

The maltreatment of children has occurred through history. This article gives an overview of the development of child protection and efforts to prevent child abuse and neglect. It highlights the cyclical nature of the evolution of child protection services, noting that many of the current approaches have been tried a number of times over the last 150 years and look likely to be re-applied in the next few decades.

A history of child protection

B A C K T O T H E F U T U R E ?

Cruelty to children has always occurred, and evidence of the mistreatment of children at the hands of adults has been described throughout the ages and across societies (Solomon 1973; Smith 1975; Radbill 1980). There have also been attempts to improve aspects of child welfare in various cultures and at various times through history (Smith 1975). For example, according to Radbill (1980), orphans in Mesopotamia 6000 years ago had their own patron goddess.

Yet it is only quite recently, in the last 50 years in particular, that the mistreatment of children has created ongoing, widespread public concern and led to the development of government and non-government services designed to protect children from harm and prevent the occurrence of maltreatment.

This paper provides a brief overview of child maltreatment through the ages, its changing nature, and the development of the public concern to protect children. Specifically, it focuses on efforts in western societies, particularly in Australia, since the “modern discovery” of

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child abuse in the 1960s, to protect children and prevent the occurrence of child maltreatment, noting the cyclical nature of the professional response to child abuse and neglect.

Child maltreatment through history

Historically “children have been killed, maimed, starved, abandoned, neglected and chastised with cruelty” (Smith 1975: 3).

Much of what is now defined as “maltreatment” has not always been perceived as such historically, or in other societies. To label a behaviour or act as “maltreatment” depends on: the intentionality of the act; the impact of the act upon the child; value judgements about the act; and the cultural and societal standards that apply (Starr 1988).

Although academics and professionals generally agree that there are problems in arriving at concrete definitions of the various forms of child maltreatment (Goddard and Carew 1993), in the latter half of the 20th century it was common practice to define child maltreatment or “child abuse” into four main forms: physical abuse, sexual abuse,



Picture: Courtesy of Brotherhood of St. Laurence

emotional abuse, and neglect. The term “child abuse” has become the umbrella term used to cover the various forms of maltreatment suffered by children at the hands of others, although it has been criticised on the grounds that it minimises neglect, in itself a form of maltreatment, which can have significant impact (Goddard 1996). In this paper, the umbrella terms “child abuse and neglect” and “child maltreatment” are used interchangeably.

Physical abuse

Physical abuse, defined as non-accidental physical injury inflicted upon a child, has been one of the core forms of child maltreatment through the ages. Lynch (1985) provides material which demonstrates an early knowledge of physical abuse, citing paediatric writings as early as the year 900, when a Persian physician describes the case of a child who may have been hit.

Physical abuse has as its roots “inappropriate physical punishment”. As Radbill (1974: 3) notes, the abuse of children “has been justified for many centuries by the belief that severe physical punishment was necessary either to

maintain discipline, to transmit educational ideas, to please certain gods, or to expel evil spirits”.

Radbill (1974) writes that the practice of using physical discipline in the western world has oscillated between the total abandonment of physical punishment (such as the current Swedish ban on corporal punishment) to employing it to the point of savagery. According to Radbill, in the United States in 1646, Massachusetts courts (and later Connecticut) adopted the Mosaic law, based on biblical scripture referring to the time of Moses. This law imposed the death penalty on unruly children, although public whipping was frequently used as a substitute.

Yet there have always been those who would speak out against extreme physical punishment and the abuse of children. In 400 BC, for example, Plato advised teachers to instruct children “not by compulsion but as if they were playing”, while Roger L’Estrange published a book in England in 1611 in which he pleaded for more leniency from parents towards their children (Radbill 1974).

It was not until 1861, over 200 years after the Mosaic law had been ratified, that public opinion against extreme

corporal punishment was aroused in the United States, when reformer Samuel Halliday reported the occurrence of many child beatings by sadistic parents in New York City (Radbill 1974).

Neglect

It was not until the industrial revolution that “child neglect” (the neglect of a child’s physical needs – nutrition, clothing, accommodation, medical care or safety) became recognised as a societal concern throughout much of the western world (Lynch 1985). Radbill (1980) describes the system of child labour that operated in orphanages, workhouses and factories. Here, children were kept essentially as slave labour, with the demands for their services growing as the industrial revolution developed in the late 19th century. Children as young as five years worked 16 hours a day, wore leg irons and were beaten, starved and, not surprisingly, were likely to suffer from a variety of illnesses.

Concerns for abandoned and neglected children resulted in the formation of the first “child rescue” or child protection societies, and led to the enactment of the first legislation designed to protect children.

Infanticide

Taking physical abuse and neglect to extremes, there is evidence that infanticide and exposure (leaving a child exposed to the elements until they die) have been universal forms of fatal child abuse practiced through the centuries (Radbill 1980). At times this practice appears not only to have been condoned, but was obligatory, such as in cases where the infant was weak or deformed (ancient Greece) (Radbill 1980), or as a means of family planning (China) (Smith 1975). Radbill presents evidence of the killing of “anomalous births” in rural Europe up until the mid-1800s, with girls being at particular risk of death or of being sold.

Sexual abuse

Sexual abuse, the use of a child (female and male) for sexual gratification by an adult or by a significantly older child or adolescent, has occurred throughout history (Tower 1989; Plummer 1993). Although there have been many societal taboos about incest (sexual acts between close family members), it was not until the 16th century that legislation was enacted in England that began the process of protecting children from sexual abuse – boys were protected from forced sodomy, and girls under the age of ten years from forcible rape.

By the time of the settlement of the United States, sexual prohibitions were becoming more stringent (Oates 1996). Illick (1974, as cited in Oates 1996) reported that in Connecticut in 1672, a father was found guilty of incestuous acts with his daughter and executed. The case also highlighted an attitude still encountered today: victim blaming. In the Connecticut case the perception that the child must have encouraged the abuse resulted in the child being sentenced to a whipping for “her part in the crime”.

In the 1700s, some educators began warning parents to supervise their children at all times, and to ensure they were never naked in front of other adults, in order to protect them from sexual abuse. This constituted one of the first indications that society at large recognised the potential for children to be sexually abused (Conte and Shore 1982). By the late 1900s welfare groups were familiar with child sexual abuse, and recognised that it was most commonly perpetrated by members of a child’s family (incest) (Wurtele and Miller-Perrin 1993).

By the 1920s however, sexual abuse had become characterised as assaults committed by “strangers”, with the victim perceived as a “temptress” rather than as an innocent child (Gordon 1990, as cited in Wurtele and Miller-Perrin 1993). To this day, despite plenty of evidence identifying the majority of those who carry out sexual assaults on children as being well known to the victim child (particularly family members and friends of the family), “stranger danger”, the perception that most assaults are committed by strangers, remains a common myth in society. This is likely to be because it is much more threatening to acknowledge that sexual abuse is commonly occurring within the family, and is being committed by family members upon whom children are dependent and should be able to trust; such an acknowledgement may be seen as a serious threat to society’s perceptions of the family.

It was not until the 1970s that child sexual abuse became a widespread public concern, thanks mainly to work of child advocates and the feminist movement. This greater awareness grew particularly out of the latter’s work as advocates for adult victims/survivors of rape and other sexual assault.

Emotional abuse

Emotional abuse, also known as psychological maltreatment, was not formally “discovered” until the 1970s. The core of emotional abuse is that it is a *sustained pattern* of verbal abuse and harassment by an adult with the aim of damaging a child’s self-esteem or social competence. Emotional abuse does not leave physical injuries, and for that reason it is the most hidden and underestimated form of child maltreatment (Tomison and Tucci 1997).

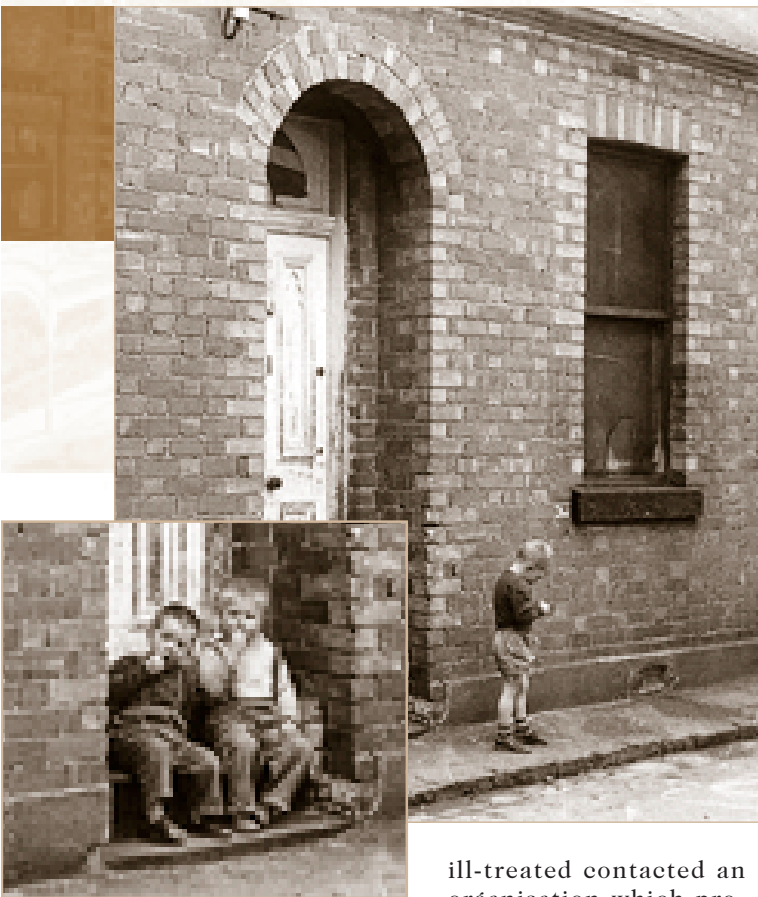
It should be noted that, like other forms of maltreatment, emotional abuse occurs in different forms and at different rates in different cultures. Every culture defines some form of behaviour as abusive, and has instances where people breach acceptable standards. Briggs and Hawkins (1997) cite the example of the industrial north of England, where traditional views emphasise the value of modesty and sincerity. The perception that conceit and dishonesty are the worst traits a child could develop has been linked with the accepted regional habit of belittling or “putting down” children.

Child protection: the beginnings

Despite various attempts to protect children from harm down through the ages, it was not until the 19th century that the maltreatment of children became of great public concern in western societies and action was taken to protect children from harm. Some historians have proposed that child mortality rates (for example, according to Jones et al. (1987), 50–70 per cent of children died before reaching five years of age in the mid-1700s in Britain), may have led to greater recognition of the need to protect children, while Goddard (1996: 24) contends that changes in “children’s health, conceptions of the family and childhood, together with growing interest in children’s rights, led to a new interest in the abuse of children”.

Mary Ellen

Mary Ellen was the first of a number of children whose tragic existence led to public outcry, demands for action, and changes to social policy (Radbill 1974; Jones et al. 1987; Liddell 1993). Ten-year-old Mary Ellen lived in New York City in 1874 with her adoptive parents in a tenement building. Neighbours concerned that she was being



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or children whose parents were considered “socially inadequate”, were boarded out with approved families or, later, resided in orphanages, the first of which was established on Norfolk Island in 1795 (Liddell 1993).

Over the next century a strong voluntary or non-government child welfare sector developed in Australia (and overseas) (Picton and Boss 1981), with the Christian churches becoming involved in running orphanages and occupying prominent positions within the non-government child welfare system – this remains the case today.

According to Liddell (1993), who has written a useful history of child welfare and child protection in Australia, in the mid-1800s, at a time when institutionalisation (residential care of children) was still the main response to child welfare problems, New South Wales and Victoria experienced a significant increase in the number of abandoned and neglected children as a consequence of the gold rushes and population increases. However, there was also increasing concern over the conditions experienced by children “in care”, and the deprivation they suffered as a result of having no family life. Thus, by the end of the century “boarding out” had become the most popular form of child welfare activity throughout the Australian states, a form of foster care that was “probably the best model of foster care in the world at that time” (Scott 1998: 5).

This trend provides one of the earliest examples of what has become a continuing issue in child protection and child welfare – the regular oscillation between, and re-visiting of child protection and service models or approaches designed to **prevent** the occurrence of child abuse or neglect (that is, child abuse prevention), often caused by public outcry at perceived failures in protecting children from harm (child deaths in particular). Since the 1800s, the provision of alternative care has oscillated between the housing of children in institutional settings and housing them in some form of family-based care, such as foster care.

Fuelled by evidence of the further abuse and neglect of children in institutions, the alternative care “pendulum” has continued to swing between institutional and family-based care to this day. Australian state and territory governments continue to reflect on the degree to which institutional care should be used under a system that has favoured family-based care for much of the past 40 years.

Australia: late 19th century: It was at this time, in the 1890s (for example, in 1896 in Victoria) that most states experienced the establishment of a Children’s Court, the development of legislation to protect children from the more obvious forms of child maltreatment, and the formation of a number of voluntary “child rescue” organisations, including the Victorian Society for the Prevention of Cruelty to Children (1894), later to be known as the Children’s Protection Society. The development of such agencies strengthened the role of the non-government sector in Victoria and set the foundation for the child welfare sector of the 1990s. Finally, the end of the century saw the development of early family support services, such as forms of parental respite (Liddell 1993).

ill-treated contacted an organisation which provided

voluntary assistance to immigrants. When they visited the apartment they found Mary Ellen in a terrible state; she had been neglected, beaten and cut with scissors. The parents refused to change their behaviour, insisting that they could do as they wished with the child. Because there were no laws against child maltreatment at the time, the group decided to bring the matter before the courts under existing animal cruelty legislation on the grounds that Mary Ellen was a member of the animal kingdom. The case was proved and she was granted protection.

This case resulted in the formation of the New York Society for the Prevention of Cruelty to Children, which subsequently inspired the formation of other Societies in the United States, and the founding of the National Society for the Prevention of Cruelty to Children (NSPCC) in the United Kingdom in 1883 (Radbill 1974; Jones et al. 1987). Thus began what has been described as the “first wave of the child rescue movement” (Liddell 1993).

In 1889, after campaigns by the NSPCC and others, the UK parliament recognised public concern by passing the Prevention of Cruelty Act 1889, dubbed the “Children’s Charter” (Allen and Morton 1961). Among other things, the Act enabled magistrates to issue warrants to permit the entering of a house if their were suspicions a child was being ill-treated, for police to arrest those suspected of ill-treatment, and courts to remove ill-treated children from their parents (Jones et al. 1987).

Australian developments

In Australia, the earliest form of child protection began within weeks of the first white settlements being established in New South Wales (Gandevia 1978). With a focus on the general welfare of children, services were developed in response to what would be defined as neglect today. The settlement’s abandoned and neglected children,

Picture: Courtesy of Brotherhood of St. Laurence

Unfortunately, the “child rescue” movement of the latter part of the 1800s also led to the development of interventionist policies designed to support the state’s regulation of Aboriginal people and more specifically, Aboriginal child-rearing practices. Although the Aboriginal Protection Board of New South Wales was originally set up



to protect Aboriginal populations from damage done to them by white settlement, it set the basis from which a separate Aboriginal child welfare system could be established. In 1910 the Board was given a mandate to deal with Aboriginal children, beginning what would become a pattern of massive intervention and interference with the Aboriginal culture in the mid-1900s, has become known as the “Stolen Generation” (Liddell 1993).

Australia: 20th century: The first half of the twentieth century was not notable for changes to child welfare practice, but it did see the state taking greater responsibility for looking after children’s welfare, and the increased use of legislation to enforce appropriate standards of care. This was evident during the years of the Great Depression in the 1930s, when the practice of “boarding out” (of white children) was gradually replaced by institutionalised care, mainly because of the significant advantages it afforded, in terms of “supervision and cost control” (Liddell 1993: 40).

As a consequence of concerns about the standard of care received by institutionalised children, the 1950s heralded the beginning of a trend (a pendulum shift) towards the closing down of large institutions and a shift towards smaller group care, although institutionalised care continued through the 1950s and 1960s.

The modern discovery of child abuse

It is generally agreed that modern professional (and subsequently public) interest in child maltreatment, sometimes known as the “second wave of the child rescue movement” (Scott 1995), was prompted by research conducted in the early 1960s in the United States by a group of medical

professionals led by Dr Henry Kempe (Kempe et al. 1962). In 1962, in a paper which appeared in the *Journal of the American Medical Association*, Kempe and his colleagues proposed the “battered-child syndrome” as an interpretation of medical evidence (radiological surveys that revealed untreated broken and fractured bones) caused by physical abuse. This paper is seen as the seminal child abuse work, initiating modern interest in the field in the United States and subsequently around the world. Within weeks of its publication, print media were carrying stories on the battered-child syndrome and it has been contended that the media coverage was just as important in the recognition of the problem as the paper itself (Nelson 1984).

After the publication of Kempe’s work, child abuse was also “discovered” in other countries, including Australia.

The 1890s saw the development of legislation to protect children from the more obvious forms of child maltreatment, the formation of voluntary “child rescue” organisations.

Wurfel and Maxwell (1965) investigated 26 children from 18 families presenting at the Adelaide Children’s Hospital. Particularly disturbing is the young age of the children (half were aged six months or younger), and the severity of the abuse (eight of the children had subsequently died of their injuries).

Developing child protection systems

In the three decades following the work of Kempe and colleagues, the definition of what constitutes child abuse and neglect has greatly expanded and it has become one of the primary social ills targeted for action by governments and communities across the western world. The prominence of child abuse and neglect is, in part, due to the sizeable media interest it attracts. The media has been essential to the growth in society’s awareness of child abuse, not so much from specific community education campaigns as through the news and features reporting on specific cases, particularly the more sensational or gruesome cases, research and intervention initiatives (Goddard and Saunders 2001).

The public concern for the welfare of children and the need for expertise in the assessment and treatment of cases of child abuse and neglect has led most communities to develop some form of distinct, professionally staffed, child protection service, located within social service agencies or government departments (Jenkins, Salus and Schultze 1979). According to some sources (for example, American Humane Association 1992), the development of child protection services as part of larger welfare departments was part of a commitment to maintaining families, rather than treating child abuse as a crime.

Child protection services, via child protection workers, are expected to be able to correctly determine if a child is subject to maltreatment, to determine the severity of the abuse or neglect, the risk of future maltreatment, and to develop effective means to ensure a child’s safety. However, societal expectations of accurate prediction have often outstripped current knowledge of the causes of child abuse and neglect, the process of making child protection decisions and the influence various factors in isolation or combination may exert. In addition, society has not set clear standards

for what constitutes appropriate child care, nor has a series of factors been developed that can definitively indicate cases of high risk (Preston-Shoot and Agass 1990).

In essence, child protection workers make their decisions without a clear means of judging which cases are in need of immediate protection and which are not. Often these decisions are made without access to all relevant case information, and in many cases where the child's caregivers are non-cooperative. Workers are expected not only to determine if maltreatment has occurred when children present with physical injuries or behavioural symptoms, but they must also correctly assess cases where there are no identifiable signs of abuse or neglect. Unfortunately, there is little recognition by the public as to the limitations of child protection work, or of the inherent difficulties faced by workers engaged in child protection, of the "shades of grey present in many child abuse cases" (Preston-Shoot and Agass 1990:113).

All too often, workers are "damned if they do" for removing children too frequently or inappropriately, and "damned if they don't" for failing to take action to protect children. Beginning with the death of seven year old Maria Colwell at the hands of her caregivers in the United Kingdom in 1973, the consequences of the failure to take action to protect a child have been highlighted via a series of government child death inquiries. Designed to investigate the circumstances leading to the death of a child, and the failure of child protection services to protect the child, these inquiries are now common in most western countries (Goddard and Carew 1993; Preston-Shoot and Agass 1990).

The dilemma of determining when to remove a child at risk of harm highlights the conflicting values of child protection work – to protect children while maintaining or preserving families. Over time, the "threshold" for protective investigation and intervention (taking statutory action to remove a child) has continually shifted in response to public concerns and resource issues.

Thus, the decision to take action can be thought of as a "child protection pendulum" where the emphasis has regularly swung from erring on the side of caution and removing children at risk of maltreatment from their families, to the other extreme of keeping families together even where there are serious concerns, and only removing children as a last resort.

Despite media stories highlighting what is perceived as the inappropriate removal of some children by child protection workers, the child protection system is generally quite non-interventionist. In fewer than one in ten reports do child protection services take statutory legal action – that is, remove a child (temporarily or permanently) from the home, or seek legal supervision of the child in order to ensure that a family complies with plans to reduce the risk of harm to the child.

This means that, contrary to public perceptions, child protection services do not focus on the prosecution and punishment of all maltreating parents. In the majority of cases reported to child protection services, the maltreatment concerns are not confirmed ("substantiated"), or the concerns are confirmed but the family undertakes voluntarily to attempt to seek assistance and resolve their problems in order to reduce the risk of abuse or neglect.

Child protection in Australia

The child protection system in Australia is quite fragmented. The responsibility for Children's Courts and child welfare legislation as it affects children subjected to child

abuse and neglect, rests with the individual state and territory governments (Goddard 1996). As a consequence, there are major variations in child welfare laws governing children in need of care and protection, including how child abuse and neglect are defined, the structure of the child protection system and the child protection services that have been developed, and consequently, in the reporting, investigation and intervention in cases of suspected and/or substantiated child maltreatment (Goddard 1996).

Yet in spite of the quite significant differences between the state/territory services, each service plays a similar role and each service has been affected by a number of inter-related issues that have impacted on the provision of child protection and child welfare/family support services across the western world.

Changes to child protection since 1970

The 1970s and 1980s saw the development and refinement of systems for investigating and managing child maltreatment cases and the increased "professionalisation" of the child protection response. In the 1980s and 1990s, the desire to improve the professional response to child maltreatment, along with a strong desire for greater accountability (see below), led to the widespread adoption, particularly in the United States and Australia, of a variety of professional decision making aids, guides or checklists, commonly referred to as "risk assessment" measures. The intention was to provide child protection workers with additional resources they could use when assessing the risk of abuse or neglect to a child. Specifically, the aids could assist workers in determining if abuse or neglect had occurred, the risk of further harm, and whether the child should be removed from her/his parents' care.

Since the 1970s, there has also been a continuation of the process of deinstitutionalisation that had begun in the 1950s (Liddell 1993), with child protection departments continuing the policy of returning children to their homes. In spite of moves towards the establishment of small residential units or family group homes for children in need of care and protection, concerns about the quality of institutional care and the capacity for such forms of care to meet children's needs, have continued.

Economic rationalism

Child protection services in many western countries have been shaped by what is commonly known as the "economic rationalist" approach, that is, an undue focus by governments on economic considerations over social and welfare concerns. This has resulted in a number of significant changes to child protection practice.

First, the development of the user pays system has led to an increasing expectation on the part of governments for families and communities to look after and manage their own needs with minimal government involvement in service provision and, at times, decreasing financial support (McGurk 1997).

Second, the provision of therapeutic support to children and families has been framed in terms of cost-effectiveness and efficiency criteria, a particularly difficult task when applied to the prevention of child maltreatment and the protection of children. It has also resulted in the privatisation of government services and the introduction of compulsory competitive tendering.

Tough fiscal constraints, most evident in the early 1990s, translated into the severe rationing of resources

and the increasing pressures and controls being applied to the operations of non-government family support and child welfare agencies. This forced some non-government agencies to close, many agencies were forced to amalgamate to survive, and the non-government sector's ability to provide services and support for children and families was significantly hampered (Mitchell 1996).

In practice, what this meant was that the ability of agencies to provide support for families suffering from social problems, but who were not actually maltreating their children (so-called "at risk" families), was severely reduced. These families were often not able to gain access to services, or were placed on long waiting lists as the depleted non-government system struggled to cope with the influx of clients referred by child protection services (Scott 1998).

At the same time as the reductions in public spending on welfare and child protection began to take place, child protection work became increasingly driven by administrative requirements and the adherence to strict procedures ("bureaucratisation"). Management issues rather than professional practice became central to child protection practice, with efficiency, effectiveness and a focus on accountability overriding and conflicting with professionals' values and orientation towards the needs of children and their families (Lieberman 1994).

It has been argued that the bureaucratisation of child protection practice has led to workers' professional skills, knowledge, discretionary powers and decision making, being replaced by standardised practice, developed without a clear understanding of the complexity of child protection practice or of the dilemmas and the moral and political factors that workers must take into consideration when making decisions (Howe 1996).

The legalisation of child protection practice

Concomitantly, a legalistic framework and "rules of evidence" have increasingly determining the facts of a case and whether abuse or neglect is serious enough to warrant protective intervention (Stanley 1997). Under a legalistic framework, developing a legal response has pervaded child protection practice and usurped the therapeutic needs of the child and family. A consequence of the adoption of the legalistic framework has been that attempts have been made to restrict definitions of maltreatment in order to limit coercion and stigma. This has conflicted with the therapeutic need to widen definitions and to increase the identification of "at risk" or maltreating families in order to offer help (Hallett and Birchall 1992).

A further consequence of the law becoming the standard by which cases are judged and maltreatment defined is that cases with legal consequences are, by definition, more likely to be singled out for attention (Lynch 1992). Emotional abuse or neglect, typically more difficult to prove legally, may therefore be less likely to receive adequate attention.

In addition, there is a danger that maltreated children may receive inadequate care and protection as a function of a lack of evidence, or until the evidence is such that the case is able to be dealt with under the legal system (Stanley 1997). Finally, the evidential standards required by courts may affect the work of non-judicial agencies, with evidential issues dominating case investigations, with child protection concerns being subsumed, and therapeutic work hampered by a focus on criminal concerns (Mouzakitis and Varghese 1985).

The shift to family support

In the late 1990s, statutory child protection services in the Australian states and territories, like those in other western countries, were struggling to cope with ever-increasing numbers of reports of suspected child maltreatment and fewer resources (Tomison 1996). These pressures, some caused or exacerbated by the over-emphasis on cost effectiveness and bureaucratic structures at the expense of professional practice, led governments and child protection services to seek alternative solutions.

It was apparent that a substantial proportion of the child maltreatment reports received by child protection services were inappropriately labelled as allegations of child maltreatment by those who referred cases to child protection services (Dartington Social Research Unit 1995; Tomison 1996). Many of the reports involved families who had not maltreated their child but who had more generic problems, such as financial or housing difficulties, an incapacitated caregiver, or serious stress problems. Although such "at risk" families may require assistance, they do not require child protection intervention. Their labelling as cases of child abuse or neglect was further taxing what were generally limited child protection resources (Tomison 1996).

Despite the fact that legal action was not taken for the majority of families with whom child protection services were involved, it was argued that the style of intervention for all families had become "forensically driven", (Tomison 1996; Armytage, Boffa and Armitage 1998). One consequence of this "forensic" or legalistic approach was an emphasis on child protection services as the "expert" and to alienate essential non-government agencies and professionals from a partnership approach to the prevention, support and protection of children (Armytage et al. 1998).

Such an approach had led to the shifting of scarce child protection resources away from confirmed or "substantiated" child maltreatment cases to enable the conduct of investigations. It also raised general questions in relation to both child protection services' screening or "gatekeeping practices" and the nature and availability of broader child welfare and family support services in the community. Within this, the dilemma was described as one of distinguishing child protection problems from broader welfare concerns and, in all instances, delivering an appropriate response matched to the needs of the client children and families.

In developing alternative service models as a response to these critiques, attention has therefore focused on both the operations of child protection services *and* the broader child and family welfare system that the statutory child protection services operate within (Dartington Social Research Unit 1995). Most Australian state and territory governments have adopted "new" models of child protection and family support (Tomison 1996), based predominantly on the recommendations proposed in the UK Department of Health's *Messages from Research* research report (Dartington Social Research Unit 1995).

Such models are often not new, but are a revisiting or recapitulation of solutions previously tried and tested since the development of child protection services. One of the major differences is that there is now formal recognition of the vital role played by the broader child and family welfare system in supporting families and thus, preventing the occurrence and recurrence of child abuse and neglect.

Back to the future

Under these new child protection models, the balance between child protection and the role of family support services is altered such that child protection no longer drives the system but becomes merely one important facet in an overall welfare assessment of the family.

Good practice and adequate child protection thus both emerge from adopting a wider perspective on child protection by means of which underlying problems in the family that may put a child "at risk" or have a detrimental effect on the child's long-term welfare are addressed (Tomison 1996). That is, having recognised that merely conducting an investigation and applying the label "child abuse" to a family would not do much to reduce the risk of further harm to children, there has been a renewed focus on addressing family ills holistically, to supporting children and families, in order to prevent the development or recurrence of child abuse and neglect.



Most services have therefore adopted practice principles that promote cooperation between workers and families in order to achieve greater levels of parental cooperation and, subsequently, a better outcome for children and families.

In addition, child protection workers have been provided with a greater range of options to select from when responding to a report. These differentiated responses provide workers with more scope to tailor the assessment process to the perceived family needs and the level of risk to the child. Thus, a case that appears to be mainly about a need for general family support rather than the occurrence of actual child maltreatment, may receive a less intrusive assessment, involving non-government agencies, while a serious child abuse concern continues

to receive a more authoritarian response from child protection workers, perhaps in the company of police officers.

The benefits of the new systems are that, ideally, families are not unduly stigmatised or traumatised by inappropriate or unnecessary investigations, and are therefore more likely to accept assistance. In addition, family problems can be comprehensively assessed and (in theory) appropriate services put in place to address them, thus preventing the development of maltreating behaviour, or reducing conditions detrimental to a child's long-term development.

Equally importantly, under the new approaches there is greater recognition of the need for effective collaboration between child protection services and other family support agencies in order to assess family needs more effectively, and to provide a response that can positively affect family wellbeing and ensure the protection of children from abuse and neglect. These approaches, if appropriately resourced, enable agencies to regain prominence in preventing child maltreatment and the early detection of "at risk" children, a role which many services were unable to perform substantially in the 1990s because of a lack of resources, exacerbated by the high demands for services that accompanied the recession of the late 1980s and early 1990s (Tomison 1996; Armytage et al. 1998).

Re-discovering prevention

Interest in the *prevention* of child abuse and neglect increased substantially in the last 20 years, and even more dramatically in the last decade. As noted above, this interest was boosted by the recognition that the investiga-

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tion-driven child protection response of the early 1990s would ultimately fail without adequate family support and other prevention services.

There were other reasons for the interest. The humanitarian desire to remedy or prevent the suffering of children also heightened the interest in child abuse prevention. Harrington and Dubowitz (1993) contended that the heightened interest eventuated as a consequence of the professional community's discovery of the harmful and expensive outcomes that can result from child abuse and neglect, such as physical and emotional harm, the transmission of abusive or violent behaviour through the generations from parent to child, and delinquency and/or adult criminal behaviour.

A small, but growing body of evidence that prevention programs are effective has also given impetus to a more prevention-focused service philosophy. Early intervention programs first run in the 1960s in the United States, programs like the Perry Preschool program (Zigler and Styfco 1996), Head Start (Zigler and Styfco 1996), and later, the Elmira Prenatal/Early Infancy home visiting program (Olds et al. 1997) have demonstrated some improvement in disadvantaged children's lives, and a reduction in the number of "at risk" or maltreating families who subsequently require more intensive support in order to reach an

adequate level of parenting and overall functioning. Early intervention has therefore become a vital, cost-effective component of any approach to preventing social ills like child maltreatment or promoting social competence (Barnett 1993; Zigler and Styfco 1996).

The resurgence of interest of such early intervention approaches has been strengthened by growing empirical evidence that early exposure to chronic violence, a lack of nurturing relationships, and/or chaotic and cognitively “toxic” environments (Garbarino 1995) may significantly alter a child’s neural development and result in a failure to learn, emotional and relationship difficulties and a predisposition to violent and/or impulsive behaviour (Perry et al. 1995; Shore 1997).

Thus, although early intervention to prevent child maltreatment or other social ills may be beneficial across the lifespan from birth to adulthood, the prenatal/perinatal period in particular has become a predominant focus for intervention. Infancy is a period of developmental transition that has been identified as providing an ideal opportunity to enhance parental competencies and to reduce risks that may have implications for the lifelong developmental processes of both children and parents (Holden, Willis and Corcoran 1992).

At present, child protection services across Australia continue to struggle to provide an effective response for children and families.

Equally important for an economic rationalist society was the development of evidence that child abuse prevention is cost-effective. For example, in the often-quoted Perry Preschool study, Barnett (1993) calculated that by the age of 27 years, for every dollar taxpayers spent on the preschool children enrolled in the Perry Preschool early intervention program (developed in the 1960s), there had been a subsequent saving of over seven dollars in health, welfare, criminal justice and social security expenditure. Such cost-benefit analyses have resulted in a revitalised attitude towards the effectiveness of such early intervention programs, given that not only were they able to assist the nation to attain educational targets, but they were “lucrative social investments” (Zigler and Styfco 1996:144).

Importance of family support in preventing maltreatment

Child abuse prevention could be said to have occurred as a function of the general assistance then beginning to be provided by child welfare agencies to families suffering from poverty in the late 19th century. Following the modern “discovery” of child abuse by Kempe and colleagues in the 1960s, and in addition to a continued role in providing alternative care for children removed from their families, church agencies, “child rescue” societies and other non-government agencies spent much of the next 40 years maintaining and expanding their role in supporting children and families who were suffering from a variety of social ills and/or where there were identified child maltreatment concerns. This work with both voluntary and statutory (child protection) client families was vital in reducing the risk of maltreatment and enhancing child and family wellbeing.

Family support services carrying out an “early detection” role, especially home visiting services, have been particularly noted for their success in identifying families at risk of maltreatment prior to concerns reaching a level that would require protective intervention. Whether they be similar to the Home Visitor service operating in the United Kingdom child protection system, the universal maternal and child health nurses operating in Scandinavian countries, or the infant welfare nurses operating across Australia, such services are well placed to monitor the family over time. Where resources allow, they are able to support and educate parents, and are much more likely to detect problematic changes in family functioning (Drotar 1992). These services are also able to divert/refer families to the most appropriate support, and they can often alleviate the family situation without the involvement of child protection services.



However, the value of the preventative role played by the non-government sector, including early detection services, in preventing child abuse and neglect was relatively unacknowledged and undervalued, particularly by governments intent on cost-cutting during the recession of the late 1980s and early 1990s. The subsequent widespread service reduction caused by the significant decrease in available funding, combined with a substantial increase in requests for assistance, resulted in the cessation of much of the preventative family support work being done with “at risk” families by child welfare and family support services.

With very few exceptions, the non-government sector focused predominantly on providing assistance to the families in greatest need, typically those referred by child protection services as substantiated child maltreatment families. Thus, those “at risk” families who sought assistance were left to resolve their problems without professional assistance, and not surprisingly, a number subsequently failed to cope and eventually became abusive or neglectful.

It was not until the shift to a family support model of child protection practice in the mid to late 1990s, and a

greater recognition of the benefits of home visiting and other early intervention programs, that governments began re-investing in the family support system and the non-government child welfare and family support system began to reclaim some of its prevention role with “at risk” families. One of the differences was that governments now explicitly funded the provision of treatment and support for families identified as maltreating, and set about developing and funding a number of services specifically designed to work with “at risk” families.

Strengthening families and communities

Researchers investigating the “risk factors” that may heighten children’s vulnerability to various social ills, such as child abuse and neglect, have consistently identified some children who are able to achieve positive outcomes in the face of adversity – children who are “resilient” despite facing stressful, high risk situations (Kirby and Fraser 1997). Resilience appears to be determined by the presence of risk factors in combination or interaction with the positive forces (protective factors) that contribute to adaptive outcomes (Garmezy 1993).

The enhancement of protective factors or “strengths” has become a key facet of strategies to prevent a variety of social ills, including child maltreatment. Governments are now using it as the basis for Australian community-level interventions, and as a valued part of a policy of promoting family and community health and wellbeing. Thus, the second big shift towards “prevention” has been the emphasis on working with the community as a whole to improve the health and wellbeing of children, families and communities so that, when faced with adversity or stress, they are better equipped to cope and respond in a non-destructive way. This in turn would reduce the incidence of child maltreatment, domestic violence, substance abuse, youth suicide, and a host of other ills. Such an approach goes beyond direct prevention of maltreatment, it is better described as a “wellness” or general health promotion approach (Tomison and Poole 2000).

A key to prevention in the 21st century?

With the dawn of the 21st century there has been government and professional recognition that child protection services in isolation (attempting to address maltreatment after the fact) cannot provide adequate support to families and reduce the risk of the occurrence or recurrence of child abuse and neglect. More importantly, there is growing recog-

nition that a focus on the *prevention* of child maltreatment provides the greater social and economic benefits.

In the past, efforts to prevent child maltreatment have been hampered by a failure to address the structural social forces and community-level factors that impact on children, families and the propensity for maltreatment. In Australia, as in other western countries, the response has been to develop programs that enhance the resilience of children, family and the community. Unfortunately, despite being able to make observable improvements to wellbeing and resiliency, no program can enable children to develop optimally when their larger child rearing environment is not conducive to healthy development (Zigler and Styfco 1996).

It is therefore important to ensure that a greater emphasis on health promotion and efforts to develop resiliency do not detrimentally affect prevention efforts. The most effective strategy for the prevention of child maltreatment, and other social ills would appear to be the adoption of a developmental prevention approach, where the aim is to reduce risk *and* to promote protective factors (Tremblay and Craig 1995).

A focus on resiliency without a continued focus on reducing risk factors is, in effect, only a partial solution. Thus, rather than assisting families and communities to be resilient in the face of adversity, it is important that efforts are made to reduce the structural, societal factors that cause harm to children, such as poverty, unemployment, and inferior educational opportunities, that may lead to an increase in the potential for abusive behaviour in families. Child maltreatment prevention strategies cannot be truly effective without a consideration of the means to address such problems.

The future for child protection – back to the future?

At present, child protection services across Australia continue to struggle to provide an effective response for children and families. Despite the renewed interest in developing greater supports for “at risk” and maltreating families, it is clear that despite extra funding the need for services across the nation remains high and agencies continue to struggle to meet demand.

In the coming decades it can be expected that the adequate provision of family support will remain a driving force in the prevention of child maltreatment. It is likely that further evidence will be produced of the social and economic benefits of early intervention and family support services, leading to a continued focus on prevention and, in particular, an expansion of family support services. It

BECOME PART OF THE CHILD ABUSE PREVENTION NETWORK!



The National Child Protection Clearinghouse at the Australian Institute of Family Studies serves as an interchange point for information, research and initiatives in the child abuse prevention field. It collects and distributes information, and aims for a two-way involvement with the community concerned with child protection.

To participate in the work of the Clearinghouse –

- send us your materials relevant to child abuse prevention;
- complete and return a questionnaire on program activities relevant to child protection with which you are involved;
- join the National Clearinghouse mailing list – you will receive two newsletters and two issues papers free of charge each year.

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could be expected that there will be an emphasis on ensuring greater accessibility to services, especially by those families most in need; and that the range of services available will be increased to better cater for children and families. It is to be hoped that this expansion will include the provision of *long-term* monitoring and support options for families, particularly those with ongoing “chronic” problems, as this is a serious gap in the existing family support system.

Continued efforts to strengthen and expand family support services should lead to a much stronger (and highly valued) role for the non-government sector. In many ways this can be considered a reclamation of the prominent role held by such agencies for much of the 19th and 20th centuries.

Should the preventative approach prove successful, there is likely to be a gradual shift away from the government-run child protection response. Much like the ideal system proposed by proponents of the current “family support” child protection models, only a small number of families – families that health surveillance, early intervention and family support services are unable to help – will receive the statutory child protection response. In many ways such a system could look much like it did before the rise of statutory child protection agencies in the 1970s. Such a utopian system may also lead to greater attention being placed on addressing the structural forces impacting on families.

Conclusion

For much of the past 30 years a variety of child protection responses have been implemented to protect children, and the child protection pendulum has swung between interventionist and non-interventionist extremes, pushed by public concern about child deaths and other perceived failures. The “discovery” of child abuse in the 1960s radically changed public awareness of maltreatment and the response to children experiencing maltreatment.

The recent scientific “discovery” of the benefits of preventing child abuse and neglect has the potential to take society’s response to child abuse and neglect to the next level, driving the creation of a “new”, potentially more effective approach to ensuring the care and protection of children for the coming century. In the short-term at least, it is likely that this brave new approach will be firmly anchored in the refinement of solutions previously tried and tested.

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PREVENTING CHILD ABUSE

An example of the strong interest in child abuse prevention over much of the last decade was the development of the Commonwealth-funded National Child Protection Clearinghouse in 1993. The Clearinghouse is an information, advisory and research unit concerned with child abuse prevention, child protection and associated family violence. It forms the hub of a network of people concerned about preventing child abuse and neglect.

Originally based at the Australian Institute of Criminology, the Clearinghouse has been located within the Australian Institute of Family Studies since late 1994. Over time, the unit has developed into a centre for excellence with a national and international reputation in the field of child abuse prevention and child protection.

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