

## **Submission to the Queensland Child Protection Commission of Inquiry**

Keeping Indigenous children and young people connected  
to community, culture and country

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ACT for Kids is a charity providing therapy and services to prevent and treat child abuse and neglect across Queensland. Established in 1988 as The Abused Child Trust, we have worked in child protection for almost 25 years offering both government and philanthropically funded programs. We work across the whole child protection continuum, from primary services in education and advocacy, to secondary early intervention and family support services, through to intensive therapy for children who have experienced trauma from abuse and neglect.

ACT for Kids, with funding from the Queensland Government and in partnership with The Aboriginal Corporation of West Coast Cape York Peninsula Traditional Land Owners and Respected Elders and Traditional Owners in Doomadgee, operates safe houses in five remote Indigenous communities.

Based on our experience and feedback from community, this submission offers a number of recommendations to improve the child protection system response to the needs of Indigenous children and families to provide significantly improved outcomes for them and their communities (in response to Inquiry Terms of Reference item 3c and 6b). These include that:

- definitions, assessments and processes need to be reviewed and updated to enable the child protection system and workers to deliver the intended outcomes of safe, nurturing, loving family homes for children in remote Indigenous communities
- empowering and partnering with community is the most effective way to achieve change and improved outcomes for children, families and community
- geographic disadvantage and racism inherent in the system be acknowledged and tackled so families and communities are not denigrated for child maltreatment for issues out of their control
- further investment is needed to provide fast and easy access to intensive family support services to strengthen families and prevent abuse and neglect
- safe houses continue to provide short term safe accommodation and care for children and young people at risk of harm, assistance to reunify families where possible and develop capacity of potential foster and kinship carers in community.

### **When significant, systemic and sustained disadvantage meet the child protection system**

Statistics on the over-representation of Indigenous children and young people in the child protection system are a symptom not a cause, and they don't tell the story.

People working in remote Indigenous communities already know that many cases of child neglect are actually a product of poverty, not child protection issues. We're talking very real poverty – where little or no employment opportunities dictate reliance on welfare which is woefully inadequate in sustaining a family of several children in areas remote enough to guarantee a limited supply of overpriced goods. In these five safe house communities (Doomadgee, Kowanyama, Napranum, Pormpuraaw and Aurukun), approximately 68% of people have a total personal income of less than \$400 per week. The average unemployment rate for the five communities was 17% in March 2012, compared to 5.5% in Queensland as a whole (Queensland Regional Profile generated from [www.oesr.qld.gov.au/qld-regional-profiles](http://www.oesr.qld.gov.au/qld-regional-profiles) on 25 September 2012). Limited or no access to even basic services city-folk take for granted compounds the issue. Generations have lived it. Governments don't know how to "fix it".

Many Indigenous families and communities continue to live amid poverty and disadvantage. Their connection to country is strong and sustaining, but cannot substitute for access to basic services and nutrition. In Indigenous communities, legislative definitions and bureaucracy label children neglected. When a lettuce costs more than \$8 and is a week old, you can understand why parents with many mouths to feed opt for nutrition-poor white bread and jam and why diseases like type II diabetes occur in teenagers.

While most communities have schools, there are still unacceptable numbers of children not attending. Across the safe house communities more than 20% of people have never attended school and the most common level of school achievement is less than grade ten (Queensland Regional Profile generated from [www.oesr/qld.gov.au](http://www.oesr/qld.gov.au) on 25 September 2012). Leaving serious issues like poor health, nutrition, educational achievement, overcrowding and exposure to violence aside, it is our experience that parents also face child protection responses for things as simple as a child without shoes, because:

- they don't have the money to buy new shoes for five year old Paula\*
- there are no shoes for sale in their community that fit Paula
- there are no shoes for sale in community.

Paula may be removed from a loving family and kinship network to out-of-home care because her family can't provide her with shoes, school books or healthy food.

*\*Based on a real story but name changed to protect privacy.*

This is a very real and all too common situation. Overcrowded housing is another common problem posing a "risk of harm" to children and young people. A regional report generated through the Queensland Government site, noted above, indicated that more than 49% of people in these five safe house communities are living in overcrowded conditions compared with 7.3% of Queenslanders as a whole. Again, parents can't address this issue if there is no more available housing; it's out of their control.

Generations of disadvantage – in education, health care, housing and employment – means it is a difficult cycle to break. Parents and communities can't provide "safe" and "caring" homes to current legislated standards if they themselves don't have access to the means to do it. It is also important to look at the definition of "remote" – certainly Cape York Peninsula is considered remote, but what about Yarrabah, only 45 minutes from Cairns, yet confronting the same issues?

### **When historical mistakes and misunderstanding meet remote Indigenous communities**

No doubt the child protection system has come a long way since the days of forced resettlement and assimilation. But there is still a long way to go to address the intergenerational trauma it caused. It's more than people being afraid of authorities and having their children taken away – though this is a real fear in many communities. It's the parents and grandparents today wanting to give their children the loving and connected upbringing they lost – how do they do that if they didn't experience it, if they never had a caring, engaged parent figure to show them how? These scarred but dedicated parents and families need support, not vilification.

While there's now an understanding that Indigenous communities have different connections to culture and country, there is still a gap in understanding between government and Indigenous definitions and concepts. Safe and nurtured, what does that look like on paper? What does that look like in a remote Indigenous community?

We say it takes a village to raise a child but we don't recognise it when we see it. In a town of 800 people a boy is wandering from his home to Aunty down the road, perhaps stopping to sit and play along the way. A dozen sets of eyes from verandahs and kitchen windows follow him on his slow, relaxed journey, no parent to be seen – to authorities this is a lack of supervision. How do they investigate and assess this? Have they shared these definitions and "rules" with community? Do people know what they are being measured against?

### Do the safe houses actually work?

ACT for Kids' safe houses are part of our SafeKIDS Program in Doomadgee, Kowanyama, Pormpuraaw, Napranum and Aurukun. Each house provides short term accommodation and care for children and young people who are unable to live safely at home while the Department of Communities, Child Safety and Disability Services investigates concerns. The houses also provide support and a place to stay for children and young people living in care far from community to return home to visit family and reconnect with culture and country.

The houses are necessary at the moment because of a lack of approved foster and kinship carers in community. Without the safe houses children would be removed not only from their home, but often as far away as Cairns or Mt Isa. The trauma this causes children is significant, often English is their second language and they find themselves in a completely alien environment far from their support networks.

Do the houses work? Yes. They reduce the need for children and young people to be removed from community in the short term. They also provide the opportunity for visitation and sometimes reunification – not previously possible without local carers able to support long visits. Table 1 summarises the numbers of distinct children and placement and respite days since opening for Napranum and Kowanyama safe houses. Respite allows children in care outside the community, largely in Cairns and other centres, to return for school holidays, Christmas, funerals and other family events. They stay in a safe nurturing environment and have monitored contact with their family.

**Table 1. Numbers of children and placements for two of the safe houses since opening.**

Safe House	Distinct Children	Primary Placement Days	Respite Days	Comment
Napranum	36	4,712	398	Some children have been living in the house for a long time, thus numbers of distinct children are low, however placement days per children are high. The numbers indicate an average of more than five children have been in the house each night since opening. There have been two sibling groups who have stayed in the house approximately two years.
Kowanyama	55	1,521	1,121	There are more children who have been placed for shorter stays and more respite stays. The numbers indicate an average of more than four children have been in the house every night since opening.

While the numbers of distinct children don't look large, they are significant in communities with populations of approximately 900 and 1,100 respectively. The numbers in the other houses are similar (Aurukun = 32 children; Pormpuraaw = 48 children; Doomadgee = 39 children).

Our SafeKIDS Program is also funded to provide a Family Intensive Support (FIS) service in each community. The FIS service takes referrals from Child Safety Services and works with families to address concerns for their children's safety and wellbeing. This often enables children to be reunified with their family and reduces further risk of harm.

These services have met with significant challenges, and there are many areas for improvement that would see much better outcomes for children and families and a reduction in the number of children entering long term out of home care. It's also important to note that establishing these programs takes a long time – longer than government service agreements generally allow. It also takes time to see statistically significant improvements because the issues they address are so large, often out of the control of a single intervention service and the downstream effects take time to resolve.

### **What is working?**

In our experience, some key things are working. The foundation of our SafeKIDS Program has been genuine, effective partnerships with The Aboriginal Corporation of West Coast Cape York Peninsula Traditional Land Owners and the Traditional Owners and Respected Elders in Doomadgee. The importance of distinguishing between merely culturally "sensitive" and culturally appropriate practices has been highlighted within the context of child welfare within Canadian First Nations communities (Mandell et al, 2003). Cultural appropriateness involves extensive community engagement and consultation and is supported when community-ownership is empowered.

Our local reference groups are engaged, empowered and committed. But this takes time and effort, it can't be rushed and must be done with sincerity and understanding of what has gone before. Only when an organisation, people and services are understood and welcomed will they be well utilised and effective.

Communities now have a better understanding of what ACT for Kids is, that we're NOT the government, and that our goal is to keep kids in community. They also have a better understanding of what their rights are when dealing with authorities, they're now more empowered to respond to and address issues rather than simply accept a decision.

Wherever possible we hire SafeKIDS Program staff from within community, 50 of our 62 staff across the SafeKIDS Program are locals and nearly all of them are Indigenous. It not only means the kids and families are more comfortable and supportive of the services, but there are also significant social returns to the community. It provides employment; in some communities ACT for Kids is the biggest employer. Employment provides self esteem, a sense of pride and achievement; it also helps break the cycle of disadvantage and welfare dependence.

Our staff gain new skills simply from being employed and also from our intensive training. We applied for and received approximately \$500,000 from the Strategic Investment Fund to deliver Certificate III in Community Services Work to our safe house staff. The Healing Foundation has provided \$70,000 for

James Cook University to deliver the Family Wellbeing Program to the same teams to help them deal with their own experiences of grief, loss and stolen generations.

Investment in well trained and supported staff is critical for effective Indigenous and residential care programs. Their learning and understanding of child development, nutrition and strong parenting skills are transferred to their own family and into the wider community. Our staff are proud role models and well respected in community. This in itself will have a longer term impact on the wellbeing of children and young people in community.

The Family Intensive Support service engages well with families and provides therapeutic and practical support to help them address concerns for the safety and wellbeing of their children. In many cases it means they present no further risk of harm and their children can return or remain home.

### **What could work better?**

Prevention:

- An informed whole of government response to address poverty and geographic disadvantage. A thorough assessment of existing challenges in community versus expenditure and programs across local, state and federal government. How can those funds better support long term improvements, not simply short term solutions? While this sounds like a motherhood statement, simply creating a few more opportunities for useful training and employment would be beneficial. Improving the quality of available education will increase engagement and reduce truancy. Could the Police assist with driving lessons and licensing so a driver's license is accessible in community? It's not about quick wins; it's about thinking creatively to achieve long term gains to break the cycle of disadvantage.
- Faster referrals from Child Safety Services to the Family Intensive Support services. There have been cases where families referred to the FIS are already on their second or third Child Protection Order which doesn't allow enough time for the FIS to engage and provide support early enough to prevent a child entering long term out of home care.
- Increased staff and capacity of Family Intensive Support services to meet the need in community. In some communities there are long waiting lists and it is difficult to recruit appropriately qualified staff.
- Easier access to Family Intensive Support services, as we recommend for all other early intervention services. Families want help and will access it directly if they can without a government referral.
- A public health approach with greater investment in universal and secondary services would have long term benefits and cost savings. Well supported families would not reach crisis point requiring expensive, traumatic tertiary interventions. The regional report shows only two of the five safe house communities we work in have early childhood education and care services which means limited respite for parents/carers of young children and less early childhood development opportunities for kids.
- An informed review and update of legislation, definitions and processes so they are tailored to address the unique needs of remote Indigenous communities and stop any further denigration of parents and families as harming or neglecting their children for community-wide issues of disadvantage. Life is different in community, assessment of harm and risk of harm must take

that into consideration. In many cases this would lead to family support to simply address minor issues and prevent children entering out of home care.

- Research into what constitutes good parenting and child rearing practices in remote Indigenous families and wide publication of that research. This will provide training material for Child Safety Officers and other service staff so they have community “best-practice” benchmarks and family role models to apply.

#### Service provision – non-government

- Service agreements need to allow longer timeframes for community engagement and service establishment. The time required differs in each community and should be informed by local reference groups. In Doomadgee, a real safe house success story, this took six months. We learned from setting up the Doomadgee house that rushing the process to meet service agreement deadlines can jeopardise the long term effectiveness of services.
- We have identified a need for staff and sometimes children and families to be able to spend time outside community. This could be fishing, hunting or a healing camp, but would provide some time away from stresses and tension inherent in involvement in child protection. Currently this is hampered by stringent government risk assessments and slow approval processes.
- Faster/prioritised blue card and suitability checks for residential care workers are necessary. With a limited talent pool of appropriate staff within community it is critical that when someone is hired, pending police checks, that their blue card and suitability applications go straight to the top of the pile. Delays in approval mean staff cannot start work, which in some instances can leave under resourced existing safe house staff having to cover the additional workload.
- Where possible, setting up safe houses to provide comfortable separation of young children from young people to give them appropriate personal space and enable more suitable interaction and supervision. Staff can play with younger children while young people can enjoy more age appropriate entertainment or study.

#### Service provision – government

- Grass roots education for community about the role of the Department of Communities, Child Safety and Disability Services. There is still a lot of misunderstanding about the role of the department, what they consider child abuse and neglect to be, the process of investigation and assessment, and the options families have when involved with the child protection system. Websites and brochures are often inaccessible – there is very limited access to computers and often low literacy. The Queensland Government regional report indicates that in March 2012, more than 90% of safe house community households did not have an internet connection.
- Recruit and retain qualified staff who have real understanding and experience of community. The best trained metro Child Safety Officer will be ill-equipped to deal with the nuances of community. In depth cultural training would help those currently in service, while a goal should always be to recruit Indigenous staff. The ACT for Kids Indigenous Workforce Strategy cadetship in Cairns has increased the talent pool of qualified, passionate Indigenous workers.
- Review confidentiality requirements of relevant legislation, particularly the Child Protection Act 1999. We cannot identify a child in our care, however being able to discuss their needs with other service providers like schools, health care and even our reference groups would enable more integrated support and care. It’s also impractical in a community of 600 people, where

everyone knows everyone, and staff are known – it's obvious a child is in the safe house if they're seen being dropped off at school by our worker.

- Seek feedback and make real change to the recruitment and retention of foster and kinship carers. We are told that the assessment process is intimidating and intrusive – strangers coming into their home and assessing how they live. No support is offered to help them address what are usually minor issues to help them meet requirements and become approved carers. It is not currently an engaging, supportive process.
- Further reduce barriers to potential foster and kinship carers. Potential kinship carers don't come forward because of concerns about interfamily conflict. Offering conflict mediation has been successful in New Zealand and would encourage family members to consider kinship care. We also know many potential foster carers are reluctant to apply because some visitors to their home wouldn't pass blue card screening for previous minor problems.
- As with foster care in general, the rules and requirements for departmental permission for children and young people to travel or engage in certain activities differentiates them from their peers and is another barrier to foster carers who want to love and look after them like their own children. Giving carers more autonomy and decision making power would make it more appealing to them, and enable children and young people to participate in cultural activities.

What's missing?

- We have identified significant need for culturally appropriate tertiary therapeutic services, similar to the Intensive Therapy Programs available in metro centres. Children and young people who have experienced trauma from child abuse and neglect need, but cannot access, intensive wrap around therapies including psychology, speech language therapy, occupational therapy and in some cases early education support. We are working on a model that enables us to provide therapies and programs we offer in other areas, in community.

#### **References**

Mandell, D., Carlson, J., Fine, M. and Blackstock, C. (2003) Aboriginal Child Welfare. Partnerships for Children and Families Project. Kitchener: Wilfred Laurier University. Available online at: [http://192.54.242.121/documents/7179/Aboriginal\\_child\\_welfare.pdf](http://192.54.242.121/documents/7179/Aboriginal_child_welfare.pdf)

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