

HOPE & HEALING

Queensland's trauma-informed
framework to support foster
carers in their caring work with
children, young people and their
families

Release Version 1.0 May 2022

Framework initially developed in 2015 through a partnership between Queensland Department of Child Safety, Youth and Women; PeakCare Queensland Inc; Encompass Family and Community Pty Ltd; and Paul Testro Consulting with a focus on Residential Care. This version has been adapted for use in Foster Care arrangements.

Contents

1	THE HOPE AND HEALING FRAMEWORK.....	4
	Introduction	4
2	VISION	4
3	PRINCIPLES	4
	3.1 Fundamentals of care	7
	3.2 Focus of a therapeutic approach	10
	3.3 Future orientation	13
4	THE PHASES OF CARE	14
	4.1 Transition into the foster home	14
	4.2 Stabilising.....	14
	4.3 Strengthening connections	15
	4.4 Transition to the future.....	15
5	THE DOMAINS OF CARE	16
	5.1 The child or young person	17
	5.2 The child or young person’s connections	18
	5.3 The foster carers and their home.....	18
	5.4 The foster care support service provider	19
	5.5 The wider service system	19
6	CONCLUSION.....	21
7	References.....	21

1 THE HOPE AND HEALING FRAMEWORK

Introduction

The *Hope and Healing Framework - Queensland's trauma-informed framework to support foster carers in their caring work with children, young people and their families (Hope and Healing Framework for Foster Care)* sets out the foundation for supporting children and young people in foster care in a way that understands and responds to trauma-related needs and other complex needs and is therapeutic in approach.

The framework recognises that foster carers, in providing care for a child, are uniquely positioned to build authentic, positive, and safe relationships and significantly impact on a child's healing and recovery from trauma.

For the purposes of this framework, the concept of trauma is inclusive of a range of factors that can contribute to grief and loss, disrupted attachment and other deleterious developmental impacts.

This framework is adapted from the [Hope and Healing Framework for Residential Care](#) (2015) and is consistent with the wider [Strengthening Families Protecting Children Framework for Practice](#) (Department of Communities, Child Safety and Disability Services, 2014) which applies to all work with children and young people in care and their families.

2 VISION

Children and young people in foster care are safe, are connected to friends, family, community and culture, and are supported towards realising their hopes, dreams, and full potential.

3 PRINCIPLES

A trauma-informed therapeutic framework is underpinned by these common practice principles, adapted from the *Standards of Care* and the *Charter of Rights*, which are relevant to all cohorts of children and young people in care. The practical application of these principles shapes the way in which foster care is defined and understood:

- Care for the child or young person
 - is individualised, taking account of age, stages of development and cognitive functioning and abilities
 - is relationship-based supporting relationships with the child's family and community
 - promotes age and developmentally appropriate engagement in decision making and life choices
 - occurs within the context of the history and nature of their relationships with family members, collaborates to the extent possible with family members for achievement of their leaving care goals
 - is culturally safe and culturally proficient:
 - supports Aboriginal and Torres Strait Islander cultural identities
 - supports culturally and linguistically diverse identities

- supports children and young people who are diverse in gender and sexual orientation
- understands and responds to behaviour as a form of communication
- provides unconditional commitment (persistent allegiance)
- understands that trauma can occur in children and young people of all ages, including infants
- actively considers the impact of intergenerational trauma
- foster care recognises that caring for other people's children differs from parenting your own children.

NEEDS-INFORMED CARE

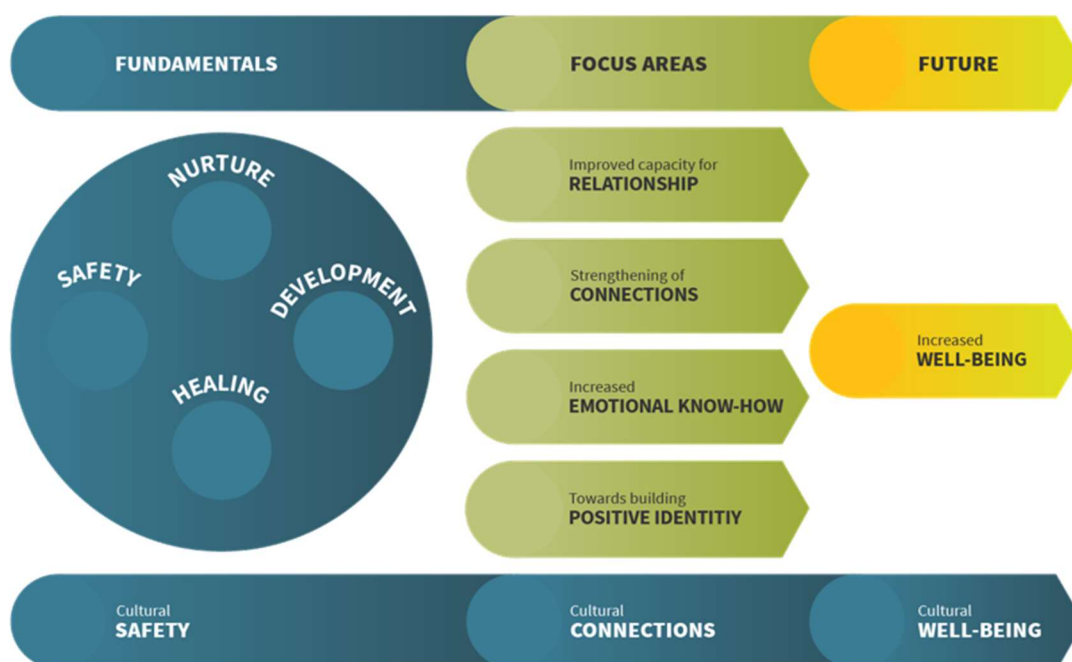


Diagram 1: Needs-informed care

The needs-informed approach, illustrated above, of *Hope and Healing Framework for Foster Care* incorporates:

- **Fundamentals** of care – applied as part of everyday care throughout a child or young person’s time in foster care – whether they have a short or extended experience
- **Focus areas** – core elements of a therapeutic approach
- **Future orientation** – a child centred approach which is responsive to the individual needs of children and young people which change over time and focuses on their current and future safety, wellbeing and life opportunities.

The components of the framework relate to the needs of children and young people and how care is best provided in responding to their needs. They are inter-related – some are pre-requisites for others (for example, safety is a foundational component of the framework and attention to cultural needs is embedded throughout) but meeting a child or young person’s needs in relation to any one of these components will have positive flow-on impacts in other areas. While a child or young person is in care some fundamental needs and focus areas may take precedence over others at different times; Diagram 1 therefore represents an ongoing integrated approach rather than phases of care.

3.1 Fundamentals of care

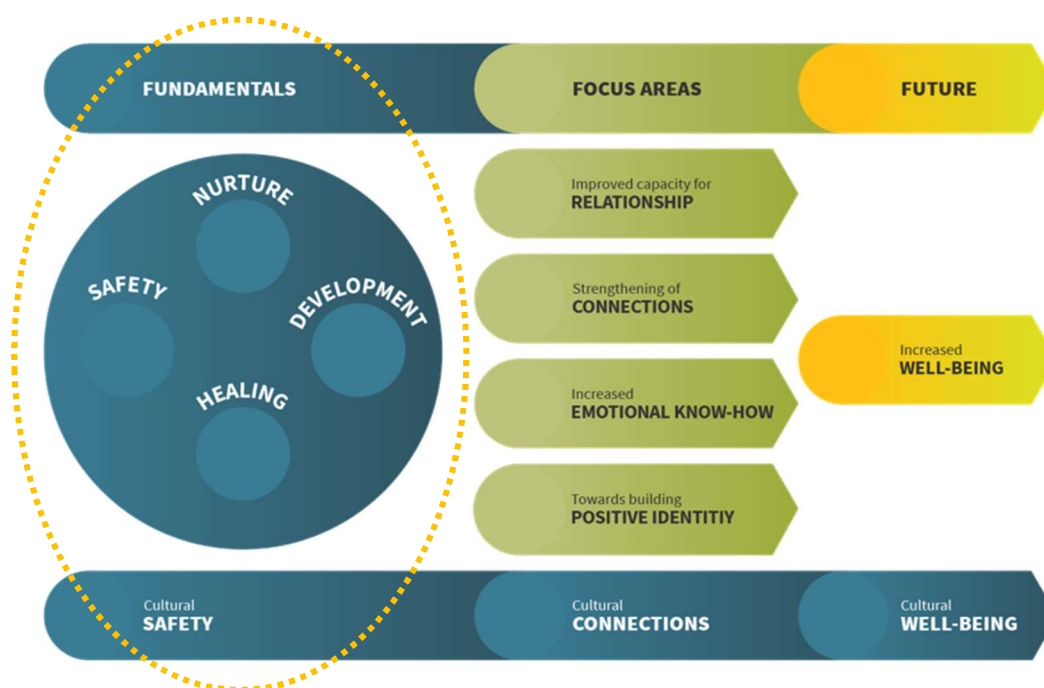


Diagram 2: Fundamentals of Care

Foster carers and their support workers, in collaboration with families and the children and young people themselves must attend to the fundamental needs of children and young people for:

- **Safety**
- **Nurturance**
- **Development**
- **Healing**

Safety is the necessary foundation or base. It incorporates the overarching need for cultural safety.

Physical, emotional, and cultural safety are pre-requisites to all other efforts to support the child or young person. Physical safety includes being free of actual and threatened harm. Stability and trusting relationships are core aspects of emotional safety.

Cultural safety requires that foster carers and workers supporting children and young people move beyond cultural awareness to become culturally responsive to the needs of children and young people of diverse cultures and, in particular, Aboriginal and Torres Strait Islander children and young people, to create a physical and inter-personal environment which is welcoming and respectful of each person's culture (VACCA 2008). Key to cultural safety is connection to family, kin, community, and country.

The everyday care of children and young people requires attention to fundamental needs for *Nurture*, *Development*, and *Healing*. These fundamental elements inform all interactions with children and young people during all facets of care, on an everyday basis, throughout their time in care, whether it be short or extended.

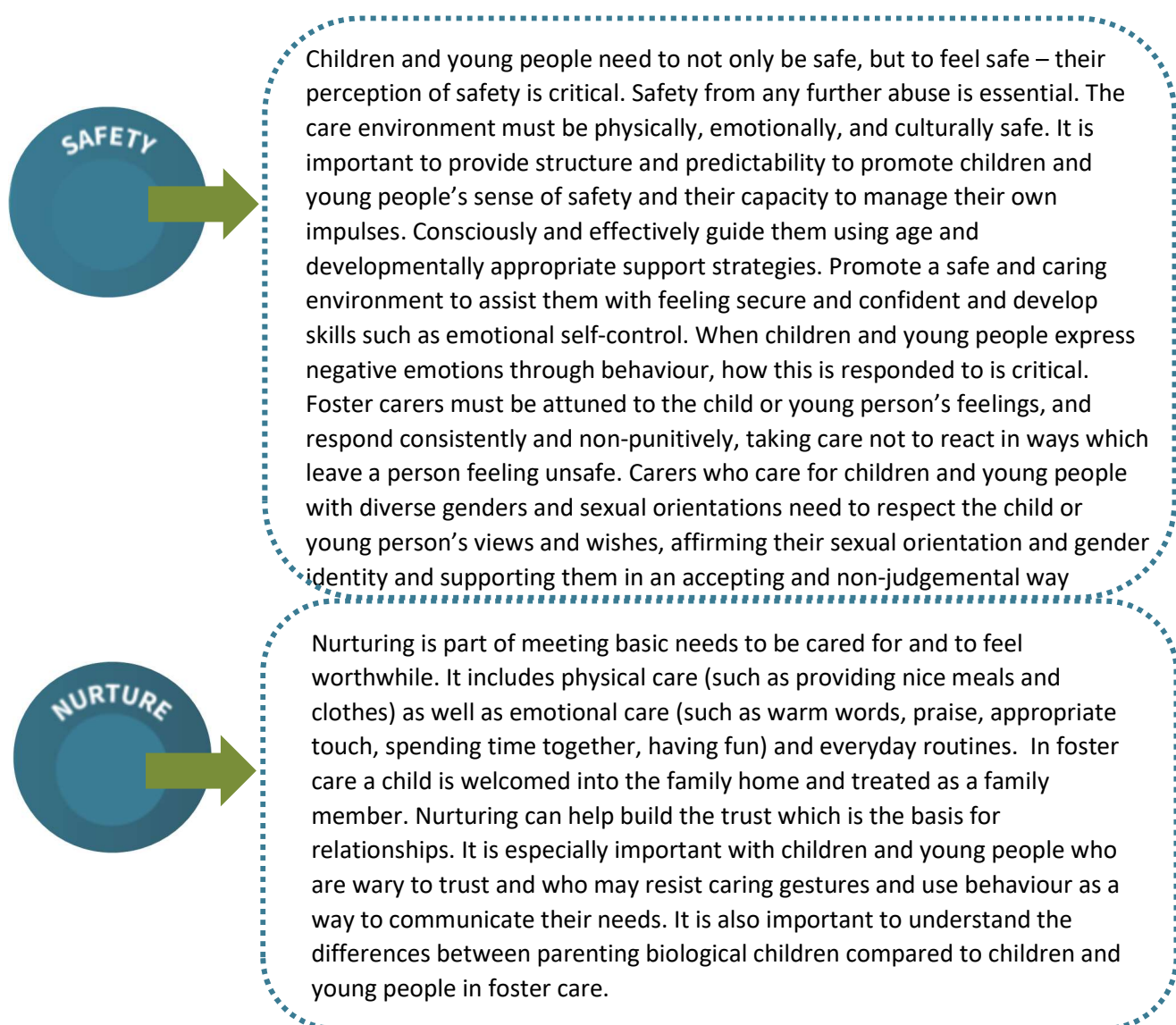
Nurture is meeting needs for nurturing relationships (being understood and accepted) and physical care (healthy food, clothing, being 'looked after,' having 'things and experiences similar with their peers, feeling at home).

Development is attention to developmental needs relevant to each child or young person's age, developmental stage, and capacity (including educational opportunity as well as physical and

emotional development). Progression through developmental stages supports children and young people in acquiring new skills, knowledge, and capacity to navigate their world. A child's developmental age may not correspond to their chronological age and foster carers need to be aware of the impact of trauma on a child's development and why a child may be more advanced or delayed in various aspects of their development. Foster carers must also understand that trauma can impact children of all ages including infants.

Healing is being attuned to the impacts for all children and young people of pre-care and in-care trauma, grief, loss, and attachment issues, and meeting the more intensive needs of some children and young people. Healing occurs in the context of restorative relationships.

Figure 1: Fundamentals of Caring for and Working with Children and Young People





Children and young people impacted by trauma frequently have delays in different areas of their development. Their functioning may not correspond to their age or be at the same stage for each developmental domain. In some areas, further development will not occur until earlier functional stages are achieved. Understanding this, and the individual development needs of the child or young person, is essential to meet their needs and/or provide them with tailored opportunities to promote development. Where an individual's development has been blown off-course, opportunities which may provide turning-points are important. 'Small incidents can make a big difference. A positive relationship, even if short-lived, may prove to be a turning point' (Gilligan 2009). Attention to development includes the specific needs of children and young people with disabilities and the educational needs of all.



All children and young people in care have been impacted by trauma, disrupted attachment and/or loss. For Aboriginal and Torres Strait Islander children and young people, inter-generational trauma and loss compound this. All require support to recognise and make sense of their feelings, talk about them, and learn to manage them in positive ways. Healing is not a smooth process. It is multi-faceted, built on the foundation of restorative relationships and gaining hope for the future. It includes consistently responding to even very challenging behaviour in ways which provide safety and limits at the same time as compassion and acceptance, understanding behaviour as seeking attachment. For children and young people with significant trauma-related needs, integrating specialist therapeutic intervention with everyday care leads to 'hope and healing'.

3.2 Focus of a therapeutic approach

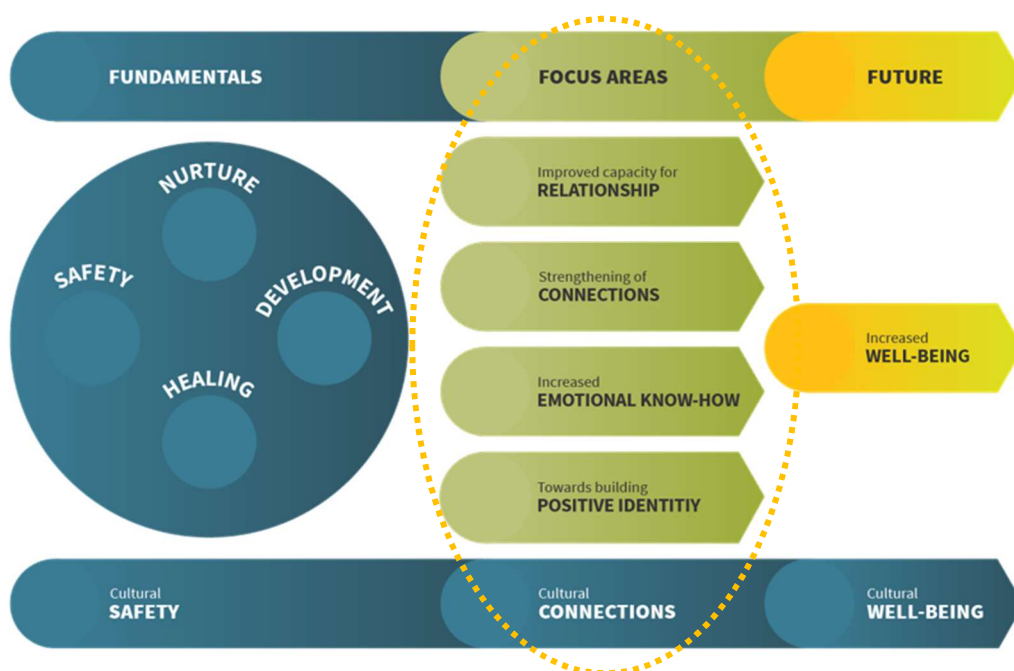


Diagram 3: Focus of a Therapeutic Approach

Underpinned by care consistent with meeting these fundamental needs, for all children and young people a therapeutic approach incorporates attention to the four focus areas of:

Relationship

Connections

Emotional Know-how

Positive Identity

With the fundamentals in place, these are the focus areas for practice that enable children and young people who have experienced trauma to move towards increased well-being.

In a therapeutic approach, everyday care is purposeful and individualised in assisting the development of children and young people in these areas:

Relationship refers to a child or young person's capacity to experience reciprocal relationships, modelled on foster carers' efforts to work through relationship. Elements of relationship are trust, empathy, positive regard, reliability, and emotional care.

Connections create a sense of belonging and underpin the development of identity. Connections refer to feeling part of family, kin, and community, as well as having a strong cultural identity. For Aboriginal and Torres Strait Islander children and young people a connection to Country is also important.

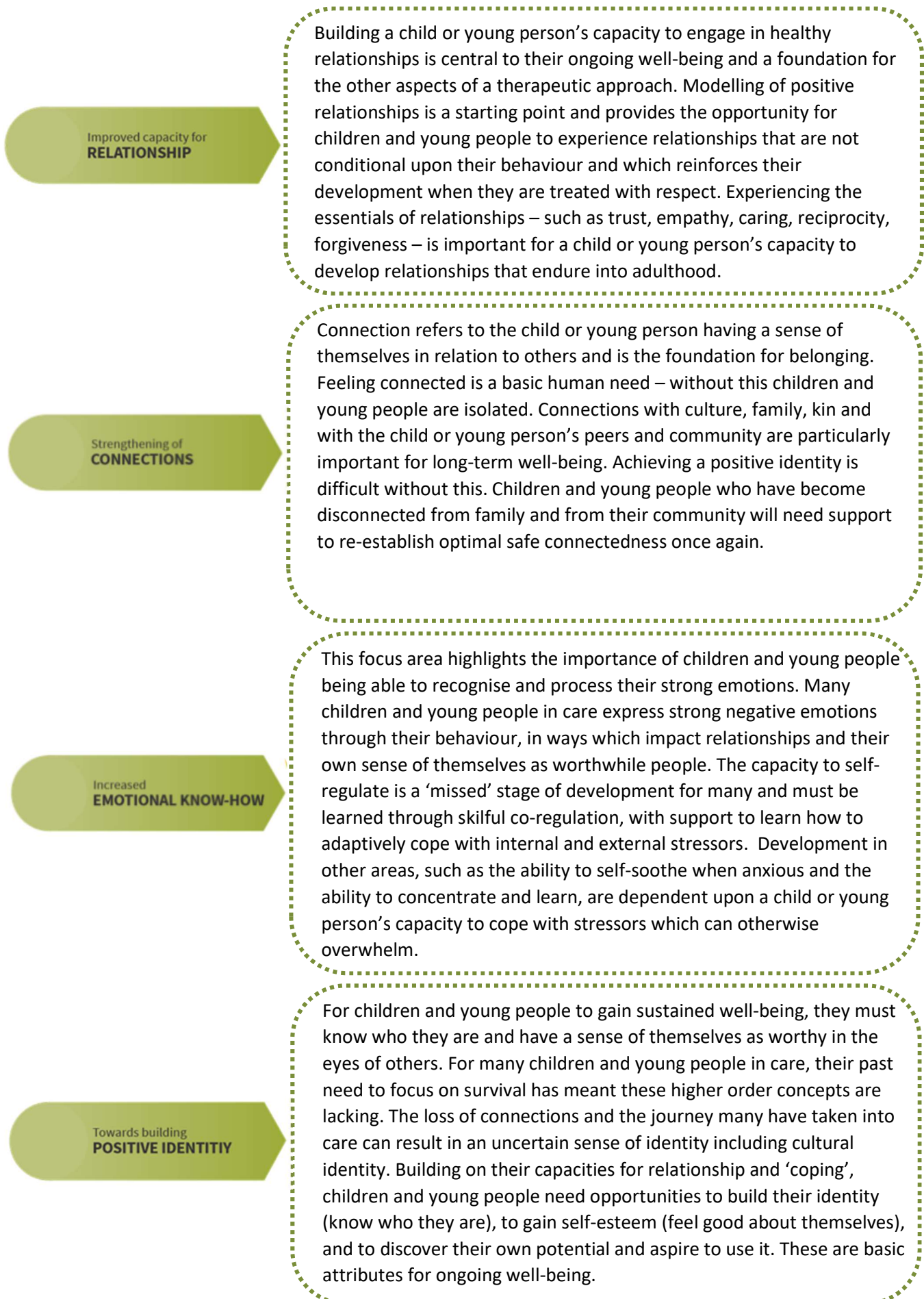
Emotional Know-how is necessary for a child or young person's social and emotional wellbeing, age-appropriate behaviour, and higher order learning. It enables children and young people to gain mastery over how they cope with the emotions and psychological impacts of trauma and other causes of stress. In practice, the concept incorporates supporting children and young people to learn new skills to cope with internal and external stressors.

Positive identity is a sense of self and feelings of self-worth. It includes children and young people building a sense of competence, gaining mastery in areas of interest to them, and belief in their own capacity to realise their aspirations.

These focus areas are inter-related. Working from the basis of relationship is central. Support to develop healthy relationships helps a child or young person to feel safe, build trust and belonging, and to feel worthy, which in turn enables strong connections to family, kin and community and culture. All of these factors help contribute to developing positive identity.

A child or young person's readiness to build capacity in each of these areas depends upon incremental and sequential development (for example, a sense of security – emotional safety – precedes increased capacity for emotional self-regulation). Foster carers must be aware of the individual's age- and development stage readiness in each of these focus areas to support the child or young person through each area and how best to support the child or young person's development through each.

Figure 2: Focus of a therapeutic approach



3.3 Future orientation

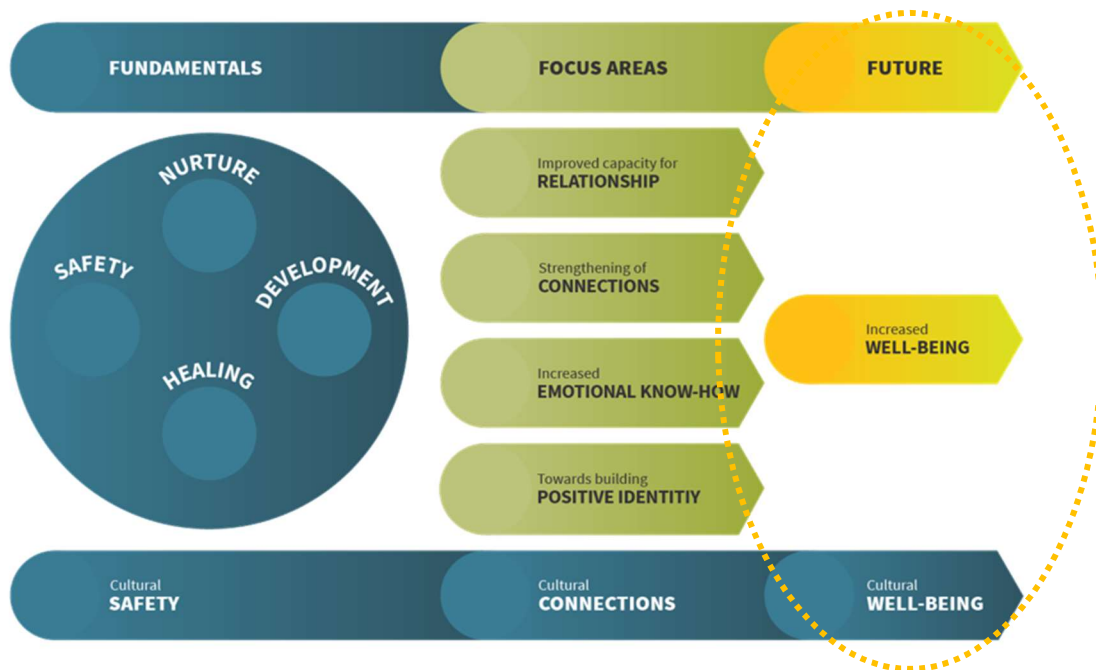


Diagram 4: Future Orientation

A therapeutic approach is goal oriented in working towards the increased wellbeing of children and young people through identifying windows of opportunity. This includes opportunities, relevant to their age and capabilities, to develop their potential through educational and other aspirational goals and providing appropriate opportunities to develop their skills across all domains.

A future orientation considers the possible next steps of the child or young person's life journey according to their case plan. It attends to the transitions between arrangements for their care, to reunification, and to independence. A future oriented approach is relevant no matter the length of time they have been living away from their parent/s' or family, or even if an individual's time in care is short. A future oriented approach includes an understanding that most children and young people in care will reconnect with their family in some way in the future, whether this be during their care experience or following it. Being a future oriented foster carer includes working in partnership with support workers to maintain and strengthen the existing connections, where it is positive and safe for the child or young person to do so. Every child and young person's positive future is built on incremental positive steps.

4 THE PHASES OF CARE

A trauma-informed therapeutic approach is always underpinned by the components of needs-informed care outlined above, but the practical application and emphasis of each component varies at different phases of a child or young person's time in care. These journeys vary – for some living in care is a brief experience; for others it will span years and different settings. Throughout their journey, a focus on transitions of all types is important, supporting children and young people to deal with the new and with uncertainty. For some children and young people living with significant cognitive impairments, their developmental capacity is a core factor.

These phases are not discrete or definitive, nor are they linear – healing occurs throughout a child or young person's time in care and multiple transitions may occur, so that the phases overlap and may be more circular than linear as they take steps towards gaining mastery while also sometimes regressing. The 'phases' represent a way of conceptualising the changing emphases of healing-based work with children and young people as they recover from trauma and disruption and move forward. The four core overlapping phases for this framework are as outlined below.

4.1 Transition into the foster home

- *Therapeutic focus: establishing safety*

The child or young person is welcomed into the home and helped to feel a sense of belonging in this new environment. Structure, reliability, and consistency are important to engender a sense of safety; testing of boundaries is part of testing safety, while fear and a lack of trust in adults may underpin particularly challenging behaviour (CCYP 2013). Foster carers should provide a safe environment for the expression and exploration of intense emotions without fear of retribution, when children and young people are yet unable to manage these feelings. The work of building relationships commences. Information about individual needs, strengths and aspirations is gathered through discussions with support workers and the child or young person

Routines are established and where possible, positive and appropriate, are kept consistent with the routines the child or young person is already familiar with to help establish their sense of safety and familiarity in the new surroundings.

4.2 Stabilising

- *Therapeutic focus: relationship, stabilisation, developing emotional know-how*

The child or young person is supported to recognise and understand emotions and to gradually make choices (where developmentally and age-appropriate) about the way in which they express these feelings. Relationship is core – for healing to take place, they must experience feeling cared about and trust that they will be physically and emotionally safe while dealing with trauma-related feelings. Stabilising is essential for healing, which takes time – children and young people with complex issues need this time.

Participation in predictable everyday experiences which include the routine, the challenging and fun, can be restorative. Foster carers provide reliable healthy relationships, responding to even incredibly challenging behaviour in ways which gradually strengthen the child or young person's capacity for emotional self-management.

4.3 Strengthening connections

- *Therapeutic focus: re-connection and strengthening connections, identity and belonging*

The child or young person is supported to rebuild and/or strengthen the relationships which are likely to endure throughout their lives. Identity is closely related to a sense of belonging. Where this cannot be provided by immediate family members, other wider family relationships can often be fostered, and the child or young person supported to manage optimal connections with family members who are an irremovable part of the child or young person's life irrespective of the circumstances. Connection with community and with culture are important, with the child or young person assisted to learn how to sustain such relationships as they move back into the community and on to independence. In supporting this connection for Aboriginal and Torres Strait Islander children and young people, carers and workers must ensure that protocols and cultural relationships are observed in a culturally safe and sensitive way. Where caring for children and young people with diverse genders and sexual orientations, foster carers are responsible for respecting the child or young person's views and wishes, affirming their sexual orientation and gender identity and supporting them in an accepting and non-judgemental way

4.4 Transition to the future

- *Therapeutic focus: reintegration, positive self-regard, hope and aspirations*

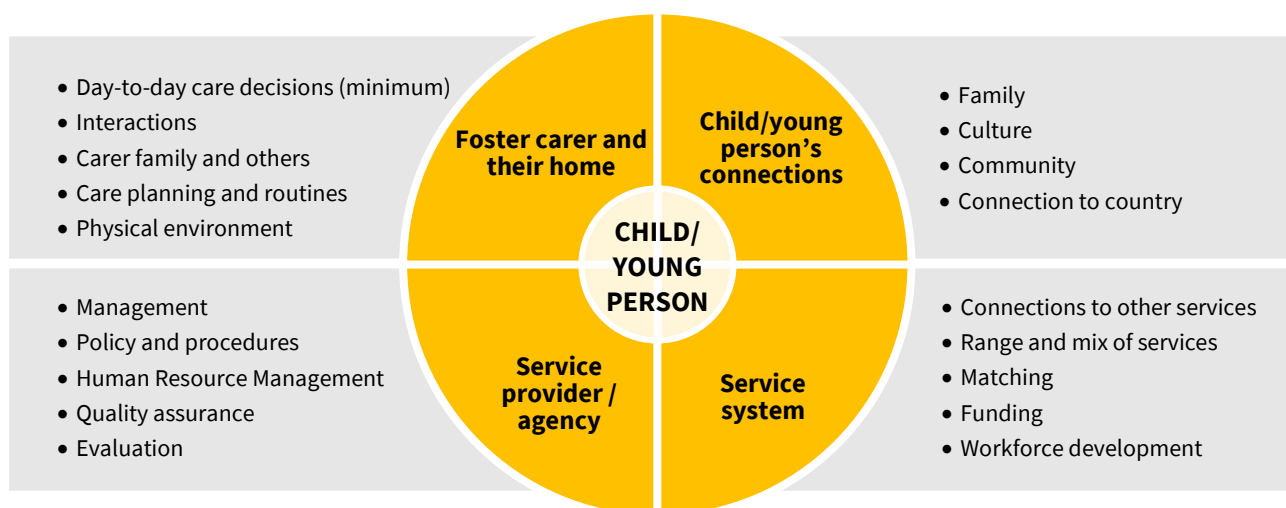
The child or young person is supported to internalise a sense of themselves as a worthwhile person with a story of their past, which is understood and integrated, as well as a story of their hopes for the future. They are coached to internalise a positive sense of self which helps them to be more resilient to life's challenges. They are supported in their reunification, their move to their next place of living, or towards independence, in a way that enables existing connections to remain in place while they establish new ones. Transition is not re-traumatising, and the young person is able to move forward with confidence.

Preparation, rituals that acknowledge loss, support to let go and emotional support to make changes are all important.

5 THE DOMAINS OF CARE

The child or young person’s experience of care is impacted by their contact with other parts of the service system involved with the child or young person and their connections while in care. These ‘domains’ are separate but inter-related – congruence within the service system is important to a child or young person’s sense of security and healing, promoting continuity of service delivery and stronger partnerships between organisations providing support services. With the child or young person as the central focus, the four domains of care all have a role in applying the framework, working together to help meet each child or young person’s needs. These domains (see *Diagram 5*) are:

- **The foster carer and their home** including day to day care, interactions between children and young people and with foster carers, care planning, purposeful routines and activities and the physical environment
- **The connections to the child or young person’s world** including family, community, culture, and country
- **The service provider/organisation** providing support to the foster carer including governance, management, policies and procedures, human resource management, quality assurance and evaluation
- **The service system** including the child or young person’s connections to other services such as health, education and the National Disability Insurance Agency, matching for best fit of care, range and mix of services, funding, workforce development and partnerships.



OVERARCHING ACROSS ACTIVITY IN EACH DOMAIN:
CULTURAL PROFICIENCY / CONGRUENCE

Diagram 5: The domains of care

5.1 The child or young person

The child or young person and their experience of care is at the centre of all efforts to ensure their safety and well-being in day-to-day care, to provide services to meet their needs, and to support their engagement with family, kin and community and the broader service system.

Children and young people in care are a diverse group in terms of their age, gender, sexuality, stage of development, abilities, and cultural background. Care is individualised whilst being attuned to the needs of other people living in the home.

Care is planned, identifies and meets needs for safety, nurturing, development, and healing. These needs are understood in the context of their family, community, culture, and country.

The rights of children and young people in care are promoted in line with the requirements of the *United Nations Convention on the Rights of the Child (1990)*, *Queensland's Human Rights Act 2019* and the *Charter of Rights for a Child in Care (Child Protection Act 1999)*. The Charter of Rights sets out what children and young people can expect from people involved in caring for them and working with them whilst they are in care:

- To be provided with a safe and stable living environment
- To be placed in care that best meets their needs and is most culturally appropriate
- To maintain relationships with their family and community
- To be consulted about, and to take part in making decisions that affect their life (having regard to their age or ability to understand), particularly decisions about where they are living, contact with their family and their health and schooling
- To be given information about decisions and plans concerning their future and personal history, having regard to their age or ability to understand
- To privacy, including, for example, in relation to their personal information
- If the young person is under the long-term guardianship of the Chief Executive, to regular review of their care arrangements
- To have access to dental, medical, and therapeutic services, necessary to meet their needs
- To have access to education appropriate to their age and development
- To have access to training opportunities and help in finding appropriate employment
- To receive appropriate help with the transition from living in care to independence including, for example, access to housing, income support, training, and education.

The right of Aboriginal and Torres Strait Islander children and young people to self-determination is also promoted in line with the *Child Protection Act 1999*.

The *Statement of Standards (Child Protection Act 1999)* for the care of children and young people also precludes the use of behaviour management techniques which include corporal punishment or punishment that humiliates, frightens, or threatens the child in a way that is likely to cause emotional harm.

The child or young person's age, capacities and stage of development are critical in determining how their rights are conveyed to them and how their participation is maximised. All have the right while in care to health needs being met, to disability services as required, and to receive learning and education appropriate to their age and developmental needs. The child or young person's

core right to be treated with respect includes age-appropriate rights to privacy and to participate in decision-making about their care, balanced with safety considerations.

5.2 The child or young person's connections

Every child or young person is part of a family and entered care from within the context of family and community. For Aboriginal and Torres Strait Islander children and young people the context of family includes that of community, culture, and country. The care service system cannot interface with the child or young person in isolation from family and community. The inclusion of connections as one of the domains of care recognises this. It recognises the necessity of foster carers and the care support team working in partnership with the child or young person's family and, where appropriate, the child or young person's independent entity where one has been nominated. Family participation as part of the safety and support network is important.

5.3 The foster carers and their home

Foster carers are volunteers who offer their care and their home to provide a safe and supportive care environment for children and young people in need. Approved foster carers are given decision making authority based on the child protection order type that the child or young person is subject to. At a minimum, foster carers are responsible for the day-to-day decisions for the child and could extend to all guardianship decision making responsibilities.

Day-to-day care decisions in the home include the way in which the child or young person's day is structured. Central to this are predictable routines that engender security, balanced with the flexibility to respond to individual needs and the need to maintain a cohesive, inclusive and supportive environment for all members of the family. Routines and activities are purposeful and responsive to the needs of different children and young people. It includes 'rituals' which reinforce belonging and requirements that reinforce good habits for individual self-care and social interaction (Holden 2009).

The foster care home is the lived experience of everyday care, including interactions with foster carers and their family members, interactions with other adults, children or young people in the foster care home, how they are 'looked after' including nourishing food, the physical surroundings in which they live, and the routines and recreational activities in which they engage. The combination of these factors provides an environment which supports healing and ensures the statement of standards for a child is met (*Child Protection Act 1999*, section 122). These factors must be congruent across foster carers and the care support team to ensure consistency and opportunities to support development. Each factor also has a part in creating a culturally safe environment, and each provides opportunity for the participation of children and young people in helping define their environment.

The physical environment plays a significant part in creating a healing environment. This includes location and use of space both internal and external to the home. It includes how furnishings, fittings and décor can influence the way in which a child or young person feels about themselves within the space and responds to the messages inherent in these environmental factors. It includes space for privacy as well as family activities, and for the security of individual belongings as well as shared items.

5.4 The foster care support service provider

The foster care support provider influences the way in which care is provided and ensures that the needs of individual children, young people and foster carers are met. The foster care support provider must comply with all relevant legislative requirements relating to care under the *Child Protection Act 1999*, including care service licensing provisions to ensure quality care consistent with the *Charter of Rights (Child Protection Act 1999)*, The Statement of Standards and the Aboriginal and Torres Strait Islander Child Placement Principle. It must also comply with relevant Department of Children, Youth Justice and Multicultural Affairs' policies, procedures, program descriptions and any related guidelines. This includes each organisation's policies and procedures, service design and development, staffing of the support program, working in collaboration with other stakeholders, ensuring quality and evaluating outcomes. It also includes a focus by the foster care support provider on recognising, valuing, responding to, and advocating for the individual needs of Foster Carers, and the children and young people in their care.

It is important that governance and management actions reflect an understanding of foster care and the delivery of foster care services to children and young people, value the role of foster care support workers in working with carers and children and young people and ensure congruence at all levels of the organisation.

5.5 The wider service system

The wider service system includes the policy and programmatic framework within which foster care services are located as part of the wider child protection system. It includes the policies and programs that together form an integrated system for meeting the needs of children and young people living in care, as contained in the *Charter of Rights (Child Protection Act 1999)*. Community-based services also play important roles in helping meet the needs of children and young people and their families, for example in providing family support and wellbeing services and cultural support programs. Service providers are also responsible as part of the wider service system to ensure the needs of the foster carers are being met so they can provide responsive care.

The wider service system directly influences which children and young people are cared for in a foster care setting, what service types are available, how the system is resourced, and how the workforce that directly provides support to foster care families and children and young people is viewed and developed.

The wider service system includes, in particular:

- The Department of Children, Youth Justice and Multicultural Affairs' role of statutory custodian/guardian and protector, funder and purchaser, and regulator
- The health system, including government and private providers of physical and mental health services in community and hospital settings
- The education system, including state, non-state and alternative schooling or learning venues
- National Disability Insurance Agency and disability provider funded through a child NDIS plan
- Community controlled organisations and other Aboriginal and Torres Strait Islander agencies
- Legal and advocacy services
- Queensland Police Service

- Youth Justice
- Office of the Public Guardian
- Agencies providing a range of support services for families
- Community networks and groups (including recreational and sport, faith-based support and services, sexual orientation, gender identity or gender expression (SOGIE) support services and interest groups).

6 CONCLUSION

An enhanced understanding of the implications of trauma on development and functioning can enable foster carers and support workers to improve their practice with severely distressed children and young people and to reduce the negative impact of trauma not only upon them but also on the adults caring for them.

Working with children and young people in care requires everyone to work together across the domains, attending to the focus areas of *relationships, connections, emotional know-how* and *positive identity* to reach the future focus of *increased wellbeing*.

This framework offers children and young people living with a foster family a consistent approach to their day-to-day care to increase well-being. In helping children and young people reach their care goals this framework will assist foster carers in navigating the challenges of supporting those in their care through trauma, creating better outcomes for all involved.

7 References

The following are references for texts referred to in this Framework.

Child Protection Act 1999 (Queensland).

Commission for Children and Young People (2013) Residential Care Matters: A resource for residential care workers, supervisors and managers caring for young people. Victorian Government: Melbourne.

Department of Communities, Child Safety and Disability Services (2014) Strengthening Families, Protecting Children Framework for Practice Foundational Elements. Queensland Government: Brisbane.

Gilligan, R. (2009) Promoting resilience: Supporting children and young people who are in care, adopted or in need). BAAF: London.

Holden, M.J. (2009) Children and Residential Care Experiences: Creating Conditions for Change. Residential Child Care Project, Cornell University. The Child Welfare League of America: Washington D.C.

United Nations Convention on the Rights of the Child (1990).

Victorian Aboriginal Child Care Agency (VACCA) (2008) Aboriginal Cultural Competence Framework. Victorian Government Department of Human Services: Melbourne.



<http://peakcare.com.au/hopehealing>