My partner and I have been authorised foster carers since 2018. In our experience, the carer allowance is grossly inadequate. In fact, it is fair to say that we have essentially been paying to be foster carers, particularly since our beautiful boy came into our longterm care in 2019.

In our case, the carer allowance essentially only covers the approximate cost of his room (as a percentage of our mortgage) and some utilities. It does not cover any other daily or ongoing costs including but not limited to:

- Food
- Co-curricular activities (eg. learn to swim etc.)
- Clothing or shoes
- School uniform, fees, textbooks, excursions etc.
- Medical/health related costs including regular visits to the paediatrician and daily medication
- Allied health services
- Costs associated with family contact transport, food and presents for birth parents etc.
- Other day to day costs of raising a child in Sydney/NSW.

To compound this, we have experienced an incredible lack of transparency and consistency from the agency, regarding what financial support there is available to support our boy. An example of this is that we were offered absolutely no financial support when he first came into our long-term care. Nothing to assist with setting up his bedroom, buy new clothes, new school uniform, shoes or help him establish himself in his new home, with his new foster family. We later learned that we were entitled to receive financial support from the agency when he came into our long-term care.

Further, there have been multiple instances whereby our agency/the system has failed to support us financially to cover

the basic needs of kids in our care (respite, short or long term). Examples of this include, but are not limited to:

- When our boy first came into our long-term care at the age of 8, it was abundantly clear that there were a number of health and support needs had not been adequately addressed by either the agency, nor the department despite having been removed from his biological parents more than 12 months prior to his placement with us. This included his reading age estimated at the same level of a student in kindergarten (when he was almost halfway through year 3) and tests conducted by the school counsellor and other allied health services indicating that he should be formally and urgently assessed for ADHD. We were informed that he could be put on the wait list for access to a paediatrician community health, however the wait was estimated to be at least 12 months. Another 12 months for him to fall further behind at school, academically and socially. So, my partner and I did not hesitate to look for paediatrician and within 3 months he received a diagnosis of and subsequent treatment for ADHD. This had an almost immediate and positive impact on his academic progress and his social and emotional wellbeing. He has seen the same paediatrician for 6 monthly check-ups ever since. We have never once received reimbursement for fees (or part thereof) associated with the paediatrician.
- In the middle of the first lock down, the placement of one of our boy's siblings broke down (he is 1 of 8 siblings). We agreed to have him in our care. While he was being homeschooled, he mentioned that he was struggling to see when reading. We took him to an optometrist as soon as it was safe to do so and ordered appropriate glasses (more than 50% of which was covered by our private health insurance). Noting that by this stage, he had been removed

from his biological family for well over 2 years before someone took him for an optometry assessment. Despite multiple requests, the agency refused to make a contribution to the balance of cost of reading glasses.

• For the past 5 years I have been organising an annual family time activity where the siblings and carers (from 5 different households) come together for a couple of nights so that the kids can have a positive, safe and supported residential experience together. This has taken place in modest accommodation (generally a caravan park) within 50km of all households. Despite multiple requests for support of this important family time activity for 5 years, the agency consistently refused to make a contribution to this. That changed 1 month ago when the agency finally agreed to cover half of the cost of accommodation for this year's event following more robust conversations that included my open and honest readiness to pursue a formal complaints process.

Finally, it is important to note that since 2019, I have been working part time in order to meet our boy's needs, and balance our needs as a family. The cost of diminished income, alongside impact to my superannuation, is difficult for me to quantify, however, it is no doubt significant and should be a general consideration of this review and any subsequent reform. Adequately meeting the needs of kids in care takes time, care and money and the carer allowance and other support must appropriately reflect that.

By virtue of the inadequacy of the allowance and other financial support available to carers, the system effectively expects foster and kinship carers to bare the majority of the cost of raising and supporting kids in OOHC.

We love our boy very, very much and want the best for him. We are very lucky to be in a financial position that we are to be able to meet his needs and provide an enriching life and loving and safe home and family for him. However, it is nor reasonable nor sustainable to expect carers to meet the cost of raising children in out of home care with such abysmal financial support. There is no doubt that this has, and will continue to impact the number of foster carers remaining in the system and new carers coming into the system. Ultimately, this means more children will remain in unsafe and/or inappropriate living arrangements – an intolerable position that we must address immediately.