



# **We have to get it right this time**

Child Safety Commission of Inquiry

Reviewing and Reporting on Queensland's Child Safety System

Cape York Institute for Policy and Leadership (Cape York Institute) Submission

April 2026

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Via email: [info@childsafetyinquiry.qld.gov.au](mailto:info@childsafetyinquiry.qld.gov.au)

Yalada Mr Anastassiou

We hope that you can achieve the consideration of all the very crucial issues involved in the shortened timeframe you have been given by the Queensland Government.

This Commission of Inquiry is so important to us, and the future of Cape York children and young people.

We trust we will be forgiven for saying this. This work is far more important than the Brisbane Olympics—yet we fear those may yet receive more focus, resourcing and effort.

Our Cape York insights come from proximity—decades of observing why some families move ahead while others, of similar ability and circumstance, do not. Over more than thirty years, we have seen outcomes in remote Indigenous regions such as Cape York, collapse and not only remain by far the worst there are in Australia, but in key areas—such as child protection, youth justice and incarceration—continue to worsen.

The trajectories on which we see Cape York families are not random. They are patterned—shaped by whether institutions enable people to build capability. The devastation and disaster that plays out in Cape York families every day, raises fundamental questions about the role of the State.

Pama—our ancestral language word for the First Nations peoples of Cape York—hold an institutional memory of what works when families stabilise and build capability so their children can get ahead. Few places have tested reform as long or as deeply as Cape York. Key initiatives include the Cape York Welfare Reform trial in Aurukun, Coen, Hope Vale and Mossman Gorge, establishing the Family Responsibilities Commission (FRC), parenting support, education, money management, and other reforms.

Two decades of reform in Cape York reveal a pattern:

- Restore responsibility, and behaviour stabilises.
- Provide real opportunity, and effort leads to progress.
- Bring the two together, and families build capability and move ahead.

This yields the key reform principle:

**Responsibility + Opportunity = Capability**

Noel Pearson and the Cape York Institute for Policy and Leadership have played a central role, but all reforms have been shaped by Cape York people.

Cape York does not claim to have solved entrenched disadvantage. It plainly persists. The claim is more precise: we have learned how entrenched disadvantage is overcome—when it is

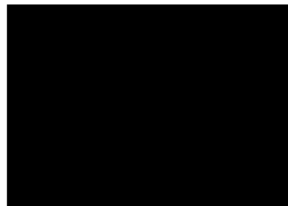
overcome at all. We have lessons that must be heeded to bring the child protection crisis to an end.

We understand you and your team have not had the opportunity to visit any Cape York communities as part of the Inquiry. We hope your timeframe still permits some further engagement as we would highly value the opportunity to talk with you directly.

Yalada,



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**Group Chief Executive Officer**  
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## We have to get it right this time

Cape York is the epicentre of Queensland’s child-protection and youth-justice crisis. The vast majority of First Nations children in these communities sit in Australia’s “Bottom Million”: families trapped in deep, multi-dimensional disadvantage, where child protection, youth detention and prison have become routine features of the life course rather than rare exceptions.<sup>1</sup>

Children from these communities are more likely to be notified, removed, raised in long-term out-of-home care, and to end up in detention and prison than since the 2013 Carmody Inquiry. The curve has steepened.

This Commission must ask, without flinching:

- Why have all previous attempts to fix Queensland’s child-protection (and youth-justice) systems so comprehensively failed?
- Why are more Aboriginal and Torres Strait Islander children in care now than at the time of Carmody, and why has over-representation worsened?
- Why has the State chosen to build a billion-dollar industry at the end of the pipeline—child protection, out-of-home care, youth detention, prison—rather than a serious prevention architecture at the front?
- Why, when alcohol-fuelled violence and neglect are central drivers of harm in Cape York, is the Queensland Government obsessed with opening the floodgates to more alcohol?
- Will this Commission confront the proximate causes of increased child removal, or declare them “out of scope” while the State fails to keep its most impoverished children safe?

Unless these questions are faced head-on, this inquiry will change nothing.

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<sup>1</sup> Noel Pearson (see e.g. [Boyer Lectures](#) 2022) has highlighted the predicament of Australia’s “Bottom Million” (drawing on economist Paul Collier’s identification of the forces that keep the world’s “Bottom Billion” trapped in persistent poverty). Australia’s welfare state does not function as a safety net those at the bottom—where it does not build capability but actively erodes it.

The Bottom Million includes an overrepresentation of First Nations Australians, alongside other Australians whose exclusion has become entrenched across generations.

This is a structural diagnosis. It is not a cultural argument.

## Executive Summary

Queensland is in the midst of an ongoing and escalating Indigenous child-protection disaster. Indigenous children now make up just over half of all children in out-of-home care in Queensland, fulfilling the warning that they would soon be the majority of the care population.<sup>2</sup> They are massively over-represented in youth detention, and come before the criminal courts at rates that presage adult imprisonment.<sup>3</sup>

The picture that emerges from the available evidence is of a cohort of Bottom Million children being damaged within a state that has ample resources to do better. Many of these children are not merely behind; they are already injured in ways that will predictably shape their life course towards school failure, disengagement, contact with the criminal justice system, and even prison.<sup>4</sup> The Cape York Institute's focus on disability has revealed extremely high rates of cognitive impairment, social and emotional disorders, and exposure to violence and trauma among Indigenous students. The Queensland Productivity Commission acknowledged that child protection and youth detention are now key pipelines into Indigenous imprisonment.<sup>5</sup>

Every government since the 1999 Forde Inquiry has helped produce this outcome. Across changing Premiers and Ministers, restructures and rebrands, the direction has been the same: more removals, more Indigenous children lost to their families, more Cape York children raised by a failing system.

Governments of both stripes have poured money into the back end and in doing so have created a permanent industry around Indigenous childhood and Indigenous misery. That billion-dollar industry employs thousands and consumes an ever-growing share of the budget. It has not reduced the flow of children into its care.

The proximate causes of this crisis are not mysterious. In Cape York they are visible and well documented: alcohol, cannabis and methamphetamine epidemics, violence that has become routine. Passive welfare that has hollowed out work, responsibility and social norms. These conditions drive children into Child Safety, youth detention and prison. Yet policy has been governed by what we call the "symptom theory"—the idea that addiction and violence are mere

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<sup>2</sup> Queensland Government, Department of Child Safety, Seniors and Disability Services, latest child protection summary statistics, show Aboriginal and Torres Strait Islander children comprise just over half of all children in out-of-home care in Queensland.

<sup>3</sup> Queensland Productivity Commission, *Inquiry into Imprisonment and Recidivism, Final Report*, (2019), documenting the over-representation of Indigenous young people in youth detention and the link between youth detention and adult imprisonment.

<sup>4</sup> Cape York Institute, *We're Black – we don't matter*, documenting elevated rates of disability, cognitive impairment and trauma among Indigenous children in Cape York and their links to later justice-system contact.

<sup>5</sup> Queensland Productivity Commission, *Inquiry into Imprisonment and Recidivism, Final Report*, (2019) discussion of child protection and youth detention as pathways into adult imprisonment for Aboriginal and Torres Strait Islander people.

by-products of deeper historical wrongs, and that governments need only multiply services at the margins while tolerating epidemics at the centre of children's lives.

Based on firsthand reform experience, Cape York Institute rejects this framing.

Alcohol, cannabis and ice are epidemics in their own right. The proximate cause of this crisis is not a lack of programs or services, and not mysterious cultural issues in Aboriginal and Torres Strait Islander families. The proximate cause is the substance-abuse epidemics that have taken hold in Indigenous communities, and the deeper structural cause is the passive-welfare environment that has entrenched them. Alcohol, cannabis and now methamphetamines operate as psychosocially contagious epidemics, recruiting one generation after another into addiction and violence. They drive the family violence, sexual abuse, neglect and school failure that fill child-safety files, watch-house logs and youth-detention rosters.

The misdiagnosis underpinned by “symptom theory”<sup>6</sup> has dominated policy thinking since the *Royal Commission into Aboriginal Deaths in Custody*: the prevailing idea is that addiction and violence are merely symptoms of deeper historical and social problems, and that we must first fix poverty, dispossession and trauma before we can expect behaviour to change.<sup>7</sup> On that view, the State can continue to proliferate programs at the margins while tolerating epidemics of grog and drugs in the centre of these children’s lives.

The evidence and experience in Cape York—including as reflected in Noel Pearson’s original grog and drugs outline for Cape York, and Cape York Institute’s submissions to multiple inquiries of the Productivity Commission—demonstrates that this is precisely backwards.<sup>8</sup> Addiction has become a condition in its own right. The epidemics perpetuate themselves, reshape culture and social relations to their own purposes, and overwhelm any service response that isn’t a direct attack on substance abuse and passive welfare.<sup>9</sup>

It is also necessary to confront a second comfortable illusion that is pervasive: the idea that the State’s role with respect to these children is merely “residual”.

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<sup>6</sup> *Royal Commission into Aboriginal Deaths in Custody, National Report*, 1991, esp. Vol. 2–3, which emphasised the role of historical dispossession, poverty and structural disadvantage but did not set out a direct program to tackle substance-abuse epidemics as drivers of ongoing harm.

<sup>7</sup> T. Anthony, *Indigenous People, Crime and Punishment*, 2013, and D. Weatherburn, *Arresting Incarceration: Pathways Out of Indigenous Imprisonment*, 2014, for expositions of approaches that treat offending and substance abuse primarily as symptoms of deeper structural causes. Cape York Institute, *Further Submission to the Queensland Productivity Commission Inquiry into Imprisonment and Recidivism* (see Appendix A), which critiques symptom-based approaches and sets out an epidemic model of substance abuse and violence.

<sup>8</sup> N. Pearson, “Outline of a Grog and Drugs Strategy for Cape York Peninsula,” paper prepared for Cape York communities, 2001, arguing that alcohol and drug epidemics are self-perpetuating and must be directly targeted rather than treated as secondary symptoms.

<sup>9</sup> *Ibid.*, and Cape York Institute, *From Hand Out to Hand Up: Cape York Welfare Reform Project*, 2007, describing alcohol and drug use as psychosocially contagious epidemics that restructure norms, relationships and behaviour, and arguing for direct interventions on supply and passive welfare settings.

In theory, families have primary responsibility, and the State steps in only when things go wrong. In reality, government decisions have formed the environment in which these families raise their children: decisions about alcohol availability and licensing, about welfare payments and conditionality, about schooling, disability identification, housing and policing. When children die and are maimed on Queensland's roads, the State does not content itself with pamphlets about parental responsibility. It mandates seatbelts, low blood-alcohol limits, redesigns roads and vehicles, and enforces these measures. Society accepts that government has a formative role in safety, not a residual one. Yet when Indigenous children are killed, injured and damaged by the grog and drug economy around them, we retreat into talk of adult choice and a supposed "right to drink", and dispatch child-safety officers downstream to pick up the pieces.

In 2013 Carmody warned that, on then-current trends, more than half of Queensland's children in out-of-home care would be Indigenous. That prediction has now come to pass.

For two decades Cape York Institute has argued for the need for a different approach to address entrenched disadvantage at the bottom—we have seen firsthand that real change comes when responsibility and opportunity are deliberately joined so capability builds.

The Cape York Welfare Reform trial (2008-2012), the Family Responsibilities Commission and associated opportunity programs have shown that when families are held to clear expectations and given real, practical and supported opportunities—to manage money, educate their children, improve their homes and find work—norms can shift and lives can change.

The formula of responsibility plus opportunity has been tested in some of the hardest communities in the country—and shown to be transformative when it is properly supported.

The implication is clear: the Commission must insist on a different ordering of responsibility.

Firstly, Aboriginal and Torres Strait Islander families must accept, and be enabled to exercise, their responsibilities to care for, protect and raise their children free from violence, neglect and abuse. Those responsibilities are not optional, and they are not excused by history.

Secondly, the State must accept its full responsibility for the environment in which those families live. It cannot plausibly claim to be a residual actor when its laws and policies have supply essential conditions for substance-abuse epidemics<sup>10</sup>—passive income, idle time, availability, and a permissive ideology—around Indigenous children. Nor can it maintain a posture of helplessness in the face of a tertiary child-protection industry it finances and designs.

In policy terms, this means three things.

1. Queensland must hold the line and go further on Alcohol Management Plans and related supply-reduction measures, treating alcohol and drugs as the central proximate drivers of the child-protection disaster rather than as peripheral "risk factors". The perceived right to

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<sup>10</sup> Nils Bejerot's epidemic model of alcohol and drug use identifies five enabling conditions: unearned income, idle time, easy availability, modelling of heavy use, and a permissive ideology.

drink cannot continue to trump the right of Indigenous children to safety, sleep, food, education and mental health.

2. The State must move beyond a purely voluntary, referral-based model of family support. Parents must be offered structured support and, where necessary, required to participate in it—attendance at parenting programs, engagement with alcohol and drug treatment, and cooperation with school attendance plans cannot remain optional extras at the very point children’s safety is at stake.

This is where a properly empowered Family Responsibilities Commission model in the child-protection space becomes essential. Notifications from child safety, police, schools and housing should operate as triggers to bring parents before respected Local Commissioners, who can put in place binding Family Responsibility Agreements and orders, backed by case management, income-management powers and clear consequences if parents refuse to engage.

The principle must be responsibilities-plus-opportunities: the State undertakes to provide intensive, practical support, but parents are not permitted to stand aside from their own obligations while the system raises their children.

3. These expectations must be underpinned by concrete options for families to stabilise and rebuild their lives in their own communities. That requires the development of in-community, on-Country residential care options where parents and children can live together for defined periods in a structured, supportive environment. Such facilities would combine safe accommodation, daily routines, therapeutic and disability support, alcohol and drug treatment, and hands-on parenting coaching, with a clear pathway back into ordinary community life. They must not be warehouses for children, or another layer of the tertiary industry, but temporary, intensive platforms for parents who are willing—or can be compelled—to step up.

Within this framework, a mandated Personal Responsibility and guaranteed Opportunity approach for the Bottom Million children becomes a real and practical necessity: income support, schooling, housing and employment opportunities tied to clear behavioural conditions and backed by real and guaranteed help to meet them—rather than to the continuation of passive welfare and despair. Without this combination of structured support and mandatory responsibility, delivered as close as possible to where families actually live, even the best-designed empowerment and development structures will be overwhelmed by the existing epidemics and the crisis in child protection will continue to deepen.

The Commission stands at a familiar fork in the road. It can produce another report that faithfully recites the history of trauma, recommends more programs, invokes “partnership” in the abstract, and leaves intact the policy settings that have grown this crisis over 30 years. Or it can confront the hard questions about the primacy of substance-abuse epidemics and passive welfare in driving Indigenous child protection crisis, about the real distribution of responsibility between families and the State, and about the structural reforms needed to give local Indigenous authority and Queensland’s own institutions the tools to change behaviour and change the environment. The Cape York Institute urges the Commission to choose the harder path.

## The damage to Cape York’s Indigenous children

### Far North Queensland: the epicentre of the child safety crisis for First Nations children

Queensland now stands in open breach of its duty of care to Indigenous children. The Department of Child Safety, Seniors and Disability Services’ own statistics confirm that Far North Queensland (FNQ) is not just another troubled region. It is the epicentre of Queensland’s child safety crisis for Aboriginal and Torres Strait Islander children.

From first contact through to removal, children in FNQ are drawn into statutory processes at substantially higher rates than other Queensland children. FNQ children make up only around 6 per cent of Queensland’s child population (68,456 out of approximately 1.22 million), yet in 2023-24 the region generated 10,951 intakes – around 8 per cent of all concerns received by the Department—and 1,183 children in out-of-home care, close to 10 per cent of the state’s in-care population. On a rate basis the disparity is sharper: FNQ’s intake rate sits at about 160 per 1,000 children, compared with about 117 per 1,000 statewide, and the FNQ “in care” rate is 17.3 per 1,000 children, versus 10.0 per 1,000 across Queensland.<sup>11</sup>

Within this picture, Aboriginal and Torres Strait Islander children are bearing the greatest weight. Across Queensland, Indigenous children are about 9 per cent of the child population—but they make up around a quarter of all children notified to child safety, and just over half of all children in care.<sup>12</sup> FNQ dramatically intensifies that over-representation: departmental breakdowns show that FNQ is responsible for roughly one-third of all Indigenous notifications in Queensland, about 20 per cent of all Indigenous children in care, and around 20 per cent of Indigenous children where harm has been substantiated. An Aboriginal or Torres Strait Islander child growing up in FNQ—and especially in the Cape York communities—is therefore significantly more likely than an Indigenous child elsewhere in Queensland to be notified to child safety, to have harm substantiated, and to be removed from family and community.

For many Cape York families, it is now more common to have children or grandchildren in the child-protection system than to have none at all. This devastating reality is reshaping what childhood looks like in our communities.

Queensland’s own child-rights reporting shows that disability is now a core part of this burden. QFCC finds that children and young people with disability are significantly over-represented across child protection and youth justice, yet remain under-identified and under-supported in early childhood education and school, with particularly poor access for Aboriginal and Torres Strait Islander children and those in rural and remote regions. It highlights that large numbers of

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<sup>11</sup> [Department of Child Safety, Seniors and Disability Services, Family support services and child protection summary statistics, Far North Queensland region, 30 June 2024](#)

<sup>12</sup> Queensland Family and Child Commission, *Queensland Child Rights Report 2025*, chapters on “Alternative care” and “Disability, health and welfare”, especially pp. 96–100, on over-representation of children with disability in child protection and youth justice and under-identification in early childhood and school; Queensland Family and Child Commission, *Annual report on the performance of the Queensland child protection system 2022–23 (2025)*, highlighting links between developmental vulnerability, school exclusion and later system contact.

Queensland children start school each year with developmental vulnerability, have low attendance and experience high rates of suspension and exclusion, patterns that are closely linked to later contact with child safety and the justice system.<sup>13</sup> In FNQ and Cape York, this means the same Indigenous children who are most likely to be notified, substantiated and removed are also those most likely to carry undiagnosed cognitive and social-emotional disabilities.

The system waits for crisis rather than investing early to prevent damage from compounding and to build capabilities—yet it is precisely this early stage that we must reach, and can, through structured responsibility mechanisms like the Family Responsibilities Commission, with school attendance as a primary, non-punitive trigger for family support.

The statistics must be understood in the context of the distinctive social conditions in Cape York—entrenched employment, the prevailing system of passive welfare, the epidemic of alcohol and drug abuse, and the breakdown of social norms around parenting, safety and schooling.

Alcohol is a major precipitating cause of child removal on the Cape, repeatedly identified by inquiries and research as a primary trigger for family violence, child abuse and neglect; children miss out on food and sleep because scarce family resources and adult attention are captured by grog and other addictions.<sup>14</sup>

Cape York people have asked for governments to recognise that in Cape York where the labour market collapsed more than three decades ago, coinciding with the availability of unconditional income support, and this has created a “welfare pedestal”, encouraging long-term dependency, low participation in the real economy, and an environment marked by high rates of violence, incarceration and harmful drinking—conditions in which social norms about caring for children are in short supply.

In this environment, many parents have not had the opportunity or support to learn what safe, responsible parenting looks like, and service systems too often normalise dysfunction rather than challenge it. Previously Queensland publicly reported alcohol-related harm data for AMP communities, including assaults and injuries, making it possible to track the relationship between alcohol supply, violence and child harm. That public reporting has largely ceased, and

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<sup>13</sup> Queensland Family and Child Commission, *Queensland Child Rights Report 2025*, especially pp. 96–100 on over-representation of children with disability in child protection and youth justice and under-identification in early childhood and school; QFCC, *Annual report on the performance of the Queensland child protection system 2022–23 (2025)*, highlighting links between developmental vulnerability, school exclusion and later system contact.

<sup>14</sup> *Royal Commission into Aboriginal Deaths in Custody, National Report (1991)*; Fitzgerald, Tony. *Cape York Justice Study (2001)*, Queensland Government; N. Pearson, “Outline of a Grogs and Drugs Strategy for Cape York Peninsula” (2001); Cape York Institute, *Submission to the Queensland Child Protection Commission of Inquiry (2013)*. All identify alcohol-fuelled violence and neglect as major drivers of child harm and removals in Cape York. See also C. West et al., “Have Alcohol Management Plans Reduced Violence Against Women in Cape York, Australia?”, *Violence Against Women (2018)*, analysing alcohol-related injuries and assaults before and after AMP implementation.

child-protection data are not routinely broken down by alcohol involvement, so the full link between alcohol policy decisions and child removals continues to be obscured from public view.<sup>15</sup>

The child protection data show how these social conditions and system settings interact in FNQ. Despite the presence of Wellbeing and Family Support services, FNQ still records higher intake and care rates than the rest of the state, and a disproportionate share of substantiated harm. The pattern is that statutory intervention comes late, children are removed at high rates, and reunification is rare—especially when children are placed away from Cape York in Cairns and other regional centres. The result is a dense concentration of notifications, investigations, substantiations and removals in one small region at the tip of the state, and a pattern of family separation that radiates harm through extended kin networks and across generations.

There is a direct connection between FNQ child protection concentrations and downstream detention and incarceration. FNQ accounts for around 8 per cent of all intakes, 8 per cent of substantiations and 10 per cent of all children in care in Queensland, despite having only about 6 per cent of the state's child population, with Indigenous children carrying a disproportionate share of this caseload. Earlier Cape York Institute work has highlighted that children who enter out-of-home care—particularly when they are placed away from their communities, cycle through multiple placements and disengage from school—putting them on a well-trodden pathway into the youth justice system and, in turn, adult incarceration.

The key proximate driver of this imprisonment crisis is offending, and in particular the intolerable rates of serious violence that Aboriginal and Torres Strait Islander people inflict upon one another, usually in circumstances where alcohol or other drugs are involved. The ultimate drivers sit in the social environment created by long-term passive welfare, intergenerational unemployment, the alcohol epidemic and the breakdown of social norms around parenting, safety and schooling, compounded by a service system that too often normalises dysfunction and intervenes late. FNQ, and Cape York in particular, concentrate these drivers: alcohol remains a major precipitating cause of child removal and serious injury; passive welfare and joblessness have entrenched dependency and weakened parental responsibility; and the child protection response has been dominated by removal into care rather than early engagement that couples responsibility with real opportunities to change. The result is a pipeline in which an Indigenous child from FNQ is more likely than an Indigenous child elsewhere in Queensland to be notified, substantiated, placed in care, disconnected from family and community, drawn into youth justice and ultimately into adult prison.

These realities show that the over-representation of Indigenous children is not evenly spread across Queensland. It is geographically concentrated in the Far North, where passive welfare, alcohol dependence, unemployment and weak social norms have created the conditions for chronic child harm, and where the state's response has overwhelmingly been to remove

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<sup>15</sup> Cape York Institute. *Submission on Aurukun Shire Council's Proposal for a Trial Alcohol Event*. 24 May 2019.

children rather than to rebuild parental responsibility backed by real and guaranteed opportunities that build capabilities.

The same evidence identifying FNQ as the crisis epicentre also points to the path forward. Lessons from the Cape York Welfare Reform trial and the Family Responsibilities Commission show how a responsibility-plus-opportunity approach—tackling alcohol, welfare dependency and social norm breakdown, engaging parents early with support, and interrupting the pipeline from child protection into youth justice and adult imprisonment—can provide the upstream focus required so statutory intervention becomes the last resort rather than the main tool.

For a Commission of Inquiry charged with uncovering the truth about child safety in Queensland, these data demand a clear conclusion: any serious attempt to resolve the state-wide crisis must place FNQ, and particularly Cape York, at the centre of its analysis and remedies. Reforms that do not reckon with the fact that this small region accounts for a third of Indigenous notifications, a fifth of Indigenous children in care and among the highest intake and care rates in the state—and that these patterns are bound up with passive welfare, alcohol dependence, unemployment and social norm collapse, and feed directly into the imprisonment crisis—will leave the epicentre of the crisis untouched and the most vulnerable families and communities carrying the greatest load.

### **The scale of damage to First Nations children**

For at least two generations, governments have allowed an “implicit policy of avoidance and neglect” toward the physical, cognitive, social and emotional disabilities of First Nations students in Cape York and the Torres Strait, despite “mountains of evidence of intergenerational disadvantage and compromised life outcomes”. As Noel Pearson and colleagues put it in [\*We're Black – we don't matter: report on disability in Cape York\*](#), in 2019 the system has in effect “avoided looking under the rock” so that the State does not have to diagnose Indigenous children’s disabilities and accept the resourcing obligations that follow, a failure likely amounting to “institutional—even if unintended—racial discrimination” and a serious breach of Australia’s human-rights obligations.

In 2014–15, the Cape York Aboriginal Australian Academy commissioned what remains the most comprehensive developmental assessment ever undertaken in remote Queensland Indigenous schools, led by clinical psychologist Dr Jeff Nelson with co-assessment and verification by Associate Professor Corinne Reid’s Western Australian team, supported by the Royal Flying Doctor Service. Using Education-Queensland-recognised gold-standard tools such as the DAS-II, NEPSY-II, BRIEF and SSIS, and triangulating test results with teacher reports and observation, they found that in two of three Cape York communities “roughly one quarter of students met the criteria for diagnosis of intellectual impairment” and Education Queensland verification, with a further 42 per cent in the ‘borderline’ range of cognitive functioning. Against an Australian child-population benchmark of 3–4 per cent with intellectual disability, and a national Indigenous adult estimate of about 8 per cent, this constitutes an “extraordinarily high” concentration of cognitive impairment among Cape York children.

The age pattern in these data is even more alarming. When the cohort was split into thirds by age, the older children were significantly less cognitively proficient than the younger ones, with all differences statistically significant at between  $p < 0.001$  and  $p < 0.004$ . The authors conclude

that this likely reflects compounding early-life impairment, continued exposure to “difficult life environments and experiences” and schooling that is “not supporting age-typical levels of knowledge and skill acquisition,” and they emphasise that intervening at younger ages is “likely to be more effective than either not intervening or intervening at an older age.” In plain terms, the longer children stay in the current system, the further they fall behind their peers.

The same assessment program found “very high rates of Social and Emotional Disorders, such as Conduct Disorder, Oppositional Defiance Disorder and PTSD” among Cape York students, with profiles differing markedly between communities. International longitudinal evidence shows that such clinically significant conduct problems in childhood almost never come alone. They are commonly accompanied by attention deficits, low measured intelligence, academic underachievement, depression and anxiety, early substance use and, in adolescence, “early sexual behaviours and teenage pregnancy, early onset alcohol and substance abuse and dependence, serious school problems including suspension, truancy and school drop-out, and the development of mental disorders including depression, anxiety disorders and suicidal behaviours”. It is this dense cluster of co-morbidities that drives the later pipelines to youth detention, sexual offending and adult incarceration.

As Cape York Institute has highlighted, this is “not a theoretical risk profile—it is a very real, longstanding, and fully visible risk” in Cape York classrooms.

*We’re Black – we don’t matter* details how these developmental burdens sit inside an extreme social-risk environment. Using evidence from national suicide-mapping, Indigenous suicide-prevention research and the Australian Youth Development Index, it shows that communities in Cape York and the Torres Strait fall into “the category of the very highest rates of suicide when considered by postcode across the country”, and that “the rate of suicide among young Indigenous men in Australia is the highest in the world.”<sup>16</sup> Combined with national studies of violence in Indigenous communities, population-level mental-health surveys in Cape York and international conflict-zone research, this evidence points to “very high levels of children’s exposure to violence and traumatic events” that are reshaping children’s brains and developmental trajectories in ways that gravely impede learning.<sup>17</sup>

The report compiles a dense literature on risk factors that are all disproportionately concentrated in Indigenous populations—including prenatal stress, poor nutrition, poverty, foetal alcohol spectrum disorders, acquired brain injury, early childhood trauma, serious parental mental illness and substance misuse—and points out that each of these causes

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<sup>16</sup> Cape York Institute, *We’re Black - we don’t matter*, draws on Telethon Kids Institute suicide-mapping work, the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project (ATSISPEP) and the Australian Youth Development Index to identify Cape York and Torres Strait communities as among the highest suicide-rate postcodes in Australia, and to characterise suicide among young Indigenous men as among the highest in the world.

<sup>17</sup> *Ibid.*; Memmott et al., national study of violence in Indigenous communities for the Commonwealth Attorney-General’s Department; Hunter et al. (2001) population-level mental-health surveys in Cape York; and international conflict-zone research, all documenting very high levels of children’s exposure to violence and traumatic events and their impacts on brain development and learning.

(prenatal insult, trauma, toxic stress) and effects (mental illness, social disengagement, incarceration, homelessness) has a higher prevalence among Aboriginal and Torres Strait Islander people than among non-Indigenous Australians. On that basis, Cape York Institute argues that even without perfect prevalence estimates, it is “utterly predictable” that Cape York and Torres Strait communities will have a “very high concentration of special needs” and will require “special responses” through education, health and disability systems. Yet Education Queensland has not built those responses. Instead, as the report documents, severely disabled children remain “effectively hidden” in overcrowded houses, schools in some communities are not even wheelchair accessible, and principals and teachers candidly report that in the communities with the greatest need, “the resources provided in support feel like they are effectively zero.”

Dr Ernest Hunter’s work provides the psychiatric and epidemiological counterpart to this educational and developmental picture.

Over three decades working in Cape York and the Torres Strait, he and colleagues have shown that treated psychosis rates in the region are among the highest recorded for any population in Australia. In a 2012 *Medical Journal of Australia* paper and later work, Dr Ernest Hunter and co-authors document that the treated prevalence of psychotic disorders in remote Indigenous communities of Cape York and the Torres Strait is around five times the Australian rate, with Aboriginal men in their 30s bearing the highest burden. The comprehensive analysis—a 23-year cohort study published in *EClinicalMedicine* by Gynther, Charlson, Hunter and colleagues—reports that between 1992 and 2015, 424 Indigenous adults in the region were treated for psychosis, with an age-standardised 12-month treated prevalence of 1.7 per cent in 2015. At that point, Aboriginal men had a treated prevalence of 4.0 per cent, approximately twice the rate for women and about three times that for Torres Strait Islander people, and Aboriginal people with psychosis were dying at roughly 2.6 times the rate of the broader Indigenous Queensland population.

In his 2013 paper “*Indicators of psychoses or psychoses as indicators*,” Dr Ernest Hunter explicitly joins the dots. He argues that the increased risk of psychosis among young Aboriginal adults in Cape York from the late 1990s “probably results from compromised neurodevelopmental environments associated with and following the period of dramatic change and social chaos (including alcohol being made available) from the early 1980s,” and that “subsequent and persistent social adversity” has exposed Aboriginal children in Cape York to “broad-ranging adversity from pregnancy through childhood” on a scale very different from non-Indigenous or Torres Strait Islander children. Citing Read and Bentall’s work on the interaction between childhood trauma, heavy cannabis use, genetic vulnerability and epigenetic processes, he contends that psychosis in these populations is both a consequence of that policy-driven upheaval and a powerful indicator of the underlying pattern of social disadvantage, violence and disrupted authority.

This evidence is crucial. The extraordinarily high rates of psychosis, intellectual impairment and social-emotional disorder among Cape York children and young adults are not free-floating misfortunes. They are the imprint of a specific policy environment on the brains and lives of a specific cohort of Aboriginal children.

Later criminal-justice analysis reinforces how these childhood injuries are playing out in offending and incarceration. In its 2019 *Further Submission to the Queensland Productivity Commission's Imprisonment and Recidivism Inquiry*, Cape York Institute notes that Indigenous Australians comprise about 3 per cent of the national population but 27 per cent of the prison population, making true the *Uluru Statement from the Heart's* description of First Nations people as “the most incarcerated people on the planet.”<sup>18</sup> It highlights that the rate of Indigenous incarceration increased by 45 per cent between 2008 and 2018, despite three decades of inquiries and reforms since the *Royal Commission into Aboriginal Deaths in Custody*, and points out that in Queensland the rate of Indigenous children in out-of-home care tripled in the decade prior to the Carmody report, with Indigenous children becoming at least 54 per cent of those in juvenile detention and soon to exceed 50 per cent of all children in care. Cape York Institute explicitly links this to the “dense causal pathways” already mapped in *We're Black – we don't matter*: high levels of intellectual disability and social-emotional disorders in childhood, combined with exposure to violence, parental mental illness, alcohol and drug misuse, poor schooling and early contact with the child-protection and youth-justice systems, feed a “major pipeline” into adult prison.<sup>19</sup>

Across these strands of evidence, three reputedly documented facts stand out.

- First, in some Cape York communities approximately one quarter of students meet criteria for intellectual impairment and about 42 per cent more fall into the borderline range, with older cohorts showing worse cognitive profiles than younger ones – a pattern completely unlike the broader Australian population.
- Second, Indigenous adults in Cape York and the Torres Strait are living with treated psychosis at rates around five times national levels, with Aboriginal men in their 30s at about 4 per cent prevalence, facing nearly double the mortality of their Indigenous peers.
- Third, these cognitive and psychiatric burdens are located in communities with the highest child-exposure to violence and trauma, the highest youth suicide rates in the country (and some of the highest in the world for young Indigenous men), and rapidly escalating rates of child removal and incarceration.

### **Substance abuse: the proximate cause**

The starting point is uncompromising: grog, cannabis and now ice have become the everyday instruments by which already fragile families are shattered, children are traumatised and communities are rendered ungovernable.<sup>20</sup> There are so many Indigenous people in prison, for example, because there is so much offending, and that offending is overwhelmingly driven by

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<sup>18</sup> Cape York Institute, *Further Submission to the Queensland Productivity Commission Inquiry into Imprisonment and Recidivism*, 2019, summarising national data on Indigenous over-representation in prison and trends in Indigenous incarceration – see Appendix A

<sup>19</sup> *Ibid.*, and Cape York Institute, *We're Black – we don't matter*, maps dense causal pathways from childhood disability, trauma and system contact into adult imprisonment.

<sup>20</sup> Cape York Institute, Submission (2019)– Appendix A

alcohol and drugs, especially serious violence committed when people are drunk, stoned or both. To deny this is to obscure the problem and to guarantee that our policy responses will continue to fail.

Alcohol has been the longest-running and most damaging epidemic. When the Queensland Government authorised alcohol canteens and take-away sales in former mission and reserve communities from the mid-1980s, it created a new public economy in which local administrations became financially dependent on drinkers and the social order of small settlements was overturned by grog-fuelled violence. Heavy alcohol consumption was quickly associated with soaring rates of assault, injury and trauma evacuations, and with the emergence of paranoid ideation, hallucinations and overwhelming fear among Aboriginal drinkers in remote regions. The subsequent introduction of Alcohol Management Plans from 2004, which restricted or banned sales in most Cape York communities, led to marked reductions in serious physical trauma and psychiatric evacuations, demonstrating that supply reduction can immediately change the level of harm. But the underlying dependence did not disappear; it adapted.<sup>21</sup>

Cannabis has quietly entrenched itself as the second great epidemic. In Cape York Aboriginal communities, cannabis use went from being rare in the early 1990s to being implicated in 60–70 per cent of new psychosis cases by the late 2000s, often in combination with alcohol. Longitudinal research in remote Indigenous populations shows high prevalence, strong associations with depression and psychotic symptoms, and a widespread but frustrated desire among users to quit. International evidence confirms that adolescent cannabis use increases the risk of psychosis, and that cannabis-induced psychosis frequently converts to schizophrenia in young people. In these communities, cannabis is not a harmless recreational drug; it is a psychotogenic agent poured onto brains already shaped by trauma, neglect, malnutrition and violence.

Methamphetamine or “ice” is the latest and most terrifying wave. Precise prevalence data are sparse, but clinical services in Far North Queensland now routinely record stimulant-induced psychotic states on top of existing alcohol and cannabis use disorders, with attendant surges in impulsive violence and suicidal behaviour. Ice differs from grog and cannabis in its speed and ferocity. It can deliver florid psychosis within days, transform petty offenders into terrifyingly unpredictable assailants, and overwhelm the limited police and health resources of small communities. When layered onto an already damaged neurodevelopmental foundation, ice is an accelerant for catastrophe.

Violence is the behavioural expression of this multi-substance epidemic. In Queensland, almost half of Indigenous custodial sentences arise from acts intended to cause injury and unlawful entry, with a substantial proportion linked to alcohol consumption. Across Cape York and the Torres Strait, suicide, injury, hospitalisation, arrest and conviction rates co-vary with measures of social breakdown, indicating that violence is not an aberration but a system-wide response to chronic disorganisation and loss of control. Researchers have shown how the

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<sup>21</sup> Martin, “The Supply of Alcohol in Remote Aboriginal Communities” (1998); Clough & Bird, “Alcohol Management Plans in Queensland Indigenous Communities” (2015).

introduction of alcohol into DOGIT communities destabilised child-rearing environments, diverted scarce resources from food and care to grog, and exposed children to repeated trauma – conditions now known to increase the risk of later psychosis and serious mental illness. In this sense, the epidemics of grog, cannabis and ice are not merely co-morbidities of Indigenous disadvantage, they are among its most important proximate causes, writing disadvantage into bodies and brains and then expressing it outward as offending.<sup>22</sup>

### **Why passive welfare (and grog) is the diagnosis**

If grog, cannabis, ice and violence are the key proximate drivers of the devastation of Indigenous families, the deeper structural diagnosis is the long entrenchment of passive welfare, supercharged by easy alcohol and now by gambling.

The *Royal Commission into Aboriginal Deaths in Custody* correctly identified disempowerment as the ultimate cause of Indigenous over-representation, but it failed to specify a method for empowerment, leaving in place a system in which Indigenous livelihoods are almost entirely dependent on government payments and services. Over decades this has produced “passive welfare”—a predominant public economy in which income flows into communities regardless of behaviour, and in which neither government nor families effectively enforce the social responsibilities that must accompany rights.<sup>23</sup>

In this regime, regular welfare payments meet uncontrolled access to alcohol and, increasingly, gambling products. This combination has proved devastating for children.

Cape York Institute’s submission to the Carmody Inquiry emphasised that parental substance abuse, welfare dependency and entrenched breakdown of social norms are fundamental causes of child harm in Queensland’s Indigenous communities, with alcohol in particular “a major precipitating cause of child removal” as pay-day binges trigger violence, neglect and the diversion of scarce household resources from food, clothing and schooling to grog and drugs. In real terms this looks like children missing meals because the week’s money has gone through ‘social club’, to sly grog or drug dealers, pokies, backyard gambling circles (cards), or online betting. Children are deprived of sleep, in overcrowded homes, or left with elderly relatives, while parents drink or gamble.

Passive welfare has become a structural cause of dysfunction. In Cape York, most household income arrives as government transfers ‘without conditions or expectations’, and over decades this has created what one Cape York grandmother called the ‘welfare pedestal’ an artificial economy where money comes ‘for nothing’ and is spent without principle. In this gammon economy, there is no need to use a day to build something that lasts or to turn a dollar into an investment; instead, welfare payments fuel four-night binge cycles, with party houses, bucket bongos, fights, children wandering the streets at 3am, and school attendance collapsing on Fridays. Over time, passive welfare has corrupted Aboriginal values of responsibility and

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<sup>22</sup> Cape York Institute, *We’re Black - we don’t matter*; Cape York Institute, *Further Submission to the QPC Imprisonment and Recidivism Inquiry* (2019) – see Appendix A.

<sup>23</sup> Cape York Institute, *From Hand Out to Hand Up: Cape York Welfare Reform Project Design Report* (2007)

sharing, turning obligations to care for children and old people into obligations to buy grog and surrender income to drinkers, while non-drinkers are left to feed everyone when the money is gone.

At the bottom, a welfare state that works reasonably well for most Australians becomes a machinery of permanent exclusion from employment—trapped in the Bottom Million. In places like Cape York this policy-engineered joblessness combines with passive welfare to unravel social norms, corrode family responsibility and produce the predictable harvest of child neglect, violence, incarceration and early death.

The social consequences are visible in every indicator. The rate of Indigenous children in out-of-home care in Queensland tripled in the decade before the Carmody report, and Indigenous children are on the cusp of becoming a majority of all children in care despite being a small share of the child population. Indigenous young people are around 26 times more likely than non-Indigenous youth to be in detention, with child safety involvement forming a clear pipeline into juvenile custody and then adult prison.

Gambling—through gambling circles poker machines in regional hubs and online betting—is the silent partner in the passive welfare story. Welfare income that might otherwise feed and clothe children is surrendered on paydays, leaving children hungry and homes volatile until the next transfer arrives. Together with grog, gambling completes the circuit: money flows from government to individuals, to predatory enterprises, to shareholders and state treasuries, while the costs are borne by children, women, elders and the most vulnerable.

## **The industry it has created**

Queensland's response to Aboriginal and Torres Strait Islander children has become an industry in its own right. Budgets rise, staff numbers grow, compliance frameworks become more sophisticated, yet the underlying drivers, alcohol and drug abuse, passive welfare and the collapse of social norms, remain largely untouched.

The state funds a dense ecology of services—statutory child protection, out-of-home care, Safe Houses and residential care, kinship care payments, therapeutic programs, youth detention centres and adult prison—whose core business is to manage the consequences of family and community breakdown in places like Cape York. It does not get upstream to address them.

Cape York Institute's evidence to the Productivity Commission on imprisonment and recidivism laid bare the scale of this apparatus. At the time of that submission Queensland was already spending more than \$700 million a year on Child Safety and planning to exceed 1 billion; recent figures now show residential care alone is costing just under \$1 billion a year, with the government warning of a half-billion-dollar budget blow-out in 2024–25. Official data put the average cost of residential care at about \$1,360 per child, per night, with more than 2,000 children in residential placements as at September 2024. Economic modelling by the Queensland Family and Child Commission finds residential care costs have already ballooned from around \$200 million in 2015 to \$1.12 billion in 2024 and, without reform, could reach \$7 billion a year by 2030 as an additional 5,000 children enter out-of-home care and 4,000 of them are placed in residential care. Out-of-home care is the main cost driver in Queensland's child

protection system, and Cape York Institute estimates placement costs at roughly \$250,000 per child per annum once full service and overhead costs are taken into account. On top of this, Queensland spends over 1 billion annually on Corrections, with each adult prisoner costing approximately \$111,000 a year in direct operating costs and a further \$48,000 in indirect and capital costs. Cape York Institute calculates that a single Indigenous child who moves from statutory care into youth detention and then adult prison can easily consume more than \$1 million in lifetime system costs.

National data collated by SNAICC and the Productivity Commission show the skew in spending: in recent years, only around 15–16 per cent of recurrent child protection expenditure has gone to family support and intensive family support, with more than 80 per cent directed to statutory intervention and out-of-home care, meaning barely 16 cents in every dollar is invested in keeping families together and children safely at home. QFCC’s 2026 Child Rights Report reinforces this picture, with external evaluators again urging much greater investment in early intervention and prevention rather than expanding high-cost residential care.<sup>24</sup>

Residential care is not only one of the most expensive parts of the system but it’s failing to provide safety, stability and therapeutic care, compounding trauma instead of healing it. On the current trajectory, Queensland faces a multi-generational crisis of cost, harm and lost potential as more children are pulled into an increasingly residentialised industry.

The human story behind these figures is grim. Cape York Institute told Carmody that “far too many” children from Cape York communities have been removed and placed in care, and “far too few” are ever reunified with their families. Once removed, children are typically placed in Cairns or other regional centres, far from their home communities and cultures, and they “rarely return”. The outcomes for these children are “devastatingly poor”. Placement instability, poor educational attainment, homelessness, early parenthood, mental illness, substance misuse and a high likelihood of later contact with the criminal justice system. Teenage boys known to Cape York Institute prefer detention over out-of-home care. In this way the child protection and youth justice systems do not interrupt the pathway to prison, they pave it.

More than half the children inside this billion-dollar apparatus are Aboriginal and Torres Strait Islander. The rate of Indigenous children in out-of-home care in Queensland tripled in the decade before Carmody, and Cape York Institute warned that “very soon” more than 50 per cent of children in care would be Indigenous—a projection that has effectively been realised. Indigenous young people are 26 times more likely to be in youth detention than their non-Indigenous peers, and they are heavily over-represented in adult prisons.

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<sup>24</sup> Cape York Institute calculations using Queensland budget papers and Queensland Productivity Commission materials on child protection and corrections, together with Queensland Government media statements on residential care funding (Amanda Camm, Half a billion dollar residential care budget blow out, 10 December 2024) and QFCC modelling of residential care costs (QFCC, Modelling forecasts looming financial crisis for residential care, 2025), and SNAICC and Productivity Commission analysis of national child protection expenditure.

Queensland has built a large, professionalised system around Indigenous children as objects of management, rather than investing comparable effort and resources in empowering the families and communities who should be raising them.

This is a child protection industry.

The industry is not a conspiracy of bad individuals, it is the structural result of decades of policy that has preferred tertiary, forensic intervention over primary prevention and community-led responsibility. Carmody himself concluded that Queensland had “historically under-invested in primary and secondary services” and over-invested in statutory responses, leaving Indigenous families with little help until the situation deteriorated to the point where removal was the only tool left. Cape York Institute points out that government’s response to entrenched disadvantage has been to “double down on the orthodox approach”—more services, more coordination, more after-the-fact responses—rather than to change the underlying welfare and service systems that are failing those most in need.

From an Indigenous perspective, the perversity is stark. The state will spend hundreds of thousands of dollars per year to keep a child in “resi-care”, and later more than \$150,000 per year to keep that same child behind bars as an adult, but it will not invest a fraction of that amount in the structural reforms that would allow parents to be held to account, to get sober, to work, to secure decent housing and to raise their children well in their own communities.

Reforms have shown promise—such as the Family Responsibilities Commission, income management linked to school attendance and child safety, parenting programs embedded in Opportunity Hubs. Yet Queensland does not hunt for success and then scale it. These reforms remain poorly understood, confined to a handful of communities, vulnerable to political changes, and have not been integrated into a coherent development paradigm across the state.

The industry itself becomes self-perpetuating. As more Aboriginal and Torres Strait Islander children are removed into care, and as they in turn become over-represented in youth detention and prison, demand for the services and infrastructure of the system grows. Each failure at the level of family and community responsibility is converted into new positions for caseworkers, more contracts for NGOs, more beds in resi-care and detention, more capital programs for secure facilities. Meanwhile the people whose lives are being administered in this way—Indigenous children and their parents—remain largely without power over the decisions that shape their futures, and without the structural supports they would need to exit the cycle of passive welfare, grog and institutionalisation.

## **Thirty years of failure: Forde to Carmody**

For almost three decades Queensland has been failing in its attempts to reform child protection and youth justice, yet Aboriginal and Torres Strait Islander children are more deeply entangled in these systems than ever. Over this period, Queensland has produced major child protection inquiries—Forde and Carmody—but for Indigenous children these have largely become headstones in a graveyard of reform attempts rather than turning points. Each recognised that Queensland had under-invested in prevention and early intervention and over-relied on

statutory, tertiary responses—and each promised to rebalance the system. Neither altered the structural conditions that determine trajectory for Indigenous children.

### **Forde: exposé without structural change**

The Forde Inquiry did vital work in exposing the historical abuse and systemic neglect of children in Queensland institutions. It shone a harsh light on the culture of closed institutions, on the cruelty perpetrated in orphanages and detention centres, and on the failures of state oversight. It was, in that sense, a necessary reckoning. But it was not a structural re-imagining of how Queensland should keep children safe.

Forde’s recommendations led to re-badging departments, tightening regulations, introducing new standards, beefing up complaint mechanisms and improving training and screening. The system became more procedurally sophisticated and more risk-averse. Yet the basic model remained—a centrally controlled, crisis-driven statutory system that intervenes late, removes children and manages them in state-funded placements. Indigenous over-representation, already stark at the time, was acknowledged but not confronted as a structural problem requiring a new architecture of authority and responsibility.

The Inquiry found that “unsafe, improper and unlawful care or treatment had occurred in government and non-government institutions”, including emotional, physical and sexual abuse, and that many former residents experienced “severe and prolonged trauma”. It recorded that “one of the strongest impressions left on the Inquiry was the poor quality of education received” by witnesses, with “a number...illiterate, or close to it, despite having spent their childhoods in the care of the State”, and concluded that this “limit[ed] the victim’s capacity to achieve his or her human and economic potential”. Forde also noted that these harms had “profoundly negative” effects on adult life, including damaged self-esteem, relationship problems, mental-health issues and limited economic opportunity, that “continue to affect victims and families to this day”. Many of those children are now adults and parents in the current child protection systems still carrying the consequences of the State’s earlier failures in care and schooling, and their children are heavily represented in those same systems.

What Forde did not do was ask who should hold power over the lives of Aboriginal and Torres Strait Islander children, or how Indigenous families and communities might be empowered to exercise responsibility before the state steps in. It did not grapple with passive welfare, alcohol and violence as engines of child harm in communities like Cape York, or with the way these engines feed a growing institutional machinery around Indigenous childhood. Contemporary analyses have since noted that, despite Forde’s aspiration that “the needs of children [be] the number one priority”, large increases in spending and major restructures did not clearly translate into better outcomes for children in care or their families.<sup>25</sup> In hindsight, Forde’s

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<sup>25</sup> S. Tilbury, “Child protection services in Queensland post-Forde Inquiry”, *Children Australia*, vol. 30, no. 3, 2005, pp. 11–18, which concludes that despite substantial increases in funding and major organisational reforms following Forde—including under the banner of “the needs of children being the number one priority”—there is little evidence these changes delivered clear improvements in outcomes for children in care or their families.

recommendations helped set the pattern Carmody later diagnosed where there became significant new investment in tertiary child protection, particularly out-of-home care, with far less attention to building a comprehensive system of primary and secondary supports. This history underscores the fact that the State's failure in its duty to educate and protect children in its care, it is not just failing those children then—it is shaping the disadvantage and risk profile of the next generation.

### **Carmody: unfinished business**

Fourteen years later, the Carmody Inquiry promised to fix what Forde had not. It brought into the light an over-loaded Child Safety system, an “unsustainable” growth in statutory intervention and out-of-home care, and an alarming escalation in Aboriginal and Torres Strait Islander children's contact with the system. Carmody proposed a 10-year reform agenda, 121 recommendations and a substantial injection of new funding on top of a child protection budget that now sits at around \$1.3 billion per year.

Carmody got some big things right in principle. He called for a shift of investment “upstream” into early intervention and family support, so that fewer families would fall into crisis and fewer children would need to be removed. He recognised that Queensland had “historically under-invested” in primary and secondary services and over-invested in tertiary statutory responses, and he urged a better balance between coercive child protection powers and voluntary, supportive services. He highlighted the stark projection that every second Indigenous child in Queensland would be known to Child Safety in 2012–13, and insisted that addressing this disproportionate impact had to be central to reform.

Carmody was also explicit about the structural skew in Queensland's spending. He found that “the enduring net effect” of previous inquiries had been “a systemic shift towards statutory child protection”, reinforced by a growing risk-averse culture. While overall grants to non-government providers had grown rapidly, “under-spending on prevention and early intervention appears to be a feature of Queensland's current response”, with intensive family support accounting for only a small fraction of total expenditure compared with out-of-home care.

Yet a decade on, the results are sobering. The Queensland Family and Child Commission's evaluation of the Carmody reforms, found “limited if any improvement in the areas that need it the most”. Despite hundreds of millions in new spending and a vastly expanded service system, there was little change in the rate at which children entered the statutory system or in the number of children in out-of-home care. Workforce increases did not reduce demand. They helped the system process a growing caseload more efficiently, but they did not shrink that caseload. The QFCC concluded there was “limited value” in commissioning yet another major review as the problems were well known and had changed little over time.

For Aboriginal and Torres Strait Islander children the picture is worse. Indigenous children have become even more over-represented in the child protection system. Centrally designed Aboriginal and Torres Strait Islander Family Wellbeing Services and other programs were rolled

out, but the overall rate of Indigenous entry to care has continued to climb, and the predicted point where more than half of all children in out-of-home care would be Indigenous has been reached.

Carmody had diagnosed a system spending too little on early intervention, driven by risk-aversion and over-reliant on coercive statutory responses, and recommended a shift to prevention and family support. More than a decade on that shift remains largely unrealised. Funding is still concentrated in tertiary services and out-of-home care, frontline practice is still reactive and crisis-driven, and the cultural change Carmody envisaged has not taken root.

### **Why Forde and Carmody failed Indigenous children**

There are three key reasons these inquiries failed.

First, both inquiries stayed inside the welfare and service-delivery frame.

Forde and Carmody prescribed more and better services—improved assessment, more early-intervention programs, more intensive family support, better coordination, more trauma-informed practice, enhanced training and supervision. These are not unworthy aims. But they do not shift the system from welfare to development. Child safety, welfare and justice responses remain crisis focussed designed and controlled by government departments, with Indigenous families treated mainly as passive clients for rehabilitation, rather than by First Nations institutions focused on building capability at the front end. Nor do they change the underlying passive welfare and alcohol settings that generate dysfunction in the first place.

The great failure has been the structural bias towards tertiary intervention. Carmody himself observed that the “enduring net effect” of earlier reforms had been “a systemic shift towards statutory child protection,” with “under-spending on prevention and early intervention” and a concentration of resources in out-of-home care. Despite recommending a rebalancing of resources, implementation again channelled growth funding into the tertiary end, rather than building an effective early-intervention to keep families out of crisis in the first place.

Neither inquiry set out a method for empowerment in the sense Elliott Johnston envisaged in the *Royal Commission into Aboriginal Deaths in Custody*, a procedure by which Aboriginal society can receive assistance “whilst at the same time maintaining its independent status and without a welfare-dependent position being established between the two groups”. Although cited positively, Carmody did not propose an empowerment architecture—like the Family Responsibilities Commission and broader Cape York Welfare Reform (CYWR) model—scaled across Queensland, with real powers vested in local Indigenous authorities to enforce responsibilities and direct resources. Instead, the logic remained that of a central department and its contracted NGOs, delivering services to largely passive clients.

Second, they did not treat passive welfare, grog and violence as epidemics to be structurally confronted.

Both inquiries acknowledged that parental substance abuse, domestic violence and social disadvantage were key drivers of child harm. But they did not re-engineer the underlying systems—the welfare pedestal, the alcohol economy, the absence of real work—that generate those drivers in communities like Aurukun, Hope Vale, Doomadgee, Lockhart River and Kowanyama.

As Cape York Institute argued to the Queensland Productivity Commission and to Carmody, the prevailing “symptom theory” holds that addictions, dysfunction and violence are mainly products of dispossession and poverty, suggesting a focus on fixing disadvantage with more programs and services, will cause these symptoms abate. Cape York Institute’s view, grounded in the experience of Cape York, is that drug and violence are epidemics in their own right, with their own dynamics, which must be attacked directly—even as the deeper causes are addressed. Forde and Carmody shied away from the hard structural questions—how welfare incentives should change, how alcohol availability should be governed, how local cultural authority should be restored with real powers to enforce norms.

Third, they left the billion-dollar industry intact and growing.

Carmody’s reforms poured additional money into the existing apparatus—new programs, more staff, expanded NGO contracts—without changing its basic purpose. Queensland now spends over \$2.3 billion dollars a year on child and family services within a departmental budget of more than \$3.6 billion, with out-of-home care taking the largest share, and this sits alongside more than \$1 billion dollars annually for Queensland Corrective Services.<sup>26</sup> Yet independent reporting shows the rate of children in child protection services remains high, the rate of children entering out-of-home care has not fallen, and the duration and consequences of system involvement for many children and young people remain deeply concerning.<sup>27</sup>

For Aboriginal and Torres Strait Islander families, this means the “industry” around their children—out-of-home care, resi-care, family wellbeing services, youth detention, prison—has become larger, more professionalised and better funded, while their own authority and capability to raise their children well has not been structurally strengthened. The system still intervenes “too little, too late” to support families before crisis, and “too much, too suddenly” when it removes children into a system with demonstrably poor outcomes and little prospect of reunification.

Forde and Carmody changed the way the industry operates at the margins. They did not change the fact that it is an industry whose principal clientele are Indigenous children.

### **Chronic truancy: an early, visible sign ignored**

Cape York Institute’s submission to the Carmody Inquiry argued that Queensland’s system had repeatedly failed to act on obvious early warning signs, using chronic school truancy as a clear example. Our view has only strengthened in the decade since, as attendance in many remote and disadvantaged communities remains unacceptably low and child protection involvement remains high.

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<sup>26</sup> Queensland Government, Budget 2024–25, Service Delivery Statements, Department of Child Safety, Seniors and Disability Services, child and family services and total departmental expenditure tables; Queensland Government, Budget papers and media releases for Queensland Corrective Services, recent years (showing operating budget in excess of 1 billion dollars per annum).

<sup>27</sup> Queensland Family and Child Commission, 2023–24 Annual report on the performance of the Queensland child protection system.

Chronic non-attendance is exactly the kind of visible, secondary-level indicator that a genuinely preventive system would act on early, rather than waiting for children to cross the statutory threshold.<sup>28</sup>

Yet Local Student Case Managers in some Cape York communities have reported trying to get Child Safety to join them in outreach to “hard to reach” families whose children were habitually not attending school, only to be told that officers could not do this kind of engagement. Instead it was suggested they could run a workshop if parents voluntarily turned up—a response that “does not provide a realistic way to engage with these families”.

Cape York Institute recommended that habitual, unexplained absence be treated as a trigger for action—joint outreach, referral to supports, and, where behaviour does not change despite reasonable efforts, the use of coercive Child Safety powers.

In Cape York, the Family Responsibilities Commission (FRC) provides precisely this kind of front-end lever. School absences trigger conferences with Local Commissioners, who sit down with families, use their cultural authority to insist on change, and connect parents to practical supports—with income management and other coercive tools in reserve where voluntary engagement fails.<sup>29</sup>

Turning a blind eye to chronic truancy is, in effect, turning a blind eye to neglect and to the predictable slide into more serious harm. Using structures like the FRC to act early is how we start to reverse that logic.

## **The lesson: no more orthodox roadmaps**

The lesson of almost 30 years, from Forde through Carmody to the present *Supporting Families Changing Futures* strategy, is that Queensland cannot reform its way out of this crisis by doing more of the same—even if trying to do it better.

Cape York Institute’s analysis is that governments have “doubled down on the orthodox approach”: they have multiplied services, refined coordination mechanisms, authored new strategies and action plans, and periodically re-announced commitments to partnership and co-design, all while the core indicators for Indigenous children in child protection and youth justice have continued to deteriorate.

The choice now is stark. Continue along this orthodox path, or pursue structural empowerment, welfare reform and serious strategies on alcohol, drugs and violence that actually change who holds power, who controls the money and who carries responsibility.

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<sup>28</sup> Cape York Institute, Queensland Child Protection Commission of Inquiry Submission, May 2013, esp. sections “Chronic truancy: an early, visible sign we choose to ignore” and “Using the stick of child protection to get early engagement with support services”

<sup>29</sup> Department of Families, Housing, Community Services and Indigenous Affairs, Cape York Welfare Reform Evaluation, 2013, esp. findings on the Family Responsibilities Commission.

### **Local Thriving Communities: another reform in the graveyard**

The 2017 Queensland Productivity Commission inquiry into service delivery in remote and discrete Aboriginal and Torres Strait Islander communities was unusually blunt. It found that the dominant service-delivery model was “fundamentally broken”; that in many places government effectively “operates” the community; and that local economies are artificially sustained and constrained by service delivery and welfare, with individual choice, markets, rewards and responsibilities largely absent. It warned that governments’ “pervasive preoccupation with improving services... is not only a flawed approach, it is a key part of the problem”, because it entrenches dependence rather than enabling development.<sup>30</sup>

Crucially, the Commission did not call for more of the same. It proposed an “empowerment and development” agenda: structural reforms that would shift real decision-making authority, control over budgets and accountability to Indigenous regional and community institutions, alongside serious, sustained strategies on alcohol, violence, welfare reform and economic opportunity.

In that context, the Commission highlighted the FRC as a model of community-led, place-based action—a legislated institution where powers of the Crown are exercised locally by Indigenous commissioners to support family responsibility and behavioural change, rather than by distant bureaucracies.

Local Thriving Communities (LTC) was the Queensland Government’s answer to the Commission’s blueprint—and it shows how fast the system retreated to orthodoxy. As Cape York Institute’s *Slogan or Substance?* critique argued, the government response misrepresented the scale and nature of the change the QPC had called for. Instead of building the new decision-making architecture envisaged, LTC rebadged a centrally controlled, supply-driven service agenda as “thriving communities”, stayed preoccupied with improving and coordinating services, and left authority, money and levers of power in the same hands.

LTC talked of partnership and co-design, but it did not embed shared decision-making in law, did not transfer substantive powers or budgets to Indigenous regional bodies, and did not create mechanisms for First Nations people to exercise binding control over the large public spending in their communities. “Working with community” described consultation about services, not a structural shift in who decides. When the program was later abandoned, there was little to unwind, because the structural status quo had never been disturbed.

A rare, government-commissioned report that said plainly you cannot service-deliver your way out of entrenched disadvantage was answered with yet another service-delivery initiative. LTC now sits in the same graveyard as Forde-era institutional reforms and the post-Carmody child protection program: ambitious language and some well-intended tweaks, but no change in who holds power, who controls the money and who carries responsibility.

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<sup>30</sup>[QPC Final Report Service delivery in remote and discrete Aboriginal and Torres Strait Islander Communities; and Queensland Government Thriving Communities approach: Slogan or Substance?, Cape York Institute 2019](#)

Unless Queensland takes up the kind of structural empowerment signalled by the QPC—and already demonstrated in institutions like the FRC—the next reform will be just another orthodox roadmap laid carefully on the shelf.

## **The right to take responsibility—and the State’s duty to back it**

### **Our right to take responsibility**

Cape York’s core proposition, developed over more than two decades of advocacy and design work, is that Aboriginal and Torres Strait Islander people have a right to take responsibility for their own lives, families and communities—and that this right must be made real, not rhetorical. That means more than urging “self-determination” while leaving all the levers of welfare, schooling, housing and alcohol policy in the hands of distant bureaucracies. It means building structural reforms that vest real authority in local Indigenous leaders to insist on basic family obligations, backed by powerful supports and incentives, so that children can grow up safe and ready for opportunity.

*From Hand Out to Hand Up*, the Cape York Welfare Reform design, the Carmody child protection submission, the AMP submission all rest on this same conviction—that overcoming entrenched disadvantage requires restoring responsibility at the level of individuals and families, not just improving services around them.<sup>31</sup> That is why Cape York leaders have consistently spoken of the “welfare pedestal” and the need for people to step off it and climb a staircase of opportunity—but also why they have always insisted that people must be trusted and expected to climb.

### **Mandated responsibility: why Cape York designed the Family Responsibilities Commission**

The FRC is the world-first institutional expression of this right to take responsibility.

Cape York argued that exhortation alone would not shift social norms that had been corroded by decades of passive welfare and cheap alcohol, especially where addiction and violence were entrenched. Drawing on Herbert Kelman’s insight that social norms change through stages—compliance, identification, internalisation—the reform agenda deliberately set out to design mechanisms of “mandated responsibility” that could move communities through these stages around their obligations to children.

The FRC does this by joining the Commonwealth income support system with Queensland’s service systems and then sharing the Crown’s powers with Local Commissioners—Elders and respected leaders from the communities themselves. When parents receive agency notices for child safety concerns, school non-attendance, tenancy breaches, offending or youth offending, they are required to attend conferences where Local Commissioners, sitting with a legally-qualified Commissioner when needed, confront them with their obligations and agree on case plans. Where necessary, the Commission can impose Conditional Income Management

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<sup>31</sup> Cape York Institute’s [From Hand Out to Hand Up](#) 2007; [Cape York Institute, Submission to the Queensland Child Protection Commission of Inquiry](#), 2 May 2013;

so that 60, 75 or, in the most serious cases, 90 per cent of a person’s welfare payment is quarantined for rent, food and children’s needs.

This is “mandated responsibility” by design. At the first stage, people comply because attendance is compulsory and because there are real consequences—including income management—if they do not. At the second stage, they begin to identify with the expectations set by Local Commissioners, whose authority flows from clan, law, language and longstanding cultural obligation to children and kin. The aim is that, over time, these expectations become internalised as renewed norms: children should be in school every day, parents should protect them from violence and neglect, welfare money should feed kids and pay the rent, and alcohol and violence should not rule their lives.

### **Others have reached the same conclusion**

Cape York’s insistence on the right to take responsibility is now widely echoed.

Nationally, the Productivity Commission, CEDA, Catholic Social Services Australia, the Dropping off the Edge series and successive Closing the Gap and Overcoming Indigenous Disadvantage reports all point to deep, persistent disadvantage that has resisted decades of program and service expansion, especially in remote communities where child protection, incarceration and suicide figures remain stubborn or have worsened. In Queensland, the Queensland Productivity Commission’s inquiry into service delivery in remote and discrete communities concluded that the “business-as-usual” model is fundamentally broken and that “the gap cannot be closed by the dominant service-delivery-focused approach”, while evaluations of Murri Courts, Community Justice Groups, the Aurukun Justice Reintegration Project and the Carmody child protection reforms show limited or mixed outcome gains and little evidence of empowerment. Welfare reviews such as Patrick McClure’s similarly stress that the current income-support system can alleviate poverty but is structurally incapable of lifting people out of entrenched disadvantage on its own.

Taken together, there is a clear convergence on Cape York’s core contention: more programs and better services are not enough unless there are mechanisms that require adults to change harmful behaviour and support them to meet clear obligations, especially to their children. The problem is most stop short of spelling out in detail how to do this in practice, which is the task this submission takes up.<sup>32</sup>

### **Local cultural authority as structured support for families**

Against this backdrop, the FRC stands out.

Independent reviews—including KPMG’s implementation review, the Cape York Welfare Reform (CYWR) evaluation and QUT’s Strategic Review of Cape York Income Management—find that the

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<sup>32</sup> See, for example, Productivity Commission, Deep and Persistent Disadvantage in Australia; CEDA, Disrupting Disadvantage series; Catholic Social Services Australia, Mapping the Potential; Jesuit Social Services, Dropping off the Edge 2021; Productivity Commission, Closing the Gap reports; Steering Committee for the Review of Government Service Provision, Overcoming Indigenous Disadvantage; Queensland Productivity Commission, Service Delivery in Remote and Discrete Aboriginal and Torres Strait Islander Communities; and McClure, A New System for Better Employment and Social Outcomes.

FRC has restored local and cultural authority, helped shift social norms around tenancy, schooling, parenting and money management, and supported parents to meet their most basic obligations to their children. Evaluators note that Local Commissioners have reminded parents of their responsibilities, encouraged them to take children to medical appointments, assisted them to navigate Child Safety requirements, and used income management to stabilise family finances and ensure that rent, bills and food are covered.

What distinguishes the FRC from prevailing service delivery is that it hard-wires family responsibility into the system in a way that is both demanding and supportive.

Through structural reform, powers of the Crown are shared with Local Commissioners—Elders and respected persons who bring traditional, cultural, local and family knowledge and authority—so they can, via legally binding conferencing, case planning, referral and income-management decisions, apply pressure and support for people to build the foundational capabilities needed to exit the cycle of disadvantage, including getting children to school, keeping them safe and meeting basic household obligations.

Shared responsibility means government, communities, service providers and families each playing their part—with government actively supporting rather than withdrawing.

### **Alcohol management and the State’s fundamental role**

Alcohol is the hardest test of Cape York’s right to take responsibility, and of the State’s duty to back that right.

As set out in earlier submissions on alcohol management in Cape York communities, Indigenous communities experience alcohol-related problems at the most severe end of the spectrum, with excessive alcohol use driving extreme levels of violence, child maltreatment and neglect, social disorder and poor education outcomes.<sup>33</sup>

Teachers and service providers describe children kept awake all night by drinking, partying and fighting, then arriving at school too tired to learn or not attending at all. Cape York Aboriginal Australian Academy (CYAAA) data confirms that school attendance drops by 10–20 per cent after alcohol-fuelled nights. For many children, the full potential of their lives is diminished even before birth through prenatal exposure and suspected FASD.

In the face of this, it is dangerous fiction to imagine the State as a residual actor that waits at the end of the pipeline, removing children after parents “fail” and damage has been done.

Our Carmody submission argues that Queensland’s child protection system intervenes “too little” to improve the lives of children and “too much” by fracturing families once removal occurs, precisely because there has been a failure to build a comprehensive system of primary and secondary supports and a failure to tackle the social conditions—alcohol, passive welfare, broken norms—that give rise to harm in the first place.

The current model, in which the State largely stands back while adults exercise a “perceived right to drink”, then steps in abruptly through statutory removal, inverts the proper order of

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<sup>33</sup> See Appendix B1, and B2

obligations. Cape York Institute argues for a different ordering according to the “scale of moral obligation”.<sup>34</sup> Children first, then other vulnerable adults, then non-vulnerable adults, and only last perpetrators of harm.

Prior to AMPs, a selfish, perceived right of parents to drink was too often pursued at the expense of parental responsibilities and children’s wellbeing, vividly captured in a Cape York tavern vignette where hundreds of adults drank in silence while children waited outside to be fed on the way home with bags of hot chips.

Equality in the perceived “right to drink” is “a far off concern” compared to the immediate human rights of women and children to be free from violence and fear, to go to school and to enjoy physical and mental health. Cape York Institute has also emphasised nowhere in Australia is the right to drink unfettered. Everywhere it is limited by drink-driving laws, age limits, licensing hours and public drinking bans, because alcohol so easily infringes on others’ rights.

In this context, AMPs and the FRC are not examples of an overreaching, paternalistic State, but of the State doing what it routinely does in other safety domains—acting early and structurally to prevent foreseeable harm. Seatbelt, speed and drink-driving laws were introduced not because governments distrusted all drivers, but because unregulated driving was killing people at predictable rates and modest limits could save lives. Likewise, AMPs restrict availability and the FRC uses conditional income management and conferencing to ensure that welfare money is not simply converted into grog while children go hungry or unprotected. From a child-protection perspective, these are primary and secondary prevention tools. They stabilise households, reduce violence and create the minimum conditions in which parents can realistically be expected to meet their obligations.

Cape York Institute’s position is that the State has a fundamental, not residual, responsibility in this area. It is responsible for the policy environment that allowed an alcohol epidemic to flourish alongside passive welfare, and therefore has a duty to sustain and strengthen AMPs, enforce against sly grog and home-brew, and close the ‘astonishing’ rehabilitation and treatment gaps identified. It also has a duty to support and expand proven structural mechanisms like the FRC, which place local Indigenous authority at the centre of alcohol-related decision-making and use mandated responsibility as a primary and secondary prevention tool, rather than waiting for tertiary child-protection and criminal-justice responses.

Ultimately, the State cannot credibly claim neutrality on alcohol while retaining sole control over licensing, policing and welfare architecture. Its role is to stand alongside Cape York in re-ordering rights and responsibilities so that the perceived right to drink is always subordinated to the rights of children at the bottom, and so that families who are supported and required to take responsibility are not left alone to confront an alcohol epidemic the State itself helped create.

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<sup>34</sup> See Appendix B1, and B2

## **What must be done: AMPs, FRC and PR+O Act**

The Carmody Inquiry warned that “the department’s budgetary commitment and cultural focus has to radically shift away from a bias towards after-the-fact protective services towards early pre-harm preventive and supportive strategies”. It also cautioned that “buying a costly service that does not work wastes money that can never be recouped, and it may even be counterproductive”, and that opting not to build an effective family-support sector would be a “false economy in the long run”.

The solutions proposed in this section respond directly to that warning in Cape York’s hardest communities. They are early, preventive, structured and supportive, but they are also firm about responsibility and designed to reduce demand for tertiary services over time.

Cape York’s contribution is to show how early support must be joined with mandated responsibility and real opportunity if it is to break intergenerational cycles of harm. AMPs stabilise the environment, the FRC makes parental responsibilities clear and enforceable, and Personal Responsibility + Opportunity-style guarantees make education, work and asset-building real for children at the bottom. An in-community residential care and parenting precincts provide viable, safe alternatives to removal and long-term off-community care currently failing youngsters. Together, they give concrete effect to Carmody’s insistence that “prevention is better than cure” and that better rehabilitative and therapeutic family support, especially in discrete communities, is the key to stronger families and safer children.

### **Hold the line on grog**

The first and most urgent task is to hold the line on grog. Three things are required.

- First, maintain and, where necessary, tighten community-derived AMPs, with genuine enforcement against sly grog and home-brew, recognising that without effective enforcement even the best-designed plan is undermined.
- Second, close the ‘astonishing’ gaps in detox, rehabilitation and family-based alcohol and other drug treatment so that when the FRC and Child Safety push parents to address addiction, there is somewhere credible to send them.
- Third, explicitly frame AMPs as primary child-protection tools, so that decisions about relaxing or strengthening restrictions are assessed first and foremost against their impact on children’s safety, wellbeing and schooling, not only against adult preferences or commercial interests.

### **Family Responsibilities Commission and child-protection**

Every Indigenous child-safety matter in welfare reform communities should sit under the umbrella of a local, legislated responsibility body rooted in the Family Responsibilities Commission (FRC) model.

QFCC emphasises the importance of kinship care and removing unnecessary barriers so children can stay connected to family, culture and Country. Recent policy changes have made it easier to approve kinship placements by removing the Blue Card requirement for kinship carers.

Our experience, however, is that kinship environments are not automatically safe or stabilising. Too often, the conditions that led to removal—poverty, violence, addiction and overcrowding are replicated in the extended family household, and the removal of this core safety check leaves children as exposed. We support kinship care, but only with structured support and oversight. The FRC should be empowered to work with both kinship carers and parents, to set clear responsibilities, monitor safety and progress, and actively support repatriation where that is in the child’s best interests. This preserves the benefits of kinship placements while restoring a practical safeguard and a supported pathway home, consistent with the concerns and reform directions already identified by QFCC.

The starting point is simple. Every Indigenous child-safety matter in welfare reform communities, and, over time, in other discrete communities—should sit under the umbrella of a local, legislated responsibility body rooted in the FRC model. Whenever Child Safety receives a notification of harm or risk of harm in an FRC community, this should automatically trigger FRC conferencing, so Local Commissioners can confront parents early about their obligations, agree on case plans, and, where necessary, impose Conditional Income Management to ensure money is directed to rent, food and children rather than grog or gambling. This uses welfare conditionality as a tool to create immediate stability for children while parents engage with structured supports.

The FRC was designed as a case-coordination hub, with strong information-sharing powers that could overcome the silos and duplication that currently plague service delivery. A proper FRC in child protection would make full use of this potential. Child Safety officers, alcohol and other drug workers, mental-health clinicians, disability staff and housing officers would be required to participate in joint FRC-led case planning for high-risk families, rather than running separate case plans in parallel. The FRC would monitor progress against agreed milestones, call parents back to conference when they are not met, and adjust plans and conditionality as needed.

As the Aurukun “My Justice Journey” partnership between the FRC, ATSILS and other justice agencies is already demonstrating, FRC-led conferencing can successfully knit legal, welfare and support responses together around a single, locally guided plan for vulnerable community members.<sup>35</sup>

Over time, this model could be extended beyond the five existing welfare-reform communities and Doomadgee, starting with other remote and discrete communities where child-protection and alcohol-related harms are most acute. The key is that the FRC’s distinctive combination of local authority, legislated teeth and conferencing must be deliberately positioned as the State’s main early-intervention and secondary-prevention engine for Indigenous child protection, rather than leaving that task to a crowded, uncoordinated patchwork of short-term programs or late-stage statutory responses.

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<sup>35</sup> See further materials on the My Justice Journey partnership: Aboriginal and Torres Strait Islander Legal Service, Strengthening Pathways to Justice in the Far North (news item, 9 February 2026), available at: [LINK](#); and My Justice Journey (short film), available at: [YouTube Film Link](#).

Properly supported, FRC-anchored partnerships like My Justice Journey show how the State can stand alongside Indigenous legal and community institutions to deliver this shift in practice.

### **A Personal Responsibility and Opportunity Guarantee (PR+O Act)**

Cape York Institute is proposing a Personal Responsibility and Opportunity (PR+O) Act as a way to close the gap for the “Bottom Million” children within a single generation, by getting upstream of problems and hard-wiring a sequenced pathway of opportunity into law. The target cohort is the children growing up in families and communities where entrenched disadvantage is most concentrated, Indigenous and non-Indigenous alike, starting in Cape York Peninsula.

Current systems are structurally configured to demand responsibility without guaranteeing opportunity. People are told to work hard, send their children to school and avoid trouble, but the system has failed to provide quality schooling, decent work or asset-building pathways. Cape York’s own welfare-reform experience is that responsibility without real opportunity can stabilise behaviour, but it cannot on its own generate mobility or close the gap.

A Personal Responsibility and Opportunity approach would change that equation by creating a legislated compact around children at the bottom. The Act’s purpose is to ensure the state meets its most basic obligations to these children across the 0–21 life-course. That means healthy, happy brains in early childhood, effective primary and secondary schooling, guaranteed work or further study from the late teens, and a real pathway to saving, asset-building and home-ownership.

On one side of the compact, the Act would codify foundational entitlements such as access to high-quality early childhood programs, effective and proven schooling models, a guaranteed job or equivalent work opportunity when they reach adulthood, and structured tools to build assets such as matched savings, long-term saving platforms and pathways to home ownership.

On the other side, it would set out the responsibilities required to unlock those opportunities — that parents meet clear obligations around their children’s care, safety and development, that young people participate in schooling, training and work, and that governments and service systems deliver the opportunities they have promised. This prevents children’s futures being left to policy discretion and funding cycles.

The architecture envisaged is complementary national and state legislation. A Commonwealth PR+O Act would establish the Bottom Million cohort nationally and specify foundational obligations to these children. Matching Queensland legislation would embed the model in Cape York Peninsula and other high-disadvantage regions, just as the original Family Responsibilities Commission was created through complementary Commonwealth and state enactments. In this way, governments are “bound in” to deliver opportunity in the same way families are bound to meet responsibility, and delivery can no longer be optional or dependent on political will and changes of government.

In practical terms, the PR+O Act would be implemented as a 21-year, FRC-anchored case-management system for every eligible child in designated high-disadvantage zones, with Cape York as the first cab off the rank.

The Family Responsibilities Commission would be expanded to oversee a single, life-course plan for each child from birth to 21, integrating early childhood, schooling, transition and work stages and monitoring whether responsibilities and opportunities are being met at each point. Early childhood and school funding in these zones would be required to be sufficient to deliver evidence-based programs with demonstrated impact on attendance and learning, with explicit accountability for whether children who turn up to classrooms are in fact taught. From 18, young people who have met basic participation obligations would have access to a job guarantee or equivalent work opportunity, either through local jobs or a national mobility scheme that supports them to take up work wherever it exists. Alongside this, Aboriginal community-controlled organisations would be funded on a pooled, performance-linked basis to deliver the “opportunity support” programs and products—parenting support (**see textbox**), addiction services, youth programs and the like—needed to help families convert guaranteed opportunities into real capability.

## Parenting support remains a yawning gap

No one can deny the critical need to support parents and families in Cape York.

Every Cape York community should have its own dedicated in-community parenting support—designed with the community, grounded in evidence, and accountable to local people. This is basic and foundational in the circumstances—you need to support parents so they can help break this cycle.

Cape York Welfare Reform (CYWR) proved this could be done. For around \$400,000 per community, a *full-time, locally embedded* parenting program was established—employing local people, building capability, and delivering support tailored to local conditions.

CYP's Strong Families program was developed through years of work with communities and experts, including Triple P and Parenting Under Pressure. It was not imposed. It was built—carefully, iteratively, and with local ownership. It worked because it filled a critical gap: supporting parents to meet their responsibilities and improving outcomes for their children.

Then it was dismantled.

In the name of “equity”, the Queensland Government made a centralised decision—without consultation—to spread this modest funding thinly across the region. Resources that had been concentrated where they were needed to support the Family Responsibilities Commission (FRC) model, were diluted across the region to the point of ineffectiveness.

*For CYWR, this decision broke a core principle: responsibility must be matched with real support if it is to produce capability.* Parenting programs are not optional services—they are a foundational opportunity in the life-course sequence that enables children to develop and thrive. Now CYWR communities have the ‘responsibilities’ side through the FRC, but there is no matching opportunity for essential parenting support.

The result is predictable. Parenting support is now fragmented, underpowered across the region, and largely unaccountable to the communities it is meant to serve.

The Queensland Government is guilty of false economy. The decision to discontinue CYWR's Strong Families program came as it was supporting 20 families referred by Child Safety. If these families end up with a child in out of home care, this would mean an increase in the costs of the Child Protection system of \$5 million, as every child in out of home care costs the state approximately \$250,000 per year.

This is not a failure of intent. But once again, Queensland Government chose central control over what works on the ground. And once again, got it wrong.

A distinctive feature of the model is that it sequences opportunity and asset-building, rather than treating them as add-ons. Families in the scheme would be able, and in some cases required, to use structured saving and investment tools—such as locked savings accounts for education and housing—so that, over time, responsibility and opportunity are translated into real wealth and security. This is intended to move families beyond mere income support,

building a ladder that runs from early childhood development through school and work into home ownership and intergenerational savings.

By legislating this full responsibility-and-opportunity compact, rather than relying on promises or strategies, children trapped in the Bottom Million cohort can have the same chances of finishing school, getting a job, buying a home and raising a family in security and pride as any other Australian child—and that, if enacted and honoured over 21 years, such an Act would close the gap for these children in a single generation, starting with Cape York and then expanding to other priority areas.<sup>36</sup>

### **In-community residential care and parenting precincts**

*“It may seem simplistic to say ‘prevention is better than cure’, but it is an undoubted reality that without preventive strategies the cycle of intergenerational abuse will continue to infect successive generations.”* The Carmody Inquiry warned there is *“little point in tearing a family apart just to try to put it back together again later”* and that Queensland had lost more than a decade through “gross public under-spending on early intervention and voluntary support services for families”. Cape York’s experience shows what this looks like on the ground – children exported to distant residential care at enormous cost, while parents receive little structured help to change and reunification rates remain low.

The alternative is in-community residential care and parenting precincts that combine mandated parental responsibilities with intensive, structured support in the same place. Building on Safe Houses, boarding school scholarships and residential school options, and the CYWR parenting program and Opportunity Hubs, these precincts would:

- provide 24/7 safe residential care for children in their own communities, so they can maintain culture, kin and language while protected from immediate harm
- require parents under FRC and Child Safety case plans to meet clear, enforceable responsibilities – attendance, engagement, behaviour-change undertakings — as a condition for avoiding removal or achieving reunification
- surround those responsibilities with daily, hands-on support – evidence-based parenting programs (Triple P, Circle of Security, Parents Under Pressure), practical coaching in routines and budgeting, therapeutic help for trauma, substance use and violence, and coordinated case-planning across services.

The intent is not to shift responsibility from parents to the State, but to insist on it and create the conditions in which it can actually be exercised. Parents remain ultimately responsible for their children. The State’s role is to mandate those responsibilities through FRC and Child Safety levers and to invest in the structured supports that make change realistic. For children, these

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<sup>36</sup> See Appendix C, Editorial, “The rights and responsibilities agenda must cut both ways to succeed,” *The Australian*, 19 November 2025, p. 11 (on Fiona Jose, Cape York Partnership and the proposed Personal Responsibility and Opportunity Act); Paige Taylor, “Striking balance between consequence and reward,” *The Australian*, 19 November 2025, pp. 1–2 (re Personal Responsibility and Opportunity Act and Cape York reforms).

precincts become an opportunity pathway. They stay on-Country and in community while receiving stable care, strong early learning and schooling support, so that, together with FRC and PRO-style guarantees they can realistically close the gap over the 0–21 life-course.

These precincts must also integrate disability and mental-health support. *We're Black – we don't matter* documents the extent of under-diagnosed and unsupported disability among Aboriginal and Torres Strait Islander children, including in the child-protection system, and shows how gaps in NDIS access and mainstream services compound risk. Without embedding disability expertise into in-community care and parenting supports, many of the most vulnerable children will continue to fall through the cracks, no matter how strong the FRC or AMPs become.

Carmody warned that, unless Queensland developed “viable, safe alternatives to removal and retention” and shifted resources away from high-cost tertiary responses into early support, the system would remain on an unsustainable path of rising demand and spiralling delivery costs. Redirecting a portion of what is currently spent on distant, high-cost residential care—often thousands of dollars per child per day—into in-community precincts of this kind would be the opposite of the “false economy” he identified. It would protect children now, build the capability of parents and communities, and reduce long-term demand for tertiary interventions.

### **Shared decision-making around community priorities**

Cape York has in place a practical shared decision-making model through Empowered Communities and Joint Decision Making (JDM), implemented locally by Pama Futures. Under JDM, panels of Cape York people consider expiring and new grants, review service performance and alignment with Regional and Local Development Agendas, and recommend whether to continue, redirect or redesign funding, including shifting delivery to capable Aboriginal community-controlled organisations where appropriate.

Formal ministerial responsibility for decisions is preserved under JDM, but panel advice is highly influential. A 2025 Lessons Learned review by UQ, finds JDM to be one of the most advanced shared decision-making models in Indigenous affairs, highlighting better information sharing, improved integration and partnership between services, and stronger alignment of funding with community-identified priorities. In contrast, the Productivity Commission's 2024 Closing the Gap progress report notes that shared decision-making is “rarely achieved in practice”, with only “pockets of success” and limited systemic change in how decisions are made.

For Cape York, the next step is for Queensland to join the Commonwealth in these shared processes. State investments in child protection, youth, alcohol and other drugs, mental health, disability and housing should be brought into JDM in Cape York, so that major funding decisions in these areas are made jointly with Cape York leaders against a clear empowerment and development agenda, rather than through separate, siloed government processes. This would align the AMPs, FRC-related reforms, PRO-style opportunities and in-community care precincts set out in this section with a governance mechanism that ensures they reflect community priorities and experience on the ground.

## Conclusions and Recommendations

This submission has set out in full why Queensland’s child protection system has failed Indigenous children and what must now change. We make six Commission recommendations Queensland could act on to decisively change the trajectory of its Child Protection crisis.

### **1. Rebalance from late, coercive intervention to early, family support in Cape York**

Shift a meaningful share of child-protection spending in Cape York from tertiary, after-the-fact services (especially high-cost, off-community residential care) to early, preventive and supportive interventions that help families care for their own children.

Report annually against: number of children in out-of-home care; rate of Indigenous children in care; reunification rates; and school attendance.

### **2. Mandated parental responsibilities with structured in-community support**

Use the FRC and Child Safety jointly so that key parental responsibilities—keeping children safe, sending them to school, maintaining stable housing, addressing violence and addiction—are clear, enforceable and linked to concrete consequences and supports, especially for families near statutory thresholds.

Invest in in-community residential care and parenting precincts so children can stay safe in community while their parents, under firm expectations, receive daily, intensive help to change—evidence-based parenting programs, practical coaching, therapeutic support and clear capability milestones for reunification. The aim is exactly what Carmody described: “better rehabilitative and therapeutic family support for parents under stress”, particularly in discrete communities.

### **3. Guarantee a real opportunity pathway to close the gap in one generation**

Legislate a Personal Responsibility and Opportunity compact for the children growing up in the deepest disadvantage, guaranteeing a sequenced package from conception to 21: strong early childhood, effective schooling, transition-to-work or job guarantees, and tools to build assets – contingent on family undertakings around care, schooling and lawful behaviour.

State explicitly that the objective is generational: that with this compact in place, and with Cape York’s responsibility mechanisms and in-community supports, a child born today in the hardest streets of Aurukun, Hope Vale, Coen or Mossman Gorge can, by 21, be on track to stand alongside other young Queenslanders in education, work and assets.

### **4. Treat AMPs and FRC as core parts of the primary and secondary support system**

Maintain and, where needed, strengthen enforcement of Alcohol Management Plans until child-safety and violence indicators in Cape York are within a normal range, recognising AMPs as primary child-protection tools rather than separate liquor policy.

Give the FRC a defined early-intervention role in child protection, so that both school attendance concerns (as an early sign of neglect) and formal notifications routinely trigger FRC conferencing, case-planning and (where needed) conditional income management as an alternative to immediate removal.

## 5. Align governance and funding with shared responsibility

Bring major state funding streams in Cape York (child protection, youth, AOD, mental health, disability, housing, education) into Joint Decision Making with Cape York leaders, so that the family support sector Carmody called unfinished business is built in ways that match local priorities and experience.

Embed these reforms—AMPs, an expanded FRC, the PR+O compact, in-community residential care and parenting precincts, and shared decision-making—in legislation and formal agreements, with regular public reporting against Carmody’s core tests and your own: fewer children removed, less time in care, more safely at home, and clear evidence that children at the bottom are on track to close the gap.

Carmody warned that “failure to learn the lessons of history will guarantee that they are repeated” and that “the cost of doing nothing would be much more, measured both in dollars and human suffering”. Your recommendations give Queensland a way to finally learn those lessons in Cape York – by insisting that everyone takes responsibility for their role, and by investing early, locally and structurally in the supports that allow babies born at the bottom to close the gap within their own lifetimes.

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## **Appendices**

### **Appendix A – Cape York Institute submission on incarceration to Queensland Productivity Commission**

Cape York Institute. The Indigenous incarceration crisis: the Queensland Productivity Commission response is inadequate. Further submission to the Queensland Productivity Commission's Imprisonment and Recidivism Inquiry, April 2019.

### **Appendix B – Cape York Institute submissions on Alcohol Management Plans**

B1. Cape York Institute. Submission to the Queensland Government Review of Alcohol Management Plans. Cape York Institute for Policy and Leadership, Cairns, 2012.

B2. Cape York Institute. Submission on Aurukun Shire Council's Proposal for a Trial Alcohol Event. 24 May 2019.

### **Appendix C – Media coverage of PR+O Act**

C1. Paige Taylor, "Striking balance between consequence and reward," The Australian, 19 November 2025, pp. 1–2.

C2. The Australian editorial, "The rights and responsibilities agenda must cut both ways to succeed," 19 November 2025, p. 11.



**Cape York Institute**

For Policy & Leadership

# Queensland Government review of Alcohol Management Plans

**Submission**  
**May 2013**

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## Introduction

It will be a great tragedy if the current review of Alcohol Management Plans (AMPs) results in their immediate removal in any of the 19 Indigenous communities across Queensland where they are in place. It is not the right time to roll back AMPs. It is simply too soon.

AMPs are working to reduce violence and dysfunction, and communities are slowly normalising. Since the introduction of AMPs the momentum of change has been building. Everyday life is beginning to transform in these communities.

In the four welfare reform communities in particular, stabilising the social environment through alcohol restrictions is a necessary precondition for other successes under the Cape York Welfare Reform (CYWR) trial. These successes are documented in the recently released independent evaluation of the trial, and are most clearly evident in the areas of education and social responsibility. Kids are going to school more often and are doing better at school. Crime is decreasing. Serious injuries are decreasing. Families have money available to put food on the table and to invest in the development of their children.

Despite the positive momentum, there is still much further to go. Violence and alcohol fuelled problems are still disproportionately high across the Cape communities.

AMPs are not racially discriminatory. They are necessary for the equal enjoyment of human rights to health, safety, freedom from violence and education in these communities. Equality is indeed the correct goal. Equality in the perceived right to drink, however, is as yet a far off concern in the face of other far more pressing human rights at stake in these communities.

AMPs are not paternalistic. Rather, they are examples of Indigenous communities taking control of their alcohol problems, and taking responsibility for their communities' futures, wellbeing and safety. AMPs were community driven. They were developed after many years during which calls for change, often made by Indigenous women, went repeatedly unheeded.

Extreme caution must be exercised in purporting to give each community a choice about the path ahead before the objectives of the AMPs have been achieved. The Queensland Government has an obligation to make sure that this choice is fully informed and that all voices in the community are empowered to have their view heard.

What is needed now is sustained effort. We need to strengthen and support the effectiveness of AMPs, not remove them. We need to redouble our enforcement efforts and get serious about tackling sly grog and home brew, which is still fuelling much violence. And we need to continue our efforts to tackle passive welfare dependence, improve education and employment, and to implement fundamental land reform.

We also need real solutions for those in the grip of addiction—some of whom are drawn to centres such as Cairns in their quest for alcohol. There remain astonishing service delivery gaps in key areas of alcohol rehabilitation, and in some cases these gaps have widened over time.

The goal for these 19 communities remains normalisation. The Queensland Government must develop a clear transition plan in the form of a medium to long term, staged process by which reductions in harm are linked to financial incentives for councils, and the relaxation and eventual removal of alcohol restrictions.

## Why are AMPs needed?

Indigenous communities experience alcohol related problems at the most severe end of the spectrum. This has been well established in Queensland, including through multiple reviews and inquiries. The data is overwhelming, and we do not repeat it here.<sup>1</sup>

Excessive alcohol abuse in these communities causes disproportionately elevated levels of violence, crime, child maltreatment and neglect, social disorder, and poor education outcomes. There is no doubt that alcohol is a trigger and cause of violence.<sup>2</sup> Consultations with community members and service providers tell us that:

- Alcohol is still the major cause and trigger of family violence in Cape York communities, despite the AMPs. This is because sly grog gets into the communities, and home brew is also sometimes a problem.<sup>3</sup> Drugs, such as marijuana, are also causing violence.
- Alcohol continues to be a major precipitating cause of child removal on the Cape, as it is a driver of family violence, child abuse and neglect. Again sly grog and home brew are a problem.
  - A significant decline in parental responsibilities occurred with the introduction of alcohol and the increase in alcohol abuse in Cape York communities. In welfare reform communities we know that individuals and families are increasingly taking on this responsibility, however, social norms around parental responsibility for their children have yet to be normalised in any of Queensland's Indigenous communities.
  - Alcohol abuse and other addictions continue to adversely impact on parental responsibility, causing child neglect and abuse. The use of scarce family resources to support substance abuse impacts on children's welfare. Children do not get fed properly. They do not sleep when their parents are up all night drinking, partying and fighting. They miss school, or arrive at school too tired to learn.
- Although no one has a precise handle on the scope of the problem, anecdotal evidence suggests that a substantial proportion of children in these communities suffer from cognitive impairment that may be the result of Fetal Alcohol Syndrome Disorder (FASD). Because of alcohol, the full potential of these children's lives is lost before they are even born.

There is clear evidence (both local and international) that supply reduction and demand reduction interventions are effective in addressing the harm caused by excessive alcohol consumption.<sup>4</sup> Evidence suggests that alcohol policy designed to reduce overall consumption may be more effective at reducing violence than other criminal justice policy initiatives.<sup>5</sup>

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<sup>1</sup> Australian Institute of Health and Welfare. 2011, 2010 National Drug Strategy Household Survey report, Drug Statistics Series no. 25, Canberra: Australian Institute of Health and Welfare; Department of Health and Ageing. 2012, Aboriginal and Torres Strait Islander Health Performance Framework: Tier 2 – Health Behaviours, Risky Alcohol Consumption, <<http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=6442458685>>; Wilson, M., Stearne, A., Gray, D., and Sherry, S. 2010, The harmful use of alcohol amongst Indigenous Australians, <[http://www.responsiblechoice.com.au/wp-content/uploads/2013/01/alcohol\\_review\\_june\\_2010.pdf](http://www.responsiblechoice.com.au/wp-content/uploads/2013/01/alcohol_review_june_2010.pdf)>.

<sup>2</sup> Australian Institute of Health and Welfare. 2011, 2010 National Drug Strategy Household Survey report, Drug Statistics Series no. 25, Canberra: Australian Institute of Health and Welfare; Mouzos, J. and Seagrave, M. 2004, Homicide in Australia 2002-2003 – National homicide monitoring program annual report, Research and Public Policy Series no. 55. Canberra: Australian Institute of Criminology; Lievore, D. 2003, Recidivism of sexual assault offenders: rates, risk factors and treatment efficacy. Canberra, ACT: Australian Institute of Criminology; English, D., Holman, C. and Milne, E. 1995, The quantification of drug caused morbidity and mortality in Australia. Canberra, ACT: Commonwealth Department of Human Services and Health; Gaffney, A., Jones, W., Sweeney, J., and Payne, J. 2010, Drug use monitoring in Australia: 2008 report on drug use among police detainees. Canberra, ACT: Australian Institute of Criminology.

<sup>3</sup> This appears to be particularly true for Mornington Island.

<sup>4</sup> Douglas, M. 1998, 'Restriction of the hours of sale of alcohol in a small community: a beneficial impact', *Australian and New Zealand Journal of Public Health*, vol. 22, no. 6, pp. 714–719; Gray, D. and Wilkes, E. 2010, Reducing Alcohol and Other Drug

## Not paternalism and discrimination, but responsibility and need

Premier Campbell Newman has suggested that the Alcohol Management Plans (AMPs) are a 'temporary band aid solution' that should be phased out. He has also described them as 'paternalistic' and 'discriminatory'. He has asked:

Why is it that an Aboriginal worker cannot come home to a home they own and have a beer on their front porch and watch the TV news with their family? ...Why shouldn't they have that opportunity, sooner rather than later? ...Our ultimate goal is that Aboriginal people in this state, in the future should have the same deal as any other Queenslander.<sup>6</sup>

In making these comments, the Premier in many ways correctly contextualised the role of AMPs. AMPs are a stepping stone towards the long term objective of equality of opportunities for Indigenous Australians. AMPs aim to ensure that Indigenous Australians someday will enjoy substantive equality: equality in living standards and equality in enjoyment of human rights.

We agree with the Premier that the ultimate goal is 'for all Queenslanders to have the same opportunities, no matter where they live'.<sup>7</sup> The long term goal is to have Indigenous Australians enjoying the same rights and responsibilities as other Queenslanders in all areas of life, including, ultimately, in their 'right to drink' alcohol. The more pertinent and difficult question, however, is how are we going to get there?

In criticising paternalism, the Premier has touched on a key principle that CYI has for many years promoted as being integral for development, progress and social wellbeing: personal responsibility. It is true that too many Indigenous policies actually prevent, rather than encourage, Indigenous people from taking responsibility for their own lives. However, AMPs do not prevent Indigenous people from taking responsibility, they promote it. Alcohol restrictions in these communities are a necessary precondition for enabling individuals and families to start to change their lives in other important ways—such as by taking responsibility for the care and wellbeing of their children, and starting to manage their money to support better outcomes for themselves and their family. Restrictions provide a level of improved stability so that other positive changes can occur.

AMPs are not paternalistic. They are not discriminatory. They are examples of Indigenous communities taking control and taking responsibility. Alcohol restrictions in Cape York Indigenous communities were community-driven. Community voices, often of Indigenous women, wanted steps to be taken to tackle alcohol abuse. This has been highlighted throughout consultations in many inquiries, over many years. These include the:

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Related Harm, Closing the Gap Clearinghouse, Australian Institute of Health and Welfare, Resource sheet no. 3, <<http://www.aihw.gov.au/closingthegap>>; Margolis, S. A., Ypinazar, V., Muller, R. and Clough, A. 2011, 'Increasing alcohol restrictions and rates of serious injury in four remote Australian Indigenous communities', *Medical Journal of Australia*, vol. 194 no. 10, pp. 503–506, <<https://www.mja.com.au/journal/2011/194/10/increasing-alcohol-restrictions-and-rates-serious-injury-four-remote-australian>>; Seale, J.P., Shellenberger, S., Rodriguez, C., Seale, J.D. and Alvarado, M. 2002, 'Alcohol use and cultural change in an indigenous population: a case study from Venezuela' *Alcohol and alcoholism* vol. 37, no. 6, pp. 603–608; Brady, M. 2000, 'Alcohol policy issues for Indigenous people in the United States, Canada, Australia and New Zealand' *Contemporary Drug Problems*, vol. 27, pp. 476, 480, 492.

<sup>5</sup> Parker, R.N. 1995, 'Bringing "Booze" Back In: The Relationship Between Alcohol and Homicide' *Journal of Research in Crime and Delinquency*, vol. 32, no.3.; Anderson, P., Chisolm, D. and Fuhr, D. 2009, 'Effectiveness and cost-effectiveness of policies and programmes to reduce the harm caused by alcohol' *Lancet*, vol. 373, pp. 2234–2246; Smith, L., Morgan, A. and McAtamney, A. 2011, *Policing licensed premises in the Australian Capital Territory*. Canberra, ACT: Australian Institute of Criminology; Babor, T., R. Caetano., S. Casswell., Edwards, G., Giesbrecht, G., Grube, J., et al. 2003, *Alcohol: no ordinary commodity*. New York: World Health Organisation and Oxford University Press.

<sup>6</sup> Queensland Government. 2012, Department of Aboriginal and Torres Strait Islander and Multicultural Affairs, Alcohol reforms, <<http://www.indigenous.qld.gov.au/atsis/government/programs-and-initiatives/alcohol-reforms/about-alcohol-reforms>>.

<sup>7</sup> *Ibid.*

- Royal Commission into Aboriginal Deaths in Custody (1991)
- Aboriginal and Torres Strait Islander Women’s Task Force on Violence report (1991)
- *Violence in Indigenous Communities report* (2001)
- *Cape York Justice Study* (2001)
- *CMC’s Restoring Order: crime prevention, policing and local justice in Queensland’s Indigenous communities* (2009).

Justice Tony Fitzgerald’s *Cape York Justice Study* inquiry provided the immediate trigger for the introduction of alcohol restrictions by the Beattie government. This inquiry itself was born out of the advocacy of Indigenous communities and organisations, particularly Cape York Partnerships and Apunipima.

To renege on the government’s commitment to maintain alcohol restrictions until harm levels are normalised would do a grave disservice to those who struggled, sometimes at a high personal cost, to get these restrictions in place. It was often women who were the strongest supporters of the restrictions, and speaking out on the issue meant facing threats and intimidation from drinkers who resisted the proposed changes.

Where there are severe social problems occurring as a result of alcohol abuse and the community does not take responsibility for the problem, state and federal governments do have a responsibility to protect their citizens. If this means that alcohol restrictions need to be imposed to ensure that the people in these troubled communities enjoy rights to safety, health and wellbeing equal to other citizens, then they should be imposed until the situation can be normalised. The state and federal governments should take steps to ensure that the community does take responsibility for the problem.

Unique alcohol interventions are required to respond to the unique scale of the problems with alcohol that these communities experience. The unique circumstances that have led to the extraordinarily high levels of alcohol abuse and dysfunction include remoteness, heightened levels of poverty and unemployment, passive welfare, and Indigenous-specific laws imposed by federal and state governments which mean that there is a lack of individual land ownership, commercial activity, growth, progress, and market (and thus social) *normality*.<sup>8</sup>

AMPs treat these communities differently not because they are Indigenous communities per se, but on the basis of demonstrated *need*. Indeed, if non-Indigenous people live in or visit an AMP community, they are subject to the same laws. If a non-Indigenous community demonstrates the same level of need, alcohol interventions including restrictions should be put in place there as well.

### The perceived ‘right to drink’

As well as equal rights, Indigenous people need to be trusted with equal responsibilities. Where alcohol is concerned, the notion of rights versus responsibilities needs to be carefully unpacked. We need to ask: what is an alcohol policy for Indigenous Australian communities as they are at the moment, which properly adheres to the important principle of personal responsibility, as well as equality in rights?

The perceived right to drink comes with responsibilities. It very often interacts with other often more important human rights within communities. The perceived right to drink may interact negatively with the right of vulnerable community members, particularly children, to be free

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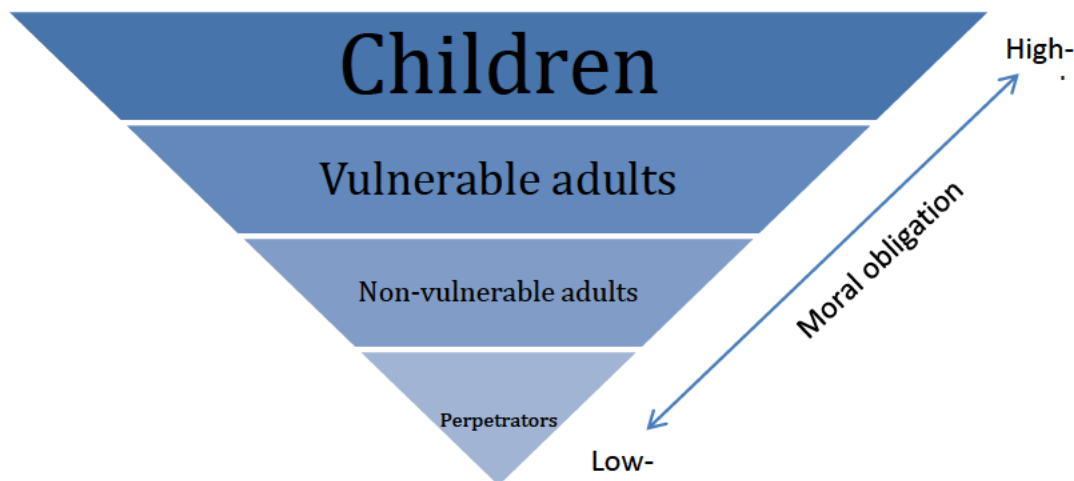
<sup>8</sup> CYI and Noel Pearson have published extensively about these issues previously and these details are not repeated here.

from violence and fear, and to grow up safe and healthy, to go to school, to be educated, and to enjoy high standards of physical and mental health. Prior to the implementation of alcohol restrictions, a selfish, perceived right of parents to drink was far too often pursued at the expense of parental responsibilities and the wellbeing of children. For example, one service provider describes the scene at the tavern when they first arrived in Aurukun in 2007, after the introduction of alcohol restrictions but before they were tightened to make the community as dry as possible. At this stage the tavern in Aurukun was open from 3-6pm and there were restrictions on the strength and number of drinks served.

I walked into the tavern...walked into 300 Indigenous people at three o'clock in the afternoon. The first thing that struck me was the silence in the tavern, no talking, everyone was concentrating on their drinks – they had two mid strength drinks in front of them...and they were drinking, and they drank one beer, two beers, go up and get another. One beer, two beers...so there was no talking until about four-thirty when people got a bit rowdy and a bit more drunk. So I landed and I got my two drinks and I sat down and I looked around at the people of Aurukun and then I looked outside the tavern and I saw that there were just as many people outside the tavern as there were inside, but they were the children – were all sitting outside the tavern waiting for whoever and they were just sitting and watching, there was no noise from them either, it was just so silent...At six o'clock the bell rang, I finished up and I remember walking out with everyone...and I still remember seeing all the kids around waiting for their parents to come out and what I would later see would happen was that parents would get...because they had the takeaway attached to the shop and they'd get their bag of hot chips or bag of revolting chicken and cheese deep-fried balls, and that's how they would get fed on the way home.<sup>9</sup>

In order to ensure that rights and responsibilities are being balanced in a way that will improve outcomes for children, a clear ordering of moral priorities must apply. Figure 1 presents the scale of moral obligation that should underpin how rights and responsibilities are weighed up, with children to be accorded the highest moral priority.

Figure 1: Scale of moral obligation



**Note.** 'Vulnerable adults' include the disabled, elderly and other persons with special vulnerabilities and needs. 'Non-vulnerable adults' include other able-bodied adults without special needs.

The long term goal of an equal 'right to drink' must therefore be approached in a balanced and sensible way, bearing in mind the *reality* in these communities, the very real social problems at play, and how far these communities have to go before they are as safe, functional and

<sup>9</sup> Service provider - Interviews, Visual Participatory Evaluation of the Cape York Aboriginal Australia Academy, Dr Annie Holden ImpaxSIA Consulting, 2013.

prosperous as the rest of Australia. In order to see problems rectified for future generations, we must place the transformation of the lives of children as the key priority.

Additionally, we must remember that nowhere in Australia is the perceived right to drink an unfettered right, without responsibilities. Everywhere, there are restrictions on serving alcohol to intoxicated people, on drinking age, on where you can consume alcohol, on public drinking, and on the hours at which alcohol can be sold. These restrictions respond to safety, health, law and order and social wellbeing needs appropriate to particular circumstances.

From a policy perspective, the equality in the 'right to drink' argument will not get us where we want to go—it will not create safe, prosperous, functional communities. We will simply see Indigenous communities decline to the levels of violence and dysfunction we saw prior to AMPs.

At the same time, treating Indigenous communities as if they are perpetual exceptions to the rules that should apply to everyone else is also not the right way to approach things. Yes, equality is the right approach. But the perceived 'right to drink' should correctly be thought of as a privilege, and one that comes with onerous responsibilities. It is not the same as the rights to be free from violence, to be safe, to be educated, and to be healthy.

The independent evaluation of the CYWR trial suggests that there has been growing support for restricting alcohol supply among community members. Anthropologist, John von Sturmer, reports a shift in attitudes towards alcohol in the communities in recent years. Where previously people saw drinking as 'the very sign of personal liberty', he now notes that 'at no time in our interviews did anyone say curtailment of drinking was a bad thing'.<sup>10</sup>

Removing AMPs before the situation in these communities has normalised, prioritises the right to drink over the right of women, children and others in these places to have love, wellbeing and safety.

## Are AMPs working?

No fair minded person familiar with these communities prior to the AMPs would dispute that a seismic shift has started to occur with the introduction of AMPs. More homes and gardens are now cared for. More money is now available for other things—food on the table, children's toys, books and play equipment.

Ask any police officer who worked in these communities before the introduction of the AMPs. Ask the school teachers and the doctors and nurses who see firsthand the impact of sly grog in the communities today. The teachers will tell you, for example, about the slump in school attendance that inevitably follows a night of partying and fighting when grog comes to town. They will tell you that the children who do turn up on these days are often unable to stay awake; they are sleep deprived due to the drinking, partying, fighting and noise of the night before. Cape York Aboriginal Australian Academy (CYAAA) data confirms this; it shows that school attendance drops by 10-20% after such alcohol fuelled nights.<sup>11</sup>

These communities are so palpably different to when the grog was rife that TV crews can show it on a screen. The Four Corners crew, who noted Aurukun once had the highest murder rate and

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<sup>10</sup> von Sturmer, J. 2013, *Living under the Family Responsibilities Commission: Experience and Testimony; Speaking straight, speaking from the heart*, p. 4.

<sup>11</sup> CYAAA internal attendance tracking data.

lowest school attendance in the country, were able to show a clear improvement when they visited Aurukun in 2011 from their previous pre-AMP visit.<sup>12</sup>

The change in Aurukun has also been described by anthropologist Peter Sutton:

In the four years 1999-2002, there were six suicides and six homicides in this community of less than a thousand people ...In the almost four years after the introduction of [state-imposed] alcohol controls, there were only two suicides and one death caused by 'trauma', and no confirmed homicides.<sup>13</sup>

The independent evaluation of the CYWR trial shows there was a large statistically significant fall in serious assaults resulting in injury in Aurukun in mid-2008. The evaluation states this large fall 'appears to reflect the impact of the reduction in trading conditions and subsequent closure of the Three Rivers Tavern from March 2008'.<sup>14</sup>

The experience of the CYWR trial itself reinforces the importance of alcohol restrictions. The successes of the CYWR trial, as documented in the recent CYWR independent evaluation, would not have occurred without alcohol restrictions. Alcohol restrictions have provided greater social stability on which the other initiatives of the CYWR trial have built—to achieve positive shifts in social norms around parenting, household budgeting and school attendance, for example. John von Sturmer, who has had a long association with Cape York communities, observes in his report:

- 'that the restriction on alcohol has had an enormous "calming" effect. It makes life more liveable. Anybody who has lived within these situations during the heavy boozing days knows how destructive and intolerable the situation was then'
- that there has been a positive shift in community norms regarding less tolerance towards alcohol abuse.<sup>15</sup>

Queensland Government quantitative data across the communities also increasingly confirms the clear impact of AMPs.<sup>16</sup> For instance, the most recent annual data report shows a widespread downward trend since the introduction of AMPs for assault-related hospitalisations (Figures 2 and 3).<sup>17</sup>

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<sup>12</sup> ABC News. 'ABC News Four Corners: Aurukun learning lessons of NT intervention', 2 May 2011, <<http://www.abc.net.au/news/2011-05-02/aurukun-learning-lessons-of-nt-intervention/2700332>>; Family Responsibilities Commission. 2011, Quarterly Report no. 12: April – June 2011, 2, <<http://www.datsima.qld.gov.au/resources/atsis/government/families-responsibilities-commission/frc-quarterly-report-12.pdf>>.

<sup>13</sup> Sutton, P cited in Glendinnen, A. 2009, *The Pearson Solution*, <<http://www.theaustralian.com.au/arts/books/the-pearson-solution/story-e6frg8nf-1225804242266>>.

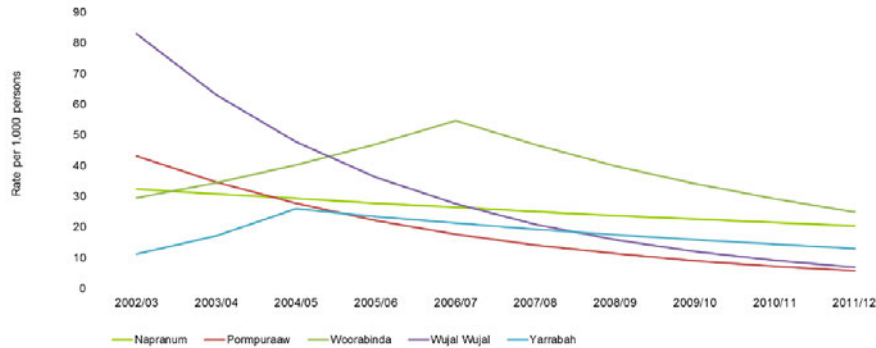
<sup>14</sup> Limerick, M. 2013, Overview, *Cape York Welfare Reform: Evaluation Report*, pp. 42-43; see also at p. 270. In other communities, such as Kowanyama, on the ground service providers such as police and teachers have also noted a clear improvement coinciding with the closure of the canteens.

<sup>15</sup> von Sturmer, op cit, p. 4.

<sup>16</sup> It is noted that despite having this review of AMPs on foot, the most recent Queensland Government data released in the 'Quarterly Indicator' reports are more than 12 months old. Up-to-date data and analysis are relevant to assessing current levels of harm in these communities.

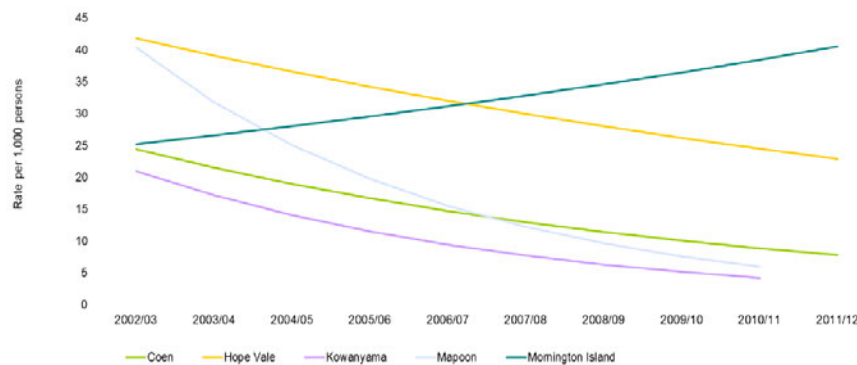
<sup>17</sup> Data for Aurukun were not included in Figures 1 or 2 because for 2010/11 and most of 2011/12, admissions for assault-related conditions in or near Aurukun relate to admissions to Weipa Hospital only. For these periods, data from Aurukun Primary Health Care Centre are not complete due to changes in improving data capture processes.

**Figure 2:** Trends for communities showing statistical evidence of change in hospital admissions for assault related conditions with ranges of more than 25% – all admissions of residents, 2002/03 to 2011/12<sup>18</sup>



**Source:** Department of Aboriginal and Torres Strait Islander and Multicultural Affairs, 2013.<sup>19</sup> **Note:** Only communities that show statistically significant change with a range of more than 25% are included in Figure 2.

**Figure 3:** Trends for communities showing statistical evidence of change in hospital admissions for assault related conditions with ranges of less than 25% – all admissions of residents, 2002/03 to 2011/12



**Source:** Department of Aboriginal and Torres Strait Islander and Multicultural Affairs, 2013.<sup>20</sup> **Note:** Only communities that show statistically significant change with a range of less than 25% are included in Figure 3.

Although nine of the 10 communities displayed in Figures 1 and 2 indicate statistically significant declines in assault related hospital submissions, Mornington Island indicates a significant increase. Those on the ground in Mornington Island suggest it has a particular problem with home brew, which may be one explanation of this upward trend.

Hospitalisation admission rates for assault related conditions provide one indicator of change. Trends for other indicators included in Queensland Government data are summarised in a table at **Appendix A**.

<sup>18</sup> The data illustrated in Figures 2 and 3 do not represent the prevalence of each condition in each area, rather the number of hospital admissions for each condition. Some patients will have several hospitalisations for the same disease or injury episode and thus, the burden of injury may be overestimated by measuring hospital admissions.

<sup>19</sup> Department of Aboriginal and Torres Strait Islander and Multicultural Affairs. 2013, *Annual Bulletin for Queensland's discrete Indigenous communities: 2011/2012*, Brisbane: DATSIMA, p.3.

<sup>20</sup> Department of Aboriginal and Torres Strait Islander and Multicultural Affairs. 2013, *Annual Bulletin for Queensland's discrete Indigenous communities: 2011/2012*, Brisbane: DATSIMA, p.2.

Independent studies also show that AMPs have been effective in reducing harm:

- Studies using Royal Flying Doctor Service (RFDS) data on trauma and injury retrieval rates showed statistically significant reductions in the retrieval rates for serious injury after the introduction of AMPs.<sup>21</sup> The absolute and proportional rates of serious-injury retrievals fell significantly as restrictions on alcohol increased.
- In the communities considered, the rate of serious injury is shown to be at the lowest recorded in 15 years, in spite of a general trend in Queensland and Australia-wide, of injury rates rising slowly over time.<sup>22</sup>

Positive outcomes have also been noted in other parts of Australia where similar alcohol management approaches are taken.<sup>23</sup>

The current Queensland Government review of AMPs should be informed by independent, open and up-to-date data and analysis, and other evidence relevant to assessing the effectiveness of AMPs.<sup>24</sup> It is most disappointing that these are not features of the Queensland Government's approach.

### A recent change to the open availability of data

Oddly, given the existence of the Queensland Government's AMP review, CYI has been informed that the Minister for Aboriginal and Torres Strait Islander Affairs has recently decided that data regarding the levels of harm in these communities will be provided on a much more restricted basis than has previously been the case.<sup>25</sup>

In the 2001 *Cape York Justice Study*, Fitzgerald insisted that 'there must be effective resourcing and coordination of community and regional level data collection' to accurately ascertain levels of harm in these communities.<sup>26</sup> Without these data, efforts to monitor the impacts of any reforms are 'indefinitely hampered'.<sup>27</sup>

Since the introduction of alcohol restrictions, the Queensland Government has openly published Quarterly Reports on key indicators of harm in Queensland's Indigenous communities. Annual reports have also been made available that consider longer term statistical trends. The publication of this up-to-date local level data in Quarterly Reports has previously been hailed as being a 'strong step' forward in terms of bringing transparency and rigor to the monitoring and reporting about one of the most vexing problems of our time.<sup>28</sup>

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<sup>21</sup> Margolis, S., Ypinazar, V.A. and Muller, R. 2008, 'The impact of supply reduction through alcohol management plans on serious injury in remote Indigenous communities in remote Australia: A ten-year analysis using data from the Royal Flying Doctor Service', *Alcohol and Alcoholism*, vol. 43, no. 1, pp. 104–110.

<sup>22</sup> Margolis et al. 2011, 'Increasing alcohol restrictions...', op cit, pp. 503–506.

<sup>23</sup> Hudson, S. 2011, Alcohol restrictions in Indigenous communities and frontier towns, The Centre for Independent Studies Policy Monograph no. 116, < <http://test.cis.org.au/images/stories/policy-monographs/pm-116.pdf>>.

<sup>24</sup> Although the Queensland Government is conducting a review of AMPs the most recent public release of Queensland Government data central to an assessment of the levels of harm in these communities is now 12 months old: the *Quarterly report on Key Indicators in Queensland's discrete Indigenous communities January-March 2012*. Further, despite the seriousness of this issue, and its proven intractability to other policy solutions, there has been no investment made by the Queensland Government in a rigorous independent evaluation to determine the effectiveness of AMPs.

<sup>25</sup> No formal announcement has been made, but CYI has been informed of the Minister's decision through departmental communications.

<sup>26</sup> Fitzgerald, T. 2001, *Cape York Justice Study*, Brisbane: Queensland Government, p.104.

<sup>27</sup> Fitzgerald, T. 2001, *Cape York Justice Study*, Brisbane: Queensland Government, p.91, 222.

<sup>28</sup> Crime and Misconduct Commission. 2009, *Restoring Order: crime prevention, policing and local justice in Queensland's Indigenous communities*. Brisbane: CMC.

Yet now, in the midst of a review contemplating the removal of alcohol restrictions if the ‘community’ desires it, a decision is made to limit the provision of this information. CYI understands these local level data showing levels of harm will now only be made available annually, and will only be provided as a matter of course to the community involved rather than publicly released.<sup>29</sup> The annual report on levels of harm will no longer be published on the government’s website, but will be available ‘on request’. CYI has been advised by the Department of Aboriginal and Torres Strait Islander and Multicultural Affairs that the decision to limit the availability of these objective data about levels of harm was made because some Mayors argue ‘that publication of the information in these reports on the website portrays a very negative image of community life.’<sup>30</sup>

The decision to limit the availability of these data is in direct contrast to the direction the government is heading with other (mainstream/non-Indigenous data) through its ‘open data revolution’<sup>31</sup> and releases of multiple data sets.<sup>32</sup> In October 2012 Premier Newman, stated:

The LNP is determined to change the culture of the Queensland Government to be more open by allowing more public access to Government information collected in all regions, in all kinds of formats, for all kinds of reasons.<sup>33</sup>

It is difficult not to conclude that when it comes to Queensland’s Indigenous communities a different standard is being applied, and that we are seeing a shift back to a time when problems in these communities were routinely swept under the carpet, rather than examined openly in order to understand them, make efforts to address them, and allow for progress to be tracked.

CYI has requested and received a copy of the latest annual data report from the Department of Aboriginal and Torres Strait Islander and Multicultural Affairs. The latest data paints a picture that shows:

- an increasingly convincing picture over time of largely downward trends in harm levels since the introduction of AMPs
- rates of harm in these communities are still far above the state average; there is a long way to go before harm in these communities is normalised.<sup>34</sup>

This raises a number of questions for the Queensland Government:

- Has the decision to limit the availability of these data been influenced by the fact that they paint an increasingly positive picture of the impact of AMPs at reducing levels of harm over time? Is the government not wanting to focus on these facts at a time when it is proposing that alcohol restrictions can be removed?
- By conducting the current review of AMPs and providing ‘communities’ with the ability to seek to have the restrictions lifted, is the Queensland Government implying that the current levels of harm—which although reduced are still very high—are ‘good enough’ or acceptable

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<sup>29</sup> The communities themselves will now have a more limited ability to consider the data of other communities by way of comparison.

<sup>30</sup> Email communication, Department of Aboriginal and Torres Strait Islander and Multicultural Affairs, 3 May 2013.

<sup>31</sup> The Honourable Campbell Newman, Media Statement: Queensland Government’s ‘open data’ revolution begins, 9 October 2012 <<http://statements.qld.gov.au/Statement/2012/10/9/queensland-governments-open-data-revolution-begins>>.

<sup>32</sup> The Honourable Campbell Newman, Media Statement: New portal revolutionises open data, 14 December 2012 <<http://statements.qld.gov.au/Statement/2012/12/14/new-portal-revolutionises-open-data>>. The Honourable Campbell Newman, Media Statement: Queensland data opens up world of possibilities, 3 April 2013 <<http://statements.qld.gov.au/Statement/2013/4/3/queensland-data-opens-up-world-of-possibilities>>.

<sup>33</sup> The Honourable Campbell Newman, Media Statement: Queensland Government’s ‘open data’ revolution, op cit.

<sup>34</sup> <sup>34</sup> Department of Aboriginal and Torres Strait Islander and Multicultural Affairs. 2013, *Annual Bulletin for Queensland’s discrete Indigenous communities: 2011/2012*, Brisbane: DATSIMA.

for Indigenous communities? Would they be considered acceptable in any other area of Queensland?

- Has the decision to limit the availability of these data been influenced by a fear that if alcohol restrictions are removed in some locations, going forward such public reporting will expose the government to criticism as the data will show corresponding rises in levels of harm?
- Finally, what message is the Queensland Government sending to leaders of Queensland's Indigenous communities by accepting the proposition put forward by some Mayors *that it is the availability of reporting about levels of harm* that portrays these communities in a very negative light? CYI suggests that to accept this proposition is to send entirely the wrong message to Mayors and other Indigenous leaders—it is not the availability of the reporting on levels of harm that leads to negative portrayal, *it is the actual harm occurring* that is the problem. The Queensland Government should not acquiesce to the views of those Mayors who suggest that limiting the availability of these data is somehow part of the solution. Instead the Queensland Government should demand that Mayors and other leaders at the local level step up and take responsibility for helping to drive these harm levels down. This is discussed further below.

## AMPs should be strengthened and supported

Too much alcohol continues to flow into these communities. More needs to be done to prevent sly grog and the penalties imposed on those bringing sly grog into the community should be strengthened.

Police have told us that they spend a lot of time chasing after sly groggers, but that a lot of alcohol is still getting into communities. Alcohol trafficking is clearly still an attractive activity. With reduced alcohol available in communities the on-sale price has risen. We were advised that people will pay \$300 for a bottle of rum. The risk of being caught and the legal response is not sufficient to deter sly groggers. Police expressed frustration at court responses to both alcohol related family violence and grogging.

'...violence (is) much better with alcohol restrictions introduced but gradually (it's) becoming worse as authorities are very lax on policing laws so people feel they can get away with it.'

- Welfare reform community, service provider

sly

The limitations of the current system of court prosecution resulting in imposition of a fine for breaches of AMPs are well known to police and community members alike. All too often fines imposed result in unfinalised SPER (State Penalties Enforcement Register) debt. CYI suggests that in order to make sanctions imposed against those who breach the AMP more meaningful, people with such debts could be referred to the Family Responsibilities Commission, where they could be encouraged by local commissioners to access appropriate services and to develop a payment plan in order to meet outstanding debts. The FRC could be enabled to use coercive measures such as income management orders and the use of the *BasicsCard*, or suspension of payments, in order to respond to issue of unpaid fines.

Greater transparency should be provided by the Queensland Government in terms of specifying the number of sly groggers that are prosecuted under the alcohol restrictions, and also what penalties have been imposed on them.

The effort spent in enforcing the AMPs needs to be maintained, and in some cases redoubled. It is vital that an adequate police presence be maintained in order that the focus on policing AMPs can be sustained until harm levels are normalised.

In some cases, despite AMPs, laws do not prevent stockpiling of alcohol in the community. This means that alcohol can be accumulated for a big party. The police we have spoken with have indicated that when this occurs they know that on party days there will be a significant increase in violence well into the night.

### **Building community support to reduce harm: local leadership is vital**

It is unfortunate that AMPs continue to be a highly divisive issue in a number of communities and that some Mayors and elected councillors are vocal opponents of the AMPs. A clear lesson from the CYWR trial, which is confirmed by the independent evaluation, is that the successes of major reforms to address disadvantage will be strongest when local leaders, including the Mayors and councillors, support the need for change.<sup>35</sup> If conducted well, the task of considering alcohol restrictions, and planning for their removal once alcohol related harm is normalising could be used as a powerful mechanism to increase Indigenous responsibility and restore Indigenous authority over their own social problems. However, this is not the path being taken in the current review.

Ascertaining the 'community' view about alcohol restrictions has always been problematic. In all Queensland's Indigenous communities views differ, as in any society. The notion of assessing the community 'choice' when it comes to alcohol restrictions must be carefully considered.

The Queensland Government has asked each 'community' to form a view about the future of alcohol restrictions without the benefit of up-to-date data and analysis, and without any information being provided to inform community planning about the large body of evidence from Australia and elsewhere regarding what initiatives may help to reduce alcohol related problems.

It appears that heavy reliance will be placed on the views expressed by the elected council. It is councils who are encouraged to communicate back to government the 'community' view.

This Queensland Government has a clear view about the desirability of re-empowering councils to decide in general what is in the best interests of their regions, and removing some decision making from the state.<sup>36</sup> The underlying philosophy that local communities need to be able to respond to issues on a case-by-case basis is absolutely supported by CYI.

However, if local councils in Queensland Indigenous communities are to be the key decision makers regarding the availability of alcohol there are a number of issues and realities in these communities that must be confronted:

- Historically, councils in these communities have had a deep conflict of interest in relation to the issue of alcohol availability and the need to reduce alcohol related harms. Prior to the introduction of alcohol restrictions, councils heavily depended on revenue from the taverns

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<sup>35</sup> Limerick, op cit.

<sup>36</sup> Liberal National Party, 2012, *Empowering Queensland Communities*, < <https://lnp.org.au/restore-accountability-in-government/empowering-queensland-communities/>>; The Honourable Campbell Newman, Media Statement: Parklands handover a step closer, 11 December 2012 <<http://statements.qld.gov.au/Statement/2012/12/11/parklands-handover-a-step-closer>>; The Honourable Lawrence Springborg, Media Statement: Fluoride Bill – LNP brings Queensland councils back to the table, 29 November 2012 <<http://statements.qld.gov.au/Statement/2012/11/29/fluoride-bill--lnp-brings-queensland-councils-back-to-the-table>>.

in order to support their operations. While this is no longer the case, the Queensland Government has done little to incentivise local leadership to support the reforms and some councils have continued to oppose the restrictions as a matter of course. Measures must be put in place to get councils to 'step up to the plate' and show much needed leadership by supporting/demanding a normalisation in the levels of harm in order for the restrictions to be removed.

- It is widely known that in some communities there are councillors who are known or suspected to be involved in illegal activities, or they are heavy drinkers with known or suspected involvement in sly grogging.<sup>37</sup> Those unfamiliar with Queensland's Indigenous communities may simplistically assume that the election of these people to be office holders confirms the community choice is pro-alcohol. However, this fails to recognise the complexity of power, family relationships and cultural factors at work. In some cases, threats and intimidation play a part. Individuals can be bullied or targeted by disgruntled drinkers or those making money by grog running. This is a very real issue in small communities.<sup>38</sup>
- For many years the Queensland Government has emphasised the need for these councils to focus on core council business of 'roads, rates and rubbish', and steps have been taken to limit or remove the role of local councils in responding to the broader social and economic problems plaguing their communities.
  - CYI has never supported the limiting of the role of local councils in this way, but has argued that effective local level leadership across these broader areas of responsibility, particularly from councils, is a vital element of lifting these places from social and economic dysfunction.
  - To put councils at the centre of decision making about the availability of alcohol in their communities now, however, represents an abrupt shift in policy direction from the Queensland Government. It is one that can be supported only on the proviso that alcohol restrictions are not immediately relaxed or removed, and that processes and structures are put in place to ensure that councils step up and take leadership to normalise the levels of harm in their communities.

If councils are to be truly accorded greater responsibility for the availability of alcohol and respond to alcohol related harms at the local level, the model should also include:

- The ability for councils to impose alcohol restrictions under council by-laws. Under such a model the council and the community would have a far greater ability to change restrictions when gaps are exposed, e.g. to counter emerging tactics being used by drinkers and sly groggers to circumvent existing restrictions. This would allow councils to be far more responsive to local circumstances and less reliant on the State to fix the problems through changes to state legislation.
- A clear process and authority by which alcohol restrictions, once removed, can be re-imposed according to the wishes of the community or council, or if an increase in the level of harm occurs. There are currently difficulties for any local community in Queensland wishing to respond to high levels of alcohol related harm by limiting the supply of alcohol. Existing case law shows that councils and community interests have a very limited ability to successfully influence liquor licensing decisions to limit the availability of alcohol.<sup>39</sup> These

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<sup>37</sup> Crime and Misconduct Commission, op cit.

<sup>38</sup> *Ibid.*

<sup>39</sup> Criminal Justice Research. 2012, *Drink Safe precincts – interim evaluation: the first 14 months of the trial*, Brisbane: Queensland Government, p. 254-255.

existing difficulties must be overcome as part of a comprehensive model to empower local leadership to respond effectively to these problems in an ongoing way.

- Greater local level involvement in enforcement of alcohol restrictions, for example, through the use of council controlled community police to enforce the alcohol related by-laws. Under such a model, fine revenue from by-law breaches would be returned to the councils, acting as an incentive to enforce the AMP.
- Greater local level control of the sanctions or other responses provided to those who breach the AMP. Using Justices of the Peace (JP) Magistrates Courts,<sup>40</sup> or the FRC where it exists, to directly and more immediately respond to those breaching the AMP has potential to provide this greater local level control.
  - Currently a lengthy process applies that may mean that any effective sanction or response occurs well after the actual breach behavior. Breaches of the AMP are brought before the Magistrates Court (which usually takes some time), the vast majority of breaches result in a conviction, inevitably a fine is imposed, and often this fine ends up as an unfinalised SPER debt.
  - In welfare reform communities a conviction for a breach will trigger a referral to the FRC. The FRC model has proven successful in restoring local authority and acts as a strong catalyst for bringing about change in people's lives and shifting social norms. It appears to provide a far more powerful model in these communities than existing Magistrates Court process, for example.

Outside of the CYWR communities, Kowanyama provides an example of local leadership actively pursuing a strategy to build local authority—so that it is local leaders who are asking local people to step up and take responsibility to tackle alcohol-related problems and restore other positive social norms. In Kowanyama local councils and community police employed by the council are actively asserting local authority through conducting truancy patrols, and counselling children and families around school attendance. Local police and local councils are also working together to encourage that wherever possible people be charged under the by-laws for alcohol-related offences (rather than for AMP offences under the *Liquor Act 1992*), which are then prosecuted in the local JP Magistrates Court. This is said to be a deliberate strategy also to build local authority and use local people to get others to take responsibility.

Most fundamentally, steps must be taken to ensure that local leaders, including Mayors and councils, show the leadership that is required in order to transform the situation in these communities.

- We have noted our concerns above with respect to the State's recent acquiescence to the view put forward by some Mayors that the availability of data regarding levels of harm in their community should not be routinely made publicly available because it 'portrays their community in a very negative light'. This sentiment reflects an astonishing failure of leadership and 'head in the sand' approach of the Mayors involved. The State Government must demand greater leadership from these Mayors, it should never be accepted that taking steps to hide the problem can be part of the solution. The negative portrayal of these communities is not due to the availability of the reporting of the data—the problem is visibly

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<sup>40</sup> Justices of the Peace (JP) Magistrates Courts constituted are by community members who are specially trained justices of the peace and who can deal with guilty pleas for by-law offences and some criminal offence matters. They have been more actively promoted in the past, but are still actively purposed in some communities, including Cherbourg, Lockhart River, Aurukun and Kowanyama. Mornington Island is currently working to establish a JP Magistrates Court.

writ large in many more powerful and overwhelming ways for these communities, including in the scars on the faces of far too many people in these places, and in the sight of unsupervised children wandering the streets. It is not the publication of the statistics that is the problem, *it is the level of harm that is occurring* that should attract the ire of the Mayors.

- Similarly, some Mayors argue that economic development of their community depends on the removal of alcohol restrictions. They state that international and Australian tourists are put off visiting their communities by the lack of alcohol. CYI acknowledges that there is a thirst from international and non-Indigenous Australians to experience and connect with remote Indigenous Australia, however, the reintroduction of alcohol now is not the answer to developing a thriving tourism market. It would be a ghoulish kind of tourism industry indeed if that were the case. The first step must be building a healthy, functional town supported by positive social norms around violence, work and education. This first step cannot be achieved if alcohol again is allowed to run rife in these communities.

It is CYI's view that sustainable and successful models of using alcohol restrictions to reducing harm in these communities must have the support of local councils and local leaders. CYI proposes that financial incentive should play a role in achieving such a model.

### A financial incentives framework to promote leadership and change

Historically, the Queensland Government has failed to develop any clear transition plan—it has failed to specify the reductions in harm levels required and the process by which alcohol restrictions could be relaxed, and eventually removed over time if desired at the local level. Unfortunately this policy failure carries an opportunity cost—the lack of clear transition goals and process has been a lost opportunity to motivate individuals and community leaders to work towards change. CYI has for a long period advocated for development of a staged, medium to long term approach to the transition, involving financial incentives for councils to reduce alcohol related harm.

Financial incentives have been increasingly and successfully relied upon at the State and Commonwealth levels to drive behavioural reforms. Some recent examples have included incentives to improve public hospitals across Australia,<sup>41</sup> remote area incentive schemes for teachers and graduate retention incentives programs,<sup>42</sup> and incentives for employers to encourage 'healthy workers' under the National Partnership Agreement on Preventative Health.<sup>43</sup> Despite the power of such incentives to drive change, there has been little use of them in the current context.

CYI proposes that an incentives framework be developed and implemented to align the objectives of AMPs and community leaders so that there is unity behind the common objective of overcoming the problems created by alcohol. Such an incentives framework would provide a direct and explicit connection between:

- performance in reducing alcohol related harm
- financial reward payments to councils

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<sup>41</sup> Council of Australian Governments. 2010, National Health Reform Agreement – National partnership agreement on improving public hospital services. < [http://www.yourhealth.gov.au/internet/yourhealth/publishing.nsf/Content/npa-improvingpublichospitals-agreement/\\$File/National%20Partnership%20Agreement%20on%20Improving%20Public%20Hospital%20Services.pdf](http://www.yourhealth.gov.au/internet/yourhealth/publishing.nsf/Content/npa-improvingpublichospitals-agreement/$File/National%20Partnership%20Agreement%20on%20Improving%20Public%20Hospital%20Services.pdf)>.

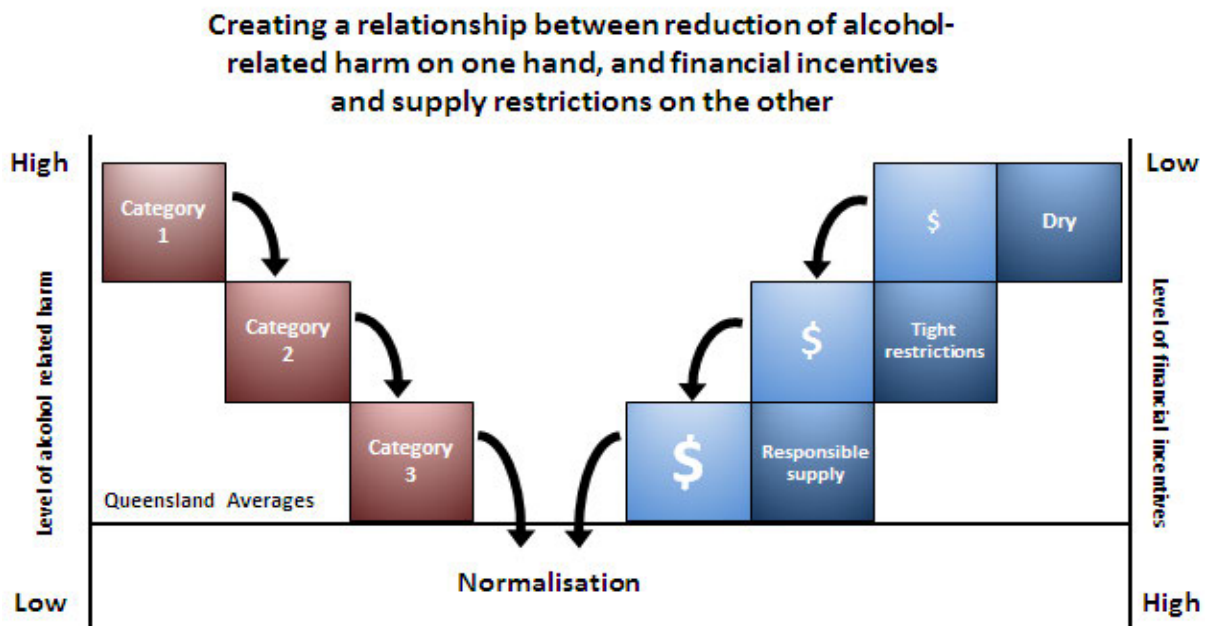
<sup>42</sup> Council of Australian Governments. 2012, National partnership agreement on improving teacher quality: performance report for 2011.

<sup>43</sup> Council of Australian Governments. 2008, National Partnership Agreement on Preventative Health.

- earned autonomy in terms of relaxation and removal of alcohol-restrictions.

Such a framework provides clear goals, and councils and community members will be able to see the direct connection between funding opportunities, and taking on responsibility for normalising alcohol related harm (see Figure 4).

**Figure 4:** Incentives framework



Under such a framework, the government is able to send a clear message that the moral priority is the wellbeing of children and vulnerable adults, their rights come first. However, the ball is clearly thrown into the court of the community to act on alcohol related harm. Alcohol restrictions become something that is objectively determined (by reference to indicators of harm) rather than being perceived as determined by arbitrary decisions of government and of uncertain and indefinite duration.

In order to be effective, the incentives to move from one category to another must be substantial.<sup>44</sup> The maximum possible proportion of State and Commonwealth funding to communities should be linked in to this financial incentives framework. Funding would be divided between:

- Base level funding for local government services and basic services. The base level funding would be provided to councils and communities without being linked to this financial incentives framework.

<sup>44</sup> The communities of Pormpuraaw, Doomadgee and Mapoon have received \$100,000 each from the Queensland Government as a limited reward for taking positive steps towards alcohol management and harm reduction. It is CYI's view that a financial incentives framework must be much more substantial in order to be compelling. See Queensland Government. 2008, *Quarterly report on key indicators in Queensland's discrete Indigenous communities: October-December 2008*, <<http://www.datsima.qld.gov.au/resources/atsis/government/programs-initiatives/partnerships/quarterly-reports/oct-dec/quarterly-report-feb-for-web.pdf>>, p. 21.

- Non-base level funding. All non-base level funding would be provided to councils and communities through this financial incentives framework.

Data already collected on a range of alcohol related measures could be used to ascertain performance categories, with corresponding levels of financial incentives and corresponding levels of alcohol supply conditions (see Table 1). Measures may need to be restricted to those least susceptible to changes in reporting (e.g. hospitalisations for assault, serious violent offending). Breaches of alcohol restrictions would also be included as a measure.

**Table 1:** Funding model based on incentives framework

	<i>Measures and benchmarks</i>	<i>Financial incentives</i>	<i>Alcohol restrictions</i>
<p><b>Category 3</b> High alcohol-related harm per head of population</p>	<p>e.g.</p> <ul style="list-style-type: none"> <li>• high levels of hospitalisations for assault</li> <li>• high levels of serious violent offences</li> <li>• low school attendance</li> <li>• high level of sly grogging and AMP breaches</li> </ul>	\$	<b>Most restricted levels of alcohol supply e.g. Dry</b>
<p><b>Category 2</b> Reduced alcohol related harm per head of population</p>	<ul style="list-style-type: none"> <li>• reduced levels of hospitalisations for assault</li> <li>• reduced levels of serious violent offences</li> <li>• improved school attendance</li> <li>• reduced level of sly grogging and AMP breaches</li> </ul>	\$	<b>Mid-level restrictions of alcohol supply e.g. carriage limits, permit system</b>
<p><b>Category 1</b> Normalised level alcohol related harm per head of population</p>	<ul style="list-style-type: none"> <li>• state average levels of hospitalisations for assault</li> <li>• state average levels of serious violent offences</li> <li>• high levels of school attendance</li> <li>• few sly grogging and AMP breaches</li> </ul>	\$	<b>Low-level restrictions of alcohol supply</b>

Incentives may also aid in increasing compliance with AMPs by reducing the attractiveness of financial rewards associated with importing illegal alcohol and increasing the benefits to be gained from restricting it. A well balanced incentives model could be supported through local by-laws and policed by local people; such an approach would provide the greatest potential to deliver real and sustainable community-controlled outcomes.

### **There is a need to honestly confront addiction and displacement**

Alcohol restrictions were never intended to be a single magic bullet solution that would change the relationship that individuals and families in these places have with alcohol. Demand reduction measures and other reforms are also needed in order to address the problems of alcohol and to lift these communities from dysfunction and poverty. The CYWR trial has seen a considerable investment in new services in the four communities involved to help people to deal with alcohol problems, including through Wellbeing Centres. The independent evaluation found

evidence that the Wellbeing Centres had helped some people to ‘get off the grog and stop fighting at home’.<sup>45</sup> However, even in these communities where the investment has been substantial, the evaluation found there remain gaps in service provision ‘in relation to intensive alcohol, tobacco and other drugs treatment and services’.<sup>46</sup>

Although the issue of Indigenous drinkers in regional centres such as Cairns and Townsville has been a longstanding concern, there is no doubt that the imposition of the AMPs has drawn some of those addicted to grog to such centres in the quest for alcohol. This problem must be confronted honestly and not through simply trying to get these people back to their community or out of public view. For chronic alcoholics, there is a need for government to invest in effective regional rehabilitation facilities run on 12-step program lines, providing long-term therapy and care to provide a pathway out of dependency, crime and violence. It is astonishing that despite the scale of the addiction problem for people of Cape York there is no such rehabilitation available in Cairns, and that rehabilitation services across the Cape more generally are limited. Effective rehabilitation services require substantial expenditure in order to provide the treatment methods that hold out the best hope of transformation for alcoholics and addicts.

## Conclusions and recommendations

Alcohol consumption often leads to the denial of basic human rights of vulnerable members of these communities, including the right to be free from fear and violence. Alcohol is a privilege. It is not a human right. It comes with responsibilities. A clear order of moral obligation should apply and should determine that the rights of children and other vulnerable community members to be safe and healthy must prevail.

Despite perceptions to the contrary, AMPs were originally a community-driven initiative. It is important that the 19 Queensland communities in which AMPs apply are presented with all the relevant evidence for discussion and debate to ensure that informed decisions are made about the future of alcohol restrictions. This should include analysis of up-to-date empirical evidence showing the impacts of AMPs, and information describing the body of evidence more generally about what works to reduce alcohol related harms. The recent decision of the Queensland Government to limit the availability of data about levels of harm in these communities, suggests that the government has something to hide.

It is important that the voices and rights of the most vulnerable in the community are not subsumed by those more powerful.

### Recommendation 1

**Great care must be exercised in ascertaining ‘community’ consent for the removal of AMPs. Such consent should be fully informed. All those involved at the community level should be provided with independent analysis of up-to-date data, and a summary of the strength of the evidence from around the world of measures to reduce alcohol related harm, including supply reduction strategies.**

It should not be an option for leaders to put their ‘head in the sand’ about the scale of the problem that continues to be faced in these communities. Hiding these problems is not a

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<sup>45</sup> Brunton, C. 2013, Social Change Survey In. *Cape York Welfare Reform: Evaluation Report*, Chapter 4, p. 136.

<sup>46</sup> The Social Policy Research Centre. 2013, Implementation In. *Cape York Welfare Reform: Evaluation Report*, Chapter 3, p. 95; Clough, A. 2012, ‘Listening to what Indigenous people in remote communities say about alcohol restrictions and cannabis use: “Good thing that the alcohol’s gone, but the gunga has kept going”, *Medical Journal of Australia*, vol. 197, no. 5, p. 275.

solution. The Queensland Government, the Mayors, councillors and other local leaders must demonstrate leadership on this issue and they must continue to welcome ongoing scrutiny of levels of harm and the impact of efforts to reduce these levels.

### **Recommendation 2**

**Neither Mayors nor the Queensland Government should retreat from the open availability of data that allows the ongoing and transparent monitoring of levels of harm and efforts to reduce these harms at the local level.**

Because there is no evidence to indicate normalisation of harm levels in communities subject to AMPs, they should not be removed. Instead, there is a need to strengthen AMPs so that they are properly implemented and taken seriously by the communities in which they apply. Despite the efforts to police AMPs, sly grogging continues and this means that the negative effects of alcohol dependence are still felt. Unless AMPs are strictly enforced, they cannot be expected to fully achieve their objective. The visibility of this enforcement is also important. If AMPs are perceived by the community as being subject to proper implementation and policing, then their overall deterrence effect should increase.

### **Recommendation 3**

**AMPs should be retained and strengthened.**

- **Efforts to prevent sly grogging should be stepped up.**
- **There should be increased transparency around reporting of the prosecution and penalties imposed for sly groggers to ensure that this remains a priority.**
- **Police must be supported to properly enforce the AMP, including by ensuring there is an adequate police presence maintained in these communities at all times.**

AMPs should not remain in place indefinitely. The goal has always been to normalise the situation. However, no clear process has been established by the Queensland Government under which restrictions can be relaxed and eventually removed, based on the level of improvement achieved.

It is also important to ensure that leaders in these communities visibly support AMPs and are not implicitly or explicitly supporting their circumvention, as some evidence indicates. Incentives would increase compliance with AMPs by reducing the attractiveness of financial rewards associated with importing illegal alcohol, and increasing the benefits to be gained from removing it.

CYI proposes that an incentives framework be developed and implemented to provide a direct and explicit connection between performance reducing alcohol related harm, financial reward payments to councils, and earned autonomy in terms of relaxation and removal of alcohol-restrictions.

### **Recommendation 4**

**There remains a need for setting out clear objective standards of reduced levels of harm showing that the situation in these areas is normalising, in order to lead to the relaxation or removal of alcohol restrictions.**

### **Recommendation 5**

**A financial incentives framework should be developed to reward local leaders/councils for supporting and leading the reduction of alcohol related harm.**

While alcohol restrictions alone are not a panacea to the problems faced by Indigenous communities, they play a critical role in the change process. Any real effort to counter the effects of alcohol upon Indigenous communities must not only involve deterrence measures, but must also provide opportunities for positive change. The impact of alcohol related harm must be considered within the broader context of the other complex and inter-related issues, which also negatively affect Indigenous communities. This includes lower standards of educational achievement, land reform issues, employment inequality and a general lack of opportunities for economic development. The achievement of meaningful reform in other areas is difficult if Indigenous communities continue to be plagued by the varied and negative impacts of alcohol dependence.

There is still a long way to go. Relaxing or removing AMPs at this stage will only serve to undermine the benefits that have been realised to date and to jeopardise the investment that has been made to support alcohol reform and other areas of reform.

### **Recommendation 6**

**Alcohol restrictions must go hand in hand with broader reforms that focus on a range of issues including education, land reform and employment and economic development. A great deal can be learnt about the reforms needed in these areas from the successes and failures of the CYWR trial. If alcohol restrictions are not in place until harm levels have normalised, all other efforts to improve outcomes in these communities will be put in jeopardy.**

There are difficulties involved for any local community in Queensland wishing to respond to high levels of alcohol related harm by limiting the supply of alcohol. Existing case law shows that it is difficult in any area of Queensland for councils or community interests to successfully influence liquor licensing decisions to limit the availability of alcohol.<sup>47</sup> It is not clear that if alcohol restrictions are removed in any of the 19 communities in which they currently apply, they could be easily be re-imposed, even in response to a clear council or community desire for such restrictions.

### **Recommendation 7**

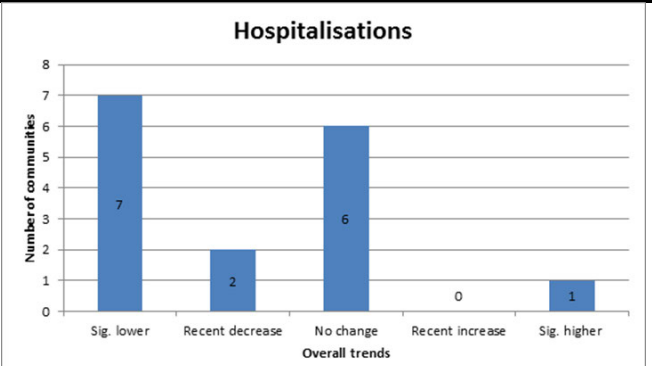
**If alcohol restrictions are removed in any community, which is strongly opposed, there must be a commitment made by the Queensland Government to establish a clear and responsive system through which alcohol restrictions can be reintroduced if the community desires it, or harm levels increase. This system by which alcohol restrictions can be re-imposed on a community by community basis must be clearly articulated prior to any removal of restrictions. It should include establishing objective criteria that will trigger the re-introduction of alcohol restrictions including:**

- **decreases in school attendance**
- **increases in violent crime**
- **increases in levels of serious injury.**

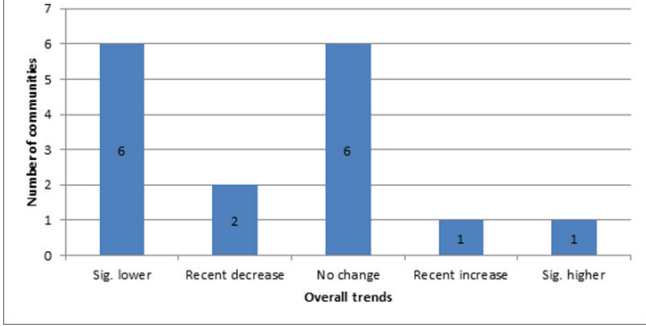
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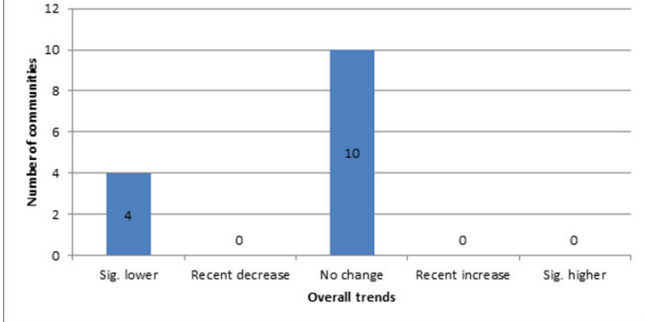
<sup>47</sup> Criminal Justice Research. 2012, *Drink Safe precincts – interim evaluation: the first 14 months of the trial*, Brisbane: Queensland Government, p. 254-255.

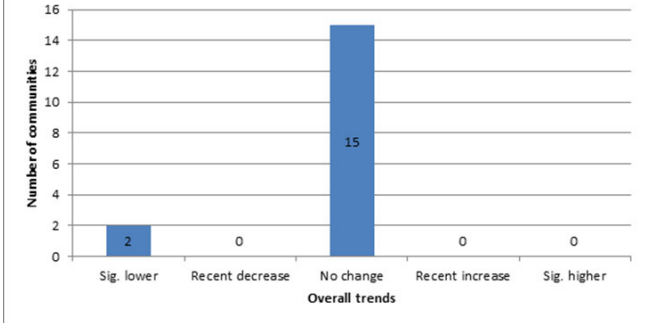
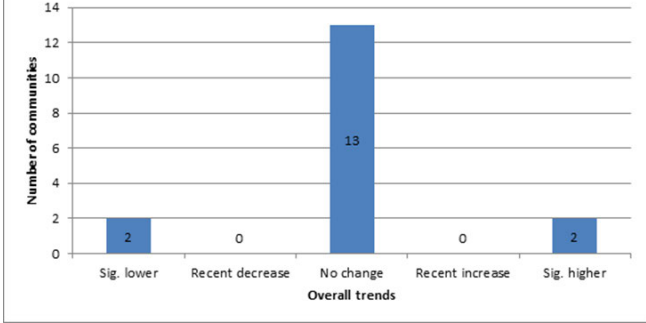
## Appendix A: Overview of trends in 17 Indigenous communities

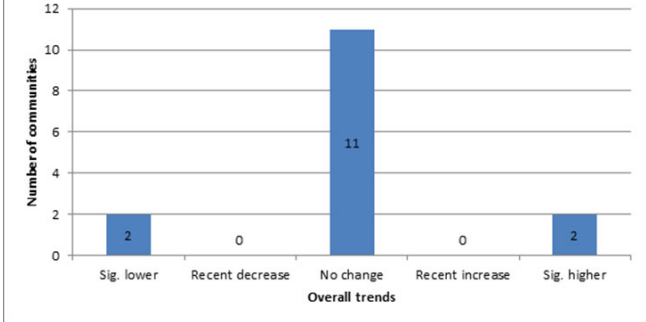
Type of incident	Overview of trends	Possible explanations	Graphic illustration of trends												
<p><b>Hospitalisation</b> for assault related conditions (2002/03-2011/12)</p>	<p>The data is mixed, but indicate that most communities (15 in total) have either decreased or stabilised (show no change). Mornington Island is the notable exception.</p> <p>Rates per 1000 population:</p> <ul style="list-style-type: none"> <li>are statistically significantly <b>lower</b> in seven communities (Coen, Hope Vale, Kowanyama,<sup>48</sup> Mapoon, Napranum, Pormpuraaw and Wujal Wujal)</li> <li>show statistical evidence of a <b>recent decrease</b> (following a previous increase) in two communities (Woorabinda and Yarrabah)</li> <li>show <b>no significant change</b> for six communities (Cherbourg, Doomadgee, Lockhart River, Mossman Gorge, Northern Peninsula Area and Palm Island)</li> <li>are statistically significantly <b>higher</b> in Mornington Island.</li> </ul> <p>Missing data:</p> <ul style="list-style-type: none"> <li>Aurukun was not included as the data was insufficient.</li> </ul>	<p>AMPs are generally working to reduce harm or prevent its further escalation. On the ground information suggests home brew is an ongoing problem in Mornington Island. This may explain, to some extent, the significant upward trend in this community.</p>	<p style="text-align: center;"><b>Hospitalisations</b></p>  <table border="1"> <caption>Data for Hospitalisations Bar Chart</caption> <thead> <tr> <th>Overall trends</th> <th>Number of communities</th> </tr> </thead> <tbody> <tr> <td>Sig. lower</td> <td>7</td> </tr> <tr> <td>Recent decrease</td> <td>2</td> </tr> <tr> <td>No change</td> <td>6</td> </tr> <tr> <td>Recent increase</td> <td>0</td> </tr> <tr> <td>Sig. higher</td> <td>1</td> </tr> </tbody> </table>	Overall trends	Number of communities	Sig. lower	7	Recent decrease	2	No change	6	Recent increase	0	Sig. higher	1
Overall trends	Number of communities														
Sig. lower	7														
Recent decrease	2														
No change	6														
Recent increase	0														
Sig. higher	1														

<sup>48</sup> Kowanyama shows significant positive trends across the indicators of harms (hospital admissions for assault-related conditions, offences against the person, and children admitted to child protection orders). AMP breaches have also significantly decreased in Kowanyama. As indicated above, discussions with people on the ground indicate that in Kowanyama's local council and community police are actively asserting local authority—for example, through conducting truancy patrols, and counselling children and families around school attendance. Local police and local councils are working together to encourage charging people under the by-laws for alcohol related offences, which are then prosecuted in the local JP Magistrates Court. This is said to be a deliberate strategy also to build local authority and use local people to get others to take responsibility.

Type of incident	Overview of trends	Possible explanations	Graphic illustration of trends												
<p><b>Reported offences against the person</b>, including serious and other offences (2002/03-2011/12)</p>	<p>The data are mixed, but indicate that most communities (14 in total) have either decreased or stabilised (show no change).</p> <p>Rates per 1000 population:</p> <ul style="list-style-type: none"> <li>are statistically significantly <b>lower</b> in six communities (Aurukun, Doomadgee, Kowanyama, Mornington Island, Napranum and Pompuraaw)</li> <li>show statistical evidence of a <b>recent decrease</b> (following an previous increase) in two communities (Lockhart River and Northern Peninsula Area)</li> <li>show <b>no significant change</b> for six communities (Coen, Hope Vale, Mapoon, Palm Island, Woorabinda and Wujal Wujal)</li> <li>show statistical evidence of a <b>recent increase</b> (following a previous decrease) in Yarrabah</li> <li>are statistically significantly <b>higher</b> for Cherbourg.</li> </ul> <p>Missing data:</p> <ul style="list-style-type: none"> <li>Mossman Gorge was not included as data is only available post-2007/08.</li> </ul>	<p>It is unclear why rates have increased in Yarrabah and Cherbourg.</p> <p>These rates are for all offending regardless of seriousness, so they are relatively susceptible to differences in reporting and enforcement. These trends in offending are likely to be more susceptible to such differences than measures such as hospitalisation for assault, for example.</p> <p>Rates of offending are caused by a range of complex factors—not just alcohol. It is necessary to address other factors also to see more consistent downward trends.</p>	<p style="text-align: center;"><b>Offences against the person</b></p>  <table border="1"> <caption>Data for Offences against the person</caption> <thead> <tr> <th>Overall trends</th> <th>Number of communities</th> </tr> </thead> <tbody> <tr> <td>Sig. lower</td> <td>6</td> </tr> <tr> <td>Recent decrease</td> <td>2</td> </tr> <tr> <td>No change</td> <td>6</td> </tr> <tr> <td>Recent increase</td> <td>1</td> </tr> <tr> <td>Sig. higher</td> <td>1</td> </tr> </tbody> </table>	Overall trends	Number of communities	Sig. lower	6	Recent decrease	2	No change	6	Recent increase	1	Sig. higher	1
Overall trends	Number of communities														
Sig. lower	6														
Recent decrease	2														
No change	6														
Recent increase	1														
Sig. higher	1														

Type of incident	Overview of trends	Possible explanations	Graphic illustration of trends												
<p><b>Convictions for breaches of sections 168B and 168C of Liquor Act 1992</b> (2010/11 and 2011/12)</p>	<p>Show that communities have either stabilised or that there are significantly less breaches of the AMP occurring.</p> <p>Rates per 1000 population:</p> <ul style="list-style-type: none"> <li>are statistically significantly <b>lower</b> in four communities (Cherbourg, Kowanyama, Woorabinda and Yarrabah)</li> <li>show <b>no significant change</b> for 10 communities (Aurukun, Doomadgee, Hope Vale, Lockhart River, Mapoon, Mornington Island, Napranum, Northern Peninsula Area, Pormpuraaw and Wujal Wujal).</li> </ul> <p>Missing data:</p> <ul style="list-style-type: none"> <li>Coen and Palm Island were not included due to insufficient data. Mossman Gorge does not have an AMP, so was not included.</li> </ul>	<p>The overall trend is reasonable. It may indicate increasing levels of compliance with the AMP in some communities, or alternatively that enforcement of the AMP has lessened in some communities.</p> <p>The large number of communities showing no change may suggest that breaches of AMPs are steady and/or that the AMP is being consistently enforced.</p>	<p style="text-align: center;"><b>Breaches of AMPs</b></p>  <table border="1"> <caption>Data for Breaches of AMPs</caption> <thead> <tr> <th>Overall trends</th> <th>Number of communities</th> </tr> </thead> <tbody> <tr> <td>Sig. lower</td> <td>4</td> </tr> <tr> <td>Recent decrease</td> <td>0</td> </tr> <tr> <td>No change</td> <td>10</td> </tr> <tr> <td>Recent increase</td> <td>0</td> </tr> <tr> <td>Sig. higher</td> <td>0</td> </tr> </tbody> </table>	Overall trends	Number of communities	Sig. lower	4	Recent decrease	0	No change	10	Recent increase	0	Sig. higher	0
Overall trends	Number of communities														
Sig. lower	4														
Recent decrease	0														
No change	10														
Recent increase	0														
Sig. higher	0														

Type of incident	Overview of trends	Possible explanations	Graphic illustration of trends												
<p><b>Children subject to substantiated notifications of harm (2010/11 to 2011/12)</b></p>	<p>Rates per 1000 population:</p> <ul style="list-style-type: none"> <li>are statistically significantly <b>lower</b> in two communities (Doomadgee and Northern Peninsula Area)</li> <li>show <b>no significant change</b> for 15 communities (Aurukun, Cherbourg, Coen, Doomadgee).</li> </ul>	<p>The overall trend is reasonable. Although only two communities indicate significant decreases, the fact that the remaining communities remain stable may indicate that this may be the beginning of positive change.</p> <p>These data are highly susceptible to changes in reporting. Of all the indicators reported, changes in reporting practices are likely to have the greatest impact on these data.</p> <p>Again, while alcohol plays a key role, other factors must also be addressed to see more consistent downward trends.</p>	<p style="text-align: center;"><b>Notifications of harm to children</b></p>  <table border="1"> <caption>Data for Notifications of harm to children</caption> <thead> <tr> <th>Overall trends</th> <th>Number of communities</th> </tr> </thead> <tbody> <tr> <td>Sig. lower</td> <td>2</td> </tr> <tr> <td>Recent decrease</td> <td>0</td> </tr> <tr> <td>No change</td> <td>15</td> </tr> <tr> <td>Recent increase</td> <td>0</td> </tr> <tr> <td>Sig. higher</td> <td>0</td> </tr> </tbody> </table>	Overall trends	Number of communities	Sig. lower	2	Recent decrease	0	No change	15	Recent increase	0	Sig. higher	0
Overall trends	Number of communities														
Sig. lower	2														
Recent decrease	0														
No change	15														
Recent increase	0														
Sig. higher	0														
<p><b>Children admitted to child protection orders (2010/11-2011/12)</b></p>	<p>These results were mixed, but may indicate that the rates of orders are stabilising overall.</p> <p>Rates per 1000 population:</p> <ul style="list-style-type: none"> <li>are statistically significantly <b>lower</b> in two communities (Kowanyama, Northern Peninsula Area)</li> <li>show <b>no significant change</b> for 13 communities (Aurukun, Cherbourg, Coen, Doomadgee, Hope Vale, Lockhart River, Mornington Island, Mossman Gorge, Napranum, Pormpuraaw, Woorabinda, Wujal Wujal and Yarrabah)</li> <li>are statistically significantly <b>higher</b> in two communities (Mapoon and Palm Island).</li> </ul>	<p>Changes in reporting practices are likely to have a large impact on these data also.</p> <p>Again, while alcohol plays a key role, other factors must also be addressed to see more consistent downward trends.</p>	<p style="text-align: center;"><b>Child Protection Orders</b></p>  <table border="1"> <caption>Data for Child Protection Orders</caption> <thead> <tr> <th>Overall trends</th> <th>Number of communities</th> </tr> </thead> <tbody> <tr> <td>Sig. lower</td> <td>2</td> </tr> <tr> <td>Recent decrease</td> <td>0</td> </tr> <tr> <td>No change</td> <td>13</td> </tr> <tr> <td>Recent increase</td> <td>0</td> </tr> <tr> <td>Sig. higher</td> <td>2</td> </tr> </tbody> </table>	Overall trends	Number of communities	Sig. lower	2	Recent decrease	0	No change	13	Recent increase	0	Sig. higher	2
Overall trends	Number of communities														
Sig. lower	2														
Recent decrease	0														
No change	13														
Recent increase	0														
Sig. higher	2														

Type of incident	Overview of trends	Possible explanations	Graphic illustration of trends												
<p><b>School attendance rates</b> for semester one (2007-2012)</p>	<p>These results were mixed. They indicate:</p> <ul style="list-style-type: none"> <li>statistically significantly <b>higher</b> percentages for Aurukun (Aurukun CYAAA) and Wujal Wujal (Bloomfield River State School)</li> <li>show <b>no significant change</b> for eleven communities (Cherbourg, Coen, Doomadgee, Kowanyama, Mapoon, Mornington Island, Mossman Gorge, Northern Peninsula Area, Pormpuraaw, Woorabinda and Yarrabah)</li> <li>statistically significantly <b>lower</b> percentages in two communities (Lockhart River and Napranum).</li> </ul> <p>Missing data:</p> <ul style="list-style-type: none"> <li>Palm Island and Hope Vale were not included due to a break in the time series for the data.</li> </ul>	<p>Generally, trends suggest social norms around school attendance may have stabilised.</p> <p>Again, while alcohol plays a key role, other factors must also be addressed to see more consistent downward trends.</p>	<p style="text-align: center;"><b>School attendance rates</b></p>  <table border="1"> <caption>Data for School attendance rates bar chart</caption> <thead> <tr> <th>Overall trends</th> <th>Number of communities</th> </tr> </thead> <tbody> <tr> <td>Sig. lower</td> <td>2</td> </tr> <tr> <td>Recent decrease</td> <td>0</td> </tr> <tr> <td>No change</td> <td>11</td> </tr> <tr> <td>Recent increase</td> <td>0</td> </tr> <tr> <td>Sig. higher</td> <td>2</td> </tr> </tbody> </table>	Overall trends	Number of communities	Sig. lower	2	Recent decrease	0	No change	11	Recent increase	0	Sig. higher	2
Overall trends	Number of communities														
Sig. lower	2														
Recent decrease	0														
No change	11														
Recent increase	0														
Sig. higher	2														

**Source.** Department of Aboriginal and Torres Strait Islander and Multicultural Affairs. 2013. *Annual bulletin for Queensland's discrete Indigenous communities, 2011/12*. Brisbane: Department of Aboriginal and Torres Strait Islander and Multicultural Affairs.

**Note.** In these data, the Northern Peninsula Area contains the communities of Bamaga, Injinoo, New Mapoon, Seisia and Umagico. These data have not been publicly released, but are obtainable by request to the Department of Aboriginal and Torres Strait Islander and Multicultural Affairs.



# **CYI submission on Aurukun Shire Council's Proposal for a Trial Alcohol Event**

24 May 2019

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## Introduction

There can be no doubt that alcohol abuse is a key cause of the many complex and connected problems seen in Aurukun and other such Indigenous communities. The evidence on this is overwhelming and cannot be refuted.

To effectively tackle entrenched and extreme disadvantage in Aurukun and Close the Gap in terms of suicide, child removal, incarceration, poor education, youth sexual violence and abuse, poor health and lack of employment—alcohol and other substance abuse must be tackled. Alcohol is not the sole driver of Indigenous disadvantage. A comprehensive strategy is needed, the focus cannot be on alcohol alone. But tackling the problems caused by alcohol is fundamental, and it must remain the top priority.

It was community members—particularly women—who fought the vested interests of the Council and the state over many years to have alcohol restrictions introduced. These restrictions continue to enjoy widespread community support and acknowledgement of their benefit. The introduction of alcohol restrictions (Alcohol Management Plans or AMPs) represents a conscious shift in policy to prioritise core human rights, such as the right to a life free from violence, and this must continue to be supported.

There should be no mistake, it is Aurukun's unique history and circumstance that have led to the extraordinarily high levels of alcohol misuse and associated dysfunction—it is not through any inherent fault or flaw of the Wik people. The unique scale and dimensions of the problems with alcohol in Aurukun require a unique response.

It is unconscionable that measures that have made positive inroads are to be weakened, without there being any superior approach or proposal to continue to drive down alcohol harms and misuse in place—yet this is precisely the situation for Aurukun. Since the review of alcohol restrictions began in 2012, the Queensland Government policy approach to reduce alcohol abuse and harm in Indigenous communities has been weak and ambiguous, and lacks even the most basic forms of accountability and transparency.

By all means let's come up with more effective strategies to continue to drive down the extraordinary rates of alcohol-related harms in Aurukun. These rates should be no higher than anywhere else in Queensland—the people of Aurukun, most especially its children, deserve this most basic form of equality of opportunity.

But without the normalisation of levels of alcohol harms and misuse in Aurukun, or an alternative solution to get us there, it is highly disconcerting that we have a council proposing to reintroduce alcohol in Aurukun and a Queensland Government who may be willing to enable it. To renege now on the commitment to tackle the problem of alcohol, is a grave disservice to those who struggled to get these restrictions in place and all those in the Wik nation impacted by the scourge of alcohol.

## The Gap is at its widest in Aurukun

Today, Closing the Gap on our people's disadvantage in Aurukun remains a gargantuan task. The people of Aurukun want and deserve the same opportunities for their futures, and their children's futures, as do other Australians. The vision for Aurukun is clear—a healthy, happy place for the children, where the children grow up with the best of both worlds. But this remains far from Aurukun's reality, and on many fronts there are signs that things are continuing to get worse rather than better.

Indigenous people suffer from extreme, entrenched disadvantage across many indicators, and the gap is not closing despite decades of sustained economic growth in Australia and ten years of combined government commitment to Close the Gap.

- The gap in the levels of violence, crime and incarceration is shamefully large, and continues to increase. Indigenous people in Australia are, as the *Uluru Statement from the Heart* laments, “the [most incarcerated people on the planet](#).” The rate of Indigenous incarceration [increased by an astonishing 45%](#) between 2008 and 2018.
- [More than half of young people in juvenile detention care are Indigenous](#). Indigenous young people are up to [28 times more likely](#) to be in youth detention than non-Indigenous juveniles.
- Child protection outcomes are [dire and continue to worsen](#). At current rates, Indigenous children will represent [more than 50% of children in out of home care](#) in Queensland by 2021.
- [Indigenous women are 35 times more likely](#) than members of the general female population to be hospitalised for spouse/domestic partner assaults in Queensland.
- [Queensland is not on track](#) to achieve the Closing the Gap targets for school attendance, reading and numeracy, early childhood education or Year 12 attainment.
- Indigenous suicide rates are amongst the [highest in the world](#).
- The gap is forecast to expand in [health, education, employment, housing and mental health](#) in Queensland.

Indigenous disadvantage is of course at its most extreme in remote and discrete Indigenous communities, such as Aurukun. An overwhelming amount of data across a range of social, health and economic outcomes—from compromised foetal and infant development to rates of juvenile detention and adult offending—paints a grim picture of the crisis in places such as Aurukun.

Although local level statistics are no longer made regularly and openly available by the Queensland Government,<sup>1</sup> we are able to provide some examples of Aurukun's stark overrepresentation within Indigenous overrepresentation. Disadvantage is extremely and unfairly concentrated in this small and beautiful community of around 1200 people. Aurukun suffers:

- An extraordinarily high proportion of its people involved in repeat, serious offending. It is well known that more than 70 people from Aurukun have been held in incarceration at a single point in time in recent years, for example. By way of further example, a public report shows [during a single two-year period, 44% of the individuals in Aurukun had been arrested and admitted to the watch-house at least once](#), 51% of these individuals were admitted to the watch-house more than once, and the highest number of admissions was a juvenile arrested and admitted to the watch-house 16 times.
- Endemic youth sexual violence and abuse. This issue has been in the spotlight since the 'Aurukun Nine' rape case—when nine boys and young men were convicted of raping a 10 year old girl with intellectual impairment in 2008. A 2013 report to the Queensland Government documented [pervasive peer-to-peer youth sexual violence and abuse in Aurukun](#) involving, both as offenders and victims, young people aged 12 to 16, as well as young adults, but with the problem extending to the sexual abuse of younger children.
- Disturbingly high rates of serious mental illness. For example, research recently published in the world's leading medical science journal, *The Lancet*, considers data over nearly a quarter-century and confirms "[alarmingly high rates of psychosis](#)" in the area of Cape York including Aurukun and shows mental health has deteriorated over time in a manner that is clearly linked to access to alcohol.
- Persistently low school attendance and performance. For example, school attendance in Aurukun has been the worst in the state in recent years. Gains made in the years of the Cape York Aboriginal Australian Academy have not been replicated in the years since the Queensland Government took over the school from 2016.<sup>2</sup> It is well known that school attendance plummets in days following drinking in the community.

That in a wealthy country such as Australia, the people of Aurukun suffer such extreme disadvantage, is a disgraceful failure of public policy.

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<sup>1</sup> The introduction of alcohol restrictions also heralded increased transparency with the Queensland Government openly publishing Quarterly Reports on key indicators of harm in Queensland's Indigenous communities. Annual reports were also made publicly available providing longer term statistical trends. The publication of this up-to-date local level data was hailed by Justice Tony Fitzgerald as a 'strong step' forward on one of the most vexing problems of our time. Up-to-date community level data are critical to holding all levels of leadership to account to improve outcomes for people of Aurukun and other communities.

<sup>2</sup> Based on accessible Queensland Government data.

## It hasn't always been this way: an ignoble history

Despite the strengths and natural ability of the Wik people, the community of Aurukun is today deeply mired in intergenerational social problems. Some people may think this extreme disadvantage is just the way things are in Aurukun. But it was not always so—things were once very different.

Aurukun has both a proud, and also a traumatic, history. How and why things deteriorated so badly has been well documented, and must be understood.

### State Violence: the Queensland Government Takeover of Aurukun

Aurukun and its people have been dealt a succession of hammer blows. The parlous situation of too many of its children and families today, is because of the injuries and violence suffered by families through their particular history. Wik people have played a leading role in land rights struggles and have fought major battles with the state and mining companies over land because substantial bauxite resources lie on their country. This history has extracted a heavy toll, however.

An act of state violence was committed against the people of Aurukun with the Joh Bjelke-Petersen Government's Takeover of what was then the Aurukun mission in 1978, so it could seize control of Aurukun's extensive bauxite reserves, and give them to French multinational, Pechiney. The Wik people fought hard, and campaigned against the state's actions, and they were supported by the church to do so. Nonetheless, the Takeover proceeded, the bauxite reserve was acquired, and the Presbyterian Church were kicked out of Aurukun and replaced by the Queensland Government.

The Queensland Government Takeover of Aurukun set in train a disastrous chain of events, still reverberating today. It destroyed the hybrid of traditional and missionary authority and paternalism that had given order to the settlement until this point. The far off Queensland Government became chief decision-maker and controller of the lives and destinies of Aurukun's people. Administrative control of Aurukun now lay with the Queensland Government's Department of Aboriginal Affairs (later Advancement). To this day it continues to be the case that "[government essentially 'operates' the community](#)".<sup>3</sup>

### The forced imposition of the alcohol canteen

After the Takeover, the Queensland Government imposed an alcohol canteen on Aurukun—against the wishes of elders and leaders. A new local government structure was installed by the then-Minister, Russ Hinze, and a funding solution was needed for the new Aurukun shire council. Hinze imposed an alcohol canteen on Aurukun against the objections of elders,

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<sup>3</sup> See QPC (2017), p. 72.



because the proceeds were needed to bankroll the new shire council. Aurukun's new local government was funded via the alcohol washing through the livers, kidneys and minds of its people.

The canteen offered a viable source of revenue—converting unemployment benefits people received from the Commonwealth Government into canteen revenues for the council. The bodies of the Wik people would be the means through which this conversion of Commonwealth funding into state revenue, would take place. The young bodies and brains of infants became the victims of this money laundering.

The sale of alcohol in Aurukun was opposed by many in Aurukun, particularly by a strong group of Wik women, but the battle was lost. The rivers of grog started to flow and they flowed for two decades.

### Two decades of grog: the cycle is embedded

The flow of alcohol into Aurukun via the canteen in 1985, marks the beginning of an extraordinary period of decline in the health and wellbeing of the Wik people. From 1985 the social fabric of family and clan relationships was progressively shredded. Alcohol caused both immediate devastation and compounding effects that continue to resonate today.

Drinking patterns in remote Indigenous societies such as for the Wik people in Aurukun have been well documented in the anthropological and other literatures, and they are characterised by much higher levels of consumption than for other drinkers. This is not to suggest that Indigenous people are to 'blame' for their drinking problems—these drinking patterns are embedded in and sustained by complex, interwoven economic, legal, political, social and cultural systems and circumstance. The seminal work, *From Hunting to Drinking: The Devastating Effects of Alcohol on an Aboriginal Community* by David McKnight (2002), explains the cultural and historical contexts contributing to the alarming rates of alcohol consumption and harms in the Northern Territory, for example. The difference in drinking patterns that have afflicted Aurukun's trajectory, must be acknowledged in any analysis of present day alcohol harms and alcohol supply in remote Australia.

Whereas such events were hitherto rare in Aurukun, after the introduction of the canteen, crime, violence and other alcohol-related harms escalated dramatically. Just six years after the canteen doors had opened, David Marr's landmark ABC *Four Corners* episode "Six Pack Politics" in 1991, highlighted the impact—by this time Aurukun had the highest murder rate (declared to be far worse than notorious American cities) and the lowest school attendance in the country.

The sheer scale and depth of the immediate impact of alcohol in a community as small as Aurukun may be difficult to fathom. Anthropologist and linguist, Professor Peter Sutton, who has had a long and close association with Aurukun, describes the change once grog began to flow freely:

The cemetery at Aurukun reminds me of the Australian war graves at Villers-Bretonneux in France... Painted crosses, many of them fresh, stretch away seemingly for hundreds of metres... In my time with the Wik people up to 2001, out of a population of less than 1000, eight people known to me had died by their own hand, two of them women, six of them men. Five of them were young people. From the same community in the same period, thirteen people known to me had been the victims of homicide, eight of them women, five of them men. Twelve others had committed homicide, nine of them men and three of them women. Most of these also were young people, and most of the homicides occurred in the home settlement of both the assailant and the victim. Of the eight spousal murders in this list, seven involved a man killing his female partner, only one a woman killing her husband. In almost all cases, assailants and victims were relatives whose families had been linked together for generations.<sup>4</sup>

The rupture from 1985 is evident not just in the immediate aftermath of the canteen, but also in terms of the ongoing impact inscribed in the bodies and brains of Wik people. The cycle of abuse and neglect that followed the grog chaos was imprinted on the young children born in its wake.

The problems that continue to occur in Aurukun today, represent a third and fourth-generation inheritance of problems that have their roots in the opening of the canteen. Parents were lost to alcohol addiction and became absent figures, unable to ensure the safety and development of their children, children who then grew up poorly equipped to break the cycle for their own offspring.

Addiction is a powerful force that can foreclose on the possibility of positive development—this foreclosure begins dramatically and devastatingly for some Indigenous children from the moment of conception with development impacts occurring in utero, but can also occur across a person’s life-course. It is not theory or speculation to make such claims—it is clear from the data and science.

The analysis of nearly a quarter-century of data recently published in *The Lancet*, suggests changes over time in the prevalence of psychosis within the area of Cape York including Aurukun, are linked directly to policies governing access to alcohol. After the introduction of alcohol canteen “[Dramatic social upheaval with escalating rates of violence followed, with consequences both for community and family stability and the neurodevelopmental environment of childhood.](#)” It states,

In this study the highest prevalence of psychosis was observed in 2015 among Aboriginal men aged 30 to 39—i.e., among those who were between age 0 and 9 at the time of the introduction of alcohol into DOGIT communities (mid to late 1980s). Effects of alcohol ranged from diversion of resources away from sustenance, with consequences for compromised infant nutrition, to inconsistent parental engagement and exposure to

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<sup>4</sup> Sutton (2001).



violence in heavy-drinking households, with substantial potential impact on children's neurodevelopment and, we propose, the development of psychosis later in life.<sup>5</sup>

*The Lancet* study also suggests geographic variance in the levels of psychosis reflects differences in access to alcohol. For example, it finds the problem of psychosis is “dramatically” worse than in Indigenous communities in the area that includes Aurukun where “the adverse effects of the introduction of alcohol were substantially more pronounced”, than in the Torres Strait Islands.

### A shameful response

The tragedy that has unfolded in Aurukun from 1985 is shameful. The response has also been shameful. It took more than 20 years before the Queensland Government finally got behind the many upstanding individuals and families in Aurukun who wanted the government’s support to make change.

Many individuals and families in Aurukun fought both against the introduction of grog, and then for the introduction of alcohol restrictions—although too often such Indigenous agency is denied in the retelling of this story. In many communities senior Indigenous women often took an important lead.<sup>6</sup>

At the national level, Marcia Langton led the preparation of an important report, *Too Much Sorry Business*, for the 1991 Royal Commission into Aboriginal Deaths in Custody, which did a great deal to build understanding of the debilitating role of alcohol for Aboriginal society. Langton’s report ran counter to the prevailing views, and made a clarion call for urgent action to control easy access to alcohol in Aboriginal communities.

In Queensland, ongoing advocacy of Indigenous leaders, communities and organisations, including Cape York Partnerships and Apunipima Cape York Health Council, eventually led to the 1999 *Aboriginal and Torres Strait Islander Women’s Task Force on Violence* report by Boni Robertson. The report brought into sharp relief the desperate need to take urgent action to deal with alcohol to save Indigenous lives.

Justice Tony Fitzgerald’s *Cape York Justice Study* inquiry immediately followed. Fitzgerald is one of Queensland’s great reformers, having ended the Joh Bjelke-Petersen era of unprecedented corruption and graft. That he was appointed by then Premier Beattie indicates the scale and seriousness of the situation to be confronted. The 2001 Cape York Justice Study report provided the immediate catalyst for decisive action to reduce the supply of alcohol in Indigenous communities. Its findings shone a light on extraordinarily high rates of crime, violence and other alcohol-related devastation, highlighting, for

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<sup>5</sup> Gynther et al (2019).

<sup>6</sup> Moran (2016), pp. 13-37.



example, that in Cape York ‘girls as young as seven or eight are now being diagnosed with sexually transmitted diseases’ STIs’.<sup>7</sup>

## Beattie and Bligh enable restrictions of alcohol

From late 2002, alcohol restrictions began to be progressively put in place across Queensland’s Indigenous communities. Decisions about restrictions in each community were by no means straightforward or consensus based—opinions were frequently divided between drinkers and non-drinkers, and along gendered and organisational lines. The (mostly male) councils had vested interests, as they were reliant on the sale of alcohol for funds. Local Community Justice Groups (often mostly women), were afforded a key role in deciding, and changing, the restrictions to apply—this role was enshrined in legislation for communities including Aurukun.

A further decisive step came in 2008, when the Bligh government moved to strengthen the reforms across Queensland’s Indigenous communities to make them “as dry as possible”. Bligh took the canteens away from councils, to finally end the ludicrous situation of the councils relying canteen proceeds to try to fix the very problems caused by alcohol.

Some communities, such as Aurukun, opted to go completely dry and to disallow any alcohol within the town boundary. Others (e.g. Hope Vale and Mapoon) allowed a ‘carriage limit’ of particular quantities and types of alcohol (e.g. a person may be in possession of a carton of light of mid-strength beer or 1 bottle of unfortified wine in Hope Vale).

Despite perceptions to the contrary, alcohol restrictions were originally a community-driven initiative, often led by courageous women. The alcohol restrictions enabled by the Beattie and Bligh government responded to the unique scale of the problems caused by two decades of alcohol-fuelled devastation in Indigenous communities. The reforms established the basic human rights of vulnerable members of these communities as the clear priority—including the right of children and other vulnerable community members to be safe, healthy and free from fear and violence.

## Alcohol restrictions have changed the trajectory

The introduction of alcohol restrictions in Queensland’s Indigenous communities has changed in the trajectory of violence and other harms. This is clear from lived experience, and from the data.

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<sup>7</sup> Fitzgerald (2001) at p. 20. Note: While some STIs can also be transmitted under some circumstances via skin to skin contact, or from mother to baby during pregnancy and/or birth, STI cases in children may also be an indicator of sexual abuse (depending on the age of the child and the STI).

1. Again, Sutton describes the change for Aurukun in very concrete terms: “In the almost four years after the introduction of alcohol controls, there were only two suicides and one death caused by ‘trauma’, and no confirmed homicides”.<sup>8</sup>
2. The independent evaluation of Cape York Welfare Reform shows a large [statistically significant fall in serious assaults in mid-2008](#) for Aurukun, reflecting the “impact of the reduction in trading conditions and subsequent closure of the Three Rivers Tavern from March 2008.”<sup>9</sup>
3. Independent analysis of Royal Flying Doctor Service data of trauma and injury retrieval rates show statistically significant reductions for serious injury after the introduction of alcohol restrictions. Further, rates of serious injury retrievals fell significantly as the strength of restrictions on alcohol increased. A 2011 study shows the rate of serious injury to be at the lowest recorded in 15 years, in contrast to the general trend in Queensland and Australia-wide rising slowly over time.<sup>10</sup>
4. Independent analysis shows evacuations of Indigenous residents from Cape York in 2004-05 to the regional psychiatric admission hospital fell by over 50%, after five years of progressive increases.<sup>11</sup>

This positive impact of the introduction of alcohol restrictions is consistent with the substantial body of evidence from elsewhere in Australia and around the world, showing reduced availability of alcohol is associated with decreases in alcohol-related harm.

There is now also a substantial body of evidence from around Australia showing the positive importance of supporting local Indigenous leadership to restrict the supply of alcohol.<sup>12</sup> This evidence highlights that communities require not just the ability to restrict alcohol supply, but also must be supported by an enforcement regime to limit sly-grogging, drug substitution and home brew.<sup>13</sup>

## Reducing alcohol abuse must remain the top long-term priority

While positive effects immediately flowed from the introduction of alcohol restrictions, much of the damage caused by alcohol in places like Aurukun continues to reverberate over the life-course and through the generations. Australia’s leading criminologist, Don Weatherburn, argues the top long-term priority to Close the Gap and break the cycle of disadvantage leading to the extraordinary rate of Indigenous incarceration, must be the reduction of alcohol and substance abuse. He explains, a reduction in substance abuse

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<sup>8</sup> Sutton (2008).

<sup>9</sup> [CYWR evaluation](#) (2012), p. 222.

<sup>10</sup> Margolis et al (2008); Margolis et al (2011).

<sup>11</sup> Brownlie et al (2008).

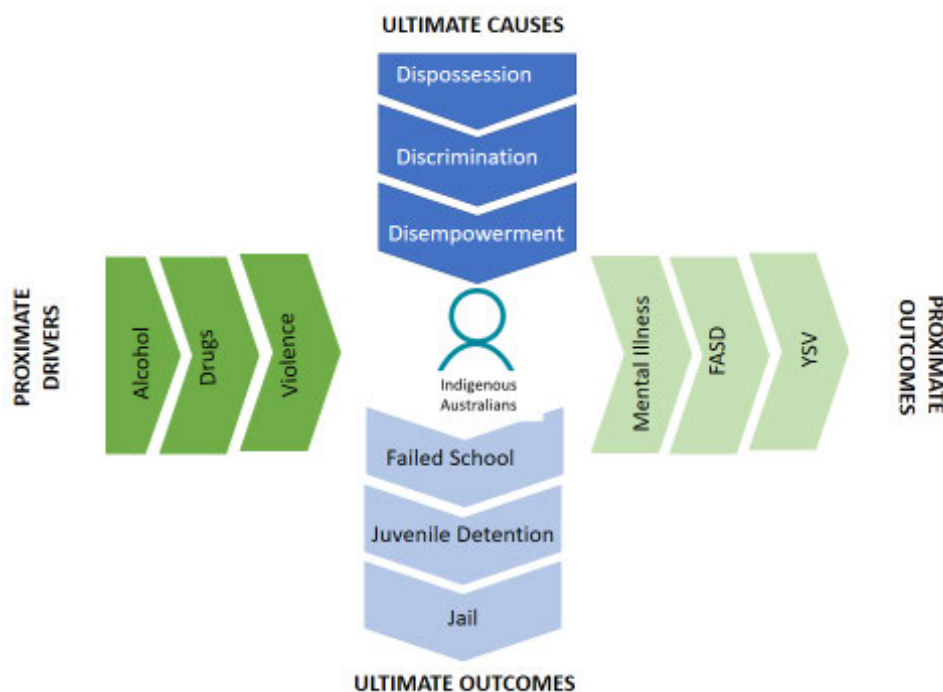
<sup>12</sup> Gray et al (2000); Chikritzhs et al (2007), pp. 181-206.

<sup>13</sup> d’Abbs (1989).

would produce an improvement in maternal and child health, and given the close relationship between substance abuse and child maltreatment, it would also produce a reduction in child neglect and abuse. That, in turn, would set the stage for better Indigenous school and employment outcomes.

Figure 1 illustrates this complex and interconnected nature of the factors driving Indigenous disadvantage. While we cannot only focus on alcohol, effectively tackling alcohol-related problems is clearly key.

**Figure 1 Indigenous disadvantage: complex and interconnected causes and outcomes—alcohol is a key driver**



This means that tackling alcohol harm and misuse requires long-term political commitment to policies that require up-front courage and investment, in order to reap long-term rewards. Even if we had the means to reduce the rate of Indigenous child neglect and abuse within a year, the benefits of reduced offending would not become apparent for several years after that. The benefits of improved maternal health on crime would take even longer to become apparent.

Effectively tackling alcohol abuse requires an unwavering focus and sustained political commitment at the local and state level. Politicians of course are often likely to prefer short-term, populist tactics, rather than ensuring a steadfast commitment to long-term results.

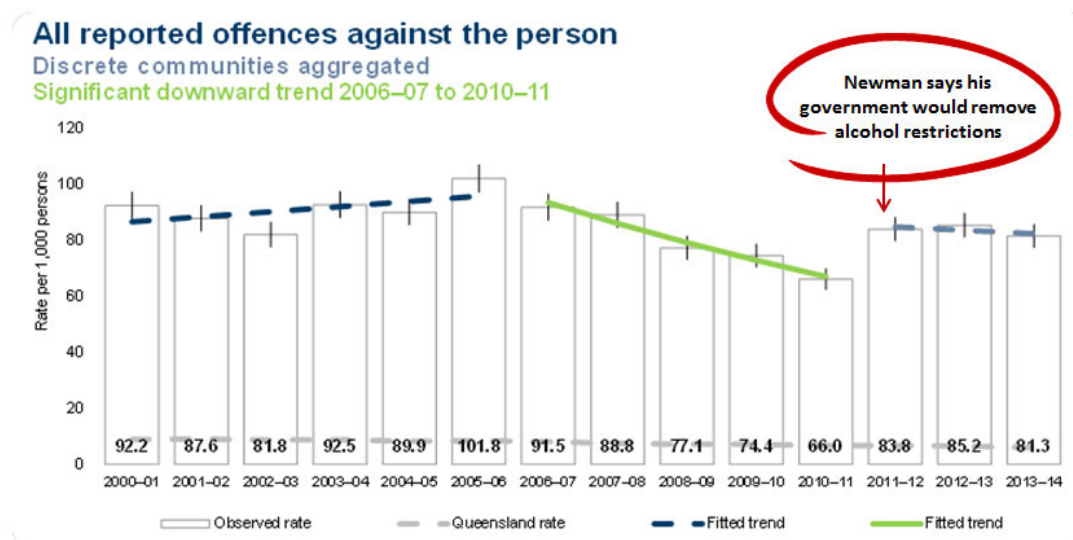
## Harmful policy drift—no clear policy

Despite the overwhelming evidence of the need to tackle alcohol abuse as a principal underlying cause of Indigenous disadvantage in Indigenous communities, and immediate positive impact of alcohol restrictions, the Queensland Government has failed to maintain a clear policy commitment to reduce alcohol misuse and alcohol-related harms in Indigenous communities. Political commitment, and enforcement of restrictions has waned over time, and the current Queensland Government position is scandalously weak and ambiguous.

Queensland Government statisticians produced the graph at Figure 2, showing the overall picture after the introduction of alcohol restrictions in Queensland’s Indigenous communities. There are two key points to note:

1. Not only does Figure 2 show exactly how far there is to go before violence levels in Indigenous communities are reduced to anything like the normal levels elsewhere, it also shows the clear downward trend in violent offences after the introduction of alcohol restrictions in Indigenous communities. From 2006–07 to 2010–11 this downward trend averaged -9.7% per year.
2. Figure 2 also shows a sudden arrest of the downward trend in violent offences in 2011–12, coinciding with former Premier Campbell Newman publicly signalling a change to the alcohol policy. At the time Newman stated restrictions should be abolished because they were discriminatory, denying Indigenous people their ‘right to drink’.<sup>14</sup> He then announced a review of alcohol restrictions and invited Indigenous community councils to lead community submissions seeking to have alcohol restrictions relaxed or removed.

**Figure 2 Overall trend in violent offending before and after alcohol restrictions**



Source: Queensland Government, with adaptation by CYI to show timing of then-Premier Newman signalling a policy shift

<sup>14</sup> There is no such right to drink at law.

Since Newman's announcement and the commencement of the [review of the Alcohol Management Plans](#) in 19 discrete communities in 2012, there has been no clear policy of support for alcohol restrictions, and no alternative approach put forward by the Queensland Government to continue to reduce alcohol harm and misuse. Ensuring appropriate resources to support alcohol restrictions is no longer a clear government priority.

As one would expect, the Queensland Government's weaker approach has had a corrosive effect locally. A recent report for the nearby community of Pormpuraaw documents that alcohol restrictions have been under-resourced for some time, and that "the Queensland Government review weighed heavily on the minds of many within the community".<sup>15</sup>

The responsible community leaders who have developed and implemented various alcohol management strategies at Pormpuraaw for more than a decade have contended with constantly changing policies and funding regimes, alongside regular changes of government and departmental personnel. Constant policy and resource changes, fluctuation and confusion about the intention of policies, such as AMPs are debilitating for the local people, whether residents, police, health professionals and teachers, who contend with the harmful impacts of excessive alcohol consumption in Pormpuraaw and similar communities. Their best efforts are undermined by the failure of successive governments to recognise the value of their leadership and accord them agency and responsibility at the local level.<sup>16</sup>

There can be little doubt that the lack of any clear high-level commitment to the policy from the Queensland Government has changed the behaviour of people on the ground, including drinkers, sly-groggers, some local leaders and police tasked with enforcing the restrictions. The policy has been left to drift. This appears to have led to laxer adherence to, and enforcement of, alcohol restrictions.

The long (and ongoing) review of alcohol restrictions has been conducted by the Queensland Government [behind closed doors](#). No submissions to the review, or results have been made public. DATSIP's website merely states it received 23 submissions from members of the public and key stakeholders, and "their feedback was incorporated into the general review undertaken by PwC's Indigenous Consulting, which assessed the overall effectiveness of AMPs".

The Queensland Government no longer provides any transparency of the kind that was introduced with alcohol restrictions, in terms of making local data on key indicators of harm in Indigenous communities regularly and publicly available. Since the commencement of the review in 2012, up-to-date local level data has been made more difficult to access, reducing the accountability of leadership at all levels for reducing alcohol harms and misuse. Questions must be asked, why make local level data more difficult to access at the very time

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<sup>15</sup> Smith et al. (2019), p. 8.

<sup>16</sup> Smith et al. (2019), p. 9.

the review commenced and alcohol policy approach was shifting and softening? What is the Queensland Government trying to hide?

The only review results published by the Queensland Government, are contained in a 2013 report of the Government Statistician considering whether alcohol restrictions were criminalising residents of Indigenous communities, as some people feared. The report shows although a high proportion of Indigenous community residents had been convicted of alcohol breaches, [“Only 449 \(7.9%\) of the 5,676 persons had a conviction recorded for a breach of alcohol restrictions, and no convictions recorded for any other offence types during the 10 year study period”](#)—confirming a pattern of widespread offending in Indigenous communities (and criminalisation) regardless of the existence of alcohol restrictions.<sup>17</sup>

## A plan is urgently required

There is no sign that reducing alcohol harms and misuse is the top priority for the Queensland Government or for the Aurukun Shire Council. The Queensland Government has failed to insist in any meaningful way that communities, and their leadership must drive harm levels down to normalise them, as the first priority. There is no policy framework in place to support the people of Aurukun to get to their desired destination, and Close the Gap, including by tackling alcohol harms and misuse.

If the proposed alcohol trial event in Aurukun proceeds, both the Queensland Government and the Aurukun Shire Council must be taken to have accepted the extremely high levels of disadvantage suffered by the people of Aurukun in terms of: children in out of home care; poor educational outcomes; violence, crime and incarceration; mental and physical illness; unemployment; and suicide and premature death. Not only will they have accepted the unacceptable, they will have endorsed the further worsening of the situation. Without a compelling plan to tackle disadvantage and alcohol abuse, Aurukun will become a more and more highly concentrated centre of disadvantage, disability, and premature death.

There is an utter disconnect between the weak, ambiguous policy and action of the Queensland Government, and the rhetoric and resources it is otherwise expending to try to address the public relations crisis in areas such as [youth justice and detention](#), [incarceration](#) and [domestic violence](#). The government on one hand is saying “the right things”, but its actions on the ground in Aurukun show it is failing to take even the most basic steps to support the community’s wishes and enable them to deal with the complex of problems connected to alcohol. In Aurukun, the Queensland Government has repeatedly ignored the express wishes of community leaders, and promising reforms that began over a decade ago are also now being dismantled or eroded as a result of decisions being made in William Street. Three examples are provided.

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<sup>17</sup> Queensland Government Statistician’s Office (2013).

1. Firstly, the response to Youth Sexual Violence and Abuse has been seriously eroded in recent years, and the specialist response that was in place will cease in June 2019. The Queensland Government has been well and truly “on notice” for an extensive period about the need to ensure a comprehensive ongoing response to Youth Sexual Violence and Abuse in Aurukun. In particular:
  - In 2008 the controversy surrounding comments made by the Judge hearing the ‘Aurukun nine rape case’ brought the issue into stark relief, and highlighted the normalisation of such behaviour in Aurukun.
  - The publication of the Smallbone Report in 2016 highlighted endemic harmful ‘peer-to-peer’ sexual behavior in Aurukun and West Cairns.
  - In March 2016, the Palaszczuk Government itself, established the Youth Sexual Violence and Abuse Steering Committee led by the Honourable Stanley Jones AO QC, tasked with making recommendation to address Youth Sexual Violence and Abuse in Aurukun and West Cairns. The Youth Sexual Violence and Abuse Steering Committee provided its First Report to government in September 2016, and a Final Report in 2018. Despite the passage of a substantial period of time, the Queensland Government has failed to put in place any clear strategy or long-term response to this very serious issue.

Since the Aurukun nine rape case, Aurukun has had the benefit of work done by the Griffith University Forensic Service providing specialist clinical services in response to Youth Sexual Violence and Abuse. From this, the Griffith Neighbourhoods Project emerged, with a focus on prevention. However, despite the fact that they are considered to be world leaders in their field, and are well supported by the community and the council, for years the Queensland Government has prevaricated and provided only very limited and uncertain support for this ongoing work in Aurukun. The final report of the Justice Jones led Steering Committee recommended that the Queensland Government support the expansion of the Griffith Neighbourhoods Project—yet DATSIP has discontinued funding and there is currently no plan and no alternative support provided in Aurukun. This will significantly, negatively impact on the community.

2. Secondly, the Queensland Government has recently discontinued support for the dedicated in-community parenting designed with Aurukun’s people and delivered by CYP in Aurukun as part of the innovation introduced through Cape York Welfare Reform.

Of course, to Close the Gap in Aurukun, you need to start by improving developmental outcomes in infancy, childhood and adolescence. If you want to Close the Gap you need to support parents so they can help break the cycle. So how is the Queensland Government improving this area? It is engaging in a classic case of “buck passing”, shifting responsibility between different government departments, with a short-term focus on cutting costs through providing a more highly centralised approach, which has

taken Aurukun backwards. For Aurukun, this had meant it no longer has a fulltime in-community parenting program employing both local people and those with expertise to help build capability, but a much weaker form of parenting support.

DATSIP is no longer funding any dedicated in-community parenting support, such as had been developed and tailored over a number of years for Aurukun. The Department of Communities is now responsible for the provision of “Aboriginal and Torres Strait Islander Family Wellbeing services”. RAATSICC won the contract to provide this service in Weipa, Napranum, Mapoon and Aurukun for \$700,000 each year for 5 years. This necessarily means that resources are spread very thin across an area that has very high needs. CYI understand that recently RAATSICC have not been present in Aurukun for a period of 5 weeks.

The Queensland Government is guilty of false economy. The decision to discontinue CYP’s Strong Families program came as it was supporting 20 families referred by Child Safety. If these families end up with a child in out of home care, this would mean an increase in the costs of the Child Protection system of \$5M, as every child in out of home care costs the state \$250k per year.

3. Thirdly, the future of the highly successful Family Responsibilities Commission (FRC) in Aurukun is highly uncertain. The first major change announced under the Queensland Government’s new *Thriving Communities* approach has been to unilaterally decide it will be [“transitioning the FRC and welfare reform communities Aurukun, Hopevale, Mossman Gorge, and Coen, and Doomadgee from the existing FRC welfare reform model to what we are calling the \*Thriving Communities\* approach”](#).

The FRC itself is an example of local Indigenous empowerment, achieved by giving life to a structure designed by Cape York people for Cape York people. It is the only extant example of a structural reform in Queensland that shifts real power and responsibility that would otherwise be held by government, to respected local elders and leaders acting as local Indigenous Commissioners, so they can assist their own people to change their behaviour. Through a set of ‘family responsibilities’ triggers, the FRC gives local Commissioners, the power to call people in and conference them if they have failed to send their children to school, been the subject of a child safety notice, committed a crime, or failed to pay their rent, for example. During an FRC conference local Commissioners can have difficult conversations and they can make decisions about how a person or the family, can be supported to improve their lives. Importantly, local FRC Commissioners have real power to impose Income Management orders, for those that need it the most.

As recently as late 2018 a [Strategic Review of Cape York Income Management](#), led by Queensland University of Technology’s Professor John Scott, reports “There is a clear

view in the current CYWR communities that the FRC should continue in some form”.<sup>18</sup> The communities themselves who have developed and operated the FRC, including Aurukun, have not endorsed the change proposed under the Queensland Government’s *Thriving Communities* approach. There remains little progress or detail about *Thriving Communities*, although it is said to respond to the Queensland Productivity Commission inquiry announced in late 2016 and for which the Queensland Government was provided the Final Report in December 2017. In contrast to the Queensland Government, the Australian Government’s support for the FRC is clear. Prime Minister Scott Morrison MP clearly affirmed his government’s position and commitment to the FRC model in federal parliament on 18 November 2018.

*Thriving Communities* is not policy. [It provides slogans but no substantive plan](#). The approach taken by the Queensland Government to the FRC shows *Thriving Communities* will be yet another government-led, top-down, attempt to impose the government’s own cookie-cutter agenda on Indigenous communities.

## The proposed alcohol trial is a backward step

There are many obvious reasons that the Aurukun Shire Council’s proposal for an “Alcohol Trial Event” at the old tavern should not proceed.

The question must be asked, why is this proposal being put forward now?

Is it that there has been a recent reduction in the very high levels of violence, other trauma and disadvantage in Aurukun which could justify the trial? It is that none of Aurukun’s people have died premature deaths in recent months? Or because of an absence of suicide, crime, violence or sexual assaults? Is this trial being proposed because of marked recent improvements in Aurukun’s school attendance or performance, a decrease in the numbers of local people being incarcerated, or an increase in employment?

There have been no such improvements to suggest such a trial can safely and responsibly be proposed. In terms of timing, it is notable only that Aurukun’s local council election will be held next March.

### An Aurukun Shire Council proposal, or just one man’s campaign?

The flyer outlining the alcohol trial proposal distributed in Aurukun suggests the proposal has been agreed by the council. However, the extent to which Aurukun councilors, other than the Mayor, support the proposal is not clear. The Council Minutes of 19 February 2019 record that [“Councillors advised that alcohol will create problems, they have concerns about the proposed alcohol trial event”](#). The Minutes go on to state, the “Mayor advised he still wished to continue discussions... but will take on board the Councillors concerns”.

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<sup>18</sup> Scott et al (2018), p. 84.

Other than the Mayor, the councilors are all local Commissioners of the Family Responsibilities Commission, and have worked hard for many years to help individuals and families in their community to try and overcome the devastating and complex problems caused by alcohol in their community. One of the councillors, Ms Ada Panawya Woolla OAM, was a member of the Premier's [Special Taskforce on Domestic and Family Violence](#), which reported in 2015. The Taskforce recognised that alcohol in domestic violence is an issue within Indigenous communities, as the risk of an Indigenous person becoming a victim of domestic or family violence increases with high risk alcohol use.<sup>19</sup> It would be surprising indeed if in the face of all the facts, these reform leaders were to support the alcohol trial event.

### Is the alcohol trial event an appropriate priority for Aurukun?

In the circumstances there are serious questions regarding the policy priorities of the Queensland Government and the council.

- How can the use of police resources to support the proposed trial be justified as a priority? The proposal would need to be supported by the deployment of substantial police resources in terms of escorting the licensee with alcohol in and out of town, policing the event and afterwards, and ensuring the alcohol is secure throughout.
- How is it morally acceptable that a commercial business, most likely the licensee/s of the Albatross Hotel in Weipa (according to Council meeting minutes), should be invited into Aurukun to further profit from selling alcohol to Wik people—when alcohol is a key cause of ongoing extreme disadvantage that still must be overcome in Aurukun?
- Or, if has been suggested by the Mayor, the event will be a fundraiser for council, how is this not a return to the same old conflicted situation of the past, in which council raises money through means that are exacerbating the very suffering and disadvantage it should be leading Aurukun away from?
- How can this event provide a meal and six alcoholic drinks for \$50 in Aurukun, when the price of a piece of meat at the Aurukun shop can be as much as \$70? What is being done to address the cost of food in Aurukun so that people can eat properly day-to-day? When will food affordability and security be accorded a greater priority than this alcohol trial by council and government?

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<sup>19</sup> Special Taskforce on Domestic and Family Violence in Queensland (2015), p. 154.

## Introducing alcohol for the State of Origin would be seriously misguided

The proposal states the trial would be an event to be held on a Saturday afternoon from 3-5pm. CYI understands the Mayor is enthusiastic for the alcohol trial event to coincide with a State of Origin match, if possible. On the basis of all the evidence, any such suggestion is seriously misguided.

In the mainstream the [State of Origin is associated with a peak in violence that leaves women and children battered and bruised](#). Recently published research, for example, concludes:

It's crystal clear that the State of Origin fixtures are leading to a surge in domestic violence. It's happening on the National Rugby League's watch and women and children are being harmed as a direct consequence of these games.

The drivers of domestic violence are complex and many, however, the disturbing findings released today suggest the State of Origin's particular celebration of heavy drinking, masculinity, tribalism, and the toxic level of aggressive alcohol promotion have collided in such a way as to encourage drinking to excess and domestic violence.

There is nothing to suggest there is any benefit that would outweighs the risks of holding an alcohol trial event to coincide with the State of Origin. On the contrary, it can be almost guaranteed that the safety of women and children in Aurukun would be jeopardised.

## The process is flawed, including community consultation

There are many individuals and community-controlled organisations in Indigenous communities such as Aurukun who are deeply committed to improving the wellbeing and health of all residents, but they experience extreme policy, planning and consultation fatigue. It is unfair that senior women, in particular, are so poorly supported, and that they should yet again be asked to try and hold the line and stem the tide of alcohol that has brought their community to the brink. The liquor industry is a politically powerful one, and there are many vested interests at work that these community women must again now stand up to, in order to have their basic human right to be safe and free from violence protected.

It is unfair too that the council or the Queensland Government should purport to ascertain or rely on community views about the proposed alcohol trial, in the absence of even the most basic information needed being made available to all, so that informed debate and decision-making can occur. There is no choice, no empowerment, and no informed decisions, without improved access to information:

1. Community members should have access to up-to-date data so they are properly informed as to how Aurukun is faring in relation to alcohol abuse and alcohol-related harms before any decision is made.

2. Community members should also have information about the large body of evidence from Australia and elsewhere regarding what initiatives may help to reduce or worsen alcohol-related problems.
3. Community members should have full access to information about alcohol events in other communities, including in relation to any associated crime, violence or community unrest that has occurred.
4. Community members should be have access to the evidence regarding the general mainstream surge in domestic violence associated with the State of Origin.

The views of a large number of Aurukun residents on alcohol have been repeatedly documented over many years. For example, a report published in 2019 states that the community had not requested any removal or reduction of restrictions, and this view was communicated by the Aurukun Shire Council.<sup>20</sup> The independent evaluation of the Cape York Welfare Reforms published in 2013 also suggested support for restricting alcohol supply among community members in Aurukun. Anthropologist, John von Sturmer, reports there had been a shift in attitude towards alcohol in the communities in recent years. Where previously people saw drinking as ‘the very sign of personal liberty’, he now notes that ‘at no time in our interviews did anyone say curtailment of drinking was a bad thing’.<sup>21</sup>

### Has the role of the Community Justice Group been usurped?

When Bligh and Beattie finally took action to support those in Indigenous communities fighting for the right to be safe and free of violence, the role of Community Justice Groups was elevated, for good reason. This elevated role was enshrined in legislation for those Community Justice Groups statutorily recognised, such as Aurukun’s. CJGs were viewed as a key plank in the roll out of the responses to reduce levels of harm and crime associated with the consumption of alcohol, and the rate of criminal justice system contact.

The Community Justice Groups are made up of elders and respected community members with traditional authority in communities. Their role is focused on increasing safety and reducing offending. The *Aboriginal and Torres Strait Islander Communities (Justice, Land and Other Matters) Act 1984* prescribes the power and functions of statutory Community Justice Groups, while the *Liquor Act 1992* prescribes the role of statutory CJGs in relation to alcohol restrictions in communities. Under the Liquor Act, Community Justice Groups have a clear role in advising the Queensland Government in relation to alcohol restrictions. CYI understands the Community Justice Group does not support the proposal, and their advice should be highly authoritative.

As with AMPs, the Community Justice Groups have not been well supported by Queensland Government policy or practice. They too have been largely left to drift rather than

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<sup>20</sup> Smith et al (2019) p. 19.

<sup>21</sup> von Sturmer (2012), p. 4.

supported to fulfil their potential. Nonetheless, there is nothing to suggest that the role of the Community Justice Group with regard to alcohol restrictions has been, or should be diminished. An evaluation of the community justice group program, for example, found that “Generally stakeholders considered that in the discrete communities where alcohol restrictions were in place, these [CJGs should continue to have an additional role under the Liquor Act 1992](#)”.

Again, there is utter disconnect between the government’s rhetoric and what is unfolding on the ground in Aurukun. On one hand, for example, the Queensland Government has [endorsed implementation of all the recommendations](#) of the Premier’s high-profile Special Taskforce on Domestic and Family Violence, which included that the:

Queensland Government works with discrete Indigenous communities to develop and support an effective local authority model to respond to crime and violence in those communities, with a priority focus on addressing domestic and family violence. As a part of this work, consideration should be given to resourcing and expanding the role of community justice groups, JP Magistrate’s courts, and related local justice initiatives as appropriate, as well as examining the specific role that community justice groups could play in conferencing, mediation, and criminal justice system support.

On the other hand, however, the Queensland Government appears to be supporting an approach in Aurukun which downgrades and subsumes the role of the Community Justice Group in reducing alcohol harms and misuse?

## What should happen instead?

There must be a renewed focus on how to tackle alcohol and drug abuse and harm in Indigenous communities. The number one priority must be to continue to improve the effectiveness of the approaches to reduce alcohol and drug related harms and misuse further in Aurukun.

The philosophy that local communities must be empowered to respond to alcohol-related problems is absolutely supported by CYI, but there are fundamental prerequisites that must be in place for such empowerment to occur. The current approach does not establish these prerequisites. Justice Fitzgerald in the Cape York Justice Study was highly critical of government’s ‘canteen’ policy because the underlying structural conditions of the licensing of Shire Councils were contradictory. Councils were required to uphold law, order and welfare while simultaneously seeking profits through promotion of the sale of alcohol. Similarly the current lack of unambiguous Queensland Government alcohol policy means the structural conditions required for Aurukun to drive down alcohol harms and misuse are not present. The notion of assessing a community’s ‘choice’ when it comes to alcohol restrictions and this proposal is problematic when the basic ingredients for empowerment are not present, yet the ingredients for exploitation are. There is no choice, no empowerment in the current context.

For the people of Aurukun to be empowered to make properly informed choices that can help to continue to drive alcohol abuse and alcohol-related harm down to normal levels, the following must occur.

1. The Queensland Government must clarify its policy position on reducing alcohol abuse and alcohol-related harm in Indigenous communities.
2. The clear goal for all Indigenous communities must remain normalisation of levels of alcohol and drug related harm. This is a matter of basic human rights.

It is only with this goal firmly in place that whatever approach is pursued locally, rights and responsibilities are kept in proper balance and the perceived 'right to drink' will not negatively interact on the basic human right of community members, including children and other vulnerable ones, to be free from violence and fear, and to grow up safe and healthy, to go to school, to be educated, and to enjoy high standards of physical and mental health.

3. Without compromising on the goal of normalising levels of harm, there must be a clear and effective plan or framework put in place for the staged, medium to long-term approach to transition from alcohol restrictions.

One option, as previously suggested by CYI, is for the Queensland Government to provide serious financial incentives for communities, so that individuals and community leaders have real skin-in-the-game when it comes to leading the reduction of alcohol harms and misuse.

4. Transparency and accountability must dramatically improve. As above, community members do not currently have access to even the most basic information needed to make properly informed decisions as to how Aurukun is faring in relation to alcohol-related harms.
5. Avenues must be created for greater local level involvement in enforcement of local alcohol restrictions. Including:
  - Ensuring Community Justice Groups are supported to continue to play a leading role in the reduction of alcohol-related problems.
  - Greater local level control of sanctions and other responses to those who are responsible for alcohol and drug-related harms, such as can currently occur in a small number of communities (including Aurukun) through the authority of local elders and respected leaders acting with real powers as Local Commissioners on the Family Responsibilities Commission (FRC).
6. There must be a clear process and authority by which alcohol restrictions, if relaxed or removed, can also be re-introduced according to the wishes of the community if an increase in the level of harm occurs. Community interests have little ability to successfully influence liquor licensing decisions to limit the availability of alcohol



anywhere in Queensland, and more responsive systems must be introduced before it can be said that Indigenous communities are empowered to drive the approach.

## Conclusion

Reducing the extraordinarily high levels of alcohol abuse and alcohol-related harm is essential to the reversing the downward spiral of compounding disadvantage suffered over generations in Aurukun. To tackle the endless cycle of passive welfare, failed education, crime, arrest and imprisonment, and prevent Indigenous children following the same pathway—the clear long-term policy priority must be supporting the people of Aurukun to effectively tackle the problem of alcohol.

But where is the Queensland Government or Council's focus on this? Where is the compelling plan to tackle the devastating problems that have afflicted generations of Aurukun's fine families and clans, and to tackle the central role played by alcohol?

The reality is, there is no plan. There is merely the Council's proposal for the reintroduction of alcohol. There should be no alcohol trial in Aurukun until the following questions can convincingly be answered:

- How is government fulfilling its responsibility to normalise the extraordinarily high levels of alcohol-related harm in Aurukun? What is the plan?
- How is government increasing local Indigenous responsibility and authority to tackle alcohol abuse and alcohol-related harm?
- How can the community leadership for reducing alcohol-related harms be supported and strengthened?
- Can success in driving down alcohol harms and misuse to more acceptable levels be demonstrated?

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# THE AUSTRALIAN

## Cape York's plan to close the gap in one generation

*The rights and responsibilities agenda must cut both ways to succeed*

Noel Pearson has re-entered the post-voice debate where he started more than two decades ago: focused on outcomes, opposed to passive welfare and determined to build a ladder of opportunity that extends from healthy families and a good education to home ownership and enduring personal and generational wealth. The results are in from the Cape York Partnership founded by Mr Pearson, and they hold the promise that it is possible to close the gap in a single generation. There is a lot to celebrate in Mr Pearson's return to his philosophical roots that sees an end to passive welfare and sit-down money as an essential first step in breaking the cycle of poverty and disadvantage that can become an intergenerational trap.

The new approach shares the ideological motivation of a love of people that powered Mr Pearson in his advocacy for the voice. But for many Australians it will be easier to digest because it is practical in nature and targets poverty and disadvantage rather than race.

Long-time Cape York Partnership chief executive Fiona Jose has outlined a bold vision to expand the Cape York blueprint, which boasts that around 70 per cent of graduates move into full-time work, earning on average \$50,000 more each year than those on welfare. The radical new agenda is to scale up the ladder of opportunity from the 20 people the Cape York organisation is able to help and deliver it to one million marginalised young Australians wherever they are. Ms Jose says hopelessness is not confined to Aboriginal people. Across Australia there exists a bottom million for whom disadvantage has become permanent. Ms Jose's is an inspirational message of a radical centre of reform that will support poor families to save and build assets, including for home ownership.

She says the aim is not a bigger welfare state but about transforming the welfare

state into an opportunity economy. The challenge will be to hold bureaucracy true to the high demands that have been expected of participants in the Cape York program.

Ms Jose is expecting a challenge from all political directions. She says for the left, obligations will be seen as cruel, and the right will say obligations are by themselves sufficient. Ms Jose says both are wrong and the Cape York Partnership experience is that responsibility without opportunity is despair, and opportunity without responsibility is passivity. "Only together do they build capability," she says. "And only capability gives people real choice – to choose lives they have reason to value."

To implement its plan, the Cape York Partnership established three institutions: a family responsibilities commission to support families to meet basic responsibilities to their children; the Cape York Leaders Program to provide scholarships and leadership development; and an opportunity program to help poor families save, invest in education and build assets. Ms Jose says each institution was designed to help even the poorest families convert opportunity into capability through responsibility.

The Cape York Partnership has proposed complementary Queensland and federal legislation to expand the radical centre, to be called the Personal Responsibility and Opportunity Act. If individuals take responsibility, the state will guarantee opportunity. Ms Jose says opportunity is about structural solutions; responsibility is about personal agency and high expectations from families, neighbours and society. The responsibilities agenda deserves support and demands accountability from public sector institutions that have built empires catering to Indigenous disadvantage and, unlike the Cape York program, have precious little to show for it in terms of results.

## The battle for Victoria starts now

*Jess Wilson is the opposition's best chance of making an impact*

A year from now, Victorians will be nine days from a state election. Much will depend on new Liberal leader Jess Wilson, 35, if Victoria's seventh million people are to return the nation's second most populous state to a solid financial footing and address myriad problems from crime to rabid identity politics polluting social policy. As the tired long-term Labor government has lurched from one crisis to the next, Victorians understandably have despaired at the opposition's dysfunction.

It is encouraging, however, that the deeply divided Liberal Party's faction leaders were united in telling Brad Battin – who failed to fully exploit Labor's woeful record, apart from on the issue of crime – that it was time to go. His doing so made way for Ms Wilson to be elected unopposed. She is a former adviser to Josh Frydenberg and the Business Council of Australia, and her expertise should enable the Liberals to make economic management central to the party's pitch for election.

On Tuesday, in her first question time as Opposition Leader, Ms Wilson wasted no time probing Premier Jacinta Allan about the state's ballooning debt. And as she told her first press conference as leader, the state's interest bill was \$20m a day.

For the next year, a major part of Ms Wilson's task is to convince voters the budget bottom line matters to everyday living standards and services, and to present a plan for addressing it. The severity of the crisis was exposed yet again a fortnight ago when Labor, in an effort to avoid scrutiny, tabled 250 annual reports at once. That could not deflect attention from the fact that while foreign investors own a quarter of

Victoria's debt, set to reach \$194bn by 2029-30, Labor is refusing to disclose the identity of the state's creditors. Persistent speculation suggests Chinese sovereign funds are among buyers of Victorian bonds. Former premier Jeff Kennett is right. Victorians are entitled to be told.

On Tuesday, Ms Wilson, a moderate, wisely emphasised the importance of delivering cheaper power as well as emissions reductions and renewable energy. Taxpayers cannot subsidise power bills indefinitely.

Ms Wilson also faces big decisions on high-cost infrastructure policy, with Anthony Albanese on Sunday locking in as much as \$11.5bn for Melbourne's controversial Suburban Rail Loop linking every major train line from Cheltenham in the southeast to Werribee in the west via Melbourne airport. Last year, the Australian National Audit Office raised red flags, finding the Victorian business case contained gaps and relied on questionable modelling. The federal government's independent infrastructure adviser, Infrastructure Australia, has asked Victoria for a fresh assessment of SRL East, the project's first stage, on its own merits, but the Allan government has declined.

The failures of the Allan government, carried over from the Andrews years, are clear. Ms Wilson's task is the same as David Crisafulli faced in Queensland. In the areas she highlighted on Tuesday – budget repair, the economy (including taxes that deter investment), crime, healthcare and helping young people on to the property ladder – she must show the opposition has the policies to be a viable alternative government.

## Support for next phase in Gaza

The UN rarely shows good sense when it comes to Israel. But it did on Tuesday AEDT when the Security Council endorsed Donald Trump's 20-point Gaza peace plan and ratified the importance of Hamas being disarmed and Gaza demilitarised. The 13-0 vote, with troublemakers China and Russia abstaining, provided international backing for the much-needed next stage of the plan: deployment of an international stabilisation force to police the peace and put paid to Hamas's attempts to retain its hold.

The resolution was supported by, among others, Muslim Algeria and Pakistan. Mr Trump's UN ambassador, Mike Waltz, correctly described the decision as "the most pro-Israel Security Council resolution in decades". Hamas's furious response confirmed that view, denouncing it for imposing "an international trusteeship on the Gaza Strip that Palestinians and resistance factions oppose". Hamas, ominously, stressed its rejection of "any clause relating to disarming Gaza", creating an immediate major challenge to the stabilisation force. It shows the need to get

the force in place as soon as possible and take advantage of offers from countries such as Indonesia, which has 20,000 soldiers ready to go. Turkey also wants to join but is a committed Hamas backer.

It is a rare day at the UN when a resolution does not pretend (as Anthony Albanese and Penny Wong apparently believe) that there is currently a Palestinian state. The resolution did not condition progress in Gaza on the creation of a Palestinian state. It said no more than the Trump plan in asserting "the conditions may finally be in place for a credible pathway to Palestinian self-determination and statehood". It authorises Israel's presence in a Gaza buffer zone and conditions a return to administration of the Strip by the Palestinian Authority on whether, in future, the Authority "can securely and effectively take back control of Gaza". The UN's green light to phase two of Mr Trump's plan means he and Israeli Prime Minister Benjamin Netanyahu are no longer alone in insisting that Hamas be disarmed. Peace and progress in Gaza depend on it.

# LETTERS

## Net-zero cult leaves us at risk of missing out on tech advances

Using multiple sources, Greg Sheridan accurately shows how global net zero by 2050 is nothing but fantasy and how countries are increasingly dropping the target while still pursuing emission reduction policies, albeit along more pragmatic lines ("In line with global shift, Coalition calls out energy fantasy", 18/11).

Australia, with its pursuit of a renewables-dominant energy system at great cost to the economy and the environment, is increasingly becoming an outlier in global energy developments. By the 2030s, this costly exceptionalism will be more pronounced as superior technologies such as advanced small nuclear reactors will be adopted worldwide while Australia's wind and solar farms will be approaching their use-by dates.

Ron Hobba, Camberwell, Vic

Australia is still the only Western democracy in the throws of a cultural and political net-zero cult. It has more than a decade to run.

Only economic collapse, huge decline in living standards, the total failure and removal of cult leaders, an unlikely dissident from the cult, generational change or cataclysmic external pressure

such as war can deflect the entrenched cult of belief systems such as we are now experiencing in Australia.

Our cult marches under the net-zero flag, but exemplifies a totally predictable raft of associated beliefs and political behaviours including: bizarre identity and gender policies, foolish immigration, the romanticising of all perceived societal underdogs in terms of victims and oppressors, hating one's country and its national flag, and pro-Palestine/anti-Israel/erstwhile anti-Semitism, the indoctrination decay of education and universities.

Inspired by the faux virtue of superiority to save the world, this failing cult ideology cheerfully ignores the decline and debt it delivers every day. Australia is a perfect example of the political woke cult.

Betty Cockman, Dongara, WA

Troy Bramston ("Liberal climate retreat equals net-zero gain of seats", 18/11) predictably argues that dropping net zero will not help the Coalition regain teal seats at the next election.

I agree with him because the real impacts of the government's transition will not be felt for some

time. But when they are felt, they will be so severe that even the teals will moderate their views and vote accordingly.

The doubling of transmission requirements will all be paid for by electricity users, so on this score alone electricity prices will continue to increase. As the heavy lifting in the transition will be in the industrial and transport sectors, net zero by 2050 needs government subsidies to industry, carbon capture and storage, and the replacement of diesel and avgas with biofuels.

The Coalition will have an ever-increasing list of deleterious side-effects of the transition that diminish our standard of living, our economy and our environment. If it continually pressures the government, and ensures the voters know, the votes will return as Australians will eventually see (and feel) the folly of an all-renewables transition.

Peter Cornish, Neutral Bay, NSW

Greg Sheridan and Troy Bramston provide two opposing opinions on the decision of the Coalition to pivot away from net zero. The former asserts that it is simply following the trend of the

rest of the world in its awakening, while the latter focuses solely on the politics. If the adage holds that "good policy is good politics", then surely the Labor government is pulling the wrong rein.

Kim Keogh, Claremont, WA

Whether their leader is Sussan Ley or Andrew Hastie, the Liberals need to convince the electorate that the Liberal National Party is serious about alternatives to net zero ("Hastie emerging as Albanese's wildcard", 18/11).

Ley has the baggage of supporting net zero, though she has not been pushing it much recently. The problem for Hastie, or any member to the political right, is to come up with a balanced energy policy.

They have to capture some of the voters who would prefer net zero, with at least some action on carbon emissions.

At the same time, the National Party will be trying to avoid leakage the other way, to climate change-denying One Nation. It's going to be difficult to get the right balance, especially with headlines like "Temperature's rising and so's the danger" (4/11).

John Hughes, Mentone, Vic

## China spells double trouble as a friend and foe rolled into one

Anthony Albanese has a mantra regarding our relationship with China. It goes like this: "China is a friendly nation with which we cooperate where we can and disagree where we must."

China is also, however, a nation that constantly probes our cyber defences, imprisons our citizens on trumped-up charges, routinely provokes dangerous confrontations in international waters and airspace, practices open economic warfare against us, aggressively militarises our region and contemptuously dismisses us as being of no account.

If these are merely disagreements between friends, then god preserve us from our enemies ("Two-prong diplomacy on Beijing", 18/11).

Terry Birchley, Bundaberg, Qld

Foreign Minister Penny Wong continues our government policy of walking on eggshells when dealing with China, with her latest statement praising the nation for being "a key player in climate action". She's right. China is the world's major contributor towards the world's pollution, greater than the US and India combined, and has no intention of making any changes that will affect its economy or hegemony as the biggest producer of everything. In Australia, meanwhile, we are crippling our meagre industrial base and economy.

Rob Parker, Maleny, Qld

## Gas shortages loom

The case for an overhaul of gas policy is urgent as supply shortages threaten ("LNG export giant

urges overhaul", 18/11). In the short term, we need to redirect uncontracted liquefied natural gas from the export market for domestic use. Without breaching contracts, there's no sovereign risk involved. Long term, a domestic gas reservation should be legislated. As gas is the marginal price setter, the cost of energy would fall, easing inflationary pressures on households and trade-exposed industries.

Suggestions of importing gas to meet east coast shortages would be an abrogation of political responsibility and a serious failure of public policy.

Jennie George, Mollymook, NSW

## \$400bn on waste track

The full cost of the Suburban Rail Loop in Melbourne has been reported to be about \$400bn ("Loop the loop just loopy", 18/11).

With Victoria nearly in a bankrupt state, no doubt the federal Labor government will help out with taxpayers' money. Instead those funds could build 400,000 big city million-dollar houses or more than 600,000 in the regions. A cynic could say this extraordinary spend is just to fund the construction unions that fund Labor's elections. Either way, it shows federal and state Labor obsessed with uncoded, unnecessary dreamland projects destroying ordinary Australians' wealth and hopes of ever owning a house. Surely it's time to throw them out.

Ian Brake, Mackay, Qld

## Escape route

The Prime Minister's vainglory in seeking out international events such as COP31 to spruik his failed energy experiment is sympto-



The Australian's front page, Tuesday, November 18

matic of his head-in-the-sand approach to empirical evidence.

There is a connection between excessive migration and failing infrastructure; power prices will not go down under net zero; Foreign Minister Penny Wong and Finance Minister Katy Gallagher should apologise for their treatment of others; and defence does need more money.

Unfortunately, the Prime Minister is driven solely by ideology so his answer to all this is a \$2bn publicity stunt.

Robert Walker, Cessnock, NSW

## Labor panic is a signal

You can always tell when the Coalition has got something right, judging by the amount of panic and alarm sounding from Labor.

It seems that Labor and particularly Anthony Albanese and Energy Minister Chris Bowen are in full alarm and panic mode, judging by the name-calling, scaremongering and cries of alarm over the Coalition's resetting of climate policy.

When Labor starts to panic and makes ridiculous claims, the Coalition knows it is on the right track. Congratulations to Sussan Ley and the members of the Coalition, you are heading in the right direction – not only to win the next election but also to help secure Australia's future.

Kernin Lambert, Wattle Grove, NSW

Sussan Ley's problem is not the content of her speeches. It's the length and quietness of her presentations. If you stop and listen, the words are full of sense. However, in this day and age of zoom-zoom, who can bother to do that?

Derek Smith, Mount Ommaney, Qld

## Invisible teals

What have the teals actually done in parliament? Nothing has been mentioned about their goals and what they have achieved. It seems like they're gathering salaries for little output.

Arthur Mangos, Netley, SA

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## BOOKSHELF | RHYS BLAKELY

# Garrulous, often exasperating and a scientific genius

If the age of the lone scientific genius has passed, was Francis Crick among its last great scientists?

His name will be bound forever to that of James Watson and their discovery in 1953 of the double helix structure of DNA. Yet it is a measure of Crick's influence that this breakthrough, transformative as it was, is done and dusted barely 80 pages into Matthew Cobb's absorbing new biography.

Cobb, a zoologist and historian of science, presents Crick (1916-2004) as the hub around which a mid-century scientific revolution revolved, a researcher and theorist of unstoppable curiosity who unravelled the secret code behind heredity before helping to reinvent the study of the mind and consciousness.

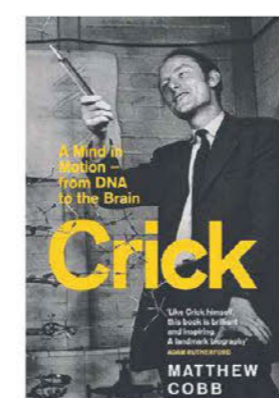
Cobb's book is no hagiography. Briskly paced, it concentrates on Crick's scientific life but also offers glimpses, some unflattering, of the man behind the lab bench. The picture it builds is of a brilliant, garrulous and often exasperating individual. With women he could be a pest. Cobb recounts how Crick's easy charm sometimes shaded into questionable behaviour: an unwanted pass at a Cambridge dinner party; another incident, in the 1960s, that left a female tutor "distressed"; yet another when,

while visiting Harvard in 1965, he placed his hands on a young researcher's breasts – an episode his target later recalled as "embarrassing, but for him". Cobb is careful not to sensationalise but he leaves the reader in no doubt that Crick's exuberance could turn boorish.

The first section of the book covers familiar ground: Crick's unremarkable school record, his wartime work designing naval mines, his late arrival to biology in his 30s (he has been called the patron saint of late developers).

That leads us to the catalytic meeting in Cambridge in 1951 with the young American Watson. Crick's relationship with Watson, who died this month aged 97, will be remembered for a remarkable, brief spell of intense collaboration – five feverish weeks in 1953 that led to the discovery of the DNA double helix. Though they remained friends afterwards, the bond fractured in the 1960s when Crick was enraged by Watson's account of the breakthrough, *The Double Helix*, a book he saw as a gossipy, defamatory violation of scientific decorum.

In the 80s, when Watson's public statements linking race and intelligence caused outrage, Crick, who by this point had "spent years arguing that biology should be



**Crick: A Mind in Motion – from DNA to the Brain**  
By Matthew Cobb  
Profile, 608pp, \$20 (Kindle)

Profile, 608pp, \$20 (Kindle)

purged of eugenic thinking, was appalled", Cobb writes. Crick, who died in 2004, aged 88, and Watson did not make their breakthrough alone. Rosalind Franklin, a gifted X-ray crystallographer, also played a part.

The story is well known: data from her lab at King's College London – shown to Watson and Crick without her full knowledge – helped them to refine their double helix model. Franklin, who was 37 when she died of ovarian cancer in 1958, has since become an emblem of women's overlooked contributions to science.

The author shows that her relationship with Crick was, in fact, cordial, even affectionate: in 1957, after surgery for the disease that soon would kill her, she went to convalesce at his family's home in Cambridge. The relationship, Cobb shows, was more collaborative than legend allows.

Still, Crick developed a reputation for making breakthroughs with information that others had painstakingly gathered.

After the champagne corks popped on the double helix discovery, which earned him a Nobel prize in 1962, Crick plunged into a second great quest: deciphering the genetic code. His conceptual leaps provided a framework that

still underpins genetics. Yet his abilities had boundaries.

He flirted with eugenic ideas long after they had been discredited, talking airily of improving the species through selective breeding, and held forth on class and intelligence with the confidence of a man unused to being challenged.

Later in his life he changed his views on eugenics, recognising that these issues were more complex than he had previously imagined. But disdainful of religion, he continued to place his faith in Reason with a capital R.

Cobb writes with clarity and a touch of affection for his subject. His Crick is radical in science and conservative in temperament; deeply irreligious yet moved by poetry; a philanderer who adored his wife. Above all he is insatiably curious – a mind in motion, indeed.

Crick may be best known for his collaboration with Watson and his notorious debt to Franklin. However, in the crowded, collaborative landscape of 21st-century research, where knowledge advances by increments, achieved by vast teams who work with ever growing volumes of data, it is hard to imagine another individual whose ideas will redefine the life sciences so completely.

## LAST POST

Troy Bramston says the vast majority of voters accept the science of climate change ("Liberal climate retreat equals net zero gain of seats", 18/11). That is, which theory and which version?

David Flint, Bondi, NSW

For the sake of all Australians, fingers crossed, the country does not get COP31 awarded. Just imagine Chris Bowen's ego if the bid succeeds.

Sydney Edwards, Christies Beach, SA

The Albanese government appears happy to spend up to \$2bn on a COP meeting in Adelaide but not one penny extra on defence.

Paul Haeghe, Darling Point, NSW

COP this. With an estimated cost of up to \$2bn for hosting the climate alarmist love-in, the smart people in the room would let Turkey have it.

David Gall, Panorama, SA

Am I the only one who has noticed that Labor no longer says renewables are the cheapest form of energy (despite power costs rising and energy-consuming industries going out of business or surviving with government subsidies)? It now says renewables are the cheapest form of new energy.

Frank Hecart, Coorparoo, Qld

The only person not happy with the massive gas finds in the Otway Basin is probably Victorian Energy Minister Lily D'Ambrosio, given her long anti-gas crusades ("Conoco strikes new gas discovery off Victorian coast", 18/11).

Martin Newington, Aspendale, Vic

In 2022, Anthony Albanese continually told Australians he would cut their power bills by \$275 by 2025. Since then, all Australians have faced rapidly increasing power bills. When is Albanese going to reduce power bills?

Michael Fishpool, Carindale, Qld

I wonder how many people were opening their power bills as DJ Albo showed off his dance moves on FM radio.

Trevor Farrant, Hackney, SA

Net zero, what a joke. One good volcano would blow that up.

Andrew Bostock, Melbourne

Imagine if Brittany Higgins manages to bring down another government. Poetic justice?

Prue Sheldrick, Peppermint Grove, WA

Unfortunately for Sussan Ley's leadership, it's a matter of when, not if. Let's hope when finding her replacement the Liberals don't make a hasty decision.

Craig Moras, Albury, NSW

Victorian Libs don't need a new leader, they need new policy.

Brett Hunt, Rosanna, Vic