



Lacy's story (continued)

Disclaimer: This is the story of a person who shared their personal experience with the Commission of Inquiry through a submission or interview. The names in this story are pseudonyms and identifying details have been removed. The person who shared this experience may not have been a witness and their account is not evidence. They did not take an oath or affirmation before providing the story.

Nothing in this story constitutes a finding of fact by the Commission of Inquiry. Instead, these stories have been published to show how people are experiencing the current child safety system in Queensland. Any views expressed are those of the person who shared their experience, not of the Commission of Inquiry.

Content warning: Some material may be distressing. These statements may include references to violence, abuse, neglect, exploitation, suicide, or self-harming behaviours, and may contain strong or confronting language. Some narratives may be about First Nations people who have passed away. Readers are encouraged to engage with this material in a way that supports their wellbeing.

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Introduction

I have previously provided a submission to this Commission; however, I believe it is critical to present a further account that fully captures both my son's experience and the broader systemic failures that underpin it.

This submission is not only a personal account. It reflects structural issues within Queensland's child protection system—particularly delays in permanency, lack of accountability, and inadequate responses to children with complex trauma, mental health challenges, and behavioural needs.

My son's experience is not an isolated case. It is an example of what happens when a system designed to protect children instead prolongs uncertainty, instability, and harm.

Evidence and Research: Systemic Outcomes for Children in Care

Queensland's child protection system is currently under significant strain, with approximately 12,500 children living in out-of-home care. A growing number of these children are placed in residential care due to a shortage of foster and kinship placements—settings that are widely recognised as less stable and associated with poorer long-term outcomes.

Placement instability remains one of the most significant systemic issues. Many children experience multiple placement breakdowns, with some moving through numerous homes across their childhood. Among high-risk children, the majority experience more than four placements, and many remain in care for over five years without

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achieving permanency.

The consequences of this instability are well understood. Children who do not achieve permanency are more likely to experience attachment disruption, identity instability, poor emotional regulation, and long-term mental health challenges.

Children in care are also disproportionately impacted by trauma and disability. A significant proportion have diagnosed or suspected disabilities, and rates of self-harm and suicide attempts are alarmingly high. These outcomes reflect the cumulative impact of trauma, instability, and unmet therapeutic needs.

There is also a strong correlation between time in care and substance use. Many young people use drugs and alcohol as a form of self-medication, particularly when mental health needs are not adequately addressed. This further increases their vulnerability and reduces their ability to engage with support services.

Educational disengagement is another major concern. A large proportion of children in care are suspended or excluded from school, significantly limiting their future opportunities and increasing their risk of long-term disadvantage.

Importantly, there is a well-established link between the child protection system and youth justice. A disproportionate number of young people in the youth justice system have previously been in care, with many experiencing placement instability, trauma, and unmet support needs. This overlap is not coincidental—it reflects systemic failure to intervene effectively at earlier stages.

Young people transitioning out of care face additional challenges. They are significantly more likely to experience homelessness, unemployment, and ongoing mental health issues. The abrupt withdrawal of support at 18 does not reflect their level of need, particularly for those with complex trauma histories.

Personal Account: System Delays and Failures

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My son has been in care since birth and was placed with us at [REDACTED] as a long-term placement. From the beginning, we made it clear that we wanted permanency for him. Despite this, the process was repeatedly delayed over many years.

There were multiple opportunities where permanency could have been progressed, yet each time the process stalled due to staff changes, administrative delays, lack of follow-through, poor communication and no accountability from child safety.

Even when applications were finally initiated, progress was extremely slow. Key steps that should have taken weeks extended into months and, ultimately, years.

Communication from Child Safety was inconsistent and often absent. Emails went unanswered, updates were not provided, and commitments were not honoured. Even formal complaints did not result in timely action.

This prolonged uncertainty had a profound impact on my son.

Impact on Mental Health and Identity

As the delays continued, my son's mental health began to deteriorate.

The uncertainty surrounding his legal status and identity contributed to emotional distress, loss of trust in the system, and a growing sense of rejection and abandonment.

He reached a point where he felt completely broken by the process. The importance of permanency to him cannot be overstated—it represented belonging, identity, and security.

Instead, he experienced years of waiting, with promises made and repeatedly broken.

Over time, more serious concerns emerged, including significant mental health challenges, self-harm ideation,



and increasing emotional dysregulation.

Looking back, this period marked the beginning of more complex conditions, alongside substance use as a form of self-medication.

Escalation to Crisis

As my son grew older, his situation worsened.

His mental health declined further, and his behaviour became increasingly unstable. Substance use increased as he attempted to manage his internal distress. Despite having access to supports, engagement was inconsistent and difficult to maintain.

Eventually, he began leaving home for extended periods, his whereabouts were often unknown, police intervention was required due to safety concerns, and incidents of volatility increased.

These behaviours were not isolated—they were the result of years of unresolved trauma, instability, and systemic failure.

Court Delays and Critical Turning Point

When we finally reached the court process for permanency, it was already too late to prevent significant harm.

Despite no initial contest from biological parents, delays and procedural issues allowed the matter to be disrupted at a critical moment. What should have been a straightforward outcome instead became another setback.

The impact of that court experience on my son was profound. It reinforced his belief that the system prioritised process over people.

Although permanency was eventually granted, the damage had already been done.

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Transition to Adulthood and Withdrawal of Support

When my son turned 18, support from Child Safety effectively ceased.

This occurred despite his ongoing mental health challenges, his inability to live independently without support, and his continued vulnerability.

Financial support stopped immediately, and he was unable to remain in the family home due to administrative requirements. He was transitioned into a less supported environment without adequate funding or structure.

This decision had significant consequences, including increased instability, greater exposure to negative influences, escalation in substance use, and decline in overall functioning.

Impact on Carers

As foster carers, we are expected to provide stability and care to children with complex needs. However, the system does not adequately support us.

We experienced financial strain, lack of communication, administrative burden, and emotional exhaustion.

Carers are essential to the system, yet many are reaching breaking point. Without reform, there is a real risk that carers will continue to leave.

Conclusion: A System That Must Change

My son's experience demonstrates the real consequences of systemic failure within the child protection system.

Children in care experience high levels of instability and trauma, delays in permanency have lifelong impacts, and there is a strong link between care experience and youth crime.

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What is required is meaningful reform: timely permanency decisions, child-centred approaches, integrated mental health support, extended care beyond 18, and proper support for carers.

At its core, the system must return to its purpose—protecting children.

No child should spend their childhood waiting to belong.

