

Protecting Australia's Children: Understanding child neglect and potential actions for prevention and early intervention

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 Bridge the gap between what we know and what we do to transform the lives of children who have experienced, or who are at risk of experiencing, abuse and neglect.



The challenge

Maltreatment is one of the biggest paediatric public-health challenges, yet any research activity is dwarfed by work on more established childhood ills.

The Lancet Editorial 2003, p. 443

"The neglect of neglect" – a multidisciplinary problem

- Wolock & Horowitz (1984) "Child maltreatment as a social problem: The neglect of neglect" in American Journal of Orthopsychiatry
- Dubowitz (1994) "Neglecting the neglect of neglect" in the Journal of Interpersonal Violence
- Hobbs & Wynne (2002) "Neglect of neglect" in Current Paediatrics
- Dubowitz (2007) "Understanding and addressing the 'neglect of neglect': Why are we making a molehill out of a mountain" in Child Abuse and Neglect
- Stoltenborgh et al (2013) "The neglect of child neglect: A meta-analytic review of the prevalence of neglect" in Social Psychiatry and Psychiatric Epidemiology

- 2006 Australian forum on advancing and joining up research, policy and practice around neglect
- As relevant today as it was in 2006 – not much movement, except as a larger issue



Opportunities that exist

- National Framework for Protecting Australia's Children third action plan
- Child and Family Activity Communities for Children
- Intensive Family Support Services work in the NT/Central Australia
- Child Aware Local Initiative
- International experts who are engaged in the Australian context (e.g., Brigid Daniel and keynote at FRSA conference, AIC)
- Reforms that are happening across CP, health education systems in each jurisdiction
 - Earlier intervention and diversion from CP systems
 - Family support
 - Place-based planning
 - Family decision making

What is neglect?

- Definition
- An example

So why is neglect neglected?

- Confounding with other forms of abuse "child abuse and neglect" – is it time to de-couple these concepts?
- The concept of neglect is not well understood and is not a shared concept – evolving social construct
- The breadth of the concept supervisory, physical, emotional, educational, medical
- Families seen as "other" and notions of choice and parental responsibility
- Consequences not deemed as bad for this type of maltreatment, despite strong evidence of harms – immediate and long term (child death, neuropsychological, emotional, physical)

Why do we need to take action on child neglect?

Neglected children are not responded to by the community

In an Australian sample of more than 20,000 adults, neglect was the form of maltreatment (as compared with physical abuse and sexual abuse) that was least likely to garner any other response by the general public than a child protection notification - i.e. people would make a notification and not do much else (and approx. 40% would make a notification)

And they may be left unseen by systems

- Families in which neglect is more likely may be effectively "screened out" of preventive and early intervention services (e.g., nurse home visiting programs)
- They are also screened out of child protection intervention
- Less likely to be rated as a high response priority when dealt with on an incident by incident basis
- When they are "screened in" screened in as lower risk, less intensive service provision, fewer contact hours – than for physical abuse and sexual abuse

Dealing with wicked problems

- What is the nature and extent of the problem?
- What are the causes and consequences of the problem?
- What can be done to prevent or treat the problem?
- What can be done to implement and embed these programs/treatments in service systems?

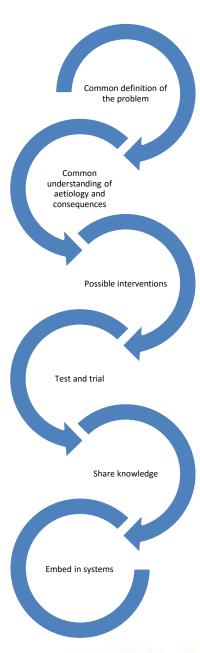


Our approach

Research and evaluation

Policy solutions

Practice solutions



Nature and scope of the problem

- Some good definitional work has been undertaken through the DSS funded Intensive Family Support Services (IFSS)
- We do not know the prevalence of child neglect (or the various types of neglect)
- Estimates based on international studies suggest between 163/1000 children for physical neglect and 184/1000 children for emotional neglect
- Need for prevalence and longitudinal data to understand vulnerability and outcomes in Australian context

A small number of children are subjected to repeated risk and harm

- In a South Australian cohort of children born in 2001, 8% of the cohort were the subject of 70% of notifications made before the age of 12.
- Neglect notifications make up a substantial body of the concerns about these children
- Targeting these families through early and sustained intervention holds real promise

And there is also a much larger response that is needed

- There is also a much larger group of children about whom there are concerns about their safety and wellbeing (for example, 60% of Indigenous children in SA are the subject of a child protection notification by the time they are 4 years old) – who would benefit from strengthening community and universal service responses
- Concerns range along a broad continuum
- The role of universal services and community action

- Not a case of "either, or", but a case of "both, and"
- Integrated service system responses...

What can be done to prevent or treat the problem?

- Focus on young families young children, young parents
- Promising approaches to engaging women in pregnancy to prevent neglect, but evidence base needs to be built
 - Examples from SUPPS, Healthy Families New York
- Opportunities for a multi-site, multiintervention trial?

Building social capital

- Social isolation, disengagement, poor family relationships, children not seen within family systems
- Promise of interventions in which families themselves (own family, extended family, other families) are the agents of change
 - Examples from PuP, Indigenous Family Group Conferencing, Family by Family
- Building evidence, skills and services

Building bridges between services

- Multi-problem families
- Adult problems, children's services
- Extension of initiatives with this as a specific focus
 - Children of Parents with a Mental Illness, Building Bridges, Building Capacity

Need for a focus on certain population groups

- Clear emphasis for communities on prevention and early intervention
- 1:2 Aboriginal to non-Aboriginal children in Australia;
 4:1 in the NT need for understanding of causes and impacts
 - Frustration at focus on tertiary responses Amata
- Example from the study of refugee families in South Australia
 - Types of harm categorised in similar way
 - Causes of harm different (cultural understandings, housing, community links)
 - Different focus for intervention

Summary

- Understand prevalence, type, causes and consequences in Australian context
 - Specific population groups
- Need for robust evidence about effective approaches
 - Family based interventions
 - Community based interventions
- Dissemination, training and implementation
 - Child Aware Approaches
 - AIFS panel
 - CFCA Clearinghouse



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