

No contraception, no dole. By Gary Johns, The Australian, 30 December 2014

IF a person's sole source of income is the taxpayer, the person, as a condition of benefit, must have contraception. No contraception, no benefit.

This is not an affront to single mothers or absent fathers, or struggling parents. Such a measure will undoubtedly affect strugglers, it undoubtedly will affect Aboriginal and Islander people in great proportions, but the idea that someone can have the taxpayer, as of right, fund the choice to have a child is repugnant.

Large families of earlier generations were the result of the combination of absent contraception and the need to have many children, in order that some survive to care for parents in old age.

These conditions do not now apply. Infant mortality is minuscule in all sectors of society, and the taxpayer picks up the tab for aged care.

Therefore, there should be no taxpayer inducement to have children. Potential parents of poor means, poor skills or bad character will choose to have children. So be it. But no one should enter parenthood while on a benefit.

It is better to avoid having children until such time as parents can afford them. No amount of "intervention" after the fact can make up for the strife that many parents bring down on their children.

As commissioner Tim Carmody wrote in the Queensland Child Protection Commission of Inquiry report in 2013, "some families will never rise to the challenge or have the capacity or commitment needed to take responsibility for the children they bring into the world".

And so it was that taxpayers were confronted with two cases over Christmas. Both happened to be indigenous, but of course, many non-indigenous cases abound. The first, in Cairns, involved a single mother with nine children from five fathers.

The usual allegations of failure to support were levelled at authorities. Gracelyn Smallwood, the enduring indigenous north Queensland activist, wanted "a 24-hour culturally appropriate service" for such mothers.

Indeed, all manner of culturally appropriate support has been forthcoming, but as Carmody found, "the growing number of Aboriginal and Torres Strait Islander children in out-of-home care has severely outpaced the number of Aboriginal and Torres Strait Islander carers".

Better this woman had fewer children. Better men on benefits also could be prevented from having children.

Which recalls the second case, in Redfern, of contested parenting between the NSW Department of Family and Community Services and a grandmother for her daughter's, and an absent father's, six children.

Until June, the grandmother was caring for her six grandchildren and two of her daughters at different times, in a small two bedroom house in Redfern.

The department had taken the children and placed them in foster care.

The facts suggest the outcome was fraught, whatever the court's decision about who ultimately cared for the children.

The grandmother, the mother and the absent father have been long-term alcoholics and drug abusers. But again, the large number of children made the burden intolerable.

The department outlined a long list of issues that faced the grandmother, for which it suggested multiple interventions.

These included help with her parenting; child protection counselling; drug and alcohol relapse prevention; literacy and numeracy assistance; respite care service; medical, dental and school appointments for the children; issues with the children's behaviour; issues with people (including family members) staying overnight in the home; children spending time with the parents; children spending time outside the home; housing problems; financial problems; and other concerns about the safety or welfare of the children.

Other than that, everything was just fine.

The department had a long history of involvement with the grandmother from when she was 16, with her first child.

The grandmother had started drinking alcohol at age 12 and went on to use a range of drugs, including marijuana, cocaine and heroin. The grandmother was not focused on her children when they were young. Indeed, her mother was the main carer of her first three children.

The mother acknowledged drinking alcohol to excess, being subjected to assaults by the father and leaving the children unsupervised. There had been a number of "risk of harm" reports related to both parents' abuse of alcohol and poor supervision, for example, leaving the children unattended while they were at the local pub.

There was serious domestic violence between the parents.

Some families, some communities, some cultures breed strife. Governments cannot always fix it. Compulsory contraception for those on benefits would help crack intergenerational reproduction of strife. As for inadequate non-beneficiaries, we just have to grin and bear it.

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