

SPECIAL COMMISSION OF INQUIRY
INTO
CHILD PROTECTION SERVICES IN NEW SOUTH WALES
PUBLIC FORUM

Before The Hon James Wood AO, QC, Commissioner

At Inverell, NSW

On Thursday, 20 March 2008 at 2pm

Counsel Assisting: Ms Gail Furness

THIS TRANSCRIPT HAS BEEN EDITED IN
ACCORDANCE WITH NON-PUBLICATION ORDERS
MADE ON 20 MARCH 2008

.20/3/08

1 Public Forum
Transcript produced by ComputerReporters

1 THE COMMISSIONER: Thank you for coming to this public
2 forum. As you are probably aware, we are moving around the
3 state to various regions to try and understand what might
4 be the local problems with the child protection system. We
5 are not just looking at DoCS, obviously, we are looking at
6 the way all the agencies - Health, Education, Department of
7 Disability, Aging and Housing and so on - all have a role
8 to play in relation to child protection, including
9 obviously also the police.

10
11 Our terms of reference are very wide. We are due to
12 report to the government on nearly every aspect of the
13 child protection system. So it is very important for us to
14 get a feeling from around the state of where the problems
15 might be, what might be working, what might not be working.
16

17 We are actually recording these proceedings for our
18 benefit because we do need to have up-to-date and current
19 notes of what we are hearing. We are going to so many
20 places that it's very difficult to keep it all in your mind
21 otherwise. It is important, therefore, that if you are
22 dealing with a particular case - that is, a child who has
23 been removed or family which has had some problems - it's
24 better not to actually name that child or the family.
25 That's necessary for privacy and confidentiality reasons.
26 If it so happens that you identify that child either by
27 name or indirectly, we may have to change the transcript to
28 remove that reference.
29

30 We are looking at every aspect, as I said, from the
31 situation in each region as to whether there are services
32 available through hospitals, education, health or otherwise
33 to assist those families who might be getting into troubles
34 which could lead to a statutory intervention where the
35 child or family are in crisis. That includes the universal
36 services and the early intervention, or Brighter Futures
37 program, which DoCS has. That is a very important thing
38 for us to look at, to see how well that is working and
39 particularly what services might be missing from it.
40

41 We are also then looking at the actual situation where
42 children may have been removed and where families have had
43 to go through the court process, to see how that has worked
44 or hasn't worked. Clearly, we are looking at the
45 out-of-home care situation where children are being placed
46 away from their birth families, either on a voluntary basis
47 or a supported basis or as a result of care and protection

1 proceedings in the court.

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I suspect we have people who may have an interest in each one of those areas, and I hope we have some foster carers and other people here, NGOs, who can tell us their experiences. Rather than try to attempt to deal with this in any sequential order under those three broad topics, I think it's best for us to simply follow through the list of speakers who have indicated a desire to say something, and anybody else who wants to speak may do so after they have had their turn.

It would be helpful if we could ask you, and I'll call on you by name where we have the form, if you could indicate your area of interest once you do speak, and later on if those people want to speak who haven't filled out a form, if they could identify themselves and indicate what their interest is. The acoustics in this room are not great, so we will pass the microphone around.

Perhaps starting with the first on my list, Amanda Brown, please.

MS BROWN: I work in the Kempsey area and I'm currently staying in Inverell, and I know a family that's had their children taken off them. They come from a local family and yet people in Kempsey and Inverell look after their children, and reports have been made to DoCS.

THE COMMISSIONER: I guess lots of reports are made to DoCS and it has to prioritise the reasons for either intervening or providing some sort of help. That's a very broad series of cases you've mentioned, but what are the sorts of areas that have been reported where there has been no response?

MS BROWN: There has been neglect, the state of her household, and being little children. Nothing has happened to them. Apparently DoCS have spoken to her, but the children are still uncared for.

THE COMMISSIONER: Again, it's very hard to comment on a particular case, but it may be DoCS is trying to do things for them to stop the situation deteriorating to a point where the kids are really at risk. But thank you for that indication. It is at least encouraging DoCS are doing something with that family and it's very much a personal

1 judgment as to whether those kinds of support services are
2 enough or whether they have to move into intervention.
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4 MS BROWN: She's laughing at DoCS.
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6 THE COMMISSIONER: The mother is?
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8 MS BROWN: Yes.
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10 THE COMMISSIONER: I don't know who the reporters are, but
11 if there is a problem of that kind, all you can do is keep
12 reporting, because the accumulation of things can be very
13 important. If it's a neglect case, accumulation can be
14 very important. Thanks for that. The next person, please,
15 Rosemary Curtis.
16
17 MS CURTIS: Thank you very much for being able to speak.
18 My concern is I have worked with DoCS from 84 to 2000. I
19 was retired from DoCS with chronic adjustment disorder.
20 I have been told there's a lot of change since I was there,
21 and I can't see any change. All the staff are
22 inexperienced. With homelessness, everyone is involved. A
23 lot of families that I see around, foster care is one of
24 the things, there's not a lot of foster carers around
25 Aboriginal, non-Aboriginal. I have been doing foster care
26 for both in the last six months and I'm working three jobs,
27 and I just don't understand what change is supposed to be
28 since 2000, and that's what I would like to find out.
29
30 With the young children, I see people walking around,
31 you see young mothers walking around laughing at DoCS,
32 laughing at Centrelink. I guess I have been trying to do
33 community work all my life. We live on the river bank and
34 I have come through Education and DoCS, and I don't hold
35 anything against any department. I have been trying to
36 make it better, but I don't understand why we haven't got
37 any (inaudible) in regional areas, and I have been saying
38 that for years. They should have at least a couple of
39 house parents, if the kids are taken into care, they are
40 looked after until the parents can be working. Even taking
41 the children away from parents is not enough to make them
42 not come and take them back. I think the parents should be
43 brought before the courts, too, because eventually looking
44 after kids, they do return to their parents, they run away.
45
46 I have been through the lot, and you will see it if
47 you choose to look at it. But it's just so hard seeing

1 young kids on their own. I suppose the DoCS office is
2 stretched, but no support. It's always recommended they
3 should have a couple of family support workers with them to
4 try and help the parents. I was doing time management and
5 family support work where I worked, at 7 o'clock in the
6 morning to try and get them to bath the baby and get the
7 kids off to school. I'm working in a school now and we
8 still see the kids coming to school - the schools have got
9 to be doctors and lawyers and grandparents.

10
11 The main thing I want to talk about is: why are
12 Aboriginal grandparents still looking after their great
13 grandchildren and their grandchildren? I mean, we're
14 trying to enjoy ourselves, but there is a lot of it around
15 and I can give you a report on this. We are just getting
16 to the stage now where we're tired. We want to be
17 grandparents, but there's too much expected of the
18 Aboriginal community.

19
20 I know some families who are trying to look after
21 their siblings and grand kids, and they are not even
22 getting any money. I have found in DoCS, when I was
23 placing kids, I said I'm going to change this. 19
24 children, Aboriginal kids, were committed to care, and I
25 said I'm going to talk to the parents about changing them
26 so they could get a psychological assessment. We're not
27 miracle workers. People are trained up to try and help us.

28
29 I came into DoCS from the school of hard knocks and I
30 worked across the community in a lot of fields. I'm not
31 naming a child, but one of my very first cases was a
32 seven months old baby had to have an operation at 11 months
33 for genital warts, penis rubbing, and we couldn't get it.
34 For the life of me, I can't see changes from 2000 to when I
35 left.

36
37 When I signed the papers to say I had a chronic
38 adjustment disorder, which is an American disease, I signed
39 a paper to say that I wasn't going to make any claims. So
40 I just walked out the door, I sat in the carpark, and I
41 cried for two hours, because they even cut off the
42 psychologist I was seeing, and I paid him myself. But it's
43 not about me, this is what I see goes on.

44
45 I can give you a line of stuff and I just know what we
46 can do with this government now. They talk about the young
47 children in the Northern Territory and I read in the paper

1 what's happening at Boggabilla, and you put reports in that
2 DoCS is overstretched with trying to do something. I have
3 taken kids out of the park where I live and taken them to
4 their grandparents myself and I have taken young babies out
5 of town myself to their family with the mother.

6
7 So I would like to know what the changes are with
8 DoCS. I keep getting told there's big changes, that is
9 from 2000, and I don't see any. I'm still trying to keep
10 up with child protection. I asked if I could get respite
11 with a couple of the children, because I was dealing with
12 those children when I was working with DoCS. Since
13 September last year, I have had non-Aboriginal and
14 Aboriginal kids in my care because they can't find foster
15 carers.

16
17 Just the reporting, when they bring a child to your
18 house, I had one little child I thought had meningococcal
19 or meningitis, which I spent all weekend at the hospital
20 with. I had another one I wasn't told about who tried to
21 top herself. So I'm just concerned - I was going to tick
22 everything on that square - I'm concerned about the lot,
23 but particularly Aboriginal grandparents who are trying to
24 still care for their children.

25
26 THE COMMISSIONER: You have certainly covered all the
27 areas that we are looking at. There have been a number of
28 changes over the years. I don't think it's really very
29 helpful for me to go through those today, it's better to
30 hear what your problems are currently. We are looking at
31 those changes and future changes across the board.

32
33 But you've certainly identified a difficult problem,
34 in that the grandparents are taking up a huge
35 responsibility these days of looking after their children's
36 children. I think it's a big question for the community to
37 address, how to bring your children - that is, the parents
38 of these young children - into the scheme to try and assist
39 the problems, which means I guess focusing on problems of
40 alcohol and substance abuse and domestic violence.

41
42 A community has to respond as well as DoCS to that.
43 If there are any local strategies that are dealing with
44 this, we would like to know. Perhaps we could hear if
45 there are other people who are aware of local strategies
46 that are working in that area. I will just pass on to
47 another speaker at the moment, but thank you for your

1 experience. [REDACTED], please.
2
3 [REDACTED]: I have residence of my 6-year-old [REDACTED],
4 who has some major mental health issues and I have been
5 asking DoCS for some time for help, for support. They say
6 that because we went through the Family Law Court, their
7 hands are basically tied and they cannot help. When my
8 solicitor took this through Family Law Court, I had no idea
9 I could not get help later because of it.
10
11 He has been seen by Mental Health in Armidale and they
12 have assessed him as having reactive attachment disorder,
13 complex post-traumatic stress disorder, conduct disorder,
14 and ADHD. I had to have the police come and remove him
15 from my home two weeks ago because again he was trying to
16 stab me, as he does quite often. He held a knife to his
17 own throat, he has tried to stab other children - and I
18 just want some help.
19
20 MS FURNESS: You've been to the mental health team at the
21 Department of Health; is that right?
22
23 [REDACTED]: Yes.
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25 MS FURNESS: And they have assessed --
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27 [REDACTED]: They have assessed him, but won't accept him
28 as one of theirs because he doesn't meet their criteria.
29 DoCS won't accept him because he doesn't meet their
30 criteria. PANOC won't accept him because he doesn't meet
31 their criteria.
32
33 MS FURNESS: How old is he?
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35 [REDACTED]: Six.
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37 MS FURNESS: Whereabouts do you live?
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39 [REDACTED]: I live [REDACTED]. He has smashed my
40 car window, he has smashed windows in my home, he has
41 trashed my house, slashed the lounge. Where do you go for
42 this help?
43
44 MS FURNESS: Is there anyone here from the local area
45 health service? Can you assist in telling us what services
46 might be available to help this woman and [REDACTED]?
47

1 THE COMMISSIONER: Can I just add that we have had this
2 sort of problem in other places, and very often it is
3 helpful after the meeting for you to talk to one of the
4 people privately.
5
6 [REDACTED]: I have talked to these people.
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8 THE COMMISSIONER: I'm not sure if you've spoken to these
9 two people here.
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11 [REDACTED]: I have, absolutely. I've been everywhere.
12
13 THE COMMISSIONER: What we will do, let them tell us
14 something now, but you might find after the meeting they
15 can give you some further assistance.
16
17 MS COOPER: I'm Tanya Cooper, I'm acting in a co-ordinator
18 role, particularly for PANOC services. Absolutely the
19 frustration that [REDACTED] has experienced, particularly around
20 the difficulty engaging, and I guess one of the main
21 barriers that we have experienced to date is that because
22 her matter sits with out-of-home care with the Department
23 of Community Services, but currently because it's come in
24 through the Family Law as opposed to the child protection
25 system, it is currently unallocated.
26
27 That does have implications. We have attended a case
28 meeting at the department to try and find ways around that.
29 It certainly would meet the criteria for PANOC services,
30 but the issue at the moment is that there are strict
31 criteria around engagement with PANOC that means that the
32 case does need to have an allocated caseworker, and that
33 unfortunately is the barrier that is presented.
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35 MS FURNESS: Is there no caseworker because there has been
36 no involvement of DoCS or is there no caseworker because
37 you don't have the resources to find a caseworker?
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39 [REDACTED]: No, there is no involvement with DoCS because
40 we went through Family Law Court.
41
42 MS FURNESS: I understand that. From Health's point of
43 view, why doesn't it meet the criteria?
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45 THE COMMISSIONER: Whose caseworker doesn't exist?
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47 MS COOPER: The Department of Community Services'

1 caseworker doesn't exist. We have tried to address that by
2 making risk-of-harm reports in relation to the current
3 issues that have been identified and we did meet with the
4 out-of-home care caseworker manager in relation to that.
5 The rationale for that at the time, I think, was about
6 capacity and the need to prioritise children in out-of-home
7 care through the department and the Children's Court.

8
9 MS FURNESS: The fact that there is no allocated
10 caseworker from the Department of Community Services means
11 that you, in the Department of Health, cannot offer this
12 woman any services?

13
14 MS COOPER: PANOC services cannot, yes, that's right.

15
16 THE COMMISSIONER: What about mental health services
17 generally, though?

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19 MS COOPER: Mental health could. There are other health
20 services that could provide that intervention, and I guess
21 that's the barrier that [REDACTED] has experienced.

22
23 THE COMMISSIONER: What is the barrier, though, for the
24 normal mental health services to intervene and provide
25 assistance?

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27 MS COOPER: A lack of staff locally.

28
29 MS FURNESS: So are there mental health services available
30 to help this woman and [REDACTED]?

31
32 MS COOPER: My understanding is that mental health
33 services did engage for an assessment and, from
34 report, upon assessment, the primary issues related to
35 attachment, not current mental health issues. Is that
36 correct, [REDACTED]?

37
38 [REDACTED]: It's related to reactive attachment disorder,
39 also upon the mental health report, complex post-traumatic
40 stress disorder, conduct disorder, ADHD, and they say that
41 that doesn't meet mental health criteria and they have
42 referred me back to DoCS.

43
44 It wasn't until the police came and removed [REDACTED] and
45 then I had a phone call, I think a couple of hours later,
46 from the DoCS Helpline saying that [REDACTED] was at the police
47 station, he had gone to sleep, and would I allow him to

1 come back, and I said yes. When the police officer brought
2 him back, he said, "I have been in touch with the Helpline
3 and I have told them that if they do not have help and
4 support in place for you by 11am tomorrow morning, I will
5 come out and pick you and [REDACTED] up and I will go
6 and sit in the DoCS office until they give you the help."
7 And they did give me the help the next day, that was two
8 weeks ago. Monday of this week, they wanted to close the
9 file.

10
11 MS FURNESS: What help did you get two weeks ago?

12
13 [REDACTED]: They rang the school counsellor and asked if
14 the school counsellor would do some counselling with him.
15 The school counsellor doesn't do counselling. I spent an
16 hour and a half with her, I gave her all the background and
17 I have said DoCS have suggested that [REDACTED] may benefit from
18 some help with counselling and she said, "I don't do
19 counselling."

20
21 DoCS had offered to pay my fuel to [REDACTED]. I had
22 myself made arrangements with a paediatrician over there,
23 made appointments, seen a doctor here. He needs an ECG
24 because the paediatrician said his rages may come from
25 seizures, and there's a lot of things that may cause what
26 he does. I can't get any help from DoCS, I cannot get
27 support. They now want to close the file because I have
28 made my own appointment with the paediatrician.

29
30 MS FURNESS: What support do you want from DoCS?

31
32 [REDACTED]: I want them to be there when I need them, I
33 want to be able to ring them and talk to them, I want to be
34 able to go in and talk to them. I thought they were there
35 to support the child who needs help.

36
37 MS FURNESS: Do you need financial assistance?

38
39 [REDACTED]: I would like some financial assistance, only
40 with medical things. They have said legislation prevents
41 them from helping with that, I was told that yesterday
42 actually. I just can't take any more and my next step is
43 to go into DoCS and say, "I'm sorry, I can't do this any
44 more," and let them take him, because I can't do it.

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46 MS FURNESS: What we might do is get your name and details
47 and we will talk to you and others about this case further.

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██████████ : Thank you.

THE COMMISSIONER: I think what we have just heard really does put a very close emphasis on the thing we are looking at, that is, a better way to engage all of the agencies - health, DoCS, DADHC and so on - in a more meaningful way. Does anybody else want to say something about this?

MS HEYMAN: Susan Hayman, from Hunter New England Health. I have two comments to follow up in relation to what ██████████ was saying, one in relation to PANOC. I think it's perhaps one of the changes that we would like to see within health, that our PANOC services are able to see children and able to accept referrals direct other than through the DoCS process, because that is a bit of a barrier, I think, and hindrance, which this case evidences.

The other thing is we will follow up in terms of mental health and why this child is not meeting or receiving services, ongoing therapy services. I certainly don't know the case, so I can't speak any more about that. It certainly seems like the assessment alone is inadequate.

THE COMMISSIONER: A diagnosis is one thing, but what follows from the diagnosis is critical. There's no point diagnosing a problem without providing some follow-up through counselling, and there are all kinds of counselling - child psychiatrists, psychologists and so on - who should be available for this case.

MS HEYMAN: Absolutely.

MS ANDERSON: My name is Kerrienne Anderson. I work in the women's refuge in town. My main concern about this whole case going on at the moment is the fact that we get so many people into the refuge and you refer to all these different services and every single one passes the buck. None of us at the refuge are professionals in any way, except for support workers, and it's always pass the buck to someone else. The people we have get so sick of being referred that they just get lost in the system once again.

THE COMMISSIONER: Thank you. You have expressed the concern that I am entertaining.

MS ANDERSON: There's too many services out there.

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THE COMMISSIONER: But not doing anything.

MS ANDERSON: Not doing anything, and no-one knows what each other is doing.

UNIDENTIFIED SPEAKER: And counselling, there's no counselling facilities in town hardly at all.

THE COMMISSIONER: We will come back to that a little bit later. [REDACTED], please.

[REDACTED]: DoCS took [REDACTED] on [REDACTED] December last year - October, sorry. They dragged [REDACTED] to Armidale, to the doctors. They said if [REDACTED] didn't go, they would be dragged by cops. I went with [REDACTED] anyway. They could not find nothing wrong with [REDACTED]. The next day I went to town, DoCS gave us papers, and then the next day after that we went to court, which was 25 October. My [REDACTED] is pretty much traumatised over this. I asked DoCS what they are going to do about it. When I asked when would I get her back, they said nothing, "[REDACTED], your problem."

We are not allowed to ring DoCS any more. They said we ring them too much. So I'm ringing about [REDACTED] asking when [REDACTED] is going to go to the dentist or asking about whether [REDACTED] is going to the dentist at school or asking anything about [REDACTED], I'm not allowed to do that any more. I have to ring my solicitor, my solicitor rings DoCS' solicitor to speak to DoCS and then it goes back to DoCS' solicitor and our solicitor, and we only done that once and so far they didn't even return the call anyway.

They have made us do parenting classes, to get counselling, we done parenting classes. Every time we go to court, it's a different story: [REDACTED] were neglected, [REDACTED] weren't taken to school. They tried to say that I'm holding [REDACTED] back with [REDACTED] education. That's why I had [REDACTED] go to school, had [REDACTED] in preschool for another friggin 12 months, to sit there and scribble, when [REDACTED] could have been going to [REDACTED] Public School, where they said if [REDACTED] wasn't ready to go up to Year 1 anyway, they would keep [REDACTED] back for another year at preschool. Instead, [REDACTED] is going to a primary school for 12 months. That's it, I can't think of any more.

1 THE COMMISSIONER: Is your [REDACTED] there,?

2
3 [REDACTED]: I just wanted to find out that DoCS in
4 different towns, some towns they will work with the
5 families, help them. Like we know a lot of people from
6 Kempsey and their children should be removed, other
7 families down there have got DoCS helping them, coming into
8 the home, offering them services, and they all thought
9 [REDACTED] were lucky. We have moved up here and there's
10 been a false report, they have taken [REDACTED]. Now DoCS are
11 trying to make a case against [REDACTED], on our fourth or fifth
12 reason of why they should keep [REDACTED].
13

14 I do think the court system, once you're in the court
15 system, it should be hurried up for [REDACTED] because
16 nothing has been proven yet at all, but they have got
17 for six months. If we were criminals, they can only hold
18 us for so long until they have got proof before you go to
19 court. This way, they have got the [REDACTED]
20 traumatised, absolutely traumatised, and [REDACTED] waiting to
21 try and get a case on us, they're trying to find anything
22 they can on us, and they haven't.
23

24 But no-one wants to listen to our pleas anywhere we go
25 because it's in the court system. The court system is very
26 long and blocked up. When there are young children - [REDACTED]
27 were [REDACTED] when [REDACTED] were taken, never slept apart from
28 [REDACTED] - they have to wait six months while they try and
29 get evidence. There's so many people out there that have
30 obvious cases. The [REDACTED] have been taken to
31 paediatricians, they have found nothing, absolutely
32 nothing. Our solicitor says they have no evidence yet,
33 they're just trying to get intellectual neglect.
34 been in preschool for days.
35

36 THE COMMISSIONER: How many [REDACTED] are involved?
37

38 [REDACTED]: There's [REDACTED] in this family, [REDACTED]
39 taken, and one of the siblings has seen [REDACTED] brothers and
40 sisters twice since September, and yet DoCS say, "Oh, yes,
41 they must have contact with their brothers and sisters."
42 The [REDACTED] are dirty, [REDACTED] cranky. [REDACTED] not dirty
43 dirty, [REDACTED] annoyed why we haven't picked [REDACTED] up,
44 [REDACTED] cranky. We have just spent access this morning
45 chasing a child around a carpark to hogtie [REDACTED] to put
46 in the car for them to take [REDACTED] away again. It's getting
47 worse every access, but we're in the court system. We have

1 just got to run it out to our dates, two months down the
2 track, two months down the track, and our fourth or fifth
3 excuse of why to keep them.
4

5 THE COMMISSIONER: Are the children all with the one
6 foster carer at the moment or different foster carers?
7

8 [REDACTED] : One has been sent to [REDACTED] in
9 [REDACTED], which [REDACTED] is an [REDACTED],
10 not home [REDACTED] days a week, and the other [REDACTED] are in foster
11 care in [REDACTED]. But we can't understand why Inverell
12 does not offer support services. Why did they take an
13 anonymous call as Gospel?
14

15 There can be a lot of bitter people out there, like
16 when they're separated families, when you have a
17 disgruntled father, he'll ring up and say, "They're not
18 doing this, that and the other." One lady come in and made
19 a report and it was false, and we have said why couldn't
20 they send another lady out the next week, or two people
21 write individual things. The ladies that take [REDACTED]
22 to and from access, they said they have never seen a case
23 like this. Our [REDACTED] so stressed. But it's in the
24 court system, wait six months.
25

26 THE COMMISSIONER: When is it next back before the court?
27

28 [REDACTED] : [REDACTED]. We were trying to get an
29 emergency hearing for the [REDACTED], but the
30 courts were full that day. But six months of children,
31 that they can't understand it. They have even taken one of
32 the [REDACTED] for more immunisation. They never rang
33 up and said, "Show us in the book." They have done it
34 again. If we say are they going to the dentist, are
35 going to the doctor, "It's not your concern. They are
36 under the care of the minister, it's our problem now."
37

38 They can't talk to us any more because we probably
39 rang up too much. We're saying, "How long do you have
40 these children for, three months, six months?" They have
41 told some of us to move out of home because we all live
42 together, it's too crowded. So we move out of homes and
43 we're in flats, paying rent now. Everyone's money has been
44 cut off. No children. They don't say the children will
45 probably be gone for six months, the court case might take
46 four months, six months. People have moved out and are
47 waiting for their children to come back. There's no

1 physical - no evidence whatsoever that we know of.
2
3 THE COMMISSIONER: Thank you for that experience.
4
5 [REDACTED]: Does DoCS not first go into a home to
6 say, "We will help you," like it does in other towns, "We
7 will come into the family and see," if needed, if they
8 think it's needed in this town, they take the children,
9 then make a case against you.
10
11 THE COMMISSIONER: There is provision for this early
12 intervention, but it's fairly new days, it is a fairly
13 recent program.
14
15 [REDACTED]: Other towns are working, but this one
16 isn't.
17
18 THE COMMISSIONER: It's fairly recent. The Benevolent
19 Society is one of the organisations that can provide that
20 assistance on behalf of DoCS. So it is available, but it
21 is all fairly new and it may just be that you have missed
22 out on that. The case is back before the court and the
23 next stage in the proceedings will be to determine whether
24 there has been a risk established or not. So when you are
25 next before the court in [REDACTED], that might lead to a lot of
26 resolution, but you obviously must work closely with your
27 lawyers and take their advice.
28
29 [REDACTED]: We do, but it's six months to go to
30 court to say were they at risk. That's ridiculous for
31 [REDACTED].
32
33 THE COMMISSIONER: We are actually aware of this case.
34
35 [REDACTED]: And we can't contact DoCS to ask them
36 anything, it's all via solicitors or access ladies.
37
38 THE COMMISSIONER: We will have a watch at what's
39 happening. What happens in the next court hearing is very
40 important. [REDACTED], please.
41
42 [REDACTED]: We have a little boy, he's an 8-year-old now.
43 I moved out of the house in [REDACTED] thinking the friction
44 between my girlfriend and I would make it easier. Up until
45 I moved out, there were seven incidences of him being
46 assaulted. From 2003, there's 18 that the mother has done
47 and four that the new boyfriend has done, been reported to

1 DoCS. DoCS have threatened to take him away from - take my
2 access away from him, that's DoCS in Inverell here, if I
3 didn't stop reporting them. I'm only reporting what a
4 little boy is telling me.

5
6 The police seem to be covering this. There's a couple
7 of incidences, one that DoCS interviewed him was two weeks
8 after the event, they interviewed him at school, and it's
9 just like he says, he's too scared to say anything against
10 his mother. The police seem to be covering at least two of
11 these incidences. I'm like the lady back there a bit
12 earlier, I have just about had enough of the whole system.
13 I'm at a point where I'm going to give up, but there is a
14 little boy's life at stake here.

15
16 DoCS interviewed him at school and he wouldn't say
17 anything about what is happening because he had to go home
18 that night, so he's not going to say anything against
19 his mother, of course. There's a lot more to it than that.
20 That's all I can think of at the moment.

21
22 THE COMMISSIONER: Certainly there is no basis for DoCS
23 cutting off your access because you are reporting matters,
so as long as the reports you make are genuine.

██████████: I'm reporting what the little boy is telling
me. That's all I can go on.

THE COMMISSIONER: I understand that. I'm not suggesting
to the contrary, but they should not be threatening that
for making reports of what the little boy has said to you.
If the matter is in the police investigative phase at the
moment --

██████████ : No, it's been through that. I witnessed one of
the incidences where he was punched, I think when he was
about five. That happened on the Sunday. I rang the
police straightaway. The policeman interviewed the bloke
on the Monday, where the bloke admitted to the police
officer that he pushed him, not punched. That police
officer told me this on the Wednesday, prior to him
speaking to the little boy's mother.

After he spoke to the little boy's mother, I saw the
same police officer on the Friday, who then said the whole
story has changed to, "You misunderstood what the bloke
said on the Monday." I've been to the Ombudsman about it.

The Ombudsman told me that the police officer didn't caution this fellow prior to him admitting to the assault on [REDACTED] - on the boy- he didn't caution him. That's why the police officer said it would not stand up in court.

But at the end of the day, there's a little boy being punched by this bloke, the bloke has admitted to it, I witnessed it. That's only one that I witnessed. DoCS won't do anything about it because they're going on what the police say. The boy's mother baby-sits one of the policeman's [REDACTED], or has baby-sat his [REDACTED], and I believe that this police officer has influence on the whole area, influences on other police decisions.

THE COMMISSIONER: I can only say two things in relation to that. If you were dissatisfied with the way DoCS have approached it, there is a complaints unit.

[REDACTED]: Ombudsman?

THE COMMISSIONER: No, there's two, there's a complaints unit plus the Ombudsman.

[REDACTED]: Police Integrity Commission?

THE COMMISSIONER: That's the other one. So far as DoCS are concerned, there is an internal complaints unit within DoCS and the Ombudsman oversights how that complaints system works. So you can always complain to the DoCS complaints unit if you think you are being unfairly treated. If you think that the police are not doing their job properly, then the Police Integrity Commission is --

[REDACTED]: The Police Integrity Commission don't want anything to do with it, ICAC don't want to have anything to do with it.

THE COMMISSIONER: No, it's not an ICAC thing. Apart from the Police Integrity Commission, there is also Professional Standards Command within the police.

[REDACTED]: They don't want to have anything to do with it. I've been there. The only thing I haven't tried is the one in Tuggerah, which is the police complaints unit - sorry, customer assistance unit, customer something unit at Tuggerah.

THE COMMISSIONER: At DoCS, are you saying, or through the police?

██████████: Police. DoCS only go on what the police tell them. So if there's a cover-up at police level, you can see the predicament that my little boy is in.

THE COMMISSIONER: Thanks for your experience. We will certainly take that on board and see what is happening on the ground, which is not appropriate. ██████████, please.

██████████: I just wanted to know have you actually investigated the DoCS officers that work in this town, because on ██████████ my children were taken. I broke down here, travelling from ██████████, went to DoCS to help, they sent me --

THE COMMISSIONER: Your car broke down, you said?

██████████: Yes. I live in ██████████. I went to DoCS for help and they sent me to the refuge. I went to the refuge and DoCS come and took my ██████████, for not having a safe environment and because when I was 17, I gave birth to a seriously disabled child. Now DoCS have taken my children, because she is under the care of the minister. She is with my mother and I have full contact with her. My children are ██████████ and ██████████ old - sorry.

██████████: Could I take over, please. ██████████ came to our organisation, St Vincent de Paul. She had been in Inverell for a month. They were starving, they were staying in a place, and she has been trying to get help and we have been helping her. Her husband now has a job in Inverell. Actually, DoCS did tell them to leave ██████████ and come to ██████████ and get a job, because you're not getting the children back for however length of time, it could take years. So he has left his job.

They have got a home in Inverell. ██████████ has applied for a job. They have done everything that DoCS told them to do to get these children back. There is a particular person in DoCS here that I really do feel you should investigate. We've heard of cases like this before.

THE COMMISSIONER: I wonder if you could do this: after we finish this afternoon, would you be able to talk to a

member of our staff and give some more details of this particular case.

██████████: Yes, because they are in a home now.

THE COMMISSIONER: Whereabouts are the children at the moment?

██████████: They are in foster care in ██████████, and they won't go back to ██████████ without their children, which is quite understandable. ██████████ has been working three days getting this horribly filthy dirty house clean so she can have it up to standard to hopefully get her children back. She keeps getting put off. Every time we go to court, DoCS haven't got all her information up to date or reports just go missing. There is another hearing on ██████████, so you just sit still ██████████.

THE COMMISSIONER: When did the removal take place?

██████████: ██████████ is when they actually took the children. We didn't meet ██████████ and ██████████ until February. I see them with their children. I just can't believe what happens, I really can't. I'm just a normal person that does voluntary work, and I'm absolutely disgusted that Inverell has got a system like it has, I really am.

THE COMMISSIONER: The daughter has a lawyer?

██████████: No, she is not my daughter. She just happened to walk into our office. She's like a daughter. I can't believe it.

THE COMMISSIONER: I didn't hear you correctly. Does she have a lawyer?

██████████: Yes, they have got three actually. Her husband has one here, she's got one in ██████████, they sent her to ██████████, to a Legal Aid solicitor, and her mother, her solicitor has got somebody in ██████████. So when you go to court, you've got three solicitors and it's just ridiculous to me. But they just keep putting the dates off, "DoCS haven't got all their information, haven't got anything up to standard, so therefore just wait until the next time." It's absolutely ridiculous.

██████████: The reason they took my children is under a

section 106. Now, I have full contact with my child, she is [REDACTED] years old, I take care of her every weekend. I gave her up to my mother because I didn't think that I could give her the life that she needed. I was only [REDACTED] at the time. I did try for six months.

When we broke down here, DoCS come and took my children for that reason. There is no evidence. My solicitor has said he has never seen a case like this. And the state that my children come in is horrendous. My [REDACTED] old baby had bleeding welts on the back of [REDACTED]x legs and when I asked DoCS to take her to the doctors, they said, "She is under the care of the Minister now, this has got nothing to do with you." They come smelling absolutely dirty. My [REDACTED] year-old had dried poo stuck to her bottom, which had been there for an entire day, and DoCS aren't doing anything about these foster carers. My DoCS worker is [REDACTED], who I have been told by her manager has a personal vendetta against me.

THE COMMISSIONER: I think this is the kind of thing we should tell our people separately. You needn't actually name the person. By all means tell us what the result of the conversation was, but perhaps if you tell our staff the name of the worker. You have done so. I will have it removed from the record.

[REDACTED]: Sorry. I would just like everyone to know.

THE COMMISSIONER: I'm saying this as much for your protection because this being a public forum, there is no protection against defamation if you say something about someone which is inappropriate.

[REDACTED]: Sorry.

THE COMMISSIONER: So it's for your protection, not to cover it up. You can tell our staff, and there's no problem.

Can I just explain for those who are listening to this, there is a provision in the Act, which is the section just referred to, which says that where a child has been removed from a particular family and has not been restored and there are other children of that family, that is a reason for removing other children, unless the court can be satisfied that circumstances have changed and the children

aren't at risk.

It is a piece of legislation in the law which was designed to make sure that if one child had been removed from the family for a particular reason, DoCS had to be satisfied the other children were safe. That's the general scheme of it. There's a lot of criticism about the section. You've run into it as a problem section, your case is an illustration of where the section is causing problems.

When you do go back to the court, if your lawyers can satisfy the court that the reason why the first child was removed really has nothing to do with causing related children to be at risk, that circumstances are under control, then you should not have a problem. If you will give these details of the case to our workers, we can also keep a watch and just see what does happen and perhaps look further into it.

██████████: Also the caseworker, she actually worked in the courthouse, so she got our affidavits all thrown out of court, where we can't submit evidence to say that the children weren't in need of care.

THE COMMISSIONER: The court must let you present evidence. She can't throw it out. The court must let you present evidence.

██████████: This has been done, and while the court proceedings have been taking place, she has actually changed the section of why she took the children three to four times, while the court proceeding was on. I come from ██████████. We have 60,000 people in this town, and things like that don't happen there. It's just ridiculous. The reason why ██████████ is in the Minister's care is because we couldn't fund her medical bills, because she has to go to Westmead every six months for the Rett syndrome clinic.

THE COMMISSIONER: We'll have a look at that. If you could give us some details.

We have someone who has filled out a form and said they wanted to speak, particularly about indigenous issues, because you don't get service unless you ask. Someone has written this form out, but they haven't put their name on it. Can someone identify who that might be. Did someone

want to talk about indigenous issues?

██████████: I did, I ticked three of the boxes.

THE COMMISSIONER: I think it must be you. It doesn't have your name. Say who you are then and tell us what you want to tell us.

██████████: My name is ██████████, I come from another town, and I'm a clanship carer for my niece and nephew. One of the things I would like to talk about, in regards to ██████████ I feel exactly the same, that there's this big sort of propaganda thing going around that that's okay because Aboriginal people look after their kids anyhow, the grandparents, blah, blah, blah.

Traditionally in tribes, that didn't happen, it was the responsibility of the whole clan to look after the kids, mainly the women and aunties and everything like that, not specifically grandparents. But grandparents this day and age jump up and put their hands up because they are more settled and stable probably than the sons and daughters and whatever.

That's a myth, as far as I am concerned, and I just heard it yesterday or the day before from DoCS people, saying, "That's how, you know, blah, blah, blah," because I asked the question on why do Aboriginal records never ever get destroyed, they are kept forever under the Child Protection Act - probably the same as everyone else's records, I don't know, but there is no benefit in me being an Aboriginal, of course, because I find racism and everything else.

One of the things I find really hard to cope with is the changes you're talking about. It's like DoCS workers now are really, really more in the box, "I don't handle that, that's Child Protection." "I don't handle this, I'm not a case worker." I don't have a caseworker and I suppose everyone else that has children in care, that they don't have a caseworker neither. I always thought it was a policy to be multiskilled. I am sick of ringing a DoCS office and they say, "That's not my job. You haven't got a caseworker."

What's the go here? You're saying it's taking time to make changes. Well, as far as I'm concerned, it's nearly

been two years, some of these people are still doing training and making changes. It's not good enough. When you want to initially report a DoCS incident, it takes 106 minutes for that to get put on the system properly. So there's a lot of frustrated callers out there that are doing this and going, "Err," and then they're questioned and they feel - I have had people come to me and complain to say - maybe I have a sign saying Dear [REDACTED], but at the end of the day, you just keep doing it.

We have more in the Child Protection Act, yes, this is this and that's that, but I reckon you're better off being an animal and ringing the RSPCA in some cases, you might get more action, because there's more laws surrounding cruelty to animals than what there is surrounding children.

The other thing is some of these children come to you, "Why were they taken?" "DV, alcoholism and drugs." These two children, I have had one since she was three weeks old. She is now six going on seven. She has never been assessed by a paediatrician. Every time I go to the local community health to get her speech thing done, they resign, so my town mustn't be a good town to live in. So the services that are out there, there's never a referral. I know there's a new one now, but they haven't rung me to say, "Come up to community health and have this service, [REDACTED]."

The other thing is I made a report on the Helpline and I didn't hear anything. Then I got this phone call from a DoCS worker out-of-home care and I thought you beauty, they're finally ringing me up to say - because I left my name. I've got no shame to say I did this because this is the wrong thing that they're doing. He rang up and said, "No, I'm not ringing you up for that." I went, "Oh, blah, blah, blah." "But we rang your mother." I said, "My mother didn't make the report, I did." So I think that's a sign of total rudeness. The child wasn't in my care, it was in my mother's care. They did not ring me and I'm the one that made the report, so where are youse at?

You're saying, "Let's make changes to protect these kids." The biggest hiccup - it's like Aboriginal Affairs, no-one wants to handle it because it's a political football. Is it getting that way with our kids, no-one wants to handle anything to do with our kids? Why isn't there multiskilled people there, even if they say, "I can't

help you today, I'll look at it and I'll put a file note in your file and I will get back to you." It's just like, "Oh, no, it's not my business."

These people are getting paid big money, mate, bigger money than I ever got when I worked for the public service, and they consider when you're there for the Minister to look after these kids, it's like you're employed by them. I don't get super, I don't get any cash benefits. They do at their work, but they consider, "Oh, you're working for DoCS." No, I don't work for DoCS. I do what I do for my two kids because they are my niece and nephew, and I do it purely out of love, not for any money thing, not for pats on the back that people say, "You're a good little black gin looking after your kids, and your drunken brother's kids too."

It's not about that. It's about being real about our kids and protecting them. It's about time the Aboriginal community stood up and said, "We want to be counted, we want to do something about our kids, and we want to be able to consult." If you can't find a carer in these towns around here, they send them hundreds of miles out of their traditional land, somewhere else for someone else to look after them, because it's just a black person over there doing it. It's not good enough.

They say, "We consulted, and so and so didn't want them and so and so didn't want them and this and that." It's not good enough. These kids will grow up - much more of their culture is going to be robbed from them because they are going to learn about things - if they are taken from (inaudible) country over to Gonnaroy(?) country, they are going to learn Gonnaroy stuff, they're not going to learn their stuff from their own traditional land. It's not good enough.

I know it's hard and I know it's hard for people to put their hand up to be a carer, kinship or otherwise, but I tell you one thing for nothing: I am so tired and when you say, "Can I have some respite," you don't get it. I'm considered frail age at my age. I have two daughters, one is 25 and the other is 19. I can't really enjoy my grandson because he doesn't live here any more. I am tired, but there is no respite carers.

I had an Aboriginal worker say to me - because I have

never ever promoted racism, my children, their father is Italian, I'm very proud of who I am, but I have never promoted any form of racism - she said to me, "I don't believe that Aboriginal children should go to non-Aboriginal carers." I said, "Listen, lady, I live in the real world." I don't know if that woman is still in the DoCS system, I don't care, but I never rang her again, because our children live in the real world and the real world is black, white, Chinese, whatever. So I didn't care, I needed a holiday, and I still need one now probably. I'm just so sick of the system, how it sucks, and people say, "It's not, it's good."

The other thing that I'm really truly against is Aboriginal people that - they have this promotion thing lately for Aboriginal people to be employed through DoCS. Everyone kept saying, "Why don't you do it, why don't you do it." No thanks, I don't want to work in a box. I worked in an Aboriginal community long enough to say, "No, I want to get out there and do stuff." When you work in these policies and all that sort of stuff, you can't get out of your box.

If you're 18 and you're Aboriginal you can go and apply to work at DoCS. Tell me what life experiences an Aboriginal child might have at 18? Maybe it's just because they might have been in the system. I really think that's wrong because I think you should have some life experience. If you don't get your degree, you should have some life experience out there to contribute back to your community, because we aren't getting a good service if most of those people are 18 and 19 and 20, and doesn't everybody deserve the best, especially when it's dealing with our kids. So that's all I want to say.

THE COMMISSIONER: Can I ask if there are other foster carers in the room? If anybody else who is a foster carer could indicate. So we have about four or five. How many of you have an allocated caseworker in relation to the children in your care?

UNIDENTIFIED SPEAKER: We actually had children in our care for nearly four years and we had quite a major incident in August last year. I was ridiculed by DoCS after we went to a meeting that the police had organised because I asked the caseworker how long she had been our caseworker - I knew - and she really couldn't remember and

was a bit put off because I had put on her the spot.

So then I asked the other girl, who used to be our caseworker who then became the manager, and when we got down to the nitty-gritty and worked out how long since she had had a pay rise, we worked out it was over nine months, and the caseworker had not physically seen two of those children in nine months. The child had been in hospital, and we got no support at all.

I think if you're the caseworker for nine months, you could have at least visualised the child once. And because I actually mentioned that at the meeting, I didn't actually get to speak to a DoCS worker then for over two weeks and then our caseworker was changed, obviously because she was too busy to take on our workload, so then we were allocated a new caseworker and we have seen this girl quite a few times, she is a very nice person, and that was actually the best thing that ever happened to us.

But you have got no idea, sitting on the other side of the fence, the lack of resources that are there for foster parents. I have just had enough. We were extremely attached to these children. Two of them have gone. The girl left under very difficult circumstances. She attempted suicide. We had a meeting that the police organised through Child Protection Services in September - was it, [REDACTED] - where the findings of that case was that this girl have intensive counselling. The intensive counselling lasted for two more visits to community health until the worker went on leave, which we knew was happening. Nobody could be found to help her. We then found another counsellor, and that didn't work out.

I went to the DoCS office, approached a manager caseworker in Inverell and said, "Please, can you help me. This girl needs these services." Her response was, (indicating), and that's exactly right, she shrugged her shoulders at me. That is what we are living with here, and now I am being actually treated very poorly by the DoCS staff. We are actually now being managed by [REDACTED] in Armidale and for the first time, I actually feel that I am being treated as a person.

I actually got rung on Thursday morning of last week and was told to pack all the belongings for the other two boys that were with us, that they would pick them up from

school, could I have their clothes ready in an hour. You can imagine I was quite hysterical on the phone. I knew one of the boys was going and I had told him that he must go before Easter because of issues that we had, and he was deemed by two paediatricians that he should not be in a family situation.

I got really upset with the man on the phone because I said this is what happened to the stolen generation, how many years ago, ripped the kids away while they were at school. Here we are in 2008 and he wanted to do that. I cannot believe that DoCS workers actually do it, wanted to just take them away from school. The youngest boy I have had since he was five, when he came to me he weighed 14 kilos. He could not speak because he had been living with his grandparents for years, and they were just too old to look after him. Now I've got this boy that is so attached to me, I have trouble getting him to school since his sister left, and they wanted to take him from school.

So after me being hysterical on the phone and letting him know what the circumstances regarding the other boy were, it was decided that he would be staying with us, and I have got six weeks to either train this boy to live without me or he goes to somewhere else by himself, too. I just cannot believe that they can be so callous.

Do you know the boy that left our care this morning, he has been under DoCS care in Inverell since 2002. Not one DoCS worker in Inverell has told him he's going, I have had to do all of that myself. Not one DoCS worker in Inverell rang to say, "I wish you all the best." Not one of them sent him a card. Not one person has even acknowledged that he has gone, it has to be somebody from Armidale.

I just don't know that these people actually believe that these children have feelings. I don't think they realise that these kids have feelings. Just because this boy has problems doesn't mean to say that he's not a human. And like you said, animals get treated better. I could not have sent my dog away without giving it a bit of comfort first, but these people, who profess to be the caseworkers for so long, cannot even give the kids the basic human needs.

THE COMMISSIONER: Would you be able to give one of our

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Public Forum

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members of staff details of your name and the child. When we got to that situation, I was asking how many people who have children in care actually have a caseworker that they are working with or allocated to them. I think we lost the answer. Could I get an answer of those people who are foster carers who do not have a caseworker for the child in their care?

UNIDENTIFIED SPEAKER: Some I do and some I don't. What's the point of a caseworker if you don't see them and if they don't know who we are? A caseworker we don't see is really not a caseworker, is it? Let's be realistic.

THE COMMISSIONER: We'll just move on. We do have a representative of AbSec here today. I'm not sure whether you would wish to say something at this point? You don't have to if you don't want to, but if you do have anything to contribute as to what AbSec feels it's able to do in this community or otherwise, I would be grateful to hear.

UNIDENTIFIED SPEAKER: I think they have left.

THE COMMISSIONER: Not here?

MS BYRNE: Excuse me, what does AbSec stand for?

MS FURNESS: AbSec is the Aboriginal organisation which looks after foster carers, the secretariat.

THE COMMISSIONER: So you have not heard of it, even though you are a foster carer?

MS BYRNE: You don't hear nothing unless you ask.

THE COMMISSIONER: The AbSec person is not here. We also have someone here from the Linking Together Centre. Can you give us any insight as to how you see the system working and what your organisation can do or would like to be able to do that it can't do?

MS [REDACTED]: My name is [REDACTED], I'm the community development worker at the Linking Together Centre.

THE COMMISSIONER: What is happening?

MS [REDACTED]: I'm the community development worker at the

Linking Together Centre.

THE COMMISSIONER: All right, thanks.

Ms [REDACTED]: I have six children who are foster children, who are my sister's children, and I have had them for two years. They were originally with DoCS in Sydney, but, as I said, we have had them up here for two years, and other than get letters to say that there are things on, we haven't seen a DoCS worker either. That's fine, because the kids are okay, but then what if they weren't. I might be a community development worker at the Linking Together Centre, and a lot of people in town know me, but they don't know me behind closed doors.

MS FURNESS: What does the Linking Together Centre do?

MS [REDACTED]: We run a lot of early intervention programs. We look after kids that are suspended from school, we run a homework centre for the primary schools, send kids to Youth Insearch camps - just a lot of early intervention programs.

MS FURNESS: Who funds you?

MS [REDACTED]: Wherever I can get the money.

MS FURNESS: Are you funded by DoCS?

MS [REDACTED]: No.

THE COMMISSIONER: Department of Education and Training?

MS [REDACTED]: Yes, that's the homework centre. We have money through the Indigenous Coordination Centre, wherever I put in a submission and am lucky enough to get the - Families First, Attorneys-General, quite a few different funding bodies. Also we have had the odd child that has been removed from a home and brought to the Linking Together Centre to be tutored for the day, and I have known that that child is going to be taken to another foster place that afternoon and the child has no idea where they are going.

One little girl couldn't do a thing all day because she knew she was going to be removed from one home and she had left a diary and some other personal things under her bed and she wondered whether DoCS would find them. Of

course, we rang and let DoCS know. It's wrong that these children aren't prepared to move from one place to another.

It happens at the centre quite a bit where a child comes in for a day, they are not suspended from school, they know that we look after kids, we tutor them on a one-to-one, and they leave them with us for the day and we know that they are going somewhere that afternoon. I don't think it's right. I also don't think that the carers, not only in Inverell but all over, are looked into properly, because we hear a lot of things from the kids. They're not happy with their foster carers. So I think DoCS need to look into our carers a lot more as well.

THE COMMISSIONER: Is there anybody else from an NGO here who would be able to say something about what is missing or what is working and not working?

MS ANDERSON: Kerrienne Anderson. Vicki and I are from the women's refuge. I would like to express mainly my concern about the removal of children and how it happens. We have had certain cases at the refuge. The woman has come there with her children as a safe haven. We clearly put out in the community it's a safe place for women and children to be. Within an hour of her arriving at the refuge, DoCS have come to the door. Yes, we've had a phone call first, been told if the woman leaves, we must report immediately. We are mandatory reporters anyway, but when we don't see any risk of harm to a child, when they have come to the refuge for certain reasons, there is no reason to actually report.

DoCS have come in within the hour with three police officers, two DoCS workers and three police officers. We were both on staff at the time. The little children were playing out the back. There was no need to cause such a scene. They have stormed in the door, spoken to the mother, then absolutely pushed their way through our staff out to the back where other residences are, frightening the absolute hell out of them.

Everyone now thinks, "Come to the refuge, your children will go." It makes us sound really good. We have nothing to do with DoCS workers except for the fact that we need to do what they say, as in we can't assess ourselves anyway. In all these situations, DoCS have never once given us information on the client. We have no idea why

the children are being taken, and normally the mothers don't either. When they are removed, especially in the case I'm talking about, there was no duty of care whatsoever to the mother, who is absolutely beside herself having her children torn away from her, and I'm not saying there weren't reasons, I don't know that, I'm not judging that.

But to have children taken like that and no care whatsoever put in place for that mother, who I know what I would do if it was me, or what you could be capable of doing, and they are just left without even knowing half the time why it's happening, with no care after and no contact for days on end about their children. So we don't see that a proper way to do it.

Another thing, too, in that one case where there were three police officers and two DoCS workers, they brought the police officers so they wouldn't be harmed themselves. If they had reason to believe the person was violent, they left the same person with me in the refuge on my own. So where is the duty of care there? They covered themselves, but there was no care for me. We knew nothing about the whole situation, because it happened so quick. Like I said, yes, they brought the officers to protect themselves, but what's the difference between them and me?

THE COMMISSIONER: Thanks for that.

MS HIGGINS: Can I add to that. There should be a duty of care from them to us as well and let us be informed about if the woman is actually in danger. It also should be a duty of her to them because the woman that Kerriane is talking about was left absolutely devastated, absolutely, and she had no back-up because she was blaming us because DoCS came to us and took the children, which is a natural reaction. So there was no-one to prop her up whatsoever.

I also have another incident that I would like to like to say something about. We have had a case of a grandmother looking after children yet again, not from our town, who has been forced to stay in our refuge because our refuge is the closest one. DoCS, in the town where she came from, were handling the case and sent through to her a letter to say that her case was closed. We had taken her down to our local DoCS office and she spoke to somebody there.

She took both of the children, one of them had to have an operation in Tamworth. One of the DoCS case managers from the other town was contacting her while she was away and we thought that legally the circumstances weren't good. When she came back to Inverell, we said she should find out whether she should be going through Glen Innes or Inverell. So I made a phone call to our local office and they said Glen Innes were handling it. I just wanted someone for her to talk to, and I couldn't get anybody from Inverell or Glen Innes to speak to her.

THE COMMISSIONER: Thank you for that. We might just take one last speaker.

MS SPEED: My name is Janelle Speed, I'm the CEO at the Aboriginal Health Centre here. I wear a few caps, so I will just go to the story that I was talking about.

A couple of weeks ago, I had a service in Inverell ring me and ask for some help with a parenting course because DoCS has referred them to the Aboriginal parents to do a parenting course to regain their children as part of their progress. My concern, which I brought up about three years ago, was there are no culturally appropriate or sensitive parenting programs for Aboriginal people, and yet they're forced to jump through this hoop.

I looked at a few of the parenting courses that were around and most of them, even myself as an Aboriginal, I wouldn't be able to maintain those standards, and I have four boys. I think a lot of the DoCS people are asking these people to do programs that, one, they are not adequate for their culture, two, they are not even available in this area. If you wish to do an Aboriginal parenting course, I think you have to travel to Newcastle. These people have issues with transport, accommodation, all those other things, other children.

I was so concerned about it, I actually approached the University of New England and one of the ladies, the professors there, actually created a job for me to do a parenting course and maybe design a parenting course for Aboriginal people. We didn't have very much funding and it ran for a while, we did a lot just on our own backs, but we didn't have funding to finish it and I had to move on to another job, so I wasn't able to stay there and continue that.

I have a service in Inverell, who is a non-Aboriginal person, and they are pleading with me to find someone that they can take with them to help these Aboriginal young people get parenting skills because they feel totally inadequate, being non-Aboriginal, trying to speak to an Aboriginal person; two, the course they are trying to give them is something that is totally inappropriate for Aboriginal people and they are expecting these people to do these courses to gain their children back.

It makes it very difficult and it's a bit like a figure 8, it's a never-ending circle, they just keep going round and round and round and they are not giving anything to these people that is adequate for them to be able to do so that they can go to DoCS and say, "We have done this course, we can do that." If they were available, that might be a help, but they are not even available and they are not even in rural areas at all. That was just my point.

If they want these people to jump through these hoops, they actually have to be able to provide some sort of programs that these people can attend so that they can do these things, because it's very unfair to ask Aboriginal people, and especially people in rural areas, any person, black, white, yellow, brindle, green, whatever, if they have to travel six or eight hours away to do a course so that they can get their children back, you imagine the difficulties that they are going to face. Half of them are only on unemployment benefits, that I know of. They can't afford the travel, they can't afford the accommodation, and they can't afford to leave the kids that they have got to go away to do what they have to do.

THE COMMISSIONER: That's a very practical problem, thank you for that. I think we need to make this the last one.

MS BURT: My name is Kerry, I'm the youth worker at Inverell Family Youth Support Service, and this is Cath, she is our family support worker. The program that Janelle is talking about is one that our service is doing. We were asked by Department of Community Services to get a parenting program up and running for parents who have had their children removed from their care.

We did the program, we ran the program for eight weeks to start with, over at the Linking Together Centre. It's

now come to Cath's and my attention that there are Aboriginal parents who have had their children removed and also other younger parents as well who we thought would fit this program, and that was why we went to Janelle about it, because Cath and I, we're not Aboriginal, we don't know what the Aboriginal parents require as far as this parenting program goes, and we are a DoCS-funded service.

THE COMMISSIONER: So what has happened, has your funding not let you continue?

MS BURT: No, I'm just bringing up the point about the Aboriginal parents, which is why we went to Janelle, because we don't know what Aboriginal parents require.

THE COMMISSIONER: I understand that. What is happening now? Are you able, with her assistance, to have an Aboriginal parenting course?

MS ELLIS: I appreciate the time to have a quick chat. We are actually, as Kerry said, a DoCS-funded service. Unfortunately we are understaffed, as are a lot of other services here in Inverell, but we are trying to get information, with Janelle's support, to get some mothers together to actually manipulate the program we have already to support these particular persons that have been referred to us through DoCS.

Again, I guess what I'm trying to say is if we could get extra funding and extra manpower, like other services which we require here in the rural areas, there is possibly more services available for parents to get their children returned to them and the carers to have this assistance that they so desperately desire.

I'm a family worker at Inverell Family Support Service, and it's heartbreaking when we hear some of the stories and to realise, being in a small rural area, that the services that they do require are so limited. Unfortunately, I think in the long run, if we all look at the one thing that we try and look after, and that's the children, I think a lot of that in hindsight gets missed sometimes and I think a lot of people take on board extra power, take things personally unfortunately. If you're in a professional position, I would kind of hope that you would use that professional standard and keep those professional standards and judgments, whichever they may be.

THE COMMISSIONER: We are looking at the kind of thing that you are doing, we are trying to see what services are missing and what can be better coordinated. It sounds as though you're on the right track.

MS ELLIS: Hopefully we are, and we are doing everything we can. We are drawing from other services in the area to try and get this program up and running to support the indigenous community.

THE COMMISSIONER: The speaker who has put her hand up has spoken previously, but you may like to speak to these people about it, if you're interested in this program.

MS CURTIS: I just want to ask one question. With everything going on here, with DoCS workers in the last years, I cannot see the changes that I was told about.

THE COMMISSIONER: I think we have dealt with that, you've made your point, we understand.

MS CURTIS: Yes, but I just wanted to say.

THE COMMISSIONER: I think we understand the point.

[REDACTED] : Me and my sister did the parenting class, we have the paper and we've got the certificates saying we done it, yet DoCS don't care when they are taking you to court to fight for your kids back, they just care about making you look bad not to say that.

THE COMMISSIONER: You can have your day in court.

[REDACTED] : I'm saying they don't care.

THE COMMISSIONER: We understand. You did tell us previously you had done the course, but obviously when the matter gets back to the court, you will need to place that before the court so they can assesses the situation.

Again, thank you very much for your views and your experiences. It's very helpful for us to see what are the problems in individual areas, and I'm grateful to you for your assistance, thank you.

AT 3.30PM THE COMMISSION ADJOURNED ACCORDINGLY