

DARWIN REMOTE OFFICE

SUBMISSION TO

THE NORTHERN TERRITORY GOVERNMENT

INQUIRY INTO THE CHILD PROTECTION SYSTEM

(March 2010)

The NTFC Darwin Remote Office (DRO) wish to offer a submission to the NT Government *Inquiry Into The Child Protection System*. The staff at the office would like it to be known that due to a limited amount of time and human resources available it was decided that the office would largely concentrate on a response to the ***“Practice and Systems”*** issues. These issues were seen by staff as having the most direct impact on the effectiveness of the day-to-day work that we do with communities, families and individuals in the DRO catchment area.

General statements

- ✓ An overarching issue of social injustice for people living in remote communities (predominately Aboriginal people) is clearly visible to the field staff of the DRO. Systemic political inequity dictates that people in remote NT communities do not have the same rights of access to the usual services which people in urban centres command.
- ✓ The communities that the DRO visit are growing fast, with two large “towns” now in excess of 3000 people each. The communities which DRO visits house a disproportionately large number of young families and young children, in an environment of extreme social disadvantage. The staffing resources that NTG allocates to provide child protection services to these, and other remote communities is grossly inadequate and allows for little more than superficial child protection responses. The DRO covers a very large geographical area, with a complex and diverse demographic, encapsulating in excess of 14000 people (ABS 2006). The DRO is allocated just 4 Community Welfare Workers and 4 Aboriginal Community Workers to provide direct service delivery to this client group.
- ✓ The NT Child Protection system is growing fast and becoming more complex with multiple new services available to clients in Darwin urban locations, yet NTFC remote office resources and staffing positions remain generally static. Within this context DRO workers are finding it increasingly difficult to deliver effective and meaningful services to families in remote communities when issues and cases are becoming more complex.
- ✓ There needs to be recognition at the policy level that child protection work in remote or isolated communities requires a different approach than that in

urban settings due to the enormous social disadvantage experienced by families in those communities.

- ✓ There needs to be increased community education in remote communities as to what constitutes a child protection issue and how people and services in remote communities can assist in responding to children at risk of abuse or families in need of support.
- ✓ NTFC needs to create a system that conducts regular and ongoing evaluation of our case work through structured interviews with families that would focus on the family's experiences with Child Protection Services.
- ✓ NTFC needs to examine the outcomes of inquiries in other states which share similarities with the NT. For example "The Gordon Report" from Western Australia recommended that skilled child protection workers be based in remote Indigenous communities. Has NTFC considered adopting this model for remote NT communities?
- ✓ The NTFC Policy manual is not geared to remote practice with indigenous families. What is in the Policy manual doesn't always work in remote practice. Changes to the Policy manual has recently included relative care which was missing from the Policy for a long time and therefore remote offices were not consistent in practice.

There is a recognised need for specialist local based services

- ✓ Fly-in fly-out approach currently adopted by NTFC to service remote communities does not provide the necessary regular, consistent intervention for children and families and impacts negatively on building the necessary working relationships with families and the wider community
- ✓ There is a need for all services in remote communities to be maximised by providing qualified practitioners and skilled support staff to effectively delivery specialist services.
- ✓ There is a need for specialist staff from NGO's and GO's in remote communities to come together at regular forums to discuss common issues and concerns; and to work towards developing an integrated strategy that delivers quality services in remote communities in relation to general child wellbeing.
- ✓ There should be a position appointed to gather and disseminate regional information about services, issues, research, projects, etc amongst all NGO and GO workers. This could be done in the form of a multi disciplinary professional journal and website.
- ✓ There is a need to ensure that families are provided with sufficient meaningful support and encouragement to resolve issues in a holistic manner.
- ✓ There needs to be supported strategies that promote local people feeling that they are cared for and empowered rather than being controlled.
- ✓ Non government organisations such as Somerville, Salvation Army, Catholic Care, Anglicare, etc need to receive funding to extend their services out to remote locations. Ideally funding needs to be sufficient to allow these organisations to establish themselves as core services in remote regions which not only deliver essential services on a daily basis but also create employment and skill development opportunities for local people.

- ✓ There needs to be a formal co-ordination of support services in remote communities rather than successful child protection work relying only on informal networking and informal worker based relationships.
- ✓ NTFC policy for interventions in remote communities needs to promote, and allow for, consistency and regular contact with the family, in close collaboration with other significant services that are involved in supporting progress and changes within the family. Working with families does not end with referrals; follow up needs to be consistent.
- ✓ The DRO needs to grow with the rest of the NTFC operational system and provide a service that caters to the increasing complexity of the issues faced by families. This could mean more specialised positions within the DRO, creative recruitment and filling stagnant vacancies with multi-disciplinary team members such as psychologists, teachers, nurses, therapist, family support workers, team support workers, DV workers, mental health workers, youth workers, etc.
- ✓ There needs to be recruitment of rural and remote foster carers. There needs to be training and support provided to registered foster carers who live in remote and rural towns and communities.
- ✓ To address common issues in the many remote and isolated areas, a team of workers from various disciplines including child protection, community development, psychologist, cultural adviser, education, and early childhood needs to attend the larger communities, live-in for a time and work with the community to identify the issues impacting negatively on children in that community and develop options specific to that community to address the identified concerns
- ✓ Current child protection work in remote and isolated areas relies too heavily on utilising the extended family system, or other "strong" community members. Frequently such people / families are already worn out and barely coping. The limited availability of essential and specialist support services means that NTFC work demands that the most disadvantaged families are made wholly responsible for their own care and recovery.
- ✓ The reality is that the most disadvantaged people in Australia are living in the most disadvantaged areas of the NT and are receiving less service delivery and support than anywhere else, which results in increased pressure and stress on families and individuals

Some suggested services and comments about these:

Maternal and Child Programs:

- There needs to be mandated parenting programs and parent support groups. These would need to be adequately funded as specialist services and tied closely to NTFC, not simply established as voluntary community run 'self help' programs.
- Programs need to be developed that aim to further inform and educate parents of what is acceptable and unacceptable parenting practices, giving consideration to cultural diversity without compromising the safety of the children.

- Parenting support for young parents needs to be mandated. There is a disproportionate amount of young people (15 – 24 years) in remote communities, with very young children, and often more than one child, living in disadvantaged circumstances in geographically isolated locations that do not have the support of experienced adults to guide their child rearing practices.
- Intensive Family Support services need to be established and well funded. This needs to be a long term government commitment that acknowledges the need for such services to remain in the remote community for several generations to redress the current dysfunction within many aboriginal families.
- Any Family Support or Parenting Services that are established in remote communities need to be able to actively reach out and assist families to connect with them. These services need to adopt assertive/aggressive engagement principles rather than passively waiting for families to come to them.
- Need to consider how services should be introduced to a community.
- Given the young age of the average first time parent in remote communities the process of intensive parenting education needs to start within the school system from the 8th grade and continue to the 10th grade. Due to the social breakdown of the 'Grandparent Generation' in many Aboriginal families the student must learn about acceptable parenting practices, and understand how to seek the appropriate parenting support.
- Ideally local people in the community need to be involved in identifying their own parenting needs and provide their own ideas for how these needs can be effectively met. Regular structured and methodical evaluation of any program, project, service, etc is critical.

Education:

- School provides multi-dimensional value for a child and much needed respite for the parents but with attendance rates at many remote schools so poor, programs are needed to get children into schools. There is a desperate need for the employment of truancy officers within the remote community who simply get the children to attend school and then focus on addressing the reasons within the family of why children are not going to school. Punitive measures such as fines or the withholding of welfare money will simply result in further social disadvantage.

Need for services for children (0 – 5 years)

- Intensive Ante Natal support and education program for young parents (under 18 years). Consideration to be given that this type of program is delivered in a residential model.
- Creation of "unborn infant at risk" category at Central Intake so that high risk pregnancies can be reported to NTFC.
- Legal authority to direct or detain pregnant mothers who are known chronic substance abusers into a residential treatment program such as CAAPS for the term of the pregnancy in an attempt to reduce Foetal Alcohol Syndrome.

- Early childhood home visiting program that tracks children from birth to 5 years via monthly home visits and monitors all of the child's developmental milestones, referring children into specialist support programs as developmental problems are identified.
- An immediate program response to Failure to Thrive cases in remote locations that stops victimising the children who are subjected to starvation. This could simply be a foreign aid (Red Cross, Oxfam, etc) type feeding program that does nothing more than deliver essential food to starving children whilst other programs address the underlying issues of poor parenting, poverty, overcrowding, violence, drug abuse, alcoholism, gambling, etc, etc.

Need for services for young people (5 – 12 years)

- General recreation and social engagement programs at the community level.
- A larger focus on the delivery of youth services in remote communities. Each community should have youth workers attached to the council who are responsible for setting up youth programs.
- Programs to address petrol sniffing in specific communities-VSA workers on the ground in communities. Currently there are a small number of VSA workers for the NT. How effective is the intervention? CAAPS is the only treatment program in Top End for VSA clients. What else can be done?

Need for services for youth (12 years +)

- Social education type programs
- General recreation/sport programs/activities
- Specialised adolescent health services
- Service specialising in adolescent mental health
- Specialised adolescent CP workers for high risk adolescents
- Creation of "adolescent at risk" category at Central Intake so that adolescents in high risk situations, not necessarily related to parenting, can be reported to NTFC but not result in a Child Protection "investigation".
- Sexual health programs
- Suicide awareness and prevention programs
- Substance abuse programs
- Youth council initiatives connected to NT Parliament.
- Youth leadership programs

Mental Health

- Services provided at an urban level by government agencies and community organisations to be implemented in larger remote communities. Services to support individual with mental health as well as support services for family.
- Remote mental health service for children and adolescents

Alcohol and other Drugs

- Services provided by government agencies and community organisations to be implemented in larger communities. Services to support individual addict as well as support services for family.
- Residential substance abuse treatment programs (such as CAAPS) in remote locations.

Domestic Violence

- Support services and educational programs, especially for young people in violent relationships.
- Greater Police powers to direct violent offenders into treatment programs.
- Tougher penalties for repeat violent offenders.

Gambling

- Similar comments as made above but any programs/services for all the above need to consider the impact of nil or little real employment opportunities.
- Creation of more employment opportunities in line with the interest and skills of the people in the community.
- NTFC Executive to pursue a commitment from NT Police to recognise the existence of illegal gambling in remote communities and the negative impact which this illegal activity has upon child wellbeing in already dysfunctional and disadvantaged families.
- Legal "lottery" systems (Bingo tickets, lucky squares, raffles, etc) to be introduced whereby profits are redirected back into community support programs.

Point to Consider:

How can we best provide all of the necessary services to the larger communities? One suggestion is to have a One Stop/Hub service. Need to consider ways to cater for the cultural obligations of local employees and to ensure that the cultural 'make-up' of the staff group does not alienate certain groups or families within the community.

Priority Actions:

- ✓ Adequately resource NTFC DRO to work as we currently do in remote communities until some of the aforementioned programs/services/activities are operational. That is, resource DRO with Child Protection teams of 4-6 workers (not just 1 CWW & 1 ACW) per region who can travel to communities on a consistent basis and stay for longer than 1 – 2 days at a time.

- ✓ Caseloads to be reduced to a manageable level to allow workers to provide intensive supports to families. This could occur if the abovementioned point was actioned.
- ✓ A separate Out of Home Care team to be established at DRO with 2 CWW, 2 ACW, 2 FSW and 0.5 Admin support positions assigned to the office. This would allow 3 workers to manage all remote OoHC cases in each of the existing 2 CP teams. This would serve to improve the quality of services provided to children in substitute care whilst allowing the other teams of workers to concentrate on providing high quality, meaningful interventions to core child protection cases only.
- ✓ In the immediate situation, where people are living with such a lack of resources there needs to be a commitment by the NTG to deliver more "external" support to communities until such time as those services can be established (and based) within the community.
- ✓ A Remote services plane and pilot similar to that which the Police are resourced with.
- ✓ An allocated, and adequately resourced, office space in each of the large communities which DRO services.
- ✓ Permanent accommodation facilities resourced for travelling DRO teams to allow for longer stays in the larger communities.
- ✓ Immediately source Family Support Workers or similar to DRO to enable them to do the family support and case support activities rather than Community Welfare Workers having to perform all the functions in child protection investigations, out of home care and family support activities.
- ✓ Supervision (different to case management/supervision) to be available by skilled, trained experienced personnel – not to assume that all Team Leaders have necessary skills. Staff to access appropriately qualified personnel external to office at departmental expense.
- ✓ Support the idea of a panel of professional consultants to be available for casework support.
- ✓ Need to streamline the paperwork so that (say) 70% of worker's time is directly on casework activities and 30% to record-keeping rather than the opposite
- ✓ Consider placing NTFC child protection workers (CWW) in large remote communities at the health centre and/or school who can work with the local Remote Aboriginal Family and Community Worker (this latter scheme to be expanded) to conduct early intervention programs, family support and address some local initial child protection matters, assessing whether a formal notification is needed. This worker would be attached to the DRO and work in conjunction with a CWW based in Darwin.
- ✓ Any new model / approach needs to have a planned implementation program with the various steps spelt out recognising that staff in many instances are already working on 'overload'.

Regarding the Differential Response Framework:

- ✓ The DRF needs to take into consideration the unique nature of working CP in the NT- the client base is unique, the geography is unique, the living circumstances of the client base is unique- one size doesn't fit all.

- ✓ Issues continue around sexual activity between young people. This can be very confusing when Central Intake Team decisions are not consistent around this issue; one intake named a 12 year old girl as a person believed responsible for abuse when she is in a sexual relationship with a male of similar age.
- ✓ The Central Intake system needs to be able to differentiate between intra and extra familial abuse. Extra familial abuse is not necessarily associated with abusive parenting behaviour and therefore should not enter the child protection system.
- ✓ The DRF needs to build in recognition to the fact that the extreme disadvantage lived by families in remote and isolated areas is a key factor leading to child protection issues and is usually hard to separate from the 'pure' child protection matter.
- ✓ New categories at Central Intake Team to be created for 'at risk' reports to be received in relation to high risk pregnancies and adolescents in high risk situations.
- ✓ Consideration needs to be given to recruiting more Aboriginal staff to the Central Intake Team to assist with making assessments on reports about Aboriginal children in remote locations. Perhaps the Aboriginal Community Resource Worker team that is based at Central Intake could be co-opted to provide this function.