



A Safe Place for Women

Lou's Place Commentary and Initiatives

The Big Ask – How can Australia improve the well being of its children?

Shifting attitudes and behaviours in our communities

At Lou's Place, we see the effects of abuse and neglect everyday. Many of the women of Lou's are the little girl in Polly and Me grown up. As one of our staff members remarked, "They carry the five year old child around inside them." Many are also now mothers themselves, struggling to create a better world for their own children.

We decided 11 years ago to offer a helping hand in our local community - to fill a gap in service and provide a safe place for women where they could begin to restore security, stability and self respect. We provide safety on many different levels: safety from isolation and loneliness, from hunger and cold, from ill health, the dangers of the street or even dangers within their own homes.

Lou's Place welcomes all and fosters the dignity of each.

Making a difference in our local community was actually easier than we thought it might be. Once we set the ball rolling, we found support and encouragement all around us. Lou's exists through the support of family, friends, pro bono partners and over 50 volunteers who are constantly on our roster cooking, cleaning, providing art and music classes, yoga, creative writing, medical and legal services and so much more. Lou's Place is a great example of when community works well.

What is the one thing we at Lou's would wish for to improve the well-being of Australia's children? Quite simply, for community to work well.

This doesn't cost millions, doesn't rely on a particular party being in power and doesn't require fancy words or works.

It does require an attitudinal shift within our community so that we can all feel compelled, comfortable and safe in offering a helping hand, whether it is to a family member or neighbour or work colleague or even someone in the grocery store check out line who is clearly under stress. This shift requires us to change the way we think about community and yes, to offer a helping hand:

- Offer to look after a neighbour's child so they can have a much needed rest
- Cook a meal for the family down the road with a new baby
- Help the struggling mother with a stroller on the stairs
- Set up a community programme for the elderly to spend time with children in your neighbourhood
- Pick up the phone if your child tells you that one of their classmates has been sick for a week – ask if you can help
- Notice and act if you see children "on their own" – it's everybody's business
- Call your local doctor if you are concerned about a family under stress
- Smile in the grocery store

We know this sounds a bit like Hillary Clinton's dictum that "It takes a village to raise a child" – but quite frankly, it does.

During child protection week there will be shocking revelations about the failures to foster child well being in our country. Now is the time to act. Now is the time to lead an attitudinal shift in our approach to community – in our understanding of what it means to offer help and our willingness to do so.

Initiatives: Some specific actions we can take in addition to fostering attitudinal shift*

1. Make it easier for struggling mothers to have access visits with their children – everyone will benefit

Lou's Place is currently exploring the possibility of opening on Saturdays solely for the purpose of providing supervised visits for non-custodial mothers and their children. We are seeking funding and the support of DOCS and other partner agencies to help us achieve this goal.

We believe that there needs to be a national push to provide home-like environments similar to Lou's Place where mothers and children can be together, feeling safe and feeling supported, perhaps most especially in cases where the mother no longer has custody of her child.

"We need to drive into the reality of women: you do matter. We have to come into the lives of women and pull them back. Give them the ability to make decisions. Let them choose. Invest them in the lives of their children and they will walk on broken glass."

–Celia Lashlie, *Polly and Me* panel discussion 18 June 2010

2. Antenatal Initiative started at Lou's Place in 2008 could be rolled out to all hospitals in Australia.

In a programme initiated by Lou's Place, "at risk" pregnant mothers received priority handling at Randwick Royal Hospital for Women to encourage antenatal care and ongoing support through the early stages of motherhood. Navigating the bureaucracies of the medical system can be daunting if you are struggling to overcome drug and alcohol dependence, battling with a mental illness or simply hard up on your luck. Lou's Place medical volunteers were able to negotiate streamlined service for "at risk" mothers. This is a programme that could easily be rolled out to all hospitals in Australia.

See attached detailed outline of programme.

3. Extend proposed Antenatal Initiative to include ongoing emotional and practical support to those "at risk" mothers who choose to keep their babies.

This can be live-in or outreach support and would be a natural continuance from the Antenatal Initiative. Very specific case management to ensure the ongoing mental and physical health of mother and child would be initiated at birth and continue through the early years. This service will play a critical role in families where it is imperative to break the intergenerational cycle of abuse and neglect, where the new mother has been a victim of abuse herself and wants a different life for her child.

4. Nurse/Family partnerships from birth to school entry will keep struggling families connected to community support

The community nurse health system in Australia is a wonderful service for mothers who are able to "get it together" to bring their children into the community centres. However, for "at risk" families, visits to a local community centre may not be viable or a priority. The suggested nurse/family partnership would start at the hospital for families deemed "at risk" and would continue until the child enters school.

Nurses would be assigned to families and would make planned home visits – initially as often as weekly if required. The nurse/family partnership would require that hospitals make assessments at birth if a child and their family require this support – and would design ongoing contact at specific developmental stages.

Tested in the US with excellent results (need the citation) this partnership could initially be tested in high risk areas, similar to the Harlem Children's Zone project in New York City.

***All these suggestions take into account the ARACY Change for Children suggestion regarding national programming for children**