

Child protection: a national overview

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of Family Studies**
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Based on:

- Bromfield, L. and Higgins, D. (2005), “National comparison of child protection systems”, *Child Abuse Prevention Issues*, 22, National Child Protection Clearinghouse at the Australian Institute of Family Studies
- Available at:
www.aifs.gov.au/nch/issues/issues22.html



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Child Protection Systems

- 8 different systems
- Last 6-state comparison: 1986 (Boss)
- Scope:
 - Who is responsible?
 - Who is mandated to notify concerns?
 - What concerns must be notified?
 - On what grounds can statutory authorities intervene?
 - How do child protection services respond?



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Who is responsible?

- Specialist department (QLD)
- Community Services/Development, Human Services, or Family Services department
- Notification - report or allegation of harm or risk of harm
- Substantiation - a notification that is found on investigation to have substance



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ACT Mandatory Reporting

Who is mandated to notify	What is to be notified
Doctors, dentists, nurses, teachers, police, school counselors, child-care providers, public servants providing services relating to the health or well being of children, young people or families, the community advocate, or the official visitor	A reasonable suspicion that a child or young person has suffered or is suffering <i>sexual</i> abuse or non-accidental <i>physical</i> injury



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NSW Mandatory Reporting

Who is mandated to notify	What is to be notified
Persons who deliver health care, welfare, education, children's services, residential services or law enforcement to children	Current concerns that a child <i>aged under 16</i> is at risk of <i>harm</i>



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NT Mandatory Reporting

Who is mandated to notify	What is to be notified
Police; all other people with reasonable grounds	Reasonable grounds to believe that a child has suffered or is suffering <i>maltreatment</i>



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QLD Mandatory Reporting

Who is mandated to notify	What is to be notified
<p>a) Doctors; nurses</p> <p>b) Officers employed to implement the Act 1999; all staff of residential care services</p> <p>c) Educational staff (teaching & non-teaching staff in government and non-government schools)</p>	<p>a) aware of or reasonably suspects a child has, is, or is likely to suffer <i>harm</i>; b) reasonable suspicion of <i>abuse or neglect to a child in residential care</i>; c) aware of or reasonably suspects sexual abuse of a child under 18 by an employee of the school</p>



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SA Mandatory Reporting

Who is mandated to notify

Doctors, pharmacists, nurses, dentists, psychologists, police, community corrections officers, social workers, teachers, family day care providers, employees/volunteers in a Government department, agency or instrumentality, or a local government or non-government agency that provides health, welfare, education, child care or residential services wholly or partly for children

What is to be notified

Reasonable grounds that a child has been or is being *abused or neglected*



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TAS Mandatory Reporting

Who is mandated to notify	What is to be notified
<p>Professionals working with children and employees or volunteers working in government or government-funded organisations;</p> <p>Any adult</p>	<p>Suspicion or knowledge of abuse or neglect and domestic violence</p> <p>Reasonable grounds to believe or suspect that a child is suffering, has suffered or is likely to suffer abuse or neglect</p>



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VIC Mandatory Reporting

Who is mandated to notify	What is to be notified
Police, doctors, nurses and teachers	Reasonable grounds that physical or sexual abuse is occurring



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WA Mandatory Reporting

Who is mandated to notify	What is to be notified
Court personnel, counsellors and mediators	Allegations or suspicions of child abuse in Family Court cases
Licensed providers of child care or outside school hours care services	Allegations or suspicions of child abuse in a childcare service



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Mandatory Reporting...

- Is the identity of the notifier protected?
- About whom can notifications be made?
- What type of concerns must be reported?
- To what must child protection services respond?



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Grounds for intervention

- All states/territories restrict the grounds for intervention to situations in which there is a **future risk** of the event.
- Some jurisdictions restrict intervention to situations where specified actions have occurred, regardless of their impact (**Action only**);
- Some jurisdictions restrict intervention to cases where the child has experienced harm regardless of the cause (**Consequences only**);
- Some jurisdictions restrict intervention to cases where the child has experienced harm as a consequence of specified actions (**Actions and consequences**)



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Differences between definitions

- Mandatory reporting requirements
- Legislative grounds for intervention
- Research definitions



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Process of child protection

- Intake
 - Risk assessment
- Investigation
- Case management



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National Comparison

Mandatory reporting and grounds for intervention - considerable variability (resulting in data anomalies)

Intake - subject to greatest variability

Intervention - variability determined by differences in grounds for intervention and different intake models

Case management - the area of greatest similarity



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Implications

- Australia does not have national data on child abuse and neglect
- Considerable jurisdictional differences in what child protection activity data mean
- Difficult to compare trends in notifications and substantiations between jurisdictions
- Current data systems are dependent on legislative frameworks



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Conclusions

- What is similar is how services are managed/delivered to statutory child protection service clients in each state/territory
- What differs is the types of situations that get a family into the statutory child protection service system



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Current Issues ...1

- Increasing demand (system needs to be sustainable, rather than growing)
- Growing gap between notifications and substantiations
- Use of diversionary approaches (e.g., separate out family support from child protection cases)
- Increasing use of 'outsourcing' to NGO sector



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Current Issues ...2

- Need for cross-jurisdictional cooperation and comparability (e.g., data definitions/collection protocols, training, definitions, service standards, research, etc.)
- Need for states and territories to retain autonomy and develop unique approaches, balanced with the need to share best-practice ideas, resources, etc.
- Over-representation of Indigenous children and young people, and those from CALD communities



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Current Issues ...3

- Understanding, and working to make explicit the underlying philosophies behind frameworks and practices (e.g., international comparisons highlighting child-protection cf. family support-focused systems; state-regulation framework)
- Requirement by and of governments to demonstrate cost-efficiencies
- Need to develop measures of effectiveness (and share these between jurisdictions)



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Current Issues ...4

- Focus not just on differences, but on what is common between jurisdictions (e.g., processes and stages in service delivery, and in approaches to prevention and early intervention)
- No national data on incidence/prevention in Australia - hampering the ability to target effective prevention and early intervention strategies



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Possible new directions

- A National Child Protection Agenda?
 - Any agenda will be driven by states/territories
 - Community Services Ministers' Advisory Council (CSMAC) National Approach for Child Protection Working Group
 - Organic alliances facilitated by institutions/centres such as: NCPC; ARACY; Australian Centre for Child Protection; CAFWAA; Centre for Vulnerable Children & Families; ACU's Institute of Child Protection Studies



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