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National Voice for our Children
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Productivity Commission Inquiry into Mental Health

5 April 2019

Submission

SNAICC-National Voice for our Children (SNAICC) is the national, non-government peak body for Aboriginal and Torres Strait Islander children. Two of our priority focus areas are: (1) improving the cultural safety and responsiveness of child protection systems and (2) strengthening the safety and well-being of our children raised within family and culture. As a result, this comment will focus on the mental health of our children who are in contact with child protection systems and what action can be taken to redress any adverse mental health outcomes. SNAICC has a broader interest in the inquiry and its potential to influence improvements in mental health services and outcomes for Aboriginal and Torres Strait Islander children and families, and hopes to contribute to the inquiry as it proceeds.

A 2017 youth mental health report reporting on the findings of a youth survey found that in 2016, 31.6 per cent of Aboriginal and Torres Strait Islander young people (aged between 15-19) surveyed met the criteria for a probable serious mental illness.[1] By contrast, 22.2 per cent of non-Indigenous respondents met the criteria for a probable serious mental illness.[2] Further, the report found that "Across the five year period, the likelihood of probable serious mental illness was found to be consistently and significantly higher among Aboriginal and Torres Strait Islander young people compared to non-Aboriginal or Torres Strait Islander young people."[3] Further, suicide was the leading cause of death for Aboriginal and Torres Strait Islander young people between the ages of 15-24 in 2017.[4]

Current research reveals a link between disruptions to cultural continuity and loss of culture and Indigenous youth suicides.[5] Aboriginal and Torres Strait Islander children are now 11 times more likely to be removed from their families and placed in out-of-home care,[6] leading

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[1]Mission Australia, *Youth Mental Health Report: Youth Survey 2012-17*, p 5, retrieved 3 April 2019 from https://blackdoginstitute.org.au/docs/default-source/research/evidence-and-policy-section/2017-youth-mental-health-report_mission-australia-and-black-dog-institute.pdf?sfvrsn=6.
[2]Ibid.
[3]Ibid.
[4]Australian Bureau of Statistics, *Causes of Death in Australia 2017*, retrieved 3 April 2019 from https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/3303.0~2017~Main%20Features~Intentional%20self-harm%20in%20Aboriginal%20and%20Torres%20Strait%20Islander%20people~10.
[5]Chandler, M. J. & Lalonde, C. E. (2008). *Cultural Continuity as a Protective Factor against Suicide in First Nations Youth. Horizons --A Special Issue on Aboriginal Youth, Hope or Heartbreak: Aboriginal Youth and Canada's Future*. 10(1), 68-72.
[6]SNAICC, *Media Release 30 January 2019 – Fourth Action Plan an opportunity to address the rise in over-representation of Aboriginal and Torres Strait Islander children in out-of-home care*, retrieved 3 April 2019 from https://www.snaicc.org.au/media-release-30-january-2019-fourth-action-plan-an-

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to disconnection from family, community and culture. In addition, at 30 June 2018, just 52.9 per cent of Aboriginal and Torres Strait Islander children in out-of-home care were placed with relatives/kin.[7] This figure may in fact be even lower as commonly a wide definition of "kin" has been adopted by statutory agencies to identify placements for children "without meaningful mapping, identification, support and enabling of family members who have a legitimate cultural connection to the child."[8]

As the *National Framework for Protection Australia's Children* explains:

> Maintaining connection to family, community and culture is essential within a framework that respects the physical, mental and emotional security of the child. This is particularly important in light of the historical experiences that Aboriginal families have had with child protection agencies.[9]

International and Australian evidence has also strongly supported the importance of Indigenous participation for positive outcomes in service delivery for Indigenous children and families. In the United States, studies indicate that the best outcomes in community well-being and development for Indigenous peoples are achieved when those peoples have control over their own lives, and are empowered to respond to and address the problems facing their own communities.[10] Canadian research has shown a direct correlation between increased Indigenous community-control of services and improved health outcomes for Indigenous peoples.[11]

The evidence regarding the negative impacts of child protection intervention on mental health and the positive impacts of participatory community driven responses indicate that solutions to redress the adverse mental health outcomes of Aboriginal and Torres Strait Islander children and young people caught up in the child protection system should focus on: preventing children from being removed in the first place; reunifying children with their families if they are removed; ensuring that while children are in out-of-home care, that they are placed in culturally connected and stable placements with kin; and ensuring that children and their families can participate in all decisions that affect their lives. The solutions should also focus on providing trauma-informed therapeutic supports to Aboriginal and Torres Strait

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opportunity-to-address-the-rise-in-over-representation-of-aboriginal-and-torres-strait-islander-children-in-out-of-home-care/.

[7] Report on Government Services (2019), Chapter 16, p 20 <https://www.pc.gov.au/research/ongoing/report-on-government-services/2019/community-services/child-protection/rogs-2019-partf-chapter16.pdf>.

[8] QATSICPP, *Position Statement for Aboriginal Kinship Care* (2018) p 7 <https://www.qatsicpp.com.au/images/CPP-POSITION-STATEMENT-KINSHIP-BK.pdf>.

[9] *National Framework for Protecting Australia's Children 2009-2020*, p. 28.

[10] Cornell, S., and Taylor J. (2000). *Sovereignty, Devolution, and the Future of Tribal-State Relations.* Cambridge: Harvard University, pp6-7.

[11] Lavoie, J. et al (2010). *Have investments in on-reserve health services and initiatives promoting community control improved First Nations' health in Manitoba?,* Social Science and Medicine, 71(4), August, 717.

Islander children who are impacted by both the individual trauma of child neglect and abuse, and the communal trauma of Aboriginal and Torres Strait Islander societies impacted by discriminatory policies and practices as well as entrenched poverty and disadvantage.

Specific evidence-based approaches to child protection that would help achieve positive mental health outcomes for our children and young people include:

- Ensuring children and families who are at risk of entering the child protection system have access to quality, culturally safe, trauma-informed early intervention and prevention services, in particular, access to services provided by Aboriginal and Torres Strait Islander community-controlled organisations (ACCOs). This will reduce the likelihood of children being removed from their families and experiencing disconnection from family, community and culture.
- Finding stable and culturally connected placements at the top end of the Aboriginal and Torres Strait Islander Child Placement Principle (ATSICPP) placement hierarchy. Family finding must be done in consultation with the child, their family and others with cultural authority for the child.
- Ensuring that children and their families participate in all child protection decision-making through processes such as Aboriginal and Torres Strait Islander family-led decision-making.
- Ensuring all children in out-of-home care have quality, detailed cultural plans that are implemented, to ensure that children remain connected when in care.
- Ensuring culturally safe supports are provided to families so that they can make the changes necessary to have their children returned to them.
- Ensuring that all states and territories embed all five elements of the ATSICPP in legislation, policy, programs, processes and practice, and in accordance with SNAICC's best practice guides:

    o *Understanding and Applying the Aboriginal and Torres Strait Islander Child Placement Principle – A Resource for Legislation, Policy, and Program Development*
    o *The Aboriginal and Torres Strait Islander Child Placement Principle: A Guide to Support Implementation*

In addition to the negative mental health impacts that child protection intervention can have on children, it is important to redress parental mental illness, particularly untreated mental illness, that can adversely impact on the quality and consistency of care provided to children,[12] potentially leading to child removals. For Aboriginal and Torres Strait Islander people, colonisation has had a profound impact on mental health and wellbeing.[13] According

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[12]Australian Institute of Family Studies [2010]. Issues for the safety and wellbeing of children in families with multiple and complex problems: The co-occurrence of domestic violence, parental substance misuse, and mental health problems, retrieved 5 April 2019 from
https://aifs.gov.au/cfca/sites/default/files/publication-documents/issues33.pdf.
[13]Aboriginal and Torres Strait Islander Healing Foundation. (2013). *Growing our children up strong and deadly: Healing for children and young people.*

to the 2014-15 National Health Survey, Aboriginal and Torres Strait Islander people were over twice as likely to experience high or very high levels of psychological distress than non-Indigenous people.[14] Despite experiencing higher rates of psychological distress, research indicates that Aboriginal and Torres Strait Islander people commonly report barriers in accessing culturally safe and effective mental health services.[15] It is clear that reforms are necessary to ensure Aboriginal and Torres Strait Islander parents have access to culturally safe mental health support services that support them to look after their mental health and safely care for their children.

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[14]Steering Committee for the Review of Government Service Provision (2018). *Report on Government Services 2018.* Canberra: Productivity Commission.

[15]Australian Institute of Family Studies. [2014]. Effective strategies to strengthen the mental health and wellbeing of Aboriginal and Torres Strait Islander people, retrieved 5 April 2019 from https://www.aihw.gov.au/getmedia/6d50a4d2-d4da-4c53-8aeb-9ec22b856dc5/ctgc-ip12-4nov2014.pdf.aspx?inline=true.