

14 November 2003

Legislative Council Standing Committee on Social Issues
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Dear Committee Members,

Inquiry into Inebriates Act 1912

Barnardos Australia is vitally involved with children who are severely affected by their parent's drug and alcohol abuse. Although we had little direct dealing with the Inebriates Act we see the need for an Act which promotes successful outcomes for people with alcohol or narcotic addictions. We particularly call for better legislative and service response to drug and alcohol dependency for parents.

Barnardos runs a number of services for children whose parents are drug and alcohol affected, most significantly for this inquiry:

- Crisis fostercare services - often used for detoxification and rehabilitation. These services can successfully maintain parent child relationships if the family can be supported, even where addiction is present.
- Find-a-Family which finds permanent homes for very damaged young people after the Courts have separated them from their parent.
- A specialist Substance Use in Pregnancy and Parenting Service program which is a collaboration between Health, Department of Community Services and Family Support Services on the South Coast of NSW.
- Family Support Services in rural areas.

Our submission addresses some of the Committee's Terms of reference -

Term of Reference 2. The appropriateness and effectiveness of the Act in dealing with persons with severe alcohol and /or drug dependence who have not committed an offence and persons ...

We believe that drug and alcohol abusing parents need to have more effective help than is currently being received, many children are losing their parents and having to live in out-of-home care because of the failure of services to meet their needs. We believe that the Act should contribute to availability of services, co-ordination between child welfare and addiction laws, and provide funding for outcome research.

The Act's ineffectiveness in ensuring availability of Services

We believe that the Act should provide a framework for getting services to individuals with a special emphasis on parents. Early intervention, particularly when a mother is pregnant and abusing substances, is essential.

Treatment services and ongoing support are necessary to stop as many children as possible from being damaged, or unnecessarily removed from parental care and entering the often damaging out-of-home care system. The situation is clearly unsatisfactory. In March 2000, the NSW Child Death Review Team reported:

Between January 96 and June 99, 44 children died from acute toxicity as a result of their own, or their parent's, drug or alcohol dependence. Substance abuse was also noted on 86 coronial files. The report highlights the complexity of cases involving substance abuse.

Drug and alcohol dependency impacts heavily on children's welfare services. 80% of child abuse reports investigated by DoCS are concerns about drug and alcohol affected parenting (Families Australia 2003). In Victoria, two thirds of substantiated cases of abuse and neglect had alcohol and other abuse problems (Families Australia 2003). In out-of-home care approximately two thirds of parents had alcohol and other substance abuse problems (Families Australia 2003). 1% of the general population uses heroin, however 22% of families with children in out-of-home care had mothers known to be using or have had a heroin problem. 13% of such families had fathers using or with a heroin problem.

Despite these facts services are not widely available to parents of young children and early in pregnancy. The SUPPS program on the South Coast described above has had the capacity to

“track women when they didn't present at hospital clinics and to engage in disparate clinical services such as imaging and blood collection services, psychiatric, methadone, and maternity and neonatal services to respond flexibly to the needs of this high risk group of women”.

However, this program lost its specialist outreach aspects in 2003 when the Department of Health cut funding, funding for what remains of the program is very precarious.

The Act appears inappropriate in working for the welfare of children of drug and alcohol dependent parents

Children are not currently receiving effective protection from drug and alcohol abuse by their parents. Neither the Inebriates Act nor the Children (Care and Protection) Act 1998, can enforce behaviour changes in parents, however, there may be things that can be done to provide better protection.

Neither Act seems to ensure good assessment of parental drug use. The Children and Young Person's Act currently can demand assessment and treatment of substance dependency, if parents do not wish to lose their children.

Of particular importance in ensuring that children are protected when their parents are drug abusing, are that treatment and child welfare services are working on the same 'timelines'. Babies and toddlers need to have decisions on their welfare made quickly so that important stages of development are not lost and psychological damage occur. Permanency planning laws take these factors into account, however, as Azzi-Lessing and Olsen (1996) point out:

Drug and Alcohol addiction is a chronic, relapsing condition that is not quickly or easily overcome. Even those who are successful commonly recount failed attempts at recovery. And the recovered substance abuser must do battle with the dangers of relapse.

This Committee needs to consider the very low use of adoption in NSW for children who can never live with their parents because of alcohol and drug addiction. Less than half a percent of children in foster care in Australia are ever adopted. Barnardos in NSW

is virtually alone in offering adoption to children who have been permanently removed from their parents by the Courts.

An increased role of the Act in developing outcome research

There is inadequate research on the impact of drugs and alcohol on families. In particular on the point at which drugs and alcohol impact unacceptably on the welfare of children and young people. We need to know how many children rotate through short-term placements without getting the permanency they need for their own development. We need research on the outcomes of restorations and Department of Community Services "Temporary Care Orders" when drugs and alcohol are factors in the family. Success of rehabilitation and the time involved needs to be clear, especially to those working in child welfare.

Barnardos like many other organisations has valuable data, which could be used to give the information needed. However, we do not have the resources to get that data analysed.

3. The effectiveness of the Act in linking those persons to suitable treatment facilities and how those linkages might be improved

There is evidence from overseas that where services take into account the parental responsibility of substance abusers there is a greater improvement in outcomes from treatment services. It is our view that the reformed Inebriates Act should aim to get more appropriate services to parents who wish to seek treatment.

Shame and fear of loss of children can be major factors in relation to parents seeking assistance with substance abuse. The Alcohol and Drug Foundation's review of Australian studies (1992) identify the fear of loss of children through child protection and criminalising responses as a significant deterrent to seeking substance abuse treatment. Women who abuse substances also often bring a sense of helplessness and powerlessness... low self esteem, social isolation and difficulties in trusting others. (Campbell 1997 p21)

The services available to families with drug and alcohol problems have traditionally worked in isolation from child welfare services, but to give a more appropriate service response this needs to change.

As Tracey and Farkas (1994) point out:

Consideration of the mother's recovery and the child's safety and well being requires service systems and supports beyond the traditional scope of either child welfare or AOD [alcohol or drug] abuse programs – services such as housing, social supports, concrete services and community education.

However, this is not the case in NSW, drug and alcohol services have focused on the affected individual adult, with child protection services often unclear about what is happening to their children during episodes of detoxification or addiction. Family Support Services have focused on families, but have not specialised in understanding the impacts of drug and alcohol issues on children. Other services, such as domestic violence and mental health services, may not even have been included in overall case management. The result is that families may have problems, which no service addresses, and poor co-ordination can lead to.

Azzi-Lessing and Olsen (1996) advocate a family centred approach, which would:

... assist women to carry out their roles as parents and focus on the needs of children. A service system focused on the needs of women would also consider that they are socially isolated and frequently do not have good education or job skills. Such women would also have the need for concrete services such as housing, childcare and transportation.

Difficulties in getting child welfare and drug and alcohol services working together arise from 'differences in definition of the "client", outcomes expectations, timelines, and definition of "success"'. Major issues include difficulty getting into drug and alcohol services, even when delay has far reaching consequences for the children; problems of confidentiality and time pressures on parents which are not taken into account (particularly if the parents are also involved with probation services); problems of proximity to transport, childcare, timing of appointments and treatment.

The reformed Inebriates Act could aim to improve service co-ordination and delivery.

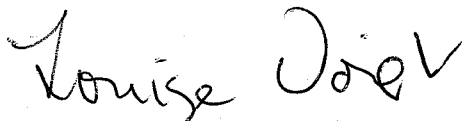
Options for improving or replacing the Act with a focus on saving the lives of persons with severe alcohol and/or drug dependence and those close to them

Barnardos believes that the Act should be replaced, taking into account the patterns of drug and polydrug use in the New South Wales community (Part 3. Section 11 for example refers to drunkenness), current understanding of success for rehabilitation and the nature of addiction.

Compulsory assessment and treatment does not appear to be an effective step in stopping substance abuse, and we have seen evidence of the difficulty of parents complying with prescriptive drug behaviour even when their children's future is at stake. However, legislative provision needs to be made effective, providing family friendly services and treatment to alcohol and drug addicts, which are consistent with child welfare concerns.

In closing, we would like to draw your attention to our experience in rural areas in which "middle men" appear to reap highly inflated profits from the transport of alcohol from outlets to groups consuming alcohol.

Yours sincerely



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