Submission to inquiry into the Child Protection System in the Northern Territory 2010
Context – local

The terms of reference for this inquiry are contradictory, in that the Northern Territory Government seeks to conduct a broad-ranging inquiry into the “child protection system”, yet reporting and recommendations are limited to the “Child Protection System”. The Board must recognize that children are protected and cared for by society, not merely a child protection system. If the Board recommends to strengthen society to care for its children, then the Child Protection System will be better able to cope with the small number of children who require child protection services.

I do hope the Board is able to take note of my submission, given this baseline criticism of the work they are undertaking.

The formal “Child Protection System”, the subject of this review, is only part of the “child protection system” – the whole village - or society - that is needed to raise a child (1). This system operates in a context of growing social and economic inequalities; the global financial crisis; loss of the Australian ideal of egalitarianism (2), and imminent planetary change including increasing fossil fuel prices, climate change and food insecurity (3, 4). A number of measures of socio economic inequality in Australia are increasing both absolutely and relatively between the least and most disadvantaged. Both relative and absolute levels of disadvantage place children at risk of abuse and neglect (5). Teenage pregnancy is also more common among disadvantaged groups. Addressing the causes of disadvantage will reduce teenage pregnancy, and the number of children at risk of requiring child protection services (5).

In NT today, it is regrettable that child protection services are focused on policing children and families at risk rather than addressing social disadvantage (6).

“Child protection cases typically involve children and families marginalised by poverty, social isolation, addiction, disability and/or minority status... These families often lack the material and social means to offset the impact of situational or personal problems, which, in turn, are often precipitated by adversity and deprivation (6)....

... children removed by child protection authorities typically come from poor and marginalised families. From an ecological perspective, this is hardly surprising: social disadvantage predisposes children to maltreatment. This has been known for more than three decades. At the same time, social disadvantage as a potentially explanatory factor for child maltreatment has been neglected in child protection practice. Instead, the individual parent takes centre stage leading to 'reform parent or remove child' practice priorities.” (6)

Likewise I consider that the terms of reference of this inquiry miss the point, and the maximal benefit from any such inquiry is limited. There have already been inquiries into issues relevant to child protection, most recently the inquiry into the protection of Aboriginal children from sexual abuse which led to the “Little Children are Sacred” Report. The Board must recognize the considerable cost of these inquiries to both governments and to communities, whose confidence is broken and hopes are dashed when recommendations are not implemented (7). The Little Children are Sacred report drew attention to the large number of inquiries whose recommendations await implementation. The inquiry consulted widely and made a point of
consulting with government and service providers prior to releasing its recommendations to ensure that implementation of the recommendations was feasible. I believe that these recommendations should be re-considered as a part of the current inquiry. Child sex abuse is a marker for other forms of abuse, so these recommendations have direct relevance to the child protection inquiry.

Context - national
Australia’s current and previous Commonwealth governments supported and succeeded in achieving a high rate of population growth, of the order of population growth in newly industrializing countries (8, compare 9). In particular the introduction and continuing increase in the “Baby Bonus” entices women to consider having a child in situations when they would not do this in the absence of this perverse incentive. I use this term because the bonus itself is woefully short of the cost of raising a child, and therefore increases the potential debt of the most vulnerable.

More new babies means more people, and more people further strains individuals, families, communities and the child protection system. This is the case even though Australia is currently able to produce adequate food and water for its people. If this is further threatened by climate change it is likely that conditions for those most at risk and disadvantaged – in particular children - will deteriorate (4).

The widespread crisis of child protection systems across Australia is totally predictable in this setting, and the potential for this inquiry to make far-reaching recommendations limited. I would like to see the Board advocate at an intergovernmental level about the underlying causes for the crisis in child protection. Inequality and high rates of population growth are predictable outcomes of chosen policies. These policies can be modified to bring about alternative situations for children and society in general.

I believe that if a process is established for these issues to be recognized and eventually addressed, the other issues in the Terms of Reference will be much easier to address.

Care and protection of children act – and Really Caring for Kids campaign
There were unprecedented mandatory notification requirements of the Care and Protection of Children Act (2007). These required every person in NT to notify to Central Intake Team every person under age 16 who might have been thinking about sexual activity. The introduction of this legislation was said to have originated from Aboriginal grandmothers seeking to prevent child sex abuse. If this story of the rationale for the legislation is true it is a misrepresentation of culture, and inappropriate bias of cultural sensitivity over evidence.

Mandatory notification of all teenagers having sex would overload an already strained system, so it is fortunate that few people provided these notifications. However the existence of the legislation deterred young people from seeking care, and enraged health professionals. As a result hundreds of hours of high level professional time were used in discussing tactics to change this legislation, in a campaign called “Really Caring for Kids”. Teenagers were turned away from care if they did not want to be notified to Central Intake Team. Others were notified to the Team but to my knowledge no action was taken. Both of these are can lead to poor outcomes for young people, and a poor reputation for the Child Protection System.
Aboriginal grandmothers may have wisdom and demand respect in particular areas of expertise, but they are not necessarily experts in mandatory notification and related public health issues. I believe that this legislation reflected an immaturity of the NT government process, and inability to separate cultural sensitivity from sycophancy. There are costs of this exercise in unwanted pregnancies, unwanted children who may be at risk; and lack of child protection resources for managing children truly at risk. The current inquiry should recommend that NT government should in future consult widely both internally and externally, and discuss a range of options prior to implementing unprecedented legislation. The current inquiry may be an example of this consultation process, although as noted the Terms of Reference are restrictive and could themselves have been the subject of consultation.

**Intake system and feedback to notifying agents**

I add own experience of being unable to contact the Central Intake Team on a number of occasions and receiving recorded messages that I should call back later because the line was overloaded. I believe that these minor issues would be resolved if structural issues of the crisis in child protection were addressed.

The centralization of the intake system leads of a remoteness of service, and sense of alienation of people outside Darwin. I do not know whether this has affected the quality of the service, but our perceptions have deteriorated.

I have also been frustrated by the lack of routine feedback of even the most basic of information about a notification. Basic routine feedback could include details of the date and classification of the notification, whether or not there are any related notifications and whether or not the case has been accepted or investigated. However I can report that I have been able to receive some of this information on specific request.

**Health in all policies**

As a unifying proposal for addressing the range of issues raised in this submission, I draw the Board’s attention to Health In All Policies.

“Health in all policies is an innovative **policy strategy** that responds to the critical role that health plays in the economies and social life of 21st century societies. It introduces **better health** (improved population health outcomes) and **closing the health gap** as a **shared goal** across all parts of Government and addresses complex health challenges through an **integrated policy response** across portfolio boundaries. By incorporating a concern with **health impacts** into the policy development process of all sectors and agencies it allows Government to address the key **determinants of health** in a more systematic manner as well as taking into account the benefit of improved population health for the goals of other sectors. Health in all Policies is committed to the
achievement of sustainability and the health and wellbeing of both present and future generations.” (10)

I would like the Board to bring this policy strategy to the attention of NT government, and propose that they both implement it, and bring it to the attention of Commonwealth government in relation to child protection.

References


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