? Why is this?
3. What do you see are the main *continuing* community needs or problems that need to be addressed? How prevalent do you think these needs and problems are? Why do you think that?
4. What *alternative strategies* do you think could be used to address these needs? To what extent does the FRSHE initiative allow for such a range of activity/strategies?
5. What do you think would be the *impact* of not addressing the continuing community needs and problems that you identified earlier?
6. What *other strategies* do you know of (for example, Australian Government strategies) that target similar needs? To what extent do you think these strategies meet identified community needs?
7. How much, and in what ways, do these other strategies *overlap* with FRSHE activities? Have you come across *inconsistencies* between the program and other strategies that target similar needs?
8. Do you think the FRSHE initiative and other initiatives could be better *integrated*? How so?
9. What do you think are the *links between* the FRSHE initiative and other programs responding to the needs of humanitarian entrants? What do you think are the links between the FRSHE initiative and the family relationships sector? What do you think are the links between the FRSHE initiative and other community or social programs?
10. What do you think are the possibilities for *rationalisation and/or greater integration* between the FRSHE initiative and other programs like the ones we discussed above?
11. How familiar are you with the models being used by the pilot sites? What do you think are the *strengths* of the models? Can you comment on any weaknesses in the models?
12. To what extent do you think the mix of provider models has been the right mix? (for example, specialist/generalist combination; specialist only)?

Effectiveness

13. In terms of its *impacts* on the need discussed earlier, what have you observed to be the main *achievements* of the initiative? Where would you say there have been any *limitations* or *gaps* in its achievements?
14. How well do you think these *performance indicators* assess the effectiveness of the program? If the program was to continue, how do you think these performance indicators could or should be improved?
15. Are you aware of any incidental or unintended *consequences* of the initiative – either positive or negative? If so, what are they?

Efficiency

16. How much staff time (EFT) and other resources do you think your office has contributed to supporting the achievements of the FRSHE initiative? How appropriate do you think this level of resourcing is or has been?
17. Has there been any underspending or overspending in this program? If so, how has this impacted on the estimates for future program budgets?
18. How do you think the *FRSHE initiative* could be improved and/or simplified to increase its efficiency and effectiveness (for example, contract administration, reporting)?
19. Have there been any unforeseen *flow on effects* or impacts on the community, or clients or on other governments as a result of the program running (for example, increased demand on services in the area etc)?
20. Where there have been delays in the implementation of the program why do you think these delays occurred? How were any problems resolved?

Other

21. Are there any other comments you would like to make about the program or the FRSHE initiative?

Appendix B Action research guide

The purpose of this template is to facilitate documentation of the Action Research process undertaken by each service. The questions are intended to generate ideas, discussion and rigour in each phase of the action Research cycle. It is important that services document as thoroughly as possible each of their Action Research cycles.

Planning

- ‘What are our questions?’
- ‘What do we want to do?’
- ‘How will we do it?’
- ‘When will it be completed by?’
- ‘Who will do what?’
- ‘How will we know if we’re on track?’

Action

- ‘What actions are completed?’
- ‘Which actions were planned but abandoned?’
- ‘Which actions were modified or were not in the initial plan?’

Observation

- ‘In what ways have we tried to find out what happened?’
- ‘Who thinks it happened differently?’
- ‘How did things happen?’
- ‘What supporting documentation do we have?’
- ‘Are our ways of observing what is happening actually capturing the essential/exciting/unusual features?’
- ‘Are we including ‘voices’ that may not usually get heard?’

Reflection

- ‘Why did this happen? Do we need to further proof to really understand this?’
- ‘How do different groups understand what happened?’
- ‘What assumptions am I working with? What ideas are being supported/challenged?’
- ‘Who agrees/disagrees and what does this reveal?’
- ‘Who got to have a say and who did not – and what does this mean?’
- ‘Have we got a shared understanding of the meaning of what happened?’
- ‘What does the interpretation mean for planning change?’

Appendix C National Forum Report

FRSHE Provider Forum

April 2007



Report of National Forum April 2007

Report

Prepared for: Department of Family and Community Services
and Indigenous Affairs

June 2007

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Introduction

This is the report of the 2nd FRSHE Practice Forum held in April 2007. The forum was held over two days in Melbourne, with a series of discussions and activities focused on the current challenges for pilot sites, the learnings to date, and the upcoming end-point to the overall evaluation.

The report captures the results of small group work as well as broader discussion and facilitator presentations.

Background

In November 2006 FAHCSIA hosted a national forum attended by providers of the FRSHE program. The forum was well-attended, with several staff participating from each of the six services, from a number of state offices, and from FAHCSIA National Office.

Participants from FRSHE services reported that they found the forum very valuable, and advised FAHCSIA that another opportunity to come together would be of great benefit to the development of their programs and their individual practice.

The evaluation team from Urbis also attended the forum, and made a brief presentation and facilitated a short discussion about action research methods. Again, participants indicated they would benefit from a more detailed focus on this topic.

In April 2007 the second forum was held, bringing together managers and staff from the six FRSHE pilot sites. In all eighteen people participated from services, along with two FAHCSIA Officers representing the National and the Victorian offices.

The program

In the period before the forum, the evaluation team had been providing coaching to the services in relation to the action research method promoted as part of the evaluation. The program was designed to address the key practice issues reported by services through these discussions, and to position the services to participate in the final requirements of the evaluation.

The timing and venue facilitated participants attendance at the 'African Think Tank' conference, and some FRSHE participants took advantage of this to attend selected sessions. In addition, Urbis negotiated with the Conference Organisers for FRSHE forum participants to attend a session of the conference focusing on family violence in Sudanese families. Following the session the presenters held a separate session directly with FRSHE participants to discuss their work.

Learnings to date

The opening session of the forum was designed to draw on participants' key areas of interest, drawn from their action research focus. Four topics were proposed and, using the 'world café' method, each group had the opportunity to share their learning about:

1. Family work
2. Group work: from planning to running to evaluation
3. Getting in touch with communities
4. Collaborating with other agencies.

Family work

Family work was identified by participants as a critical approach to working effectively with humanitarian entrant families. This is in contrast to models of intervention which focus on the individual, and better recognises the impact of the well-being of the whole family on the health and well-being of each member.

Participants were invited to consider the principles which underpin their work with families, and their learning in relation to practical elements such as venues, to capture the challenges they had encountered in doing this work, as well as the ways in which they were achieving success.

| | |
|---|---|
| Principles for family work | Flexibility Uniqueness of each family Be curious Cultural courage Reactive → reflective → responsive Client focused Learn as you go Self-determination – let the client decide what form of support they need. Feels like 'reactive work' but goal is to be responsive. First stage is reactive; second stage is reflective, third stage is to become responsive. Flexible service delivery (different setting: schools, homes office, etc.) |
| Locations/settings | School, home |
| Challenges | Boundaries Intergenerational and gender issues impact family work Settlement issues impact relationships Relationship issues impact settlement |
| Elements of the work to achieve success | Hierarchy of needs Task-oriented (dealing with practical issues first) Casework essential for engagement of families Having all members in family counselling session Settlement → family support Brokerage, for example, buy in intensive services like speech therapy Break/bend rules of family to get in there 1:1 with men more effective – task/ practical/priority of needs Recognise roles of family members Hearing from each other Casework is essential for engagement of families Gender issues affect the way family work is delivered Men are more difficult to engage but family work is more effective if men are engaged Have brokerage available → makes family work more effective. |

Group work

All of the pilot programs include an element of group work. This again reflects the cultural context of the client group and importantly, the value to well-being of sharing with people who have had similar experiences.

The results of this discussion reflect the central challenges and lessons in this area of work, particularly the length of time required to really engage with clients and engage clients in a group and the resource demands of preparing and running a group well. However, a number of elements were identified that have proved effective in group work programs.

| | |
|---|--|
| Principles for group work | <ul style="list-style-type: none"> Consult/plan/consult/offer Think outside the square Slow paced Expect change! |
| Locations/settings | <ul style="list-style-type: none"> Joining existing group – think outside the square Went into elder woman's home to run group, trust and comfort Flexible service. Home visits important. Go where people are – schools School based |
| Challenges | <ul style="list-style-type: none"> Logistics Maintaining participation People come late - do we wait or start? Promoting group/project. Get more connected to community. |
| Elements of the work to achieve success | <ul style="list-style-type: none"> Narrative approach Exchange within group Early intervention programs into schools Involvement of Elders Common issues approach Focus on survival skills for healthy families Limit number of weeks Each week can be in isolation Ownership of group rules Creative responsive Cooking group – metaphor → ingredients for healthy family Use of stages: Stage 1: Consulting target communities – what works; Stage 2: Planning; taking necessary actions (depending on consultation); learning Tool of NORMALISATION – not suffering alone. Replicate groups so that those who couldn't get there can come. Interactive psycho-education School whole school emotional intelligence over 3 terms – managing emotions Common issue put them together - ask their concerns Consulting community Focus on family wellness; parents in charge Narrative approach (story) (who are we) WISE MAN Very slow approach to keep group with me Slow and careful: Mothers and daughters to see what they want, how to get into workforce Concrete, targeted See the benefit - inspire them! Clear theme Lead times with reminders. |

Getting in touch with communities

A particular challenge for services, including specialist services such as QPASST and Migrant Resource Centres, is gaining access to newer communities to offer services. This is a critical lesson for future service provision, in that all new communities will require a planned, resourced, and well-paced engagement process before the 'real work' can begin, and even then, engagement will take time. The methods being developed by services are innovative and proving effective. One particular example of a fortnightly column in a community language newspaper was reported to be proving an effective way of engaging in opportunistic conversation by the worker while out and about in their community, covering topics of family life, roles within families and other key issues.

| | |
|---|--|
| Challenges | <ul style="list-style-type: none"> Phone calls and initial contact Lack of connection to draw on Blurred boundaries for workers from small/new communities Time and money expended with no obvious benefit seen in short – medium term |
| Elements of the work to achieve success | <ul style="list-style-type: none"> Dinner invites Drawing on existing knowledge and connections Practical programs that show value of the service Networking through any activity as well as existing networks – get involved, be seen Invite 2-3 representatives – don't single out Collaboration - partner with ethno-specific workers, with schools children from community attend Information sharing Support work with a database of contacts – not relying on an individual's knowledge Use radio as a medium of engagement – promote, promote, promote Use ethnic press in promoting programs and activities, profiling self and issues |

Collaborating with other agencies

The success of FRSHE services lies in part in achieving and maintaining effective relationships with a broad network of services. This discussion focused on the positive aspects of working collaboratively, and the ways in which services thought they were achieving this. Three elements were particularly noted as being rewarding to workers: the opportunity to raise awareness both broadly and on specific issues while networking; the skill sharing for FRSHE people and for those in the network who were willing to engage; and the ongoing positive relationships which are being built.

The challenges were also discussed, with the central issue being the misperception by mainstream services of what FRSHE services do. In the immediate sense this leads to inappropriate referrals and running around for clients. The key lesson for services is that time and resources need to be invested in engaging and staying engaged with the broad networks required to support families.

| Positives | Challenges |
|---|--|
| Information sharing Invitation Dovetailing with pre-existing service Audience Complementary services Value-add combination Flexibility with other providers Community support Novel, curiosity, new model, less competitiveness: PILOT Agency visit Opportunities, raising awareness* Pilot and establish service Up-skilling on both sides* Working in partnership environment Strong connections, plan agenda, organising activities Training: cross-cultural. Networking Improved service Building ongoing relationships* Developing continuous Identification of unique services ie tutoring Monthly agency visits – drip feed Refresher annually key services Centrelink as hub * = Significant learning | Connecting with other providers How/when to collaborate Staff turnover!! Lack of experience and awareness for new staff Differences in service provision Time per client Specialist needs Misperception by the mainstream - objectives of service not clearly understood by mainstream ie "crisis service"* Staff turn-over restart/reskill/inform* Constant – time consuming* Appropriate referrals – overstretched services A shared client having multiple workers in another agency with no coordination. |

From learning to advice

This session focused on translating the services learnings into advice that will help mainstream family relationship services to work with humanitarian entrant families. Working in three small groups the task was to design a one-day training session for mainstream FRSP workers. This method was a way of capturing the participants' views of the key skills and knowledge central to doing their work well.

Investing time in engaging with community Elders over time, for example attending events and showing interest in matters other than their own particular program, and gathering and building on ideas from communities are all important. A key realisation is that with these families, the essential ingredient of trust was most likely to be achieved through first offering practical help. Only once this trust has been established can any more therapeutic work be offered.

The single most identified 'pre condition' to being effective in cross cultural work was cultural competence - achieved, in part, through cross cultural training, which includes being aware of one's own culture and how this is interpreted by clients. One of the challenges for participants in this exercise, however, was breaking down what exactly is involved in 'cross-cultural training'. Ultimately two levels were identified - the general point of educating people that their's is not the only frame of reference, as well as ethno-specific knowledge and skill in supporting refugees.

In developing programs and approaches, the resource considerations that services encourage others to consider include having a cross-cultural consultant on the staff team, as well as people with group and individual skills. Knowing who the Elders are in each community is critical, enlisting their help and drawing on the pre-existing structures within communities are all ways of building relationships that become entrees to more community members.

Collated ideas for a training program

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|-----------|--|
| Outcomes | <p>Challenge/change values and traditional thinking about HE families and new communities in general</p> <p>Dispel myths and assumptions about different cultures</p> <p>Develop FRSHE specific skills:</p> <p>Knowledge</p> <p>Differences</p> <p>Communication (micro skills)</p> |
| Approach | <p>Use knowledgeable and skilled workers – workers suitably qualified, aware of issues and being open to new values and beliefs</p> <p>Experiential exercises</p> <p>Start by giving instructions in a non-familiar language</p> <p>Actual stories, cultural immersion</p> <p>Awareness of gender sensitivities</p> |
| Skills | <p>Establishing trust in small community</p> <p>Link</p> <p>Connection and Elder or credible person</p> <p>Introduction</p> <p>Other agencies, family, friends</p> <p>Using ethno-specific communication techniques</p> <p>Reflective listening</p> <p>Summarising</p> <p>Developing specific language for each group</p> <p>Metaphors</p> <p>Labels/titles</p> <p>Complementing service provision and environment</p> <p>Logistics of service provision</p> <p>Venue accessibility</p> <p>Timing</p> <p>Applying general counselling skills with humanitarian entrant families</p> <p>Reflective listening</p> <p>Summarising</p> <p>Using culturally relevant metaphors</p> <p>Using culturally appropriate language to deliver information to communities.</p> |
| Knowledge | <p>Knowledge of impact of torture and trauma</p> <p>Impacts and stressors for individuals and families</p> <p>Available services to support clients (settlement services)</p> <p>Understanding developmental stages that have been affected by refugee experience</p> <p>Diverse refugee experience – i.e. in camps, fleeing</p> <p>Knowledge about differences; using ethno-specific communication techniques</p> <p>Support structure for humanitarian entrants, for example, bilingual workers, community leaders</p> <p>Traditional values, family structure, roles, conditions they came from, ideas of who they are</p> <p>Norms, definition of family, collective vs. individual</p> <p>Roles, decision-making, fluidity of cultures</p> <p>Complexity of issues</p> <p>Understanding of resettlement experience</p> <p>Within group differences – subgroups → influenced by education, social status</p> <p>Languages spoken, educational backgrounds, religions</p> <p>Visas</p> <p>Settlement needs and issues and other specialist settlement services.</p> |

Building on the skill base

Through the group work sessions it was evident that a great deal of the effective work with humanitarian entrant clients is drawing on existing good practice in any helping relationship. For example there are the usual set of micro skills required to engage, assess, understand perspective, build alliance, and provide support. Pilot sites identified the following list of skills and knowledge they utilise to do their work, and the supports they draw on from their agencies.

| Skills and attributes of workers | Knowledge/approach | Agency support |
|---|---|--|
| Patience Flexibility Curiosity Working with interpreters Appreciation for a range of world views Using one's 'gut instincts' Casework skills Handling 'chaos'. | Reflective practice Entering into the 'world' of clients Awareness of self-care needs Awareness of different models of counselling and group work Holistic approach Know your boundaries and limitations Creatively working with families and groups. | Asking for supervision, support when needed Realistic about expectations of goals and progress Being realistic about objectives Tapping into other resources. |

Programs

In addition to drawing on existing methods of engagement and program design, pilot sites have developed and refined their approaches in response to the particular characteristics of the client groups.

The pilot sites identified the following approaches in a session focused on the programs or components of programs they would consider recommending to other services working with humanitarian entrant families:

- Teaching rights and responsibilities to men and women together
- Training the leaders of the groups – leadership training
- Taking on the really difficult issues of domestic violence and child safety
- Parenting
- Gender specific programs
- Language specific programs
- Interpreting western values and how they impact on humanitarian entrants and then maintaining dialogue regarding this issue.

Specific programs that have been developed by FRSHE services include:

- Family Wellness
- Men Around the Fire Discussion
- Parenting Across Cultures
- Healthy Relationships.

Working within and across cultures

A discussion session was led by the facilitators, and included a short presentation by Joanna Zubrzycki. These are the notes from the presentation.

In order to work within and across cultures, workers need to incorporate an understanding of their own cultural identity and how this interacts with their practice. An acknowledgement of the influence of the dominant 'white' culture on agency policies, procedures and expectations of workers, clients and communities and what this means in practice is an important area for consideration.

Research (Zubrzycki, 2004, 2006) conducted with Australian social workers from different cultural backgrounds indicates that:

The self is a powerful influence on practice

Personal identity (gender, cultural identity, class) family history, personal experiences of parenting, socialisation, educational background, experiences of migration etc. All of these factors can influence different aspects of practice including:

- motivation to work with people from same or different cultural groups
- how this work is experienced by the worker; (impact on the worker)
- relationships with clients/communities
- relationships with co-workers.

For workers from CALD (Culturally and Linguistically Diverse) backgrounds there appeared to be more dilemmas about how the self is used in practice. They are more conscious of their 'different' cultural identity and this was often expressed as:

- Being an 'expert' on their own culture. This can be experienced as affirming (clear area of knowing and competence), daunting (worker is aware of the diversity of cultural experiences including their own), distancing (preferred to work with others so that they were not compromised personally or professionally)
- The expert label and expectation at times means that CALD workers can find it hard to acknowledge uncertainty and the need for professional development in their practice
- Feeling affirmed meant that workers could contribute meaningfully in the development of their practice and the agency's services. However this could also mean locating themselves at the forefront of advocating for agency change where the worker identifies practices that are not culturally appropriate
- It can be important for CALD workers to work with a range of client and community groups so that they are not restricted in the development of their experience and skills.

Personal knowledge and experiences combine with professional knowledge to inform practice.

- Can be difficult to discern which areas of knowledge are used and are effective at any one time
- The combination of different forms of knowledge is sometimes discussed openly with co-workers and/or clients. This can take the form of self-disclosure where the worker (consciously or unconsciously) shares their personal experiences in practice with their client group
- Important for workers to be aware of (through supervision, reflection) and to acknowledge what areas of knowledge they are using in practice. This can inform areas of professional development that need to be developed and challenged

- Application of personal knowledge in practice, can lead to increased frustration for the worker as the client/community utilise the knowledge in ways that are unexpected or contrary to the worker's personal experiences, for example, knowledge about parenting.

Personal and professional boundary issues for bicultural workers

Working with communities with whom workers share a cultural identity can lead to the following challenges in relation to maintaining clear personal and professional boundaries:

- Communities can expect the worker to be constantly available to them
- The need to be available can be linked to expectations that the worker can provide a comprehensive service, beyond workers role, knowledge and skills
- Community may not want a worker from the same cultural background to work with them – due to issues of shame, privacy etc
- Can be difficult for a worker to maintain a healthy distance from their work as they confront on a regular basis the active use of self, through the expectations of others about their “expertise” and the community's ownership of their work
- The workers can also feel like they are constantly ‘fighting for’ their community against different aspects of the dominant service delivery culture and this can be very wearing, daunting and complex.

Self-care when working within and across cultures can include:

- Finding appropriate forums – peer, group or individual supervision so that practice issues can be shared and developed
- Engaging in reflective practice which can facilitate the development of some insight about the areas of practice that are particularly challenging as well as the breakthroughs and moments of creativity
- Participation in ongoing professional education about the diversity of cultures
- Discussions with the community so that knowledge and practices can be collaboratively developed
- Gaining support/network with different workers in agencies about areas of change that are being identified by workers and communities.

Supportive cross-cultural workforce retention and recruitment practices:

- Organisations which provide more learning and development opportunities tend to have greater levels of staff retention
- Organisations which provide adequate supervision, regular staff meetings, involvement in decision making and greater support, tend to have higher levels of staff retention
- Staff from a specific cultural background may not appreciate being targeted to work particularly with people with a disability from the same background, especially if this involves regular interpreting and translation duties.

Conclusion

Services reported that the forums have been a valuable support to developing their models, sharing learning and having the opportunity to reflect on what they are doing in their own practice.

Notwithstanding that the primary focus of this forum was on practice issues and learning, with an emphasis on the transferability of this learning to other settings, for example, generalist FRSP providers, there was an important ‘higher level’ thread running through many of the discussions. This pertained to the timeliness of relationship support services to humanitarian entrant families.

Prevailing wisdom generally has it that until 'settlement' issues are addressed (housing, income, work, language, school etc) families would not be open to, or indeed need, family support or family relationship support. On this basis, the pathway for families was thought to be through settlement support, followed in a linear fashion to family relationship services, if required.

Underpinning the discussions at this forum seemed to be the question 'are we coming in too late?', and whether there is, in fact, a place for 'early intervention' as part and parcel of the settlement support. Now that the risks for particular communities are better understood, for example, the rates of family break down post arrival, a well-designed education and support program would seem a valid approach.

The forum did not allow for the broad testing of this concept, and it is one the evaluators will take forward into the evaluation discussions.

Program

Facilitators: Claire Grealy, Alison Wallace and Joanna Zubrzycki

Day one: Wednesday 11th April 2007

| | | |
|-----------------|--|---|
| 9.45am | Tea and coffee available | Purpose and approach to session |
| 10.00am | Welcome and introductions | Roxanne Paton FAHCSIA |
| 10.15 – 12.30pm | Approaches we are using and the learnings so far: | Using the world café method of rotating through discussion topics, participants will focus on learning to date about each phase of their work with communities, families and individuals. |
| Session one | <ul style="list-style-type: none"> - Getting in touch with communities - Collaborative work with other agencies - Group work: from planning to running to evaluation - Family work | |
| 12.30-1.00 | Lunch | |
| 1.00 – 2.00pm | From learning to advice: what have we learnt that will help mainstream family relationship services work with humanitarian entrant families? | Reviewing the learnings from the previous session, this session will begin to focus participants on their role in developing advice for mainstream family relationship services. |
| Session two | | |
| 2.00 – 2.15pm | Afternoon tea | |
| 2.15 – 2.45pm | Responsibilities and realities of being a pilot site: what's it been like for us? | The purpose of this session is to reflect on the experience of being a pilot site in this initiative |
| Session three | | |
| 2.45 – 3.45pm | Working within and across cultures, with a focus on: | Joanna will bring some of her research to the discussion, and then explore with participants their experience and learning of working |
| | <ul style="list-style-type: none"> - self-care for workers - negotiating realistic | |

boundaries with communities within and across cultural contexts.
and with services

| | |
|--------|---|
| 3.45pm | Close day one of Forum |
| 4.00pm | African Resettlement in Australia 2007: Conference Cultural Festival |

Day two: Thursday 12th April 2007

| | | |
|-----------------|--|---|
| 9.45am | Tea and coffee available | Purpose and approach to session |
| 10.00am | Welcome and Introductions | |
| 10.15 – 12.00pm | Action Research: working session on AR questions, progress on cycles, and recording the learning | Participants will be working on their site's AR questions, developing further where required, and documenting their learning with support of the evaluation team |
| Session four | | |
| 12.00-12.30 | Lunch | |
| 12.30 – 1.15pm | Service development from here: | This is a reflective session where participants will consider what they have learnt over the two days and what they will be taking back to their service, team and community. |
| Session five | <ul style="list-style-type: none"> - briefing our colleagues - strengthening our model - strengthening partner agency relationships - connecting with other pilot sites. | |
| 1.15pm | Walk to Conference session | |
| 1.30 – 3.00pm | Conference Session: Family Violence | Participants have been invited to attend this session of the Conference. It is an interactive panel session. |
| 3.00 – 3.30pm | Discussion with Maria Dimopoulos and Samia Baho (Conference session presenters) | The session facilitators will meet with FRSHE participants to discuss the session. |