

From: [Sophia](#)
To: [Legislative Scrutiny Committee](#)
Subject: Proposed Amendments to the Care and Protection of Children Act
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Dr Sophia Nicolades

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Response to: Proposed Amendments to the Care and Protection of Children Act (Child Removal Bill)

I am a doctor working in the paediatrics department at Royal Darwin Hospital. I am writing to express my grave concern, both as a Northern Territory community member and, foremost, as a healthcare professional, regarding the proposed changes to the Care and Protection of Children Act.

Every day, I work closely with families caring for sick children. I care for kids from many different backgrounds, in many different states of health. Given our demographics, I work closely with First Nations children and families both in Darwin and in remote communities. It is from this position that I can say that increasing conditions for child removals and decreasing protections for cultural connection and kinship care decreases health and wellbeing.

We live in a complex society where the lasting effects of colonialism and intergenerational trauma continue to impact our communities. A large part of this trauma has been the removal of children from their families, culture, and country. This is an important factor in the social determinants of health, as it affects everything from housing, to poverty, to education, and more. The factors that I see every day impacting the health of children are not a lack of care, love, or engagement from their families. Rather, they are the effects of poverty, food insecurity, and housing instability.

To offer a cost-benefit analysis, the NT government spends \$1.2 million on every child in residential care per year. It is imperative that we consider the life-changing effects if that money could instead go to families and communities experiencing the effects of poverty. Their ability to care for their children, provide a safe home environment, ensure food security, and encourage educational attainment would be drastically increased. Criminalising these families will do the opposite.

We have a large body of evidence elucidating the health effects of removal on children. While intended to provide safety, out-of-home care is strongly linked to higher rates of toxic stress, PTSD, developmental delays, and mental health disorders. Long-term, these children face significantly higher hospital admission rates and worse socio-economic outcomes. We also have a rich body of evidence on the protective factors that cultural connection and kinship provide for children, improving mental, physical, and social health. Time and time again, we see that children who have a strong sense of self, who are connected with their culture, and who are linked into a wide community of care have better health outcomes than children who do not have these connections.

Away from their families, children are often less safe from abuse and maltreatment. The DCF in the NT is operating at 30% employment capacity, with some case workers responsible for 50 children each. In a system in which abuse is rife — with 1,500 children reporting abuse in out-of-home care during the 2023–24 period — and with very little capacity to support children, increasing DCF and judiciary powers to remove children is dangerous for both kids and workers. It also places an added burden on our already understaffed and overworked healthcare system through increased mandatory reporting and notification requirements. We need a system in which concerns raised around living circumstances result in responsive support, not in court proceedings.

These proposed changes have had no input from experts, only 10 days for public submissions, and appear to be based on little to no evidence. The government is under pressure to scrap this bill for a reason. The entire child protection sector and every community legal service in the NT is pushing back, and I add my voice to theirs as a health professional. We need a public enquiry, expert guidance, and First Nations led responses — not rushed legislation reminiscent of the Stolen Generations and that criminalises, rather than supports, children and families of all backgrounds across the NT. We have 200 years of evidence for the negative health impacts of increasing child removals — let's not repeat the mistakes of the past.

Thank you for your consideration.

Dr Sophia Nicolades

Cited research:

<https://www.aihw.gov.au/reports/child-protection/child-protection-australia-2023-24/contents/safety-of-children-in-care/how-many-children-were-the-subject-of-a-substantia>

<https://dcj.nsw.gov.au/documents/about-us/facsiar/facsiar-publications-and-resources/Comparing-Outcomes-for-Maltreated-Children-Brief.pdf>

<https://www.aihw.gov.au/getmedia/7ad34ce7-d8d6-42cc-be04-1f646b78c1ea/aihw-imh-connection-between-family-kinship-and-sewb-summary-paper.pdf>