

TRANSCRIPT OF PROCEEDINGS

April Lawrie, Commissioner for Aboriginal Children and Young People Denise Rieniets, Counsel Assisting

Hearing for the Inquiry into the application of the Aboriginal and Torres Strait Islander Child Placement Principle in the removal and placement of Aboriginal children in South Australia

Friday, 27 October 2023 at 2:00pm

Expert Witness:

• Shona Reid, Guardian for Children and Young People

Denise Rieniets, Counsel Assisting:

Good afternoon, Ms Reid. Welcome to the Inquiry being conducted by the Commissioner for Aboriginal Children and Young People into the Aboriginal Child Placement Principle in South Australia. Thank you for joining us.

Shona Reid:

No worries.

Counsel Assisting:

Before we start, I'll just ask Commissioner Lawrie to do a an Acknowledgement of Country.

Commissioner April Lawrie (Chair):

Thank you. I'd like to acknowledge that we are holding this meeting on Kaurna Country, pay my respects to Kaurna Elders past and present, and also those who are emerging. I also acknowledge the numerous Aboriginal families and their children who have made Kaurna Country their home. But I'd also like to acknowledge the the work in which you do that supports our Aboriginal children and young people, and I guess for all our Aboriginal children, no matter where they are in South

Australia, that I'd like to give acknowledgement to them and their families in the hope for a better future. Thank you.

Shona Reid:

Thanks April.

Counsel Assisting:

Ms Reid I'm just going to ask you to affirm your evidence, if that's all right with you, please.

Shona Reid:

Sure, sure.

Carla Ringvall, Assistant to Counsel Assisting:

So I'll just ask you to repeat after me please.

Shona Reid:

Yep.

Assistant to Counsel Assisting:

I solemnly affirm that the evidence I will give.

Shona Reid:

I solemnly affirm that the evidence I give.

Assistant to Counsel Assisting:

Will be the truth, the whole truth, and nothing but the truth.

Shona Reid:

Will be the truth, the whole truth, and nothing but the truth.

Assistant to Counsel Assisting:

Thank you. And if you could please stay your full name, your business address and your occupation, please.

Shona Reid:

Sure, it's Shona Eliza Reid. I'm at [address provided], and I'm the Guardian for Children and Young People. I'm also the Training Centre Visitor. I'm also the Child and Young Person Visitor. And I'm also the Youth Treatment Order Visitor.

Assistant to Counsel Assisting:

Thank you.

Counsel Assisting:

Thank you Ms Reid. Just as a way of of introduction, can I just ask you, Ms Reid, please to explain to us your role as Guardian is, please.

Shona Reid:

Sure thing. So my role, so just the Guardian mandate or all four which intersect with kids in care.

Counsel Assisting:

All four please.

Shona Reid:

Sure, my Guardian mandate I'm responsible for the monitoring the experiences of children and Page 2 of 18

young people under the, I suppose, under the guardianship of the Chief Executive for the Department for Child Protection, so my mandate starts when they are under that guardianship and it ceases upon the age, when they exit that order. So it's a very, you know, in accordance with the administrative order for those young people. I also have specifically have to pay attention, particularly in that mandate for, oh my gosh, where's it gone, for children with a disability under this mandate, children with a disability, for, specifically have to pay attention to them and if you give me 2 seconds, there's another specific functions I've got with regards to these young people, here it is, and children who are sexually abused in care. So they're the two specific focuses I have in that mandate. Under my Child and Young Person Visitor mandate, I have responsibility for children, young people again under the care, under guardianship of the Chief Executive. They are only in residential care settings, so that mandate specifically relates to residential care settings and I have specific responsibility to monitor or pay particular attention to children and young people with a disability and children and young people, and Aboriginal children and young people, so that mandate exclusively for residential care and children in that setting. For my Training Centre Visitor function, I'm responsible for oversight of the Department for Human Services and the operations of the youth justice facility in so Kurlana Tapa Youth Justice Centre, and particularly in relation to their time within that facility specifically, so I don't run off any custody order for them, I run specifically for that time in that centre. So I monitor their care, treatment and control in that centre and I pay specific attention to Aboriginal young children in that setting, also pay specific attention to children with a disability in that setting, and I also pay specific attention to children in care in that setting as well. So those three there. And for the Youth Treatment Order Visitor, so I that is a piece of legislation that is under the Controlled Substances Act and my provisions involve me, specifically for when children are detained on that order, on the youth treatment order and that that order is quite a difficult one, but that's when they force medical treatment for children under drug and or for drug use and I have to pay specific attention for children who are subject to those orders in a detention facility, for Aboriginal children and young people, for specific attention to children with a disability and specific attention to children who are also in care. Sorry.

Counsel Assisting:

Thank you. Thank you very much for that. Can I just show you for the transcript a document.

Shona Reid:

Yep, that would be my submission.

Counsel Assisting:

Thank you. Can you for the transcript tell us what that is, please.

Shona Reid:

Absolutely. That is the submission we provided to this Inquiry into the application of the Aboriginal Child Placement Principle, from myself to Commissioner Lawrie.

Counsel Assisting:

Thank you. Now I understand you intend speaking to that submission today.

Shona Reid:

Look, I'm happy, you've got it, and you've read it, so I'm happy to add to that, to be fair, or provide any clar, you know, clarity to that. So I I'm really I don't want to repeat myself over, you know, you've got the information there and it's in its fullness, but happy to go through anything that you

want further exploration about and I'll answer any other questions that you might have that you've had some discovery on on the way.

Counsel Assisting:

Thank you. One of the major themes of this is that in the Closing the Gap outcomes, outcome number 12 is that Aboriginal and Torres Strait Islander children are not to be overrepresented in the child protection system.

Shona Reid:

Mm hmm.

Counsel Assisting:

Can I ask you to speak from your experience as you're in your role as Guardian in this state of how this state is going in terms of meeting that outcome.

Shona Reid:

So I think in general we've been quite narrow in our, you know, in our use or engagement in the Closing the Gap theme, traditionally people go to target 12 with regards to over representation over representation of children in out of home care. And yes, we need to pay attention to that. It is increasing in this state more children are, children are coming into, you know DCP's care and it's not slowing down, particularly in in the residential care space is one that I'm paying particular attention to. What I think is important to think about in, in the fullness of Closing the Gap is that that's not the only target that I think we should be paying attention to with regards to children in care. I worry about when they're in care, how they access the fullness of their rights to education, how they access the fullness to their rights in healthcare, how they access so, so Closing the Gap needs to also drill down into those other target areas in the context of them being in out of home care, and I think that is a an overlooked feature that I'm hoping is addressed going forward and I know that that's what I'm been paying, hoping to pay attention to with the resources I have is to keep challenging that this is just about out of home care, it's not, it's about their wellbeing in care and ultimately that's what Closing the Gap is about, right? It's about us wanting to ensure that our children have the best possible opportunities in life and have access to everything they need. And being in care was supposed to, you know, the whole philosophy around not being in your nuclear family and being in either an extended family arrangement or or a or a out-of-home arrangement is that you will achieve that fullness. I'm not confident that that happens. And I think greater attention needs to be paid to children in out-of-home care, in meeting all the other targets that sit within Closing the Gap.

Counsel Assisting:

Thank you. From your experience, Ms Reid, how well do children in this state, particularly Aboriginal children in this state, because that's where the Inquiry is focused on, fare in out-of-home care.

Shona Reid:

That's a that's a tough one, right? Like, I think that's a hard question to answer in a simple, like it is very complex. I have seen situations where young people have thrived in, in out-of-home care. I've seen them thrive when kinship care absolutely, we know outcomes, you know, for me, I've observed children's outcomes and wellbeing outcomes have thrived in kinship care arrangements and kinship care arrangements that are supported. That is especially the case. I have seen children thrive in community-based placements. I have seen children thrive in non-Aboriginal placements as well, not to the same extent as I believe kinship care, but I have seen that and it is about the investment that's placed in those placements. What I can say is when children have, when culture is seen as a

protective factor, when it is seen as a strength-based factor, children thrive more so and I am a huge advocate for, not just personally, but I can see it in the cases that I work with, that culture is an integral part of children growing well and children not only growing well, but also reconciling the narrative that they have about why they're in care and how they are, I suppose, nurtured within their cultural setting for as a tool for them growing, growing and living well, as they exit care as well, so it is a fundamental piece for Aboriginal children to exit care well, to have access to culture, knowledge of culture so they can take that into their adulthood. I don't know if I went, I don't know if I went off topic.

Counsel Assisting:

Not at all, not at all. Thank you. And can I just take you back, you said, the best opportunities are when there's investment placed in the placements. Can you just elaborate on what what that investment is that you you're talking about?

Shona Reid:

Sure. So I think around making sure, so investment is obviously there's a financial investment that helps sustain the material needs for children, young people and families. Absolutely. So that's something that, you know when that is there, it makes the opportunity to sustain placements easier. I think the other investments are in, for instance, where there are needs for children and those needs are provided. Example, disability needs, we know that there is, it's already hard enough to track the disability numbers that these are not well kept numbers because they are, it's difficult, you can't you can't measure numbers just off of NDIS plans. Sometimes disabilities are unnoticed or go unnoticed for extended periods of time. So I can't give numbers on disabilities but when we identify disability needs for children and young people, Aboriginal children, young people in care, one of the things that I can see is when those services or those disability needs are met children start achieving and those placements are much more stable. Their, you know, their wellbeing is much better in those placements. Now the issue or the worry I have is that accessibility to disability services is something that is underwhelming, and I especially worry for our regional and remote areas where they are particularly vulnerable to fly in fly out services that are not consistent, that often, I suppose, leave families and children without the services they would have if they were in metropolitan areas. And that's not OK. And I think that when those, when, investment's just not about money, it's also about the human beings to do the job. That's why this is truly a shared effort and it goes across silos of government, it goes across jurisdictions, it goes across federal state areas. The simple fact is we need to invest in the whole of life opportunities for children and disability is something that does, or access to disability services is something that truly does worry me. Investment in other things like relationships. So when we invest in family relationships or and I'm talking about, you know, when you're in care, you know, one of the one of the top three calls to my call line, coming into my office is around sibling contact. So most often children, of the top three, especially even in this quarter, I think, I'll just say this quarter is the July to September quarter, 40% of my inquiries into this call line, particularly related to First Nations children and young people, and the third highest issue that they wanted to talk about was sibling and family contact. Now I think a big area for improvement and investment is the capacity to keep family relationships there for children, even if they're in kinship placements, we can't assume that those contact arrangements are happening or we can't sit here and make assumptions around whether they're, you know, it may be one family they're having contact not the other. Now one, it's really important because it helps build the narrative for that young person and that child around why they're in care, it help, they then also get to connect with other young people that have lived through similar situations as themselves. So it helps support them in their healing and also sharing a narrative together is a very healthy thing to do for kids and Page **5** of **18**

being able to have someone who understands your situation. I also think it's really important about when the children and young people leave care, if they don't have their sibling connections and don't have those relationships, this sets them up for significant complexities post 18 and that's where we, you know, we see children trying to reconnect or re-enter families that they haven't had contact with for significant, for many years, and that makes it very difficult not just for that young person singularly, but that family collective, and I think we need to invest in, not just for the time, invest in a way that just doesn't think about zero to 18. We need to invest in the children's experiences during that time, because what we do then will impact when they're 18, 25, 35 and 60. We don't ever have a projection around what we do when they're five and how that's going to affect them when they're 80. And I think that's a really important piece that we don't actually consider in in our care and investment.

Counsel Assisting:

Thank you. From your dealings with Aboriginal children in care, what's your experience of family scoping and how effective that's been done within the the Department?

Shona Reid:

Sure. So I understand and have been reported that there is a family scoping unit within Department for Child Protection. I have and and I obviously you know am supportive of any efforts that look at scoping family, because that's that's critical in being able to support children in whatever care arrangement they will go into and whether from investment or a practical level. My, one of my concerns that was raised with me last year, my first tenure was that the, that scoping for place, scoping for family wasn't happening for children and young people that were in care for some time. So it was one of these, one of the conversations I had was that they were looking to doing scoping for children who are newly, under new orders into the Department so they could find them for their first placement. So that was certainly something that was a conversation that I'd had between DP and the DCP executive and myself was around, you know, is that appropriate? Because we have. I'm also a fan of and and an advocate for, if we're able to return children to family, then we should be exploring that. So I did query why that was be, it was advised to me that they were, you know, yes, that was the case, but they had were relying on children's caseworkers and that local area who knew their community best to do that informal, oh, your lights went out there we go, to do that informal family scoping outside of, you know, as part of their general practice, not as a concerted effort at the start of an order. I am not so convinced that's the best way to go, I would think it should be done regularly. It should, we should be looking and evaluating and scoping family all the time. It should be something that is part of everyday practice. Not at, not not as an administrative process for a particular order. It is something, because it, because it's not just about finding people to place kids with or to place young people, children with, it is also about that investment piece, is that. And that's what we do as families that aren't in care, right, we we meet new family all the time, we're constantly on the lookout for who else is in our family network that we can bring into and embrace and learn from. You know, that's a part of what we are in the general community is we're constantly searching for family and and collecting family members, which is an actually a beautiful cultural thing that we do do. And I support that. It seems when you get into care, they do the initial scope and that's pretty much it. So I, I think there is much improvement to be had with regards to scoping family, that it is more than an administrative order task, that it is just good practice, that that happens on a regular basis and that children are participative in that process. So I don't think children are participative in that process. I think they sit there. I mean I asked, do you know, who your family are and I don't know any kid who's in who's been in a state of trauma then retraumatized when they're being removed is in any state of mind to sit there on one occasion to Page **6** of **18**

give advice who your family is. But I think there is, there has to be an inclusive way in which children can participate in exploring family. They need those skills as they get older. And I don't think it's necessary, you know, I think there's an opportunity to learn from community about how family scoping is done and it's not purely sitting there behind a desk and drawing a genogram. There is many ways to do family scoping and I think an Aboriginal community led model around how to scope respectfully, effectively and with dignity and humility, who are the, you know, who are within a child's family, and not only that, is usually they scope for mother, father, aunty, uncle, cousins. There are much more complexities for us in terms of who is seen, you know, family scoping around, who makes decisions, who has the call on cultural decisions, who are the people who make the decisions in the family but don't talk much. I think there has to be a broader thinking around what family scoping is because there's also situations I'm dealing with now where DCP have got themselves a little bit tangled up because they made decisions with people who are not the decision maker in the family, but according to, I suppose, a Western world and Western definition of family, they would be. But because decisions weren't kind of signed off or decided on or navigated with the right people, you know, care arrangements won't hold up and they don't hold up. And it's not just about making sure that the young person or child lives in the right place, it's also about there's a whole bunch of decisions that happen in that young person's life and the right people need to be assigned to those decisions and as advisors for those decisions. And I don't think that's done well enough and that's why things fall down behind the scenes. And people are, you know, the one that suffers at the end of the day is that young person.

Commissioner Lawrie:

Well, that whole thing with scoping Shona, do you think that the way in which the system approaches attachment and bonding and permanency planning poses an issue with the way in which the system should be responding to looking at continually the options of family scoping for family care for the, for these children?

Shona Reid:

I think the system fundamentally operates off of a non-Aboriginal framework. It does, undoubtedly, around what a family should look like, around what a family should behave like, around what, where risk is. I think all of that operates off a Western style model and until there is, and that then is also then reinforced within its culture of the organisation. So culture of DCP that's reinforced. And until, until we're able to successfully challenge that, and and that includes attachment theory, and that includes all of those fun, you know, all those fundamental pieces that I suppose scaffold that Western system. There needs to be a rethink around how that works for Aboriginal families and communities. So it's not as simple as here's a tool go and use it. There's underlying values that sit within an organisation and and it's and it's cyclical, you know, like, you know, you know the system operates off of this understanding and these values, and then those workers hold those values and then they reinforce those values and it just keeps going around and around and around until there's a circuit breaker in there around, actually, our system also has to recognise that this is, this is Aboriginal attachment theory and this is how it works in this context, and until there's a value placed on that by your predominantly white workforce, we're going to be in a situation where we're not going to interrupt that cycle. So I think there is fundamental and foundationally important questions we need to ask about how we think about care, how we think about risk, how we think about, you know what we see as, how, when when we get involved into a family's life and where are our baselines on that, so all thresholds I suppose, yeah. I think the other part is. Sorry I'm just looking at some notes here. I think we also, I mean there is a really, you talked about permanency planning April and you know the 2017 legislation really cemented in, you know, I suppose the Department's Page **7** of **18**

directions for permanency and that's always been in a really uncomfortable space for Aboriginal people in the conversations given our history around permanency and and adoption, and you know, even around the, you know, the missions and the boarding schools and and all those sorts of things. Well, the concept of permanency is a really uncomfortable one, and I think we need to think about what we mean by permanency, and I, you know, as a once again, it's been defined in a Western system around one place, one time with one group of people and that's, that is kind of significantly different from what I understand permanency to be from my own experience, but from a cultural context as well. You know, is permanency about one place, one family, one time, or is it about, you know, safety and security of a young person? And is it around, you know, their sense of self and where they belong? I think they're very the, conceptually, I think there's a difference between communities understanding around, or Aboriginal definition around what permanency might be to a non-Aboriginal definition of what permanency might be. I'm just going, I haven't got any theories on that, but I just from my experience and from the way children talk to us and the narrative they have with us and being in the sector for a long time, I think there's some questions and exploration that might need to happen around that.

Commissioner Lawrie:

Thank you.

Counsel Assisting:

Thank you. In terms of the placement principles being applied in in South Australia, you're visiting role is really only when children are in residential care, isn't it?

Shona Reid:

So that that's under that mandate, I have the right to go into, to visit residential care facilities, however, under my guardianship mandate, if a young person wants to meet with us, we have the capacity to go and meet with them wherever they may well be and talk with them and collect their views. We often do that, but it's usually McDonald's and it's usually in a park. It's certainly not, I don't have right of entry or anything like that, no.

Counsel Assisting:

Yep. With respect to residential care is it the case that children, in in particular, Aboriginal children placed into the residential care facilities in this state don't fare as well as the children you would see in kinship care placements and and in a more family-oriented placement?

Shona Reid:

Sure. I think I touched on that in our in our report, absolutely, there's some numbers in there I think give an indication around wellbeing. Look, I think overall from from all perspective, I think the general rule is children fare better in family type placements. Like that is, you know, residential care, you know, I from from my observations and from from what I see and what I do there there is a need I have to say, I do concede there is a need for residential care facilities in this sector. I think they need to be reserved for very specific reasons. There are instances where a family-based option is not available, whether that be through disability needs or whether there are highly intensive needs for young people that cannot be catered for in a family based environment. There are children and young people that have extreme behaviours that do not make it safe for them to be in a family-based environment. And in those situations, yes, a residential care facility probably is the safest place for them and the people around them and also people who are required to care for them. But on the whole, as a majority, I would say that residential care is not a preferred placement type, absolutely being in families is where children grow best, when they're in a place, in a placement with

their family, in a family environment that enables them to to receive all that investment that I talked about before, where culture is seen as a protective factor, not a risk factor, where they're allowed full expression of themselves, when they have agency over their care needs and care outcomes. Family based placements, absolutely, the closest possible to their nuclear family environment, absolutely, is the best place to go and we see great things in terms of children healing from trauma and children being able to exit care and participate fully in the environment around them.

Counsel Assisting:

Thank you. When you talk about children healing from trauma, we heard from Professor Leah Bromfield this morning who made the point that the further you get from the CBD of Adelaide, the less skilled and less available services for children in dealing with trauma are available to them. Have you seen any examples of that in in your contact with children in care?

Shona Reid:

So I can't talk to it like Professor Bromfield has. She's obviously had a bit more of a deep dive into that than I have. But what I can say is when I, when we have, working with children in regional remote areas and children in metropolitan areas, there is a consistent narrative that there are less, there are less accessible services and less reliable services to children and young people who need them. That's whether that's disability, whether that's therapeutic, whether that's trauma recovery, even even medical services, it is a consistent theme that the accessibility to such things reduces significantly the further you go out. And even then the system seems, and if we're talking about into our very, very remote areas, I think it's also fair to say that it gets complicated when we talk about cross jurisdictional access to services. So in Alice Springs or even in Victoria, the system around a young person living in care and approvals to cross borders or receive services in other states, the system seems to have a little bit of a heart attack and not able to cope and and the administrative barriers that sit to children crossing borders to access services, like it makes perfect sense for me if there's a young person in APY Lands that needs any sort of support, whether it's medical, therapeutic or disability-based supports that they access those from Alice Springs. Yet it is invariably administratively difficult to enable that to happen as simple as we would as parents, and we'd just drive across the border and book them in and get some services and drive home again. That seems to be a difficult thing to do when the state is the responsible guardian, and I think we need to start think about children's, instead of thinking about how to best meet the system's interests, we need to think about how we meet those children's interests above all.

Counsel Assisting:

Thank you. With respect to children's voices being heard, Shona, in in all aspects of being in the care system, but in particular about placement and connection with families, do children speak to you about that? About not being heard or or their voices being ignored?

Shona Reid:

Yeah. So the number one, can I just say overall from the call line into my office, the number one issue facing children and young people, were not feeling included in case planning decisions. So that is the primary calling factor into my office, and what they're wanting is for them to be a part of their bigger case, their case directions, absolute, their bigger stuff, so case directions, placements, who to have contact with, they want those decisions, but then also the little stuff, so little stuff like you know, they want to be able to have a lunch order at school or they're wanting to not buy the, you know, to go and buy clothes from a place other than Big W. So you know, like we see them as little things, but for kids who have no agency over their life, they're massive things. So I'm, so when we

talk about participation in decision making, it means, you know, as adults, we think, oh, yeah, the big picture stuff, can I also say that the little stuff is just as important and children feel like they don't have a decision in that either. So you know, I think that's important because that then shapes how they interact with the world later on in life. So if we don't enable children, to have a say in the smaller stuff when they're little, when it comes time to be an adult and make big decisions about life events, how are they going to have a schemata available to them, so a template in their head about how to participate in decisions post 18. So, you know, I think that's fundamental, small but fundamental piece of responsible child rearing that probably needs to be, have greater attention placed upon it.

Counsel Assisting:

Does that also extend to their experience of the the court making decisions about them?

Shona Reid:

So I don't get involved, I'm not involved in the court process, so I probably can't comment on that.

Counsel Assisting:

Right. OK. Thank you.

Commissioner Lawrie:

Yeah, Shona, I wanted to just revisit something in relation to your earlier comments about kids that you've seen in all different settings like family settings, how they were thriving, we're talking about Aboriginal children and young people here, and acknowledging that some thrive more than others and it really speaks to the point that I want to ask you the question about, particularly hearing from Dr Tracy Westerman yesterday about identity formation for Aboriginal children and young people and their experience in non-Aboriginal care. I guess the question to you is as as the Guardian, do you hear from children who are Aboriginal, who are in non-Aboriginal care and about their involvement, you know, whether it be about case planning, but also in the midst of case planning, the Aboriginal Cultural Identity Support Tool, as to whether they have a, say, a voice about their experience in in what the system is doing, whether it be through the foster care arrangement or the residential care arrangement, but their own cultural identity as an Aboriginal child in a non-Aboriginal care care setting?

Shona Reid:

Sure. So it's, there's a bit of mixture in all of that April to be fair. So I and I see good examples and not so good examples. So I see examples of children in non-Aboriginal family based care where those non-Aboriginal carers, or whatever, whether they be family or non-family, so I, you know, sometimes they're family from a non-Aboriginal parent, who make considerable effort to connect that young person and that child to their Aboriginal culture, and not just, you know, NAIDOC and reconciliation, that, you know, do family, you know, do family visits, who also have cousins and that sleep over on the weekends, and, you know, so multiple and creative ways. Most of the time it's about relationships and good relationships between those carers and family and investment has been done to do that. So that's another investment space is where there's good carer relations, carer community, family relationships. I've seen them when they've, I've also seen place placements where there's been a complete breakdown between the carers and family, and they get really icky and often children feel caught in the middle around their obligations, the sense of obligation which is to their foster carers and then sense of obligation to their family and loyalties seem to speak, and these are emotions, and they are big emotions for little people that aren't fair. And it's it's, you know, sometimes I, you know, I have done advocacy positions that have asked for, I suppose there

to be, to remind everybody that this is about the little one and not necessarily about the grown-ups around them and and talk with DCP around how they're going to manage this because they do need to manage those relationships between the care team and and the family, and ultimately that is least intrusive on that young person's, you know, young person's life. Because they shouldn't have to deal with those politics, the kids, that, they are just the kids, unfortunately and sometimes in the middle of everything. I also go to residential care placements that are both run by Aboriginal and non-Aboriginal organisations and I think I need to, you know, say that there has been, there has been some incidences, not a whole lot, but there has been some with children, I've I've had Aboriginal staff, my own staff go in to do some of those visits and the kids saying, not aware that they're Aboriginal. And you got dark skin like me, and one of my staff might say, well, you know, you're Nunga too, and he goes, what's Nunga? So, you know, there are situations that, you know, I'm not going to say there are, it's plentiful, but there were two occasions when we went to a house where that had occurred and, you know, obviously then we come back and do advocacy pieces around what narrative's been had with the young people. And can I say on on one of those occasions, the children were with their Aboriginal family for most of their short, you know, so they were eight, you know, under 10 but, they'd only been in that residential placement for about two months. So you know, they had spent most of their time with the Aboriginal family and their cultural identity wasn't discussed within that family environment either. So it's, you know, it is complex around all of that. But I think I've lost, I've lost the question April. I went off on another track. Sorry. Do you want to bring me back?

Commissioner Lawrie:

No, I think you're doing fine, Shona, it was relating to the experience for our Aboriginal.

Shona Reid:

Oh cultural identity. That's right. It was around cultural, Tracey Westerman. I think the other bit is when the older I see it sometimes too, because one of the things we haven't touched on here is the kids in the Youth Justice Centre. And sometimes I see them in there and then I see them again in residential care facilities, mostly because that's, they're not necessarily, I have yet to see a young person in a family-based care arrangement in in foster care who's in the centre, I've only ever seen it when they've been in residential care. But they are embarrassed that they don't know about their family, embarrassed that they don't know their mob and are seeking advice from other young people or peers in care or not in care to find that sense of identity. And so they're building a narrative that's probably not theirs, it's their mate's narrative. And you know it's it's it's, it is a place and a longing that when they get to that teenage area that they like to have that conversation, and if they don't have it, look, DCP have got life story books that they talk about, they have got cultural identity plans, which something that has aged, and I'm sure that you know, it's been kind of updated as we go but, we ask questions about life story books and if they're done in the residential care setting or even in the family based care setting. Sometimes they are, sometimes they're not. It is not a full compliance. You know they, sometimes though I think it's important that there is information that's left out of those life story books because there's a judgement being made that children don't need to know that part of their history and I get that there is, it's important to make sure that we are able to put stuff in there that is age appropriate and is not harmful or doesn't retrigger. But there's a balance with that as well because if you don't have it in there, the young people are going to get their own narrative out of that. And you would be surprised that there is the fourth, can I just say the fourth top reason in this last quarter as to why children are calling my office is because they don't under, children and young people want to know why they can't live with their birth family. So clearly the conversations, if I'm getting, if the fourth top reason people are calling my office is Page **11** of **18**

because they don't understand the circumstances in which they entered care, clearly there is an opportunity to look at how we have those conversation, who has those conversations and how we're able to build that understanding for them, because that is an integral part of healing from trauma and children have been traumatised, if they're coming through this system, there has been something that has happened in their past that is hurtful and they do need help to heal from that, and if they don't have a story to attach to that that healing's gonna be very difficult.

Counsel Assisting:

Mm hmm. Thank you very much for that. From your involvement with children, do children themselves see that removal, just of itself, is traumatic?

Shona Reid:

Look, I don't particularly explicitly explore that removal, that removal moment, because my focus is absolutely about their time in care. I, there is, you know, when children do, do do reflective pieces with us and talk to us reflectively, look, I think you'd be surprised that a number of children are grateful that they're not in the environment they were before because, you know, there are a significant number of children that do reflective pieces around, I'm really glad I'm not in that environment, this environment still sucks, but I'm really glad I'm not there because that hurt, that was painful for me or that was, they really did bad things to me is often a reflective narrative. There's also the other narratives like, like I said, like, I don't know why I was removed, I have no idea, all I know is that I was at school one day and I'd come from mum's house, and then the next day, that same day I got picked up and I haven't seen mum since. So there is, you know, there is a great varied pieces of reflection around children's removal experience. I don't explicitly explore that unless it's something that children talk about in a reflective piece. And yeah, it it is, it is a tricky one and it is varied.

Counsel Assisting:

Shona, is there anybody who does explore that with children in a way of of trauma counselling and trauma management for them?

Shona Reid:

That is absolutely something in the DCP world around any therapy that's provided to children after. I think a good place to talk with someone about that is the, at the courts, around the child advocates at the courts, they are often there when all this happens and they do do referrals on to support services with their expertise as well. So there may be an opportunity to speak to some social workers or some child advocates in the Youth Court around that.

Counsel Assisting:

Thank you. One of the aspects of the child placement principles and the Closing the Gap is moving towards self-determination for Indigenous people. In terms of where the Department is operating in this state now, do you have a view about where it is on that scale, whether there is any movement towards assisting and encouraging and creating an environment for self-determination by delegation of authority for care of Indigenous children in South Australia.

Shona Reid:

So theoretically, you know, my understanding is that delegation authority is being explored in the, I'm hoping that it's explored, there's, you know, there's, I think it came out in some of the discussion paper for the child protection, the new Child Protection Act around the delegation authority being explored in there. I still think it's under the terms of this current system, so I, you know, in terms like

in, what I'm trying to say is I think when we're setting up things like this, we need to be mindful that it's being set up under a structure that doesn't necessarily, is not fully convinced that that delegated authority is the way to go in the first place. So I'm not necessarily sure that the scaffolds that need to be established to support delegated authority are in place or are being established. And by scaffolds I mean the values in which delegated authority is there. I don't think people, I think lots of different people have different understandings and meanings around what delegated authority is based off different models across Australia and internationally. I think South Australia needs to define that, but I think they need to define that with the people that best understand what the intent of delegated authority is. And I also believe, so yeah, so I think, whilst I see it being, you know, a potentially in the new bill coming forward, which I'm pretty confident it probably is, I don't know if there, it has been born, born into a system that's ready for it or truly understands what it is. So yeah, I think that's probably the best I can do with that. I think what's important to recognise that on a granular level when we see successful outcomes for children and young people, those successful outcomes don't happen by chance. Those successful outcomes happen because everyone's on the same page, everyone understands their roles and responsibilities, everyone has a shared responsibility in decision making, everyone comes to the party and does their part of the part of the gig and the agreement, that those that are affected by things are directly involved in the provision of advice and even in doing some of the jobs that relate to making things work out well, and when they keep checking in about how successful we are on in tracking in in achieving some of those decisions that we originally started on and evaluating if you need to shift the goal posts and make things better. So there, when things work well on a granular level, that's what happens. Now it is much bigger when we're talking about a systemic level, especially around delegated authority, and I don't know if that environment is set up to do all of those components on, in a bigger setting.

Counsel Assisting:

Thank you.

Commissioner Lawrie:

Not yet.

Shona Reid:

What's the matter?

Commissioner Lawrie:

Whether I was gonna ask you a question. I'm forming one. I yeah.

Shona Reid:

That's all right. I think I, you know, I think I concur with you, April, overall when we talk about, you know, the placement principle has very much been turned into this step one, step two, step three of placement and I think people have missed completely the intention of the placement principle in all of its forms and in doing that it it goes beyond just DCP and and early intervention services, it it goes into how services establish themselves or how, you know, for families to access before even DCP's on the radar. You know, I think, you know, core, fundamental service establishment, even if we don't even think it's, you know, got to do with kids and care. But you know, let's think about, you know, private ent, you know, people like, you know, accessibility for Aboriginal people to negotiate part payments on, you know, it might be gas bills, right? I know it sounds silly but these are the things when I, you know, from my experience in many years of DCP, you know, I always went to the conversation of not for the grace of God go I, right? It takes one trauma in one family, whether it's redundancy, whether it's financial obligations, whether it's a death in the family, it can happen to

anyone of us at any time. The fact that it happens so much in our communities means we're particularly vulnerable to these particular life traumas that happen. And you might be coping fine with the world until one of these traumas hit. And I think there is, you know, when we think about this in its entirety, we need to think about how our whole society is capable of scaffolding us, so if we fall, we don't fall into a big hole of nothingness, that we can fall into some level of support that has the intent of what we're talking about here, because that's all, there was a cry, that placement principle was a cry out to the whole of society to say we need to support our community better from the very start so when we do fall, we don't, we don't fall into oblivion and never seen again, which is what we have currently. And it doesn't just relate to the social welfare system, it also relates to our private sector, our commercial sector. It applies to all these other sectors, but we forget that they have a part in this as well and we often abandon that for a purely welfare model. And I think if we keep going down that line, that this is purely about welfare, then we're missing the point around a caring community is what we're after.

Counsel Assisting:

Shona, can I just say that this morning we heard from Professor Bromfield who described, I think what you're you're describing by saying that what we probably need to get to is rather than the question being asked all the time and do, should I report this, is this reportable, is this a this a mandated reporting, to what does this family need to help? And if we turn that around that that was the first question then big change would come about. We wouldn't be in the place of it being a welfare system, welfare inverted commas.

Shona Reid:

Completely.

Commissioner Lawrie:

I do have that question 'cause I've been trying to shape it because it was probably when you were talking about, you know the fourth, you know, fourth on your list about why.

Shona Reid:

Yep.

Commissioner Lawrie:

The reasons why kids ring up, you know, one is about why can't they with their birth family.

Shona Reid:

Yep.

Commissioner Lawrie:

And I guess it is, it is, the point that I wanted to make about the BetterStart data analysis revealing that there are a significant number of children who have been removed, who are for reasons to do with poverty, homelessness, substance misuse, domestic violence and, that's the majority, I know there are other reasons, and while there has been, you know, a call for a a system that should respond to harm, that's the, you know, that's why we have a child protection system. But there's also a lot of kids that talk about the harm the system does to to them. So my question to you is for a system that is supposed to give better than what the child or the children came from, what is it that the system that needs to do, like what does it need to do in your mind, in the role that you have, in your children and young people, what does it need to do better?

Shona Reid:

April, I can write a thesis on this.

Commissioner Lawrie:

We all can.

Shona Reid:

I know, right? So one of the things that I have spoken endlessly about is that when the state takes a child into care, or hang on, let me go back a second. When people say they, why can't they live with their birth families? There's there's two prongs to that. One is, I was fine at home, why did you take me? So why can't I live with my birth family. The other is, I'm worse off in care, I might as well have stayed at home, even though I still didn't feel safe at home. So there's two kind of prongs to that, right? So that's why I smiled when you were asking the question 'cause I kinda go, oh, should I clarify that point for you guys? So I have had this consistent narrative from the start of my tenure and I'm actually activating it a bit more in this financial year coming. So you'll see it in my next annual report that as soon as, you know, when the state takes a child into care, the whole state is responsible for their care, so all its service functions should then be responsible for their care. And can I say I'm also running the narrative and beyond their order. So, as parents we are responsible for our children forever. You know, we have a sense of obligation to them. You know, we we have provided for them, we have shaped them, we have as a parent invested in them and their contributions to our community as we go forward. That's kind of like the evolution of families, right and community. The state is not, can't, has that same responsibility when they take a child into care. That is their job. They are the richest parent of us all. They, so I truly believe that I am not seeing that come to its fullness in this current time. That there is this sense of diffusion of responsibility if a child is under the care of Chief Executive, it's the Chief Executive, an attitude that it's the Chief Executive's responsibility to do everything, and I think that that, that system, that attitude, doesn't work. We need all of the state's resources and in all its glory, to be there for children. So if a child is in state care, then I expect the Education Department to stand up and say we will pick up this load, this is our responsibility and they then contribute significantly to ensuring that child's experience in education is one that is, adds value to their life, does not devalue them, and does not cause further harm to them, which I can't say confidently happens 100% of the time. The same with the health system, the same with dental, the same with, you know, you know anything that sits out there around the state's responsibility. I, I think there needs to be greater account and I plan to as Guardian to call account to the other government, state governments in South Australia as to how, the extent in which they respond to children in care, and obviously paying particular attention to the children that I have to pay particular attention to. So coming up after this annual reporting season like what we're in right now, I have already signalled to the Minister for Child Protection that I'll be requesting a whole bunch of information from state government departments around the intersection with children and care and how, how often and what is their investment, fiscal and resource wise, other resources to children and young people in these situations. So that is something they have not done before and I anticipate there will be great difficulty in getting that information, but I can start that this year and then get what I can and then hopefully they'll be used to me antagonising enough that they'll get themselves into order. So in terms of like big scale, I think there's great improvement in that space. I also think there's, for children in care, I always go back to this and but it is so, so important, I don't doubt the heart of any worker. I mean, I've worked in DCP for many years, I've been out for many years too, and now now kind of back in this world. I don't doubt the heart of anyone that wants to work with children and young people in care. They have all have a heart to make sure that they are, you know, there's something that attracts people to this job Page 15 of 18

and having the heart to do it is there. What I think I do think that needs to be looked at is how this sector feeds itself in regards to the attitudes and values around, you know they bring with them their own set of values with how, how, with regards to how children should be raised, around how they should be grown up and what they should have access to, you know, workers bring that and that's, you know, that's an important part. But there seems to be the in the inability to connect with a cultural perspective on that front. And what I'll talk about is the value base in which workers bring, and I don't think the sector adequately defines, adequately enables a cultural value base to be something that drives practice. They try to make practice drive values and that doesn't work that way. The organisation needs to enable Aboriginal cultural values to be a protective factor in their services, not a risk factor which I truly think it is. That that's how they look at it.

Commissioner Lawrie:

Thank you.

Counsel Assisting:

Thank you. We have heard that across the board from a number of expert witnesses that, that that is hugely problematic, that that Aboriginality in itself is seen as a risk factor, Aboriginal parenting systems are not not recognised and not appreciated and things are judged from very much from a western point of view.

Shona Reid:

Completely. I mean, I'll just want to jump back on, it. Just triggered in my head some stuff that I think might worth mentioning, is that one of my one of my worries around the residential care space is, and this is around the delegate delegated authority, April, conversation. One of my worries is when we have a delegated authority space, that DCP would just kind of, you know, or or the system would just go, oh well, we'll have, there you go, over you go. What we have at the moment is, for instance, I have seen and I have queried a number of times DCP placing children into Aboriginal nongovernment organisations residential care placements and have ticked compliance to the Aboriginal Child Placement Principle. So I have seen that and I query it every time because there is no guarantee there is any cultural, it might be owned and run by a non-Aboriginal organ, an Aboriginal organisation, but you cannot guarantee that there are Aboriginal workers in that house, that there are Aboriginal care team around them, that there are Aboriginal services there or that cultural connectivity that is happening for those children in that environment, that cannot be guaranteed. So I worry, although I heartily support the, what do you call it, the delegated authority space, I don't know what's happening on the other end to guarantee the intent of delegated authority by service providers when that happens. So I think that's something that is a balance because it's not, it's about making sure that we stay true to the intent of that and not because that's, it can easily, it's a slippery slope sometimes in terms of if we don't, if we don't stay true to those intent, unintended consequences happen. So I will never say that the placement principle has been in compliance with an Aboriginal residential care placement. I'm sorry, I can't say that and I will not support a compliance tick on that. Unfortunately DCP does assume compliance in those instances and I am happy to keep challenging those when they pop up. Yeah. I just wanted to make sure that was in on the conversation somewhere.

Commissioner Lawrie:

Well, what do you say then to the fact that in, in practice, in through one of the policies which is in relation to the guidelines for the Aboriginal and Torres Strait Islander Child Placement Principle with regard to the placement hierarchy, that going through the hierarchy, the last aspect is if you can't

satisfy family, you can't satisfy community, culture group, then a non-Aboriginal placement, in your, I guess, feedback Shona, would you say that's complying with the Aboriginal and Torres Strait Islander Child Placement Principle?

Shona Reid:

I don't like this concept of, like this compliance thing frustrates me. I think there is, it is really, really important that we go through and and this tick box appro, the tick box approach is entirely frustrating. We need to get back to what this is all about around how is that young person and that child, how are they going to grow well? We know that growing well in culture is the number one, of the number one reasons, you know, having culture around you enables your full growth to happen. And now there are times and I have to say, there are times where a non-Aboriginal placement is a place that needs to happen, but my conversation piece is is this is not just about where you sleep at night. The placement principle has been all about where you sleep at night. I think we need to think about it broader than that because we have, yes, where you spend most of your time is really important but who are the people around you that can give you and help help young people and children shape their cultural identity? That is really what they were talking about when they set set up those, you know the intent of all of that, and once again let's go back to the intent of it all, which is around growing children up culturally strong because we know that's a protective factor. So I entirely get frustrated about physical assets, around houses, around, even though they are essentially, they are really, really important, don't get me wrong, but we forget that there is also what we place, and the humans we place around young people, and the experiences we place around young people, and the constant exposure to things that we place around young people, are just as valid as the bed we sleep in, and we need to be able to get that message across to the world that our culture is not about a physical asset that might be in a Western concept, but it's not necessarily in ours either. You know, it is not just about bricks and mortar, it is absolutely about the people that surround you and your continued, constant exposure to, you know, your history, your family and and that helps you build your own identity, because that young person will form their own identity, and guess what? Being in care is a part of that.

Commissioner Lawrie:

Yep. Thank you.

Shona Reid:

Sorry, just went on my soapbox.

Counsel Assisting:

No, thank you very much for that.

Commissioner Lawrie:

No more questions.

Counsel Assisting:

Shona, I think you've covered everything we we have, could have hoped you to have covered today. You've done a wonderful presentation for us. Thank you. And reading, reading it in in conjunction with your your submission, which has been fantastic. Thank you very much. Thank you for your time this afternoon.

Shona Reid:

No worries, no worries. That's wonderful. Thank you so much for having me, I do appreciate it. And look, if there's something that you need from us that, you know, feel free, you know, if you've

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learned a little bit more about what we do and you think, I mean, the one I didn't really explore is kids in detention. I just, you know, one of the things that I think you, you know, I think I don't know if it's in our report or not that there's particular nuances for Aboriginal kids in detention for than non-Aboriginal kids, you know, and the dual involved nature and the criminalisation in care, and sometimes children, especially Aboriginal children, may come into a detention setting and they are more likely to serve out their entire remand period and then exit the, the centre than non-Aboriginal children, who, you know. It's a really complex piece, but I worry for our Aboriginal kids and it's, and kids being in care and the close connection between being in care, or being in detention and then being in care also. So this worries me and particularly residential care and how it impacts on their life trajectory and everything past their their care environment. So I think for me it's in our section and I hope that you get to read a little bit more of it but, you know, kids shouldn't have to be removed from their family, placed in care, and their trajectory is anticipated to go into lock up cause, you know, if once they're in the youth justice system, the adult system's next. So I think, that's even ts, because we can see re contact they have n human hugs.

more important around why we need to look at scoping and family placement that the, you know, the percentages go up for negative life outcomes, the mo with the system that is, you know less, you know, more bricks and mortar that
Counsel Assisting: Thank you. Finished.
Commissioner Lawrie: Awesome, Shona. Thank you.

Shona Reid:

Thanks very much, Shona.

Counsel Assisting:

Alright, you take care, hey.

Commissioner Lawrie:

You too.

Shona Reid:

Bye

Counsel Assisting:

Bye.

Commissioner Lawrie:

Bye.

END