

# Yarra Drug and Health Forum Annual Meeting

Thursday March 31st  
5.30pm to 7.30pm

The Reading Room  
Fitzroy Town Hall  
201 Napier Street (corner of Condell Street)  
Fitzroy

The fallout for children when family members misuse drugs & alcohol

First, I would like to acknowledge the traditional owners of the land, the Kulin Nation, and pay my respects to their elders, both past and present and any other elders here today.

I would like to thank you for inviting me here today to speak on a topic that is very dear to my heart - how children can be the innocent victims when family members misuse drugs and alcohol.

How many times have we all heard the phrase *Children, the innocent victims?* We hear this in the press about natural disasters, war and conflict but how often do we really see the hidden cost of chronic neglect on children

who live with parents who misuse drugs and alcohol and truly see them as the innocent victim in need of meaningful assistance and protection?

I am sure you all agree that while children are our greatest natural resource they are also the most vulnerable members of our society – in particular those children who have been let down by their families and their community. All too often we witness the inability of our service system to stop the intergenerational cycle of abuse, neglect and substance misuse.

But before I talk in detail about these vulnerable children and the impact of harm on them, I thought I would start by giving you some information about my role and what my office does.

I have been working with vulnerable children and young people for almost 35 years and I know many of you here today. I started off as Victoria's first youth outreach

worker in West Heidelberg where I worked for about 10 years, before going to the Brosnan Centre, which works with young people exiting the juvenile justice and adult prison systems.

I spent 20 years as a community member of the Youth Parole Board and was the CEO of Jesuit Social Services before becoming Victoria's first Child Safety Commissioner in 2005.

Often, coming before the YPB were the children of the children that I had worked with at West Heidelberg and the Brosnan Centre. This makes me realise, sadly, just how much of my working life has been restricted to the bubble of "service provision" despite trying desperately, as we all do, to effect real change in prevention, or providing channels that assist our clients to move forward from social disadvantage

I relish my job and feel incredibly privileged every day to be in a position where I can make a difference. But it is a

position that took a long time to get too, and has involved a great deal of learning along the way. I would have to say that I learnt something from every person that I ever worked with and that all these experiences have come together to inform my views and the way I undertake my role.

I have come to understand that the people are not the problem, the problem is the problem. The people we work with, in my case now, children of the system, are actually experts. NOT to listen to them is the mistake WE often make.

My role as the Child Safety Commissioner was created by the *Child Safety and Wellbeing Act 2005* and it covers a range of functions.

- Listening to children and their families
- Providing the Government with information about child safety matters
- Supporting parents and organisations to be child-safe

- Encouraging the participation of children in decisions about their lives
- Monitoring the quality of care provided for children, who are unable to live at home for various periods of time
- As part of ongoing service improvement, undertake inquiries in relation to children who have died and who were known to child protection and undertake inquiries as requested by the Minister
- Reviewing how the Working with Children Act 2005 is operating each year. I also have a role to help inform and educate the community about the WWC Act and where it fits within the government's strategy to protect our most vulnerable – it's children.

As you all know there is a new government in place in Victoria , and some of this could change. I know they have plans for making my office more independent. This can only be positive as we further develop a more

accountable system that seeks to enhance services at every opportunity.

It is folly to allow Government Departments to audit themselves, we all operate more effectively when we leave ourselves open for client focused scrutiny.

My office is a relatively small one, with about 28 staff. I am lucky to be surrounded by a group of staff who are also passionate about promoting the safety and wellbeing of children. We are small, but increasingly, a force to be reckoned with. I like to think that we punch above our weight!

But now let's get back to why it is important to keep children safe and free from harm and trauma.

As I previously mentioned, in Australia, I think many people consider "trauma" to be something that we see as occurring in other countries, or as an outcome of disaster – such as in the 2009 bushfires, more recently the floods

and of course some of the natural and man-made disasters that are shaking the globe.

In reality though, Victoria has tens of thousands of traumatised children – children living in violent families, children who are homeless, and children who have experienced abuse and neglect.

Many of these children are living with, or have lived with, parents whose capacity to love and care for them is severely hampered by their drug and alcohol use.

This is not a blame game, it's a fact. I'm not the Commissioner for users or parents or systems, my role is to consider the circumstances of children within these dynamics. They are the most innocent and vulnerable of all humans.

Most of the children and young people my staff and I meet, have experienced traumatic times and events, often beyond the understanding of most of us - and it is

these experiences, which deeply affect how they behave, and how they interact with others and their developmental capacity.

While some children do quite well in spite of adverse and traumatic experiences while growing up, far too many end up in our Child Protection, Juvenile Justice, Mental Health and Drug and Alcohol systems, eventually ending in the adult equivalent of these systems..... that's if they are lucky and have survived.

**Of the child death inquiries undertaken between 1996 - 2000 19 young people died from using intravenous drugs, inhalants, methadone toxicity and poly-drug use.**

As a first step, it is useful for us all to better understand how trauma and disrupted attachment can lead to so many difficulties in life.

If we better understand this, we can all work better together to provide a response to children who have experienced trauma in their lives.

It can also help us understand the developmental delays many of these vulnerable young people will experience.

For many of us, it can be very difficult to understand and deal with children who struggle to respond to limits and boundaries, are unable to control their responses, do not have much empathy for themselves or others, seem not to understand right from wrong, and who have few if any skills in understanding and responding to the thoughts, feelings and actions of others.

These children find relationships difficult, they struggle to trust adults or authority figures, and have little desire to please the adult world.

Children who have been abused and neglected will often have had many different experiences of adversity - their

infancy may have been insecure with harsh or neglectful parenting - they may not have had a loving attachment relationship in which they were the apple of their parent's eye.

The neglect in some cases, may have been so severe, as to limit brain growth or result in learning difficulties.

Through this, many children build up a sense of 'unworthiness'. They may not have learnt to adequately regulate their emotions and reactions, or to develop self control. When it came time to learning about the limits and boundaries of appropriate behaviour, they may have been overly shamed or under socialised, leading to profound shame about themselves, but little shame about their actions. They may have also not have developed much capacity to 'read' others, and so they misunderstood social cues and social relationships. All of this may have affected their capacity to empathise with others.

Understanding the complex interplay of abuse, neglect and other trauma, can assist us to see beyond the disturbed behaviours of such young people, and empathise with the lonely, frightened and humiliated child within.

It is heartbreaking to sit with a child who holds no hope for their future, does not experience joy, who sees adults as untrustworthy and harmful, who self medicates their way through pain or self harms to confirm to themselves that they exist or are so wounded that they want to die.

To further illustrate this, as part of my role, I receive the most serious of incident reports concerning children living in out of home care – Category Once incidents. Let me tell you, it can be a chilling experience to read these as they tell the story of young people's lives escalating out of control and the inability of the current service system to meaningfully help them.

My office recently pulled together an overview of the incidents that occurred over the last year, and the overwhelming theme was young people crying out for help.

There were incidents of young people going out of their way to find their residential staff member to let them know that they were leaving the unit with the intention of killing themselves, then taking an overdose, but texting the staff where they can be found.

Client's texting co-residents in the room next-door at the resi unit to let them know that they had just taken an overdose.

Self harm and drug and alcohol use following closely behind the client being sexual assaulted.

The list goes on.

As you will have not doubt heard, the Premier launched the ***Protecting Victoria's Vulnerable Children Inquiry*** which will look into and develop recommendations to reduce the incidence and negative impact of child neglect and abuse in Victoria. The Inquiry Panel will provide a report to the Minister for Community Services by 4 November 2011 and the report will later tabled in Parliament.

This inquiry is one vehicle that I intend to use to propose solutions to improve services to this states vulnerable children and I urge all services to do the same. Government needs to hear the concerns that the current Child Protection system is in vital need of improvement but it also needs to receive the wisdom and insight of people working in the sector as to how to improve it – what will make a difference.

Could I be so bold as to preempt what some in the drug and alcohol sector may suggest –

- that we must see a greater focus on children and young people in drug and alcohol policy frameworks and funding
- that prevention requires a greater focus (why do we wait until the child is harmed when we know the family is in strife)
- when kids are at the “pointy end” they need therapeutic treatment, not a bed.
- and, children who find themselves in systems such as Child Protection, Youth Justice or out-of-home care, should receive “positive discrimination”, a “gold card” similar to those of Veteran status, so that they can find their way through systems such as health, education, housing and social services.

Not that I want to put word in your mouth but I understand that submissions will be received until 29 April 2011!

I believe that Drug and Alcohol Services can play a vital role in assisting Child Protection to promote the safety of

children, through proactively identifying the risk factors at play in regard to the parental capacity of the adults they work with.

We know from our work that drug and alcohol use are among a number of factors that can affect a parent's practical skills, perceptions, focus on basic needs, emotional control, judgement, child maltreatment, and attachment to and supervision of their child.

Drug and Alcohol Services have a great deal to offer Child and Family Services in terms of sharing their knowledge of the way in which pressure and the realities of life impact on those adults who use drugs and alcohol.

Rarely have I seen a family in which drug and alcohol use is present have I not seen associated child protection concerns.

Although the adult may be the "client" of a drug and alcohol service, as a broad society we need to reaffirm

that the best interests and needs of a child must trump all other needs. This means that we must overcome the obstacles to sharing information and work together to support and sustain a family across all aspects of their lives. These families are complex and difficult to work with but as a sector we must rise to the challenge and build our capacity to do better.

In 2006 my office published a *Child Death Group Analysis: Effective responses to chronic neglect*. Although a few years old now, I believe this report shines a spotlight on some of the critical issues that continue to occur when working with high risk families.

Of the 10 child deaths that were reviewed, there were only a small number of adult-focused services involved, such as adult mental health and drug and alcohol services.

This was surprising given the number of families where the parents had one or more of these issues and that 7

out of the 10 children were under one year of age at the time of their death.

The implication of this finding is the importance of the balance workers must strike in understanding the needs of the child together with the needs of the adult family member if they are to effectively assess and enhance the parents' capacity to meet the needs of the child.

A further alarming finding was the apparent lack of understanding of the impact neglect has on children. Frequently the impact of neglect on children appeared to be minimised by professionals focusing on their role with the parent.

This finding illustrates the importance of the service system sharing the responsibility for the wellbeing of the child. Although Child Protection bears the ultimate responsibility for the safety of the child, services which are collaboratively working together can enhance the

child's welfare and meet the multiple needs of these children and their parents.

I would like to finish with a particularly poignant quote from a resource developed by my office – *From Isolation to connection* – which reminds me why I do the work I do, why I won't stop flying the flag for vulnerable children and why we all must work together to meet the best interests of the child.

*"The extremity of their behaviour, the wildness of their rage, the force of the fury we see on the outside is only a dim echo of the fear, sadness, pain, loneliness and loss they feel on the inside."*

Thank you