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Queensland Child Protection Commission of Inquiry

Submission by Multicultural Development
Association Inc.

Community Advocacy and Social Policy

September 2012

About the Multicultural Development Association

The Multicultural Development Association (MDA) is an independent, non-government, settlement organisation committed to achieving the best settlement outcomes for our clients and to working actively to promote multiculturalism. In 2011- 2012 MDA welcomed a total of 2,438 clients and the Brisbane Multicultural Centre hosted social inclusion activities for a further 1,500 people. The new arrivals – refugees support team worked with 1,298 people of 77 different cultural identities over 2011-2012. MDA Case Managers had almost 17,000 interactions with their clients over this financial year.

Key issues and recommendations

This submission is informed by:

- MDA's direct settlement of, and work with, refugee and migrant families
- Our project work and engagement with families on family support issues
- Recent and key reports published on child protection and cultural issues in Queensland and Australia (1; 2)

This submission presents a summary of the key issues and recommendations. Direct engagement with refugee and culturally and linguistically diverse (CALD) background communities would greatly benefit and inform the Commission of Inquiry. There are a range of cultural and settlement issues that impact on interactions between Child Safety Services and many CALD families.

SUMMARY OF RECOMMENDATIONS

1. Pool multicultural expertise into a multicultural services response team within Child Safety Services
2. Investment in and implementation of early intervention and prevention strategies using culturally tailored approaches that aim to prevent engagement with the child safety system
3. Increase the cultural diversity of Child Safety Services staff and introduce bicultural support and liaison workers
4. The routine and mandatory collection of cultural and linguistic diversity data within Child Safety Services

One of the fundamental issues that underpins most interactions between CALD families and Child Safety Services is that many refugee and CALD families do not understand what is required of them as parents in Australia, and Child Safety Services lack cultural understanding and awareness.

KEY ISSUE 1: LACK OF CULTURAL COMPETENCY OR RESPONSIVENESS IN THE CHILD PROTECTION SYSTEM

Most of the detrimental and adverse encounters with the child safety system experienced by refugee and migrant families have resulted from a system that lacks cultural responsiveness or competence. The following examples highlight this lack of cultural responsiveness in the system and have been experienced by MDA clients and observed by our staff:

- Lack of awareness by Child Safety Officers of cultural differences in parenting and parenting responsibilities have led to interventions that could have been avoided with appropriate education and support.
- There is a lack of awareness among refugee communities and families of why common parenting practices such as physically punishing children and leaving older children to supervise younger children are not considered appropriate in Australia. Child Safety Officers may not be aware of this dynamic and consequently appropriate responses such as education and support are not provided.
- Failure to consider the ramifications of the removal of children in the broader settlement context of the family.
- Intervention on the basis of minor conduct - perceived neglect, minor conduct and lack of awareness over child rearing practices that are culturally based.
- Unavailability of formalised kinship care arrangements to refugee and migrant communities (as are rightly available to Aboriginal and Torres Strait Islander families)
- Unavailability of culturally tailored family support and parenting programs and lack of transcultural workers to provide cultural support.

'Cultural competence' is a complex issue that requires full exploration by the child protection system. There is a substantial body of literature on 'cultural competence' and this should be reviewed and applied to Queensland's child safety system. What do the key elements of a culturally competent child safety system look like? This was the approach taken by Queensland Health and Queensland Police, who established dedicated cultural units to grapple with the issue of cultural competence in their respective service delivery. Significant bodies of work were completed such as the Queensland Health Cultural Competency Framework which identifies eight key action areas that require activity if the Department is to improve its cultural competence (see http://www.health.qld.gov.au/multicultural/contact_us/framework.asp). The primary role of the Multicultural health unit was to drive implementation activities across the department in the eight action areas to improve organisational and staff cultural competence.

RECOMMENDATION: Pool multicultural expertise into a multicultural services response team within Child Safety Services.

This team could be modelled on the Cultural Advisory Unit (Queensland Police) or former Queensland Health Multicultural Services (Queensland Health). The team should drive improvements in cultural competence and must have a service delivery role, not a mere policy focus.

Examples of functions could include to:

- implement and drive cultural competency initiatives within the department
- deliver and advise on interpreting and translation services and culturally targeted communication strategies
- develop and provide training to Child Safety officers on culturally responsive practice
- develop strategies on building and retaining a culturally diverse workforce
- multicultural policy advice on child safety issues
- develop innovative culturally responsive practice and service models
- resource development for child safety staff and also for refugee and migrant communities

KEY ISSUE 2: THE NEED FOR CULTURALLY TAILORED EARLY INTERVENTION AND PREVENTION STRATEGIES, PARTICULARLY PARENTING SUPPORT

There is limited provision of education for parents and families through early intervention and prevention programs to newly arrived parents as well as families already engaged with Child Safety Services about the child protection system; domestic laws; parenting practices; roles and responsibilities and caring for children in Australia. Knowledge and understanding of these areas is essential to prevent, at the earliest stage possible, engagement of families in the child protection system. The need to have access to information and education about parenting and the child protection system in Australia was overwhelmingly the number one theme that came out of consultations with refugee and migrant leaders about child safety issues in a recent Queensland report (2).

Other areas that require targeting by early intervention and prevention programs include culturally tailored parenting support, family support services, and skills and support for young people to reduce intergenerational conflict.

RECOMMENDATION: Investment in and implementation of early intervention and prevention strategies using culturally tailored approaches that aim to prevent engagement with the child safety system.

Strategies could include:

- Resource development and culturally tailored dissemination and communication strategies to deliver the information on the child safety system
- There are examples of small, discreet programs that have already demonstrated good outcomes. These could be strengthened and replicated in areas of need in a more coordinated and

Case study

Amona is a mother of four children between 10 and 17. She has a long history of torture and trauma and attends counselling. She is on medication for anxiety.

Amona's two daughters were taken away from her by Child Safety services and are now living with another family. Amona was accused of violence towards her daughters. She denies that she hurts her children, and disciplines them in the only way she knows how.

She doesn't know why Child Safety is involved with her family, and if she will ever get her children back. She attended a meeting with Child Safety Services, but even though there was an interpreter, she still doesn't understand anything about the system.

This situation is causing her a great deal of stress and she feel very depressed. She doesn't want to leave the house as she feels like people are judging her for being a bad parent.

systematic way (for example Building Stronger Families Project by QPASTT, Safe Communities for Children Project by MDA, Families in Cultural Transition by FASSTT, Building Resilience in Transcultural Australians Program by QTMHC)

- Support for the establishment of culturally tailored parenting groups and mentoring arrangements within communities with high need.

KEY ISSUE 3: NEED FOR A CULTURALLY DIVERSE WORKFORCE

Under the Queensland Government Multicultural Policy there is a commitment to increase the number of people from culturally and linguistically diverse backgrounds employed in the Queensland Public Service through the ongoing implementation of diversity and equity strategies (3). Increasing the cultural diversity of Child Safety Services staff will increase the capacity of the Department to work with the increasing cultural diversity of the Queensland population.

In addition, it is understood that there are no bicultural liaison or cultural consultants within Child Safety Services to work alongside Child Safety Officers. This is a critical gap in service provision and undermines the ability to engage effectively with families from diverse backgrounds.

RECOMMENDATION: Increase the cultural diversity of Child Safety Services staff and introduce bicultural support and liaison workers

In addition to employing Child Safety Officers from diverse backgrounds, bicultural support and liaison officers should be employed. There are existing good models within Queensland Police (Police Liaison Officers), multicultural health workers (Queensland Health) and bilingual or cultural consultants (Queensland Health) who work on a sessional basis as and when required (see <http://www.health.qld.gov.au/pahospital/qtmhc/tccs.asp>). These good and cost effective models can be adapted to Child Safety Services.

KEY ISSUE 4: NEED FOR RELIABLE AND ACCURATE DATA ON REFUGEE AND MIGRANT CHILDREN IN THE CHILD PROTECTION SYSTEM

There is currently no accurate or reliable information or data about the cultural diversity of Child Safety Services clients (1; 2). This is a problem for planning, monitoring, investment and implementation and it should be noted that Queensland's cultural diversity is increasing. There is also a lack of research into the experiences of CALD families with the child safety system in Queensland.

RECOMMENDATION: The routine and mandatory collection of cultural and linguistic diversity data within Child Safety Services.

It is also recommended that the Department liaise with the Interdepartmental Working Group on Data under Multicultural Affairs Queensland to ensure that any new data collections are consistent with other data collections. MDA is also available to provide expert advice on which data indicators should be collected.

Data collection to capture cultural and linguistic diversity is guided by the Australian Bureau of Statistics (ABS) *Standards for Statistics on Cultural and Language Diversity*. The Standards identify a minimum data set that contains *four* variables or indicators: country of birth, main language other than English spoken at home, proficiency in spoken English and Indigenous status. The standard set contains an additional eight indicators: ancestry, country of birth of father, country of birth of

mother, first language spoken, languages spoken at home, main language spoken at home, religious affiliation, year of arrival in Australia. It is recommended that in addition to the indicators in the national standards, 'ethnicity' be collected.

MDA has identified that the current minimum data set is out dated (13 years old) and no longer captures the cultural diversity that is present in Australia's population. It should be noted that the ABS undertook a review of these Standards in late 2011. International evidence suggests that 'country of birth' cannot capture cultural diversity in a population where international migration is common (Bhopal, 2007; Ministry of Health, 2004), as is the case in Australia.

There is a preference internationally (in comparable countries to Australia) for the collection of 'ethnicity' as a primary indicator of cultural diversity. Ethnicity is a multifaceted quality that refers to the group to which people belong, and/or are perceived to belong, as a result of certain shared characteristics. Both the New Zealand and Australian definitions of ethnicity involve a social construct of group affiliation and identity and both are based on self-identification.

The advantages of using ethnicity include being able to capture the following groups:

- children born in Australia but brought up in a non-English speaking cultural environment;
- ethnic minorities who migrated from countries such as New Zealand, UK, and USA who affiliate with their cultural background and ethnicity; and
- ethnic minorities who can only be identified by ethnicity or sometimes language and are, effectively, stateless, for example refugees who were persecuted because of their ethnicity (e.g. Karen born in Thailand).

In Queensland, children from some of the most socially and economically disadvantaged populations cannot be captured by collecting country of birth or language spoken at home - refugee children are often born in a country different from their country of origin; and Pacific Islander, Maori and Australian South Sea Islander populations are also not captured by these indicators. The Pacific Islands and Maori populations in Queensland are very large and fast growing. Children from these communities are not captured because:

- Many are born either in Australia or New Zealand
- Many speak English at home

Refugee children are not captured because:

- many were born in a country different to their country of origin
- they may belong an ethnic minority which may be a flag indicating past persecution, but ethnic minority status may not be captured by language or country of birth indicators

In Queensland, the areas of the greatest urban social and economic disadvantage have growing refugee populations and large Pacific Islander and Maori populations. Australian South Sea Islander populations mainly live in regional areas and have a long history of social and economic disadvantage and the added complexity of 50 per cent of the population also having Aboriginal and Torres Strait Islander ancestry. Unless this is captured in Child Safety Services data, programs and initiatives are likely to remain poorly targeted as the cultural needs of these large populations remain unaddressed and the monitoring of programs and services will be incomplete.

Works Cited

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3. **Department of Communities.** A multicultural future for all of us - Queensland Government multicultural policy 2011. *Department of Aboriginal and Torres Strait Islander and Multicultural Affairs.* [Online] 2011. [Cited: May 28, 2012.]
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