# Child Protection in South Australia

In August 2014, the South Australian (SA) Government established a Child Protection Systems Royal Commission led by The Hon Margaret Nyland AM. The report of the Commission, *The life they deserve*, was released in August 2016 and extensive reforms have been recommended to improve the child protection system in South Australia.<sup>1</sup>

Over this same period, de-identified government child protection data was made available to be linked as a part of the SA Early Childhood Data Project (SA ECDP) led by Professor John Lynch. The SA ECDP contains information collected by government on about 300,000 South Australian children born from 1999 onwards. The 'joining-up' of child protection data with perinatal, hospital, child and family health, education and development data has never been done in SA.

It enables a whole-of-government view of how children in contact with the child protection system move through other parts of government systems, and is a platform from which evaluation of child protection programs and policies could regularly be undertaken.

This was recognised by the Royal Commission, that noted that the SA ECDP has the potential to be used as a powerful tool by the then proposed Early Intervention Research Directorate (EIRD; Recommendation #50) to help evaluate programs and policies, and inform funding decisions. The EIRD has since been established and this report is produced to support the broader research agenda of the EIRD.

The following report uses the SA ECDP to describe the experience and characteristics of children in SA who are in contact with the child protection system. Data are presented for children born from 1999 to 2013, with corresponding child protection, health and other data up until 2015.

Exposure to the child protection system is defined as: no contact with child protection; a notification not screened-in; a screened-in notification; an investigation; a substantiation; and out-of-homecare. This corresponds with increasing intensity of involvement of the child protection system and allows defining maltreatment in different ways, as substantiations are likely to be an underestimate of the true prevalence of maltreatment.

The results demonstrate the extent to which children in SA come into contact with the child protection system, how this has changed over time, and who makes reports of children suspected to have been harmed or at risk of child maltreatment. Family and child characteristics associated with child protection system contact are also explored, as well as developmental and academic achievement outcomes.

Please note that the term 'Aboriginal' when used to refer to children in this report, includes both Aboriginal and/or Torres Strait Islander children.

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Key messages	For details see
1: By age 10, 1 in 4 children born each year are expected to be the subject of at least one notification to the child protection system.	Pg 4
2: Of these 4,700 children in every birth cohort expected to come in to contact with the child protection system, 80% do not receive any mainstream child protection response. This presents an important prevention opportunity to support these potentially vulnerable children.	Pg 4
3: There has been a year-on-year increase in the number of notifications for children in South Australia. For children born in 1999, by age 3, 9% had been notified to child protection. For children born in 2011, this increased to 15% of children notified by age 3.	Pg 5
4: Of children who do come into contact with the child protection system, almost half of those contacts occur by age 3.	Pg 5
5: Health workers, the SA Police and schools are the three most common sources for reports to the child protection system.	Pg 6
6: Neglect is the most common primary type of alleged maltreatment, followed by emotional, physical and sexual abuse.	Pg 6
7: The pattern of child protection contacts in South Australia appears similar to other Australian states - with a notification level of about 25% and an out-of-home care level of about 2%.	Pg 7
8: The escalating levels of involvement with the child protection system are associated with an increasing prevalence of characteristics that may be related to the experience of multiple forms of social and economic disadvantage.	Pg 8
9: As the level of contact with the child protection system increases, so does the prevalence of develop-mental vulnerability on one or more domains at age 5. Children who have experienced out-of-home-care are almost 3 times more likely to be vulnerable than children with no child protection contacts.	Pg 9
10: As the level of contact with the child protection system increases, so does the prevalence of performing at or below the national minimum standard on NAPLAN at age 8. Children who have experienced out-of-home-care are 3 times more likely to be performing poorly on Year 3 NAPLAN than children with no child protection contacts.	Pg 9

#### **Data Source**

## The South Australian Early Childhood Data Project



The SA ECDP is a platform for a number of research and academic partnerships and this has included work with South Australian organisations such as the Department of the Premier and Cabinet, Child and Family Health Service, Department of Health and Ageing, Department for Education and Child Development, Department for Child Protection, Women's and Children's Health Network. Department for State Development, The Council for the Care of Children, Wardliparingga Aboriginal Research Unit, and the Aboriginal Health Council. The linked datasets have been compiled through a collaboration with SA-NT DataLink, as well as the data custodians and data managers from all our government partners at both the State and Federal level.

The value of the SA ECDP is that it is a resource that can inform research, service provision, intervention evaluations, and policy around

child health, development and human capability formation from the perinatal period into adolescence.

Together with our research partners, we work to build and use a public-good data resource that supports the best start in life for all South Australian children and enhances their health and development throughout their lifecourse. For more information, please see the *South Australian Early Childhood Development Project Research Report* (October 2016; <a href="http://health.adelaide.edu.au/betterstart/publications/reports/">http://health.adelaide.edu.au/betterstart/publications/reports/</a>).

#### South Australian definition of child protection-related terms

Notification - A report to the Child Protection Agency concerning suspected child abuse or neglect.

**Screened in -** A term used to indicate whether the situation described by the caller (notifier) is of sufficient concern to warrant intervention by the Child Protection Agency. Those that meet the threshold are screened in; those that do not are screened out.

**Investigation** - A determination of whether an incident of child abuse or neglect has occurred, and the circumstances of its occurrence.

Substantiation - A professional judgement as to whether abuse or neglect has occurred.

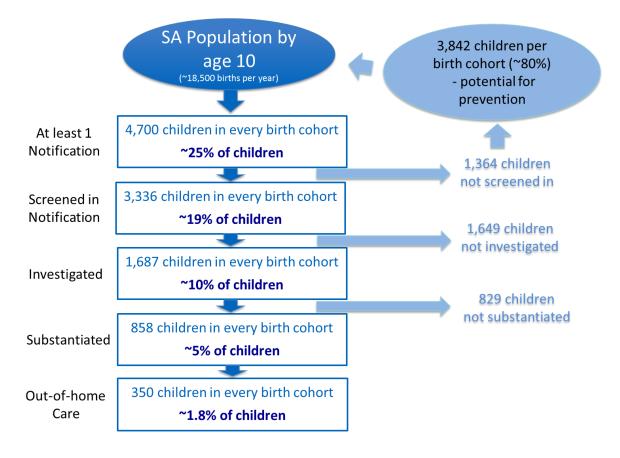
**Out-of-home care** - System of caring for a child who is removed from their family of origin; includes (but is not limited to) home-based care, emergency care and residential care.

Glossary, Child Protection Systems Royal Commission Report 2016 1

### Child protection in South Australia

Key Message 1: By age 10, 1 in 4 children born each year are expected to be the subject of at least one notification to the child protection system.

This figure shows data for children born from 1999 to 2005, who are followed up until they are aged 10 years.



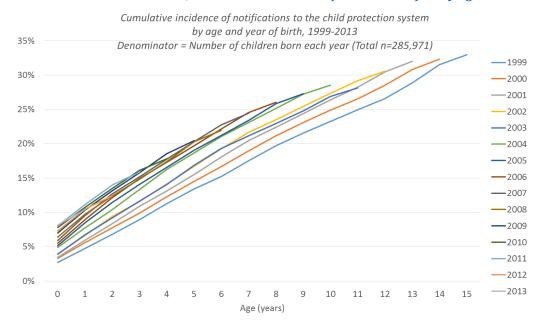
The figure demonstrates that on average, for every birth cohort in SA (about 18,500 births each year), by the time those children turn 10:

- ~25% of children will experience at least one notification to child protection;
- ~19% of children will experience one or more screened-in notifications;
- ~10% of children will experience one or more investigation;
- ~5% of children will be subject to one or more substantiation; and
- $\sim$ **1.8% of children** will have experienced out-of-home care at least once.

Key Message 2: Of these 4,700 children in every birth cohort expected to come in to contact with the child protection system, 80% do not receive any mainstream child protection response. This presents an important prevention opportunity to support these potentially vulnerable children.

### **Increasing notifications**

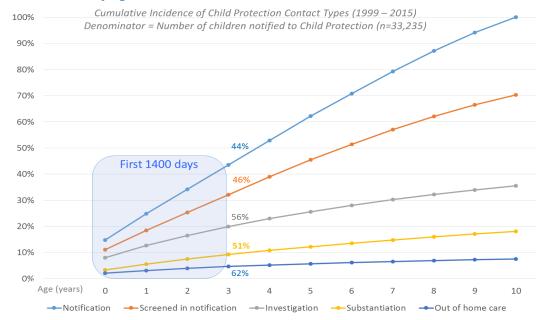
Key Message 3: There has been a year-on-year increase in the number of notifications for children in South Australia. For example, for children born in 1999, by age 3, 9% had been notified to child protection. For children born in 2011, this increased to 15% of children notified by age 3.



The graph above shows the cumulative incidence of notifications by age and year of birth, for children born from 1999 to 2013. Each line represents those children born in a particular year, ranging from the oldest children born in 1999 to the youngest children born in 2013. The lines show a similar trend of increasing notifications for each birth cohort. Every year, notifications increase by approximately 2%, reaching 33% for the oldest children (aged 15 in 2014) in the ECDP dataset.

## The first 3 years of life

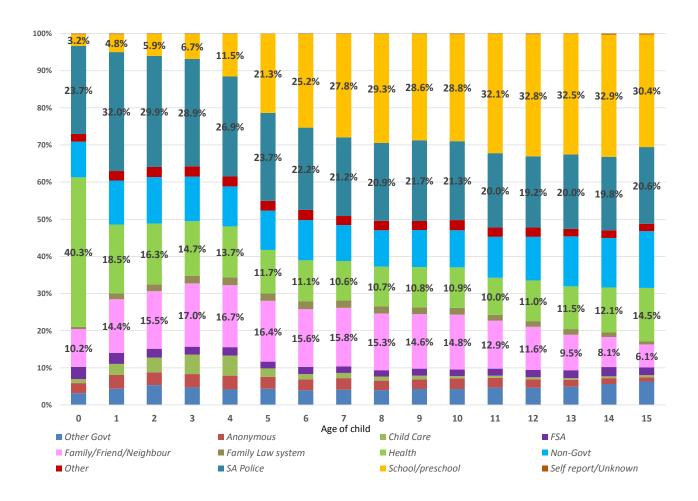
Key Message 4: Of children who do come into contact with the child protection system, almost half of those contacts occur by age 3.



## Who is reporting?

Key Message 5: Health workers, the SA Police and schools are the three most common sources for reports to the child protection system.

This graph shows the pattern of reporters to the child protection system by the age of the child, with health being responsible for 40% of reports for children aged under 1 year.



## Type of maltreatment

Key Message 6: Neglect is the most common primary type of alleged maltreatment, followed by emotional, physical and sexual abuse.

Of the ~18,500 children born each year in South Australia from 1999 to 2005 who experienced a substantiation by 10 years of age, **neglect (49%)** was the primary reason for notification to the child protection system, followed by **emotional abuse (29%)**, **physical abuse (14%)** and **sexual abuse (9%)**.

According to the Australian Institute of Health and Welfare report Child protection Australia 2014-2015, South Australia had the third highest rate of neglect behind Queensland and the Northern Territory.<sup>2</sup>

## What is happening in the rest of Australia?

Key Message 7: The pattern of child protection contacts in South Australia appears similar to other Australian states - with a notification level of about 25% and an out-of-home care level of about 2%.

Availability of information regarding child protection concerns varies between States and can be difficult to determine from published reports such as those from The Australian Institute of Health and Welfare. This is due to different definitions and reporting practices across jurisdictions.

The numbers below include findings from the few reports which estimate the expected or actual prevalence of child protection system contact in different jurisdictions. Irrespective of the differences between child protection and social services systems, various publically available reports have shown approximately 1 in 4 children will experience a notification to child protection, while 1 in 50 or 2%, will have some experience of out-of-home care (OOHC).

In New South Wales (NSW), the prevalence of notifications is 27% for all children (2010), with Queensland providing evidence that Aboriginal children have a considerably higher prevalence of notification at 63% (2013). Evidence from Western Australia (WA) for children by the age of 10 and from NSW for children by the age of 17 years, shows that 00HC was experienced by approximately 2% of all children, with WA providing evidence that this level of child protection is experienced by 8% of Aboriginal children, compared to 1% of non-Aboriginal children (2016). It is widely recognised that Aboriginal children are over-represented in the child protection system.<sup>3</sup> Previous work in SA using 2008 administrative government data showed similar findings. Relevant figures were not available from the Northern Territory, ACT or Tasmania.

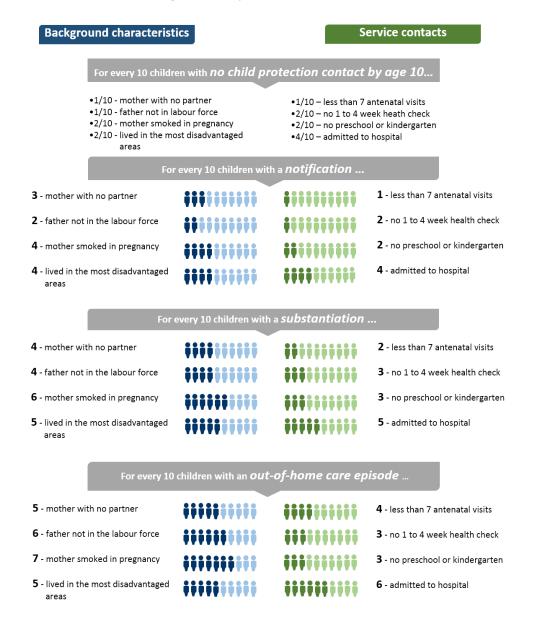


#### Who is at risk?

Key Message 8: The escalating levels of involvement with the child protection system are associated with an increasing prevalence of characteristics that may be related to the experience of multiple forms of social and economic disadvantage.

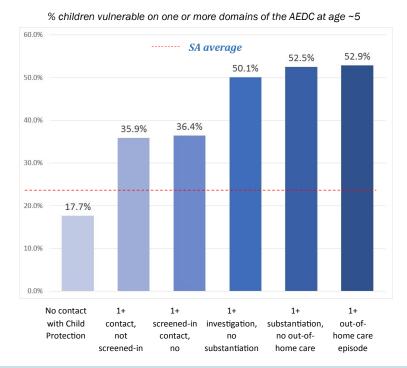
The following infographic describes the characteristics of families and children as they move through the child protection system in South Australia between 1999 and 2015, for children born from 1999 to 2005 followed up until they are 10. The escalating levels of child protection system involvement are associated with an increasing prevalence of characteristics that may be related to the experience of disadvantage. For example, 1 of 10 children who have had *no contact with child protection* had a father not in the labour force at birth, and this increases in a linear fashion as the level of child protection system involvement increases. For children who have experienced *out-of-home care*, 6 in 10 had a father not in the labour force at birth.

Presented below are indicators collected by various parts of the South Australian government. It is important to note these indicators do not *cause* child protection system involvement.



## **Looking forward**

#### Development at age 5: Australian Early Development Census (AEDC)

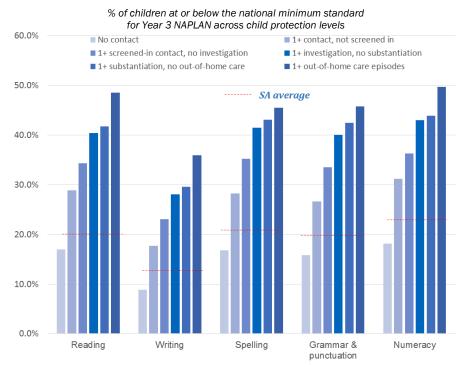


Key Message 9: As the level of contact with the child protection system increases, so does the prevalence of develop-mental vulnerability on one or more domains at age 5. Children who have experienced out-of-homecare are almost 3 times more likely to be vulnerable than children with no child protection contacts.

This graph shows the prevalence of developmental vulnerability on one or more of the AEDC domains (physical health and wellbeing; social competence, emotional maturity, communication and general knowledge, and language and cognitive skills) according to the level of contact with the child protection system.

Evidence from both the AEDC and the NAPLAN shows children experience poorer outcomes as the level of child protection system involvement increases.

#### Academic achievement at age 8: National Assessment Program - Literacy and Numeracy (NAPLAN)



Key Message 10: As the level of contact with the child protection system increases, so does the prevalence of performing at or below the national minimum standard on NAPLAN at age 8. Children who have experienced out-of-homecare are 3 times more likely to be performing poorly on Year 3 NAPLAN than children with no child protection contacts.

This graph shows the prevalence of children performing at or below the national minimum standard as measured by the NAPLAN at Year 3 (age 8 years).

#### Where to from here ...

Future work from the SA ECDP will investigate:

- Patterns of re-notifications to the child protection system
- Risk prediction of contact with child protection by factors known at birth
- Risk prediction of contact with child protection by factors known at age 5
- Transitions into out-of-home care
- Intersections of domestic violence and child protection
- Intersections of public housing and child protection
- Intersections of mental health and child protection.

Further reports will be produced on these topics, and will be available on the *BetterStart* website (<a href="http://health.adelaide.edu.au/betterstart/research/">http://health.adelaide.edu.au/betterstart/research/</a>).

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#### Suggested citation

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#### Who we are

The BetterStart Child Health and Development Research Group comprises inter-disciplinary researchers from epidemiology, public health, nutrition, paediatrics, biostatistics, and psychology who are trying to better understand how to ensure infants and children have the best start in life that will enhance their health, development and human capability formation over the life course.

#### Contact us

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Please email us if you would like your name added to the mailing list for further reports from the BetterStart Child Health and Development Research Group.