

Cumulative Harm

The effects of chronic child maltreatment



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Dr Leah Bromfield, Manager
National Child Protection Clearinghouse

Acknowledgments

- Tina Schulz
Senior Practitioner, Queensland Child Safety Services
- Philip Gillingham
Lecturer, School of Social Work, Deakin University
- Robyn Miller
Principal Child Protection Practitioner, Department of Human Services, Victoria
- Daryl Higgins
General Manager (Research), Australian Institute of Family Studies and PhD Supervisor



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Overview

- Definitions
 - ◆ What is cumulative harm
- The extent of the problem
 - ◆ Research showing patterns of entry into CP services
- How does cumulative harm impact children?
 - ◆ A case study and analysis of systemic issues
- Implications for practice
 - ◆ Tips for practitioners in identifying and responding to cumulative harm



The child protection context

- Research largely treats CM as a single event
 - ◆ Aetiology - will 'it' occur
 - ◆ Consequences - impact of the event
- In practice, history used to establish pattern of behaviour to predict future risk - not cumulative impact
- In legislation, incident/event focus:
 - ◆ Substantiate if an adult act of omission or commission has resulted in significant harm or risk of significant harm to the child and statutory intervention is required to prevent further harm



What is cumulative harm?

- Cumulative harm may be caused by an accumulation of a single adverse circumstance or event, or by multiple different circumstances and events
- The unremitting daily impact of these experiences on the child can be profound and exponential, and diminish a child's sense of safety, stability and wellbeing



Patterns of entry into child protection

- Case files were reviewed for the 8-year period 1994 - 2002 for:
 - ◆ 100 families
 - ◆ with a child aged between 0 and 4 years
 - ◆ subject of a notification to child protection for the first time
 - ◆ between July 1 and December 31 1994
- Reviewed every case note for every notification from point of first contact to case closure



Definitions

- Isolated maltreatment: single incident or inter-related events in a single time period
- Chronic maltreatment: recurrent incidents of maltreatment over a prolonged period of time



Patterns of entry into child protection

- Most children experienced chronic maltreatment
 - ◆ 374 notifications and 82 substantiations recorded
 - ◆ Min = 1; max = 22 notifications/family
 - ◆ Min = 0; max = 6 substantiations/family
 - ◆ 65/100 families had > 1 recorded notification
 - ◆ 24/100 families had > 1 recorded substantiation
 - ◆ The average duration of family involvement with child protection was 3.3 years
 - ◆ Families averaged three to four notifications with approximately 10-months between each notification



Case Study

- This case study illustrates a pattern of chronic maltreatment and the cumulative effects if maltreatment persists
- Over 8-yrs: 22 not. & 4 sub.
- Underlying issue in majority of notifications
 - ◆ poor parenting capacity
 - ◆ psychological maltreatment by mother



Case Study

- Notifications fell into 5 groups of 2-3 notifications per group
- The notifications within each group were all essentially regarding the same set of concerns:
 - ◆ Physical abuse
 - ◆ Emotional abuse (esp. verbal abuse and rejection)
 - ◆ Exposure to family violence
 - ◆ Neglect
 - ◆ Also allegedly exposed to sex offender



Notification One

05-Oct-1994 to 06-Oct-1994

- Grandparent saw mother kick walker with 8mth old son, Jarrod sitting in it. Pulled Jarrod up off couch by one arm. Mother no diagnosed mental illness, but severe mood swings and previous psychiatric care. Mother receiving support from MCHN and FS
- Outcome: Insufficient info to warrant involvement, especially given involvement of local support agency.



Cumulative harm analysis

- No previous for this or any other child in mother's care. Does not reach threshold for involvement



Notification Three

04-May-1995 to 05-May-1995

- Aunt alleging loud verbal arguments in front of 15mth old Jarrod, Father punches walls, Mother verbally abusive of Jarrod and is becoming increasingly aggressive towards him. Mother giving Jarrod stronger doses of prescribed medication to get him to sleep. Family Support Worker only sees parents in office.
- Outcome: Notification raising similar issues also received from Grandparents.



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Bromfield, Gillingham & Higgins (2007)

Cumulative harm analysis

- No previous for this or any other child in mother's care. Does not reach threshold for involvement
- 3rd notification for same issues. 2 different notifiers. Increasing verbal and physical aggression towards child.



Notification Eleven

15-Oct-1997 to 15-Oct-1997

- Notification from worker at Family Welfare Agency. Mother came into service requesting a washing machine. While at the agency Mother continually yelled at Jarrod for misbehaviour. In workers opinion child was not behaving inappropriately. Worker told Mother that yelling at child was not acceptable. Mother verbally abusive towards worker and left.
- Outcome: Assessed no protective concerns



Cumulative harm analysis

- No previous for this or any other child in mother's care. Does not reach threshold for involvement
- 3rd notification for same issues. 2 different notifiers. Increasing verbal and physical aggression towards child.
- 11th not. for same issues from 7 different sources. 2 prior substantiations. Professional notifier. Behaviour observed in public – parental behaviour in private?
- One month later: GP stated Jarrod was severely traumatised following overnight access with mother and further contact with mother should not be permitted



Systemic barriers to recognising cumulative harm

- Each involvement treated as a discrete event
 - ◆ Information not accumulated from one report to the next
 - ◆ Information lost over time
 - ◆ Assumption that problems presented in previous involvements were resolved at case closure
 - ◆ Files were not scrutinised for pattern of cumulative harm
- Departmental language used to describe events - reduces context and meaning



A language of different meaning

- Departmental language used to describe events
- Technical language not understood by outsiders
- In process of reframing children's and families experiences into departmental language lose the child and families subjective experience
- Case study by Tina Schulz reframing departmental language into "plain English"



Original Case Plan

- Summary of Child Protection Concerns
 - ◆ Ongoing concerns of alcohol & drug misuse
 - ◆ Risk of emotional harm
 - ◆ Risk of physical harm
 - ◆ Limited parenting skills – behaviour management
 - ◆ Limited participation in support services



Re-worked Case Plan

- Summary of current child protection concerns
 - ◆ Paris has not experienced consistent routines; day-to-day life in Mum's home is chaotic with many people in and out. Often these people are drunk or stoned, which exposes Paris to other risks.
 - ◆ The changes that Mum has attempted to make have not been enough for Paris to return safely home. Stressors in Mum's life reduce her ability to make protective choices for Paris.



Original Case Plan

- Rationale for goal
 - ◆ Child Protection concerns have been ongoing for a significant amount of time. Susan has been involved in ongoing intervention with the Department for over 18 months. There has been no significant change in this period of time and minimal participation in support services to address the child protection concerns. It is assessed that the child remains at risk of emotional and physical harm should she be returned to the care of her mother at this point in time.



Re-worked Case Plan

- Rationale for goal.
 - ◆ Paris has been in foster care for 18 months. While Susan has been motivated to start a number of programs, for example, rehab, she has not been able to finish the programs nor maintain any of the improvements.
 - ◆ It seems as though each time Susan reconnects with the people who stay at Serendipity House she relapses. This may be because they share similar problems with drugs and alcohol.



Make your assessment in 'plain English'

- Case study by Schulz (2009) shows that - when written in Plain English - the impact of events on the child's daily life can be better seen and understood
- This is of benefit to:
 - ◆ parents
 - ◆ other service providers
 - ◆ the courts
 - ◆ other child safety officers reading the file



Implications for practice

- Unlikely to receive a report explicitly due to cumulative harm
- The **majority** of children who experience maltreatment experience:
 - ◆ multiple incidents; and
 - ◆ multiple types
- Need to be alert to possibility of cumulative harm in all reports



Indicators of cumulative harm in the case history

- Be alert if their are:
 - ◆ Multiple reports
 - ◆ Previous substantiations
 - ◆ Multiple sources alleging similar problems
 - ◆ Reports from professionals
 - ◆ Evidence of children not meeting developmental milestones
 - ◆ Allegations of inappropriate parenting in public



Parental and family indicators of cumulative harm

- Families who experience cumulative harm have:
 - ◆ Multiple inter-linked problems (i.e. risk factors) such as DV, A&D, and MH
 - ◆ An absence of protective factors
 - ◆ Social isolation/exclusion
 - ◆ Enduring parental problems impacting their capacity to provide adequate care (e.g. ID, A&D)



Identifying cumulative harm

- **Frequency** - Have there been previous allegations for similar issues?
- **Type** - Signs that child has experienced other types of CA/N in addition to those reported?
- **Severity** - Has caused or likely to cause significant harm if repeated over a prolonged period?
- **Source of harm** - Does current situation make child more vulnerable to other perpetrators?
- **Duration** - How long have problems that lead to current involvement been present?



Impact of cumulative harm on children

- Main theories to help understand cumulative harm are
 - ◆ Child development (incl. early brain development),
 - ◆ Trauma (incl. complex trauma), and
 - ◆ Attachment
- Researchers use term 'toxic stress' to describe prolonged serious stress
- Stress is normal and releases chemicals in brain to help us respond
- Prolonged stress can damage the developing brain
- Children experiencing chronic maltreatment are in 'toxic' environments



Making your assessment

- Short and long term effects matter
- What has been the impact on the child to date?
 - ◆ Is the child meeting developmental milestones?
 - ◆ Are there any signs of trauma?
 - ◆ What is the quality of parent-child relationship?
- What are the likely outcomes for the child should their circumstance remain unchanged?
- Refer to the *Child Development and Trauma Guide* to aid your assessment



Who is best placed to provide services?

- Practitioners need to make every effort to engage the families cooperatively to address issues of cumulative harm
- Coercive forms of intervention will sometimes be necessary, but this is a last resort
 - ◆ What interventions might assist the child and family, in the short and long-term?
 - ◆ Voluntary or coercive?
 - ◆ Include parents in planning and assist families in solution-focused thinking



When parents can't or won't change

- Hard to witness parents' struggle to change
- Desire to change does not equal change
- Effects matter whether there is intent or not
- If parent can't change, won't change, or it will take too long to change - need to prioritise child needs
- Need to review circumstances and the effectiveness of our interventions
 - ◆ Have circumstances changed **for the child?**



Preparing matters for court

- Not enough to say a child has experienced cumulative harm
 - ◆ Need to present evidence to the court that shows the effects of cumulative harm on children
- Court will also want to know the
 - ◆ Previous assistance that has been provided to the family
 - ◆ Outcomes of previous interventions



Assisting recovery in children

- Cumulative harm can overwhelm even the most resilient child and particular attention needs to be given to understanding the complexity of the child's experience
 - ◆ Remember to consider what interventions or services might assist the child towards recovery



Final thoughts

- Inadequate to make assessments on the basis of individual reports - particularly in cases of neglect and emotional abuse
- Use pattern and history to establish harm to children
- Broaden thinking from immediate to long-term harm to children



National Child Protection Clearinghouse

Australian Institute of Family Studies

Level 20, 485 La Trobe Street Melbourne

03 9214 7862

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