

Desperate measures

> The relinquishment of children with disability into state care in Victoria

Main findings

Relinquishment caused by a failure to deliver adequate support denies the human rights of children and families at both domestic and international law. In particular, it denies people's rights to the protection of the family and protection of children.

Prevalence

- We estimate that 50 or more families surrender the day-to-day care of their child with disability to the state each year.
- Relinquishment is not new and may be increasing.
 Over half the organisations we surveyed reported that relinquishment is more prevalent now than two years ago.

Risk factors

- Relinquishment is primarily driven by unmet need for services, with 87 per cent of surveyed organisations reporting that facility-based respite was unavailable or inadequate. Seventy-three per cent of surveyed organisations reported that in-home support was unavailable or inadequate.
- There is no early warning system in place across the Department of Human Services (DHS) to identify and support families at risk of relinquishment.
- There is no typical family that surrenders care. The common characteristic described by families was feeling they were coming up "against a brick wall" when asking for help.
- One in three families surveyed reported behavioural support services were unavailable or inadequate. Three out of four organisations reported lack of access to these services.
- Action or inaction from other systems, such as education and health, can be one of the stress factors that led to relinquishment. Half of our case studies identified problems at school.

Location

 Parents may surrender the care of their child in a variety of settings but, most commonly, children are not collected from facility-based respite. Children were also surrended at at school, DHS offices, hospitals or by calling the police or other emergency services.

Response

- There are no statewide written protocols or work directions to guide front-line staff when a relinquishment occurs.
- There is no dedicated budget in Disability Services to manage these circumstances or discrete capacity in the system to provide emergency accommodation.

Inappropriate accommodation

- Children are living permanently in respite centres. In our case studies, a quarter of the children placed in respite facilities were still there six months later. In at least one case reported to us a child has been living in respite for two years or more.
- DHS data shows that 46 children stayed in residential respite for more than four weeks in 2010-11, an increase from 26 children the year before.
- There is an emergent trend of DHS establishing group home / community residential unit style accommodation called 'transitional houses' for children following relinquishment, despite this being contrary to formal policy.
- There is currently no system for proactive, independent monitoring and inspection of these facilities to make sure children's human rights are protected.
- Children are subject to frequent moves eight out of 12 children in the case studies moved through several respite or transitional house settings, or outof-home residential care

Consequences

- Relinquishment causes direct harm to children and families – children experience trauma, grief, fear and confusion. Trauma and grief was the strongest message from parents. Trauma lasts for many years. Family breakdown appears common both before and after surrender of care.
- Given the importance of community connection, and of kinship obligations within communities, if an Aboriginal child enters state care through relinquishment, the ramifications are enormous.
- Physical and mental health issues for families including anxiety, contemplation of suicide and ongoing depression – were also reported.
- Concern for siblings was a significant finding in the research.
- Relinquishment is costly. It places an additional, unplanned burden on systems that already struggle to meet demand.
- It costs four times more to place a child in a disability residential service than to provide intensive respite two days per week.
- It costs up to seven times as much to place a child in out-of-home residential care than to provide extensive respite two days per week.

Prevention

- There is overwhelming consensus that the most effective means to stop relinquishment is to address unmet need for support. This will require an increase in resources across the human services system, including investment in workforce, infrastructure and flexible models of support.
- There is significant consensus about the practice reforms necessary to prevent relinquishment.
 Principal among these is a consistent and flexible response to the whole family's needs, with a much stronger emphasis on early intervention.
- A number of preventative models of care were identified in this research. The most frequently mentioned was shared care.

Next steps

- The report makes 28 recommendations to the Minister for Community Services and Disability, the Minister for Education and the Attorney-General.
- The Commission has developed an implementation action plan to guide its own efforts to monitor progress toward the recommendations and to use its influence as Victoria's human rights body to keep a focus on the issue and make change happen.

The term 'relinquishment' is used in the report. This provides a shorthand way to describe the wide range of circumstances that the Commission discovered in this research – however it is a term that lacks subtlety and potentially harms families and children who have already experienced significant trauma.

The term is deeply offensive to some families as it might suggest 'abandonment'. That is not what parents are doing when they are forced to act in desperation, and the children must also deal with the stigma it carries.

Importantly, relinquishment also has a specific cultural context for Aboriginal Australians who have suffered a history of dispossession and forced removal from family.

Download the full report from humanrightscommission.vic.gov.au/resources or contact us for a printed copy on communications@veohrc.vic.gov.au or 1300 891 848.



Need more information?

Contact the Commission:

Enquiry Line 1300 292 153 or (03) 9032 3583

Fax 1300 891 858 TTY 1300 289 621

Email enquiries@veohrc.vic.gov.au
Website humanrightscommission.vic.gov.au

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Published by the Victorian Equal Opportunity and Human Rights Commission, Level 3, 204 Lygon Street, Carlton Victoria 3053. May 2012.