

Chapter 8

Aboriginal and Torres Strait Islander communities

8.1 As noted in Chapter 3, the overrepresentation of Aboriginal and Torres Strait Islander children in care is largely due to factors related to social disadvantage, compounded by the intergenerational trauma of past practices of child removal.

8.2 To address these complex issues, the committee heard strong support for solutions that engage and empower Aboriginal and Torres Strait Islander communities to provide support for children and families across the continuum of care.¹ The National Children's Commissioner, Ms Megan Mitchell, suggested engaging with Aboriginal and Torres Strait Islander communities is central to improving outcomes for children:

That includes things like improving the number of Aboriginal people that are in the child-protection and home-care workforce so that you can have effective engagement with families so that they become part of the solution and so that they are driving and owning the problem and the solution. If we keep disempowering these communities and families, we will just create more of the same intergenerational disadvantage.²

8.3 This chapter examines existing supports for Aboriginal and Torres Strait Islander families to maintain links to kin, culture and country, and identifies opportunities to empower Aboriginal and Torres Strait Islander communities to improve outcomes for children in out-of-home care.

Supporting Aboriginal and Torres Strait Islander families

8.4 Across jurisdictions, evidence to the committee from a range of Aboriginal and Torres Strait Islander organisations and individuals highlighted the importance of connection to family, community and culture to the wellbeing of Aboriginal and Torres Strait Islander children.³ The national peak body for Aboriginal and Torres

1 See: Healing Foundation, *Submission 7*; Aboriginal Family Violence Prevention and Legal Service (FVPLS) Victoria, *Submission 24*; National Family Violence Prevention Legal Services Forum (NFVPLS), *Submission 29*; Aboriginal Family Law Services WA (AFLSWA), *Submission 46*; Western Australian Council of Social Service (WACOSS), *Submission 51*; Ngaanyatjarra Pitjantjatjara Yankunytjatjara (NPY) Women's Council, *Submission 61*; Grandmothers Against Removals (GMAR), *Submission 64*; Northern Territory Council of Social Service (NTCOSS), *Submission 72*; Indigenous Issues Committee of the Law Society of NSW, *Submission 73*; Secretariat of National Aboriginal and Islander Child Care (SNAICC), *Submission 93*, pp 2–3.

2 Ms Megan Mitchell, National Children's Commissioner, *Committee Hansard*, Sydney, 18 February 2015, pp 5–6.

3 See: SNAICC, *Submission 93*; AbSec, *Submission 97*; NPY Women's Council, *Submission 61*; Grandmothers Against Removal, *Submission 64*; Jumbunna Indigenous House of Learning, University of Technology Sydney (Jumbunna), *Submission 79*.

Strait Islander communities, the Secretariat of National Aboriginal and Islander Child Care (SNAICC) submitted that:

For Aboriginal and Torres Strait Islander children who are placed in out of home care outside of their families and communities, efforts to support and maintain connections are especially vital to their ongoing wellbeing and safety.⁴

8.5 A number of witnesses highlighted the importance of connection to family and culture for the wellbeing of all Aboriginal and Torres Strait Islander communities. Ms Wendy Hermeston from the NSW Aboriginal Child, Family and Community State Secretariat (AbSec) told the committee:

The biggest thing—just as much for me back then as for a seven-year-old child in care now—is to be able to walk down the street and when someone sees you and says 'Hey sis' or 'Hey cuz', you know who they are and how you are connected to them. That gives a sense of belonging that no education, no upbringing—not even with a stable non-Aboriginal people, no matter how encouraging they have been to you—can give you. It helps you to become a whole person.⁵

8.6 However, the committee heard concerns that existing Commonwealth, state and territory frameworks do not support Aboriginal and Torres Strait Islander children to maintain strong links to their families and communities.⁶ Mr Frank Hytten, CEO of SNAICC, told the committee there is need for increased support for Aboriginal and Torres Strait Islander children and families across a continuum of care, including:

far more investment in prevention; far more investment in working with families so families are supported before children are removed, while children are being removed, after they have been removed and until they are reunified and after they are reunified.⁷

Cultural competence

8.7 The committee heard one of the key barriers to providing appropriate cultural support is a lack of 'cultural competence' within child protection authorities about Aboriginal and Torres Strait Islander family, culture and traditions.⁸ Ms Eileen Cummings, Chair of the Northern Territory Stolen Generation Aboriginal Corporation told the committee of the importance of valuing these systems:

Children have always been loved and respected and nurtured and taught in the Aboriginal way. It is important that these values and systems are encouraged and that Aboriginal people are empowered to ensure the

4 SNAICC, *Submission 93*, p. 15.

5 Ms Wendy Hermeston, Adviser, Aboriginal Child, Family and Community State Secretariat (AbSec) NSW, *Committee Hansard*, Sydney, 18 February 2015, p. 21.

6 See: SNAICC, *Submission 93*, p. 5; AbSec, *Submission 97*, p. 24.

7 Mr Frank Hytten, CEO, SNAICC, *Committee Hansard*, Melbourne, 20 March 2015, p. 43.

8 See, for example: NPY Women's Council, *Submission 61*; NTCOSS, *Submission 72*; SNAICC, *Submission 93*.

systems are once again taught to their children to bring back pride and dignity to the Aboriginal people and communities. Too often the focus is wholly on the negative, not the positive, of Aboriginal child rearing and the Aboriginal practices which give young people their identity, their values, their role and their purpose in life.⁹

8.8 A number of witnesses highlighted that in some cases child protection authorities and workers do not understand how Aboriginal families function, particularly the extended family network. Ms Hermeston from AbSec told the committee at its Sydney hearing:

A fundamental part of the problem is that there are people in the system who have never met any Aboriginal people in their life. So when they walk into a house and see some kids running through the house, and people going to the cupboard and that sort of thing, they see that as chaos. They do not see that as a caring Aboriginal family. That is normal—sharing and lots of people around. That is what I missed out on. Yes, there are a lot of problems. But it is very hard to describe that to a non-Aboriginal worker who walks into a house for the first time and is making decisions about whether it is safe for an Aboriginal child to stay in that environment.¹⁰

8.9 The committee heard this lack of understanding may result in child protection workers making assumptions that may result in the child entering care. Ms Hannah Stanley from the Ngaanyatjarra Pitjantjatjara Yankunytjatjara (NPY) Women's Council noted:

There are cultural strengths that exist in communities which sometimes maybe are not taken into account. Workers, without a lot of experience or cultural competency training, potentially are making decisions for families that do not go in their interest and do not recognise their strengths and potentially do not engage all of the supports and things required before a child is taken into care.¹¹

8.10 These assumptions may impact on decisions about whether children are determined to be 'neglected'. As discussed in Chapter 3, 'neglect' is the key reason Aboriginal and Torres Strait Islander children are placed on care and protection orders. Ms Janette Kennedy from the Commission for Children and Young People Victoria (CCYPV) shared one example where children were removed due to a lack of understanding about the communal nature of Aboriginal families:

...a community was very distressed that children were taken away after a child protection visit around neglect. The worker visited and had a look in the cupboards and there was no food, and there was no food in the fridge, and, of course, the children were neglected!...The worker was without the

9 Ms Eileen Cummings, Chair, Northern Territory Stolen Generation Aboriginal Corporation, *Committee Hansard*, Darwin, 2 April 2015, p. 28.

10 Ms Wendy Hermeston, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 21.

11 Ms Hannah Stanley, Child Advocacy Officer, NPY Women's Council, *Committee Hansard*, Darwin, 1 April 2015, p. 15.

thought, understanding and knowing that everyone eats [at] Auntie Elsie's place and that no-one else needs to have the food in the house because they live as a communal family.¹²

8.11 Due to this lack of understanding, a number of witnesses suggested child protection systems inadvertently disadvantage and discriminate against Aboriginal and Torres Strait Islander families. Mr Paddy Gibson from the Jumbunna Indigenous House of Learning at the University of Technology Sydney (Jumbunna) told the committee this discrimination is closely linked to past practices of child removal:

When you look inside the departments and how they operate, I would argue that there is a discrimination that is actually built into the child protection system and the way that it operates. It is something that has developed historically. These whole apparatuses have developed through the Aboriginal child welfare board and those sorts of things. They have never been systematically reformed. They are discriminatory. The attitudes that are held by a lot of the caseworkers that are going out there are discriminatory attitudes.¹³

8.12 Jumbunna submitted several case studies of Aboriginal families whose children were placed in care in the Northern Territory. In one example, a grandmother suggested child protection workers may not understand Aboriginal cultural practices:

They say I don't supervise the kids properly, but they don't understand that we are always making sure the kids are safe. They say family members coming to stay makes the house 'chaotic' and means the children have 'no routine'.

But this contact with my extended family is very important for the kids. They love their family and are always very happy to see them. Being raised with the extended family is important for their identity...¹⁴

8.13 A number of witnesses expressed concern about the level of cultural competency within child protection departments making decisions about Aboriginal and Torres Strait Islander children. Mr Craig Ardler from the South Coast Aboriginal Medical Corporation expressed concern:

...about the perceptions held by those who go and carry out those acts of removing the children. It could be simple things...Kids could be have good nutrition, be well-schooled, there might be a drug problem or something like that with one of the two parents, so is it necessary that the kids be so suddenly and dramatically removed like they are? It is highly questionable.

12 Ms Janette Kennedy, Aboriginal Strategy and Policy, Commission for Children and Young People Victoria (CCYPV), *Committee Hansard*, Melbourne, 20 March 2015, p. 63.

13 Mr Padraic Gibson, Senior Researcher, Jumbunna Indigenous House of Learning Research Unit, University of Technology Sydney, *Committee Hansard*, Sydney, 18 February 2015, p. 31.

14 Jumbunna Indigenous House of Learning, University of Technology Sydney, *Submission 79*, p. [5].

Even though workers within departments get cultural awareness training, I think it needs to be more in depth that.¹⁵

8.14 The committee heard in some jurisdictions cultural care is not at the centre of decision making processes about Aboriginal and Torres Strait Islander children. Mr Neil Anderson, from the Aboriginal Legal Service of Western Australia noted child protection authorities are unable to:

...adequately understand and cater for Aboriginal people and the subtleties of their traditions, culture, customs and practices and to place proper cultural understanding at the centre of all their dealings with Aboriginal families rather than it being an additional consideration which we too often find is the case.¹⁶

8.15 The committee heard that assumptions may have a detrimental effect on the ability of Aboriginal and Torres Strait Islander families to support their children. Ms Dana Clarke, Chairperson of AbSec, told the committee:

...there is often a sweeping brush put across assessment of families and assessment of grandmothers as being capable of caring for their grandchildren. Whether you want to class it as racist or whether we are deemed as not being capable of looking after our own children—and I am really not sure what that is—but in findings recently we have been able to identify that this is a problem.¹⁷

8.16 To address issues of cultural competence, all jurisdictions employ Aboriginal and Torres Strait Islander liaison officers or cultural workers. The committee sought advice from all jurisdictions on the number of Aboriginal and Torres Strait Islander workers in out-of-home care. NSW and Queensland jurisdictions provided the total proportion of Aboriginal and Torres Strait Islander workers in the relevant department (4.5 per cent in NSW and 3.26 per cent in Queensland).¹⁸ In Western Australia, nine per cent of staff in service delivery (including out-of-home care) identified as Aboriginal or Torres Strait Islander. In South Australia, of the 100 Aboriginal and Torres Strait Islander staff in the relevant department, 18 provided out-of-home care services.¹⁹

15 Mr Craig Ardler, CEO, South Coast Medical Service Aboriginal Corporation, *Committee Hansard*, Canberra, 16 April 2015, p. 37.

16 Mr Neil Anderson, Managing Solicitor, Family Law Unit, Aboriginal Legal Service of Western Australia (ALSWA), *Committee Hansard*, Perth, 16 February 2015, p. 36.

17 Ms Dana Clarke, Chairperson, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 19.

18 See: NSW Department of Family and Community Services, *Annual Report 2013–14*, vol. 1, pp 52–53; Queensland Government, answer to question on notice, 30 April 2015 (received 19 May 2015), p. 7.

19 See: WA Government, answer to questions on notice, 30 April 2015 (received 18 May 2015), p. [6]; SA Government, answer to questions on notice, 30 April 2015 (received 18 May 2015), p. 5.

8.17 The Northern Territory had the highest proportion of Aboriginal and Torres Strait Islander workers in out-of-home care (22.4 per cent or 22 workers).²⁰ Ms Simone Jackson, Executive Director of the NT Department of Children and Families' out-of-home care division, told the committee while the proportion of Aboriginal workers is 'not huge', the NT is 'quite well placed' compared with other jurisdictions to assist Aboriginal and Torres Strait Islander communities.²¹ Ms Jackson noted there is a particular need to provide support for Aboriginal child protection workers:

It is difficult...for an Aboriginal person to provide advice, particularly if they are related, if they are from the community. That is a difficulty. We have to shape up this work and manage this work and support this individual to have that separation, to have an ability to give frank and fearless advice so that we make terrific decisions for children versus a personal impact that can, on occasion, happen for them.²²

8.18 However, a number of witnesses suggested there are not enough Aboriginal and Torres Strait Islander workers to meet demand, especially in the Northern Territory where Aboriginal and Torres Strait Islander children make up 85 per cent of children in out-of-home care.²³ Ms Melissa Kean from the NPY Women's Council told the committee 'we are not seeing enough Aboriginal people in a decision-making capacity'.²⁴ Similarly, Ms Sandra Nelson from the Katherine Women's Information and Legal Service (KWILS) asserted there were not enough Aboriginal and Torres Strait Islander workers, especially in regional centres like Katherine.²⁵

Another 'Stolen Generation'

8.19 As discussed in Chapter 3, a number of submissions noted the significant impact of intergenerational trauma on Aboriginal and Torres Strait Islander communities as a result of past practices of child removal. The committee heard from a number of Aboriginal and Torres Strait Islander mothers and grandmothers who were removed as children and were now seeing their children and grandchildren placed in care.²⁶

20 NT Government, answer to questions on notice, 30 April 2015 (received 19 June 2015), p. 3.

21 Ms Simone Jackson, Executive Director, Out-of-Home Care, NT Department of Children and Families (DCF), *Committee Hansard*, Darwin, 1 April 2015, p. 10.

22 Ms Simone Jackson, NT DCF, *Committee Hansard*, Darwin, 1 April 2015, p. 10.

23 See: Ms Regina Bennett, Manager, Darwin Aboriginal and Islander Women's Shelter Incorporated, *Committee Hansard*, Darwin, 2 April 2015, p. 28.

24 Ms Melissa Kean, NPY Women's Council, *Committee Hansard*, Darwin, 1 April 2015, p. 15.

25 Ms Sandra Nelson, Katherine Women's Information and Legal Service, *Committee Hansard*, Darwin, 2 April 2015, p. 22.

26 See: Ms Wightman, Grandmothers Against Removals, *Committee Hansard*, Sydney, 18 February 2015, p. 17; Aunty Suzanne Blacklock, Chairperson, Winangay Resources, *Committee Hansard*, Sydney, 18 February 2015, p. 18.

8.20 Some witnesses suggested that the current practices that have resulted in an overrepresentation of Aboriginal and Torres Strait children in care risks creating another 'Stolen Generation'.²⁷ Ms Regina Bennett, Manager of the Darwin Aboriginal and Islander Women's Shelter, told the committee:

We need to be very careful about the same practices happening to the children in home care today versus what happened with the stolen generation. Therefore, it is imperative that Aboriginal families then have more say of what happens to the children.²⁸

8.21 Mr Paddy Gibson from the Jumbunna House of Indigenous Learning suggested another Stolen Generation was not just a risk, but a reality:

We are not at risk of a new stolen generation. I have heard this is what has been said. We are at risk. If the numbers keep going up, we are at risk. We have one, mate. There are thousands of Aboriginal kids out there who have been taken from their families—forcibly—when there was absolutely no need for them to have been taken from their families. They have been forcibly separated from their Aboriginal culture. They are losing their language, and it is because of the punitive and discriminatory attitude taken by these departments.²⁹

8.22 The committee notes these arguments highlight the importance of ensuring Aboriginal and Torres Strait Islander communities are engaged and supported in the development of out-of-home care policies and practices.

Support for children

8.23 As identified in Chapter 4, children and young people in care require a range of supports to address trauma and abuse. For Aboriginal and Torres Strait Islander children, the committee heard there is an additional need for cultural support and trauma counselling to assist in maintaining links to their family and culture.³⁰

8.24 Most jurisdictions have legislative or policy requirements to prepare cultural care plans for Aboriginal and Torres Strait Islander children to ensure they maintain close links to their families and communities. For example, the Victorian Government recently amended legislation to require that all Aboriginal children have cultural support plans.³¹ Ms Clarke from AbSec told the committee that effective cultural care

27 See: Ms Eileen Cummings, Chair, Northern Territory Stolen Generation Aboriginal Corporation, *Committee Hansard*, Darwin, 2 April 2015, p. 29.

28 Ms Regina Bennett, Manager, Darwin Aboriginal and Islander Women's Shelter, *Committee Hansard*, Darwin, 2 April 2015, p. 28.

29 Mr Paddy Gibson, Jumbunna Indigenous House of Learning, *Committee Hansard*, Sydney, 18 February 2015, p. 23.

30 See, for example: FVPLS Victoria, *Submission 24*, p. 8; University of Melbourne Department of Social Work, Child, Youth and Families Research Cluster, *Submission 66*, p. 22; AbSec, *Submission 97*, p. 27.

31 Prior to the legislation change in Victoria, cultural support plans were only required for Aboriginal children on guardianship orders. See: Ms Janette Kennedy, Commission for Children and Young People Victoria, *Committee Hansard*, Melbourne, 20 March 2015, p. 49.

plans can have a positive impact on the wellbeing of Aboriginal and Torres Strait Islander children:

If those really strong cultural care plans can identify every family member in that child's life, they can stop in the tracks the placement of children into the out-of-home care sector. Suitable family members can be identified and, until such time as the parents can have their children back in their care, they are still staying on their community, are still staying in their belonging place and are still staying with their families.³²

8.25 However, the committee heard cultural care plans are often 'vague and meaningless' and provide only superficial plans for maintaining connection to family and culture.³³ Ms Janette Kennedy told the committee that a recent review of cultural support plans in Victoria by the Commission for Children and Young People's Taskforce 1000 project found that most 'lacked integrity':

Certainly there were some that were okay and exceptional. You could see in the task force where that was strong, the connection was strong and children's outcomes were good. What we found was that the plans focused on things like cultural events, cultural days and genealogy and had very little focus on relationships, which is really what mattered in the plan for the child. They also were very much the same, a little bit cut-and-paste style across, so a plan for a three-month-old child and a plan for a 13-year-old child looked the same. You would ask, developmentally, how that was okay, let alone culturally.³⁴

8.26 Similarly, a 2009 audit of 194 cases by the Family Violence Prevention Legal Service in Victoria found that only 15 children (eight per cent) had a cultural plan in place.³⁵ Ms Kennedy emphasised that for cultural support plans to be effective 'real effort needs to be placed into relationship building'.³⁶

8.27 Submitters and witnesses suggested there was limited cultural support for Aboriginal and Torres Strait Islander children in care across jurisdictions. In the Northern Territory, Mr Jared Sharpe from the North Australia Aboriginal Justice Agency (NAAJA) told the committee:

...there are few instances of children remaining truly connected to their families once they are placed in a foster care placement. More often we see families becoming frustrated, with DCF advising families that they do not have the resources to arrange access. In particular this is where families are

32 Ms Dana Clarke, Chairperson, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 20

33 See: Mr Neil Anderson, ALSWA, *Committee Hansard*, Perth, 16 February 2015, p. 36.

34 Ms Janette Kennedy, Commission for Children and Young People Victoria (CCYPV), *Committee Hansard*, Melbourne, 20 March 2015, p. 49.

35 FVPLS Victoria, *Submission 24*, p. 9.

36 Ms Janette Kennedy, CCYPV, *Committee Hansard*, Melbourne, 20 March 2015, p. 65.

in a separate location and have to travel a considerable distance to see their children.³⁷

8.28 It was put to the committee that there is little continuity of care for Aboriginal and Torres Strait Islander children who enter the child protection system. Mr Frank Hytten from SNAICC told the committee:

At the moment the system chops and changes with support. It comes in, removes kids, the support dies away and the family is left with further grieving and further business—if you like, sorry business—to do. Then when something else happens the department reintervenes, does something else and then disappears again. There is no continuity of care.³⁸

8.29 A number of submitters recommended strengthening existing provisions for Aboriginal and Torres Strait Islander children and young people to ensure they are provided with appropriate cultural support while in care.³⁹ The National Family Violence Prevention Legal Services submitted that:

Some legislative and procedural provisions specific to the best interests of Aboriginal and Torres Strait Islander children are in place, yet require strengthening. In addition, the National Forum is aware that the implementation of existing measures is not occurring as it should, and that mechanisms for accountability also require strengthening and more consistent application.⁴⁰

Support for families

Early intervention and prevention

8.30 The committee heard the lack of support available to vulnerable families to address the root causes of social disadvantage identified in Chapter 5 is particularly acute for Aboriginal and Torres Strait Islander communities. The Healing Foundation's 2013 discussion paper, *Our Children Our Dreaming*, argued that failure to invest in prevention and early intervention services results in more children and families unnecessarily entering the child protection system.⁴¹ The discussion paper highlights that:

...the safety and wellbeing of Aboriginal children cannot be achieved without addressing the broader issues of disadvantage. Whilst statutory child protection services can ameliorate the impact of disadvantage, they cannot address its causes.⁴²

37 Mr Jared Sharp, Law and Justice Projects Manager, NAAJA, *Committee Hansard*, Darwin, 2 April 2015, p. 19.

38 Mr Frank Hytten, CEO, SNAICC, *Committee Hansard*, Melbourne, 20 March 2015, p. 43.

39 See: FVPLS Victoria, *Submission 24*, p. 9.

40 NFVPLS, *Submission 29*, p 13.

41 Healing Foundation, 'Our Children Our Dreaming: a call for a more just approach for Aboriginal and Torres Strait Islander children and families,' *Submission 7, Attachment 1*, p. 3.

42 'Our Children Our Dreaming', *Submission 7, Attachment 1*, p. 4.

8.31 A number of submitters and witnesses suggested existing child protection frameworks do not provide adequate support for Aboriginal and Torres Strait Islander families prior to the removal of children for placement in out-of-home care.⁴³ Ms Patricia Murray, CEO of Wanslea Family Services, told the committee at its Perth hearing:

...there has to be a stronger focus on early intervention at both the secondary and the tertiary ends—in particular, addressing drug and alcohol, family and domestic violence, and poverty and homelessness issues, because they are the reasons that children come into care, whether they be Aboriginal or non-Aboriginal.⁴⁴

8.32 In Western Australia, the Aboriginal Legal Service (WA) submitted that the application of the department's risk management framework for assessing child protection notifications (known as 'Signs of Safety'), 'is not always conducive to maximising child safety and/or enabling Aboriginal children to remain with their family' and instead:

...in some instances the primary focus is to ensure that the affected adult members of the family understand the reasons for state intervention rather than focussing on what is required to enable the child to remain or return to the family home.⁴⁵

8.33 The committee heard the lack of support services to address underlying social issues is the key reason children are being assessed as neglected. Mr Michael Geaney, Chair of the Alliance for Children at Risk in WA told the committee:

...they [Aboriginal communities] are telling us very, very strongly that drugs and alcohol, particularly hard drugs, are a significant problem that they have no control over. So the issue for them is that they are now finding that they do not have the influence that they wish—and we are talking to elders—around their own families to influence what is going on in their own families. There are just no processes in place that touch that and provide attention to that issue. That is one of the biggest reasons that children in the Aboriginal community are being assessed as being neglected and needing to come into care and as being at risk, so it is a really serious problem.⁴⁶

8.34 Under the Second Action Plan of the *National Framework for Protecting Australia's Children 2009-2020* (National Framework), all projects are required to focus on the needs of Aboriginal and Torres Strait Islander children and their families. The Department of Social Services (DSS) noted in its submission it is currently

43 See, for example: Mr Chris Twomey, WACOSS, *Committee Hansard*, Perth, 16 February 2015, p. 9; Broadway Glebe Catholic Social Justice, *Submission 57*; SNAICC, *Submission 93*.

44 Ms Patricia Murray, CEO, Wanslea Family Services, *Committee Hansard*, Perth, 16 February 2015, p. 16.

45 ALSWA, *Submission 25*, p. 8.

46 Mr Michael Geaney, Chair, Alliance for Children at Risk, *Committee Hansard*, Perth 16 February 2015, p. 15.

working with the Department of the Prime Minister and Cabinet (PM&C) and SNAICC to develop a 'roadmap' identifying priorities for government and non-government organisations to improve the safety and wellbeing for Aboriginal and Torres Strait Islander children and families.⁴⁷

8.35 However, while the National Framework recognises the need for Aboriginal and Torres Strait Islander children to be supported and safe in their families and communities, DSS noted it does not currently fund any Aboriginal and Torres Strait Islander specific family support programs.⁴⁸

8.36 As identified in Chapter 3, evidence to the committee suggested improving family violence support services for Aboriginal and Torres Strait Islander families. The committee heard from a number of family violence legal services that assist women affected by family violence to find housing, provide legal representation and other essential services.⁴⁹ The National Family Violence Prevention Legal Services (NFVPLS) recommended:

Supporting the legal and non-legal needs of victims/survivors of family violence and other activities that assist in addressing family violence are essential precursors to reducing the over-representation of Aboriginal and Torres Strait Islander children in the child protection system.⁵⁰

8.37 Throughout its inquiry, the committee identified few best practice examples of family support services aimed specifically at Aboriginal and Torres Strait Islander communities.⁵¹ In the Northern Territory, DSS provides funding for Intensive Family Support Services, as part of an integrated package supporting Child Protection Income Management.⁵²

8.38 However, the committee heard concerns that other family support services in the NT have recently been defunded by DSS, including the Pandanus program (an antenatal care program for vulnerable young Aboriginal women at risk of homelessness or of their children entering out-of-home care), and a number of other

47 DSS, *Submission 78*, p. 13.

48 DSS, *Submission 78*, p. 13. DSS notes Aboriginal and Torres Strait Islander families are able to access a range of other services provided by DSS (outlined in Chapter 5).

49 See: FVPLS Victoria, *Submission 24*, NFVPLS, *Submission 29*.

50 NFVPLS, *Submission 29*, p. 8.

51 As discussed in Chapter 5, the Cradle to Kinder program in Victoria has a specific stream for Aboriginal and Torres Strait Islander families, but currently only supports a small number of families (see Chapter 5, Box 5.2).

52 DSS, *Submission 78*, p. 13.

antenatal programs due to changes in DSS funding for early childhood development.⁵³ Mr David Pugh, CEO of Anglicare NT, told the committee the Pandanus program:

...has been incredibly successful at supporting young mums to connect to each other to do parenting programs, antenatal classes et cetera and to parent confidently.⁵⁴

8.39 In Queensland, a pilot is currently underway of the Australian Nurse-Family Partnership, an antenatal program aimed at Aboriginal and Torres Strait Islander families (see Box 8.1). The committee notes while it is too early to judge the effectiveness of this program in preventing children entering out-of-home care, evaluations of overseas models indicate the program may assist in reducing family violence.⁵⁵

53 Mr David Pugh, CEO, Anglicare NT, *Committee Hansard*, Darwin, 2 April 2015, p. 4. Recent changes to the DSS grants funding process is currently the subject of another inquiry by this Committee. See: Senate Community Affairs References Committee, *Impact on service quality, efficiency and sustainability of recent Commonwealth community service tendering processes by the Department of Social Services*, www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/Grants (accessed 11 August 2015).

54 Mr David Pugh, *Committee Hansard*, Darwin, 2 April 2015, p. 4.

55 Ms Karen Harmon, Abt JTA, *Committee Hansard*, Brisbane, 17 April 2015, p. 49.

Box 8.1 – Best practice – Australian Nurse-Family Partnership Program

The Australian Nurse-Family Partnership Program (ANFPP) is a nurse home-visiting program for Aboriginal families funded by the Department of Health and delivered by Aboriginal community controlled health services with support provided by Abt JTA. The program provides home visits by registered nurses and midwives to first-time mothers of Aboriginal and Torres Strait Islander children, beginning during their pregnancy up to the child's second birthday.

The ANFPP is based on the US Nurse-Family Partnership model developed by Professor David Olds at the University of Colorado. The program has been rolled out in 48 US states as well as the UK; two provinces in Canada; the Netherlands; and is about to be implemented in Norway and Bulgaria.

The Australian model has been adapted to meet the needs of Aboriginal and Torres Strait Islander children and has three key goals:

- to improve pregnancy outcomes by promoting health related behaviours;
- to improve child health development and safety by promoting competent caregiving; and
- to enhance parent life course development by promoting pregnancy planning, educational achievement and employment

The program commenced in 2009 across three test sites in Victoria, the Northern Territory and Far North Queensland. As part of the Closing the Gap initiative, the Commonwealth has committed to extending the total number of sites to 13. While it is still too early to adequately judge the efficacy of the Australian pilot programs, early indications are that overall health outcomes for families are improving, including reductions in smoking and preterm births and increases in breastfeeding and immunisations.

Ms Karen Harmon from Abt JTA, which supports delivery of the ANFPP, noted a recent randomised controlled trial in the Netherlands found the model is effective in reducing intimate partner violence during pregnancy and in the two years after the birth of the child. A 15-year follow-up study of the first randomised controlled trial of the US model demonstrated that prenatal and early childhood home visits by nurses reduced serious antisocial behaviour in young people, including running away from home, fewer arrests and convictions and reduced smoking and alcohol consumption.

Source: Ms Karen Harmon, Abt JTA, Committee Hansard, Brisbane, 17 April 2015, pp 49–51.

Support while in care

8.40 As discussed in Chapter 5, once children are placed in care, there is limited support available to families to assist in regaining parental responsibility. The committee heard this lack of support particularly affects Aboriginal and Torres Strait Islander communities. Aunty Suzanne Blacklock, whose grandchildren were removed and placed in out-of-home care, told the committee:

When they take the children off the parents, there is no support there for the parents—nothing whatsoever. They are not offered support when they try to talk to the department. Of course the parents are going to be abusive—they are going to go off their heads because their child has been taken. All the department does is run out and put an AVO [Apprehended Violence Order]

out on them saying 'you're bad'. Where is the support? They should be supporting the parents.⁵⁶

8.41 The 'shifting goalposts' for families in care, as discussed in Chapter 5, have a particular impact on Aboriginal and Torres Strait Islander families. Ms Wendy Hermeston from AbSec told the committee for Aboriginal families, the child protection system is:

a system that is made up of goalposts that keep moving. Nobody knows what to do. Really take that point: there is nobody there for parents ... It is symptomatic of a system that is not child-centred and is not about children's rights; it is about a bureaucracy and a justification for a bureaucracy.⁵⁷

8.42 Ms Mary Cowley, CEO of the Aboriginal Family Law Service (WA), noted the importance of supporting the family not just the child:

We can protect the child, but we can actually protect the family too. That is what we need to be looking at. We need to be looking at both parameters and not just dealing with the child. We can do both and we can do it quite comfortably by having some understanding of the cultural environment and that kinship system within the Indigenous community.⁵⁸

8.43 The committee recognises a number of community groups have been established in response to the over-representation of Aboriginal and Torres Strait Islander children in out-of-home care. In NSW, Grandmothers Against Removal (GMAR), was established in 2012 to advocate for greater support for Aboriginal and Torres Strait Islander children and their families, including grandparents.⁵⁹ Similarly, the Brisbane Sovereign Grannies Group represents Aboriginal grandparents and advocates for greater support for children to be cared for within their families, rather than the out-of-home care system.⁶⁰

8.44 Ms Suellyn Tighe from GMAR told the committee at its Sydney hearing GMAR recommended a 'national reunification program' to bring Aboriginal children in the out-of-home care system back to their families:

The priority should be that the maintenance of the family, whoever or however, should be the first priority. Basically, we demand that: we cease all removals; we cease all mandatory reporting, because they are based on hearsay; a burden of proof is put forward to Family and Community Services, as they need to prove the allegations that they are making; the national reunification program, which is a strategy and a program to bring

56 Aunty Suzanne Blacklock, *Committee Hansard*, Sydney, 18 February 2015, p. 26.

57 Ms Wendy Hermeston, AbSec, *Committee Hansard*, 18 February 2015, Sydney, p. 26.

58 Ms Mary Cowley, CEO, AFLSWA, *Committee Hansard*, Perth, 16 February 2015, p. 39.

59 See: Grandmothers Against Removals, *Submission 64*.

60 See: Ms Karen Fusi, Ms Toni McPherson, Mr Sonny Williams and Mrs Cephia Williams, Brisbane Sovereign Grannies Group, *Committee Hansard*, Brisbane, 17 April 2015, p. 33.

Aboriginal kids who are in the system now back into their families and communities, happens sooner rather than later.⁶¹

8.45 In particular, GMAR advocates for greater consultation with families on decisions about Aboriginal and Torres Strait Islander children:

we are saying that when the removal is imminent, or looks about to happen, they need to then consult with the family first and then the community as to where there is an appropriate place for these children to be placed within family and within community. If that happens, there is no need for the court system to flow on from that. But it is about supporting the families. It is about recognising that a family is in crisis and you do not just drag them through the court system and then leave them to linger with no support mechanism there to support the parents, the broader extended family and the community.⁶²

8.46 The committee heard the NPY Women's Council has established a pilot advocacy program aimed at assisting families with children in care (see Box 8.2). Ms Hannah Stanley, who runs the pilot advocacy service, told the committee:

there are so many occasions where families just really do not know why or cannot understand all of the reasons for which children have been removed or are at risk of being removed. A lot of my role is also in ensuring that they have access to legal provisions and supporting them to attend meetings. I have spoken to people countless times after meetings with child protection where they really cannot articulate what the outcomes were or what was expected. I see the role as valuable for families but, to be honest, the feedback from child protection staff has been really great as well. They can see the value of having someone that has a bit more autonomy and flexibility to work with clients outside of their commitments to help them get that legal advice and understand the requirements to work through the processes of reunification to support that reunification, if it occurs and, if it cannot, then supporting and identifying kin carers.⁶³

61 Ms Suellyn Tighe, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 30.

62 Ms Suellyn Tighe, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 30.

63 Ms Hannah Stanley, NPY Women's Council, *Committee Hansard*, Darwin, 1 April 2015, p. 21.

Box 8.2 – Best practice – NPY Women's Council Advocacy Service

In 2014, the NPY Women's Council began a pilot child advocacy service. Over seven months, the service has worked with 18 families across the central Australian region.

The program advocates for:

- access to be prioritised;
- assists families to negotiate the CP system;
- supports referrals to other services; and
- assists with the identification of kinship carers.

So far the service has conducted two kinship care assessments on behalf of the NT Government, assisted with the reunification of three children with their mothers, and assisted with the transition of two children from foster care to kinship care.

The NPY Women's Council noted, without this program 'it is unlikely these children would have been reunified, or that assessment tasks for kinship carers would have been completed in a timely fashion'.

Source: NPY Women's Council, Submission 61, pp 13–14.

8.47 For children already been placed in care, a number of submitters suggested providing contact and reunification support for Aboriginal and Torres Strait Islander families, where appropriate.⁶⁴ Mrs Gillian Bonser from Winangay Resources described the current situation for Aboriginal children in care as a 'sentence for life':

There has to be a system where we can restore kids, because now it is a sentence for life. You are in until you are 18. There is no concept of getting them home. If we do not support the young mums and the people who are losing these children, how can we ever expect to get the kids home in a really meaningful way?⁶⁵

8.48 It was put to the committee that there is a particular lack of available legal assistance available for families to challenge care and protection orders in court. Ms Clarke from AbSec noted this legal assistance, together with cultural care planning, could assist in children entering care:

There is no legal representation or support for families about lodging section 90s to get children restored. There is nothing there to help them do that or to help them understand what that entails. Right at the beginning when an Aboriginal child becomes known to the child protection system, there should be at that time a full cultural care plan developed so that they know who they are talking about, they know who the child is and they know where their connections are. If we do that initially before there are

64 Ms Suellyn Tighe, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 17.

65 Mrs Gillian Bonser, Board Member, Winangay Resources, *Committee Hansard*, Sydney, 18 February 2015, p. 29.

any court proceedings, 90 per cent of these kids would not be coming into care.⁶⁶

8.49 Ms Tighe from GMAR noted the lack of legal services mean Aboriginal and Torres Strait Islander families are automatically disadvantaged as soon as they enter the court room:

So it is inequity within the court system when you actually walk in. We are not receiving equal treatment when we get within the courtroom itself, because we are going up against a machine that the government funds and pays good money for, where it gets lawyers who deal in this constantly over and over.⁶⁷

8.50 The lack of legal services is particularly significant for people in remote communities. Ms Sally Bolton from the Northern Territory Legal Aid Commission told the committee that for people in remote communities, decisions can be made in court without their knowledge:

...legislation requires personal service of court documents on parents, and that can be dispensed with if it is not practical. The reality is that parents tend to be served, if they are served personally, by a DCF [Department of Children and Families] worker giving them a copy of documents, often very shortly before court. I mean between one and three days before the court date. When that parent is in a remote Aboriginal community, particularly over 500 kilometres away from court, and those documents are in English, there is universally no interpreter provided and there is no assistance to explain what this document is, what the consequences are and what the person needs to do. That is just incredibly inadequate.⁶⁸

8.51 People in remote communities are also at a disadvantage when it comes to accessing services or supports with contact visits or reunification with their children. Ms Hannah Stanley from the NPY Women's Council told the committee:

If they want reunification with or access to their children, they need to be in Alice Springs to facilitate that, but that is so problematic because of accommodation and all the additional risk factors of being in town. In order to maintain a relationship or potentially be reunified, town is where they need to be.⁶⁹

8.52 These witnesses emphasised the need for more localised support for Aboriginal and Torres Strait Islander families closer to country:

It is critical that we look at pilots and whether the central government can support that but support out-of-home care services to operate closer to

66 Ms Dana Clarke, Chairperson, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 30.

67 Ms Suellyn Tighe, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 28.

68 Ms Sally Bolton, NTLAC, *Committee Hansard*, Darwin, 2 April 2015, p. 20.

69 Ms Hannah Stanley, NPY Women's Council, *Committee Hansard*, Darwin, 1 April 2015, p. 16.

country, closer to home. There have been some examples of the development of that, but they have been short lived.⁷⁰

8.53 Submitters noted one of the key aspects to addressing disadvantage includes greater access to legal assistance for Aboriginal families, particularly family violence prevention legal services.⁷¹ The NFVPLS Forum recommended:

...sustained commitments to culturally safe Aboriginal and Torres Strait Islander services that provide dedicated child protection legal assistance to Aboriginal and Torres Strait Islander children in and at risk of entering the care and protection system.⁷²

Relative/kinship care

8.54 As discussed in Chapter 6, placement with relatives or kin is the preferred option for Aboriginal and Torres Strait Islander children across all jurisdictions.

Aboriginal Child Placement Principle

8.55 One of the key measures of the *National Standards for out-of-home care* (National Standards) is compliance with the Aboriginal Child Placement Principle (ACPP). As discussed in Chapter 1, all jurisdictions have adopted the ACPP in both legislation and policy. The ACPP aims to ensure that when Aboriginal and Torres Strait Islander children enter care, placement with family and kin is prioritised. At 30 June 2014, approximately 69 per cent of Aboriginal and Torres Strait Islander children were placed in accordance with the ACPP.⁷³ SNAICC noted in its submission:

[F]amily is the cornerstone of Aboriginal and Torres Strait Islander culture, spirituality and identity. This is articulated in the Aboriginal and Torres Strait Islander Child Placement Principle, which acknowledges the importance of family, cultural and community connections to the identity and wellbeing of Aboriginal and Torres Strait Islander children.⁷⁴

8.56 However, the committee heard concerns about the consistency of the application of the ACPP across jurisdictions.⁷⁵ Ms Janette Kennedy from the CCYPV, told the committee its current inquiry into the ACPP found variation in 'how people saw and interpreted the principle':

70 Mr David Pugh, Anglicare NT, *Committee Hansard*, 2 April 2015, p. 3.

71 See: Broadway Glebe Catholic Social Justice, *Submission 57*; Macarthur Legal Centre, *Submission 58*, FVPLS Victoria, *Submission 24*.

72 NFVPLS Forum, *Submission 29*, p. 20.

73 See: Chapter 1.

74 SNAICC, *Submission 93*, p. 8.

75 See: Dr Virginia Marshall, Acting Chair, Indigenous Issues Committee, Law Society of NSW, *Committee Hansard*, Sydney, 18 February 2015, p. 21; Aunty Suzanne Blacklock, *Committee Hansard*, Sydney, 18 February 2015, p. 18; Ms Andrea Smith, AFLSWA, *Committee Hansard*, Perth, 16 February 2015, p. 38.

There were as many different interpretations of what the legislation was saying as there were people we spoke to. Practitioners have a different view of what the principle looks like and what it means.⁷⁶

8.57 One of the key issues with the ACPP is the focus on the hierarchy of placement options for Aboriginal and Torres Strait Islander children. SNAICC suggested the ACPP:

has been narrowly conceptualised in legislation and child protection practice with a focus only on a hierarchy of out-of-home care placement options, undermining its broader intent.⁷⁷

8.58 It was put to the committee that the conception of the ACPP as a hierarchy may undermine its aim of placing Aboriginal and Torres Strait Islander children within families. Ms Hermeston from AbSec noted there is no requirements or guidelines about what steps must be taken in order to comply with the ACPP:

Quite often, they say that they satisfy the Aboriginal child placement principle. They can tick the box, because it is a hierarchy of placements. They try and place the child within family and if not within family or extended family then within an Aboriginal family within that community or with an Aboriginal family outside the community, and as a last resort a non-Aboriginal person. If you get to 'last resort' and you say that you have gone through the hierarchy, there is no actual casework practice guidelines to say, 'Here is what you need to do.' There is no standard. It is very individual. They call it 'street level bureaucracy' where it can actually be an individual caseworker that makes a decision about how good enough the job is that they have done to locate family at the beginning. You can still be classed as satisfying the Aboriginal child placement principle if you say that you have gone through all those hierarchies.⁷⁸

8.59 Many witnesses suggested the core goal of the ACPP, to place children within family and community groups, is not being complied with. SNAICC suggested most jurisdictions have made an 'inadequate commitment' to the ACPP, noting a recent Queensland audit suggested only 15 per cent of the cases sampled fully complied with it.⁷⁹ In NSW, Ms Suellyn Tighe from GMAR suggested the ACPP is circumvented by other policies such as placing children with siblings or by using the justification of placement 'in the best interests' of the child (described as a 'get out jail free' card):

We have the Aboriginal placement principle, which states that you must follow this hierarchical system for placement of the children. That is not being adhered to at all—or only in very, very few cases. I do not think that I know anywhere it has been adhered to. I have not met anyone yet. The fact is that that is happening and it is law. The department is continually superseding that. The Department of Family and Community Services

76 Ms Janette Kennedy, CCYPV, *Committee Hansard*, Melbourne, 20 March 2015, pp 48–49.

77 SNAICC, *Submission 93*, p. 8.

78 Ms Wendy Hermeston, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 25.

79 SNAICC, *Submission 93*, p. 9.

supersedes the law of the Aboriginal placement principle with sibling placement policies. That is a departmental policy; it is not legislation.⁸⁰

8.60 The lack of investigation into suitable family or community placements may result in children being placed with carers outside of the cultural or language group. Mr Frank Hytten, CEO of SNAICC noted when the child's cultural care is not considered:

...children are removed and they are not placed anywhere remotely near culture, as often as not. Sometimes children, particularly in the more remote areas, are removed 300 or 400 or 500 kilometres away from their family...quite often into language groups that are different from their own. So suddenly a child finds themselves with a family that does not necessarily have the same first language, which further isolates and marginalises the child.⁸¹

8.61 Some witnesses expressed concern about placing children with Aboriginal and Torres Strait Islander carers far removed from their community. Ms Clarke from AbSec stressed 'not all Aboriginal people are the same' and suggested the importance of connection to community is not considered in making placements in accordance with the ACPP:

I recently sat on a panel where it was almost like child lotto—'We'll take two down in Cootamundra,' and 'We'll take two up in Tamworth.' I said: 'These are children and they have a belonging place and they have a country. Don't you think we should return them to their country?' Community Services found that a bit odd. All they wanted was an Aboriginal placement. So there is a bit of a bastardisation of Aboriginal placement. You must weigh up whether you place an Aboriginal child with an Aboriginal carer off country, where they have no cultural contact, or with an Aboriginal agency, where there are Aboriginal carers but they are not on country. That is a big dilemma at the moment.⁸²

Support for kinship carers

8.62 One of the key barriers to fully complying the ACPP is identifying suitable Aboriginal and Torres Strait Islander relative/kinship carers. Across jurisdictions, there is limited data on the number of Aboriginal and Torres Strait Islander relative/kinship carers.⁸³

8.63 The committee heard there is a particular shortage of Aboriginal kinship carers in the Northern Territory where Aboriginal children make up 85 per cent of the out-of-home care population. The Northern Territory Department of Children and Families (DCF) noted in its submission for the 522 children in foster or kinship care,

80 Ms Suelyn Tighe, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 25.

81 Mr Frank Hytten, CEO, SNAICC, *Committee Hansard*, Melbourne, 20 March 2015, p. 43.

82 Ms Dana Clarke, Chairperson, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 20.

83 AIHW does not report on the number of Aboriginal and Torres Strait Islander relative or kinship carers. See: AIHW, *Submission 22*.

there are 194 authorised kinship carers. Due to the lack of kinship carers, DCF noted 'we are increasingly relying on expensive, external service providers to meet this demand'.⁸⁴ This includes 'purchased home based care arrangements' (supervised group homes) for 264 children.⁸⁵

8.64 It was put to the committee that the lack of kinship carers does not reflect unwillingness by Aboriginal and Torres Strait Islander families to become carers, rather a lack of support to be assessed as carers. Mr Hytten from SNAICC noted 'Aboriginal people wanting to be kinship carers are often prevented from doing so by fairly arduous obstacles being put in their way'.⁸⁶

8.65 Some witnesses suggested that in attempting to identify kinship carers, child protection authorities do not consult with the family or the relevant Aboriginal or Torres Strait Islander community groups.⁸⁷ Aunty Suzanne Blacklock told the committee:

They said the Aboriginal placement principles would mean kids would stay with kin and family. But too often they say they cannot find suitable kin. But they do not ask the elders or grannies where they come from, where their tribe is, where they belong, where their roots are.⁸⁸

8.66 One obstacle identified by submitters was the reluctance by some Aboriginal and Torres Strait Islander communities to engage with those authorities responsible for past and present practices of child removal. Ms Eileen Cummings told the committee:

...we need to be aware that Aboriginal people are suspicious [sic] of government bureaucracy from their past traumatic experiences. That is why a lot of them are not taking on the role of being carers for our children. Aboriginal people are fearful of being judged by Western social norms that are not better but are merely different. This affects people's choice to become carers.⁸⁹

8.67 The reluctance to engage with child protection authorities means many Aboriginal and Torres Strait Islander carers do not receive financial and other supports. Ms Mary McKinnon from Life Without Barriers told the committee this particularly affects grandparent carers:

A number of grandmothers said to me when I was in Victoria that they did not get payments. I said, 'You can get payments through the department.'

84 Ms Simone Jackson, Executive Director, NT DCF, *Committee Hansard*, Darwin, 1 April 2015, pp 1–2.

85 NT Government, *Submission 23*, p. 4.

86 Mr Frank Hytten, CEO, SNAICC, *Committee Hansard*, Melbourne, 20 March 2015, p. 43.

87 See: AbSec, *Submission 97*, p. 24.

88 Aunty Suzanne Blacklock, Winangay Resources, *Committee Hansard*, Sydney, 18 February 2015, p. 18.

89 Ms Eileen Cummings, NT Stolen Generation Aboriginal Corporation *Committee Hansard*, Darwin, 2 April 2015, p. 30.

You just have to go and tell the department you're minding the children. It doesn't necessarily have to go to court, but then you can receive money.' And they said, 'That's the department that removed me from my parents, so I'm not going anywhere near them.'⁹⁰

8.68 Another key obstacle identified was the process involved to become a kinship carer, particularly in the Northern Territory. While the committee notes that DCF is working to improve kinship training for kinship carers⁹¹ evidence to the committee by organisations working in the NT suggest the process is 'too cumbersome' and not suited to the needs of Aboriginal and Torres Strait Islander people, particularly in remote communities.⁹² The North Australia Aboriginal Justice Agency (NAAJA) shared a case study with the committee about grandparents wanted to be carers but as they lived in a remote community were not supported by department to be assessed as suitable.⁹³ Mr Sharpe, Law and Justice Projects Manager at NAAJA, told the committee:

The checks that DCF impose are extremely cumbersome. There are very little supports provided to kinship carers in order to ensure that the assessment process can take place as quickly and as efficiently as possible. We are told routinely by DCF that once the paperwork for kinship and foster care applications are received it will take a further 12 weeks to complete the assessment but that is a conservative time estimate. That is a minimum of three months but some take as long as six months. In that period of time a young person from Katherine or a remote community is then placed so far away from family, usually in Darwin and sometimes even interstate.⁹⁴

8.69 The committee heard support for the simplification of the assessment process for relative/kinship carers, particularly in remote communities. Ms Sally Bolton from the NT Legal Aid Commission told the committee:

There is such bureaucracy in that process. There needs to be either a simplification of that process or more support given to help people navigate that process. It is not enough just to send a whole lot of forms in English to someone in a remote place, and then somehow expect that they would be able to the navigate that process.⁹⁵

90 Ms Mary McKinnon, National Director of Practice and Quality, Life Without Barriers, *Committee Hansard*, Sydney, 18 February 2015, p. 59.

91 Ms Simone Jackson, Executive Director, Out-of-home care, DCF, *Committee Hansard*, Darwin, 1 April 2015, p. 2.

92 See: Mr Jared Sharp, Law and Justice Projects Manager, NAAJA, *Committee Hansard*, Darwin, 2 April 2015, p. 18; Ms Bolton, Darwin, p. 21.

93 See: Briefing Paper, tabled by North Australian Aboriginal Justice Agency, at Darwin public hearing 2 April 2015, pp 6–7.

94 Mr Jared Sharp, NAAJA, *Committee Hansard*, 2 April 2015, pp 17–18.

95 Ms Sally Bolton, Northern Territory Legal Aid Commission, *Committee Hansard*, Darwin, 2 April 2015, p. 21.

8.70 As discussed in Chapter 6, once kinship carers are assessed as suitable, there are limited ongoing supports compared to other types of care. For Aboriginal and Torres Strait Islander relative/kinship carers, this lack of support may be more significant due to the level of disadvantage in some communities. Professor Humphreys and Ms Meredith Kiraly submitted that:

All the disadvantages that accrue to kinship carers pertain in even greater measure to Indigenous kinship carers: as a cohort they are older, poorer, in poorer health, with lower education and more crowded housing than other kinship carers. They also care for larger numbers of children.⁹⁶

8.71 A number of witnesses and submissions expressed strong support for increased ongoing practical and financial support for Aboriginal and Torres Strait Islander carers, including informal carers. In particular, these witnesses expressed support for models of kinship care that promote Aboriginal ways of caring for children and connection to family and culture.⁹⁷

8.72 One example of a kinship care model that provides support to Aboriginal and Torres Strait Islander carers and child protection authorities is the Winangay Aboriginal Kinship Care Assessment Tool (see Box 8.3). The committee notes its 2014 inquiry, *Grandparents caring for grandchildren*, saw merit in the potential use of the Winangay Resources in placing Aboriginal and Torres Strait Islander children with relatives and kin.⁹⁸

96 University of Melbourne Department of Social Work, Child, Youth and Families Research Cluster, *Submission 66*, p. 15.

97 See: Winangay Resources Inc., *Submission 62*; AbSec, *Submission 97*.

98 See: Senate Community Affairs References Committee, *Grandparents who take primary responsibility for raising their grandchildren*, October 2014, pp 115–116 and p. 122.

Box 8.3 – Best practice – Winangay Aboriginal Kinship Care Assessment Tools

Winangay is a collaborative assessment tool which involves carers and workers using a conversational yarning interview format to assess key aspects of kinship care.

The Winangay resources create a climate in which power is shared more equally between workers and carers and is an enabling process in which kinship carer knowledge and insights are valued. Kinship carers are partners taking ownership of the process recording their responses, identifying strengths needs and concerns and strategies to address unmet needs. Workers facilitate the assessment process maximising opportunities for kinship carers and child/children to be heard.

Winangay tools require a paradigm shift from a worker driven process to a more equal and shared relationship marked by mutual respect and shared planning. The tools are underpinned by principles that assist workers to build strong relationships that are characterised by respect and trust and help to create cultural safe and culturally appropriate practice

Winangay resources have been endorsed by SNAICC and AbSec. The Australian Institute of Family Studies suggests Winangay 'shapes best practice in the development of culturally appropriate resources and training'. Winangay tools are currently being rolled out in Queensland, in cooperation with the Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP).

An evaluation of the tool is being undertaken by Winangay in cooperation with the Australian Centre for Child Protection and the Institute of Child Protection Studies, funded by the Sidney Myer Foundation.

Source: Winangay Resources, Submission 62, pp [15 – 23].

8.73 Auntie Suzanne Blacklock, Chairperson of Winangay Resources, told the committee the impetus to develop the resources came after her grandchildren were removed and placed into out-of-home care. Auntie Suzanne told the committee the tools:

...let workers yarn with families about their strengths, empowering families and giving them and kids a say about what was needed. The tool we invented met their academic criteria and many factors that were identified as important in Australia and overseas but, more importantly, it was simple for families to use and understand. It was done our way—the Aboriginal way.⁹⁹

8.74 The tools assist child protection authorities to develop cultural competence in the 'Aboriginal way' of family support. Auntie Suzanne stressed to the committee, that embracing an approach tailored to the needs of Aboriginal and Torres Strait Islander communities is central to improving outcomes for children in care:

...still they are taking the kids away because the partners are using mainstream tools and ways that they were not seeing the strength in families or the importance of culture and community. They do not understand our ways and the tools they use do not work for us.¹⁰⁰

99 Auntie Suzanne Blacklock, Chairperson, Winangay Resources, *Committee Hansard*, Sydney, 18 February 2015, p. 19.

100 Auntie Suzanne Blacklock, *Committee Hansard*, Sydney, 18 February 2015, p. 19.

8.75 The committee heard support for implementing the Winangay tools across jurisdictions. The Queensland Government noted in its submission it is currently participating in a national trial of the Winangay tools for assessing Aboriginal and Torres Strait Islander kinship carers and will 'consider adopting these (or similar) tools following the outcome of the trial's evaluation'.¹⁰¹

Committee view

8.76 The committee acknowledges that connection to family is integral to wellbeing of Aboriginal and Torres Strait Islander children and young people. The committee is concerned existing frameworks do not adequately facilitate this connection and more needs to be done to support Aboriginal and Torres Strait Islander children and young people.

8.77 The committee shares concerns that current practices risk creating a 'Stolen Generation'. The committee acknowledges the context in which children are removed today is different to that of past practices, but that the result is similar if adequate supports and services for Aboriginal and Torres Strait Islander communities and families are not provided.

8.78 The committee is particularly concerned about the lack of culturally appropriate support available to Aboriginal and Torres Strait Islander parents once children are placed into care, including services aimed at supporting family reunification.

8.79 The committee recognises the importance of the ACCP in ensuring Aboriginal and Torres Strait Islander children are placed with relative/kinship carers, where possible. The committee is concerned there is no national consistency on how the ACCP is applied across jurisdictions.

8.80 The committee is also concerned about the lack of support for Aboriginal and Torres Strait Islander relative/kinship carers to become accredited, and lack of ongoing support to provide adequate support for children and young people. The committee supports the recommendation from its previous inquiry into grandparent carers that the Winangay kinship resources be implemented nationally.

Empowering Aboriginal and Torres Strait Islander communities

8.81 The committee heard strong support for measures to empower Aboriginal and Torres Strait Islander communities to take responsibility for the development and delivery of family support and out-of-home care services. SNAICC suggested 'Aboriginal and Torres Strait Islander community-controlled organisations are the most effective and best-placed organisations to support our children and families'.¹⁰² SNAICC supported the introduction of 'holistic, integrated Aboriginal controlled services' across all jurisdictions.¹⁰³

101 Queensland Government, *Submission 69*, p. 8.

102 SNAICC, *Submission 93*, p. 7.

103 SNAICC, *Submission 93*, p. 9.

8.82 The Healing Foundation's 2013 discussion paper, *Our Children Our Dreaming*, argued for the need to engage Aboriginal and Torres Strait Islander communities in addressing child protection issues:

The continuing tendency to identify issues and solutions from a non-Indigenous perspective remains a major impediment to progress. Approaches that not only hold individuals and communities accountable for factors beyond their control but also fail to ensure community control, empowerment and responsibility, also corrode the foundations for effective change and improving outcomes.¹⁰⁴

8.83 A number of witnesses noted that the need for Aboriginal control of child welfare services was one of the key recommendations of the 1997 *Bringing Them Home* report.¹⁰⁵ These witnesses expressed concerns that across jurisdictions, these recommendations have not been progressed consistently across jurisdictions. Mr Paddy Gibson told the committee:

You have to understand that *Bringing them home* was when the crisis was nowhere near the proportion we are talking about today. There were two and half thousand kids in care in *Bringing them home*. We now have more than 15,000. In *Bringing them home* it was nowhere near as bad as it is today. They were saying this system is discriminatory, it does not work. What they were calling for, and we support this demand, was for Aboriginal control over Aboriginal child welfare.¹⁰⁶

8.84 Witnesses and submitters argued that Aboriginal and Torres Strait Islander communities should be given responsibility for addressing child abuse and neglect. Ms Clarke from AbSec noted:

We are never going to reduce the amount of our children coming into care unless we look at a whole family approach and unless we look at the insidious cancer that grew within our communities when our families were disempowered, our children were taken away and we were never allowed to have those parenting skills.¹⁰⁷

8.85 Witnesses suggested empowering communities would assist in improving outcomes for Aboriginal and Torres Strait Islander children in care. Mrs Bonser from Winangay Resources told the committee:

Even though there is an awful lot of distrust and an awful lot of upset in the community, there is a genuine desire for the best interests of the child. So the Aboriginal community will come together, and Aboriginal

104 Healing Foundation, 'Our Children Our Dreaming: a call for a more just approach for Aboriginal and Torres Strait Islander children and families,' *Submission 7, Attachment A*, p. 4.

105 See: Australian Human Rights Commission, *Bringing Them Home: National inquiry into the separation of Aboriginal and Torres Strait Islander children from their families*, 1997, Recommendation 43a.

106 Mr Padraic Gibson, Senior Researcher, Jumbunna Indigenous House of Learning, *Committee Hansard*, Sydney, 18 February 2015, p. 23.

107 Ms Dana Clarke, Chairperson, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 19.

grandmothers and elders will stand and work together to try and change things for these kids. If we could just break that adversarial system out and have some Aboriginal independent control of agencies, where they were actually accountable for the decisions, where there had to be elders, and community ... but genuine consultation, then the community will do it. We are looking at deficit-driven systems, not strength-based systems. So all they are seeing is the problems. They are not seeing the capacity in these people to do things.¹⁰⁸

8.86 The National Children's Commissioner, Ms Megan Mitchell, highlighted the positive example of community empowerment set by the Bourke Justice Reinvestment project in rural New South Wales (see Box 8.4). According to the Australian Human Rights Commission, justice reinvestment is 'a powerful crime prevention strategy that can help create safer communities by investing in evidence based prevention and treatment programs'. Justice reinvestment diverts a portion of the funds for imprisonment to local communities to reinvest into services that address the underlying causes of crime in these communities.¹⁰⁹

8.87 Ms Mitchell noted the Bourke project:

...is a long process to re-engage a community that is highly cynical and has lots of issues, but they are at the point now where they are naming problems like child protection, wanting to do something about it, and knowing that they have the power and wherewithal to influence what happens to the resources in that town, as opposed to a whole lot of people coming in with services that people do not want and do not use. It really is challenging everybody, including service providers that have been there doing what they have done for years and years.¹¹⁰

8.88 According to Ms Mitchell, the project is more than justice reinvestment in crime prevention:

...it is reinvestment from the tertiary end of the system into the front-end of the system and into things like family support, preschool for kids, child care, infant mental health, home visiting, playgroups and all of those sorts of things that the community want and are, at the moment, coming together to plan for. I think that that is another example of where you can empower the community and change the way you use resources.¹¹¹

108 Mrs Gillian Bonser, Board Member, Winangay Resources, *Committee Hansard*, Sydney, 18 February 2015, p. 28.

109 Justice reinvestment in Australia five years on, excerpt from the Social Justice and Native Title Report 2014, from the National Children's Commissioner, received 13 April 2015.

110 Ms Megan Mitchell, National Children's Commissioner, *Committee Hansard*, Sydney, 18 February 2015, p. 6.

111 Ms Megan Mitchell, *Committee Hansard*, Sydney, 18 February 2015, p. 6.

Box 8.4 – Best practice – Bourke Justice Reinvestment Project

In 2012, the Bourke Aboriginal Community Working Party approached Just Reinvest NSW about trialling justice reinvestment to 'try and break the intergenerational cycle of offending and incarceration'.

Starting in March 2014, for a two-year period a consortium of partners will work with, and alongside, the Bourke community to develop a social and economic case for justice reinvestment in Bourke. This case will be presented to the NSW Government for response and action.

The Australian Human Rights Commission notes there are two key differences with the Bourke project compared with other innovative examples of communities taking control for positive change, including:

- the project is community-based, rather than government initiated and will be built on achievements not just aspirations; and
- the major funding and pro bono services come from philanthropic and corporate sources.

Source: Justice reinvestment in Australia five years on, excerpt from the Social Justice and Native Title Report 2014, from the National Children's Commissioner, received 13 April 2015.

Role of Aboriginal community controlled agencies

8.89 One of the key recommendations from a number of submitters and witnesses was transferring control of child protection services, including decision making and service delivery, to Aboriginal community controlled agencies (ACCAs) in all jurisdictions.¹¹²

8.90 The current role of ACCAs in child protection systems differs across jurisdictions. SNAICC submitted that recent reviews have identified that existing ACCAs are generally either underutilised in decision making processes, such as 'recognised entities' in Queensland, or underfunded to provide services, such as in Victoria.¹¹³ Ms Suellyn Tighe from GMAR argued the role of ACCAs is 'not working' to support Aboriginal and Torres Strait Islander families:

These Aboriginal bodies have been in place on a state level and on a national level. We have more Aboriginal workers within Family and Community Services and out-of-home care services than we have ever had in the past, and yet we are still grossly overrepresented in the system. There are issues that relate to why that is the case, but the fundamental thing is that these systems are not working.¹¹⁴

Decision making

8.91 In some jurisdictions, ACCAs have a role in the decision-making process about placements of children in care. Table 9.1 outlines the different roles of ACCAs

112 See: NTCOSS, *Submission 72*, p. 6; SNAICC, *Submission 93*, pp 17–18; Jumbunna Indigenous House of Learning, *Submission 79*, p. [11].

113 SNAICC, *Submission 93*, p. 14.

114 Ms Suellyn Tighe, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 24.

across jurisdictions. Some jurisdictions have legislated or policy obligations to consult with ACCAs prior to making placement decisions about Aboriginal or Torres Strait Islander children (South Australia, Queensland, Victoria and Tasmania), whereas other jurisdictions rely on consultation with Aboriginal child protection workers, rather than independent ACCAs (Northern Territory and NSW).

Table 8.1 – Role of Aboriginal organisations across jurisdictions

Jurisdiction	Aboriginal organisation	Consultation
NSW	Individual Aboriginal NGOs	Individual NGOs responsible for placement decisions. Absec (peak body) leading project to build the capacity of Aboriginal NGOs to deliver out-of-home care services.
Victoria	Aboriginal Child Specialist Advice and Support Service	Obligation to consult on significant decisions including placement of child. Family-led decision making conference to be held for each Aboriginal child following substantiation of child protection concerns.
QLD	Recognised entities	Legislated requirement to consult on all decisions made about an Aboriginal or Torres Strait Islander child or young person.
WA	Individual Aboriginal NGOs Kinship Connections	Individual NGOs responsible for placement decisions. Two Aboriginal NGOs currently responsible for small number of placement decisions in the Perth and Pilbara regions. Kinship Connections consulted on communicating with Aboriginal families.
SA	Recognised organisation	Legislated requirement to consult prior to making a decision or order about Aboriginal or Torres Strait Islander child.
Tasmania	Relevant service organisation	Relevant service organisation (as determined by location and child's specific Aboriginal community membership) are contacted for advice. If child is known to organisation, they are consulted on placement considerations and cultural care plans.
Northern Territory	None	No obligation to specifically consult with any Aboriginal organisation

Source: State and territory governments, answers to questions on notice, 30 April 2015 (received May–June 2015).

8.92 However, witnesses suggested in some jurisdictions there is a disconnect between ACCAs and the communities they represent. Ms Toni McPherson from the Brisbane Sovereign Grannies Group suggested the recognised entities in Queensland 'are tightly controlled by the departments that fund them and who do not actually work very well, or even well, with families'.¹¹⁵ Similarly, Ms Mary Moore from the Alliance for Family Preservation and Restoration suggested recognised entities do not represent individual Aboriginal communities:

...these recognised entities are being paid millions and millions in funding and someone from Child Protection rings the recognised entity and says, 'We are going to take this Indigenous baby,' and they say, 'Yeah, sure, that

115 Ms Toni McPherson, Brisbane Sovereign Grannies Group, *Committee Hansard*, Brisbane, 17 April 2015, p. 38.

is fine.' That is where the system is breaking down in the Indigenous community, from what I see. That recognised entity should be a person who knows the child and the family, and they are the go-between. That is in the legislation, from the *Bringing Them Home* report. Instead of that we have someone sitting in an office and saying, 'Yes, you can take that Indigenous baby,' when they do not know anything about them. It would be like Germany—getting paid to tick a box to take a child from China. That is how different it is.¹¹⁶

8.93 A number of witnesses and submitters supported the approach to consultation with Aboriginal and Torres Strait Islander organisations outlined in the joint submission by the Victorian Aboriginal community controlled organisations and community service organisations, *Koorie Kids: growing strong in their culture*.¹¹⁷ However, Mrs Connie Salamone from the Victorian Aboriginal Child Care Agency (VACCA) suggested while VACCA may be consulted on the initial placement, the decision to place a child outside their family group is not revisited:

In fact there are often many family members who would be able to care for the child—if only someone had made the effort to go back, re-examine and re-ask.¹¹⁸

8.94 In NSW, Ms Clarke from AbSec told the committee that Aboriginal child protection workers may not best placed to provide advice on placements for children:

When they talk about consultation in the Aboriginal placement principles, they talk about consultation with Aboriginal people but they are Aboriginal community services workers. In a lot of cases those people do not come from the area where the kids are. They do not know the local community. They do not know the family connections. So really what they are doing is consulting with themselves, and therefore what they do then is tick the box on that process.¹¹⁹

8.95 Ms Wightman from GMAR also suggested there is a lack of connection between Aboriginal child protection workers and individual communities:

We do not hear from the Aboriginal people who work in these systems. As far as I am concerned, they are Jackey Jackeys.¹²⁰

116 Ms Mary Moore, Alliance for Family Preservation and Restoration, *Committee Hansard*, Brisbane, 17 April 2015, p. 40.

117 Victorian Aboriginal Community Controlled Organisations and Community Service Organisations, *Koorie Kids: Growing Strong in their Culture: Five year plan for Aboriginal children in out-of-home care*, November 2013, <http://www.ccyp.vic.gov.au/aboutus/news/koorie-kids-growing-strong.htm> (accessed 18 August 2015). See: Families Australia, *Submission 77*, p. 4; CCYPV, *Submission 45*, pp 11–12; Mr Rod Jackson, Deputy Chairperson, Victorian Aboriginal Child and Young People's Alliance, *Committee Hansard*, Brisbane, 17 April 2015, p. 45.

118 Mrs Connie Salamone, Executive Director, VACCA, *Committee Hansard*, Melbourne, 20 March 2015, p. 48.

119 Ms Dana Clarke, Chairperson, AbSec, *Committee Hansard*, Sydney, 18 February 2015, p. 25.

120 Ms Wightman, GMAR, *Committee Hansard*, Sydney, 18 February 2015, p. 18.

8.96 In the Northern Territory, witnesses expressed concerns about the lack of funding for Aboriginal child care agencies in the NT, particularly following a recent decision by the NT Government to defund SAF-T, the peak body for Aboriginal child and family safety and wellbeing.¹²¹ The committee notes that SAF-T was established in response to the 2010 Report of the Board of Inquiry into the NT Child Protection System to address the need for greater involvement by Aboriginal communities in child placement decision making.¹²²

Service delivery

8.97 The committee heard the roles of ACCAs in delivery of early intervention and out-of-home care services, including reunification and contact services, differs across jurisdictions.¹²³

8.98 A number of witnesses suggested NSW provides a best practice model for developing state-wide capacity for ACCAs to deliver out-of-home care services.¹²⁴ As the peak body for Aboriginal and Torres Strait Islander communities, AbSec, is responsible for building capacity to transition out-of-home care services delivered by the department to transfer to Aboriginal community controlled agencies (see Box 8.5).

121 See: Ms Regina Bennett, Darwin Aboriginal and Islander Women's Shelter, *Committee Hansard*, Darwin, 2 April 2015, p. 31; Ms Melissa Kean, NPY Women's Council, *Committee Hansard*, Darwin, 1 April 2015, p. 20.

122 Mr Robert Dalton, Policy Advisor, Northern Land Council, *Finance and Public Administration References Committee Hansard*, 10 March 2015, p. 22.

123 See: State and territory governments, answers to questions on notice, 30 April 2015 (received May-June 2015).

124 See: SNAICC, *Submission 93*, p. 12; Mr David Pugh, CEO, Anglicare NT, *Committee Hansard*, Darwin, 2 April 2015, p. 3.

Box 8.5 – Best practice – AbSec – capacity building

The Aboriginal Child, Family and Community Care State Secretariat (AbSec) is the peak Aboriginal body in New South Wales. AbSec is funded by the Department of Families and Community Services and provides advice to government and the care and protection sector on issues affecting Aboriginal children, young people and families involved in child protection and out-of-home care.

As part of recent reforms in NSW to transfer responsibility for the delivery of out-of-home care services to the non-government sector, AbSec is responsible for developing statewide capacity for Aboriginal community organisations to deliver out-of-home care services.

SNAICC notes this approach involves AbSec providing the following services:

- statewide mapping of community needs, service capacity and development support needed;
- support for agencies to build capacity and meet accreditation requirements;
- facilitation of community consultations and development of community-based governance structures;
- involvement in high level service management and policy development forums with government to ensure decisions reflect community service development needs;
- facilitation of partnerships between mainstream agencies and Aboriginal and Torres Strait Islander organisations; and
- support from mainstream agencies to build capacity of Aboriginal and Torres Strait Islander community organisations.

Between 2012 and 2014, AbSec has helped to increase the number of ACCAs providing out-of-home care services from seven to 11, as well as eight partnerships with mainstream agencies.

Source: SNAICC, Submission 93, p. 12; AbSec, Submission 97, p. 6.

8.99 However, AbSec submitted that current funding models for out-of-home care do not allow ACCAs to provide more than basic services, and limits the provision of additional services, such as contact support and transport for children in residential care.¹²⁵ SNAICC also noted while the NSW model provided a good example of giving ACCAs control of the delivery of some out-of-home care services, 'a concurrent commitment to build the capacity for preventative and early intervention supports is needed'.¹²⁶

8.100 An evaluation by SNAICC of five intensive family support services run by ACCAs found significant value in having Aboriginal control over the development and delivery of early intervention and prevention services:

these community-controlled services play a vital role, both in assisting families who face multiple challenges, and in increasing community ownership of child protection issues. It is crucial to support their further development, and to build on their practice, community and cultural knowledge in responding to the over-representation of Aboriginal and

125 AbSec, *Submission 97*, p. 6.

126 SNAICC, *Submission 93*, p. 12.

Torres Strait Islander children and families in Australia's child protection system.¹²⁷

8.101 In other jurisdictions, Aboriginal and Torres Strait Islander peak bodies suggested ACCAs provide family support and out-of-home care services. Ms Natalie Lewis, CEO of the Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP), told the committee that the focus of recent reforms in Queensland is to break down the 'silo approach to services' to provide a 'balanced package of interventions':

Unless the orientation becomes one of prevention and early intervention, then the longer-term outcome is a substantially more costly enterprise for the community to fund.¹²⁸

8.102 In Victoria, Mrs Connie Salamone from VACCA told the committee of the importance of investing in programs delivered by ACCAs aimed at reunification:

If we invested significantly and made Aboriginal children a priority in terms of reunification, looked at how we restructure our reunification services so that they are clearer about the Aboriginal sort of kinship network, community, cultural imperatives, we would have children going home much earlier.¹²⁹

8.103 Mrs Salamone told the committee VACCA is currently piloting an Aboriginal-led program to assist with the reunification of Aboriginal and Torres Strait Islander children with their families that has yielded positive results:

...of the 13 children that were in that pilot—all of whom had been in care for five years or more, all of whom had no reunification plans—we were able to get three of those children home and we had two children who were no longer on any child protection orders. For me that is about saying we can get kids home but we have to do it differently than how generally child protection would view it.¹³⁰

8.104 However, in other jurisdictions, the capacity for ACCAs to deliver services is limited. In the Northern Territory, Mr David Pugh from Anglicare noted that while there are a number of strong, effective ACCAs providing medical services throughout the NT, there is limited capacity for ACCAs to take on child protection responsibilities as most services are delivered directly by government.¹³¹

127 Professor Clare Tilbury, *Moving to Prevention research report: Intensive family support services for Aboriginal and Torres Strait Islander children*, SNAICC, 2014, p. 31.

128 Mrs Natalie Lewis, CEO, Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP), *Committee Hansard*, Brisbane, 17 April 2015, p. 48.

129 Mrs Connie Salamone, VACCA, *Committee Hansard*, Melbourne, 20 March 2015, p. 44.

130 Mrs Connie Salamone, VACCA, *Committee Hansard*, Melbourne 20 March 2015, p. 33.

131 Mr David Pugh, CEO, Anglicare NT, *Committee Hansard*, Darwin, 2 April 2015, p. 3.

Partnerships with mainstream services

8.105 In some jurisdictions, the committee heard examples of partnerships between ACCAs and child protection authorities or mainstream providers to deliver some out-of-home care services.

8.106 Mr Ross Councillor told the committee of a recently established partnership between Wirraka Maya medical service and the MacKillop Family Services in Port Headland in the Pilbara region of WA. The partnership currently supervises 10 out-of-home care placements, with Wirraka Maya aiming to build its capacity to assume responsibility for supporting carers. Mr Councillor, who has extensive experience working for the WA government, suggested the benefits of involving ACCAs is being able to reintegrate children in care back into their communities:

Every kid who comes into care has the evidence to come into care, but they do not have the evidence to go back out of care. We believe that we can do that as an Aboriginal agency, by supporting Wirraka Maya to do that, if they are able to work with the families. We do not have case responsibility over there, but if we work with the carers, the child and the department and we collect that evidence and we can support them to look at cultural plans and all that type of stuff, which will benefit the kid in long-term, it will give the department an opportunity to work with the mothers and the fathers.¹³²

8.107 While the partnership has only recently received its first placement, Mr Councillor noted the project has been 'pretty well received' by the department and by the community:

We believe we can do it better. It is about bringing our expertise, our beliefs, because you have to fight for the kids. Culture fails kids. Society fails kids. Parents fail kids. We cannot allow that to happen when we work with kids. We should not fail them. We have to give them an opportunity.¹³³

8.108 Another example of a partnership between MacKillop Family Services and the South Coast Aboriginal Medical Corporation operates in the south coast region of NSW (see Box 8.6). The committee notes these partnerships provide unique examples of how to build capacity of existing ACCAs to take on responsibility for out-of-home care services.

132 Mr Ross Councillor, Services Development Manager, Western Australia, MacKillop Family Services, *Committee Hansard*, Canberra, 16 April 2015, p. 32.

133 Mr Ross Councillor, *Committee Hansard*, Canberra, 16 April 2015, p. 33.

Box 8.6 – Best practice – South Coast Aboriginal Medical Corporation

South Coast Aboriginal Medical Corporation (SCAMC) works in partnership with MacKillop Family Services to deliver out-of-home care services to Aboriginal children in the south coast region of NSW from Shoalhaven to the Victorian border.

As part of the NSW reform process, SCAMC was approached by AbSec to build its capacity to deliver out-of-home care services for 25 children. Children currently supervised by MacKillop Family Services will be progressively transferred to SCAMC as they build the capacity to train and supervise carers.

Mr Craig Ardler told the committee SCAMC aims place children, where possible, in kinship care arrangements: 'we really emphasise the connection to identity and culture and involvement in community events and things like that. It is also a matter of maintaining the safety of the child within the placement'.

Source: Mr Craig Ardler, CEO, South Coast Aboriginal Medical Corporation, Committee Hansard, Canberra, 16 April 2015, pp 32–41.

Committee view

8.109 The committee recognises the importance of empowering Aboriginal communities to take responsibility for child protection issues, including decision-making processes and delivery of services. The committee considers ACCAs should be introduced across all jurisdictions and should be involved in the full range of family support services for Aboriginal and Torres Strait Islander families, not just out-of-home care, and must be supported by flexible funding models.

8.110 The committee supports examples of partnerships between the government and non-government sector to empower ACCAs to take responsibility for some out-of-home care services, particularly in NSW and Western Australia. The committee notes these partnerships are in the early stages of implementation and that more work needs to be done to develop them across jurisdictions, and expand capacity of ACCAs to develop and deliver services across the continuum of care.