

# Child Protection Services In Victoria

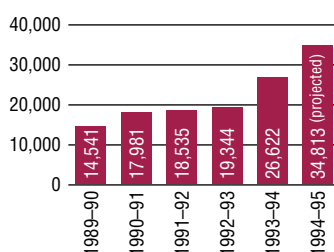
Compared with other Australian states, Victoria was slow to respond to the growing concern about child abuse in the 1960s and 1970s; a comprehensive welfare-based Child Protection Service was not established in Victoria until 1985. In its early years the program depended on people believing they had a moral responsibility to report cases of child maltreatment. Although at that time Victoria's reporting rate was below that of most other states, a targeted education program led to a gradual rise in reporting.

## A Case of Escalating Demand

Figure 1 shows that reports to Victoria's Child Protection Service have increased dramatically, particularly since November 1993 when mandatory reporting of serious physical abuse and sexual abuse was introduced for doctors, police and nurses. Teachers were mandated in July 1994. At about the same time, a media campaign which coincided with the coronial inquests into the deaths of Daniel Valerio and River Lawrence brought child abuse powerfully to the consciousness of the community. Interestingly, after Australia-wide reporting rates had flattened out, an upward trend is now discernible. All three factors must be taken into account in explaining the Victorian data.

Allowing for some definitional differences, the rate of notifications per 1,000 children in Victoria is 25.1, significantly

**Fig. 1** Notifications, 1989-90 to 1994-95



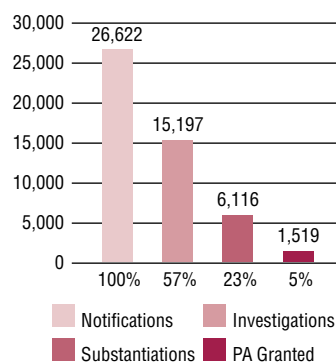
Source: Protective Services Annual Data, Health and Community Services

outstripping that for Australia 19.4 and England and Wales 14.5.

## With What Outcome?

How ought one interpret this dramatic increase in reporting? Is Victoria an unsafe place for children? Are Victorian parents growing more brutal towards their children by the year? Or is it that reporting rates tell a story that has little to do with the actual risks confronting children? Figure 2 goes some way to answering these questions.

**Fig. 2** Notification outcomes 1993-94



Source: Protective Services Statistical report 1993-94, Health and Community Services

When 1993-94 had run its course, some 600 child protection workers in Victoria had sifted through the 26,622 notifications to find they could substantiate situations of risk for 6,024 children, of whom only 1,224 were serious enough to warrant court action in the Children's Court. About half of these children were removed (usually temporarily) from the care of their parent/s by court order.

What can be said about the 20,000 children who received only a limited response from the Child Protection Service? While those stories of concern apparently did not warrant full protective action many would have involved children who were nevertheless disadvantaged and deprived and whose life chances were limited. The socio-economic profile of the Protective Services client population in Victoria is similar to that of the United Kingdom as

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outlined by Michael Little in his article elsewhere in this issue of *Family Matters*. The children reported are from poor families; lone-parent families are significantly over-represented; parents' mental illness or intellectual disability is becoming more noticeable; substance abuse and domestic violence may also be a factor.

For the children reported to the Protective Service, adversity can be seen to be stacking up. With its emphasis on time limited investigation and court action where necessary, the Child Protection Service is geared to short-term intervention, as if anticipating a revolution of the family's situation within a matter of months. This can only be regarded as wishful thinking. Whether one applies a social justice approach or not, the profile outlined above suggests that many families reported to the service will experience chronic multiple crises over a long period of time.

## Service Design

The design of Victoria's Child Protection Service is similar to that of many other jurisdictions. Someone, it may be a family member, a neighbour, or a professional, forms a belief that a child has been maltreated or is at risk of abuse or neglect and reports the matter to the Protective Service. The protective worker investigates the child's circumstances, decides whether or not the matter is substantiated and, if it is, places the child's name on a register. Then, if the level of risk cannot be reduced by a service plan, a Protection Application is taken out in the Children's Court. In serious cases the court will sanction the child's removal from the family.

This service system has become the standard answer of many governments to the problem of child abuse, even though this social problem is little understood.

**What is Being Notified?**

Since the 1970s it has been difficult to reach consensus on the definition of ‘abuse’. Although ‘neglect’ and ‘emotional abuse’ have not been included in the Victorian mandatory reporting provisions, they nevertheless continue to make up well over half of the reports to the Child Protection Service.

**Fig. 3** Type of abuse notified, 1993–94



Source: Protective Services Statistical report 1993–94, Health and Community Services

Furthermore, for substantiated cases, there is some evidence from Victoria CSV data 1989–92, that while about 30 per cent of cases are regarded as severe or significant, the remainder are categorised as children at moderate risk. New South Wales data (Young and Brooks 1989) tell a similar story, while analysis of 1989–94 Western Australia data by Cant and Downie (1994) has shown 44 per cent of substantiated allegations had no identified harm recorded.

In the 20 or more years since Child Protection Services were first established to respond to battered children, the target population has grown as different forms of abuse have been added – neglect, emotional abuse and, more recently, sexual abuse. Programs have been based on, first, a medical model, then the social services model, and more recently the legal model. What has remained consistent is the focus on the individual child and family, and

elaborate data banks have been developed about those who are reported to the service.

As media and political attention have increased, governments – particularly in the UK, USA and Australia – have increased the resource allocation to Child Protection Programs so that the number of investigators (child protection workers) can be increased. Not surprisingly, the number of notifications continues to rise, frequently the Protective Service is criticised for intervening in a particular case, tragically a small number of children still die in spite of protective intervention, and many argue that the enormous expenditure appears to have little impact.

In addition, some children are re-referred; in Victoria, 17 per cent of children were referred more than once in 1993–94. This is similar to the re-reporting rate in the state of Indiana, USA (Knudsen 1989). A more recent Western Australian study (Cant and Downie 1994) found that 24 per cent of children had more than one notification, and that less serious harm was involved for the second and subsequent notifications.

**Who is Notifying?**

In spite of legislation mandating police, doctors, nurses and teachers, the child’s own kith and kin network continues to dominate, constituting more than one-third of all notifications. In Victoria the police report in significant numbers also (differing from their counterparts in other states), and this no doubt can be attributed to the central role of police prior to the late 1980s.

The second largest professional group who notify is the staff of the child welfare agencies – predominantly social workers, and youth and child care workers. In

their compelling study of the English Child Protection system, Dingwell et al (1983) suggest that families reported tended to be those whose ‘social credit’ with local agencies had run out, families who were seen to have exhausted normal avenues of agency and professional support. There is some anecdotal evidence that the situation in Victoria is similar.

**Conclusion**

Child protection data from the United Kingdom, the United States, Victoria and the other Australian states tell a similar story. The statistics reveal more about the ambiguous definition of child abuse and neglect, and the anxiety of the community and professional groups, than they do about real incidence. Child protection data measure the investigative and administrative work-loads of the agencies involved.

There is an urgent need in Victoria to tell the ‘child protection story’ as it is. While the law provides child protection workers with the authority to take a given matter to court, this mandate does not of itself endow workers with a greater capacity to predict serious harm. Short of removing the child from home, the technologies available to the protective worker for changing the family’s patterns and eliminating risk are limited, and there is no body of research to guide their decision-making. There is some evidence to suggest that many reports are made to alleviate the anxiety of the reporter, and that reports are often made with a limited understanding of the likely outcome, such as is spelt out earlier.

In spite of all this, until recently, it has been difficult to question the direction of Child Protection Services in Victoria, with questions leading to expressions of condemnation and horror as if

the very act of questioning would somehow deny our children the right to protection. It is therefore heartening to read of the reflective thinking taking place in the United Kingdom, as outlined by Michael Little.

Outrage and moral panic have their place in any discussion about child abuse and neglect, but they are no substitute for clear thinking and intelligent debate, and so must not be allowed to take over. The introduction of many child protection systems has enabled governments to avoid addressing the complex social and economic factors which underpin a whole range of conditions facing families.

While a relatively small number of cases reported to Protective Services require swift, decisive, coercive action, most do not. The greater proportion of notifications of child abuse and neglect would be more effectively addressed by improved social security, accessible health services, more durable family support systems, and education and training programs for the children and young people referred – measures to break the cycle of disadvantage.

**References**

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