



# How accessible are child abuse

**KATIE KOVACS** reports on a recent exploratory study conducted by the National Child Protection Clearinghouse that sheds some light on how families with a child at risk of being maltreated avail themselves of child abuse prevention programs.

Child abuse is a serious issue affecting significant numbers of Australian children every year. In 2000–2001, 27,367 cases of child abuse or neglect were substantiated by statutory child protection authorities nationally (AIHW 2002). Since the “modern discovery” of child abuse, a range of services have been developed in order to attempt to combat this problem. In order for child abuse prevention services to be effective, it is imperative to discover whether they are proving to be accessible for those families and children most in need of them.

For the purposes of this study, those “most in need” are defined as families where the parents have not abused or neglected their children, but are most at risk of doing so.

There is currently little documented information available about how families locate, gain access to and use, child abuse prevention services. In order to start to redress this knowledge gap, the Commonwealth Department of Family and Community Services

requested the National Child Protection Clearinghouse at the Australian Institute of Family Studies to undertake a small exploratory research project. The aim of the research was to investigate issues impacting on accessibility of services designed to prevent maltreatment, and how families with a child at risk of being maltreated avail themselves of such services.

## Defining accessibility

The accessibility of child abuse prevention services is determined by various factors. It was the aim of the study to obtain information about the availability of child abuse prevention services, and whether such services were adequately publicised, catered to those most in need of a child abuse prevention service, and successful in preventing child abuse and neglect.

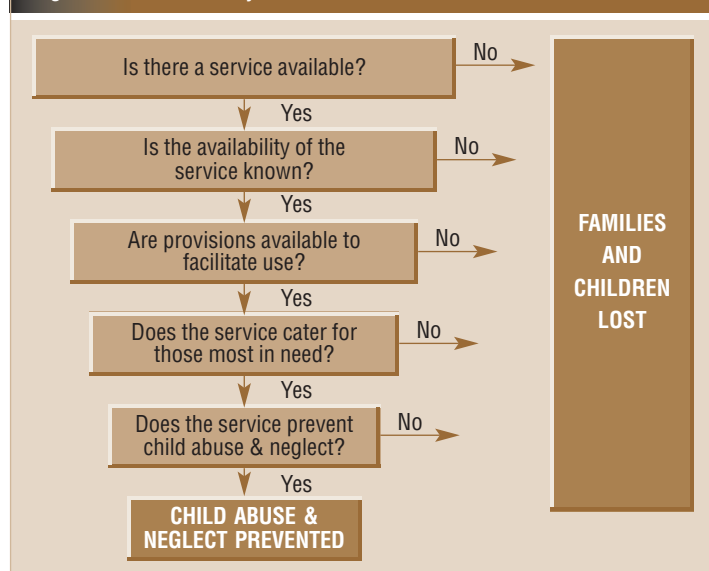
Some of the key issues identified by the researchers as affecting accessibility have been arranged in a flow chart (Figure 1). As the chart illustrates, in order for a child abuse prevention service to be considered accessible and effective, it needs to meet five requirements that can be hierarchically “nested”, such that progression through the chart is reliant on fulfilling the requirements of each level.

## The Accessibility Study

In order to obtain detailed information about access to child abuse prevention services, perspectives were sought from providers currently involved in the operation of either group-based parent education or home-visiting services in New South Wales and Victoria (both rural and urban localities).

Group-based parent education courses are centre-based and have the primary aim of enhancing parental competencies and particularly child management skills through group-based discussions and activities. Home-visiting services involve a social worker or trained volunteer visitor attending the home of families with young children. The visitor may offer parent education and/or family support including information on health, nutrition and safety, and advice on the mother–child interaction. Visitors

**Figure 1** Accessibility flow chart



# prevention services for families?



may also monitor the child's wellbeing and assist families to connect to other services and resources.

The *Accessibility Study* was conducted late in 2002. Respondents were located through snowball sampling techniques using the phone book, local councils, and the National Child Abuse Prevention Programs Database.

Overall, service providers from 32 agencies who met the study criteria agreed to participate. The sample included 13 group-based parent education services and 19 home-visiting services operating in rural and urban New South Wales (19) and in rural and urban Victoria (13). Most services were being run by non-government agencies (20), with the remaining (12) services being run by government agencies.

A short mailed questionnaire asked providers about their service, the area in which it was located, and the respondents' role at the agency. Respondents were asked to rate their service catchment areas against a range of health, wellbeing and demographic indicators. The second part of the study involved a 20 minute semi-structured telephone interview, designed to explore the service's aims, design, type of assistance provided, participant characteristics, referral sources, funding sources, and levels of service evaluation.

Many of the agencies had been operating the service for a considerable time, with 75 per cent (24) running services for three years or more. Of these, ten services had been operating for more than ten years. This contrasts with previous analyses of prevention services (Tomison and Poole 2000: 106) where there was a "trend of funding predominantly short-term pilot or demonstration projects" in the area of child abuse prevention. Thus, it appeared that the *Accessibility Study* sample comprised relatively stable services which had substantial experience in service provision.

## Need for and availability of services

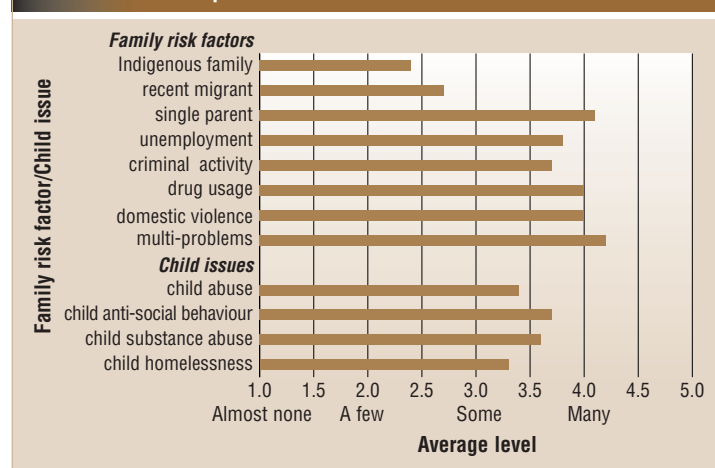
Child abuse prevention services in this study were located in areas rated by service providers as having significant levels of child abuse and domestic violence. As shown in Figure 2, it was found that,

along with perceived high levels of child abuse and domestic violence, the catchment areas also were characterised by a range of other demographic factors often identified as "risk factors" associated with higher rates of child abuse, neglect and domestic violence, including single-parent families, high levels of drug abuse (by children and other family members), high levels of criminal activity and anti-social behaviour by children, youth homelessness, unemployment, and a large numbers of families with multiple problems.

While service providers reported that people in the service catchment areas experienced considerable disadvantage, they also reported that there was a low level of welfare services, activities and infrastructure available for children and families in these areas. With regard to child abuse prevention services specifically, the majority of respondents (88 per cent) stated that there were few services of this type in their areas.

In light of reports that there were many high-need families in the service catchment areas and a dearth of support services, it was not surprising to find that demand on existing services was rated "high" in almost all areas (94 per cent). A further finding was

**Figure 2 Child and family risk factors in catchment: ratings by service providers**



that the level of child abuse and numbers of available prevention services did not coincide, with many areas having a higher level of abuse than available services.

Where services were available, respondents rated the standard in one-third of the areas as “very low” to “low”, and another one-third of the areas as “average”. Reasons for this were not sought, but may relate to inadequate resourcing since the quality tended to be lower where the demand was higher.

#### **Public awareness of service availability**

In order to access a service, those who are most in need of a prevention service need to be aware of its existence. Some providers (6) commented that they did not actively recruit or advertise their service because demand was already very high and they did not wish to be swamped. One respondent stated:

*“Sporadically we did advertise but we really had more clients than we could deal with and so we only occasionally send fliers to agencies.”*

However, over half of the respondents mentioned a lack of community awareness about their program as an issue negatively affecting accessibility (54 per cent). Thus, although demand on services was already high, providers believed that demand could have potentially been higher, as there were still families in the catchment area who were unaware of the existence of the service.

With regard to services which did advertise, the most common form of advertising used was “word of mouth”. Many providers commented that if families hear positive reports about the service from

noted the effects of a shortage of staff and the need for workers to cover very large areas, resulting in resources being fairly thinly spread across the catchment area and a consequent reduction in the numbers of clients that could be seen.

While service providers were not directly asked about child care provisions, child care emerged as an important issue. Services which had child care facilities saw this as a positive factor in increasing accessibility, while services without such facilities saw it as a negative factor. This was especially the case for the group-based parent education services where 54 per cent stated that the presence or absence of child care was a major factor affecting accessibility.

Another factor having a negative impact on accessibility was the operating hours of services. Many services were being offered only during office hours (66 per cent), which was seen by some respondents as useful in that clients could attend while their children were at school. However, narrow hours of operation were seen as a hindrance by other respondents who acknowledged that operating during standard working hours often excluded the participation of fathers. Several providers (6) stated that they were aware that accessibility would be increased by the extension of hours of operation but they were unable to afford to do so.

#### **Servicing those most in need**

Are those most in need of a child abuse prevention service able to access and receive the services they need? Service providers were asked whether they believed their service was attracting and assisting those most in need of a child abuse prevention serv-

***For those most in need of a prevention service, concerns were expressed about the fact that these families were not being assisted because services were overwhelmed with tertiary clients requiring intervention.***



other families, then this is a very effective form of engagement. Other, less frequently used forms of advertising included the use of brochures, local media, newsletters, and informing other services and possible referral agencies in the area.

#### **Provisions to facilitate use**

Agencies can encourage the use of services through measures such as limiting costs and providing transport, child care and flexible hours of operation. In the *Accessibility Study*, respondents reported that almost all of their services were provided to clients free of charge.

According to respondents, access to transport affected access to services in 85 per cent (11) of parent education groups because of a general lack of public transport or service-owned transport available to clients. With regard to home visiting, 37 per cent (7) of the home visiting staff also commented on the matter of transport and the large distances entailed for workers carrying out their visits. They

ice. Two-thirds (22) believed that they supported those families most in need. However, when asked to explain, several (5) qualified their answers. For example:

*“The service does include quite a few families who are in serious need, but we also service some families who don’t fit into this category.”*

In 31 per cent (10) of responses, providers stated that they believed they did not assist those most in need of a child abuse prevention service. Typical responses included:

*“Sometimes those most in need of a child abuse prevention service lack the confidence to attend and often these families are hidden in the community and we don’t know they exist.”*

It is likely that those families and children most at risk are also likely to be the most difficult families to engage (Sanders and Cann 2002). With this in mind, providers were asked about the sorts of initiatives they used to assist potential participants to engage

with the service. They mentioned an array of methods for attempting to increase engagement, including: encouraging client input into service delivery, verbal encouragement, telephone calls and active outreach, the provision of child care and transport, and arranging social events and activities.

One of the causes of the heavy demand experienced by many services is that they were overwhelmed with tertiary clients (families where children had already been abused), being referred from statutory child protection authorities. Several comments were made by providers about how resources were being absorbed by tertiary clients, leaving little time left to be spent on secondary prevention:

*"Lack of funding negatively impacts us as we can only afford 30 hours a week of workers and we don't get any time to do prevention. In reality, everyone works extra hours."*

Another matter to arise was that the performance of some services is measured by client turnover, so statistically a service looks better if it takes on the easier clients with less complex and time consuming needs which can be resolved in a limited period of time:

*"We are finding that it is a number crunching game at present. Outcomes are measured in terms of number of people seen. Therefore we are seeing people who are easier to get and not those most in need of a child abuse prevention service."*

### **Success in the prevention of child abuse and neglect**

It is interesting that, when asked to give the aims of their service, only one provider mentioned the prevention of child abuse and neglect. Further, when asked to outline desired major and minor outcomes of the service, more than half (53 per cent) of providers made no mention of children's welfare; in the majority of cases, service aims revolved around parents or family support and education.

Clearly, many services see the parent/s as the central client in their service rather than the children, presuming that providing services to parents would automatically result in the prevention of, or reduction in, maltreatment of children, a view which has traditionally been held by providers in this sector (Thompson 1994).

The assumed link between parental support and child abuse prevention is illustrated by responses to the question: "To what degree does your service prevent child abuse and neglect?" Many providers felt that their service was making some contribution towards child abuse prevention. The majority (53 per cent) (17) believed that they prevented child abuse "completely" or "mostly". Interestingly, 16 per cent (5) of respondents answered that they did not know whether their service was effectively preventing child abuse and neglect.

It is difficult for either observers or service providers themselves to be clear as to whether the services are effective in preventing child abuse and neglect. Information about the impact of services is unavailable because services are seldom formally evaluated. However, there is evidence that service providers are increasingly recognising the importance of gathering information about the effectiveness of their services (Tomison and Poole 2000).

All agencies but one collected some information about their service operation. By documenting practice knowledge, services can develop a rich source of information which may be a useful resource if shared.

### **Conclusion**

The exploratory *Accessibility Study*, undertaken by the National Child Protection Clearinghouse, is one of the first Australian studies to look into the issues surrounding access to child abuse prevention services. Although the sample was small and not randomly obtained, and therefore the findings not generalisable, some interesting insights were gained. By surveying and interviewing service providers running group-based parent education or home visiting services, some key issues were identified that offer some direction for further research in this area.

The study's key findings indicated that there was generally a greater need for child abuse prevention services than there were services available. The availability of existing services was known in the community, but possibly not by those most in need of the service. The most important provisions to facilitate use of the services were seen to be child care, transport, and flexible hours of operation.

With regard to those most in need of a prevention service, concerns were expressed about the fact that these families were not being assisted because services were overwhelmed with tertiary clients requiring intervention. It was difficult to gauge service outcomes as few evaluations were being conducted. However, while the prevention of child abuse was not seen by the majority of services as one of their major aims, providers thought that their services were making some contribution in the child abuse prevention area.

Future studies should increase the sample size so that it can be ascertained whether these findings are generalisable to similar child abuse prevention services across Australia. It would also be beneficial to include the perspectives of *families attending the services*, and some independent data about the community characteristics. There is also a critical need for long-term follow-up studies, to assess the impacts of services on the welfare of children over time.

### **References**

- AIHW (2002), *Child Protection Australia 2000–2001*, Australian Institute of Health and Welfare, Canberra.
- Sanders, M. & Cann, W. (2002), "Promoting positive parenting as an abuse prevention strategy", in K. Browne, H. Hanks, P. Stratton & C. Hamilton (eds) *Early Prediction and Prevention of Child Abuse: A Handbook*, Wiley, Chichester.
- Thompson, R. (1994), "Social support and the prevention of child maltreatment", in G.B. Melton & F.D. Barry (eds) *Protecting Children from Abuse and Neglect: Foundations for a New National Strategy*, The Guilford Press, New York.
- Tomison, A. & Poole, L. (2000), *Preventing Child Abuse and Neglect: Findings from an Australian Audit of Prevention Programs*, National Child Protection Clearinghouse, Australian Institute of Family Studies, Melbourne.

**Katie Kovacs** is the Project Officer with the National Child Protection Clearinghouse at the Australian Institute of Family Studies. Based on a report by Janet Stanley and Katie Kovacs entitled "An exploration of issues of accessibility and child abuse prevention programs" (in press 2003), this article is a condensed and edited version of a paper presented at the Eighth Australian Institute of Family Studies Conference, held in Melbourne on 12–14 February 2003.