QUEENSLAND

FAMILY MATTERS FORUM

Position Paper

Queensland Aboriginal and Torres Strait Islander Child Protection Peak – QATSICPP (2016).
Queensland Family Matters position paper. QATSICPP in conjunction with the Queensland Family Matters Campaign. Brisbane.

Kids safe in culture, not in care.

There are currently an estimated 3760 Aboriginal and Torres Strait Islander children in out-of-home care in Queensland. At the current rate of growth, it is projected that there will be 4000 by the end of 2016.

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Artist Acknowledgment

The Queensland Family Matters Forum artwork was created by Rachael Sarra, an Indigenous artist and designer from creative agency Gilimbaa. Rachael originates from the Bunda People in Goreng Goreng Country. The artwork depicts hands that symbolise Aboriginal and Torres Strait Islander children who sleep away from their families and communities each night.

In the palm of each hand lies a contemporary interpretation of the traditional symbol for meeting place. The variations of the symbol represent the diversity of the champions who are coming together to tackle this issue, their geographic location, and their communities. Rachael has used an uplifting and optimistic colour palette to symbolise hope and a bright future for kids, being safely cared for in culture and community.

Introduction

Aboriginal and Torres Strait Islander children in Queensland do not have the same education, health, and wellbeing opportunities and outcomes as their non-Indigenous peers.

Aboriginal and Torres Strait Islander children are almost five times more likely to be notified to statutory child protection, and eight times more likely to be in out-of-home care, than other children. While much has been written about negative problems contributing to the large number of Aboriginal and Torres Strait Islander children taken into the care of the child protection system, not enough has been done about developing tangible solutions and actions that are historically informed and respectful, culturally appropriate, and community or family kinship sensitive. Without such solutions and actions, the sad reality for many Aboriginal and Torres Strait Islander children is that they will be disconnected from their family kinship systems and culture, their stories and cultural identity. And the real plight of their parents and families, who suffer as a result of inter-generational disadvantage, mistreatment, and psychological trauma caused by the ongoing impact of colonisation, will continue to be ignored.

"Not enough has been done about developing tangible solutions and actions that are historically informed and respectful, culturally appropriate, and community or family kinship sensitive."

Government strategies aimed at protecting Aboriginal and Torres Strait Islander children have not been effective, they have not engaged families and communities in legitimate partnership, and they are manifestly insufficient to address the scale and significance of the problem.

As part of the *Supporting Families Changing Futures* reforms, the Queensland Government has announced its intention to develop and implement an action plan for vulnerable Aboriginal and Torres Strait Islander children and families, by the end of 2016[1]. The aim of the action plan is to coordinate activity across government and human services sectors to address the disproportionate social and economic disadvantage experienced by Aboriginal and Torres Strait Islander people and communities.

An immediate commitment of the Government is to partner with the *Family Matters: Kids safe in culture, not in care* Queensland Working Group in the development and implementation of the action plan. *Family Matters*[2] is a national campaign that aims to eliminate the disproportionate representation of Aboriginal and Torres Strait Islander children in Australia's child protection systems.

Aim of position paper

This paper outlines the position of the Family Matters Queensland Leaders Group and aims to provide the basis for the action plan. It sets out all the issues in addressing the disproportionate representation of Aboriginal and Torres Strait Islander children and families in the child protection system in Queensland, and outlines all the areas in which action is required to address this problem. It aims to establish a comprehensive framework for addressing the over-representation of Aboriginal and Torres Strait Islander children in out-of-home care, and the associated disparity of Aboriginal and Torres Strait Islander families not having equitable access to suitable services (including universal and secondary support services).

Scale and nature of the problem in Queensland

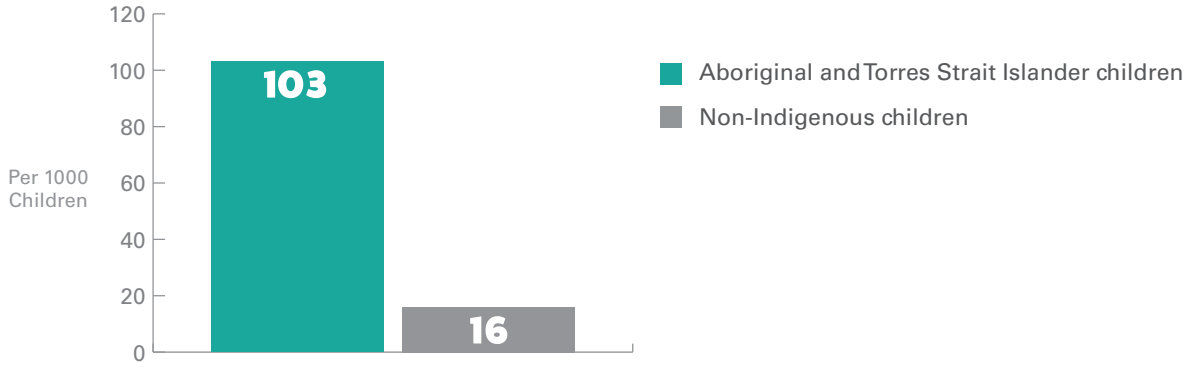
Aboriginal and Torres Strait Islander families are over-represented in the coercive end of the child protection system (investigations, orders and in care) and under-represented in receiving universal, family support, and specialist services that engage families effectively to meet needs. Developing an action plan to address this disproportionate representation must be informed by a thorough understanding of the scale and nature of the problem and its specific dimensions in Queensland.

Understanding the levels of disproportionality at various decision-making points helps us to understand why it occurs, the efficacy of current policies and programs, and the best ways to intervene.

The over-representation of Aboriginal and Torres Strait Islander children in the statutory child protection intervention process is a long-term trend, but it significantly worsened following implementation of recommendations from the 2004 Crime and Misconduct Commission inquiry into abuse of children in foster care, and has continued to worsen post-implementation of recommendations from the 2013 Queensland Child Protection Commission of Inquiry (QCPCI). At 30 June 2003 (when the CMC Inquiry commenced), Aboriginal and Torres Strait Islander children comprised **21.5%** of all children living in out-of-home care[3]. By 30 June 2012 (at the commencement of the QCPCI), Aboriginal and Torres Strait Islander children comprised **38.0%** of all children living in out-of-home care[4], and at 30 June 2015, two years after the release of the report, they comprised **41.7%** of children in out-of-home care . Similarly, adherence to the placement domain of the Aboriginal and Torres Strait Islander Child Placement Principle has plummeted since the CMC Inquiry, with only **57%** of Aboriginal and Torres Strait Islander children placed with extended family or other Indigenous carers in 2015.

Looking at the most recent data, in 2014-15, 103 out of every 1000 Aboriginal and Torres Strait Islander children were subject to statutory child protection intervention compared with a rate of 16 per 1000 for non-Indigenous children[6].

Children Subject to Statutory Child Protection Interventions in 2014-15:



That is, Aboriginal and Torres Strait Islander children were 6.4 times more likely than non-Indigenous children to be subject to statutory intervention. The increases in disparity rates over time are alarming (see Table below).

These disparities are not inevitable or to be expected. They have occurred as a result of policy choices made, actions taken and not taken. The needs of Aboriginal and Torres Strait Islander children and families have not markedly increased in this period – it is changes to legislation, policies, programs and practices that have led to increased inequity and it is critical that these responses change.

Disparity in substantiation rate at 30 June:		Disparity in out-of-home care rates:	
2003 (Prior to the CMC Inquiry)	1.6	2003	4.1
2012 (At commencement of the QCPCI)	6.0	2012	8.7
2015 (Latest Data)	6.7	2015	9.0

Sources[7]

- Across Queensland in 2014-15 the notification rate for Aboriginal and Torres Strait Islander children was 64.9 per 1000, compared to 13.4 for non-Indigenous children, a disparity rate of 4.8 (an increase from 4.4 in 2012-13). Notifications about harm or risk of harm to Aboriginal and Torres Strait children were 6.7 times more likely to be substantiated than for non-Indigenous children[8].
- Aboriginal and Torres Strait Islander children were most likely to be notified for neglect and emotional abuse, with 50% of substantiations of Aboriginal and Torres Strait Islander children for neglect and 29% for emotional abuse compared with 38% and 39% respectively for non-Indigenous children, **so strategies must tackle these underlying causes.**
- At 30 June 2015, Aboriginal and Torres Strait Islander children comprised 42% of all children in out-of-home care, while they were only 8% of the child population. They were 8 times more likely to be in out-of-home care placements than non-Indigenous children (40 per 1000 compared to 5 per 1000 non-Indigenous children)[9].
- At 30 June 2015, 41% of the 2195 children subject to Intervention with Parental Agreement were Aboriginal and Torres Strait Islander children, only a slight increase from 37% at 30 June 2012[10].
- Of the 4141 children who commenced intensive family support services in 2014-15 in Queensland, 1411 (34%) were Aboriginal and Torres Strait Islander children[11].

There are marked differences between regional areas of Queensland with some regions having much higher disparity rates than the average, and also marked differences in rates of placement compared to in-home interventions.

Solutions must be tailored to place, based on local data, and with local community input.

Connections in Care

For the past decade, the length of time children stay in care has been increasing[12]. Duration in care is the main driver of the increasing numbers of children in care, so reducing the prevalence of Aboriginal and Torres Strait Islander children in care requires much greater attention to family preservation, actively engaging with parents immediately after a child enters care to attempt to resolve family problems, keeping the child connected to family and community while in care, and family reunification.

But children's links to family and culture are being eroded in out-of-home care. As at 30 June 2015, of the Aboriginal and Torres Strait Islander children in out-of-home care, only 25% were placed with Indigenous relatives or kin and 17% were placed with other relatives or kin, a total of 42%. A further 15% were living with non-related Indigenous carers, making a total of 57% living with family members or Indigenous carers in accordance with the placement requirement of the Child Placement Principle[13].

Placement of Aboriginal and Torres Strait Island Children in out-of-home care:

25%
Aboriginal and Torres Strait Islander children in out-of-home care were placed with Indigenous relatives or kin.

17%
Aboriginal and Torres Strait Islander children in out-of-home care were placed with other relatives or kin.

15%
Aboriginal and Torres Strait Islander children in out-of-home care were living with non-related Indigenous carers,

Children's links to family and culture are being eroded in out-of-home care.

> **"The right of our children to their culture, along with the other core human rights of children - to life, to family, to protection - are non-negotiable."**
>
> **Andrew Jackomos,**
> **Victorian Commissioner for Aboriginal Children and Young People**

Over-representation in Youth Justice System

The over-representation of Aboriginal and Torres Strait Islander children is also apparent in other areas. In the area of youth justice in 2014-15, Aboriginal and Torres Strait Islander children and young people made up more than half (56%) of those aged 10 to 17 years under youth justice supervision[14]. More than half (55%) of young people aged 10 to 17 years under community-based supervision on an average day in Queensland were Indigenous, and nearly two-thirds (65%) of young people in detention were Indigenous[15]. Aboriginal and Torres Strait Islander children and young people were 16 times more likely to be on youth justice supervision orders (218 per 1000 Indigenous children compared with a rate of 13 per 1000 non-Indigenous children). The level of Indigenous over-representation (as measured by the rate ratio) was greater in detention (22 times as likely) than in community-based supervision (16 times)[16].

CHANGE THE RECORD
Smarter Justice. Safer Communities.

Prevention is key.
Services not Sentences.
Rehabilitation and family support must be prioritised over detention.

Representation of Children in the Justice System:

The pathway from child protection to youth justice orders is well established. Data is not publicly available for Queensland, but Australia-wide in 2013–14, 7% of children who were the subject of a care and protection order were also under youth justice supervision. One-quarter of young people in detention in 2013–14 were also in the child protection system in the same year[17].

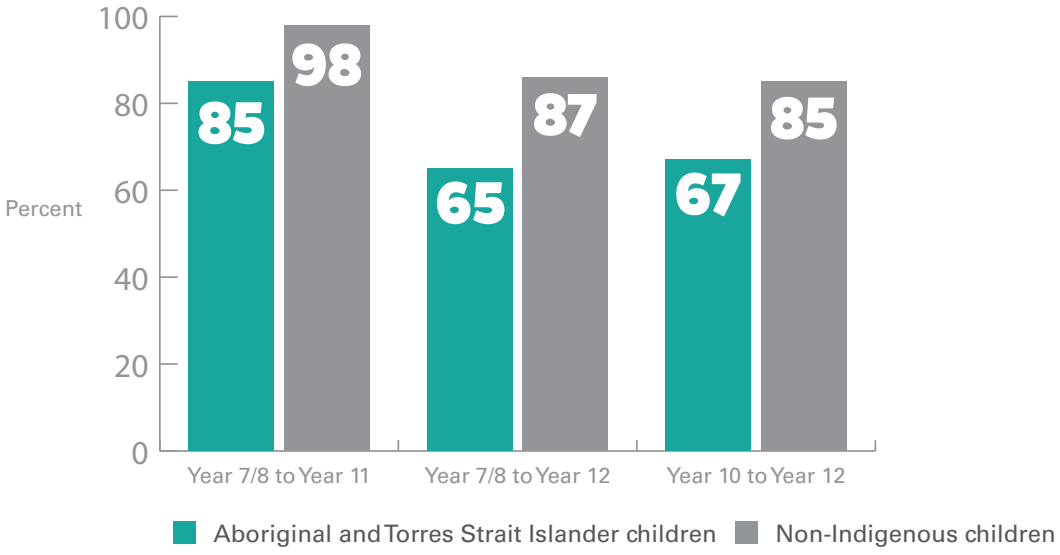
Inequity in Education

In the area of early childhood services, there is uneven accessibility to services across the State, and overall a lower proportion of Aboriginal and Torres Strait Islander children attend a kindy program compared with other children. This has adverse effects on school readiness.

In the area of education[18] in 2013, retention rates for Aboriginal and Torres Strait Islander children were lower from Year 7/8 to Year 12. Aboriginal and Torres Strait Islander young people were less likely to complete year 12 than non-Indigenous young people.

Disparity in school retention rates:

- 85% for Indigenous students and 98% for non-Indigenous students from Year 7/8 to Year 11
- 65% for Indigenous students and 87% for non-Indigenous students from Year 7/8 to Year 12
- 67% for Indigenous students and 85% for non-Indigenous students from Year 10 to Year 12.



"It is not enough for Aboriginal children to show up. Attendance measured in isolation of achievement and attainment sends a message that we expect less of Aboriginal children and young people and deprive them of the feeling of accomplishment and the solid platform from which to build upon and experience ongoing success."

Natalie Lewis,
CEO, QATSICPP

Addressing Social Determinants of Health

In the area of health, it is important that children get a good start in life, but Aboriginal and Torres Strait Islander women are more likely to have a low birth weight baby than non-Indigenous women.

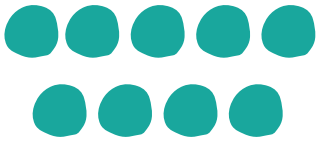
In 2011, the low birth-weight rate for live born babies born to Indigenous mothers was 2.3 times as high as for those with a non-Indigenous mother (10% compared with 4%)[19].

In 2009-2013, the mortality rate for Indigenous children aged 0 to 4 years was 1.7 times higher than for non-Indigenous children (183 per 100,000 and 107 per 100,000, respectively). This was a significant rate difference of 76 per 100,000[20]. The mortality rate for Indigenous infants was 1.6 times higher than for non-Indigenous infants (7.2 per 1,000 live births and 4.5 per 1,000 live births, respectively). This was a significant rate difference of 2.7 per 1,000 live births[21].

Tragically, the child death rate is much higher for Aboriginal and Torres Strait Islander children than other children. Aboriginal and Torres Strait Islander children accounted for 16% of all deaths and died at 2.3 times the rate of non-Indigenous children[22].

The greatest proportion of Indigenous deaths occurred among children under 1 year (61.6%) followed by 10 to 14 year olds. Mortality rates from diseases and morbid conditions have generally been 1.5 to 2 times the rate for non-Indigenous children over the last 11 years.

The rate of suicide for Aboriginal and Torres Strait Islander children was more than 3 times that of non-Indigenous children[23].



Aboriginal and Torres Strait Islander youth suicides

Non-Indigenous youth suicides

Increased access to culturally safe healing and mental health services is vital.

Causes of Disparity

Over-representation of Aboriginal and Torres Strait Islander children in the Queensland child protection system is not dissimilar to the situation in other Australian jurisdictions, and for indigenous peoples in Canada, the United States, and New Zealand. Research has identified a range of structural, system, and case-level factors that create and perpetuate disproportional representation of indigenous children and families in child welfare systems across the world.

System or Macro Level Factors

The social and economic impacts of colonisation - land dispossession, forced removal to prescribed areas, state regulation of family life, forced separation of children from their parents, unpaid labour, institutional care, and racism – underpin the over-representation of indigenous peoples in welfare systems. They have led to marginalisation, dis-empowerment, reliance on welfare, and entrenched disadvantage in communities; all conditions that adversely impact upon children's well-being.

Actions must address direct causes (the stated reasons for a child entering the care system, such as neglect related to parental substance misuse, violence, or homelessness) and indirect causes and cumulative effects (the reasons behind the personal and family turmoil experienced by indigenous people). Taking into account only direct or immediate causes misses cumulative disadvantage. For example, discrimination against one generation negatively affects health, work opportunities, and wealth accumulation for later generations. Similarly living in an area of high unemployment lessens a parent's chance of a job and good family health care. The impacts of inter-generational trauma caused by past policies of discrimination, especially in relation to the experiences of the Stolen Generations, must also be addressed in working with families. Addressing these conditions is a vital part of the picture, because it is not acceptable that disproportionately experiencing poverty and disadvantage, and trauma leads to Aboriginal and Torres Strait Islander people being more likely to have their children removed from their care.

Therefore addressing over-representation requires attention to universal services and broad social and economic policies. Policies relating to employment, housing, health, education, early childhood services, legal aid, criminal justice, policing, and income support are all relevant to addressing the macro-level causes of Aboriginal and Torres Strait Islander disproportionate involvement in the child protection system.

Government resources must be directed to the areas of greatest need. Given high levels of disadvantage, it follows that Aboriginal and Torres Strait Islander families may have more need for supportive family services and specialist services that deal with problems relating to domestic violence, drugs and alcohol, or mental health. It is important that such services are fully accessible and culturally safe for Aboriginal and Torres Strait Islander people.

As stated, disparity or disproportionate representation in child protection systems comprises both over-representation in statutory systems and inequitable access to services and resources. Access and equity require consideration of the needs and preferences of Aboriginal and Torres Strait Islander people in accessing services. Access barriers can include insufficient services to meet the level of need, lack of cultural safety and trust in services, lack of diversity in staffing, geographic and transport barriers.

Micro or Case-Level Factors

Child protection and family support agencies cannot control all aspects of racial inequalities, but they can design services appropriate to the needs of the diverse populations they serve. Micro factors include system biases such as a lack of cross-cultural competence, culturally inappropriate or inaccessible service delivery, bias in decisions about referrals or reporting, assessment, or other case matters, and resources allocated disproportionately to coercive interventions and out-of-home care options, leaving insufficient resources for in-home and voluntary services.

Strengths-based approaches that view culture as a protective factor are required. These acknowledge that differences in child-rearing such as supervision modes or the involvement of the extended family are a strength, not a deficit. For Aboriginal and Torres Strait Islander children, decisions about 'the best interests of the child' in placement or reunification must recognise the importance of the child's cultural identity to their well-being.

As it is for all children, the objective should be for indigenous children to only enter the child protection system if they need to and to only stay as long as necessary. The fact that over-representation increases at each decision-making point in statutory child protection intervention points to the involvement of case-level factors. The practices of child welfare agencies – reporting arrangements, risk assessments, resourcing, and staffing are also factors that contribute to over-representation of indigenous children. Consideration of practice approaches is needed to ensure a culturally competent workforce that is capable of engaging respectfully with Aboriginal and Torres Strait Islander families, communities and agencies.

Policy Context

In addressing disproportional representation in child protection, the Action Plan must link with other national, state and community-led initiatives relevant to addressing disproportionality of Aboriginal and Torres Strait Islander children and families in service systems.

Appendix 1 provides a summary of some of these related initiatives:

- Queensland Child Protection Commission of Inquiry (QCPCI)
- Not now, not ever
- Closing the Gap
- National Framework for Protecting Australia's Children 3rd Action Plan

The recommendations and strategies developed in these policy processes provide part of the answer to addressing disproportionate representation, but they are partial and insufficient. Moreover, disconnected implementation processes will mitigate against meaningful progress in improving child and family wellbeing. The Action Plan must capitalise on these other initiatives, and link them together to build a comprehensive response.

Evidence-Based Solutions

Since colonisation, harsh and discriminatory policies and practices, including the forced removal of children from their families, have led to feelings of loss, grief and injustice about the involvement of "welfare" services in the lives of Aboriginal and Torres Strait Islander people. This Action Plan must tackle the unfinished business of *Bringing Them Home*, to address the finding made nearly 20 years ago that practices of the stolen generations were a violation of human rights, and that reparation was required to guarantee against repetition of the past wrongs of removals[24]. This involves recognition that a greater degree of control should be ceded by government to Aboriginal and Torres Strait Islander communities in the administration of child protection and youth justice.

Coercive government has not been effective to date in protecting Aboriginal and Torres Strait Islander children or strengthening family functioning. A substantial change in direction is required. Alternative policies and programs would focus on children's quality of life and family living conditions, place-based and community-led approaches, and genuine collaboration with community-controlled services.

In this position paper, the building blocks of the Family Matters campaign have been used to set out broad directions for the evidence-based policy solutions required in the Action Plan.

The Family Matters Building Blocks for Action are:

BUILDING BLOCK

Secure access to quality universal and targeted services necessary for Aboriginal and Torres Strait Islander children to thrive.

BUILDING BLOCK

Ensure that Aboriginal and Torres Strait Islander people and organisations participate in and have control over decisions that affect their children.

BUILDING BLOCK

Ensure culturally safe and responsive law, policy and practices.

BUILDING BLOCK

Hold governments and services accountable to Aboriginal and Torres Strait Islander people.

Improving Access to Universal, Early Intervention and Family Support Services

Clearly government action is required to remedy this situation. It is not the fact of government intervention that is problematic, but the nature of the intervention. The standard government strategies to develop more effective and culturally sensitive responses to improve the welfare of indigenous children in Australia, in the main, have not achieved desired outcomes. These have been ad hoc, insufficient given the scale of the problem, not sustained, lacking an evidence base, and not comprehensive. It is important to develop strategies that go further than improving the quality of services provided after referral, and to also prevent the rate of entry to the child protection system.

If proportionately more Aboriginal and Torres Strait Islander families experience hardships, live in disadvantaged communities, and have more unmet needs, then children and their parents are more likely to be in need of culturally appropriate support, practical assistance and therapeutic services, and more of the children are likely to be at risk of harm. These structural factors can affect rates of entry into the family support and child protection systems.

Despite good intentions, and contrary evidence, most previous strategies have considered child protection systems in isolation. The departure from this approach, intended through the Queensland Action Plan offers a significant opportunity. Coordinated action is imperative from universal housing, health, education, parenting services, early childhood, and income support systems - they are integral to the response. A commitment to prevention and early intervention will require significant investment to ensure the required spread, equity and adequacy of responses where they are needed across Queensland.

Aboriginal and Torres Strait Islander parents may also have less access to formal support services as services may be less available or less effective (either insufficient to meet demand or lacking cultural competence in assisting indigenous families) and to informal family and social supports (because extended families and communities have few resources).

Instead of relying on removing children from their families, the focus should be shifted to improving family functioning and relationships. Macro level factors that affect the capacity of parents to adequately care for their children must be identified and comprehensively addressed before children come to the attention of authorities or certainly in the early stages to mitigate more intrusive interventions.

Without sustained commitment and high level leadership to also building up a targeted secondary system that responds to housing, drug and alcohol, family violence, health, and mental health issues, Aboriginal and Torres Strait Islander children will continue to come in contact with and enter the system at a higher rate than non-Indigenous children.

Evidence-based alternatives that would reduce the number and rate of Aboriginal and Torres Strait Islander children entering or further entering the child protection system include:

- Non-stigmatising, preventative family support programs
- Family preservation and family reunification programs
- Intensive supports and practical assistance to parents and extended families to address underlying issues
- Healing-focused services

Research shows accessibility is enhanced through community development initiatives to improve living conditions at the 'place' level and working in partnership with communities to encourage families to be more actively involved in planning and delivering services.

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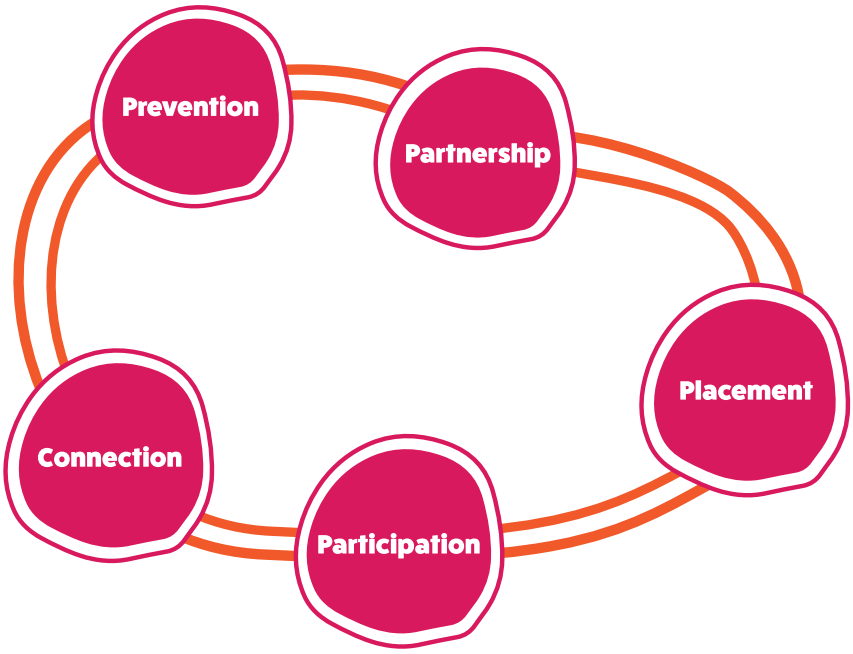
Ensure culturally safe and responsive law, policy and practices for Aboriginal and Torres Strait Islander children and families

The Aboriginal and Torres Strait Islander Child Placement Principle has been the foundation of addressing over-representation in the child protection system since the 1970s. Unfortunately government commitment to the Principle has not always been evident. The Child Placement Principle is not simply about where or with whom an Aboriginal or Torres Strait Islander child is placed. It recognises that Aboriginal and Torres Strait Islander people have the knowledge and experience to make the best decisions concerning their children and recognises the importance of each child staying connected to their family, community, culture and country. The Principle promotes a partnership between government and Aboriginal and Torres Strait Islander communities in decision making about children's welfare in order to ensure that the connections are understood and maintained.

The Principle contains 5 elements:



Prevention

There are short and long term wellbeing and economic benefits to investing early in the life of a problem, and early in a child's life. For Aboriginal and Torres Strait Islander children, prevention encompasses the right of every child to be brought up in their own family and community. This includes equitable access to quality universal, prevention and early intervention services to heal and strengthen families and communities, keeping them together.

Partnership

There must be independent community representatives participating in, jointly making, decisions about the safety and wellbeing of Aboriginal and Torres Strait Islander children (including intake, assessment, intervention, placement and care, judicial decision making). This is broader than community representatives providing cultural advice or information, or being consulted. This element also encompasses partnership with Aboriginal and Torres Strait Islander organisations and communities in the design and delivery of service responses.

Placement

Children who need to be in statutory care must be placed in accordance with the agreed hierarchy of out-of-home care placement options, with decisions underpinned by community and family participation.

Participation

The evidence shows that when children, parents and other family members participate in the decisions that affect their lives, decisions about intervention, placement and care, and orders, are more appropriate and likely to work. Participation extends to participation by community and cultural leadership in decisions that impact upon children and families.

Connection

Every effort must be made to support and maintain family, cultural and community connections for Aboriginal and Torres Strait Islander children in out-of-home care.
The child's enduring right to connection to kin, country and culture is must be a central concern in making decisions about their immediate and long term wellbeing.

Taking the time to work with family to identify kin for full-time or shared care, supporting frequent family contact with parents for children placed with kinship carers, and working to reunify children and families, especially children placed with kinship carers, are actions that would ensure Aboriginal and Torres Strait Islander children maintain their family and community connections while in care and exit the system in a timely manner.

Other strategies to improve Aboriginal and Torres Strait Islander children's experience of the child protection system include:

- Working in partnership with community-controlled child protection agencies and 'recognised entities'
- Ensuring independent Aboriginal and Torres Strait Islander input to key decisions eg. Risk and needs assessment, family group conferences, placement
- Closely monitoring service delivery to Indigenous families at the local level (responsibility at a regional level to monitor and report on entry to care, placements with kin, placements with siblings, and decisions about orders and long-term care)
- Increasing the use of voluntary intervention for Aboriginal and Torres Strait Islander families
- Ensuring timely case decision-making to prevent drift in care.

Ensure that Aboriginal and Torres Strait Islander people and organisations participate in and have control over decisions that affect their children

Governments must invest in Aboriginal and Torres Strait Islander community controlled child protection services.

There are too many non-indigenous agencies approved for funding to provide services to Aboriginal and Torres Strait Islander families, which have not been able to achieve positive results.

These services often have only rudimentary partnerships with Aboriginal and Torres Strait Islander agencies, employ few Aboriginal and Torres Strait Islander staff, and are not trusted service providers. Across the State, only a small number of community-led agencies are funded to provide universal and targeted services. So, not only are there too few culturally competent services where Aboriginal and Torres Strait Islander families need them, there can be a mis-match with the level and type of service required to meet the different types of needs.

Better outcomes for Aboriginal and Torres Strait Islander children, and indeed any target group, are best achieved when the target population has input and control over the delivery of services and organisations work in partnership with communities. Incorporating Aboriginal and Torres Strait Islander values, knowledge and cultural practices when developing service models is also critical.

The provision of comprehensive and integrated services for Aboriginal and Torres Strait Islander children and families can be achieved by expanding the functions of community controlled child protection services to encompass prevention, early intervention for at-risk families, and statutory intervention.

Hold governments and services accountable to Aboriginal and Torres Strait Islander people

Aboriginal and Torres Strait Islander children's experience of the child protection system is different, and more intrusive, than for other children. Any bias or inconsistency in decision making must be examined and eliminated. High-level leadership and commitment to reducing over-representation has been found to be essential if change is to occur.

There needs to be ongoing monitoring of racial disparities in service quality and outcomes for Aboriginal and Torres Strait Islander children. Data is a crucial lever for change. Monitoring and accountability mechanisms must incorporate proper monitoring, including monitoring regional disparities to address implementation gaps in some areas. Data can be used to inform solutions so that remedies are tailored to suit different areas. Importantly, the concept of dual accountability needs to be acknowledged and managed in a balanced way, for all service providers, so that we are clear as to who's needs are being met.

To keep reforms on track, oversight, advocacy and accountability mechanisms are vital, for example through QATSICPP, the Queensland Family and Child Commission, Child Death Review Panels, and other oversight bodies.

Conclusion

Making effective responses to child abuse and neglect in Aboriginal and Torres Strait Islander communities is a vital element of achieving social justice goals of equity, fairness and non-discrimination. It is not sufficient to provide Aboriginal and Torres Strait Islander communities with the same level or types of services as others, when their needs are so much greater and the pattern of their involvement with the child welfare system is so markedly different.

Changes will be required at different levels to:

Because Aboriginal and Torres Strait Islander disparity is a significant problem that requires long-term solutions, it is important that action and progress be independently tracked over time

Within 2 years → 5 years → 10 years → 20 years

The next step is to develop the Action Plan in a collaborative process with all stakeholders. The format for the Action Plan is attached (Appendix 2).

Appendices

Appendix 1: Policy Context

The Queensland Child Protection Commission of Inquiry

The Queensland Child Protection Commission of Inquiry[25] reported in June 2013, making 121 recommendations. While the recommendations across the report are all relevant to Aboriginal and Torres Strait Islander children, families and communities, Chapter 11 was entitled, Aboriginal and Torres Strait children and the child protection system. It contained recommendations on: the role and functions of 'recognised entities'; enhanced support for kinship and foster carers; regional integrated service models; a peak body focused on developing service capacity; a review of Safe Houses; and specific recommendations about designing service responses in discrete communities.

The implementation of responses to the recommendations in chapter 11 is led by the Aboriginal and Torres Strait Islander Service System Reform Group. QATSICPP is a member of this group as well as other cross-sector governance groups - the Reform Leaders Group (RLG) and the Department of Communities, Child Safety and Disability Services' Stakeholder Advisory Group (SAG).

Particular recommendations:

11.2 Assessment of the adequacy of universal, early intervention and family support services, strategies and models to enhance accessibility of services and improve collaboration between service providers, and incorporating a collaborative case management approach, particularly in discrete communities) and 11.11 (community based referral processes and differential responses in discrete communities): Consultants were engaged "to find ways to improve access to universal, early intervention and family support services, and develop and implement responses that support children and families in discrete Indigenous communities. This includes developing appropriate community-based referral processes and differential responses that ensure Aboriginal and Torres Strait Islander families and children have access to the right services at the right time, as well as building more effective partnerships between families, communities, regional service networks and non-government and government agencies." The department has undertaken to respectfully partner with each community to meet specific needs so families feel empowered and supported and project outcomes are grounded in community ownership and shared decision-making.

11.12 Safe house model review: Consultants have been engaged to undertake the review of the model in discrete communities, including to identify the strengths, benefits and challenges of the intended safe house model. The review is not yet concluded.

7.3 Aboriginal family led decision making and shared practice models. Three alternative Aboriginal family-led decision making and shared practice models are being trialled by community-controlled organisations in partnership with the department. The trials are designed to empower families to make informed choices about their children, while the department works with families to ensure the safety of the children. SNAICC was contracted to lead the design and implementation of the trials. Each trial site has a local reference group to promote self-determination of community-controlled organisations, bring local knowledge and provide cultural expertise. The trials will be independently evaluated. The Ipswich-based trial focuses on family-led decision making as an early intervention response for assessment and planning with families at risk of entry to the statutory child protection system. The Mt Isa trial involves the recognised entity which will independently led a family group conference before the department's investigation and assessment is finalised to collaboratively identify and address the safety concerns with the family to prevent statutory intervention or minimise the degree and length of intervention. The third model being trialled in Cairns and the Torres Strait Islands by the recognised entities, which co-lead family group meetings to develop case plans. The second and third trials all involve the REs identifying potential carers, and preparing cultural support and transition from care plans. Family participation in the trials commenced in April 2016.

11.4 Training needs of RE workers: The response to recommendation 11.4 has been expanded to encompass a comprehensive review of the recognised entity program, in recognition of the need to reduce over-representation and ensure children in out of home care remain connected to culture, country and kin. The review will identify: opportunities to enhance REs' role and function "so that staff can be more meaningful participants in providing relevant cultural and family advice at significant decision making points", revised arrangements to better meet the families' and communities' needs and aspirations and support children to stay at home, and staff skill and capability requisites to undertake the revised arrangements. This work has recently commenced.

11.6 Regional integrated child and family services: New community-run Family Wellbeing Services and the functions of existing ATSI FSS and tertiary, targeted and secondary support services will be combined to establish Aboriginal and Torres Strait Islander Family Wellbeing services across Queensland. The services will work with families in prevention, early intervention through to intensive support for families already in contact with the child protection system.

11.7 Sector and service development: In recognition that community-controlled agencies play a critical role in delivering better outcomes for Aboriginal and Torres Strait Islander children, the department has funded QATSICPP to undertake a range of capacity and capability building projects within the non-government sector to improve families' access to culturally appropriate community controlled and mainstream services and care, including universal and secondary support services, ensure Aboriginal and Torres Strait Islander agencies are supported to deliver quality services, and deliver better designed tertiary services for Aboriginal and Torres Strait Islander children and families.

Significant investment has been made in Family and Child Connect (FaCC) and Intensive Family Support (IFS) services in most parts of Queensland. FaCC services were established in response to recommendation 4.5 to establish a community-based intake option for reporting concerns about abuse and neglect, ostensibly to support families earlier and to keep children in the family home. To date, the evidence is that the services are not working for Aboriginal and Torres Strait Islander children. Mandatory reporters have changed reporting behaviour for non-Indigenous children but Aboriginal and Torres Strait Islander children are continuing to be reported to the statutory authority, if reported at all, and those reports are not necessarily referred to the local FaCC or IFS service. In addition, many of the mainstream providers of FaCC and IFS services do not have established partnerships with Aboriginal and Torres Strait Islander organisations.

By specifying target groups as families with complex and / or multiple needs for the, investment has continued to go into intensive (aka secondary to the department) services rather than more preventative and early intervention services. The dollars have almost exclusively gone to non-Indigenous services that are expected to be accessible to Aboriginal and Torres Strait Islander families. Mainstream services do not have a good track record in being accessible. Funded services were set a target of achieving 25% of clientele as Aboriginal or Torres Strait Islander, but no mainstream agency so far has been able to demonstrate that it is meeting that target. As a result, Aboriginal and Torres Strait Islander families are missing out on an equitable share of services and resources.

There were significant gaps in the recommendations of the QCPCI. Notable gaps were investing in prevention, preservation, reunification and post-reunification services. Ensuring children do not have lengthy stays in care is vital to reducing over-representation.

Not Now Not Ever

On 28 February 2015 the Premier announced the release of the report of the Special Taskforce on Domestic and Family Violence, *Not Now, Not Ever - Putting an End to Domestic and Family Violence in Queensland* [26]. The Taskforce described a bleak and disturbing picture for Aboriginal and Torres Strait Islander communities, which experience disproportionately high levels of violence and domestic violence. Aboriginal and Torres Strait Islanders were found to be more vulnerable and at risk of being abused in a domestic or family situation, than others in the community. A lack of effective support services and poor access to the justice system were noted as compounding violence and abuse.

Recommendation 9 was to develop, in collaboration with local communities, a place-based, culturally appropriate integrated response to domestic and family violence in discrete communities that includes meeting the needs of women and children affected by domestic violence through wraparound support services. Increased funding and availability for community-driven and holistic responses to Indigenous male perpetrators was also recommended. The report also recommended trials of integrated responses in urban and regional areas (with outreach programs to rural and remote communities) (recommendation 74) and review and evaluation of the trial sites for eventual transition to a statewide integrated service response (recommendation 75). Research and design commenced in 2015 to prepare for pilots in one urban, one regional and one remote Indigenous community to be conducted in 2016–17.

Other recommendations particularly relevant to Aboriginal and Torres Strait Islander communities included a review to address the impact of DFV on people with disabilities (recommendation 10), ante natal screening (recommendation 54), common assessment framework (recommendation 77), requirements to notify the Family Responsibilities Commission about protection orders made in designated communities (recommendation 93), and using trained and skilled magistrates where specialist courts are not feasible (recommendation 100).

An independent Domestic and Family Violence Implementation Council has been established to oversight and ensure accountability in the implementation of the report's recommendations, with representatives from Aboriginal and Torres Strait Islander communities.

Closing the gap

In 2008, the Council of Australian Governments (COAG) set six targets intended to redress disadvantage experienced by Aboriginal and Torres Strait Islanders in life expectancy, child mortality, education and employment. 'Closing the Gap'[27] commits government, as well as the private and not-for-profit sectors, communities and individuals. The targets, set out in the National Indigenous Reform Agreement, are to:

- Close the gap in life expectancy within a generation (by 2031).
- Halve the gap in mortality rates for Indigenous children under five by 2018.
- Ensure access to early childhood education for all Indigenous four year olds in remote communities by 2013.
- Halve the gap in reading, writing and numeracy achievements for children by 2018.
- Halve the gap for Indigenous students in Year 12 (or equivalent) attainment rates by 2020.
- Halve the gap in employment outcomes between Indigenous and other Australians by 2018.

Government strategies to support the delivery of targets include Closing the Gap in Indigenous Health Outcomes, Supporting Indigenous Early Childhood Development, Improving Remote Indigenous Housing, Investments in Schooling, and New Remote Service Delivery Model.

Another area of relevance to the Action Plan is safe and healthy communities, which focuses on Aboriginal and Torres Strait Islanders disproportionately high experiences of violence, substance misuse, and incarceration. *Change the record: Smarter justice, safer communities*[28] aims to close the gap in imprisonment and cutting the disproportionate rates of violence with priority strategies for women and children. Changing the Record is about working with Aboriginal and Torres Strait Islander communities to invest in holistic early intervention, prevention and diversion strategies, as "these are smarter, evidence-based and more cost-effective solutions that increase safety, address the root causes of violence against women and children, cut re-offending and imprisonment rates, and build stronger communities". The 12 key principles for reform embrace localised, tailored solutions, recognising the drivers for imprisonment, alternatives to imprisonment, increasing safety by addressing the root causes of violence against women and children and building stronger communities, and providing services especially to support reintegration following prison and includes the provision of health care, training and employment, and affordable housing.

NACCHO's *Investing in healthy futures for generational change, 10 point plan 2013-2030*[29] reaffirms a grassroots model and the benefits of ACCHOs providing culturally safe alternatives that are working to improve health outcomes where other health services have failed. Steps to success and key areas for action are identified. These include significant investment in the community-controlled sector, locally driven innovation, Aboriginal and Torres Strait Islander leadership, community engagement and participation, research and data.

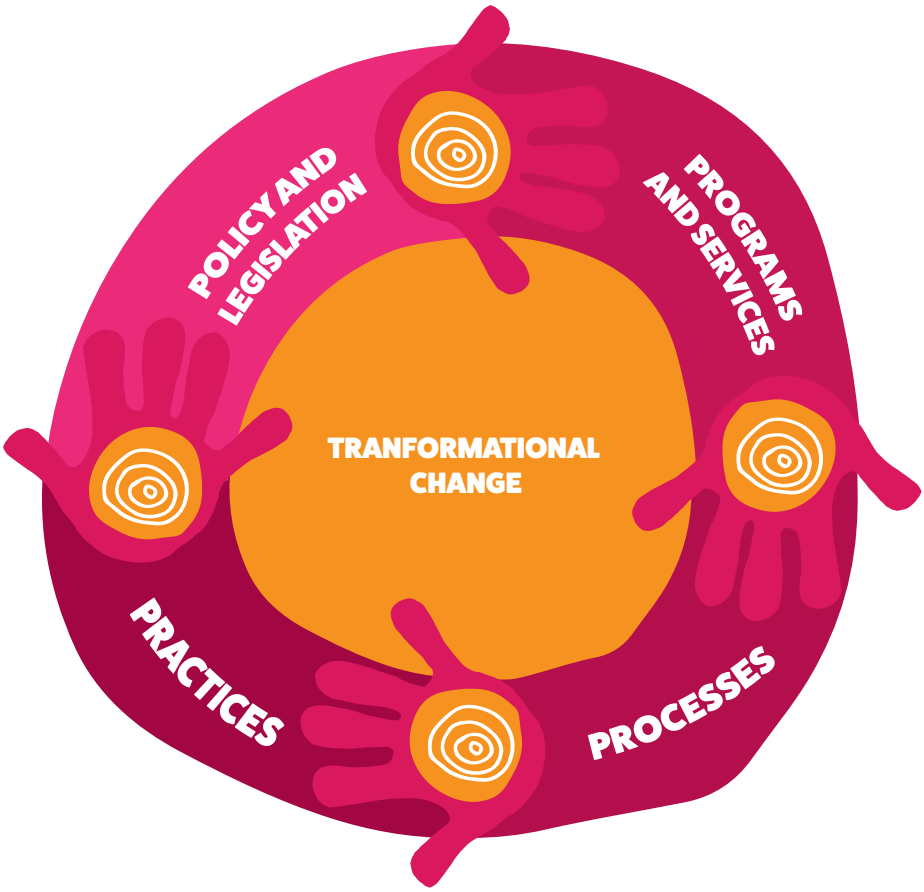
National Framework for Protecting Australia's Children 3rd Action Plan

The third action plan, 2015-2018 of the *National Framework for Protecting Australia's Children 2009-2020, Driving change: intervening early*[30], contains three strategies and two cross-cutting focus areas. The first cross-cutting focus area is Aboriginal and Torres Strait Islander children and families to improve outcomes for Aboriginal and Torres Strait Islander children to reduce the number needing child protection services. There is an aspiration that all five elements of the Aboriginal and Torres Strait Islander Child Placement Principle will be fully implemented by all states and territories. Advice and expertise on the implementation of actions and strategies will be provided by a new Aboriginal and Torres Strait Islander working group, which will also report on progress and outcomes to the National Forum for Protecting Australia's Children.

The three strategies are:

1. Early intervention with a focus on the early years, particularly the first 1000 days for a child – specific areas for action include a) the Commonwealth developing and trialling an effective model of services and support to better support Aboriginal and Torres Strait Islander families and communities in the first 1000 days, and b) implementing joined up responses for families with young children, across agencies and sectors, with a focus on Aboriginal and Torres Strait Islander communities, by examining place-based models to identify critical success factors and Commonwealth support for integrating child care, maternal and child health, and family support services in a number of communities through the Community Child Care Fund.
2. Helping young people in out of home care to thrive in adulthood – direct actions to break the cycle of disadvantage for these young people, and their future children, and contributing to addressing issues raised in the recommendations from the Senate Inquiry into Out of Home Care.
3. Organisations responding better to children and young people to keep them safe – building on the *National framework: Creating safe environments for children* to incorporate child safety into the way they operate.

Appendix 2: Framework for the Action Plan



Building Block

Secure access to quality universal and targeted services necessary for Aboriginal and Torres Strait Islander children to thrive.

Potential Sites for Action

- Universal services – address social determinants of health and underlying causes of violence through better housing, education, employment, and family support services
- Deliver innovative comprehensive primary health care
- Health system reform to address social determinants of health
- Increase access to secondary and targeted services – domestic and family violence, mental health, drug and alcohol
- Place-based initiatives, pooling budgets at regional level for community initiatives
- Community-oriented policing
- Community justice approaches including specialist courts and programs to reduce imprisonment rates, especially of young people
- Aboriginal and Torres Strait Islander organisations be resourced to deliver comprehensive and integrated services across the continuum – early intervention, family support, intensive family support, reunification, statutory intervention, court intervention, kinship care, foster care, residential care, therapeutic services for children and parents
- Care coordination e.g. social and emotional wellbeing teams

Notes

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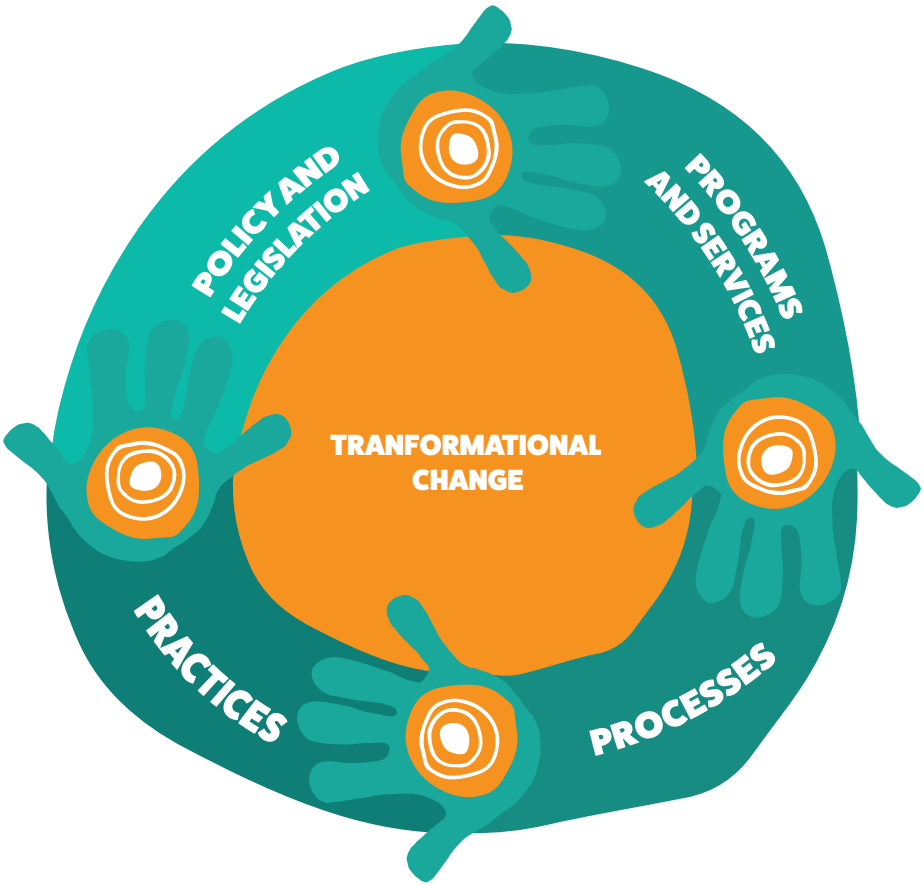

Building Block

Ensure Aboriginal and Torres Strait Islander people and organisations participate in and have control over decisions that affect their children

Potential Sites for Action

- Investing in cultural knowledge, leadership and practice
- Joint procurement processes with Aboriginal and Torres Strait Islander representation
- Co-designed service development and performance measures
- Require mainstream NGOs that receive funds for supporting children and families to report on the proportion of their clientele that is Aboriginal and Torres Strait Islander and set targets for Aboriginal and Torres Strait Islander staffing and client profile
- Mainstream services be required to set targets and employ Aboriginal staff to make them more accessible and trusted
- Establishment of a Council comprising majority of community representatives to independently oversight and ensure accountability in the implementation of the Action Plan
- Support and respect for ACCOs
- Build ACCO infrastructure through leadership initiatives, workforce development, training and staff development

Notes

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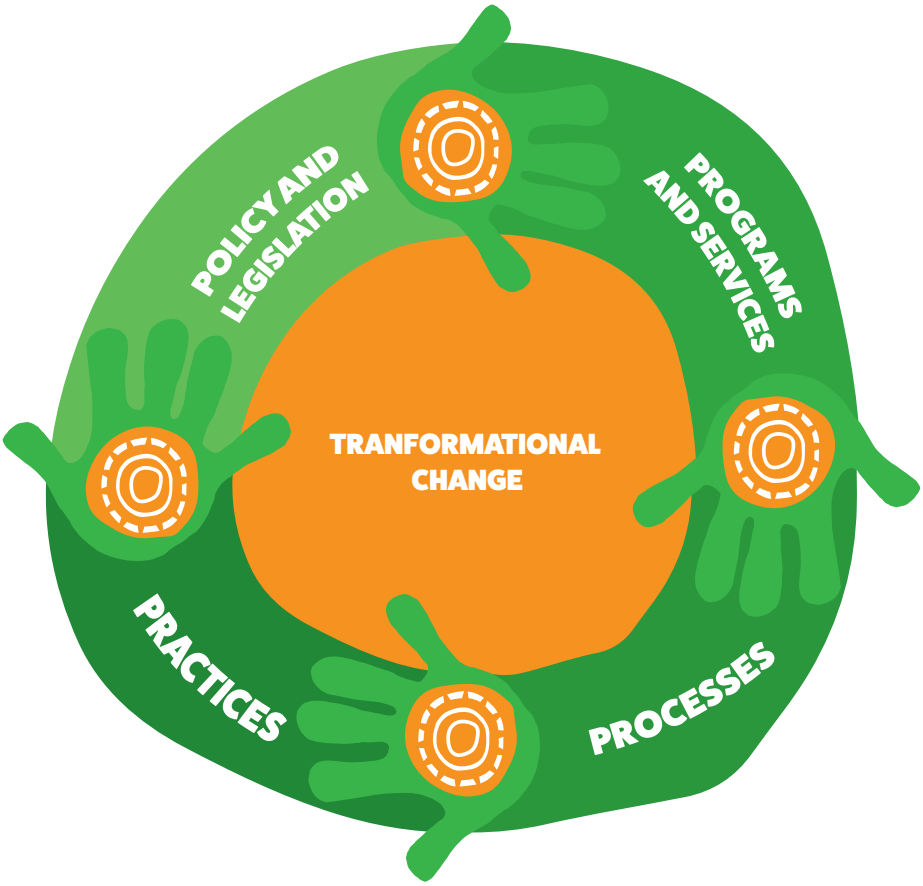


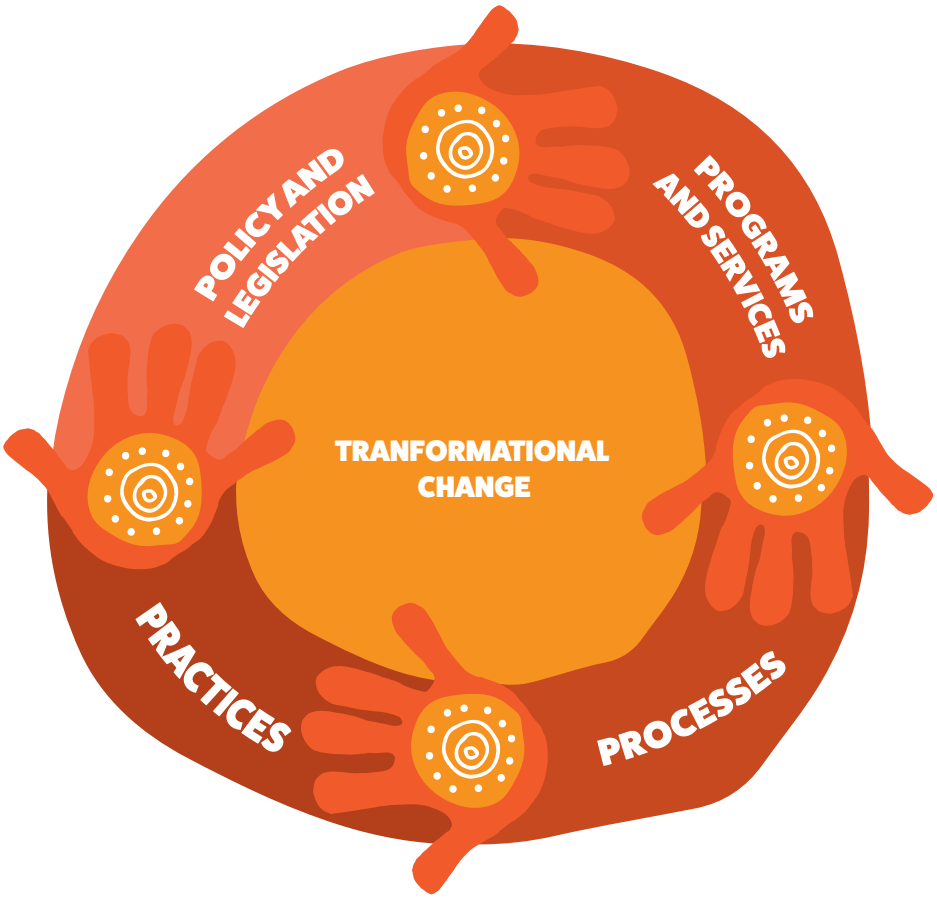
Building Block
Culturally safe and responsive law, policy and practices

Potential Sites for Action

- Full implementation of all five elements of the Child Placement Principle
- Trauma and healing informed frameworks
- Strengths-based practice that values culture and understands Aboriginal child rearing practices
- Listening to children
- Reviewing previous decisions in partnership with community representatives where Aboriginality is identified at later stages in statutory decision making
- Review reporting practices, including guidelines for mandatory reporters
- Greater effort to identify Aboriginal and Torres Strait Islander children at early stages of child protection system involvement
- Intake and screening
- Investigation
- Review assessment including SDM tools - assessment of needs, not just focus on risk
- Invest in in-home support services, not out-of-home care
- Case management including family led decision making
- Placement decisions
- Cultural support plans
- Education support plans
- Family support
- Intensive family support
- Therapeutic services
- Kinship care models
- More support and responsive regulation for kinship care including improved blue card processes
- Residential care
- Foster care
- Access to after-care services
- Strategy for young people on dual orders

Notes

Appendix 2: Framework for the Action Plan



Building Block
Governments and services are accountable to Aboriginal and Torres Strait Islander people

Potential Sites for Action

- Accountability to community and clients (not just government)
- Inject a significant level of culturally informed leadership into the government policy process
- Devolution of decision-making to community – invest in communities and listen to solutions devised by them
- A whole-of-government strategy to increase the number of Aboriginal and Torres Strait Islander community-led s services
- Common outcome framework with targets for government agencies to report on (see ARACY wheel)
- Strengthen provisions about consultation with Recognised Entities
- Court processes – independent advice from Recognised Entities regarding court proceedings

Notes

Additional Notes

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FAMILY MATTERS
Kids safe in culture, not in care

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