

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

Before The Hon James Wood AO, QC, Commissioner

At the Max Function Centre
Balo Street, Moree

On Wednesday, 19 March 2008, at 10.10am

Counsel Assisting: Ms Gail Furness

THIS TRANSCRIPT HAS BEEN EDITED

1 HIS HONOUR: Good morning and welcome to the public forum.
2 As you are probably aware, we are going around the state to
3 a number of regions and towns to see what might be the
4 problems with the child protection system and to hear what
5 might be local concerns and local needs.
6

7 So what we would like to do this morning is hear from
8 anybody who has views on those matters. We are obviously
9 concerned with the several phases of child protection, that
10 is, the availability of various services for early
11 intervention so as to prevent possible problems developing
12 into real child protection issues.
13

14 We are also interested in the actual procedures for
15 statutory intervention by DoCS where it has to act to
16 remove a child or take other steps in the care and
17 protection phase and, thirdly, of course we are interested
18 in the out-of-home care situation, the ongoing care of
19 children who are removed for one reason or another from
20 their birth families.
21

22 Anybody who has an interest in those areas, whether as
23 foster carers or kinship carers or people who have had
24 their children removed or those who are trying to provide
25 the early services which might prevent problems developing,
26 we would like to hear from.
27

28 If you do deal with a particular case we would rather
29 you don't name the child. Obviously there are privacy
30 considerations that apply. If it happens to be the case
31 that you do mention a child or other details which might
32 identify that child, we of course can edit the transcript,
33 but it would be better if you could try and avoid naming
34 that child.
35

36 If there are particular cases that seem to us to be of
37 potential importance we can look at those possibly in more
38 detail. And we will have some staff here after the meeting
39 who can speak to you and give you contact details or
40 alternatively take some more information from you.
41

42 What we ask you to do, please, is to identify your
43 name and interest. We do have some people who have
44 expressed an interest in speaking and I will deal with
45 those first, but otherwise anybody in the forum is
46 perfectly free to speak or to comment on what someone else
47 may say.

1
2 Perhaps we might start with the local member, Mr
3 Humphries.

4
5 MR HUMPHRIES: Thank you, Justice Wood, and welcome to
6 Moree. I know you have seen a fair bit of the state in the
7 last few weeks in particular. Most of it is in the area
8 that I represent. Moree is my home town and the electorate
9 of Barwon runs out as far as Bourke and down to Cobar,
10 nearly 30 per cent of the state. This is the largest town
11 and part of what I want to talk to today, and I have
12 submitted an updated submission, is based on having worked
13 quite significantly, particularly in the last six months,
14 with communities dealing with children at risk and
15 communities at risk themselves.

16
17 There are issues that we have raised in parliament
18 about DoCS, about the systemic failure which we believe is
19 in place, and I can say that much of this inquiry has been
20 based out of things that have been highlighted in that
21 process where people have brought things to
22 parliamentarians, which have been raised with various
23 ministers, and for Minister Green, the DoCS minister who
24 was here recently, to instigate the inquiry we believe is a
25 very positive move.

26
27 That does not incriminate anybody that works on the
28 ground because largely with people that I know who work for
29 DoCS, or in child protection or the interagencies - and I
30 know some are represented here today - are very well
31 intentioned people, but we believe that systemically and
32 from the top down there are some difficulties.

33
34 Having followed the commission and the inquiry I will
35 not talk about some of the things that you have covered
36 already, which has been quite extensive, but there were
37 four points that continually come up across my electorate
38 that I would like to raise and, if anyone wants to comment
39 on them, that is fantastic.

40
41 The first one is going back to, and I have titled it
42 "community nurse". In my view, and it is the view of quite
43 a number of people in our towns, there is no glue within
44 our towns when it comes to child welfare, particularly from
45 birth through to early schooling.

46
47 All families need follow up from birth with people

1 like a community nurse, involving regular health screening
2 and reporting identified through proper record keeping
3 which is held by community health, we believe, and used as
4 a reference point and running record for any interagency
5 use, and by interagency I mean people working in health,
6 education, with DoCS, housing, juvenile justice and the
7 police.
8

9 Many of us believe that the community nurse is the
10 community or should be the community convenor for all
11 government agencies involved in welfare and liaison,
12 particularly where case management on an individual child
13 or family basis is needed.
14

15 Consistency is very much a priority with the community
16 nurse and the current case management is quite impossible
17 due to the lack of, I believe and many others, the lack of
18 identified leadership, information sharing, which is
19 critical amongst interagency groups, and the continuity of
20 personnel.
21

22 You can go to an interagency meeting in this town -
23 and I used to go when I was a school principal here - and
24 you would not meet the same people twice at any one
25 meeting. This does not preclude direct reporting to DoCS
26 but, as most people in communities who deal with child
27 services know, the children and families at risk are
28 usually known by at least one, if not more, of the
29 agencies.
30

31 So that is the issue, why do we need a community nurse
32 or someone similar in that position? Currently we believe
33 there is no front door to DoCS. The reporting system is
34 convoluted and unworkable. The hundreds of thousands of
35 reports literally received directly by DoCS is an
36 impossible number of reports to filter through and
37 prioritise effectively.
38

39 That is coming from people who work within the system
40 on the ground. The lack of information sharing amongst
41 child protection services at the local level from DoCS, the
42 Education Department, the police and health is a
43 significant cause for concern. Communities have done in
44 the past and need to reclaim responsibility at the local
45 level wherever possible for child protection.
46

47 The community nurse is a key, a significant person,

1 within the community. We used to have them. Current
2 interagency meetings across Barwon, if they are still
3 happening, are regarded as totally ineffectual. That might
4 be a little bit of an over exaggeration but that is the
5 general feeling that I am picking up.

6
7 This needs addressing as a matter of urgency. One
8 program, the Brighter Futures program, is a good program
9 targetting ages zero to eight with the Benevolent Society
10 operating the program here in Moree. It is only voluntary
11 with identified families at risk or in need of support.
12 Importantly, there is no reference point back to the
13 community or running record that can be used at an
14 interagency level to case manage these children and
15 families that are identified at risk.

16
17 That is point one.

18
19 Point two is safe houses for children at risk. This
20 is an issue I personally feel very strongly about,
21 particularly in towns such as Bourke and Brewarrina in
22 particular, and I know the Commissioner has spoken to some
23 of these people.

24
25 The situation that currently exists is that it is
26 provided through women's refuges, which often involves
27 emergency accommodation for children. There is no specific
28 emergency accommodation for children who at times are at
29 risk in the community due to periodic family dysfunction,
30 mostly involving excessive alcohol and at times drug abuse.

31
32 These times are usually intensified in Aboriginal
33 communities and I can say that Barwon has by far the
34 largest indigenous population of any electorate in the
35 state and nearly in the country.

36
37 Around pension time, where funds are pooled for
38 drinking parties, parties usually last three to four days
39 for adults, having recently attended one in Bourke - not
40 for three or four days, but I did call in to see what was
41 going on.

42
43 It becomes untenable for young people - and this is
44 the issue with which DoCS struggles, senior management
45 struggles with - because children at risk, after these
46 drinking parties start after three or four days, are at
47 risk from assault, both physical and sexual in the context

1 of what might happen during the binge sessions and what may
2 also happen to them by older youth and predatory others on
3 the street, police having in some communities provided
4 shelter for these children in the police station due to
5 lack of alternatives.

6
7 That was raised in parliament. It did cause a bit of
8 concern. It did get a response, but good on the police if
9 they see kids at risk. We know there are blow-outs in all
10 our communities at certain times during the month,
11 particularly around pay day. We all know who the families
12 are at risk, we all know where the hot spots are and we all
13 know where the party houses are. We need to be able to
14 pull those kids in who we know are at risk.

15
16 The drinking party that I was observing in Bourke a
17 few weeks ago had no less than 14 kids under the age of
18 five there who had to endure that process for four days.

19
20 The comment: The community members from the Ark House
21 in Bourke - I believe you have been made aware of that -
22 have stepped up and provided a house. This is a community
23 group in Bourke. They have finally been licensed by DoCS
24 after 12 months and now that facility is being used for
25 foster care.

26
27 This group as a matter of urgency needs a small amount
28 of recurrent founding, approximately \$50,000 a year, to
29 stay viable and provide a legitimate service in the Bourke
30 area. The Department of Community Services is more than
31 aware of this situation, as is the minister.

32
33 We need safe places where families can take children
34 at times of risk where the police, if they are picking kids
35 up at times of risk, can take them to a safe house. It is
36 a different model than women's refuges, as for people who
37 are doing street beats in some of our towns, and we have
38 had children as young as two that I am aware of who have
39 been out on the streets for more than 24 hours at any one
40 time.

41
42 The Bourke community has stepped up, they have set up
43 their own house, but they need some support as a
44 non-government organisation. DoCS can't do it on their
45 own. They are not doing it. And these sort of groups need
46 to be supported.

1 The other group is the Ourgunyah Women's Refuge in
2 Brewarrina. They have a project to redevelop the previous
3 aged-care village to expand services to women needing
4 shelter and children at risk. The current site is
5 unsuitable and too small, but the three-bedroom house where
6 I visit regularly you can have anything up to 14 to 16
7 women and children in that house.
8

9 This project has the capacity to be a regional project
10 providing services to the surrounding areas of Walgett,
11 Bourke, Gadooga and Lightning Ridge. If done in
12 partnership with DoCS, this project could provide a
13 powerful point of intervention and a model for community
14 self help. Again, the department and the minister are very
15 aware of this project.
16

17 Both projects do not replace the role of DoCS but
18 rather seek to be a point of reference and a potential
19 entry point for possible agency intervention. What
20 currently exists in many of our communities does not work
21 and it should not be supported.
22

23 The policy framework and on-ground delivery of child
24 protection services in New South Wales is dysfunctional at
25 best. This is supported by the fact that the vast majority
26 of child sexual abuse is still not being reported, let
27 alone dealt with.
28

29 Point three, staffing: Currently between Moree and
30 Narrabri there are ten staff vacancies for DoCS workers,
31 similar numbers across the board, with none in Brewarrina
32 still. Actual full-time permanent staff are very few on
33 the ground. DoCS' ability to recruit and maintain staff is
34 quite limited. The service unfortunately has a poor
35 reputation, not reflecting with people on the ground, with
36 a strong emphasis in a community of mistrust. The existing
37 operational framework many of us believe needs serious
38 overhauling.
39

40 Ongoing staff support tends to be poor and staff
41 concerns and recommendations are not being addressed,
42 particularly at the local level where you need
43 uncompromising support for workers dealing with issues in
44 their own community. This does not reflect the
45 well-intentioned people who work in the department or who
46 are well intentioned and care about child protection.
47

1 The system does not allow for a holistic approach to
2 child protection. Strong local teams need to be backed by
3 flying squads used on a target approach where needed, for
4 instance, to clarify and to quantify any reports that we
5 have recently had in places like Moree or Boggabilla.

6
7 Why do we need a refocus on staffing? Because our
8 communities, and Moree is no different, are managed down.
9 We are managed down and we are managed from outside our
10 community. There is little internal capacity building
11 within communities from the agency which acknowledges local
12 responsibility. Most agencies will say, "We are from the
13 government, we know best and we are here to do what is best
14 for you".

15
16 I have attached for the Commission a response from a
17 potential job applicant from Bourke who would be ideal for
18 the job - this girl used to work for the Department of
19 Sport and Recreation - who applied 12 months ago for a
20 position with DoCS and is yet to receive a response. There
21 are people who want to work with the agency in our
22 community. The ability of the agency to recruit from
23 outside at the local level is pretty marginal.

24
25 There is little or no work being done regarding
26 building Aboriginal leadership to help communities deal
27 with abuse, which was one of the key focus points of the
28 Aboriginal Child Sexual Assault Taskforce - ACSAT - which
29 was established by the previous Attorney-General.

30
31 The New South Wales Government's response to ACSAT was
32 an interagency plan comprising some 88 actions focusing on
33 balancing strong law enforcement, a crackdown on criminal
34 activity and the importance of early intervention and
35 children at risk. I say words are cheap. I can't see any
36 improvement at this point or targeted effort which has made
37 any considerable gains in response to the state plan.

38
39 From truancy, information gathering, intervention,
40 leadership support, education and awareness, investigations
41 and joint response efforts need to be accountable and
42 reported back to the community. I refer you to Minister
43 Paul Lynch's submission on overcoming indigenous
44 disadvantage.

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46 I have been following the inquiry and will leave
47 comment about out-of-home care, except to say our foster

1 carers and families need better support.

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In one of my towns, two families have withdrawn their support because children were knowingly placed back several times by DoCS into situations where the children were knowingly being abused. Mum in particular agitated to DoCS to have the children returned because she was missing out on the child payments.

In Sydney last week I met a family who were fostering two children who were siblings. Each child had a case worker. The foster family had a case worker. The mother had a case worker. No-one had actually met each other, nor was there any level of consistent support. The issue of Aboriginal children only to be fostered and/or cared for by Aboriginal foster carers is political correctness gone mad. It is not in the children at risk's best interests, nor should it be reflective of recent comments about the stolen generation.

THE COMMISSIONER: Can I just stop you there. I think you have covered the three critical points. You made some other points in your submission which we have taken on board, including the fact that you suggest we should look at the Northern Territory intervention, which clearly we will do. But I think you have probably made the points that need to be made, so thank you for your submission.

MR HUMPHRIES: That was the last point, the intervention. I will say one last one thing, though, that if this inquiry does not fix what we need to fix, the next tribunal should be a War Crimes Tribunal because people are knowingly not acting with any sense of urgency on what needs to be done. So I wish you well with the inquiry.

THE COMMISSIONER: Thank you very much. Now we have some people who want to speak. Terence Duff, please.

MR DUFF: I am a principal solicitor who works with the Thiyamali Family Violence Unit here in Moree. I have only just recently joined that work. I have been a practitioner for about 11 years, in which time I have mainly worked in criminal law. I have also worked in the care jurisdiction and on occasions I have also been a solicitor agent for DoCS. I have recently been working in such areas as Coonamble, Walgett, Lightning Ridge and Dubbo.

1 There are a couple of matters I would like to raise.
2 Some are of a legal nature in regards to the procedures
3 that occur in court and in regards to the act.
4

5 One of the things I found in reports to DoCS, for
6 example, is that quite rightly there is a provision in the
7 act in regards to anonymity. That can certainly be
8 important, I am not suggesting that be removed, it is
9 important in some communities where there are difficulties
10 but, when it comes to court work and particularly in
11 regards to evidence, and particularly because the rules of
12 evidence that normally apply in criminal matters or civil
13 matters do not fully apply in care proceedings, this is a
14 matter of some difficulty in fairness both for the children
15 and for the parents.
16

17 And why do I say that? I will give you an example of
18 something recently where I appeared in the Children's Court
19 in Walgett. There were two urgent applications by DoCS,
20 both of which were dismissed on the grounds of evidence,
21 and it was only because we were able to raise the issue
22 that a relative of the father of the children - and I was
23 appearing for the mother in these proceedings - was so
24 vindictive to the mother that she would continually ring up
25 DoCS.
26

27 Now, I had occasion to call the police officer who
28 appeared for DoCS, appeared on the removal of the child,
29 and cross-examined him and it came out that the evidence in
30 some of the affidavits was perhaps not completely what was
31 there.
32

33 That then became subject to a Crown appeal and it went
34 off to the District Court and it finally succeeded in a
35 care order. There were other proceedings involving other
36 children. I say that, in the sense that I think that
37 aspect of evidence and fairness to everyone, because we are
38 making decisions about children that will affect all of
39 their lives until they are adults, that while it is fair
40 enough in regards to anonymity of reporting, when we come
41 to the proceedings we are often asked for things to be
42 mentioned, to be raised in the file, and up goes the hands
43 by DoCS, "protected information, can't reveal".
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45 I think that all, both the child and the parents, have
46 a right to test that evidence of a report. Often it is
47 just hearsay or it may in some cases be vindictive.

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That is one thing I would like to see. Particularly also s106A of the Act, which has been recently introduced, says that evidence of a finding of care in any jurisdiction - that is, Queensland, South Australia, Tasmania - effectively is prima facie evidence of a need of care in this matter. That may be 10 years ago, five years ago, whatever. It takes no account particularly of its domestic violence, that the victim of domestic violence has moved on, that the situation has changed, and we have that particular provision which I see as rather onerous in regards to the effects both on the child and the parents.

THE COMMISSIONER: Can I just interrupt you for a moment. I think there are two important parts of the provision, though, you haven't mentioned, namely, it is only prima facie evidence where the children have been previously removed and not been restored and also if the parents can show a change of circumstances, then clearly again they will meet the onus.

It is an important matter, but unfortunately there are too many cases where one or two children have been removed from a family and other ones have been left, which has led to a tragic outcome. It is a very important provision and I know there is a great deal of discontent amongst lawyers with the provision. The point is well known, I think.

MR DUFFY: Thank you. The other thing that I would like to say is that it seems to me, from my experience, although there is s86 of the Act that talks about contact, I have seen both in regards to appearing for DoCS and acting against DoCS that there seems to be almost abhorrence by DoCS in putting in a contact order in the orders. I know that doesn't always occur, because I have got a present case, not a case before the court, but I have a client in which there is a contact order.

But so often that is the case, that it is not there, and we are talking about the problems of resources to DoCS. It seems to me that they simply fall into a hole in the universe where because - and I'm not blaming DoCS completely - because of the failure of staffing and adequate caring provisions, the children miss out on that opportunity for what I would refer to as proper contact with the parents, and I suggest that we could well look at the provisions that should occur in the Family Law Act.

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The final thing to say is I notice Chapter 2 Part 2 of the Act talks about Aboriginal and Torres Strait Islanders, particularly in regards to self-determination and involvement in the process. I accept to a certain degree what Mr Humphries says about the dysfunctionality of certain communities, and I have certainly experienced that myself, I am sure you have and others that are here, but it seems to me that that principle particularly in the country - I can't speak for the city because I haven't practised in those jurisdictions - out here, I have yet to see fully how those principles of self-determination, participation in decision making, that aspect is fully involved. I know there are problems in regards to factionalism in regards to the community here in Moree at times, but it seems to me that the department needs to look at that more fully.

The other thing I would say is that I would like to commend, for example, in regards to the police, JIRT, which plays an important part in their dealings and I have had dealings with them in both criminal and care matters, and I do appreciate that DoCS has real problems in regards to getting staffing. When I was at Walgett, it was an office that covered from Walgett further out, to Lightning Ridge and to Collarenebri. They had two staff: one was the office manager-cum-caseworker, there was one other caseworker. They actually had to second someone from the Sydney office and tell them to come up for a period of time, I think it was six months. She has now gone, not replaced, can't get staff. I understand the burn-out and the problems they have, but on the other hand I think that needs to be addressed. Thank you.

THE COMMISSIONER: We are looking very closely at the question of employment and retention. Before you sit down, could you briefly tell us what you do with your family violence unit. What actually is it?

MR DUFFY: It is funded by the Federal Attorney-General. It is a multi-disciplined organisation, in that there are two branches to it. There is a support, what I say non-legal support, that is where people can come along and see a counsellor at no cost. They deal only with the victims of domestic violence and the children, not the perpetrators, so it's not a group for perpetrators, and there is counselling support.

1
2 Might I say, in my view, particularly as I have worked
3 here for about five to eight years in Moree, that is
4 particularly a problem. I remember we rang up the other
5 day trying to find counselling for a perpetrator, and it's
6 just very difficult. We rang one organisation and it was
7 \$90 an hour. The clients that we get are not going to be
8 going to that, simply because of the money.
9

10 They provide counselling support in regards to that.
11 They also supply court support, in the sense of recently,
12 for example, there was a sexual assault matter in the
13 District Court. We will go along and be support people for
14 those in liaison. I must say, we work in liaison also with
15 the DPP on occasions. I have quite a good relationship
16 with Louise O'Neill, who is a witness support person from
17 that organisation at Newcastle, and they go and support
18 witnesses who are subject to domestic violence.
19

20 THE COMMISSIONER: So what area do you actually cover?
21

22 MR DUFFY: We cover the area Boggabilla to Mungindi, here
23 to Inverell, and we are looking at opening up to Narrabri,
24 but we haven't yet opened up to Narrabri. On the legal
25 side, we do representation in regards to family law. There
26 must be a connection with family violence, so we will do
27 things like recovery orders, we will do representations in
28 regards to - I'll use the old term because the new term has
29 changed a few times - I will use the term custody and
30 access or residence and contact rather than the new terms.
31

32 We will also do Victims Compensation Tribunal matters
33 and we will give general assistance and also representation
34 in regards to any other civil matters and we probably
35 appear also - although usually the police are involved in
36 AVOs - but we would assist, if the police do not proceed,
37 in a domestic violence order. That is the sort of legal
38 representation and the court representation, as well as
39 general advice that we give as well.
40

41 THE COMMISSIONER: The people who use your services have
42 to pay you?
43

44 MR DUFFY: No, there's no cost, it's all funded by the
45 Federal Attorney-General's Department. There is no cost,
46 it's confidential. There is another solicitor sitting next
47 to me, Kate Wells, who also works with me. That's a new

1 position that has just been funded by the
2 Attorney-General's and there is no cost at all to the
3 clients who come to us.

4
5 THE COMMISSIONER: Thank you very much. Philippa Kaberry,
6 please.

7
8 MS KABERRY: No, I won't now, it's sort of been covered.

9
10 THE COMMISSIONER: [REDACTED].

11
12 [REDACTED]: My name is [REDACTED] and I'm a member of the
13 Aboriginal community here. We have had a child in foster
14 care for five years, [REDACTED], and we have been
15 fighting for the child for five years with DoCS here. The
16 issues that are involved in the surrounding areas of DoCS
17 here, it's unreal. There's no communication with them.
18 You can ring them, no feedbacks or nothing. Then all of a
19 sudden we get a call to say they want a meeting with us.
20 We have a meeting with them, five years later. Now they
21 are saying that, "There's nothing we can do." They give us
22 visitation rights, two hours. Aboriginal families are
23 extended, we haven't only got a couple in our family, we
24 have got heaps. Two hours isn't enough time for the
25 extended family to see this little child.

26
27 THE COMMISSIONER: I thought that you were a foster carer,
28 but it's a [REDACTED] who has been placed in a foster care
29 situation.

30
31 [REDACTED]: In a non-Aboriginal family, too.

32
33 THE COMMISSIONER: I'm not sure to what extent the court
34 made contact orders. It obviously went through the court,
35 did it?

36
37 [REDACTED]: It went through the courts as a state ward, but
38 they never made no contact or nothing, we had to do all
39 that. What we are saying is you get all these families
40 that get their kids taken away and when the immediate
41 family wants some contact or visits, it takes ages for them
42 to do it.

43
44 THE COMMISSIONER: Contact is obviously very important.

45
46 [REDACTED]: That's right, you have to have contact with
47 your family. [REDACTED] is raised by a non-Aboriginal family, so

1 where is the Aboriginal involvement with it? You have no
2 communication or nothing, so [REDACTED] going to grow up not
3 knowing the Aboriginal culture or history of Aboriginal
4 things. So [REDACTED] going to grow up knowing no-one in [REDACTED]
5 Aboriginal family, only on the foster carer's family.
6

7 THE COMMISSIONER: We will make note of that situation
8 that you have experienced. I can tell you that the Act
9 which governs this whole area of foster care does require
10 that there be communication of Aboriginal children with
11 their families.
12

13 [REDACTED] : We've had three assessments. How many
14 assessments do we have to have? Three assessments and a
15 psychologist's report. How many more do we have to have?
16

17 THE COMMISSIONER: Hopefully none, but I don't know what
18 those reports have said. The Act does require that there
19 be the contact with the family to maintain the culture and
20 so on. We will make note, thank you, that you have had
21 this experience, because it does help us to understand
22 whether the Act is working or not.
23

24 [REDACTED] : Thank you.
25

26 THE COMMISSIONER: We would like to hear if there are
27 foster carers here or NGOs here who are having experiences
28 in relation to children and their care or other children or
29 dealings with DoCS, who perhaps have a problem. So please
30 feel free to speak up. You have obviously all come here
31 with an interest in the field, but we would like to here
32 from you, if you have something you can tell us.
33

34 MS ADAMS: Hi, I'm Christina Adams, I'm a social worker
35 and registered nurse and I work for Community Options. We
36 have had a number of issues. I have actually had some
37 experience working in DoCS as well, so I will probably just
38 talk a little bit about that.
39

40 A couple of issues that we have had is we provide a
41 lot of support services for people with disabilities and
42 often there might be more than one child in the family with
43 a disability. It's an incredibly stressful situation for
44 those families and there's been times when we have had to
45 report to DoCS and have tried to develop a relationship and
46 work collaboratively with DoCS, and they haven't been
47 interested in doing that. It's very much about their

1 procedures, and I know that they have a responsibility, but
2 we're like, "Can we get you to come to our meetings," and
3 things like that, let's work collaboratively with the
4 family, we have been working with them for 10 years, that
5 sort of thing, and that probably hasn't been forthcoming,
6 which I think is probably not very good practice.
7

8 From my experience, I manage 10 staff across this
9 region and a lot of people have actually lost a lot of
10 faith in DoCS. Although I realise that, with mandatory
11 reporting, the reports are actually going up, I know there
12 is a number of people that aren't reporting things that are
13 really quite high child protection risks, and that's within
14 different organisations because they have actually lost
15 faith in DoCS because it hasn't been acted on because they
16 have reported things on multiple occasions and nothing has
17 been acted on. So that is a real issue.
18

19 The other issue that I have is, with my experience in
20 working with DoCS, the understanding that the staff had
21 around domestic violence, perpetrated around it as a crime,
22 was fairly non-existent. Victims of domestic violence were
23 being blamed, people weren't able to work out who the
24 perpetrator was. It wasn't looked at as a power and
25 control issue, but more a fighting between a family, that
26 people were sent to marriage counselling instead of maybe
27 for an AVO and the police and that sort of thing, and that
28 was widespread within DoCS. I think that was a really big
29 issue and it was to the point where victims were having
30 children removed and put in the care of perpetrators.
31

32 It just really screamed out a lack of understanding
33 about domestic violence and about that power and control
34 and what's that about, rather than thinking that it's - and
35 not being able to see when someone is actually defending
36 themselves and not being able to see what, for the most
37 part, a battered woman looks like. They just weren't very
38 supportive, and the whole culture of DoCS is very much a
39 blame culture. They didn't look after their staff, they
40 didn't do a lot. Just the culture was quite dysfunctional,
41 I guess.
42

43 I think everybody has lost a lot of faith in DoCS,
44 which is really unfortunate because I think if we were able
45 to work together, they are experts. Not just our
46 organisation, but other organisations, are actually doing a
47 lot of the kind of, with neglect, putting in and doing all

1 those things, and that's fine because I know a little bit
2 about that, but they are not the experts in the neglect or
3 abuse and they are actually the ones dealing with the
4 families, because DoCS isn't picking them up.

5
6 THE COMMISSIONER: Could you tell us the name of who you
7 work for?

8
9 MS ADAMS: I work for Gunnedah Council, it's North-West
10 Regional Community Care, but we cover Moree, Gunnedah,
11 Tamworth and Narrabri up to probably Boggabilla - nine
12 local government areas.

13
14 THE COMMISSIONER: You said you would like to be more
15 involved in individual cases, but do you request to attend
16 the case meetings for some of these children?

17
18 MS ADAMS: It's more around we have said - I guess we have
19 said to them, "We are having a service conference, we have
20 all the services turning up, we have the family turning up,
21 can you come to that." "We can't tell you anything because
22 it's confidential," and I guess there is no accountability.
23 I understand the confidentiality issues, but the issue is
24 I have workers here that are Aboriginal that have been
25 working in this community for a really long time, to have
26 good rapport, that if anybody is going to be able to do
27 anything to help these families, it's them and we are not
28 working collaboratively and it's disjointed. I mean, it's
29 not good for DoCS either because then they become the hated
30 person.

31
32 THE COMMISSIONER: Thank you very much for that. I can
33 indicate, if it's of any help to you, that we are looking
34 very closely at this situation of agencies working together
35 more closely with DoCS, with there being a greater exchange
36 of information. We hear across the state, particularly
37 from school teachers but also from health professionals,
38 that when they do report a child, they get back a form
39 letter in due course with a number, but nothing more, and
40 we are very concerned by that.

41
42 We are certainly looking very close at the extent to
43 which there should be greater disclosure and what is
44 happening where DoCS are notified and greater participation
45 on a collaborative basis because it is a point I do make
46 repeatedly: DoCS cannot look after the child protection
47 system alone, there are health, education, people such as

1 yourselves and so on who have a significant responsibility
2 and a capacity to intervene and help. Thank you very much
3 for your observations.
4

5 MS FURNESS: We understand that there's a representative
6 of Centacare here. We would be very interested in hearing
7 Centacare's view as to, firstly, the services it provides
8 in the area and, secondly, what gaps in services it
9 believes exist and indeed its relationship with DoCS. Is
10 there a person from Centacare who would like to talk to us?
11

12 MS MOORE: My name is Zona Moore. I've recently come from
13 the background of working with Corrective Services at the
14 Brewarrina centre and I have come back to Moree now to work
15 with Centacare. The main core of our business is working
16 with people with diagnosed mental illness, and we are just
17 starting now to get a client base, but we do know there are
18 a countless number of people within the Moree district. We
19 cover Mungindi, Boggabilla, Toomelah, out as far as
20 Collarenebri, and we are just getting established in those
21 areas, so we are starting to see our client base and we are
22 working with the established groups within the Moree
23 district.
24

25 Our core business is working with people with mental
26 illness, diagnosed mental illness. We went to Toomelah
27 yesterday and we are just starting to work with the
28 Aboriginal medical service out there, as they are referring
29 clients to us, we will have a visiting service out to those
30 places. But certainly I think there is still a lot of
31 shame within the communities of identifying in the family
32 living the organisations, who these people are. But with
33 the Aboriginal staff going, because I know the majority of
34 the people out there, and it's just being known to the
35 people and gaining their trust and working with the
36 families. So what we do, we will be taking Centacare
37 business into the homes of the indigenous and the
38 non-indigenous clients. But the core business is working
39 with people with mental illness.
40

41 MS FURNESS: Do you provide services to children and
42 adolescents?
43

44 MS MOORE: We have got a young Aboriginal man who is
45 starting up a youth group and he is also just getting
46 established. As I said, we have been running for about -
47 the position has been going for three months and I have

1 just come back from Corrective Services and I have been
2 there for five weeks. So we are getting established, but
3 there certainly is the capacity to work with the youth of
4 Moree and district, and all of those areas will be covered.

5
6 THE COMMISSIONER: Thank you very much. Is there anybody
7 else who comes from one of the non-government agencies? We
8 know the Benevolent Society has a role locally, but do we
9 have anybody either from that society or who has dealt with
10 them.

11
12 MS FENTON: My name is Teresa Fenton, I'm the team leader
13 case manager at the Benevolent Society here in Moree and
14 the Brighter Futures program. I guess the biggest role for
15 us on a day-to-day basis is the huge area that we actually
16 have to cover. We not only cover the Moree area, but we
17 also do Inverell and Narrabri, local SCC area, such that
18 takes us to places such as Boggabri, Ashford, Boggabilla,
19 Mungindi, Pillaga. It's such a huge area and our capacity
20 to provide those services, I guess over time, once we get a
21 lot more referrals in, is going to be very limited,
22 I think. The only other issue that I would like to raise,
23 I guess, is around changes to our guidelines that occurred
24 in December. There was no advice or no consultation around
25 those changes.

26
27 MS FURNESS: What guidelines are you referring to?

28
29 MS FENTON: Our Brighter Futures guidelines that came from
30 DoCS. What actually happened is we were asked to fill out
31 family update forms, which you do on a three-monthly basis,
32 six-monthly basis. When we got those update forms to do
33 for each family, it was noted on there that home visiting
34 is no longer us going to speak to a family in the home,
35 it's actually a parenting program that's delivered face to
36 face in the home, which has a lot of impact on our ability
37 to meet our target groups. So that's two issues that have
38 really impacted on our service.

39
40 MR HUMPHRIES: Teresa, do you want to talk about the
41 Brighter Futures program.

42
43 THE COMMISSIONER: I was going to say, for those who are
44 not aware of it, the Brighter Futures program is an early
45 intervention program whereby people can either be referred
46 through community centres or NGOs, such as the Benevolent
47 Society, or through DoCS. These are particularly aimed at

1 the younger children in a situation where they can be
2 accessed and perhaps problems of the families dealt with
3 before the situation develops into a crisis.
4

5 I was going to ask you, we understand at the moment
6 that although it's fairly early days, the actual processing
7 of the applications has to go through a hub at Tamworth.
8

9 MS FENTON: Yes.

10
11 THE COMMISSIONER: What is happening, if DoCS at Moree,
12 the centre here, has a potential case it has to go to
13 Tamworth. If you get a community referral, it has to go to
14 Tamworth, and they decide whether it is appropriate or not.
15

16 MS FENTON: That's right.

17
18 THE COMMISSIONER: Are you finding that's a problem or a
19 delaying factor?
20

21 MS FENTON: It is. I guess in order for us to build
22 closer relationships with the staff that are at Moree and
23 Narrabri, it has affected our ability to do that as well.
24 It is delaying the process. The community referrals
25 started out as a three-day turnaround, where we would get
26 approval from DoCS to proceed. It has now gone to 10 days.
27 I have had one, I think it was 22 February, that I put on
28 to the system to go to Tamworth. I had to ring them 15
29 days, maybe 18 days after to find out why that community
30 referral was still sitting on the system and not being
31 declined or approved.
32

33 So it has caused some delays, and there's also been
34 some changes in staff at the hub. The manager who is there
35 has been out doing child protection, doing JIRT, doing a
36 lot of other things, so they have had acting managers.
37 They haven't had a full complement of staff yet, which we
38 have raised as an issue across the board. Those things are
39 having an impact, and of course what is happening is most
40 of the referrals that we are getting are coming from
41 Inverell, so the Moree-Narrabri families are missing out on
42 our ability to provide them with a service.
43

44 MS FURNESS: Do you have the capacity to provide a service
45 to more families through the Brighter Futures program than
46 you currently have?
47

1 MS FENTON: I think in terms of case load, yes, we do have
2 vacancies at the moment.
3
4 MS FURNESS: Have you conveyed that to DoCS, that you have
5 vacancies?
6
7 MS FENTON: Yes. I speak to the Inverell cluster manager
8 and the Tamworth hub manager; they are both aware that
9 vacancies are there.
10
11 THE COMMISSIONER: One of the features of the system is
12 that there is a certain percentage that can come through
13 the community and the balance have to come from DoCS. Are
14 you finding that, so far as potential community referrals
15 through the Benevolent Society are concerned, you are
16 having to reject people and say, "I'm sorry, we have used
17 up our quota of community referrals"?
18
19 MS FENTON: Not at this stage, it hasn't become a problem,
20 but I think it will in the future. We have quite a few
21 community referrals, but we haven't yet had to create a
22 waiting list in relation to community referrals.
23
24 THE COMMISSIONER: You then have to obviously use local
25 services for special aspects of the Brighter Futures
26 program.
27
28 MS FENTON: Most definitely yes.
29
30 THE COMMISSIONER: What is the situation, are there gaps
31 in the services or are there sufficient services available
32 in the area that you are covering to look after those
33 various aspects of the intervention?
34
35 MS FENTON: I think the point that Terence made about the
36 counselling for perpetrators is a big gap for Moree. The
37 majority of our cases that we are dealing with are in
38 relation to domestic violence, and while we can work with
39 the victim and work with the children around that kind of
40 situation, the perpetrators aren't getting any services to
41 help them deal with their issues, and we have limited
42 capacity to do that as well. So I think that's a huge gap
43 in service.
44
45 THE COMMISSIONER: Thank you for that.
46
47 MS FURNESS: We understand there are representatives of

1 the Narrabri Women's Refuge. We would be very interested
2 in hearing from you how your refuge operates and your
3 relationship with DoCS.
4

5 MS EDGAR: Hello, I'm Jackie, I'm a support worker at the
6 Narrabri Women's Refuge. We do work, I think, as closely
7 with DoCS as we can, considering that there is only one
8 caseworker there - very, very short staffed. We have been
9 finding, I think, because of that that they can't attend
10 casework, they can't attend a lot of meetings that we do
11 try and have within the community to try and get better
12 services up and running again with men's perpetrator
13 programs.
14

15 We do court support, just trying to get a lot of the
16 agencies together to work out how we can better deal with
17 domestic violence and family violence in the community, and
18 we also invite DoCS, but because of the short staff, we are
19 finding that they can't attend the meetings. I think also
20 because of the short staff and shortage of foster carers as
21 well in the Narrabri area, we are finding that DoCS may
22 come in and provide a service for, say, interim care for
23 some children and then they have had another greater
24 priority, so those children are pulled back to the mother
25 and that therefore stops the support for the mother, so
26 other agencies have to come in and try and fill that void,
27 and that's all because I think - I'm not sure, I'm not
28 positive, but I think - a lot of that is because of short
29 staff.
30

31 I am sure that the Narrabri DoCS would like to, I
32 mean, they do attend interagency meetings, but I am sure if
33 they had more staff they would be able to better work with
34 a lot of the other agencies in Narrabri.
35

36 MS FURNESS: Are you the only women's refuge in Narrabri?
37

38 MS EDGAR: Yes.
39

40 MS FURNESS: What is your capacity?
41

42 MS EDGAR: We used to be able to accommodate women and
43 children in crisis. We are crisis accommodation. We used
44 to be able to accommodate a lot more but because of fire
45 protection laws we are down to 12. We can only accommodate
46 12 but we have got the capacity to accommodate 22.
47

1 MS FURNESS: Do you take youths as well as women and
2 children?
3
4 MS EDGAR: We only take 18-plus by themselves as a youth.
5 They need to be with a parent if they are younger than 18.
6
7 MS FURNESS: And what age is the cut-off for boys?
8
9 MS EDGAR: 14. We will look at a case-by-case basis. If
10 a mother comes in and she has five children and a boy 15 or
11 16, we will look at accommodating them. But we also put in
12 some boundaries to say that if there are any problems then
13 the accommodation could be pulled. But we would find them
14 alternative accommodation. We would not just put them out
15 on the street.
16
17 MS FURNESS: What counselling services are available for
18 women and children in Narrabri in relation to domestic
19 violence?
20
21 MS EDGAR: We aren't specifically trained counsellors but
22 we absolutely know a lot about domestic violence and the
23 occurrences that happen with that. We do a lot of talk
24 with the women. We talk about parenting, we talk about the
25 cycle of violence, we go through healthy relationships, all
26 that sort of thing, and outside of our refuge we have got
27 community health, but unless you have got a mental
28 disability or you have been diagnosed with a mental
29 illness, they can't sort of do any counselling. So then
30 you have only got paid services and our clients can't
31 afford it.
32
33 MS FURNESS: What about drug and alcohol counselling
34 outside of the refuge, is that available in your area?
35
36 MS EDGAR: No. It is, I think at this stage we do have a
37 drug and alcohol worker at community health, but I think
38 the intake is not on a local level, you have to ring up and
39 do intake that way. She is pushed to capacity for her
40 workload. So far as I know it is very difficult to try to
41 get in with her, there is a big waiting list.
42
43 THE COMMISSIONER: Thank you very much. Anything else you
44 wanted to add?
45
46 MS EDGAR: No, I think, like other points that I wanted to
47 make, everyone else has included those as well, so thank

1 you.

2

3 THE COMMISSIONER: Thank you very much. Do we have any
4 foster carers, do we have a speaker here?

5

6 [REDACTED]: My name is [REDACTED] and I work at a
7 community centre, the Moree Neighbourhood Centre. I was
8 not sure what this meeting was about but I wanted to raise
9 concerns with the local DoCS office.

10

11 Two years ago I, through mandatory reporting, took a
12 young lady and her children to DoCS because the 4-year-old
13 at the time made allegations that her father was
14 interfering with her. Now, when we went to DoCS they told
15 us we could not tell them direct. We tried to talk to them
16 direct. We had to go back through the hotline. Then we
17 came back through to the local office and the DoCS worker
18 said, "Oh, no, that would not be happening because I know
19 the family involved" and dismissed it.

20

21 I then took the family to the police station. They
22 took some statements and put a domestic violence order
23 against the father from seeing the kids. A couple of
24 months later it was then rushed through court. When the
25 little girl made the allegations, the mother was told to
26 package up the pyjamas that she was wearing at the time she
27 was assaulted. The mother has still got those pyjamas two
28 years later. The police have not come to speak to her
29 about it.

30

31 The [REDACTED] police stuffed up. They said they had
32 interviewed the girl, they can't find the video of the
33 interview that was done. They interviewed the girl without
34 DoCS' involvement. The [REDACTED] police said they can't do
35 anything about it. The DoCS office says they can't do
36 anything about it.

37

38 Now, for the last two years that woman and her family
39 have fled [REDACTED] and moved to Sydney to get away from the
40 perpetrator. The child also named that her father was
41 interfering with her [REDACTED], who was [REDACTED] years old, and
42 that was reported to DoCS through the hotline, reported to
43 the [REDACTED] office, reported to the [REDACTED] police, and two
44 years later there is still no investigation into the
45 father.

46

47 But after that the police got involved with a domestic

1 violence order and she was then railroaded by the
2 magistrate in [REDACTED], the police and the solicitor involved
3 - she had no idea what they were talking about - they
4 rushed a court order through which forced her, after she
5 left [REDACTED], to come back to [REDACTED] every month, every second
6 month, so that the father could have his visitation rights.
7

8 I mean, what are they doing? Then the fact that the
9 thing has now been listed before the Family Law Court in
10 Sydney and that has been listed there for 18 months and it
11 still has not been dealt with. She is still forced for the
12 children to see the father, and now because she is in
13 Sydney she has to pay for him to come and have visitations
14 at a mutual centre. And it has taken 12 months to get that
15 and she has to pay to allow a pedophile who has interfered
16 with her children to come and see them.
17

18 Every time the children see him, they go back to
19 wetting the bed, it disrupts their lifestyle, the children
20 have been seeing a counsellor, a psychiatrist at [REDACTED]
21 [REDACTED], and they have made numerous reports to
22 DoCS about the disclosure that this little girl has been
23 telling what her father has been doing, with other people
24 that have been interfering with her, [REDACTED] police have
25 been told, the [REDACTED] police was told, and yet two and a
26 half years after this happened nobody has done anything.
27

28 It is still an on going issue and the perpetrator I
29 know is still, from the allegations the little girl
30 disclosed to me, there is still another [REDACTED] year-old being
31 exposed to having visitations with this man, and nobody
32 wants to do anything about it.
33

34 THE COMMISSIONER: It sounds as though a lot of that
35 should not have happened but I wonder would you mind
36 leaving your name and the details with one of our workers
37 who can pass it on both to DoCS and the police to have a
38 look at.
39

40 [REDACTED]: It has been passed on for the last two and a
41 half years. I have been talking until I am black in the
42 face to these people and you may as well go over the and
43 talk to that brick wall, I would get a better response.
44 From my understanding of this situation personally being
45 involved, the [REDACTED] police and DoCS are about as useful as
46 a submarine with a gauze door.
47

1 THE COMMISSIONER: As I say, if you leave details with us
2 we can pass it onto the appropriate people to perhaps have
3 another look at. But the current system should not have
4 let that happen along the lines that you have explained.
5 Whether there are some other factors I don't know about we
6 will have to look at, but certainly thank you for that case
7 illustration.

8
9 [REDACTED]: I reported it to parliament and I spoke to
10 the woman involved yesterday. She got a letter two and a
11 half years later and it my understanding that she was told
12 that the [REDACTED] police were going to launch an investigation
13 two years ago and they still haven't.

14
15 THE COMMISSIONER: Are there any foster carers here who
16 have dealt with DoCS and want to say something about any
17 problems they have had or successes they have had? Any
18 foster carers here or kinship carers?

19
20 [REDACTED]: I'm [REDACTED], I am a kinship carer. What
21 would you like me to talk about?

22
23 THE COMMISSIONER: I would like you to tell us how the
24 experience has gone for you. Have you had any problems,
25 has it worked well, what has happened?

26
27 [REDACTED]: When I first got the children eight years ago
28 I had a lot of problems. I still have problems but I am
29 wise enough now to work them out and have my say instead of
30 sitting back and just taking it. I know there are a lot of
31 other [REDACTED] in this town who have reported their
32 [REDACTED] about their [REDACTED] three and four times
33 and DoCS have never taken it up because sometimes DoCS has
34 got the family workers in there and they won't touch their
35 families. So I think that needs to be looked at because
36 these little kids are still being neglected.

37
38 Like I said, it was not without a fight and having a
39 lot of worry and everything, especially in the first 12
40 months. And they don't tell you anything. A lot of people
41 go in blind taking these foster children, because in eight
42 years I have been to two, what do you call them, case
43 meetings. The first 12 months I had one. Then about two
44 years later. And I have had none since. I know a lot of
45 other women have never had them.

46
47 They have never given me the training. Maybe because

1 I have had training with my own kids, I don't know, but
2 they don't give training to the foster parents or the
3 kinship carers. You hardly see them. Yet when you ring up
4 and you do really need help, they are out doing work.

5
6 I have had some good results from them. I can't knock
7 them too much but they have not done their job sometimes
8 and they need livening up.

9
10 THE COMMISSIONER: Thank you very much. Is there anybody
11 else who wants to say something?

12
13 MR CHATFIELD: My name is Thomas Chatfield, I am just a
14 local community person. I am really here to have a dig at
15 the money that the government is pumping into the community
16 that is not effectively working.

17
18 Kevin Humphries mentioned earlier that we needed more
19 community nurses. I believe currently at the moment we
20 have two Aboriginal ladies working at the hospital doing
21 that type of work. We also have St Pius that deals with
22 early childhood, we have Mr Green over here from St Pius.
23 We also have a number of other organisations that may not
24 deal directly or indirectly but do deal with the children.

25
26 The performance indicators, we have got Miyay Birray,
27 we have three full-time youth workers there, a full-time
28 manager, we have got adolescent support, family support.
29 None of it seems to be working.

30
31 The police, with our Aboriginal liaison officers, they
32 have been quite consciously aware of what has been going on
33 with prostitution, the young girls on the highway, for the
34 last three to four years. People know the pick-up spots in
35 this community where these young girls are being picked up.
36 This is local knowledge. Nothing has been done.

37
38 The money that the Government pushes into this
39 organisation each year is in excess of millions. Where are
40 the performance indicators? As a black person in the local
41 community, we look back and they have disempowered us.
42 That is why you don't go to DoCS. DoCS don't empower you
43 to make control of your affairs and make changes in your
44 community. They disempower you. Everything is defined as
45 confidential. I can understand the reasons, I have been a
46 welfare worker myself over a period of years.

47

1 This myth that we need more at the moment. What we
2 have got is not working. I see implementation of what they
3 are doing in the Northern Territory. Moree has always been
4 a pilot program for Aboriginal communities. "Let's try it
5 in Moree, we will put ADAs in the school system, they can
6 pick up the kids who are being sexually abused or the kids
7 who are dysfunctional at school".
8

9 Sadly, my last - I come from a generation of the last
10 lot of kids that were being inspected by the welfare board,
11 your fingernails and behind your ears. Like my mum said,
12 "Son, keep your shirt tucked in, your nose clean and don't
13 put stuff in other people's fridges". This is a part of
14 the process that we have been coming from. Since 1970, you
15 know, Martin Luther King had his dream. Slavery existed
16 for five or six hundred years. Here in Australia
17 colonisation, especially up in this area, education factors
18 and stuff like that, didn't come in until the last 60 to 80
19 years.
20

21 That dream that Martin Luther King had was not the
22 same as my people out here. My mother and father come from
23 a mission. They were segregated from the white community.
24 All of a sudden we see all this input of money pumped into
25 our community and nothing is happening. Aboriginal health,
26 I have not seen a program that they have run effectively in
27 this community in the last 20 years.
28

29 You talk about sexually transmitted diseases. You
30 talk about these truckies giving these young girls
31 amphetamines and drugs. Where has all that gone? HIV was
32 a big thing in the 80s for my generation, you know, safe
33 sex practices. Nothing. We have got all these support
34 services in town and effectively nothing is being done.
35

36 I can't understand, you have got all these workers
37 here today that will stand up and pass you the buck to say,
38 "We have done a great job, we are doing the best we can".
39 You would not be here today if they were doing a great job.
40

41 Another sad thing about this morning. I have come
42 here, you have got it in a white section of the community.
43 Years ago the Max Hotel was known as an Aboriginal watering
44 hole. This place has changed its stripes. You want to try
45 to contact the people and speak to some of the foster
46 parents or some of the carers out there, go to the
47 community. This is not the community. Aboriginal people

1 who actually liaise and support and try to get these
2 meetings functioning always want to bring it to a white
3 section of the community. But not here, they will take it
4 down to the RSL Club, and if you are not a member of the
5 RSL Club Aboriginal people will not enter the premises
6 because that has been part and parcel of the community.
7

8 Some of the people that you need to speak to can't
9 access you. I have come here this morning and I have
10 walked around this building twice and if it was not for a
11 lady standing out in the bar who pointed me in this
12 direction, I would not have known there was a meeting, I
13 would have walked away.
14

15 THE COMMISSIONER: Look, thanks for that. Just for your
16 assistance, we did go out yesterday to Toomelah and
17 Boggabilla, so we have spoken to people from those
18 communities, and we are doing that. We are very conscious
19 of the need to involve everybody, particularly the
20 Aboriginal community in this problem. Your community has
21 to participate and has to be allowed to participate, so we
22 are well aware of that.
23

24 MR CHATFIELD: Well, bringing it here is not making them
25 participate. And it is a political thing, they go to
26 Boggabilla and out to Toomelah mission, right, because it
27 is politically correct for them to go there. When was the
28 last time there was a meeting held on an Aboriginal mission
29 in this community? When was it actually taken to an
30 Aboriginal area in this area, and even if a tent was put
31 up.
32

33 These are the problems. I worked with the New South
34 Wales Fire Brigade for seven and a half years and one of
35 their things was, "we need an Aboriginal person to go and
36 work with this Aboriginal community". Why is that the
37 problem? As a firefighter I was involved in going doing
38 liaison with the white community. I didn't have to use the
39 buck of my back to say, "Look, I can't go there because I
40 am an Aboriginal". These are the excuses of, well, better
41 still, "We need the permission of the Aboriginal elders and
42 community".
43

44 White people have made quite common history in this
45 community that we have got no leaders in our community.
46 The divide and conquer that they have done to the three
47 Aboriginal missions in this town. Boggabilla is in the

1 same predicament. You have Toomelah blackfellas, you have
2 got Boggabilla blackfellas, you have got Goondiwindi
3 blackfellas that actually come from Goondiwindi that go to
4 Boggabilla. You have got diversities within their own
5 communities. You need to get out and speak to a range of
6 them.

7
8 My biggest problem is the money that we are pumping
9 into the schooling systems now. The ADAs that are working
10 in the system that have first-hand knowledge of these kids,
11 that have actually seen the kids that are coming from these
12 dysfunctional families, are not doing their jobs. The job
13 that they are doing at the moment is actually implementing,
14 or trying to, do the old school truancy level, by evicting
15 these kids from the schools. There is no support work.
16 There are so many mechanisms set out there nowadays to help
17 these kids and to find out what is going on, but the
18 easiest way out of it is to actually kick the kids out of
19 school.

20
21 They don't have white people doing it no more. They
22 have got black people doing it. And these black people are
23 working in the education system. The truancy level in
24 Moree has risen. The completion of year 11 and 12 by
25 Aboriginal kids has decreased. There is no increase in
26 numbers there. Our police liaison officers who we rely on
27 heavily, especially when it comes to prostitution and stuff
28 like that, who give the police the local knowledge about
29 what is going on, nothing seems to be happening.

30
31 I could tell you now, and Kevin Humphries was saying
32 he was at Bourke and Walgett, five or six kids around a
33 party. How close was the nearest gambling school? Police
34 allow illegal gambling to go on in Aboriginal communities
35 all the time. You have got illegal bingo, have got illegal
36 two-up. Nothing is policed. You see most of these kids
37 are at risk, most of the kids who actually go into
38 prostitution, a high percentage are actually attending
39 these places, yet the police still continue to let this
40 illegal gambling go on.

41
42 THE COMMISSIONER: Okay, I think we understand the points
43 you make and I think your observations will be taken note
44 of by those who are present. Did you want to say
45 something.

46
47 MS DILLON: I am Meryl Dillon. I am a councillor on the

1 Moree Shire Plains Council; I am the chairperson of the
2 Moree Family Day Care; I am a committee member of the Miyay
3 Birray Youth Service; I am a committee member of Roy Thorne
4 D&A Service - I am trying to think what other ones might
5 actually be relevant to here today.
6

7 I am fairly well involved in a whole lot of community
8 services but I am not involved as a practitioner. I am
9 involved at the level of the governance level and I didn't
10 actually want to make a submission here today. I felt that
11 I should come along and listen and make sure that the
12 organisations that I am involved in do actually make a
13 written submission to raise the issues that they felt were
14 relevant.
15

16 I am really sorry that I only found out about you
17 coming today in the newspaper last night and it has been
18 very difficult to even kind of check out all the terms of
19 reference and things like that.
20

21 One thing I would actually say that may be relevant,
22 and you may correct me if it isn't, is that one of the
23 concerns that we have had through our family day care
24 service is the fact that we provide obviously child care.
25 We must register our carers. We then monitor our carers to
26 make sure that they are adhering to the regulations.
27

28 One of our issues is that if we deregister a carer,
29 and it is usually pretty serious stuff why we would
30 deregister a carer, there is no record of that and no
31 prohibition that if someone is deregistered from our
32 service they can then go and operate under a different
33 service or set up on their own, and it concerns us, as I
34 said that, that we do deregister on very limited occasions,
35 they are very, very rare, and so therefore it is a pretty
36 serious issue, but then they can actually move to another
37 service or operate on their own. And that would concern
38 me, in particular in relation to child protection issues
39 and things like that.
40

41 THE COMMISSIONER: Can I just deal with that because, as
42 you know people, who work with children in paid employment
43 do have to have the working with children check which is
44 conducted by the Children's Commission and that commission
45 can deregister itself people and they then have a right of
46 appeal, if need be, to the Administrative Decisions
47 Tribunal.

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There are other remedies which are available, although they are probably not applicable in your case unless it is found that a person working with you has had a previous history of sexual assault convictions, in which case they are prohibited from working anyway and they have a separate right of appeal to the Industrial Relations Commission.

But I am not sure what you do, if you do deregister someone, is it just so far as you are concerned off your books and do you notify the Children's Commission when you do that.

MS DILLON: No, we have actually been through the ADT in relation to one deregistration. We did settle outside of that. But, no, they are not usually criminal offences that they are deregistered for but they do relate to obviously the care of children and the issues that are required under the regs and there is no record, or any register so to speak, of people who have been deregistered for one reason or another.

THE COMMISSIONER: Thank you for that. I think there is someone down the back who wanted to speak.

[REDACTED]: [REDACTED]. I just want to talk about, I am sorry, I should have said something about this earlier, but there is no support group here for carers. I have asked, like in the earlier years, about a support group but we are not allowed to know who the other carers are. I don't know, it must be a policy or something, but you would think that, because we all know each other, that we should be able to get together and support each other through thick and thin. Do you know the AbSec down in Sydney?

THE COMMISSIONER: We have spoken to them.

[REDACTED]: Well, they were going to have a meeting this afternoon around at the Benevolent Society's hall, but because they won't give the names out of the carers up here, that is why you haven't got carers in this place this morning. I would say that is why, because DoCS will not give anyone, give me or any other carer, who else is caring. So there is no support group. There are support groups all around this state but Moree has not got one and it is because they will not let us know who the other carers are.

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THE COMMISSIONER: There is certainly no reason why you should not meet informally if you so want and, as you say, there are some foster carers associations that will provide support. But thank you for what you have told us, we will certainly look at that because clearly it is important for you to get support. Some of these problems are common problems and, if you can get someone else's advice, that will help you, it might point you in the right direction, so I think it is a very important point you have made, thank you.

MS DILLON: I just need to clarify the workers at Miyay Birray. There are actually two full-time workers and one part-time. I just thought for the record it should be straight.

THE COMMISSIONER: Anybody else want to say something?

MS DUNCAN: Judy is my name. I am employed by Gunnedah Shire Council and I have basically been working in this community since 1982. I have been in my current position since 1995, so I have been with ACSAT and DoCS. In this current position there are just a few things I have been taking some notes of this morning, but I have no faith in DoCS at the moment. I would like to think that we would have a good working relationship, but just in my dealings with them in the last several years, but, yes.

THE COMMISSIONER: What is your present position?

MS DUNCAN I am case manager with the Community Options project, working with people with disabilities and their carers. I have a number of families that do have children with disabilities and there have also been child protection issues where I made notifications and it actually took DoCS two years on a case notified in 1994, and I believe they got out in 2006, didn't even get into the household, but my concerns were then that the family was then actually living in squalor - I am shaking a little bit, I am sorry - but it took them two years. Like, I am actually doing a home visit on this particular family again and it looks like another notification will be made, but DoCS didn't even get into the home, and that is where they needed to get into, into the home, to find out what the issues were.

Another incident was where a two-year-old autistic

1 child was left on their own in their home while the mother
2 and the DoCS but DoCS felt that was okay, to leave an
3 autistic child on his own. Numerous notifications have
4 been made but no feedback.
5

6 In the last 13 years that I have been with this
7 organisation I have been called back to two case management
8 meetings that they have called. One particular meeting I
9 walked out and happened to do all the responsibility. I
10 thought they were the case managers. It is just like, I
11 mean, notifications where there are families with children
12 with disabilities and children with not disabilities where
13 we have made notifications, the department has come out and
14 just wanted to attend to the person without the disability
15 and not address the actual notification in relation to the
16 children with the disability.
17

18 So, I am not happy. I am quite happy to tell them to
19 their face that I am not happy and that I don't think they
20 are doing their jobs.
21

22 THE COMMISSIONER: Thank you very much. Anybody else want
23 to say something?
24

25 MR TONY BAXTER-TOMKINS: Thank you, my name is Tony
26 Baxter-Tomkins from Moree Shire Plains Council. We have
27 heard a lot about the police this morning and I would like
28 to point out that council is working very closely with the
29 police as obviously we are as interested in child safety as
30 anyone else.
31

32 The police and council have been working to try and
33 get the Parental Responsibility Act reenacted in Moree. I
34 have spoken to the Attorney-General's Department and they
35 are not keen on the idea. They have been putting us off
36 for some years now.
37

38 Finally I spoke to one of the officers and he told me
39 that the Attorney-General's Department, although the
40 provisions were there, were not keen on the idea and,
41 indeed, when Orange closed down that hopefully that was
42 going to be the last one. That does not help the police.
43 It does not help us. That act did assist young people in
44 being transported home, being transported to a safe area,
45 and that provision is now no longer open to us and
46 certainly the police.
47

1 The other problem with that was in part of council's
2 submission to the Attorney-General's Department they spoke
3 of not having a safe house in Moree, which indeed we don't
4 have, and we tried to explain, "Well, young people were
5 taken home and if they didn't want to go home they went to
6 extended family or friends". That wasn't good enough and
7 approaches were made to DoCS to try and have a safe house
8 provided in Moree and that hasn't reached fruition.

9
10 Moree Council is of the opinion that we do need that
11 act reinstated here and we are having difficulties doing
12 that simply because we don't have the facilities available.

13
14 THE COMMISSIONER: Would the council be able to provide
15 accommodation or facilitate the creation of a safe house.

16
17 MR BAXTER-TOMKINS: Sir, I can't answer that. I am an
18 employee of council. That would be a matter for council.
19 However, money is always an issue and --

20
21 THE COMMISSIONER: How many kids are we talking about who
22 might fall within the ambit of the act?

23
24 MR BAXTER-TOMKINS: That is quite right. It varies all the
25 time. The act has been used where young people are deemed
26 to be, obviously you know, at risk or likely to get
27 themselves in trouble. That varies from time to time. If
28 we look after one person, that is very important.

29
30 THE COMMISSIONER: It certainly is a problem of
31 adolescents wandering around uncontrolled at night and
32 using drugs and alcohol and causing mischief. It's great
33 to be able to get them off the streets in one way or
34 another, but it is not an easy thing to do if they don't
35 cooperate, and you really can't lock them up. You do think
36 there is actually room for that legislation to be applied
37 again?

38
39 MR BAXTER-TOMKINS: I do, sir, yes. I think it's in the
40 best interests of a group of people, young people, who are
41 easily led, and I think that their safety, particularly at
42 night, is of the essence.

43
44 THE COMMISSIONER: Thank you for thank you. Any other
45 observations or comments?

46
47 ██████████: While we are here - ██████████ again from

1 the [REDACTED] Neighbourhood Centre, in for a penny, in for a
2 pound - most people in this room know about the kids
3 selling themselves and having sex on the highway. I
4 reported it here about two and a half years ago to a police
5 officer, about police officers here having sex with
6 underage kids, and when I brought it up, two of them were
7 transferred out and I believe there's two officers still
8 here. So I want to put that on the record as well.

9
10 THE COMMISSIONER: Obviously I don't want to you name them
11 here, but if you do have that information, you should
12 provide it to the police.

13
14 [REDACTED]: And investigate themselves?
15

16 THE COMMISSIONER: No, you don't have to do it. I'm
17 sorry, I should have gone go. If you have complaints of
18 that kind, there is a unit in Sydney, Professional
19 Standards Command, which deals with allegations of that
20 kind. So you don't have to report it locally, you can
21 report it there. Additionally, if you are not happy that,
22 or want to go independently entirely, you can go to the
23 Police Integrity Commission, which is in Sydney.
24

25 Clearly, you don't have to report concerns about [REDACTED]
26 police to the local station. It puts them in an invidious
27 situation and it's far better that you go to the
28 Professional Standards Command in Sydney or alternatively
29 to the Police Integrity Commission, that is, if you have
30 hard evidence along those lines.
31

32 Are there any other people who want to speak?
33

34 [REDACTED]: I've just thought of something else. If a
35 child is made a state ward and the magistrate or judge,
36 whatever, has given you until they are 18, tell me why DoCS
37 pushes them out at 15 to get on to a youth allowance and
38 let them think that they are their own bosses then and they
39 can do whatever they like?
40

41 THE COMMISSIONER: I don't know they do that universally,
42 but there are clearly very important things to be done to
43 encourage a young child to make the transition from care
44 into independent living. One of the things along those
45 lines, I suppose, is to become financially responsible.
46 This question of transition from care to independent living
47 is a very challenging but very important step for DoCS to

1 undertake, and there are strategies which, for example,
2 allow DoCS to support people, through education and so on,
3 to an age past 18.

4
5 The other thing which is very problematic, of course,
6 is keeping children once they get to 15 and 16 and so on to
7 remain at home or remain in care. They often want, through
8 peer pressure and so on, to move out. Sometimes they are
9 better off moving into independent living with other
10 people. So it's a case-by-case situation, I think. Again,
11 we are looking very carefully at this whole situation of
12 transition from care into adulthood and independent living,
13 because it's a big step to take and if you take a step the
14 wrong way, then you are almost certainly going to end up in
15 the criminal justice system.

16
17 [REDACTED]: It's happened.

18
19 THE COMMISSIONER: I know it's happened, and we are
20 looking at it very closely.

21
22 [REDACTED]: It's happened with two of my grandchildren.
23 They got pushed out early and thought that they were men
24 and women. I just think if they are made your ward until
25 they are 18, it should be kept there. At least someone is
26 looking over them, you know, and trying to put them on the
27 right track, instead of them going out there to find it.

28
29 THE COMMISSIONER: Thank you. We might take one more, if
30 there is one more person who wants to speak. If not, we
31 might bring this meeting to an end and thank you very much
32 for your assistance and for input this morning.

33
34 Just before we do go, however, could I indicate that
35 if anybody wants to contact us directly to make a
36 submission to us or to bring some matter to our attention
37 you want to be confidential, we will give you some details
38 to whom you can write. If you want to make it
39 confidential, simply say so and it will remain
40 confidential.

41
42 It was suggested that one of the agencies did want to
43 make a joint submission or had several agencies that might
44 be interested in a joint submission. We would very much
45 welcome that, if anybody is involved in providing any kind
46 of community care or support or assistance for kids who has
47 concerns about lack of services or ideas, please write to

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us. By all means, make a late submission, it's not too late to do so. Otherwise, thank you very much for your attendance this morning and for your views.

AT 11.40AM THE COMMISSION ADJOURNED ACCORDINGLY