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Families with complex needs: International approaches

Supporting families with complex needs often requires funding and delivery arrangements that differ from standard social services. A continuum of interventions, including individual, targeted approaches alongside universal approaches, is required to bring about significant change at the population level.

This *In Focus* provides an overview of approaches to support families with complex needs across the United Kingdom, Australia and Canada. We discuss how complex needs are defined and briefly review some of the approaches adopted to meet the needs of vulnerable families across the three jurisdictions. Evidence on the effectiveness of approaches is presented and wider implications are discussed.

Families with complex needs: Common themes across the United Kingdom, Australia and Canada

In the jurisdictions we considered, responses to families with complex needs encompassed a range of policy initiatives, programmes, strategies and legislative approaches. For example, Wales and Victoria (Australia) have both introduced legislation to support families with complex needs. In England, Troubled Families has been introduced as a national programme and rolled out through the Local Authorities. In Australia, responses to vulnerable families vary between States. Troubled Families and Place Based Income Management both have mandatory components. In Canada, as in Australia, responses vary between provinces, with Wraparound implemented in at least seven provinces. A number of common themes emerged:

The UK, Australia and Canada all acknowledge the importance of better understanding families with complex needs

- Although there is no single definition, there is widespread agreement that families with multiple and complex needs include those experiencing addiction, disabilities, mental or physical health needs as well as those living with poverty and/or a combination of the above. These can result in both a *breadth of need* and *depth of need*⁽¹⁾. In most cases, there are entrenched unmet needs that no single agency can meet in isolation. Only when survival needs are met can providers begin to work with families on other issues as part of addressing their complex needs.

Families with complex needs have difficulty accessing and engaging with services in all three jurisdictions

- Families with complex needs are often situated within a context of social exclusion and entrenched disadvantage. Many of these families find agencies and traditional services 'hard to access'. In turn, service providers view these families as 'hard to reach'. Recruitment and engagement of families with complex needs range from 'soft entry points' such as through a play group or a trusted family or community member approaching the family, to a direct approach from a provider, through to a compulsory intervention such as addressing a child welfare matter.

Indigenous families are over-represented among families with complex needs in both Australia and Canada

- Aboriginal, Indigenous families in Australia and First Nations and Aboriginal families in Canada are over-represented in populations of families with complex needs. In both jurisdictions, addressing the needs of Indigenous families with complex needs requires: recognition of Indigenous culture and knowledge as a source of strength; capacity and capability building amongst non-government organisations; capacity building in Aboriginal communities that honours Indigenous knowledge and diversity; and, understanding the continuing impact of colonisation on Indigenous communities.

About *In Focus*

Superu's *In Focus* series is designed to inform and stimulate debate on specific social issues faced by New Zealanders. We draw on current policy, practice and research to fully explore all sides of the issue.

The United Kingdom, Australia and Canada implement a range of approaches to support families with complex needs

- Research from across these jurisdictions has found that to be effective, approaches need to be: collaborative; multi-faceted; multi-systemic; well-structured; family-centred; strengths and capability-based; culturally responsive and supportive of Indigenous and family empowerment. Effective approaches develop partnerships with families and/or communities, use trained facilitators who engender trust, and are well coordinated and sustainable over time.

Introduction

Vulnerable families are those with complex and/or multiple needs. The United Kingdom, Australia and Canada are focusing on improving the delivery of social services to families with complex needs. Although most families who access social services and support have their needs met, some families have on-going multiple and long-term needs that require many sources of support. The needs of some of these vulnerable families can be so complex that their potential to achieve in life can be jeopardised.

Our approach

We reviewed selected literature for evidence of effective approaches for families with complex needs from three jurisdictions – the United Kingdom, Australia and Canada. We searched academic databases and government websites using search terms including *'families with complex needs'*, *'families with multiple and complex needs'*, *'families with high and complex needs'*, *'families with entrenched disadvantages'*, *'vulnerable families'* and *Troubled Families*. We included peer-reviewed journal articles, government publications and other grey literature with an emphasis on academic commentary and evaluation.



Definitions of families with complex needs vary across jurisdictions

It is commonly accepted that no one agency can meet the requirements of families with complex needs. This understanding challenges policy and service provision to be more responsive to these families. Aboriginal families in Australia and First Nations and Aboriginal families in Canada bring an extra dimension to the policy and provision of support to families with complex needs. Both populations are over-represented in many factors that comprise complex needs.

There is no one definition of families with complex needs

Across the literature, families with complex needs are variously referred to as *'families with multiple and complex needs'*, *'families with high and complex needs'*, *'vulnerable families'*, *'socially excluded'*, *'hard-to-reach'*, or as families with *'entrenched disadvantages'*. Definitions often refer to a combination of health and social needs (e.g., housing) acknowledging the wide interplay of factors that can contribute to *'cumulative harm'*². In many cases, children in families with complex needs come to the attention of child welfare, education, mental health, addiction, corrections, or other services and may experience cumulative impacts.

'Children are **particularly vulnerable** to cumulative harm in families with complex and multiple needs in which the unremitting daily impact of multiple adverse circumstances and events have a **profound effect** on the child and diminish their sense of safety, stability and wellbeing'^{1, p.41}.



Families with complex needs differ but share certain characteristics

In the jurisdictions we explored, families with complex needs comprise a small but significant group of families. These families can experience entrenched disadvantage and poverty, along with multiple disabilities and health needs.

The term 'complex needs' has been used to encompass a range of issues such as multiple disadvantage, multiple disabilities, multiple adversities, multiple impairments, high support needs, dual diagnosis and complex health needs ².

Definitions of complex needs are so varied that there is always a possibility that a key factor may be omitted. The literature on families with complex needs reminds us that:

'Whatever definition of families and complex needs we decide upon, there will be the possibility that we miss a key factor because it is outside the scope for identification' ^{3 p.9}.

Families with complex needs may have multiple interactions with government agencies and different staff within the same agency. Individual members of these families may have mental or physical health needs and/or have experienced substance abuse, physical abuse, sexual abuse, risk-taking, and self-harm as well as being harmful to others.

The United Kingdom Social Exclusion Taskforce 2007 noted that families with complex needs *'typically have five or more disadvantages including living with poverty, unemployment, poor quality housing and disabilities'* ^{4 p.3}.

Children and young people with complex needs often have a range of interrelated problems such as intellectual disabilities, mental health issues, educational difficulties, histories of school suspension/expulsion, and difficult relationships with birth families for children in State care. Consequently, these children and young people are frequently involved in two or more service systems ⁵.

It is therefore not surprising that, owing to the issues many of these families experience, responses have tended to arise from health and addiction services, supported by specific parenting education, counselling, justice, and employment programmes and services. Family members may also experience the same stressors yet react to them very differently, requiring different support:

'For example, a young person's stealing, a father's absence and a mother's depression may all be related to financial hardship which can compound issues and create cumulative impacts resulting in a family struggling to function. This can result in periodic crises, relationship problems, role disintegration and family breakdown. As family members become increasingly overwhelmed, family violence, substance abuse, mental illness and child abuse can occur or escalate' ^{1, p.9}.

Families with complex needs find services 'hard-to-access'

In addition to experiencing multiple disadvantages, families with complex needs may find social services hard to access. For example, they may lack transport, have had previous negative experiences, or lack the knowledge needed to access services ⁶.

There is debate about whether families have complex needs or live in complex environments

Some researchers note that instead of using the term 'complex needs' to describe characteristics of individuals or families, the term needs to be used to describe the range of social, economic and health problems that they confront ('complex environments'). Further, these individuals and families are not a homogenous group, and it should not be assumed that they will be forever in this state ¹.

Families with complex needs often have significant unmet survival needs, related to food, housing, and personal safety (e.g., family violence). Evidence suggests that it is only when survival needs are met that additional support services can be effective. Until basic needs are met, programmes to improve families' skills (e.g., parenting programmes) are unlikely to be effective ⁷.



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Figure 1. Adapted from Maslow’s Hierarchy of Needs (McAdams 2006) in Bromfield et al. (2010)⁷

In the Australian literature, Maslow’s hierarchy of needs (see Figure 1) is used to show the broader context of poverty and disadvantage within which families with multiple and complex needs are often situated⁷. The hierarchy of needs highlights the importance of prioritising services by firstly attending to the safety and survival of vulnerable families and then addressing issues such as parenting or truancy. That is, the sequencing of service provision is important to achieve positive outcomes for families and individuals, including maximising the effectiveness of the services themselves.

Families with complex needs in the United Kingdom

Understanding and defining families with complex needs

A United Kingdom literature review noted that while there is no one single definition, families with complex needs can experience a range of interconnected issues. These include substance abuse, physical and mental health issues, unemployment, homelessness, abuse, violence, poor education and marginalisation from society³. The requirements of these families cannot be met by a single agency working in isolation.

The two percent of families (120,000) who have the highest complex needs in England are estimated to cost the taxpayer £9 billion per annum. This equates to an average annual amount of £75,000 per family. Of this, £2.57 billion is spent on crime and justice services alone⁸.

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Wales, Northern Ireland, and England support families with complex needs in different ways

In Wales, the Integrated Family Support Services are intended to provide targeted support for families and children where some level of risk or concern to the child has been identified. The aim is to further extend this service to other families with complex needs resulting from parental mental health problems or mental illness, learning disabilities, and family violence⁹.

'A focus on integrated working, early intervention and service development to address multiple and complex needs is a common theme of legislation and policy across all UK nations. However, variation in approach taken is also apparent. To date Wales is the only UK nation to take a legislative approach to the provision of Integrated Family Support Services (IFSS), which are specifically designed to work with families experiencing multiple adversities'^{3, p.50}.

Northern Ireland has implemented a range of significant policy developments relating to children, including a review of the child protection system. The Northern Ireland Family Support Model used for the *Families Matter Strategy* identifies that families experiencing multiple adversities require a higher level of intervention than universal services. In the Irish context, multiple adversities include poverty, family violence, family illness, parental substance abuse, bereavement, imprisonment and offending³.

England has introduced a *Troubled Families* programme for 'high needs' families

The most significant approach to supporting families with complex needs in the United Kingdom is the *Troubled Families* programme. *Troubled Families* was implemented in 2011 in the aftermath of the London riots¹⁰. It is a large-scale policy response designed to improve the lives of families with the most complex needs and to reduce the lifetime public expenditure associated with these families⁸. Almost 120,000 families have taken part in the programme.

Troubled Families is currently delivered by all 152 upper tier Local Authorities in England. Local Authorities have a target number of families to enrol and are funded per family. This is paid in part when a family is enrolled in the programme with the remainder paid on successfully 'turning around' the family.

Accessing and engaging with *Troubled Families*

Many of the families targeted by the *Troubled Families* programme have had previous negative experiences of the State leading to a mistrust of social services and providers. The programme is designed and implemented to help overcome this through an intensive and hands-on approach of a 'key worker' working with each family¹¹.

Selection criteria for *Troubled Families*

Troubled Families targets families with complex needs who cause high costs to the taxpayer or who experience one or more of the following:

- involvement in crime and anti-social behaviour
- children who are not in school
- adults receiving out-of-work benefits¹².

Local Authorities are given discretion in how they define 'high cost' families. For example, Tower Hamlets (an inner-city London borough) has additional criteria including:

- anti-social behaviour offences such as noise nuisance
- family violence - either as a perpetrator or a victim
- gang membership
- alcohol and drug misuse
- housing eviction orders or at risk of eviction
- having committed a criminal offence which has not been taken further
- underlying health problems¹³.

Troubled Families uses a range of effective approaches

Key workers are central to the effectiveness of *Troubled Families*

Key workers may come from a range of professions. They build trust and provide practical hands-on, individualised support with family members. They also facilitate and coordinate engagement with programmes and services. In cases where the most intensive interventions are needed, key workers may work with as few as five families or as many as fifteen families where less intensive interventions are needed¹¹.

Home visiting provides intensive support

Key workers visit families frequently, up to several times a day. These visits are both announced and unannounced and include early mornings, evenings, and weekends. One of the first steps with some families is to offer practical support, such as teaching basic household skills and budgeting¹¹.

Applying sanctions is part of the programme

On engagement with the service, many families are at the point of facing sanctions (e.g., prosecution for child truancy or eviction). Key workers liaise with authorities to either accelerate or delay sanctions, depending on the family's compliance with an agreed plan of action. Key workers therefore have the ability to provide an incentive for families to agree to join the programme and to cooperate with the demands being placed on them by the key worker¹¹.

Troubled Families targets a number of areas of family functioning

Troubled Families can encompass a wide range of support, depending on the needs of the family. Family functions that are critical to supporting and nurturing family members include physical safety and health, supportive family relationships, economic security, and access to outside social connections.

There is some evidence that the *Troubled Families* programme has been effective

Improvements in crime/anti-social behaviours and education or employment measures are used to determine programme success and award the results-based component funding to Local Authorities.

As at December 2014, Local Authorities had identified and worked with 117,910 families. A *Troubled Families* progress report identified that by February 2015, 90% of families who had been part of the programme were classified as 'turned around' – that is, they had achieved all three crime/antisocial behaviour and education measures, at least one adult had engaged in a period of sustained work, or at least one adult had undertaken preparation for work training¹⁴.

The *Troubled Families* programme has highlighted the compounding problems these families face, with many problems not apparent when they were first selected for the programme. On average, families experienced nine serious problems, with health problem rates being much higher than United Kingdom local and national averages (e.g., obesity, addiction and substance use, and disability)¹⁵.

Based on the success of the initial programme and greater awareness of the issues faced by these families, the expanded *Troubled Families* programme encompasses a broader range of selection criteria. These criteria include families affected by family violence and abuse, and parents and children with a range of health problems¹⁵.

Researchers have stressed the need for further evaluation of *Troubled Families* in order to determine whether change is long-term¹⁶.

There has been criticism of the data and criteria used to determine the success of the *Troubled Families* programme. Measurement issues identified include: inconsistencies in data reporting; the quality of data collected; the lack of impartiality in the programme design; implementation and reporting processes; and the relevance and sustainability of the criteria used to determine that families have been 'turned around'^{17,18,19}.

While further evaluation on the effectiveness of *Troubled Families* is required, the Institute for Public Policy Research has called for an intervention based on *Troubled Families* to respond to individuals with complex needs through developing a '*Troubled Lives*' programme²⁰.

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The Australian context: Approaches to families with complex needs

In our review of the Australian approach, families with multiple and complex needs are commonly situated within a context of social exclusion and entrenched disadvantage. In Australia, approaches to families with complex needs vary between States.

In 2009, the Victorian State Government passed the Human Services (Complex Needs) Act. The purpose of the Act is to provide for the assessment of those with complex needs to implement care plans²¹. This Act underpins the work of the Multiple and Complex Needs Initiative which seeks to provide a coordinated approach to support individuals in meeting a range of complex needs.

Understanding and defining families with complex needs

In Australia, definitions of complex needs are broad. A literature review prepared by the Royal Children's Hospital (Melbourne) and the Murdoch Children's Research Institute notes a wide range of factors are considered in understanding families with complex needs. These include those who have mental health problems, disabilities, addictions, behavioural problems, and may be vulnerable owing to age and health factors. The families may also become disadvantaged or marginalised groups, considered to be 'high risk' or 'hard-to reach'²².

Poverty, unemployment, poor nutrition, and lack of access to employment, affordable and healthy housing and social support often lead to increased stress, anxiety, depression, and low self-esteem. Consequently, Australian families with complex needs have also been described as having both a 'breadth of need' (multiple and interconnected needs) and a 'depth of need' (profound, severe, serious, or intense needs)²³.

Five percent of Australia's working age population experience multiple disadvantage

In 2013, the Australian Productivity Commission noted that there is a group of families often trapped in a spiral of disadvantage caused by family circumstances, low expectations, community poverty, lack of suitable and affordable housing, illness, or discrimination – frequently leading to early school leaving, long-term unemployment and chronic ill health²⁴. The Commission noted that those more likely to experience deep and persistent disadvantage include:

'lone parents, Indigenous Australians, people with a long-term health condition or disability, and people with low educational attainment. Many are public housing tenants and are weakly attached to the labour market'^{24, p.57}.

Accessing and engaging families with complex needs is challenging

A review of the Australian context indicates it is challenging to access and engage families with complex needs as their vulnerability increases the likelihood that they will refuse the offer of services. Families with complex needs are among the significant proportion of those who drop out of services early or whose difficulties remain entrenched. Similar to the United Kingdom and Canadian experience, families with complex needs require relationships with practitioners, facilitators and agencies that focus on building trust and are empowering.

Aboriginal families with complex needs experience increased risks

In Australia, Indigenous Peoples are more likely to experience unemployment, health and housing issues as well as risk factors that arise from colonisation, racism, and dispossession.

'In Victoria, there are no families who have not lost contact with members of their family or whose family relationships do not still bear the scars of the Stolen Generations or whose families were not decimated by the forced removal to different missions ...and then the expulsion of lighter skinned family members from the missions. These events happened to people who are alive today'^{1, p.20}.

Effective practices when working with Aboriginal and Torres Strait Islander families with complex needs include:

- commitment to and recognition of Indigenous leadership and sense of ownership in the design, delivery and evaluation of services and programmes
- building relationships of trust
- providing strengths-based approaches that acknowledge Indigenous culture
- supporting family and kinship structures
- enabling Indigenous Peoples and organisations to form equal partnerships with non-Indigenous organisations and to take a recognised leadership role²⁵.

Some families with complex needs are also homeless

The 2012 Victorian Government Department resource on families with multiple and complex needs noted that:

'Some 12 percent of homeless people in Australia were aged under 12 and that 55 percent of women with children presenting to Supported Accommodation Assistance Program services reported family violence as the main cause of their homelessness'^{1, p.16}.

The former federal Department of Families, Housing, Community Services and Indigenous Affairs found that complex needs of those at risk of homelessness included access to accommodation, money, food, health care, education and training, employment and support in building and maintaining relationships. Addressing any one of these needs in isolation is unlikely to be as effective as an intervention that addresses multiple needs. This reinforces the view that attending to the survival and safety needs of families with complex needs is the first priority¹.

Effective approaches to supporting families with complex needs are targeted and comprehensive

Within the Australian context, a range of evaluations and reports have identified effective approaches for families with complex needs. Individualised support has been found to be the most effective for families with complex needs as many of these families have unmet survival needs such as food and housing. The approaches used that are the most effective tend to be strengths-based, family-centred, highly structured, long-term and intensive. It is noted that working with Aboriginal families with complex needs requires specific knowledge and an empowerment approach.

A long-term and intensive approach is needed

Families with complex needs require long-term, individualised and intensive support²⁶. Prolonged and intensive programmes are more effective for those with multiple and complex needs than short-term programmes, or those with infrequent contact with families²⁷.

Partnerships with families are critical for success

Developing goals in partnership with the family, building trust, and empowering family decision-making is essential. However, practitioners need to find the balance between providing support to families while directly challenging neglectful and other aspects of poor parenting²⁸.

Multi-systemic approaches are effective

Programmes that are designed to be multi-systemic were found to be more effective than 'single-issue' designs as they address more than one area of need while maintaining a core set of objectives⁽²⁶⁾. In a multi-systemic approach, a range of strategies are promoted such as 'no wrong door' (multiple gateways into services for families), easing eligibility criteria, and focusing on outcomes rather than throughputs.

Capability building and strengths-based approaches can be effective

Building strengths and capabilities in families with complex needs was a key theme in the approaches we reviewed. One criticism of strengths-based approaches is that focusing on self-help and self-responsibility does not adequately recognise structural inequalities in society. However, strengths-based practices adopt an integrated approach that incorporate both problems and strengths into practice frameworks²⁶.

Home visiting and structured parental support are effective approaches

Children in families with complex needs enrolled in home visiting programmes fare better than those who are not in home visiting programmes. For example, a meta-analysis of home visiting programmes concluded that children who had received home visiting had better cognitive, social and emotional outcomes than those who had not²⁹. Home visitors with professional skills were acceptable to some communities. In other communities, the professional home visitor was distrusted, with trust residing in a key worker known to the community.

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Wraparound and integrated services are common approaches for families with complex needs

Wraparound initiatives have been implemented in Australia as a means to provide a collaborative, individualised, integrative and strengths-based model. As we outline in our review of Canada's approaches to families with complex needs, the success of the wraparound model lies in adherence to a range of principles throughout the planning and implementation of services.

Prevention and early intervention are key approaches

Prevention and early intervention can help prevent families with complex needs from constantly moving in and out of crisis services. A literature review of effective interventions for those who are homeless noted that many of the problems associated with homelessness can be prevented or reduced by intervening early³⁰.

Place-based Income Management has had positive results

Place-based Income Management (PBIM) supports families with complex needs by directing welfare payments to the priority needs of recipients, families and children. Since 2012, PBIM has been trialled in South Australia, Victoria, New South Wales and Queensland.

In 2014, evaluation of the initial data included on-line surveys by 66 Department of Human Services staff who reported improvements in general physical and mental wellbeing, financial and housing stability, and in people's ability to provide for themselves. Reduced conflict in personal relationships was noted and money management skills were more likely to be retained on leaving PBIM. However, some beneficiaries felt that PBIM created an inability to be flexible in the payment of rent, utilities, or basic goods³¹.

The Canadian context: Approaches to families with complex needs

The third and final jurisdiction reviewed was Canada. Canada has a significant focus on the family as an important site of intervention for children or youth with complex needs. As in the United Kingdom, complex needs frequently arise from health or mental health problems.

In 2004, the Standing Senate Committee On Social Affairs, Science And Technology submitted an overview of mental health, mental illness, and addiction policies and programmes. The Committee reported that systematic approaches and effective assessment tools were required to better identify those with complex needs, that people with complex needs are often inappropriately identified, and that many individuals with complex needs failed to receive proper care³².

Similar to the United Kingdom and Australia, Canada has reported growing recognition that families with complex needs require multi-systemic support delivered through strengths-based, family-centred approaches that lead towards long-term sustainability.

A consistent and comprehensive definition of complex needs is lacking

The *Special Report for the Office of the Children's Advocate* (2012) noted that while there is common knowledge regarding what is meant by 'complex needs' a consistent, comprehensive definition is lacking. Nevertheless, a range of complex needs can be identified: alcohol and drug abuse, parental conflicts, family violence, poverty and/or financial difficulties, stressful family events, parental mental health, household crowding, and 'maladaptive parenting'³³.

Navigators and Networks (NAVNET) is an organisation comprising senior government representatives from several government departments and community organisations that focuses on improving responses to families with complex needs. NAVNET notes that:

'People with complex needs have multiple issues in their lives which can include mental health and/or addictions, developmental issues, involvement in the Criminal Justice system, problems finding and maintaining housing etc. These needs, often in combination with one another, require individuals to access services and support from a wide variety of government systems and community organisations'³⁴.

Accessing and engaging families with complex needs

Navigators and Networks noted that accessing social services for families with complex needs is difficult owing to a number of system-wide barriers such as:

- service delivery systems that can be difficult to access
- clients experiencing policies and procedures as inflexible
- youth experiencing gaps as they move into the adult system
- homelessness and instability for those unable to access safe and affordable housing
- inadequate resourcing of services
- lengthy waiting lists for Case Management³⁴.

Families with complex needs who are homeless can be difficult to engage

Families with complex needs are a small but significant number of homeless families. They experience multiple episodes of homelessness, extreme poverty, high rates of substance abuse and mental illness, and high rates of interactions with child welfare systems:

‘Many of the associated outcomes of housing instability for children including brain development and school performance produce the risk factors associated with homelessness later in life, therefore contributing to multigenerational homelessness’^{35, p.13.}

A key source of stress for homeless families is that if they do not find a place to live, social services may remove the children from their care. These families can be difficult for service providers to find and engage.

Canada’s permanent supportive housing model does provide some housing support for homeless families with complex needs. The programme aims to meet the safety needs of families with complex needs by firstly providing housing, then providing appropriate support to promote recovery and independence³⁵.

Aboriginal Peoples encounter risk factors arising from a colonial history

A report titled *The Income Gap Between Aboriginal Peoples and the Rest of Canada*³⁵ notes that Aboriginal Peoples experience greater income inequality, significantly higher rates of unemployment, lower rates of educational attainment, higher rates of suicide, substance abuse, and imprisonment than other Canadians. The report notes that:

‘It starts by acknowledging the legacy of colonialism lies at the heart of income disparities for Aboriginal peoples. Though demanding, poverty among Aboriginal peoples in Canada must be understood within its historical context’^{36, p.11.}

There are specialised care practices for First Nations and Aboriginal Peoples with complex needs

In British Columbia, the Future First Nations and Aboriginal Peoples’ Mental Wellness and Substance Use Ten-Year Plan identifies a range of actions for First Nations and Aboriginal Peoples with complex needs that include:

- enhancing integration of culturally based primary and community care
- ensuring equitable access to optimal medical treatments that align with cultural healing practices

- expanding integrated services and supports for people with mental wellness or substance use problems who are also managing other serious chronic health conditions
- enhancing housing and support services for people who are homeless and are experiencing mental health and/or substance use problems³⁷.

Like other Indigenous Peoples, interventions for First Nations and Aboriginal families in Canada require culturally responsive services that honour indigenous knowledge and recognise diversity amongst Aboriginal Peoples. These adaptations engage traditional extended family systems and cultural interventions.

Wraparound is an effective approach in supporting families with complex needs

Wraparound is an approach that “wraps” targeted and holistic interventions around a family or family member. It is a high fidelity initiative for families with complex needs that has been implemented through a range of programmes. Currently, Wraparound initiatives are in place in British Columbia, Alberta, Manitoba, Saskatchewan, Ontario, Alberta, and Nova Scotia with plans to implement approaches in Quebec³⁸.

Debicki, National Development Director of Wrap Canada, a non-government organisation, notes the use of a medical or a problem-based model for people with multiple, complex needs has led to a crisis and expert-driven approach that alienates and disempowers the very families they need to help. This is in contrast to a family-centred, strengths-based approach

‘Today, the challenge we are facing is that unless we do something dramatically different over the next 3-5 years we are probably going to leave behind that 20 percent of society that is struggling to deal with multiple, complex problems and their resulting needs that go beyond what the service system can provide or address’^{39, p.1.}



Wraparound adheres to the following key principles:

Family voice and choice Family values and perspectives are central to the plan, choices and decision making.	Culturally competent Respects and builds on values, preferences, beliefs, culture, and identity of family and community.
Team-based The team provides informal, formal, and community support and service relationships.	Individualised The team develops and implements a customised set of strategies, supports, and services to achieve the goals of the plan.
Natural supports Full participation of team members drawn from family members' networks of interpersonal and community relationships.	Strengths-based The process and plan identify the knowledge, skills, and assets of the family, community and other team members.
Collaboration The team collaborates to develop, implement, monitor and evaluate the Wraparound plan.	Persistence Despite challenges, the team works toward the goals of the plan until a formal Wraparound process is no longer required.
Community-based The team implements strategies that are inclusive, responsive, and accessible, and promote child and family integration into the home and community.	Outcome-based The team ties the goals and strategies of the Wraparound plan to indicators of success, monitors progress in terms of these indicators, and revises the plan accordingly ³⁹ , pp. 26-27.

Wraparound: Growing the evidence base

Many regional and provincial governments have adopted the core principles of Wraparound as a planning process to be used by all service providers either within a particular service or across all of the social service systems ³⁹.

A summary of the Wraparound evidence base noted that nine Wraparound-related controlled studies had been published by 2010. The summary noted methodological weaknesses but found that the weight of evidence suggested superior outcomes for youth ⁴⁰. A meta-analysis of Wraparound evaluation studies also found improvements in youth behaviour and community adjustment ⁴¹.

Implications for service development and delivery in New Zealand

In comparing approaches across jurisdictions, there are a number of similarities that emerge in responding to families with complex needs. Approaches range along a continuum of strengths-based, collaborative approaches, such as Wraparound, to highly structured, 'hands-on' and mandatory interventions as seen in Troubled Families and Place-Based Income Management.

Across all jurisdictions, there are shared understandings that families with complex needs:

- are not a homogenous group and require individualised, in-depth support from a variety of services that need to be co-ordinated
- are likely to have unmet safety and survival needs that must be met first prior to further service delivery
- who are Indigenous to Australia and Canada share collective risk factors such as colonisation, dispossession, and alienation from Indigenous cultures, as well as individual risk factors such as mental health, unemployment, and disabilities
- benefit from targeted, individualised family-centred 'wraparound' approach
- respond well to family development plans that 'scaffold' the family towards agreed new goals (e.g., Wraparound)
- often require a well-trained and trusted facilitator as 'the glue' between the family, community and services, as well as both formal and/or informal, community support
- require support that balances a strengths-based approach with managing at-risk behaviours or child welfare matters
- may require long-term support and resources over a period of one to five years
- may benefit from a highly structured, mandatory approach to managing finances, household responsibilities and household budgets

A key challenge is to develop policies and practices that can respond early to families with complex needs, prior to the families building up a significant raft of unmet needs. In the case of Indigenous families and communities, trust may need to be built prior to engaging social services to help address specific issues, and all jurisdictions recognise the need for culturally responsive approaches.

Similar to the United Kingdom, Australia and Canada, New Zealand recognises that families with complex needs do not fit neatly into existing service delivery and require a different approach. The *100 Families Research Project*, which followed 100 families who visited the Auckland City Mission Foodbank for approximately twelve months, documented the experiences of these families as they attempted to access services for a range of high and complex needs. The participants, 80% of whom were women, identified the enormous time invested on a daily basis in trying to engage with social services and seek support ⁴².

In 2010 the report of the Taskforce for Whānau-Centred Initiatives signalled a new approach to the design and delivery of social services to whānau ⁴³. The Taskforce proposed the establishment of Whānau Ora, a comprehensive, whānau-centred approach to support whānau wellbeing and empowerment. In 2015, Te Puni Kōkiri reported that many whānau experienced ‘multiple and extensive’ improvements through Whānau Ora. Importantly, it was noted that:

‘Whānau-centred approaches generate an outcome continuum, where immediate whānau gains act as stepping stones for higher-level improvements’ ^{44, p.32}.

The Whānau Ora report was followed by the release of the New Zealand Productivity Commission’s final report on the social service review – *More Effective Social Services* ⁴⁵. The report noted that while the system worked well for most New Zealanders, a new approach is required to support families who have multiple and complex needs and little capacity to access services. The review acknowledged the progress of Whānau Ora, noted the need for new whole-of-government initiatives that empower the client and improve the contracting of services.

Long-term, the report identified that fragmentation of services for those with complex needs requires a re-shaping of social service culture and delivery to develop more joined-up social services. This includes moving towards practices that are less ‘top down’, better integrated, and that empower families and communities to achieve better outcomes.

Overall, broadly similar approaches to families with complex needs are being taken in the jurisdictions we examined. There is evidence of the effectiveness of many of these approaches and agreement that a key factor lies in prevention and tailored, wraparound interventions for families who are experiencing multiple and complex needs.



‘Whānau-centred approaches generate an outcome continuum, where immediate whānau gains act as **stepping stones for higher-level improvements’ ^{44, p.32}.**

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