

# Eligibility for a Reunification Program Supporting Social Impact Investment in South Australia

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March 2021

## **BETTERSTART**Health and Development Research



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### Acknowledgements

We are grateful for funding that supports the Better Evidence, Better Outcomes, Linked Data platform from:

- National Health and Medical Research Council (NHMRC) Australia Fellowship (570120);
- NHMRC Partnership Project Grant (APP1056888);
- NHMRC Centre for Research Excellence (APP1099422);

#### as well as contributions from:

- SA Department of the Premier and Cabinet;
- SA Department of Health and Wellbeing;
- SA Department for Education;
- SA Department of Child Protection; and
- SA Department of Human Services.

We would like to thank SA-NT DataLink and all of the data custodians and data managers from all government departments at State and Federal levels who have contributed to the development of the BEBOLD platform. We would like to specifically acknowledge and thank the SA Department for Child Protection for contributing data that has been used in this project.









#### Disclaimer

The views expressed here do not necessarily reflect those of our government partners.

#### Suggested citation

Montgomerie A, Haag D, Gialamas A, Pilkington R, & Lynch J. (2021). Eligibility for a Reunification Program: Supporting Social Impact Investment in South Australia. Adelaide: BetterStart Health and Development Research, The University of Adelaide.

#### Who we are

The BetterStart Health and Development Research comprises inter-disciplinary researchers from epidemiology, public health, criminology, 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.

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#### Objective

This final report presents the results of analysis for the "Reunification Cohort" to inform the Social Impact Investing (SII) in South Australia.

The report is presented in 7 parts:

Part 1: Cohort eligibility;

Part 2: Characteristics of the cohort;

Part 3: Counterfactual estimates of reunification;

Part 4: Trends in cohort composition; and

Part 5: Selected examples of SA government service use.

Part 6: Developmental vulnerability at school entry and school achievement;

Part 7: Commonwealth welfare outcomes.

Note: We were also originally asked to explore potential comparison groups but this work is not possible until final eligibility criteria have been defined by the Joint Working Group.

#### **Population**

The report is based mainly on children under age 6 in Out-of-Home-Care (OOHC) in the financial year 2016-2017, with temporal analysis covering the years 2014/15 to 2019/20.

#### The Key Numbers

#### **Cohort Eligibility**

Eligibility was broadly defined as a child under age 6 who was in Out-of-Home-Care (OOHC) and on a first short term order.

For the sample year 2016/17 there were 616 children eligible for reunification using definitions agreed with the Department for Child Protection (DCP). Of these children, 337 were 'continuing' in OOHC and 269 were first time 'new' OOHC cases. If we project from these analyses to 2019/2020, the eligible cohort would be 759 children.

#### Characteristics of the cohort

The eligible cohort is characterised by the confluence of several risk factors including mental health, domestic violence, and substance/alcohol use. These 3 major risk factors affect 30% of the cohort, but they do not exist in isolation with significant proportions experiencing multiple risk factors that hamper parenting capacity.

70% of the families of the eligible cohort have 3 or more children. In 60% of the families all children were 10 or younger. Of all families of the eligible cohort 36% had at least 1 child aged between 6 and 17 who was in OOHC.

#### Counterfactual estimates of reunification

- 1. The reunification percentages are the best overall estimate of the "counterfactual" reunification proportion. i.e., what the reunification % would be in normal conditions and under the normal processes and efforts that underpin reunification. A successful novel intervention would be expected to exceed these reunification rates.
- 2. In the 2016/17 the proportion reunified was:

by 6 months
by 12 months
by 18 months
by 21 months
by 24 months
24.8% reunified
25.6% reunified
25.6% reunified
28.4% reunified

These proportions were consistently about 10% higher in the new compared to the continuing OOHC group.

Available data from 2014/15 to 2016/17 suggests these reunification rates are reasonably stable.

A five year window of reunification using the 2014/15 cohort shows the proportion reunified up to 5 years was 24.3%. This analysis also shows that 70% of the cohort were on a GOM18 at five years.

- 3. There are no clear patterns to the differences in reunification rates according to gender, age, primary substantiated type or grounds, risk factors (e.g. domestic violence, mental health, substance use), length and type of care.
- 4. The maximum difference in reunification between Aboriginal and non-Aboriginal children was 6% lower at 18 months. However, these were not stable over time and ranged from under 1% to 6%.
- 5. Hospitalisations for children in the eligible cohort were about double the rates for the whole population. ED presentations were not markedly raised above average population levels.
- 6. It is difficult to compare hospital and ED presentations for mothers and co-parents because there are no benchmarks. Nevertheless, 22% of mothers had a drug and alcohol related hospitalisation and 26% had a mental health related hospitalisation. About 76% of mothers had at least 1 ED presentation within the 2 year time period.

#### Our interpretation of the main findings

This analysis has been co-designed to mirror as closely as possible the real-world processes that reflect likely DCP referrals, eligibility for the reunification cohort, and likely baseline (counterfactual) reunification rates.

- 1. There are two clear sub-populations within the eligible cohort. One of these is the 'new OOHC cases' (n=269, 44% of the eligible cohort) and one comprising those children who are continuing care but become eligible for reunification because of the transition in the orders (n=337, 55%). The reunification rates are approximately 10% higher amongst the New OOHC compared to the Continued OOHC group. So it may be worth considering whether the intervention will target one of these sub-populations.
- 2. The eligible cohort demonstrates multiple and complex substantiated risk factors that reduced parenting capacity and led to the child being removed. The analysis provided here may help in the rollout of the intervention to ensure the enrolled population matches the eligible population on these characteristics and risk factors.
- 3. The reunification rates appear stable and surprisingly they do not illustrate any clear patterns by any of the characteristics we looked at.
- 4. The reunification proportion is roughly the same (about 25-30%) using a 2 year or 5 year window. However, in the 2 year window 44% of the cohort are on a GOM18 but the by the time the window is extended out to 5 years 70% of the cohort are GOM18. This means that those on short term orders like GOM12 at 2 years are converting to GOM18s by 5 years.
- 5. Reunification rates rise up to 2 years but are then stable out to 5 years. At the same time the proportion of the cohort who are GOM18 increases between 2 and 5 years but two thirds of the cohort who end up GOM18 after 5 years were already GOM18 at 2 years.

#### Points to consider for prevention potential

- 1. The largest prevention potential to reduce transitions to GOM18s is within 2 years of becoming eligible for the cohort.
- 2. Early intervention efforts to reunify families should be cognisant that:
  - The median age of the cohort is only 1 year;
  - For 60% of the families, all their children were 10 or younger;
  - Over two thirds of the families had 3 or more children; and
  - Over a third of families had at least 1 older child aged between 6 and 17 years who
    was in OOHC.

## About this report

This final report responds to a request from SA Department of Treasury and Finance to provide background data to inform Social Impact Investing (SII) in South Australia.

#### Data sources

Data comes from the Better Evidence Better Outcomes Linked Data platform (BEBOLD) using information from:

- SA Department for Child Protection;
- Integrated South Australian Activity Collection (ISAAC) Data, SA Health;
- Emergency Department Data Collection (EDDC), SA Health; and
- Birth registration derived family file;
- Australian Early Development Census (AEDC) data, Commonwealth Department of Education, Skills and Employment
- National Assessment Program Literacy and Numeracy (NAPLAN) data, Department for Education; and
- Commonwealth DOMINO data.

The aim of the reports that we deliver to government is to provide an evidence base from which decisions can be made that will lead to improved outcomes for families and children experiencing different forms of disadvantage. However, as these reports primarily focus on data analysis, this can appear to depersonalise the real-life experiences that underlie these data. We would like to acknowledge the data in these reports represent serious experiences that can have a lifelong impact on children and families.

Using data in this way is only one way to tell important stories, however, we hope that this work contributes to ensuring South Australia is able to make more informed decisions about how best to support children and families.

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## Part 1. Cohort eligibility

In any financial year the OOHC group comprises 3 sub-populations

1. Co	ontin	uing	00	НС			Children who were in OOHC prior to that financial year and had continued OOHC for all or part of that financial year.																	
2. Pi	ior C	ЮН	С			У	Children who were in OOHC at some point prior to that financial year, had left OOHC for at least 6 weeks and were subsequently placed back into OOHC during that financial year.																	
3. No	ew O	онс					hild ear.	ren	who	had	d the	eir fi	rst e	ever	00	HC p	olace	eme	nt ir	tha	t fir	nanc	ial	
Examp	ole												Г		Fi	nan	cial '	Year	Sna	psh	ot			
			20	17								20	18								20	19		
	Jul	Aug	Sept	Oct	Nov	Dec	ic Jan Feb Mar Apr May Jun Jul Aug Sept Oct Nov Dec Jan Feb Mar Apr May Ju									Jun								
ontinuing in OHC																								

			20	17				2018									2019							
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jur
Continuing in																								
Child 1																								
Child 2																								
Child 3																								
Prior OOHC																								
Child 1																								
Child 2																								
Child 3																								
New OOHC																								
Child 1																								
Child 2																								
Child 3																								

Figure 1: Out of home care patterns identified as 'continuous', 'prior' and 'new'

The different types of OOHC patterns according to group using an example of analysis of a financial year (denoted by the pink box) is illustrated in Figure 1. If you look at the "Continued" group, you can see that for analysis of the 2018/19 financial year this will include children who entered OOHC prior to 30 June 2018, but were also in care post 30 June, 2018. The "Prior" group includes children who had been in OOHC prior to the financial year of interest, who had a period of at least 6 weeks where no placement was recorded before returning to OOHC in the financial year of interest (2018/2019). The "New" group includes children who were placed in OOHC for the first time ever during the financial year of interest.

The following formal definitions of eligibility were agreed with the SA Department for Child Protection (DCP).

Children were defined as eligible for the reunification cohort in the data if they were:

- 1. Aged less than 6 years and
- 2. Placed in OOHC on one of the following short term orders in a 12 month period;

## Voluntary Custody Agreement (VCA)

A05: VCA Custody of Minister (CP Act 1993)

A11: VCA Custody to CE (CYPSA Act 2017)

#### Custody/Guardianship to the Minister/CE for 12 month

F04: 12 months - Custody to Minister GOM (CP Act 1993)

F06: 12 months - Guardianship of Minister (CP Act 1993)

C17: Custody to CE (CYPSA Act 2017)

CO1: Guardianship to CE - up to 12 months (CYPSA Act 2017)

Furthermore, the orders below were also included if a child transitioned to one of the VCA or Custody/Guardianship 12 month orders above from an;

#### **Investigation & Assessments orders**

T03: Investigation & Assessment - with Custody (CP Act 1993)

T07: Interim Investigation & Assessment - with Custody (CP Act 1993)

T14: Extension of Investigation & Assessment (CP Act 1993)

#### **Emergency removal**

T37: Emergency removal of a child (CP Act 1993)

A24: Removal of child (CYPSA Act 2017)

#### Interim Guardianship/Custody to CE orders

C01: Guardianship to CE - up to 12 months (Interim)

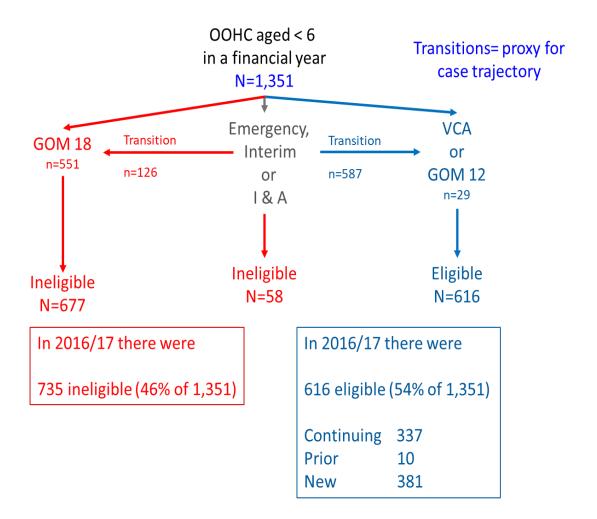
(CYPSA Act 2017)

C17: Custody to CE (Interim) (CYPSA Act 2017)

T19: Interim Custody to Minister (CP Act 1993)

T21: Interim Guardianship of Minister (CP Act 1993)

Figure 2: Eligibility for the reunification cohort in 2016/17



## Number potentially eligible and excluded for the whole of South Australia

There were 1,351 children aged less than 6 years potentially eligible for the reunification cohort in OOHC during  $1^{st}$  July 2016 to  $30^{th}$  June 2017.

Table 1: Number of children aged less than 6 years in OOHC 2016/2017

	N	%
Continued OOHC	951	70.4
Prior OOHC	19	1.4
New OOHC	381	28.2
Total	1,351	100.0

## Number of children eligible for the reunification cohort

The OOHC groups were split in to whether they were considered eligible for the reunification cohort based on the short-term orders definition agreed with DCP (outlined above).

• There were 616 children (45.6% of the 1,351 in OOHC) considered eligible for the reunification cohort in the 2016/17 financial year.

Table 2: Child was on an eligible short term order 2016/2017

	Continue	Continued OOHC		ООНС	New	ООНС	Total		
	n	n col %		col %	n	col %	n	col %	
Eligible for reunification cohort									
No	614	64.6	9	47.4	112	29.4	735	54.4	
Yes	337	35.4	10	52.6	269	70.6	616	45.6	
Total	951	100.0	19	100.0	381	100.0	1,351	100.0	

### Number of children eligible by short term order, 2016/17

The "First Order" column includes the order the child was on as of the 1<sup>st</sup> of July 2016 ("Continued" OOHC) or the first order they were placed on in 2016/2017 for those children in the "Prior" or "New" OOHC group, while the "Transition" column indicates if the child transitioned *to* another order or *from* another order during the same case.

If you look at the "Eligible (n=616)" section, in the "Total" column you can see of all 616 children eligible for the reunification cohort, of the 1,351 children in OOHC 2016/2017:

- 126 (9.3%) were placed on an emergency order and transitioned to an I&A/Interim before being placed on a GOM 12 or VCA;
- 191 (14.1%) were placed on an I&A/Interim order before being placed on a GOM12 or VCA order;
- 270 (20%) were on a Custody/GOM 12 or a VCA in 2016/17 but had previously been on an I&A/Interim order; and
- 29 (2.1%) their first order was a Custody/GOM 12 or VCA prior to and/or during 2016/17.

Table 3: Orders for children in OOHC 2016/2017 split by eligibility criteria for the reunification cohort

		Continue	ed OOHC	Prior	оонс	New	оонс	То	tal
First Order 2016/2017 or on Order 1st July 2016	Transition to or from	n	col %	n	col %	n	col %	n	col %
Not Eligible (n=735)									
Emergency	No I&A/Interim, GOM12/VCA/GOM18					7	1.8	7	0.5
Emergency	> I&A/Interim			5	26.3	16	4.2	21	1.6
Emergency	> I&A/Interim > GOM18					37	9.7	37	2.7
I&A/Interim	> GOM18	46	4.8	#	#	42	11.0	89	6.6
I&A/Interim	> No GOM12/VCA or GOM18	8	0.8			6	1.6	14	1.0
Custody/Gship to the Minister/CE until 18 years		549	57.7	#	#	#	#	551	40.8
Other orders		11	1.2	#	#	#	#	16	1.2
Eligible (n=616)									
Emergency	> I&A/Interim > GOM12/VCA	#	#			125	32.8	<b>126</b>	9.3
I&A/Interim	> GOM12/VCA	59	6.2	7	36.8	125	32.8	191	14.1
Custody/Guardianship to the Minister/CE for 12	< from I&A/Interim								
months or a Voluntary Custody Agreement		268	28.2	#	#	#	#	270	20.0
(VCA)									
Custody/Guardianship to the Minister/CE for 12		9	0.9	#	#	#	#	29	2.1
months or VCA			0.5	π	π	π	π	23	2.1
Total		951	100.0	19	100.0	381	100.0	1,351	100.0

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## Part 2. Characteristics of the cohort (n=616)

33.4% of the eligible population was aged under 1, but for the 'New OOHC' group this was 48%.

Table 4: Demographic characteristics of the eligible cohort (n=616)

	Continu	ied OOHC	Prior	ООНС	New	ООНС	To	tal
	n	col %	n	col %	n	col %	n	col %
Gender								
Male	177	52.5	#	#	145	53.9	330	53.6
Female	160	47.5	#	#	124	46.1	286	46.4
Age at start of OOHC 2016/2017								
Less than 1 year	<b>76</b>	22.6	#	#	129	48.0	206	33.4
1 year	80	23.7	#	#	41	15.2	123	20.0
2 years	54	16.0			33	12.3	87	14.1
3 years	46	13.6	#	#	25	9.3	73	11.9
4 years	36	10.7	#	#	22	8.2	62	10.1
5 years	45	13.4	#	#	19	7.1	65	10.6
Aboriginal and/or Torres strait Islander								
Yes	127	37.7	#	#	94	34.9	225	36.5
No	205	60.8	#	#	169	62.8	380	61.7
Don't know	5	1.5	#	#	6	2.2	11	1.8
Total	337	100.0	10	100.0	269	100.0	616	100.0

## Child residence at first OOHC episode

32% of the eligible cohort resided in the northern region when they were in care, at the time of their first order in 2016/17.

Table 5: DCP office region using area of residence of the child when they were in care (n=616)

DCP Office	Continue	ed OOHC	Prior (	оонс	New (	ООНС	То	tal
	n	col %	n	col %	n	col %	n	col %
Northern region								
Elizabeth 1	31	9.2	#	#	17	6.3	50	8.1
Elizabeth 2	37	11.0	#	#	19	7.1	56	9.1
Gawler	22	6.5	#	#	21	7.8	43	7.0
Port Pirie	32	9.5	#	#	14	5.2	48	7.8
Far North								
Port Augusta	7	2.1	#	#	10	3.7	17	2.8
Port Lincoln	7	2.1	#	#	#	#	11	1.8
Whyalla	14	4.2	#	#	8	3.0	22	3.6
Ceduna	#	#	#	#	#	3	12	1.9
Coober Pedy	#	#	#	#	#	#	#	#
Central region								
Blair Athol	31	9.2	#	#	33	12.3	64	10.4
Woodville	11	3.3	#	#	25	9.3	36	5.8
Mount Barker	18	5.3	#	#	14	5.2	32	5.2
Southern region								
St Marys	38	11.3	#	#	41	15.2	82	13.3
Noarlunga	37	11.0	#	#	25	9.3	62	10.1
Murraylands	6	1.8	#	#	#	#	9	1.5
(inc. Riverland)	О	1.8	#	#	#	#	9	1.5
Limestone Coast	19	5.6	#	#	13	4.8	34	5.5
Murray Bridge	18	5.3	#	#	16	5.9	34	5.5
Interstate	#	#			#	#	#	#
Total	337	100.0	10	100.0	269	100.0	616	100.0

## Child residence at last known address prior to OOHC episode

30% of the eligible cohort resided in the northern region prior to entering OOHC.

The difference between Table 6 below and Table 5 above is Table 6 shows the area of residence where the child lived. This may better represent the location of the parent/carer for the purposes of reunification.

Table 6: DCP office region area of residence prior to OOHC

DCP Office	Continu	ed OOHC	Prior	ООНС	New	ООНС	То	tal
	n	col %	n	col %	n	col %	n	col %
Northern region								
Elizabeth 1	40	11.9	#	#	24	8.9	67	10.9
Elizabeth 2	37	11	#	#	37	13.8	78	12.7
Gawler	5	1.5	#	#	12	4.5	17	2.8
Port Pirie	14	4.2	#	#	7	2.6	21	3.4
Far North								
Port Augusta	13	3.9	#	#	11	4.1	24	3.9
Port Lincoln	9	2.7	#	#	#	#	13	2.1
Whyalla	18	5.3	#	#	8	3	26	4.2
Ceduna	3	0.9	#	#	9	3.3	12	1.9
Central region								
Blair Athol	38	11.3	#	#	15	5.6	53	8.6
Woodville	22	6.5	#	#	34	12.6	58	9.4
Mount Barker	13	3.9	#	#	9	3.3	22	3.6
Southern region								
St Marys	46	13.6	#	#	37	13.8	83	13.5
Noarlunga	33	9.8	#	#	34	12.6	67	10.9
Murraylands	_	1.5	ш	щ	5	1.0	10	1.0
(inc. Riverland)	5	1.5	#	#	5	1.9	10	1.6
Limestone Coast	20	5.9	#	#	13	4.8	33	5.4
Murray Bridge	14	4.2	#	#	10	3.7	24	3.9
Unknown	7	2.1					7	1.1
Other					#	#	#	#
Total	337	100.0	10	100.0	269	100.0	616	100.0

The below table presents the same information as Table 6 using SA Government Regions instead of DCP Region.

Table 7: SA Government Region area of residence prior to OOHC

	Continue	ed OOHC	Prior (	оонс	New	оонс	То	tal
	n	col %	n	col %	n	col %	n	col %
Northern Adelaide	113	33.5	#	#	74	27.5	194	31.5
Eastern Adelaide	11	3.3	#	#	17	6.3	28	4.5
Southern Adelaide	68	20.2	#	#	52	19.3	120	19.5
Western Adelaide	24	7.1	#	#	38	14.1	64	10.4
Adelaide Hills	#	#	#	#	5	1.9	9	1.5
Barossa, Light and Lower North	5	1.5	#	#	12	4.5	17	2.8
Eyre and Western	30	8.9	#	#	20	7.4	51	8.3
Far North	13	3.9	#	#	12	4.5	25	4.1
Fleurieu and Kangaroo Island	9	2.7	#	#	#	#	13	2.1
Limestone Coast	20	5.9	#	#	13	4.8	33	5.4
Murray and Mallee	19	5.6	#	#	15	5.6	34	5.5
Yorke and Mid North	14	4.2	#	#	#	#	21	3.4
Address unknown	#	#	#	#	#	#	7	1.1
Total	337	100.0	10	100.0	269	100.0	616	100.0

## Substantiated primary type of abuse or neglect

More than 99% of the eligible cohort were substantiated prior to being removed, and 50% of these had a primary substantiated maltreatment type of neglect.

Table 8: Primary substantiated abuse or neglect primary to OOHC 2016/2017

		Continued OOHC		Prior OOHC		ООНС	Total		
	n	col %	n	col %	n	col %	n	col %	
Primary substantiated abuse or neglect									
Emotional Abuse	66	19.6	#	#	43	16.0	109	17.7	
Neglect	165		#	#	140	52.0	308	50.0	
Physical Abuse	85	25.2	#	#	75	27.9	167	27.1	
Sexual Abuse	20	5.9	#	#	10	3.7	30	4.9	
No Substantiation	#	#	#	#	#	#	#	#	
Total	337	100.0	10	100.0	269	100.0	616	100.0	

## Primary grounds for substantiation

More than 30% of the eligible cohort were substantiated for inadequate basic care, supervision or no available carer. This is a large proportion of the 50% associated with neglect. Another 30% is attributable to the primary grounds of domestic violence, mental health, and substance/alcohol use.

Table 9: Primary grounds for substantiated abuse or neglect to OOHC 2016/2017

		nued HC	Prior	ООНС	New (	ООНС	То	tal
	n	col %	n	col %	n	col %	n	col %
Inadequate basic care	53	15.7	#	#	39	14.5	92	14.9
Inadequate supervision	36	10.7	#	#	25	9.3	62	10.1
No caregiver available/willing/able to provide care	14	4.2	#	#	19	7.1	33	5.4
Significant risk of emotional abuse/ neglect/ physical abuse due to - domestic violence	35	10.4	#	#	17	6.3	52	8.4
Failure to protect from others (can be DV related)	7	2.1	#	#	6	2.2	13	2.1
Significant risk of emotional abuse/ neglect/ physical abuse due to - mental health	17	5.0	#	#	16	5.9	33	5.4
Substance use or Significant risk of emotional abuse/neglect/physical abuse due to substance use	45	13.4	#	#	38	14.1	87	14.1
Alcohol use or Significant risk of emotional abuse/neglect/physical abuse due to alcohol use	12	3.6	#	#	6	2.2	18	2.9
Alleged serious inflicted injury, Alleged other inflicted injury, Serious injury due to neglect, Excessive discipline/other violent behaviour directed towards child, Dangerous behaviour involving child, Threats to kill/injure, Unexplained injury, Significant risk of physical abuse - homelessness	53	15.7	#	#	39	14.5	96	15.6
Significant risk of sexual abuse, Sexual act or exploitation, Suspicious indicators consistent with sexual abuse	20	5.9	#	#	10	3.7	30	4.9
Significant risk of emotional abuse/ neglect/ physical abuse due to - serious prior abuse/neglect	10	3.0	#	#	24	8.9	35	5.7
Significant risk of neglect / physical abuse due to - intellectual disability	#	#	#	#	#	#	#	#
Significant risk of neglect / physical abuse due to - other	17	5.0	#	#	15	5.6	32	5.2
Other grounds*	14	4.2	#	#	6	2.2	20	3.2
Not substantiated	#	#	#	#	#	#	#	#
Total	337	100.0	10	100.0	269	100.0	616	100.0

<sup>\*</sup>Other grounds includes significant risk of neglect - young age of guardian, serious illness due to neglect, child has significant symptoms of emotional distress and significant risk of emotional abuse - lack of attachment

## Significant risk factors

#### Interpretation

• These data on significant risk factors are recorded by DCP case workers. Although recording this is not mandatory, children who are placed in OOHC are much more likely to have risk factors recorded in the case management system. The basic story is consistent with the previous tables and demonstrates the importance of mental health, domestic violence, substance use and reduced parenting capacity. Less than a fifth of this population has no risk factors.

Table 10: Significant risk factors recorded in case prior to OOHC 2016/2017 (not mutually exclusive groups)

	Conti 00		Prior (	оонс	New	оонс	To	tal
	n	col %	n	col %	n	col %	n	col %
Had at least one significant								
risk factor recorded								
No	57	16.9	#	#	51	19.0	109	17.7
Yes	280	83.1	#	#	218	81.0	507	82.3
Significant risk factor ^								
Alcohol use	38	11.3			11	4.1	49	8.0
Other substance use	142	42.1	5	50.0	105	39.0	252	40.9
Caregiver lacks insight into								
impact on child	130	38.6	6	60.0	112	41.6	248	40.3
Caregiver not accepting								
responsibility for behaviour	85	25.2	#	#	77	28.6	164	26.6
Domestic violence	110	32.6	5	50.0	84	31.2	199	32.3
Homelessness	18	5.3			13	4.8	31	5.0
Inadequate housing	26	7.7			26	9.7	52	8.4
Inadequate income	3	0.9			3	1.1	6	1.0
Intellectual disability	16	4.7			12	4.5	28	4.5
Lack of capacity to protect	66	19.6			49	18.2	115	18.7
Mental health	113	33.5	#	#	108	40.1	224	36.4
Physical health/disability of								
caregiver	5	1.5			7	2.6	12	1.9
Poor attachment	21	6.2			17	6.3	38	6.2
Poor financial management								
(incl gambling)	7	2.1			9	3.3	16	2.6
Significant gaps or severe								
deficits in parenting skill	83	24.6			73	27.1	156	25.3
Number of significant risk								
factors								
None	57	16.9	#	#	51	19.0	109	17.7
1	81	24.0	#	#	43	16.0	128	20.8
2	57	16.9	#	#	41	15.2	99	16.1
3	47	13.9	#	#	51	19.0	99	16.1
4	32	9.5	#	#	30	11.2	65	10.6
5	20	5.9			25	9.3	45	7.3
6	20	5.9			17	6.3	37	6.0
7 - 10	23	6.8	#	#	11	4.1	34	5.5
Total	337	100.0	10	100.0	269	100.0	616	100.0

<sup>^</sup> not mutually exclusive groups

#### The number of siblings in the eligible cohort

Due to small numbers, Table 11 through Table 14 did not include the 'Prior OOHC' group.

#### Interpretation

• Using the DCP relationships file, there were 428 eligible sibling groups within the 616 children in the eligible cohort. About 30% of the children in the eligible cohort had one or more siblings who were also in the eligible cohort.

Table 11: Number of siblings within the eligible cohort

		Continued OOHC		Prior OOHC		New OOHC		Total sibling groups	
	n	col %	n	col %	n	col %	n	col %	n
One child	171	67.9	#	#	117	67.6	289	67.5	289*1
Two children	58	23.0	#	#	42	24.3	101	23.6	101*2
Three children	21	8.3	#	#	6	3.5	27	6.3	27*3
Four children	2	0.8	#	#	8	4.6	11	2.6	11*4
Total	252	100.0	#	#	173	100.0	428	100.0	616

The total number of children and young people in families who have at least 1 child in the eligible cohort (this can include individuals aged 18+)

#### Interpretation

- Almost 70% of the families with at least one eligible child in the cohort had, at the time of eligibility, at least three or more children in the family. This count includes the eligible children.
- This does not mean that all those children were living in the same household.
- The point of this is to note that any intervention to reunify families will have to be cognisant of the large family size of most of the eligible cohort. Less than 20% of the eligible cohort are single child families.

Table 12: Number of children in the families at eligibility, 2016/2017

	Continued OOHC		Prior	ООНС	New	ООНС	Total F	amilies
	n	col %	n	col %	n	col %	n	col %
One child family	42	16.7	#	#	35	20.2	77	18.1
Two children family	40	15.9	#	#	23	13.3	63	14.8
Three children family	41	16.3	#	#	33	19.1	74	17.4
Four children family	37	14.7	#	#	23	13.3	60	14.1
Five children family	31	12.3	#	#	18	10.4	49	11.5
Six or more children family	61	24.2	#	#	41	23.7	102	24.0
Total	252	100.0	#	#	173	100.0	425	100.0

Note: Families in the prior OOHC have been excluded due to small numbers. Children include biological and step.

# The total number of children and young people in families who have at least 1 child in the eligible cohort (this table now excludes individuals aged 18+)

#### Interpretation

• After excluding, individuals aged 18+ about 70% of families in the eligible cohort still have three or more children. This may mean these children are more likely to be in the household part of the time.

Table 13: Number of children aged less than 18 years in the families at eligibility, 2016/2017

	Continued OOHC		Prior	ООНС	New	ООНС	<b>Total Families</b>		
	n	col %	n	col %	n	col %	n	col %	
One child family	47	18.7	#	#	36	20.8	83	19.5	
Two children family	40	15.9	#	#	22	12.7	62	14.6	
Three children family	38	15.1	#	#	36	20.8	74	17.4	
Four children family	43	17.1	#	#	25	14.5	68	16.0	
Five children family	30	11.9	#	#	17	9.8	47	11.1	
Six or more children family	54	21.4	#	#	37	21.4	91	21.4	
Total	252	100.0	#	#	173	100.0	425	100.0	

Note: Families in the prior OOHC have been excluded from due to small numbers. Children include biological and step.

## Age of children in families with an eligible child

#### Interpretation

• In about 60% of the families all of the children were aged 10 or less.

Table 14: Age of children in the families at eligibility, 2016/2017

	Continu	ied OOHC	Prior	ООНС	New	ООНС	Total	Families
	n	col %	n	col %	n	col %	n	col %
Family: 1 child, child aged 5 years of less	42	16.7	#	#	35	20.2	77	18.1
Family: 2 or more children, all aged 5 years of less	50	19.8	#	#	35	20.2	85	20.0
Family: 2 or more children: At least one child aged 5 years or less and at least one child aged 6 to 10 years	59	23.4	#	#	47	27.2	106	24.9
Family: 2 or more children: At least one child aged 5 years or less and at least one child aged 11 to 15 years	9	3.6	#	#	5	2.9	14	3.3
Family: 3 or more children: At least one child aged 5 years or less, at least one child aged 6 to 10 years and at least one child 11 to 15 years	41	16.3	#	#	26	15.0	67	15.8
Family: 3 or more children: at least one child aged 5 years or less, at least one child aged 6 to 10 years, at least one child 11 to 15 years and at least one child 16 years or more	29	11.5	#	#	9	5.2	38	8.9
Family: 3 or more children: other combinations of ages	22	8.7	#	#	16	9.2	38	8.9
Total	252	100.0	#	#	173	100.0	425	100.0

Note: Families in the prior OOHC have been excluded due to small numbers. Children include biological and step.

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### Families that had at least one child aged 6 years or more

Note: These are not mutually exclusive groups. For instance, a family could have 1 child aged 10-12 and another child aged 13-15.

#### Interpretation

- 50% of all families had at least one additional child aged 6 to 9 years.
- Only 12.5% of all families had a family member 18 or older.

Table 15: Number of families that have at least one child aged 6 to 9 years, 10 to 12 years, 13 to 15 years, 16 to 17 years or 18 years or more

	Continued OOHC		Prior	ООНС	New	ООНС	Total	Families
	n	col %	n	col %	n	col %	n	col %
At least one additional child aged 6 to 9 years								
Yes	128	50.8	#	#	83	48.0	211	49.6
No	124	49.2	#	#	90	52.0	214	50.4
At least one additional child aged 10 to 12 years								
Yes	75	29.8	#	#	46	26.6	121	28.5
No	177	70.2	#	#	127	73.4	304	71.5
At least one additional child aged 13 to 15 years								
Yes	50	19.8	#	#	35	20.2	85	20.0
No	202	80.2	#	#	138	79.8	340	80.0
At least one additional child aged 16 to 17 years								
Yes	27	10.7	#	#	15	8.7	42	9.9
No	225	89.3	#	#	158	91.3	383	90.1
At least one additional child aged 18 years or more								
Yes	37	14.7	#	#	16	9.2	53	12.5
No	215	85.3	#	#	157	90.8	372	87.5
Total	252	100.0	#	#	173	100.0	425	100.0

Note: A family can have children in more than one age group i.e. they can have one child aged 6 to 9 years and also another child aged 10 to 12 years. Children include biological and step. Families in the prior OOHC have been excluded due to small numbers.

#### Families that had at least one child aged 6 -17 years

The purpose of the next set of analyses was to explore how many families had children aged 6-17 years in OOHC. If there was an older child already in OOHC within the family group, this might be considered a risk marker for reunification.

#### Interpretation

• The purpose of this table is to establish the denominator for subsequent tables that will explore this issue. The table below shows 253 families had at least one child aged 6 to 17 years at eligibility in 2016/17. This will be the denominator used in subsequent tables.

Table 16: Number of families that have at least one child aged 6 to 17 years at eligibility, 2016/2017

	Continued OOHC		Prior	Prior OOHC		New OOHC		Families
	n	col %	n	col %	n	col %	n	col %
Had at least one sibling aged 6 to								
17 years								
No	100	39.7	#	#	72	41.6	172	40.5
Yes	152	60.3	#	#	101	58.4	253	59.5
Total	252	100.0	#	#	173	100.0	425	100.0

Note: Families in the prior OOHC have been excluded due to small numbers. Children include biological and step.

## Families who had an older child in OOHC among the 253 families with an older child

#### Interpretation

- Around 60% of families had at least one older child in OOHC, of those families that had at least one child aged 6 to 17 years.
- This means that for the total cohort of 425 families about 36% (151/425) had an older child in OOHC.

Table 17: Proportion with at least one older child in OOHC, for families with at least one child aged 6 to 17 years, at eligibility, 2016/2017

	Continued OOHC		Prior OOHC		New OOHC		Total Families	
	n	col %	n	col %	n	col %	n	col %
Had at least one child aged 6 to 17 years in OOHC								
Yes	93	61.2	#	#	58	57.4	151	59.7
No	59	38.8	#	#	43	42.6	102	40.3
Total	152	100.0	#	#	101	100.0	253	100.0

Note: Families in the prior OOHC have been excluded due to small numbers. Children include biological and step.

### Length of time in OOHC for the full eligible cohort (n=616)

The 'eligible date' has been defined as the commencement of the short-term order connected to the care episode in the financial year of interest. This was considered the time at which the child becomes eligible for the outcome (reunification) as it is from this date they can be referred to the intervention.

#### Interpretation

- This analysis was requested to understand how long the eligible cohort had spent in OOHC.
- We do not think this analysis is informative because understanding reunification risk according to time in care is circular. The outcome of reunification is defined by when periods of OOHC stop.
   You cannot use time in OOHC as a reunification "risk stratifier" because the end of time in OOHC is the outcome.
- For example, the 59.4% of children who spent 2 years in OOHC by definition were not reunified.

Table 18: Time spent in OOHC from eligible date to 24 months

	Continue	ed OOHC	Prior	ООНС	New	ООНС	Total	
	n	col %	n	col %	n	col %	n	col %
3 months or less	#	#			7	2.6	8	1.3
>3 months to 6 months	11	3.3			8	3.0	19	3.1
>6 months to 9 months	10	3.0			19	7.1	29	4.7
>9 months <1 year	#	#			17	6.3	23	3.7
1 year to 18 mths	52	15.4	#	#	39	14.5	93	15.1
>18 to 21 mths	9	2.7			9	3.3	18	2.9
>21mth to <2 y years	35	10.4	#	#	22	8.2	60	9.7
2 years	213	63.2	5	50.0	148	55.0	366	59.4
Total	337	100.0	10	100.0	269	100.0	616	100.0

#### Family and non-family based OOHC placements

Almost 75% of the eligible cohort were exclusively in family based care.

Table 19: Type of OOHC from eligible date to 24 months

	Continued OOHC		Prior	Prior OOHC		ООНС	Total	
	n	col %	n	col %	n	col %	n	col %
Family based care	241		6	60.0	208	77.3	455	73.9
Non-family based care	17	5.0			12	4.5	29	4.7
Family based & Non- family based care	79	23.4	#	#	49	18.2	132	21.4
Total	337	100.0	10	100.0	269	100.0	616	100.0

#### Notes:

Family based care includes foster care, kinship care, family day care and specific child only care. Non-family based care includes: Residential care and commercial care.

Family Day Care (FDC) refers to the Guardianship Family Day Care response which provides short term family-based care to children under 6 while seeking kinship or foster care placements. The program was established by a Memorandum of Administrative Agreement between the Department for Education and the Department for Child Protection.

Specific child only care. A category of approved carer, as established by the Chief Executive under section 70(1) of the CYPS Act. An SCO carer is defined as a person approved to provide care, in their own home, to a specific child or children with whom they have a connection (that does not fit the definition of kinship care) through their personal, professional or ethno-specific community life (which includes sharing a cultural, ethnic or religious community connection with the child), without, in some instances, directly knowing the child or the child's family. The definition of a specific child only carer includes a person of Aboriginal or Torres Strait Islander cultural background that is not known to the child and is not considered kin by the family or those with cultural authority for the child. Examples include a teacher, nurse, child care worker, DCP staff member, neighbour, or sporting club member.

## Types of family and non-family based OOHC placements

The most common type of care was foster or kinship care, or a combination of both.

Table 20: Type of OOHC from eligible date to 24 months

	Continued OOHC		Prior (	онс	New	ООНС	To	tal
	n	col %	n	col %	n	col %	n	col %
Family based care								
Foster Care	70	20.8	#	#	63	23.4	134	21.8
Kinship Care	85	25.2			51	19.0	136	22.1
Foster & Kinship	66	19.6	#	#	78	29.0	147	23.9
Other Family based care	20	5.9	#	#	16	5.9	38	6.2
Non-family based care								
Residential/Commercial	17	5.0			12	4 5	20	4.7
Property	17	5.0			12	4.5	29	4.7
Family based & Non-family								
based care								
Foster & Residential	18	5.3			22	8.2	43	7.0
Care/Commercial Property	10	5.5	#	#	22	0.2	43	7.0
Kindship & Residential	17	5.0			4	1.5	21	3.4
Care/Commercial Property	17	3.0			4	1.5	21	3.4
Foster, Kinship & Residential	36	10.7			12	4.5	49	8.0
Care/Commercial Property	30	10.7	#	#	12	4.5	49	8.0
Other Family based & Non-	8	2.4			11	4.1	19	3.1
family based care	0	Z.4			11	4.1	19	3.1
Total	337	100.0	10	100.0	269	100.0	616	100.0

## Part 3. Counterfactual estimates of reunification

#### Defining the primary outcome: reunification

Children were classified as reunified if;

- Placement end reason was "child reunified"; or
- Placement end reason was "placement ended" and they did not have any further orders.

NOTE: In the data we hold we cannot determine if the child has been reunified to the parent(s)/carer(s) that the child was initially removed from. However, the DCP have stated that in the majority of cases, children are reunified to the parent(s)/carer(s) they were initially removed from.

#### Number of children reunified at 6, 12, 18, 21 and 24 months

As requested, the follow-up period for the reunification outcome was 6 months, 12 months, 18 months, 21 months and 24 months after the commencement of the short-term order connected to the care episode in the financial year of interest. This was considered the time at which the child becomes eligible for the outcome (reunification) as it is from this date they can be referred to the intervention.

Of the 616 children in 2016/17:

- 30 (4.9%) were reunified at 6 months follow-up;
- 90 (14.6%) were no longer in OOHC at 12 months follow-up;
- 153 (24.8%) were no longer in OOHC at 18 months follow-up;
- 158 (25.6%) were no longer in OOHC at 21 months follow-up; and
- 175 (28.4%) were no longer in OOHC at 24 months follow-up.

The proportion reunified varies by OOHC group, with the "New" OOHC group having the highest proportion of children reunified at each follow-up time.

Table 21: Reunification outcomes at 6, 12, 18, 21 and 24 months post eligibility

	Continue	Prior	ООНС	New	ОНС	To	tal	
	n	col %	n	col %	n	col %	n	col %
Reunified at 6 months post eligibility								
Child still in OOHC	323	95.8	10	100.0	251	93.3	584	94.8
Not in OOHC: Reunified	13	3.9			17	6.3	30	4.9
Not in OOHC: Not reunified								
Not in OOHC: Death of child					#	#	#	#
Not in OOHC: Special circumstances	#	#					#	#
Reunified at 12 months post eligibility								
Child still in OOHC	301	89.3	9	90.0	210	78.1	520	84.4
Not in OOHC: Reunified	32	9.5	#	#	57	21.2	90	14.6
Not in OOHC: Not reunified	#	#			#	#	#	#
Not in OOHC: Death of child					#	#	#	#
Not in OOHC: Special circumstances	#	#					#	#
Reunified at 18 months post eligibility								
Child still in OOHC	260	77.2	8	80.0	183	68.0	451	73.2
Not in OOHC: Reunified	70	20.8	#	#	81	30.1	153	24.8
Not in OOHC: Not reunified	#	#			#	#	7	1.1
Not in OOHC: Death of child					#	#	#	#
Not in OOHC: Special circumstances	#	#			#	#	#	#
Total	337	100.0	10	100.0	269	100.0	616	100.0

Table 21: Reunification outcomes at 6, 12, 18, 21 and 24 months post eligibility

	Conti OO		Prior	оонс	New (	ООНС	To	tal
	n	col %	n	col %	n	col %	n	col %
Reunified at 21 months post eligibility								
Child still in OOHC	258	76.6	8	80.0	180	66.9	446	72.4
Not in OOHC: Reunified	72	21.4	#	#	84	31.2	158	25.6
Not in OOHC: Not reunified	#	#			#	#	7	1.1
Not in OOHC: Death of child					#	#	#	#
Not in OOHC: Special circumstances	#	#			#	#	#	#
Reunified at 24 months post eligibility								
Child still in OOHC	252	74.8	5	50.0	173	64.3	430	69.8
Not in OOHC: Reunified	78		5	50.0	92	34.2	175	28.4
Not in OOHC: Not reunified	#	#			#	#	6	1.0
Not in OOHC: Death of child	#	#			#	#	#	#
Not in OOHC: Special circumstances	#	#			#	#	#	#
Total	337	100.0	10	100.0	269	100.0	616	100.0

#### Reunification outcomes by care characteristics

Given the complexity of the computing for these we have looked at outcomes at 18 months because the previous analysis illustrates reunification rates are stable by this time.

The "Prior" group is not included due to small numbers, therefore continued + new does not add to the total in the "All children" column.

#### Interpretation

- Interpretation of these tables is difficult because of the complex relationship between case worker placement decisions based on their judgement of likely reunification trajectories. These judgements affect what we see in the data as type of care and length of care. For example, the higher reunification rate for those in non-family based care (in Table 23) is not typical and is likely to reflect case worker judgements that reunification will occur within a relatively short timeframe and this is why they were placed in non-family based care.
- There is no clear reunification pattern according to gender or age. Reunification for Aboriginal and/or Torres Strait Islander children is about 6% lower.

Table 22: Reunification outcomes at 18 months by primary substantiation and risk factors

			Continu	ed OOHC					NEW	ООНС					All ch	<u>nildren</u>		
		l still in OHC		nified	Т	otal		l still in OHC	Reu	nified	To	otal		d still in OHC	Reu	nified	To	otal
	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %
Gender																		
Male	131	74.0	43	24.3	177	100	101	69.7	40	27.6	145	100	239	72.4	84	25.5	330	100
Female	129	80.6	27	16.9	160	100	82	66.1	41	33.1	124	100	212	74.1	69	24.1	286	100
Aboriginal																		
Yes	104	81.9	21	16.5	127	100	65	69.1	26	27.7	94	100	173	76.9	47	20.9	225	100
No	155	75.6	46	22.4	205	100	115	68.0	53	31.4	169	100	274	72.1	101	26.6	380	100
Unknown					#	#					#	#					#	#
Age at OOHC																		
0	60	78.9	13	17.1	76	100	93	72.1	32	24.8	129	100	153	74.3	46	22.3	206	100
1	60	75.0	17	21.3	80	100	28	68.3	12	29.3	41	100	89	72.4	30	24.4	123	100
2	43	79.6	10	18.5	54	100	21	63.6	12	36.4	33	100	64	73.6	22	25.3	87	100
3	36	78.3	10	21.7	46	100	14	56.0	11	44.0	25	100	52	71.2	21	28.8	73	100
4 – 5 years	61	75.3	20	24.7	81	100	27	65.9	14	34.1	41	100	93	73.2	34	26.8	127	100
Age at OOHC																		
0 to 1 year	120	76.9	30	19.2	156	100	121	71.2	44	25.9	170	100	242	73.6	76	23.1	329	100
2 to 3 years	79	79.0	20	20.0	100	100	35	60.3	23	39.7	58	100	116	72.5	43	26.9	160	100
4 to 5 years	61	75.3	20	24.7	81	100	27	65.9	14	34.1	41	100	93	73.2	34	26.8	127	100
Total	260	77.2	70	20.8	337	100	183	68.0	81	30.1	269	100	451	73.2	153	24.8	616	100

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Table 23: Reunification outcomes at 18 months post eligibility

		C	Continu	ed OOH	<u>C</u>				NEW	ООНС					All ch	nildren		
		l still in OHC	Reu		Т.	otal		l still in OHC	Reu	nified	To	otal		l still in DHC	Reu	nified	To	otal
	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %
Care type		,,		,,,		/0		70										
Family based care	182	75.5	55	22.8	241	100	139	66.8	65	31.3	208	100	326	71.6	121	26.6	455	100
Non-family based care	8	47.1	8	47.1	17	100	#	#	#	#	12	100	9	31.0	19	65.5	29	100
Family based & Non-family	70	88.6	7	8.9	79	100	43	87.8	5	10.2	49	100	116	87.9	13	9.8	132	100
Care type																		
Foster care	60	85.7	9	12.9	70	100	46	73.0	16	25.4	63	100	106	79.1	26	19.4	134	100
Kinship Care	62	72.9	20	23.5	85	100	29	56.9	21	41.2	51	100	91	66.9	41	30.1	136	100
Residential/Commercial Property	8	47.1	8	47.1	17	100	#	#	#	#	12	100	9	31.0	19	65.5	29	100
Foster & Kinship	46	69.7	20	30.3	66	100	53	67.9	23	29.5	78	100	102	69.4	43	29.3	147	100
Foster & Residential Care/Commercial Property	16	88.9	#	#	18	100	#	#	#	#	22	100	37	86.0	6	14.0	43	100
Kindship & Residential Care/Commercial Property	15	88.2	#	#	17	100	#	#	#	#	#	#	18	85.7	#	#	21	100
Foster, Kinship & Residential Care/Commercial Property	31	86.1	#	#	36	100	#	#	#	#	12	100	#	#	#	#	49	100
Other Family based care	14	70.0	6	30.0	20	100	11	68.8	5	31.3	16	100	27	71.1	11	28.9	38	100
Other Family based & Non- family based care	8	100			8	100	#	#	#	#	11	100	18	94.7	#	#	19	100
Length of time in OOHC																		
3 months or less	#	#	#	#	#	#			7	100	7	100			7	87.5	8	100
>3 months to 6 months			11	100	11	100			#	#	8	100			18	94.7	19	100
>6 months to 9 months			7	70.0	10	100	#	#	#	#	19	100	#	#	24	82.8	29	100
>9 months <1 year	#	#	#	#	#	100			17	100	17	100			23	100	23	100
1 year to 18 mths	#	#	#	#	52	100	#	#	#	#	39	100	#	#	81	87.1	93	100
>18 to 21 mths	9	100			9	100	#	#	#	#	9	100	17	94.4			18	100
>21mth to <2 y years	35	100			35	100	22	100			22	100	60	100			60	100
2 years	213	100			213	100	148	100			148	100	366	100			366	100
Total	260	77.2	70	20.8	337	100	183	68.0	81	30.1	269	100	451	73.2	153	24.8	616	100

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#### Interpretation

• There is no clear reunification pattern according to primary substantiated maltreatment type. Somewhat surprisingly, it is difficult to discern a reunification pattern either by number of risk factors or the presence of alcohol, substance use, domestic violence or mental health.

Table 24: Reunification outcomes at 18 months by primary substantiation and risk factors

		Co	ntinu	ed OOI	<u>1C</u>				NEW	/ ООНС					All ch	ildren		
		ld still in DOHC	Reu	nified	1	otal otal		still in DHC	Reu	nified	Т.	otal		l still in OHC	Reui	nified	T	otal
	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %
Primary substantiated abuse or neglect																		
Emotional Abuse	55	83.3	7	12.1	66	100.0	26	60.5	16	37.2	43	100.0	81	74.3	24	22.0	109	100.0
Neglect	#	#	#	#	165	100.0	99	70.7	39	27.9	140	100.0	232	75.3	70	22.7	308	100.0
Physical Abuse	58	68.2	46	31.8	85	100.0	54	72.0	19	25.3	75	100.0	117	70.1	48	28.7	167	100.0
Sexual Abuse	16	80.0		20.0	20	100.0	#	#	#	#	10	100.0	20	66.7	10	33.3	30	100.0
Number of significant risk factors																		
None	40	70.2		28.1	57	100.0	30	58.8	20	39.2	51	100.0	70	64.2	37	33.9	109	100.0
1	62	76.5	70	21.0	81	100.0	22	51.2	20	46.5	43	100.0	88	68.8	37	28.9	128	100.0
2	51	89.5	7	10.5	57	100.0	33	80.5	8	19.5	41	100.0	85	85.9	14	14.1	99	100.0
3	#	#	#	#	47	100.0	39	76.5	11	21.6	51	100.0	74	74.7	23	23.2	99	100.0
4	24	75.0	46	21.9	32	100.0	#	#	#	#	30	100.0	52	80.0	11	16.9	65	100.0
5	15	75.0		15.0	20	100.0	12	48.0	13	52.0	25	100.0	27	60.0	16	35.6	45	100.0
6 - 10	34	79.1		20.9	43	100.0	21	75.0	6	21.4	28	100.0	55	77.5	15	21.1	71	100.0
Significant risk factor ^																		
Alcohol use	28	73.7	70	23.7	38	100.0	5	45.5	6	54.5	11	100.0	33	67.3	15	30.6	49	100.0
Other substance use	113	79.6	7	19.0	142	100.0	74	70.5	29	27.6	105	100.0	191	75.8	57	22.6	252	100.0
Domestic violence	#	#	#	20.9	110	100.0	63	75.0	19	22.6	84	100.0	152	76.4	43	21.6	199	100.0
Mental health	81	71.7	46	26.5	113	100.0	73	67.6	34	31.5	108	100.0	156	69.6	65	29.0	224	100.0
Total	260	77.2	70	20.8	337	100.0	183	68.0	81	30.1	269	100.0	451	73.2	153	24.8	616	100.0

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## Reunification by Aboriginal and Non-Aboriginal

Due to small numbers, Table 25 and Table 26 do not include the Prior OOHC group.

Of the 606 children in the 'New and Continued' OOHC groups in 2016/17:

- 4.1% of Aboriginal children (n=9) were reunified at 6 months follow-up compared to 4.8% non-Aboriginal children (n=18);
- 13.6% of Aboriginal children (n=30) were reunified at 12 months follow-up compared to 14.7% non-Aboriginal children (n=55);
- 21.3% of Aboriginal children (n=47) were reunified at 18 months follow-up compared to 26.5% non-Aboriginal children (n=99); and
- 25.8% of Aboriginal children (n=57) were reunified at 24 months follow-up compared to 28.9% non-Aboriginal children (n=108).

#### Interpretation

• Reunification for Aboriginal and Torres Strait Islander children is less than 1% lower than Non-Aboriginal children at 6 months, 5.2% lower at 18 months and 3.1% lower at 24 months.

Table 25: Children reunified at 6, 12, 18 and 24 months by Aboriginal or Non-Aboriginal, among <u>'New & Continued'</u> OOHC group (n=606), 2016/17

Among the 'New &				% Reun	ified at					
Continued' OOHC	6 m	onths	12 n	nonths	18 n	nonths	24 n	nonths	T-	otal
group	n	_		Row	n	Row	n	Row	n	Row %
		%		%		%		%		
Aboriginal and/or										
<b>Torres Strait Islander</b>										
Yes	9	4.1	30	13.6	47	21.3	57	25.8	221	100.0
No	18	4.8	55	14.7	99	26.5	108	28.9	374	100.0
Difference		-0.7		-1.1		-5.2		-3.1		
Don't know	3	27.3	4	36.4	5	45.5	5	45.5	11	100.0
Total	30	5.0	89	14.7	151	24.9	170	28.1	606	100.0

## Reunification by Aboriginal and Non-Aboriginal – New and Continued OOHC groups

#### Interpretation

- For the 'New' OOHC group in 2016/17, reunification for Aboriginal and/or Torres Strait Islander children was 0.6% higher at 12 months, 3.7% lower at 18 months and 0.3% lower at 24 months than Non-Aboriginal children.
- Reunification for Aboriginal and/or Torres Strait Islander children for the 'Continued' OOHC group was 1.9% lower at 12 months, 5.9% lower at 18 months and 4.7% lower at 24 months than Non-Aboriginal children.

Table 26: Children reunified at 12, 18 and 24 months by Aboriginal or Non-Aboriginal, among <u>'New or Continued'</u> OOHC group (n=606), 2016/17

				% Reuni	fied at					
	6 m	onths	12 m	onths	18 m	onths	24 m	onths	To	otal
	n	Row	n	Row	n	Row	n	Row	n	Row %
		%		%		%		%		
		Ar	nong the	<u>'New'</u> O	OHC gro	up				
Aboriginal and/or										
<b>Torres Strait Islander</b>										
Yes			20	21.3	26	27.7	32	34.0	94	100.0
No			35	20.7	53	31.4	58	34.3	169	100.0
Difference				0.6		-3.7		-0.3		
Total			57	21.2	81	30.1	92	34.2	269	100.0
		Amo	ng the <u>'C</u>	ontinued	OOHC ¿	group				
Aboriginal and/or										
<b>Torres Strait Islander</b>										
Yes			10	7.9	21	16.5	25	19.7	127	100.0
No			20	9.8	46	22.4	50	24.4	205	100.0
Difference				-1.9		-5.9		-4.7		
Total			32	9.5	70	20.8	78	23.1	337	100.0

Note: Reunified at 6 months not included due to small numbers. Children who did not have Aboriginal and/or Torres Strait Islander recorded have not been reported as a response category in the table but have remained in the totals.

## Reunification at 5 years - 2014/15

This analysis was requested to a five year period for reunification to occur. Reunification rates at five years are presented for the 2014/15 cohort. Due to small numbers, the 'Continued' and 'Prior' OOHC groups has been combined.

#### Interpretation

- The proportion of children reunified at 5 years was 24.3%. This was similar to the reunification rate at 24 months for the 2016/17 cohort (28.4%).
- It is important to note that 70% of the eligible cohort had been placed onto a GOM18 by 5 years of follow-up.
- We interpret this to mean that once a child is placed on a GOM 18 order, very few are reunified.

Table 27: Reunification outcomes at 5 years for children in the 2014/15

		ied / Prior OHC	Nev	v OOHC	Т	otal
	n	col %	n	col %	n	col %
Reunified at 5 years months post eligibility						
Not in OOHC: Reunified	52	23.4	62	25.0	114	24.3
Not in OOHC: Other	#	#	#	#	#	#
In OOHC: Not on a GOM 18 order	#	#	#	#	#	#
In OOHC: On a GOM 18 order	162	73.0	167	67.3	329	70.0
Total	222	100.0	248	100.0	470	100.0

**Note**: 'Prior OOHC' group was combined with 'Continued OOHC' group as there were only 9 children in the 'Prior OOHC' group. **GOM 18 Order**: An order granting guardianship of the child or young person to the Minister/Chief Executive until the child or young person is 18 years of age.

# cells redacted due to small numbers

## Reunification at 5 years by age at OOHC placement - 2014/15

#### Interpretation

• Reunification proportions tend to increase with age at OOHC. However, there is a suggestion, albeit not strong that this pattern is reversed if the child transitions to a GOM18. This observation suggests that if a child is on a care trajectory of a GOM18 the likelihood of reunification is low.

Table 28: Child age at first OOHC placement 2014/2015 by reunification outcomes at 5 years, 2014/15

		Con	tinued /	Prior OC	OHC				New	ООНС					Т	otal		
	Reuni		In OO	HC: On	Т	otal	Reuni	fied at 5	In OO	HC: On	To	otal	Reun	ified at 5	In OC	OHC: On	To	otal
	ye		a GC	OM 18			У	ears	a GC	OM 18			У	ears/	a G	OM 18		
			or	der					Or	der					0	rder		
	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %	N	row %
Age at OOHC 2014/2015																		
0	8	16.7	35	72.9	48	100.0	22	21.4	71	68.9	103	100.0	30	19.9	106	70.2	151	100.0
1	9	19.1	38	80.9	47	100.0	12	29.3	27	65.9	41	100.0	21	23.9	65	73.9	88	100.0
2	13	28.9	31	68.9	45	100.0	7	25.9	17	63.0	27	100.0	20	27.8	48	66.7	72	100.0
3	6	22.2	20	74.1	27	100.0	#	#	21	84.0	25	100.0	9	17.3	41	78.8	52	100.0
4	7	29.2	17	70.8	24	100.0	13	37.1	20	57.1	35	100.0	20	33.9	37	62.7	59	100.0
5 years	9	29.0	21	67.7	31	100.0	#	#	11	64.7	17	100.0	14	29.2	32	66.7	48	100.0
Total	52	23.4	162	73.0	222	<b>100</b> .0	62	25.0	167	67.3	248	100.0	114	24.3	329	70.0	470	100.0

# cells redacted due to small numbers

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#### Reunification at 5 years by time in OOHC - 2014/15

Note: During the 5 year follow-up children can have more than 5 years in OOHC as placements overlap. For example, in the placements data it is common for children to 'appear' to be in a respite and long-term placement at the same time. This means number of days in care can equal more than 365 in one year.

#### Interpretation

• Of the 114 children reunified at 5 years, 86% (total reunified column: 15.8+26.3+43.9) spent less than 2 years in care during that 5 year period. Of the 329 children who were on a GOM 18 order, 75.7% spent 5+ years in OOHC.

Table 29: Number of Days in OOHC from eligible date to 5 years follow-up by reunification outcome at 5 years, 2014/15

		Con	tinued ,	Prior OC	ЭНС		New OOHC							Total						
		fied at 5 ears	GOI orde	C: On a M 18 er at 5 ears	To	otal		ied at 5 ears	GO! orde	C: On a M 18 er at 5 ears	To	otal		ied at 5 ars	GOI orde	C: On a VI 18 or at 5 ars	To	otal		
	N	col %	N	col %	N	col %	N	col %	N	col %	N	col %	N	col %	N	col %	Ν	col %		
Time OOHC over 5																				
years																				
Less than 6 months	9	17.3			10	4.5	9	14.5			11	4.4	18	15.8			21	4.5		
>6 mths to < 1 year	17	32.7			18	8.1	13	21.0			15	6.0	30	26.3			33	7.0		
1 years to < 2 years	24	46.2			25	11.3	#	#	#	#	#	#	50	43.9			57	12.1		
2 years to < 3 years	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#		
3 years to < 4 years	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#	#		
4 years to < 5 years			34	21.0	36	16.2			32	19.2	33	13.3			66	20.1	69	14.7		
5+ years			123	75.9	126	56.8			126	75.4	132	53.2			249	75.7	258	54.9		
Total	52	100.0	162	100.0	222	100.0	62	100.0	167	100.0	248	100.0	114	100.0	329	100.0	470	100.0		

# cells redacted due to small numbers

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# Reunification at 5 years by family and non-family based OOHC – 2014/15

These are not mutually exclusive care types because when children experience both types of care they are counted in both categories.

Table 30: Number of Days in Family and Non-Family based OOHC from eligible date to 5 years follow-up by reunification outcome at 5 years, 2014/15

		Con	tinued /	Prior OO	НС				New (	онс					То	otal		
			GOM :	C: On a 18 order years	To	otal	Reunifi yea		GOM 1	C: On a .8 order years	To	otal	Reunifi yea	ed at 5 ars	OOHC GOM 1 at 5 y		Tot	al
	Ν	col %	N	col %	N	col %	N	col %	N	col %	N	col %	N	col %	N	col %	N	col %
Time in <u>Family</u> based care																		
None	8	15.4	8	4.9	16	7.2	#	#			8	3.2	12	10.5	8	2.4	24	5.1
Less than 6 months	8	15.4	#	#	10	4.5	10	16.1	#	#	15	6.0	18	15.8	#	#	25	5.3
>6 mths to < 1 year	13	25.0	#	#	17	7.7	14	22.6	#	#	18	7.3	27	23.7	#	#	35	7.4
1 years to < 2 years	21	40.4	#	#	25	11.3	25	40.3	#	#	31	12.5	46	40.4	7	2.1	56	11.9
2 years to < 3 years			#	#	#	#	7	11.3	12	7.2	19	7.7	7	6.1	16	4.9	23	4.9
3 years to < 4 years	#	#	9	5.6	11	5.0	#	#	12	7.2	15	6.0	#	#	21	6.4	26	5.5
4 years to < 5 years			37	22.8	40	18.0			35	21.0	36	14.5			72	21.9	76	16.2
5+ years			97	59.9	99	44.6			100	59.9	106	42.7			197	59.9	205	43.6
Time in Non- Family based care																		
None	40	76.9	117	72.2	163	73.4	43	69.4	115	68.9	171	69.0	83	72.8	232	70.5	334	71.1
Less than 6 months	#	#	16	9.9	21	9.5	12	19.4	23	13.8	36	14.5	16	14.0	39	11.9	57	12.1
>6 mths to < 1 year	7	 13.5	6	3.7	14	6.3	#	#	5	3.0	8	3.2	10	8.8	11	3.3	22	4.7
1 years to < 2 years	#	#	6	3.7	7	3.2	#	#	12	7.2	17	6.9	#	#	18	5.5	24	5.1
2 years to < 3 years			#	#	#	#	#	#	5	3.0	9	3.6	#	#	8	2.4	12	2.6
3 years to < 4 years			#	#	#	#			#	#	#	#			7	2.1		1.5
4 years to < 5 years			#	#	#	#			#	#	#	#			7	2.1	7	1.5
5+ years			7	4.3	7	3.2									7	2.1	7	1.5
Total	52	100.0	162	100.0	222	100.0	62	100.0	167	100.0	248	100.0	114	100.0	329	100.0	470	100

# Reunification at 5 years by number of days spent in OOHC by age at OOHC placement – 2014/15

Table 31 shows the 329 children in the 2014/15 reunification cohort from Table 33 on the previous page, who were on a GOM 18 order at 5 years follow-up (70% of the 470 children in the 2014/15 cohort).

We can see from Table 31 that during those 5 years the 329 children spent a mean of 1,812.3 days in OOHC (Median 1,827 days). Since those children were on a GOM 18 order at 5 years follow-up, it is likely they will then go on to spend another;

- 12 years in OOHC for those aged less than 1 year at first placement in 2014/2015;
- 11 years in OOHC for those aged 1 year at first placement in 2014/2015;
- 10 years in OOHC for those aged 2 years at first placement in 2014/2015;
- 9 years in OOHC for those aged 3 years at first placement in 2014/2015;
- 8 years in OOHC for those aged 4 years at first placement in 2014/2015; and
- 7 years in OOHC for those aged 5 years at first placement in 2014/2015.

#### Interpretation

• If a child is aged 1 year at their first placement in 2014/2015 and at 5 years follow-up is on GOM 18 order, they are likely to spend approximately 16 years in OOHC.

Table 31: Days in OOHC from eligibility to 5 years follow-up for children on a GOM 18 order, by age at first OOHC placement in 2014/2015

	Cor	ntinued / Prior O	ОНС		New OOHC			Total	
Age at first OOHC	OOHC: On	a GOM 18 orde	er at 5 years	OOHC: On	a GOM 18 orde	er at 5 years	OOHC: On	a GOM 18 orde	er at 5 years
placement in 2014/2015	Number children	Mean days OOHC	Median days OOHC	Number children	Mean days OOHC	Median days OOHC	Number children	Mean days OOHC	Median days OOHC
Less than 1 year	35	1842.7	1826	71	1822.0	1827	106	1828.8	1827
1 year	38	1836.7	1826	27	1814.6	1838	65	1827.5	1827
2 years	31	1819.5	1826	17	1851.7	1832	48	1830.9	1828
3 years	20	1832.8	1826	21	1778.4	1827	41	1804.9	1826
4 years	17	1766.0	1826	20	1745.7	1827	37	1755.0	1826
5 years	21	1805.0	1829	11	1715.2	1827	32	1774.2	1827
Total	162	1822.7	1826	167	1802.2	1827	329	1812.3	1827

**Note**: 'Prior OOHC' group was combined with 'Continued OOHC' group as there were only 9 children in the 'Prior OOHC' group. During the 5 year follow-up children can have more than 5 years in OOHC as placements overlap, for example a children can have a respite placement open and a long term placement open at the same time.

Reunification at 5 years by number of days spent in family and non-family based OOHC - 2014/15

Table 32: Mean and median number of days in family and non-family based OOHC from eligible date to 5 years follow-up by reunification outcome at 5 years, 2014/15

	Co	ontinued / Prior OOI	HC		New OOHC			Total	
	Reunified at 5 years	OOHC: On a GOM 18 order at 5 years	Total	Reunified at 5 years	OOHC: On a GOM 18 order at 5 years	Total	Reunified at 5 years	OOHC: On a GOM 18 order at 5 years	Total
Number of days in Family & Non-Family based care									
N children	52	162	222	62	167	248	114	329	470
Mean days	366.1	1822.7	1459.1	470.7	1802.2	1409.8	423.0	1812.3	1433.1
SD of Mean days	229.1	137.0	653.2	286.1	186.1	647.1	265.7	163.8	649.8
Median days	363	1826	1826	437	1827	1826	371	1827	1826
Min days	60	816	60	1	584	1	1	584	1
Max days	1406	2274	2274	1260	2082	2120	1406	2274	2274
Number of days in <u>Family</u> based care									
N children	52	162	222	62	167	248	114	329	470
Mean days	301.5	1623.5	1297.1	404.2	1655.9	1280.4	357.4	1640.0	1288.3
SD of Mean days	236.2	513.7	732.1	297.6	415.7	702.8	275.0	466.1	716.0
Median days	345	1826	1818	405	1826	1808	363	1826	1811
Min days	0	0	0	0	3	0	0	0	0
Max days	1216	2272	2272	1260	2082	2094	1260	2272	2272
Number of days in Non-Family based care									
N children	52	162	222	62	167	248	114	329	470
Mean days	64.6	199.2	162.0	66.4	146.2	129.4	65.6	172.3	144.8
SD of Mean days	135.2	481.2	420.8	181.5	356.0	323.1	161.3	424.2	372.4
Median days	0	0	0	0	0	0	0	0	0
Min days	0	0	0	0	0	0	0	0	0
Max days	645	1826	1826	772	1780	1780	772	1826	1826

Children placed on a GOM 18 order over time - 2014/15, 2015/16 & 2016/17

#### Interpretation

• Of the 470 children in the reunification cohort in 2014/15, 329 (70.0%) children were in OOHC on a GOM 18 order at 5 years follow-up. This is higher at 76.1% for the 'Continued & Prior' group compared to the 'New' OOHC group.

Table 33: Number of children on a GOM 18 order at 6, 12, 18, 21, 24 months, and 3, 4 and 5 years post eligibility , 2014/15, 2015/16 & 2016/17

				Р	roporti	on of chile	dren in (	OOHC on	a <mark>GOM</mark>	18 order	a				T	otal
	12 m	onths	18 m	onths	<b>21</b> m	onths	24 m	onths	3 у	ears	4 y	ears	5 y	ears		
	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row
		%		%		%		%		%		%		%		%
Among the																
'Continued & Prior																
OOHC' group																
2014/2015	10	4.7	100	46.9	103	48.4	115	54.0	158	74.2	162	76.1	162	76.1	213	100.0
2015/2016	17	6.1	148	53.0	158	56.6	172	61.6	201	72.0	212	76.0			279	100.0
2016/2017	14	4.2	137	40.7	149	44.2	164	48.7	223	66.2					337	100.0
Among the 'New																
OOHC' group																
2014/2015	13	5.2	125	50.4	136	54.8	139	56.0	159	64.1	165	66.5	167	67.3	248	100.0
2015/2016	20	6.3	116	36.8	130	41.3	141	44.8	176	55.9	189	60.0			315	100.0
2016/2017	17	6.3	96	35.7	110	40.9	112	41.6	158	58.7					269	100.0
Total																
2014/2015	23	4.9	225	47.9	239	50.9	254	54.0	317	67.4	327	69.6	<b>329</b>	70.0	470	100.0
2015/2016	37	6.1	264	43.5	288	47.4	313	51.6	377	62.1	401	66.1			607	100.0
2016/2017	31	5.0	233	37.8	259	42.0	276	44.8	381	61.9					616	100.0

Note: 'Prior OOHC' group was combined with 'Continued OOHC' group as there were small numbers in the 'Prior OOHC' group.

# Reunification at 2 years - 2016/17

The following replicates the analysis presented on the 2014/15 cohort for the 2016/17 cohort with a 24-month follow-up period.

Of the 616 children in 2016/17, at 2 years follow-up:

- 175 (28.4%) were reunified; and
- 276 (44.8%) were in OOHC on a GOM 18 order.

#### Interpretation

• In this 2 year time window the proportion reunified was 28%.

Table 34: Reunification outcomes at 2 years for children in the 2016/17 cohort

		ed / Prior DHC	New	ООНС	To	tal
	n	col %	n	col %	n	col %
Reunified at 2 years months post eligibility						
Not in OOHC: Reunified	83	23.9	92	34.2	175	28.4
Not in OOHC: Other	7	2.0	4	1.5	11	1.8
In OOHC: Not on a GOM 18 order	93	26.8	61	22.7	154	25.0
In OOHC: On a GOM 18 order	164	47.3	112	41.6	276	44.8
Total	347	100.0	269	100.0	616	100.0

**Note**: 'Prior OOHC' group was combined with 'Continued OOHC' group as there were only 9 children in the 'Prior OOHC' group. **GOM 18 Order**: An order granting guardianship of the child or young person to the Minister/Chief Executive until the child or young person is 18 years of age.

# Reunification at 2 years by time in OOHC - 2016/17

Note: During the 24 month follow-up children can have more than 24 months in OOHC as placements overlap. For example, in the placements data it is common for children to 'appear' to be in a respite and long-term placement at the same time. This means number of days in care can equal more than 365 in one year.

#### Interpretation

- Of the children reunified at 24 months, ~99% of the 175 children reunified spent less than 2 years in care during that 24-month period.
- Of the 276 children who were on a GOM 18 order, 78.3% spent 2+ years in OOHC.

Table 35: Number of Days in OOHC from eligible date to 24 months follow-up by reunification outcome at 24 months, 2016/17

		Con	tinued /	Prior OC	DHC				New	ООНС					To	tal		
		ed at 24 nths	OOHC GON order mor	Л 18 at 24	То	tal		fied at onths	GOI order	C: On a VI 18 at 24 nths	То	tal		fied at onths	OOHC GON order mor	Л 18 at 24	То	tal
	N	col %	N	col %	N	row %	N	col %	N	col %	N	col %	Ν	col %	N	col %	N	col %
Time OOHC over 24 months																		
Less than 6 months	#	#			12	3.5	#	#			15	5.6	25	14.3			27	4.4
>6 mths to < 1 year	13	15.7			16	4.6	34	37.0			35	13.0	47	26.9			51	8.3
1 years to < 2 years	58	69.9	32	19.5	112	32.3	43	46.7	28	25.0	93	34.6	101	57.7	60	21.7	205	33.3
2+ years	#	#	132	80.5	207	59.7	#	#	84	75.0	126	46.8	#	#	216	78.3	333	54.1
Total	83	100.0	164	100.0	347	100.0	92	100.0	112	100.0	269	100.0	175	100.0	276	100.0	616	100.0

# cells redacted due to small numbers

# Reunification at 2 years by time in family and non-family based OOHC - 2016/17

These are not mutually exclusive care types because when children experience both types of care they are counted in both categories.

Table 36: Number of days in Family and Non-Family based OOHC from eligible date to 24 months follow-up by reunification outcome at 24 months, 2016/17

		Con	tinued /	Prior OC	ЭНС				New	ООНС					To	tal		
		ied at 24 onths	GOI ordei	C: On a VI 18 r at 24 nths	To	otal		ified at ionths	GOI orde	C: On a M 18 r at 24 nths	To	otal		fied at onths	GOI orde	C: On a VI 18 r at 24 nths	To	otal
	N	col %	N	col %	N	row %	N	col %	N	col %	N	col %	Ν	col %	N	col %	N	col %
Time in Family																		
based care																		
None	8	9.6	#	#	17	4.9	11	12.0	#	#	12	4.5	19	10.9	#	#	29	4.7
Less than 6 months	13	15.7	9	5.5	25	7.2	11	12.0			17	6.3	24	13.7	9	3.3	42	6.8
>6 mths to < 1 year	9	10.8	7	4.3	21	6.1	30	32.6	#	#	35	13.0	39	22.3	9	3.3	56	9.1
1 years to < 2 years	52	62.7	46	28.0	133	38.3	39	42.4	39	34.8	105	39.0	91	52.0	85	30.8	238	38.6
2+ years	#	#	100	61.0	151	43.5	#	#	70	62.5	100	37.2	#	#	170	61.6	251	40.7
Time in Non-																		
Family based care																		
None	64	77.1	125	76.2	252	72.6	76	82.6	89	79.5	209	77.7	140	80.0	214	77.5	461	74.8
Less than 6 months	8	9.6	13	7.9	43	12.4	8	8.7	15	13.4	33	12.3	16	9.1	28	10.1	76	12.3
>6 mths to < 1 year	7	8.4	8	4.9	20	5.8	6	6.5	6	5.4	16	5.9	13	7.4	14	5.1	36	5.8
1 years to < 2 years	#	#	16	9.8	25	7.2	#	#	#	#	#	#	#	#	17	6.2	35	5.7
2+ years			#	#	7	2.0			#	#	#	#			#	#	8	1.3
Total	83	100.0	164	100.0	347	100.0	92	100.0	112	100.0	269	100.0	175	100.0	276	100.0	616	100.0

# Cells redacted due to small numbers

# Reunification at 2 years by number of days in family and non-family based OOHC - 2016/17

Table 37: Days in OOHC from eligible date to 24 months follow-up by reunification outcome at 24 months, 2016/17

	Co	ntinued / Prior OO	HC		New OOHC			Total	
	Reunified at 24 months	OOHC: On a GOM 18 order at 24 months	Total	Reunified at 24 months	OOHC: On a GOM 18 order at 24 months	Total	Reunified at 24 months	OOHC: On a GOM 18 order at 24 months	Total
Number of days in Family & Non-Family based care									
N	83	164	347	92	112	269	175	276	616
Mean days	416.0	734.0	644.3	346.7	734.1	592.9	379.5	734.1	621.9
SD mean days	164.4	26.8	169.7	175.7	35.1	214.0	173.5	30.4	191.9
Median days	411	731	730	344	730.5	728	385	731	730
Min	107	621	86	1	535	1	1	535	1
Max	748	866	868	730	845	845	748	866	868
Number of days in <u>Family</u> based care									
N	83	164	347	92	112	269	175	276	616
Mean days	358.7	650.9	565.2	313.5	704.0	546.8	335.0	672.5	557.1
SD mean days	199.7	199.5	241.5	202.7	108.2	241.8	202.0	170.3	241.6
Median days	387	730	724	316	730	695	369	730	715
Min	0	0	0	0	0	0	0	0	0
Max	748	866	866	730	845	845	748	866	866
Number of days in Non-Family based care									
N	83	164	347	92	112	269	175	276	616
Mean days	57.2	83.1	79.2	33.1	30.1	46.1	44.6	61.6	64.7
SD mean days	144.3	196.0	185.3	95.8	97.2	127.0	121.5	165.1	163.1
Median days	0	0	0	0	0	0	0	0	0
Min	0	0	0	0	0	0	0	0	0
Max	709	731	731	456	730	730	709	731	731

# Part 4. Trends in cohort composition

# Number eligible for reunification cohort over time

In 2018/2019, there were 650 children aged less than 6 years eligible for the reunification cohort, 337 were in the 'Continued OOHC' group, 15 in the 'Prior OOHC' group and 298 in the 'New OOHC' group.

### Interpretation

It seems that the absolute number of eligible children is increasing over time.

Table 38: Number of children aged less than 6 years in OOHC <u>eligible for reunification cohort</u> each financial year from July 2014 to June 2019

	Continu	ied OOHC	Prio	OOHC	New	ООНС	T	otal
	n	Row %	n	Row %	n	Row %	n	Row %
2014/2015	213	45.3	9	1.9	248	52.8	470	100.0
2015/2016	279	46.0	13	2.1	315	51.9	607	100.0
2016/2017	337	54.7	10	1.6	269	43.7	616	100.0
2017/2018	323	55.3	17	2.9	244	41.8	584	100.0
2018/2019	337	51.8	15	2.3	298	45.8	650	100.0

### Reunifications rates over time

#### Interpretation

- Look at the 5 years column. By 5 years for the 2014/15 eligible reunification cohort, 23.4% of the Continued & Prior OOHC group was reunified and 25.0% of the New OOHC group.
- The overall patterns of reunification are similar across 2014/15 through 2016/17 for all time windows from 6 to 24 months. However, within the New OOHC group there are some temporal differences for 2014/15.

Table 39: Reunification outcomes at 6, 12, 18, 21, 24 months and 5 years post eligibility, over time

					Numbe	er of chi	ldren R	eunifie	d at (%	reunific	ation ra	ite) at					Te	otal
	6 mc	onths	12 m	onths	18 mc	onths	21 mc	onths	24 m	onths	3 ye	ars	4 ye	ears	5 y	ears		
	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row	n	Row %
		%		%		%		%		%		%		%		%		
Among the 'Continued &																		
prior OOHC' group																		
2014/2015	10	4.5	45	20.3	50	22.5	53	23.9	53	23.9	51	23.0	51	23.0	52	23.4	222	100.0
2015/2016	14	4.8	25	8.6	46	15.8	50	17.1	61	20.9	65	22.3	67	22.9			292	100.0
2016/2017	13	3.7	33	9.5	72	20.7	74	21.3	83	23.9	89	25.6					347	100.0
2017/2018	11	3.2	33	9.7	72	21.2	82	24.1	93	27.4							340	100.0
2018/2019	8	2.3	34	9.7													352	100.0
Among the 'new' group		<u>-</u>				-				-								-
2014/2015	17	6.9	31	12.5	49	19.8	54	21.8	59	23.8	65	26.2	67	27.0	62	25.0	248	100.0
2015/2016	32	10.2	58	18.4	88	27.9	97	30.8	101	32.1	106	33.7	106	33.7			315	100.0
2016/2017	17	6.3	57	21.2	81	30.1	84	31.2	92	34.2	93	34.6					269	100.0
2017/2018	#	#	19	7.8	41	16.8	50	20.5	51	20.9							244	100.0
2018/2019	23	7.7	42	14.1													298	100.0

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# Reunification rates over time by Aboriginal and Non-Aboriginal

#### Interpretation

- Look at the 5 years column. By 5 years for the 2014/15 eligible reunification cohort a lower proportion of Aboriginal children were reunified compared to Non-Aboriginal children. For example:
- 20.5% of Aboriginal children in the 'Continued & Prior OOHC' group was reunified compared to 25.2% of Non-Aboriginal children;
- 19.1% of Aboriginal children in the 'New OOHC' group were reunified compared to 27.0% of Non-Aboriginal children.

Table 40: Reunification outcomes at 6, 12, 18, 21, 24 months and 5 years post eligibility, over time by Aboriginal and Non-Aboriginal

		months 12 months 15				ımber of o	childre	n <b>Reunifi</b>	ed at (	% reunific	ation r	ate)						otal
	6 m	onths	12 m	nonths	18 m	nonths	21 n	nonths	24 n	nonths	3 y	ears	4	years	5	years		
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %
							Abori	ginal Child	dren						i			
Among the 'Continued &																		
<u>Prior OOHC'</u> group																		
2014/2015	#	#	16	20.5	14	17.9	16	20.5	15	19.2	14	17.9	15	19.2	16	20.5	78	100.0
2015/2016	#	#	7	7.4	12	12.8	14	14.9	17	18.1	18	19.1	20	21.3			94	100.0
2016/2017	#	#	10	7.5	21	15.8	24	18.0	28	21.1	29	21.8					133	100.0
2017/2018	#	#	11	9.2	22	18.3	25	20.8	32	26.7							120	100.0
2018/2019	#	#	11	8.2													134	100.0
Among the 'new' group																		
2014/2015	#	#	10	14.7	10	14.7	13	19.1	11	16.2	15	22.1	17	25.0	13	19.1	68	100.0
2015/2016	#	#	15	12.9	24	20.7	25	21.6	26	22.4	30	25.9	31	26.7			116	100.0
2016/2017	#	#	20	21.3	26	27.7	27	28.7	32	34.0	32	34.0					94	100.0
2017/2018	#	#	9	9.7	21	22.6	22	23.7	22	23.7							93	100.0
2018/2019	#	#	14	12.1													116	100.0
					_	N	on-Abo	original Cl	nildren	l							_	
Among the 'Continued &																		
<u>Prior OOHC'</u> group																		
2014/2015	#	#	29	20.3	36	25.2	37	25.9	38	26.6	37	25.9	36	25.2	36	25.2	143	100.0
2015/2016	#	#	16	8.2	32	16.3	34	17.3	42	21.4	45	23.0	45	23.0			196	100.0
2016/2017	#	#	22	10.4	49	23.2	48	22.7	53	25.1	58	27.5					211	100.0
2017/2018	#	#	22	10.2	49	22.7	56	25.9	60	27.8							216	100.0
2018/2019	#	#	23	10.6													216	100.0

Table 40: Reunification outcomes at 6, 12, 18, 21, 24 months and 5 years post eligibility, over time by Aboriginal and Non-Aboriginal

					Nu	mber of o	childre	en <b>Reunifi</b>	ed at	(% reunific	ation	rate)					Т	otal
	6 m	nonths	12 m	onths	18 m	onths	21 ו	months	24 r	nonths	3 y	ears/	4	years	5	years		
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %
Among the 'New' group		Ē				-												_
2014/2015	#	#	20	11.2	38	21.3	40	22.5	47	26.4	49	27.5	49	27.5	48	27.0	178	100.0
2015/2016	#	#	42	21.4	63	32.1	70	35.7	73	37.2	74	37.8	73	37.2			196	100.0
2016/2017	#	#	35	20.7	53	31.4	55	32.5	58	34.3	59	34.9					169	100.0
2017/2018	#	#	10	6.8	20	13.5	28	18.9	29	19.6							148	100.0
2018/2019	#	#	28	15.6													180	100.0

<sup>#</sup> Cells redacted due to small numbers

# Part 5. Selected examples of SA government service use

Note: Due to small numbers, the 'Prior OOHC' group was removed from all hospital tables.

Table 41 and Table 42 below present child hospitalisations and emergency department presentations for the period between July 2016 and June 2018 (24-month period). This means we can observe hospitalisations/ED presentations for every child for the same period (24 months).

Appendix A contains tables on hospitalisations/ED presentations using an observation window from eligibility date up to June 2018 (most recent hospital/emergency data). This may mean that the follow-up period when these events were observed was not consistent for all children. Results from these analyses were similar.

# Hospital Admissions for children

- 33.5% of the eligible cohort had one or more hospitalisations.
- 15.6% of the cohort had 2 or more hospitalisations.
- 16.3% of the cohort had at least one paediatric potentially preventable hospitalisations (PPH).

#### Interpretation

• This pattern shows excess rates of hospitalisations. For reference, the average hospitalisation rate over a 24-month period in the general population of children aged <6 is 18.2%.

Table 41: Ever admitted to a hospital from July 2016 to June 2018 (24-month period)

	Cont	inued	N	ew	To	tal
	n	col %	n	col %	n	col %
At least one hospitalisation						
No	236	70.0	167	62.1	403	66.5
Yes	101	30.0	102	37.9	203	33.5
Number of hospitalisations						
0	236	70.0	167	62.1	403	66.5
1	62	18.4	46	17.1	108	17.8
2	22	6.5	15	5.6	37	6.1
3	6	1.8	16	5.9	22	3.6
4 or more	11	3.3	25	9.3	36	5.9
At least one hospitalisation for paediatric PPH						
No	284	84.3	223	82.9	507	83.7
Yes	53	15.7	46	17.1	99	16.3
Number of hospitalisations for paediatric PPH						
0	284	84.3	223	82.9	507	83.7
1	39	11.6	26	9.7	65	10.7
2 or more	14	4.2	20	7.4	34	5.6
Total	337	100.0	269	100.0	606	100.0

#### References:

Craig E, Anderson P, Jackson G, et al. Measuring potentially avoidable and ambulatory care sensitive hospitalisations in New Zealand children using a newly developed tool. N Z Med J 2012;125:38–50.

Procter A, Pilkington M, Lynch J, Smithers L, Chittleborough C. Potentially preventable hospitalisations in children: a comparison of definitions. Archives of Disease in Childhood 2020; 105:375-381 doi:10.1136/archdischild-2019-316945

# Emergency department presentations for children

- 54.1% of the eligible cohort had one or more presentations to an emergency department.
- 34.4% presented to ED 2 or more times.

### Interpretation

• ED presentations are not markedly higher. For reference, the average presentation rate in the general population of children aged <6 is 49.5%.

Table 42: Emergency department presentations from July 2016 to June 2018 (24-month period)

	Con	tinued	N	ew	To	tal
	n	col %	n	col %	n	col %
At least one emergency department presentations						
No	153	45.4	125	46.5	278	45.9
Yes	184	54.6	144	53.5	328	54.1
Number of emergency department presentations						
0	153	45.4	125	46.5	278	45.9
1	74	22	46	17.1	120	19.8
2	37	11	31	11.5	68	11.2
3	18	5.3	23	8.6	41	6.8
4	15	4.5	14	5.2	29	4.8
5 or more	40	11.9	30	11.2	70	11.6
At least one emergency department presentations for paediatric potentially preventable conditions						
No	235	69.7	183	68.0	418	69.0
Yes	102	30.3	86	32.0	188	31.0
Number of emergency department presentations for paediatric potentially preventable conditions						
0	235	69.7	183	68.0	418	69.0
1	48	14.2	36	13.4	84	13.9
2	27	8.0	27	10.0	54	8.9
3 or more	27	8.0	23	8.6	50	8.3
Total	337	100.0	269	100.0	606	100.0

## Parental hospital admissions and emergency department presentations

#### Identifying parents in the family file – 2016/17

The analysis of <u>parent</u> hospital admissions and emergency department presentations required linking children to the birth registration family file. Not all eligible children were in the birth registration family file, as this information was only available up to the end of 2016. For the 2016/17 Reunification cohort, out of the 616 eligible children in our linked data, 472 (76.6%) could be identified in our family files.

For these 616 children, there were 357 mothers and 401 co-parents. For simplicity, the following analyses assumed each child had a different mother and co-parent, even though in reality the cohort includes groups of siblings. An analysis that accounts for sibling structure is extremely complex and cannot be completed under the timelines for this report.

This assumption means that there is double counting of a small number of parents and was made because some parents could have children within the same cohort group and across different cohort groups (Continued, Prior OOHC, New OOHC). For example, a mother could have 2 children in the 'Continued' group or the mother could have 1 child in the 'New OOHC' group and another child in the 'Prior OOHC' group. Assigning the parent to one of these groups would mean that while you would get the correct count for 'Continued' group you would not get the correct count for the 'New OOHC' group. Therefore, the results should be interpreted as an upper bound of the number of hospital admissions and emergency department presentations.

Table 43: Children identified in the Birth Registration Family File

	Conti	nued	Prior OOHC		New OOHC		Total	
	n	col %	n	col %	n	col %	n	col %
Yes	282	83.7	5	50.0	185	67.8	472	76.6
No	55	16.3	5	50.0	84	31.2	144	23.4
Total	337	100.0	10	100.0	269	100.0	616	100.0

## Hospital admissions for mothers

Table 44 to Table 51 below present parent hospitalisations and emergency department presentations for the period between July 2016 and June 2018. This means we can observe hospitalisations/ED presentations for every parent for the same period (24 months).

Appendix A contains tables on hospitalisations/ED presentations using an observation window from eligibility date up to June 2018 (most recent hospital/emergency data). This may mean that the follow-up period when these events were observed was not consistent for all parents. Results from these analyses were similar.

#### Interpretation

• 66.8% of mothers had at least one hospitalisation

Table 44: Maternal hospital admissions from July 2016 to June 2018 (24 months period)

	Cont	Continued		New OOHC		tal
	n	col %	n	col %	n	col %
At least one hospitalisation						
No	116	41.1	39	21.1	155	33.2
Yes	166	58.9	146	78.9	312	66.8
Total	282	100.0	185	100.0	467	100.0

# Drug and Alcohol related hospital admissions for mothers

We used three definitions for drug and alcohol related admissions provided by DASSA, AIHW (primary diagnosis only) and AIHW (primary and secondary diagnoses).

#### Interpretation

• The more comprehensive definitions suggest about 22% of mothers of the cohort had at least one hospitalisation for a drug and alcohol condition.

Table 45: Maternal drug and alcohol related hospital admissions from July 2016 to June 2018 (24 months period)

	Continued		New (	онс	Total	
	n	col %	n	col %	n	col %
At least one hospitalisation for drug and alcohol (DASSA definition, including secondary diagnoses) <sup>b</sup>						
No	231	81.9	132	71.4	363	77.7
Yes	51	18.1	53	28.6	104	22.3
At least one hospitalisation for drug and alcohol (AIHW definition, primary diagnosis only) <sup>c</sup>						
No	252	89.4	160	86.5	412	88.2
Yes	30	10.6	25	13.5	55	11.8
At least one hospitalisation for drug and alcohol (AIHW definition, including secondary diagnoses) <sup>d</sup>						
No	230	81.6	132	71.4	362	77.5
Yes	52	18.4	53	28.6	105	22.5
Total	282	100.0	185	100.0	467	100.0

#### Note:

**b:** Drug-related hospitalisations includes admissions to hospital for any ICD-10-AM codes across principal and secondary diagnoses related to:

- Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
- External causes related to
  - o Assault by drugs, medicaments of biological substances (X85); or
  - o Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
  - o Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
  - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
- Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9)

**c:** Includes a principal diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.

d: Includes a principal or secondary diagnosis listed in "C".

e: Includes a principal diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

# Mental health related hospital admissions for mothers

#### Interpretation

• The more comprehensive definition suggests about 27% of mothers of the cohort had at least one hospitalisation for a mental health condition.

Table 46: Maternal mental health related hospitalisations from July 2016 to June 2018 (24 months period)

	Cont	inued	New	оонс	То	tal
	n	col %	n	col %	n	col %
At least one hospitalisation for mental health (AIHW definition, primary diagnosis only) <sup>e</sup>						
No	242	85.8	151	81.6	393	84.2
Yes	40	14.2	34	18.4	74	15.8
At least one hospitalisation for mental health (AIHW definition, including secondary diagnoses) f						
No	218	77.3	124	67	342	73.2
Yes	64	22.7	61	33	125	26.8
At least one ambulatory equivalent mental health-related hospitalisation (AIHW definition, including all procedure codes) <sup>g</sup>						
No	191	67.7	75	40.5	266	57.0
Yes	91	32.3	110	59.5	201	43.0
Total	282	100.0	185	100.0	467	100.0

#### Note:

e: Includes a principal diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

f: Includes any principal or secondary diagnosis listed in "E"

g: This includes the AIHW definition of ambulatory-equivalent mental health-related hospital separations which are obtained using the Australian Classification of Health Interventions (ACHI) for blocks and procedure codes. Examples of these procedures include psychosocial counselling and alcohol and drug rehabilitation and detoxification. Block codes included were: 1822, 1823, 1867, 1868, 1869, 1872, 1873, 1875, 1878, 1916 (Procedure codes 95550-01, 95550-02 and 95550-1).

# Hospital admissions for co-parents

## Interpretation

• 21.2% of co-parents had at least one hospitalisation.

Table 47: Co-parent hospital admissions from July 2016 to June 2018 (24 months period)

	Cont	Continued		New OOHC		al
	n	col %	n	col %	n	col %
At least one hospitalisation						
No	220	78.0	148	80.0	368	78.8
Yes	62	22.0	37	20.0	99	21.2
Total	282	100.0	185	100.0	467	100.0

## Drug and alcohol related hospital admissions for co-parents

We used three definitions for drug and alcohol related admissions provided by DASSA, AIHW (primary diagnosis only) and AIHW (primary and secondary diagnoses).

#### Interpretation

• The more comprehensive definitions suggest about 7% of co-parents of the cohort had at least one hospitalisation for a drug and alcohol condition.

Table 48: Co-parent drug and alcohol related hospital admissions from July 2016 to June 2018 (24 months period)

	Conti	nued	New (	ОНС	Tot	tal
	n	col %	n	col %	n	col %
At least one hospitalisation for drug and alcohol						
(DASSA definition, including secondary diagnoses) <sup>b</sup>						
No	259	91.8	174	94.1	433	92.7
Yes	23	8.2	11	5.9	34	7.3
At least one hospitalisation for drug and alcohol  (AIHW definition, primary diagnosis only) c						
No	273	96.8	178	96.2	451	96.6
Yes	9	3.2	7	3.8	16	3.4
At least one hospitalisation for drug and alcohol (AIHW definition, including secondary diagnoses) d						
No	257	91.1	175	94.6	432	92.5
Yes	25	8.9	10	5.4	35	7.5
Total	282	100.0	185	100.0	467	100.0

#### Note:

**b:** Drug-related hospitalisations includes admissions to hospital for any ICD-10-AM codes across principal and secondary diagnoses related to:

- Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
- External causes related to
  - Assault by drugs, medicaments of biological substances (X85); or
  - Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
  - Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
  - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
- Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9)

**c:** Includes a principal diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.

d: Includes a principal or secondary diagnosis in "C".

## Mental health related hospital admissions for co-parents

We used three definitions for mental health related admissions provided by AIHW (primary diagnosis only), AIHW (primary and secondary diagnoses) and AIHW (that considers procedure codes).

#### Interpretation

• The more comprehensive definition suggests about 9% of co-parents of the cohort had at least one hospitalisation for a mental health condition.

Table 49: Co-parent mental health related hospital admissions from July 2016 to June 2018 (24 months period)

	Conti	nued	New (	ОНС	Tot	al
	n	col %	n	col %	n	col %
At least one hospitalisation for mental health (AIHW definition, primary diagnosis only) <sup>e</sup>						
No	268	95	179	96.8	447	95.7
Yes	14	5	6	3.2	20	4.3
At least one hospitalisation for mental health (AIHW definition, including secondary diagnoses) f						
No	253	89.7	174	94.1	427	91.4
Yes	29	10.3	11	5.9	40	8.6
At least one ambulatory equivalent mental health-related hospitalisation (AIHW definition, including all procedure codes) <sup>g</sup>						
No	264	93.6	171	92.4	435	93.1
Yes	18	6.4	14	7.6	32	6.9
Total	282	100.0	185	100.0	467	100.0

#### Note:

e: Includes a principal diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

f: Includes any principal or secondary diagnosis included in "E"

g: This includes the AIHW definition of ambulatory-equivalent mental health-related hospital separations which are obtained using the Australian Classification of Health Interventions (ACHI) for blocks and procedure codes. Examples of these procedures include psychosocial counselling and alcohol and drug rehabilitation and detoxification. Block codes included were: 1822, 1823, 1867, 1868, 1869, 1872, 1873, 1875, 1878, 1916 (Procedure codes 95550-01, 95550-02 and 95550-1).

## Emergency department presentations for mothers

We used two definitions for drug and alcohol related admissions provided by DASSA and AIHW.

#### Interpretation

• 76% of mothers had at least one ED presentation, with about 10% for drug and alcohol and about 23% for a mental health condition.

Table 50: Maternal emergency department presentations from July 2016 to June 2018 (24 months period)

	Conti	nued	New (	ОНС	Tot	tal
	n	col %	n	col %	n	col %
At least one ED presentation						
No	81	28.7	31	16.8	112	24.0
Yes	201	71.3	154	83.2	355	76.0
At least one ED presentation for drug and alcohol (DASSA definition, including secondary						
diagnoses) <sup>a</sup>						
No	257	91.1	163	88.1	420	89.9
Yes	25	8.9	22	11.9	47	10.1
At least one ED presentation for drug and alcohol (AIHW definition) b						
No	252	89.4	169	91.4	421	90.1
Yes	30	10.6	16	8.6	46	9.9
At least one ED presentation for mental health (AIHW definition) c						
No	231	81.9	127	68.6	358	76.7
Yes	51	18.1	58	31.4	109	23.3
Total	282	100.0	185	100.0	467	100.0

#### Note:

- a: Drug-related hospitalisations includes ED presentations for any ICD-10-AM codes related to:
  - Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
  - · External causes related to
    - Assault by drugs, medicaments of biological substances (X85); or
    - Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
    - Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
    - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
  - Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9)

**b** Includes a diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.

#### c: Includes a diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

## Emergency department presentations for co-parents

We used two definitions for drug and alcohol related admissions provided by DASSA and AIHW.

#### Interpretation

• 45% of co-parents had at least one ED presentation, with about 4% for drug and alcohol and about 8% for a mental health condition.

Table 51: Co-parent emergency department presentations from July 2016 to June 2018 (24 months period)

	Conti	nued	New (	ОНС	To	tal
	n	col %	n	col %	n	col %
At least one ED presentation						
No	152	53.9	107	57.8	259	55.5
Yes	130	46.1	78	42.2	208	44.5
At least one ED presentation for drug and alcohol (DASSA definition, including secondary diagnoses) <sup>a</sup>						
No	270	95.7	178	96.2	448	95.9
Yes	12	4.3	7	3.8	19	4.1
At least one ED presentation for drug and alcohol (AIHW definition) <sup>b</sup>						
No	269	95.4	178	96.2	447	95.7
Yes	13	4.6	7	3.8	20	4.3
At least one ED presentation for mental health (AIHW definition) <sup>c</sup>						
No	257	91.1	174	94.1	431	92.3
Yes	25	8.9	11	5.9	36	7.7
Total	282	100.0	185	100.0	467	100.0

#### Note

- a: Drug-related hospitalisations includes ED presentations for any ICD-10-AM codes related to:
  - Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
  - External causes related to
    - Assault by drugs, medicaments of biological substances (X85); or
    - Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
    - o Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
    - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
  - Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9)

**b:** Includes a diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.

#### c: Includes a diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

# Part 6. Developmental vulnerability and academic achievement

# Developmental vulnerability at school entry

Table 52 shows the prevalence of developmental vulnerability. We report vulnerability on one or more of the Australian Early Development Census (AEDC) domains (physical health and wellbeing, social competence, emotional maturity, communication and general knowledge, and language and cognitive skills) consistent with national reporting, according to children reunified at 36 months.

Children identified with special needs do not have domain scores calculated and are not included in the indicator of developmental vulnerability – 19.1% of children were special needs. Children identified with special needs, require special assistance because of chronic medical, physical, or intellectually disabling conditions (e.g. Autism, Cerebral palsy, Down syndrome) based on a medical diagnosis or diagnoses.

Table 52: Prevalence special needs, children eligible for reunification cohort by reunification at 36 months

	Re	unification	ths			
	Ye	Yes		No	Total	
	N	col %	N	col %	N	col %
Special needs status						
Not special needs	222	90.2	295	75.1	517	80.9
Special needs	24	9.8	98	24.9	122	19.1
Total	246	100.0	393	100.0	639	100.0

#### Interpretation

- Developmental vulnerability in the reunification cohort is high (53.2%). This is more than 2 times higher than the average for South Australia and reflects the history of maltreatment in these children being in OOHC.
- There is little substantive difference in vulnerability between those reunified and those not reunified.

Table 53: Prevalence vulnerable on one or more domains of the AEDC, children eligible for reunification cohort by reunification at 36 months

	Re	unification	ths				
	Yes			No	Total		
	N	col %	N	col %	N	col %	
Developmentally vulnerable on 1+ AEDC domains							
No	100	45.9	138	47.4	238	46.8	
Yes	118	54.1	153	52.6	271	53.2	
Total	218	100.0	291	100.0	509	100.0	

Table 54 shows the prevalence of children performing at or below the national minimum standard (NMS) as measured by the NAPLAN at Year 3 (age ~8 years).

#### Interpretation

- Being at or below the NMS at age ~8 years is common in the reunification cohort, ranging from 33.1% for writing and 50.8% for numeracy. These differences ranged from 2.4 to 3.7 times higher (depending on NAPLAN domain) than children who had no child protection contact.
- There were few substantive differences being at or below the NMS between those reunified and those not reunified.

Table 54: Prevalence of children at or below the national minimum standard for Year 3 NAPLAN, children eligible for reunification cohort by reunification at 36 months

	R	eunification	at 36 mon	ths		
	Y	es	r	No	To	tal
	N	col %	N	col %	N	col %
Achievement of Year 3 Students in						
Reading						
Above NMS	208	57.5	286	56.4	494	56.8
At or below NMS	154	42.5	221	43.6	375	43.2
Total	362	100.0	507	100.0	869	100.0
Writing						
Above NMS	240	66.5	342	67.2	582	66.9
At or below NMS	121	33.5	167	32.8	288	33.1
Total	361	100.0	509	100.0	870	100.0
Spelling						
Above NMS	214	58.5	313	60.9	527	59.9
At or below NMS	152	41.5	201	39.1	353	40.1
Total	366	100.0	514	100.0	880	100.0
Grammar & punctuation						
Above NMS	200	54.6	319	62.1	519	59.0
At or below NMS	166	45.4	195	37.9	361	41.0
Total	366	100.0	514	100.0	880	100.0
Numeracy						
Above NMS	184	51.4	242	47.7	426	49.2
At or below NMS	174	48.6	265	52.3	439	50.8
Total	358	100.0	507	100.0	865	100.0

Table 55 shows the prevalence of children performing at or below the national minimum standard (NMS) as measured by the NAPLAN at Year 5 (age ~10 years).

#### Interpretation

- The patterns evident at age 8 are mirrored at age 10.
- There were few substantive differences being at or below the NMS between those reunified and those not reunified.

Table 55: Prevalence of children at or below the national minimum standard for Year 5 NAPLAN children eligible for reunification cohort by reunification at 36 months

	R	eunification	ths			
	Y	es	N	No	To	tal
	N	col %	N	col %	N	col %
Achievement of Year 5 Students in						
Reading						
Above NMS	130	51.6	177	47.7	307	49.3
At or below NMS	122	48.4	194	52.3	316	50.7
Total	252	100.0	371	100.0	623	100.0
Writing						
Above NMS	117	47.8	163	45.0	280	46.1
At or below NMS	128	52.2	199	55.0	327	53.9
Total	245	100.0	362	100.0	607	100.0
Spelling						
Above NMS	135	54.9	186	50.8	321	52.5
At or below NMS	111	45.1	180	49.2	291	47.5
Total	246	100.0	366	100.0	612	100.0
Grammar & punctuation						
Above NMS	119	48.4	182	49.7	301	49.2
At or below NMS	127	51.6	184	50.3	311	50.8
Total	246	100.0	366	100.0	612	100.0
Numeracy						
Above NMS	103	42.4	142	39.0	245	40.4
At or below NMS	140	57.6	222	61.0	362	59.6
Total	243	100.0	364	100.0	607	100.0

Table **56** shows the prevalence of children performing at or below the national minimum standard (NMS) as measured by the NAPLAN at Year 7 (age ~12 years).

#### Interpretation

- The patterns evident at age 8 and 10 are mirrored at age 12.
- There were few substantive differences being at or below the NMS between those reunified and those not reunified.

Table 56: Prevalence of children at or below the national minimum standard for Year 7 NAPLAN, children eligible for reunification cohort by reunification at 36 months

	Re	eunification	nths			
	Y	es		No	To	tal
	N	col %	N	col %	N	col %
Achievement of Year 7 Students in						
Reading						
Above NMS	74	54.0	110	53.9	184	54.0
At or below NMS	63	46.0	94	46.1	157	46.0
Total	137	100.0	204	100.0	341	100.0
Writing						
Above NMS	46	34.3	64	31.7	110	32.7
At or below NMS	88	65.7	138	68.3	226	67.3
Total	134	100.0	202	100.0	336	100.0
Spelling						
Above NMS	81	59.6	111	54.4	192	56.5
At or below NMS	55	40.4	93	45.6	148	43.5
Total	136	100.0	204	100.0	340	100.0
Grammar & punctuation						
Above NMS	69	50.7	100	49.0	169	49.7
At or below NMS	67	49.3	104	51.0	171	50.3
Total	136	100.0	204	100.0	340	100.0
Numeracy						
Above NMS	60	44.8	81	40.5	141	42.2
At or below NMS	74	55.2	119	59.5	193	57.8
Total	134	100.0	200	100.0	334	100.0

Table 57 shows the prevalence of children performing at or below the national minimum standard (NMS) as measured by the NAPLAN at Year 9 (age ~14 years).

Note: With current data we only have one birth cohort that we could follow to age 14 hence the numbers are small

#### Interpretation

- By year 9 NAPLAN the proportion of the reunification cohort at or below the NMS seems to have increased, with 51.9% to 75.8% being at or below NMS. However, numbers are small so this should be interpreted with caution.
- Differences between reunified and not reunified are based on even smaller numbers, so any observed differences may be unstable.

Table 57: Prevalence of children at or below the national minimum standard for Year 9 NAPLAN, children eligible for reunification cohort by reunification at 36 months

	Re	eunification	at 36 mon	ths		
	Υ	es	N	lo	To	otal
	N	col %	N	col %	N	col %
Achievement of Year 9 Students in						
Reading						
Above NMS	20	37.7	27	38.6	47	38.2
At or below NMS	33	62.3	43	61.4	76	61.8
Total	53	100.0	70	100.0	123	100.0
Writing						
Above NMS	16	28.6	15	20.8	31	24.2
At or below NMS	40	71.4	57	79.2	97	75.8
Total	56	100.0	72	100.0	128	100.0
Spelling						
Above NMS	29	50.9	34	45.9	63	48.1
At or below NMS	28	49.1	40	54.1	68	51.9
Total	57	100.0	74	100.0	131	100.0
Grammar & punctuation						
Above NMS	18	31.6	22	29.7	40	30.5
At or below NMS	39	68.4	52	70.3	91	69.5
Total	57	100.0	74	100.0	131	100.0
Numeracy						
Above NMS	25	45.5	24	34.8	49	39.5
At or below NMS	30	54.5	45	65.2	75	60.5
Total	55	100.0	69	100.0	124	100.0

# **Transitions**

The following section presents various transitions from reunification status to later outcomes and includes:

- 1. Reunification to AEDC to year 3 Reading
- 2. Reunification to AEDC to year 3 Numeracy

It was not possible due to small numbers to do the following transitions:

- Reunification to year 5 Reading to year 9 Reading
- Reunification to year 5 Numeracy to year 9 Numeracy

## 1. Transition from reunification status to AEDC to Year 3 Reading (NAPLAN) (~n=500)

It is not possible to follow any cohort of children from AEDC at age 5 through to year 9 NAPLAN at age 14 because the oldest AEDC cohort is now only 12 years old. Therefore, we present transitions for the eligible cohort from AEDC to year 3 NAPLAN (reading and numeracy) and transitions for the eligible cohort from year 5 to year 9 NAPLAN (reading and numeracy).

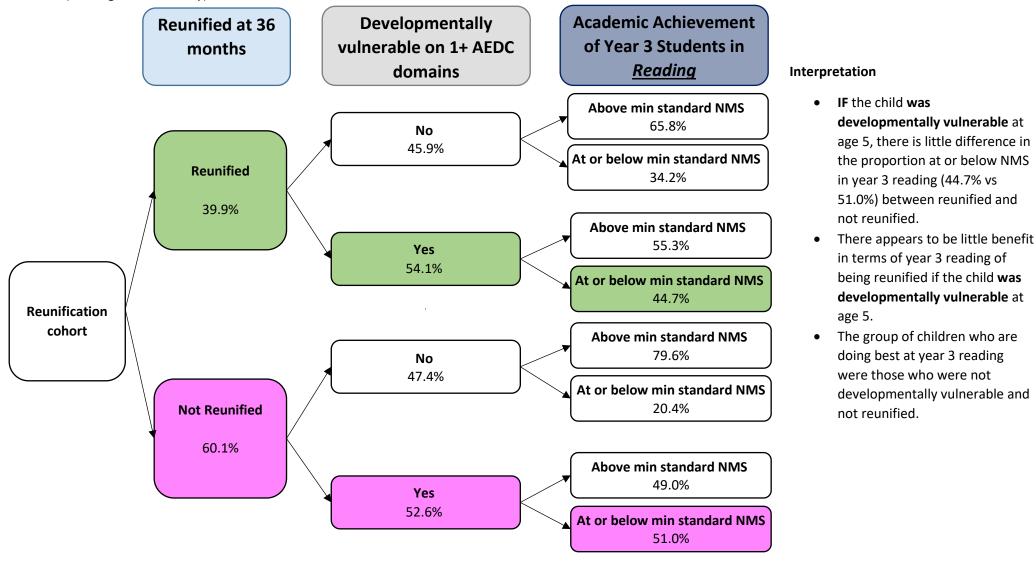
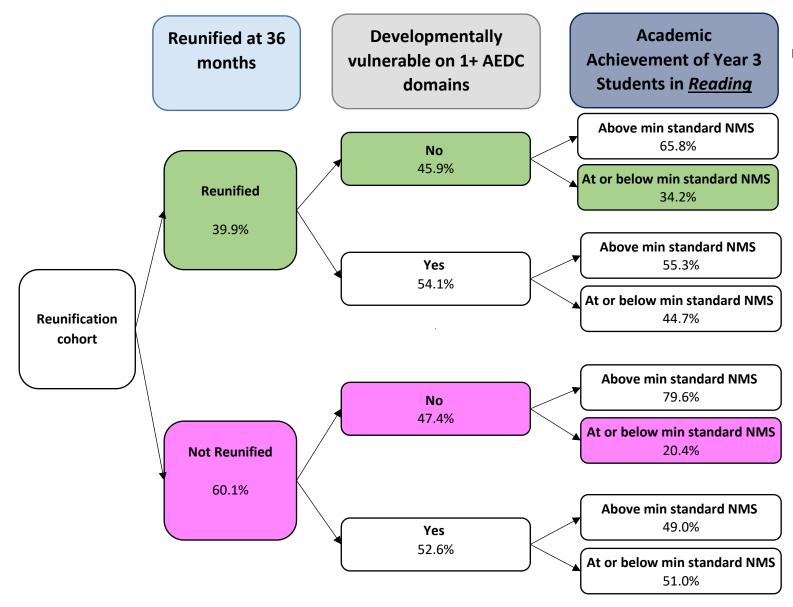


Figure 3: Transition from reunification status to AEDC to Year 3 Reading (NAPLAN), children eligible for reunification cohort by reunified at 36 months



#### Interpretation

- IF the child was not developmentally vulnerable at age 5, being at or below NMS in year 3 reading was about 10 percentage points higher among those reunified (34.2% vs 20.4%).
- The literal interpretation of this is, if the child was not developmentally vulnerable then there is a NAPLAN reading benefit of not being reunified.

Figure 3: Transition from reunification status to AEDC to Year 3 Reading (NAPLAN), children eligible for reunification cohort by reunified at 36 months

# 2. Transition from reunification status to AEDC to Year 3 Numeracy (NAPLAN) (~n=500)

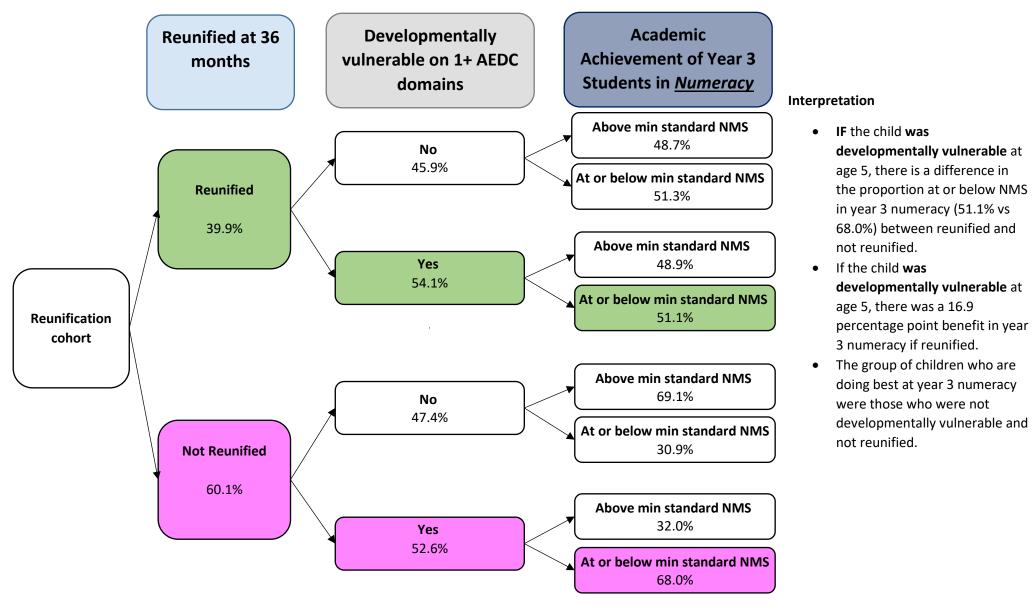


Figure 4: Transition from reunification status to AEDC to Year 3 Numeracy (NAPLAN), children eligible for reunification cohort by reunified at 36 months

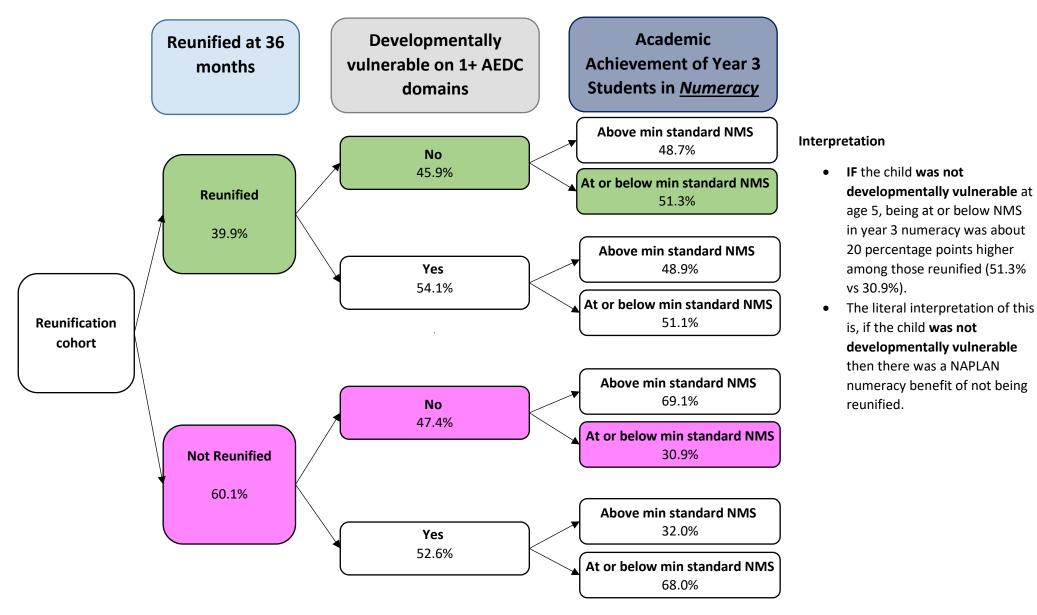


Figure 4: Transition from reunification status to AEDC to Year 3 Numeracy (NAPLAN), children eligible for reunification cohort by reunified at 36 months

#### Interpretation

- The only evidence of a benefit for reunification was for year 3 numeracy, but this was only evident among children who were developmentally vulnerable at age 5. Among those children who were developmentally vulnerable and reunified the proportion at or below the NMS was 51.1%, whereas among children who were not reunified it was 68%.
- This benefit was not evident for year 3 reading.
- Reunification was associated with worse reading and numeracy performance among children who were not developmentally vulnerable at age 5. For example, there were 51.3% at or below NMS among those who were not developmentally vulnerable and reunified versus 30.9% amongst those who were not reunified.
- Reunification at 36 months is unlikely to cause harm and there is evidence of benefit on year 3 NAPLAN among children developmentally vulnerable at age 5.
- However, the opposite was true among children who were not developmentally vulnerable at age 5, where reunification was associated with worse year 3
   NAPLAN.
- This is somewhat counterintuitive, but it may reflect the OOHC experience of the reunified and not reunified groups. We need to keep in mind that the best performing group at year 3 was those who were not developmentally vulnerable and not reunified. That may be because they are in a stable care environment that is supporting both their development and academic achievement trajectories. This may call for a better understanding of their maltreatment and placement history, than is revealed by simple categorization of whether they were reunified or not 36 months after becoming eligible for the cohort.

# Part 7. Commonwealth welfare outcomes

Table 58 shows welfare payments received before 18 years of age by reunification status at 36 months, including youth allowance, disability payment, or a parenting-related payment.

#### Interpretation

- 77.3% received any welfare payment before age 18
- 57.6% received a youth allowance payment before age 18.
- The largest percentage point differences between reunified and not reunified are for disability payment (9.9 percentage points higher) and youth allowance (11.6 percentage points higher).

Table 58: Welfare payments before age 18, children eligible for reunification cohort by reunification at 36 months

		Reunificatio	onths			
	Y	es		No	То	tal
	N	col %	N	col %	N	col %
Any welfare payment before age 18						
No	72	31.3	34	14.3	106	22.7
Yes	158	68.7	203	85.7	361	77.3
Abstudy payment age 18						
No	186	80.9	187	78.9	373	79.9
Yes	44	19.1	50	21.1	94	20.1
Disability payment age 18						
No	206	89.6	189	79.7	395	84.6
Yes	24	10.4	48	20.3	72	15.4
Parenting payment age 18						
No	219	95.2	224	94.5	443	94.9
Yes	11	4.8	13	5.5	24	5.1
Youth allowance payment age 18						
No	111	48.3	87	36.7	198	42.4
Yes	119	51.7	150	63.3	269	57.6
Total	230	100.0	237	100.0	467	100.0

#### Note:

*Youth Allowance*: Financial help for those aged 24 or younger and a student or Australian Apprentice, or 21 or younger and looking for work.

Newstart Allowance (Unemployment benefit): Financial assistance to people who are unemployed or treated as unemployed and, unless exempted from mutual obligation requirements are participating in or willing to participate in approved activities and/or job search, and are prepared to enter into, comply with or vary an existing Job Plan to fulfil the mutual obligation requirement.

Abstudy - Financial assistance for Aboriginal or Torres Strait Islander students or apprentices. Austudy - Financial help for those aged 25 or older and studying or an Australian Apprentice.

Disability Support Pension: Financial help if you have a permanent physical, intellectual or psychiatric condition that stops you from working.

Parenting related payments included: Baby Bonus, Child Care Benefit, Dad and Partner Pay, Family Tax Benefit, Maternity Payment, Parental Leave Pay, Parenting Payment Partnered and Parenting Payment Single.

# Appendix A. Selected examples of SA government service use

The tables below are present for completeness but are similar analyses to what is presented in part 5 except that we used an observation period from eligibility to June 2018, which is the limit of our hospital and ED data.

# Hospital Admissions for children

Table 59: Ever admitted to a hospital from eligible date to 30<sup>th</sup> June 2018

	Continued		Ne	w	Tot	tal
	n	col %	n	col %	n	col %
At least one hospitalisation						
No	213	63.2	211	78.4	424	70.0
Yes	124	36.8	58	21.6	182	30.0
Number of hospitalisations						
0	213	63.2	211	78.4	424	70.0
1	72	21.4	26	9.7	98	16.2
2	26	7.7	15	5.6	41	6.8
3	9	2.7	8	3.0	17	2.8
4 or more	17	5.0	9	3.3	26	4.3
At least one hospitalisation for paediatric PPH						
No	266	78.9	236	87.7	502	82.8
Yes	71	21.1	33	12.3	104	17.2
Number of hospitalisations for paediatric PPH						
0	266	78.9	236	87.7	502	82.8
1	50	14.8	19	7.1	69	11.4
2 or more	21	6.2	14	5.2	35	5.8
Total	337	100.0	269	100.0	606	100.0

#### References:

Craig E, Anderson P, Jackson G, et al. Measuring potentially avoidable and ambulatory care sensitive hospitalisations in New Zealand children using a newly developed tool. N Z Med J 2012;125:38–50.

Procter A, Pilkington M, Lynch J, Smithers L, Chittleborough C. Potentially preventable hospitalisations in children: a comparison of definitions. Archives of Disease in Childhood 2020; 105:375-381 doi:10.1136/archdischild-2019-316945

# Emergency department presentations for children

Table 60: Emergency department presentations from eligible date to 30<sup>th</sup> June 2018

	Con	tinued	N	ew	To	otal
	n	col %	n	col %	n	col %
At least one emergency department presentations						
No	118	35.0	154	57.2	272	44.9
Yes	219	65.0	115	42.8	334	55.1
Number of emergency department presentations						
0	118	35.0	154	57.2	272	44.9
1	66	19.6	47	17.5	113	18.6
2	49	14.5	24	8.9	73	12.0
3	32	9.5	12	4.5	44	7.3
4	21	6.2	12	4.5	33	5.4
5 or more	51	15.1	20	7.4	71	11.7
At least one emergency department presentations for paediatric potentially preventable conditions						
No	199	59.1	197	73.2	396	65.3
Yes	138	40.9	72	26.8	210	34.7
Number of emergency department presentations for paediatric potentially preventable conditions						
0	199	59.1	197	73.2	396	65.3
1	64	19.0	38	14.1	102	16.8
2	34	10.1	19	7.1	53	8.7
3 or more	40	11.9	15	5.6	55	9.1
Total	337	100.0	269	100	606	100.0

# Parental hospital admissions and emergency department presentations

### Identifying parents in the family file – 2016/17

The analysis of <u>parent</u> hospital admissions and emergency department presentations required linking children to the birth registration family file. Not all eligible children were in the birth registration family file, as this information was only available up to the end of 2016. For the 2016/17 Reunification cohort, out of the 616 eligible children in our linked data, 472 (76.6%) could be identified in our family files.

For these 616 children, there were 357 mothers and 401 co-parents. For simplicity, the following analyses assumed each child had a different mother and co-parent, even though in reality the cohort includes groups of siblings. An analysis that accounts for sibling structure is extremely complex and cannot be completed under the timelines for this report.

This assumption means that there is double counting of a small number of parents and was made because some parents could have children within the same cohort group and across different cohort groups (Continued, Prior OOHC, New OOHC). For example, a mother could have 2 children in the 'Continued' group or the mother could have 1 child in the 'New OOHC' group and another child in the 'Prior OOHC' group. Assigning the parent to one of these groups would mean that while you would get the correct count for 'Continued' group you would not get the correct count for the 'New OOHC' group. Therefore, the results should be interpreted as an upper bound of the number of hospital admissions and emergency department presentations.

Table 61: Children identified in the Birth Registration Family File

	Conti	nued	Prior OOHC		New OOHC		Total	
	n	col %	n	col %	n	col %	n	col %
Yes	282	83.7	5	50.0	185	67.8	472	76.6
No	55	16.3	5	50.0	84	31.2	144	23.4
Total	337	100.0	10	100.0	269	100.0	616	100.0

# Hospital admissions for mothers

Table 62: Maternal hospital admissions from eligibility date to June 2018

	Cont	Continued		New OOHC		tal
	n	col %	n	col %	n	col %
At least one hospitalisation						
No	83	29.4	69	37.3	152	32.5
Yes	199	70.6	116	62.7	315	67.5
Total	282	100.0	185	100.0	467	100.0

# Drug and Alcohol related hospital admissions for mothers

We used three definitions for drug and alcohol related admissions provided by DASSA, AIHW (primary diagnosis only) and AIHW (primary and secondary diagnoses).

Table 63: Maternal drug and alcohol related hospital admissions from eligibility date to June 2018

	Con	tinued	New	оонс	To	otal
	n	col %	n	col %	n	col %
At least one hospitalisation for drug and alcohol (DASSA definition, including secondary diagnoses) <sup>b</sup>						
No	220	78.0	145	78.4	365	78.2
Yes	62	22.0	40	21.6	102	21.8
At least one hospitalisation for drug and alcohol (AIHW definition, primary diagnosis only) <sup>c</sup>						
No	242	85.8	162	87.6	404	86.5
Yes	40	14.2	23	12.4	63	13.5
At least one hospitalisation for drug and alcohol (AIHW definition, including secondary diagnoses) <sup>d</sup>						
No	219	77.7	145	78.4	364	77.9
Yes	63	22.3	40	21.6	103	22.1
Total	282	100.0	185	100.0	467	100.0

#### Note:

**b:** Drug-related hospitalisations includes admissions to hospital for any ICD-10-AM codes across principal and secondary diagnoses related to:

- Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
- External causes related to
  - o Assault by drugs, medicaments of biological substances (X85); or
  - o Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
  - o Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
  - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
- Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9) c: Includes a principal diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.
- d: Includes a principal or secondary diagnosis listed in "C".
- e: Includes a principal diagnosis of:
  - Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
  - MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

# Mental health related hospital admissions for mothers

We used three definitions for mental health related admissions provided by AIHW (primary diagnosis only), AIHW (primary and secondary diagnoses) and AIHW (that considers procedure codes).

Table 64: Maternal mental health related hospitalisations from eligibility date to June 2018

	Cont	inued	New	ООНС	To	tal
	n	col %	n	col %	n	col %
At least one hospitalisation for mental health (AIHW definition, primary diagnosis only) <sup>e</sup>						
No	233	82.6	155	83.8	388	83.1
Yes	49	17.4	30	16.2	79	16.9
At least one hospitalisation for mental health (AIHW definition, including secondary diagnoses) f						
No	201	71.3	140	75.7	341	73.0
Yes	81	28.7	45	24.3	126	27.0
At least one ambulatory equivalent mental health-related hospitalisation (AIHW definition, including all procedure codes) <sup>g</sup>						
No	165	58.5	119	64.3	284	60.8
Yes	117	41.5	66	35.7	183	39.2
Total	282	100.0	185	100	467	100.0

#### Note:

e: Includes a principal diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

f: Includes any principal or secondary diagnosis listed in "E"

g: This includes the AIHW definition of ambulatory-equivalent mental health-related hospital separations which are obtained using the Australian Classification of Health Interventions (ACHI) for blocks and procedure codes. Examples of these procedures include psychosocial counselling and alcohol and drug rehabilitation and detoxification. Block codes included were: 1822, 1823, 1867, 1868, 1869, 1872, 1873, 1875, 1878, 1916 (Procedure codes 95550-01, 95550-02 and 95550-1).

# Hospital admissions for <u>co-parents</u>

Table 65: Co-parent hospital admissions from eligibility date to June 2018

	Conti	Continued		New OOHC		tal
	n	col %	n	col %	n	col %
At least one hospitalisation						
No	202	71.6	154	83.2	356	76.2
Yes	80	28.4	31	16.8	111	23.8
Total	282	100.0	185	100.0	467	100.0

# Drug and alcohol related hospital admissions for co-parents

We used three definitions for drug and alcohol related admissions provided by DASSA, AIHW (primary diagnosis only) and AIHW (primary and secondary diagnoses).

Table 66: Co-parent drug and alcohol related hospital admissions from eligibility date to June 2018

	Continued		New OOHC		Tot	tal
	n	col %	n	col %	n	col %
At least one hospitalisation for drug and alcohol						
(DASSA definition, including secondary diagnoses) <sup>b</sup>						
No	254	90.1	177	95.7	431	92.3
Yes	28	9.9	8	4.3	36	7.7
At least one hospitalisation for drug and alcohol (AIHW definition, primary diagnosis only) <sup>c</sup>						
No	#	#	#	#	452	96.8
Yes	#	#	#	#	15	3.2
At least one hospitalisation for drug and alcohol (AIHW definition, including secondary diagnoses) d						
No	252	89.4	178	96.2	430	92.1
Yes	30	10.6	7	3.8	37	7.9
Total	282	100.0	185	100.0	430	92.1

#### Note:

**b:** Drug-related hospitalisations includes admissions to hospital for any ICD-10-AM codes across principal and secondary diagnoses related to:

- Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
- External causes related to
  - Assault by drugs, medicaments of biological substances (X85); or
  - Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
  - o Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
  - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
- Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9) **c:** Includes a principal diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.
- d: Includes a principal or secondary diagnosis in "C".

## Mental health related hospital admissions for co-parents

We used three definitions for mental health related admissions provided by AIHW (primary diagnosis only), AIHW (primary and secondary diagnoses) and AIHW (that considers procedure codes).

Table 67: Co-parent mental health related hospital admissions from eligibility date to June 2018

	Continued		New OOHC		To	otal
	n	col %	n	col %	n	col %
At least one hospitalisation for mental health (AIHW definition, primary diagnosis only) <sup>e</sup>						
No	#	#	#	#	443	94.9
Yes	#	#	#	#	24	5.1
At least one hospitalisation for mental health (AIHW definition, including secondary diagnoses) f						
No	241	85.5	177	95.7	418	89.5
Yes	41	14.5	8	4.3	49	10.5
At least one ambulatory equivalent mental health-related hospitalisation (AIHW definition, including all procedure codes) <sup>g</sup>						
No	260	92.2	175	94.6	435	93.1
Yes	22	7.8	10	5.4	32	6.9
Total	282	100.0	185	100.0	467	100.0

#### Note:

e: Includes a principal diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

f: Includes any principal or secondary diagnosis included in "E"

g: This includes the AIHW definition of ambulatory-equivalent mental health-related hospital separations which are obtained using the Australian Classification of Health Interventions (ACHI) for blocks and procedure codes. Examples of these procedures include psychosocial counselling and alcohol and drug rehabilitation and detoxification. Block codes included were: 1822, 1823, 1867, 1868, 1869, 1872, 1873, 1875, 1878, 1916 (Procedure codes 95550-01, 95550-02 and 95550-1).

## Emergency department presentations for mothers

We used two definitions for drug and alcohol related admissions provided by DASSA and AIHW.

Table 68: Maternal emergency department presentations from eligibility date to June 2018

	Continued		New OOHC		Total	
	n	col %	n	col %	n	col %
At least one ED presentation						
No	58	20.6	41	22.2	99	21.2
Yes	224	79.4	144	77.8	368	78.8
At least one ED presentation for drug and alcohol (DASSA definition, including secondary diagnoses) <sup>a</sup>						
No	247	87.6	163	88.1	410	87.8
Yes	35	12.4	22	11.9	57	12.2
At least one ED presentation for drug and alcohol (AIHW definition) b						
No	242	85.8	169	91.4	411	88.0
Yes	40	14.2	16	8.6	56	12.0
At least one ED presentation for mental health (AIHW definition) c						
No	213	75.5	136	73.5	349	74.7
Yes	69	24.5	49	26.5	118	25.3
Total	282	100.0	185	100.0	467	100.0

#### Note:

- a: Drug-related hospitalisations includes ED presentations for any ICD-10-AM codes related to:
  - Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
  - External causes related to
    - Assault by drugs, medicaments of biological substances (X85); or
    - o Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
    - o Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
    - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
- Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9) **b** Includes a diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.

#### c: Includes a diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)

## Emergency department presentations for co-parents

We used two definitions for drug and alcohol related admissions provided by DASSA and AIHW.

Table 69: Co-parent emergency department presentations from eligibility date to June 2018

	Continued		New OOHC		Tot	tal
	n	col %	n	col %	n	col %
At least one ED presentation						
No	126	44.7	116	62.7	242	51.8
Yes	156	55.3	69	37.3	225	48.2
At least one ED presentation for drug and alcohol (DASSA definition, including secondary diagnoses) <sup>a</sup>						
No	264	93.6	#	#	445	95.3
Yes	18	6.4	#	#	22	4.7
At least one ED presentation for drug and alcohol (AIHW definition) b						
No	266	94.3	#	#	447	95.7
Yes	16	5.7	#	#	20	4.3
At least one ED presentation for mental health (AIHW definition) <sup>c</sup>						
No	248	87.9	178	96.2	426	91.2
Yes	34	12.1	7	3.8	41	8.8
Total	282	100.0	185	100.0	467	100.0

#### Note:

A: Drug-related hospitalisations includes ED presentations for any ICD-10-AM codes related to:

- Mental or Behaviour Disorders due to use of alcohol and other specified drugs (F10, F11, F12, F13, F14, F15, F16, F17, F18, F19); or
- External causes related to
  - Assault by drugs, medicaments of biological substances (X85); or
  - Accidental poisoning by and exposure to specific drugs (X41, X42, X44); or
  - o Intentional self-harm from poisoning, including suicide (X61, X62, X64); or
  - Event of undetermined intent involving poisoning by and exposure to specific drugs (Y11, Y12, Y14); or
- Poisoning by drugs (T40.0- T40.9, T42.3, T42.4, T42.6, T42.7, T43.3, T43.5, T43.6, T43.8, T43.9)

**B:** Includes a diagnosis of: (F170–179, T652, Z587, Z716, F150–159, T406, T436, T460, T463, F550, T430–435, F180–189, T520–529, T530–9, T590, T598, F190–199, F551, F553–6, F558, F559, N141–3, T387, T438–9, T501–3, T507, Z715, P042–4, Q860). Available at https://www.aihw.gov.au/reports/alcohol-other-drug-treatment-services/drug-related-hospitalisations/contents/content.

C: Includes a diagnosis of:

- Major Diagnostic Categories (MDC) 19 (Mental diseases and disorders) (F20-F52 (excluding F52.5), F54, F59-F69, F80-F84 (excluding F84.2), F88-F95, F98-F99 (excluding F98.5 and F98.6), G47.0, G47.1, G47.2, G47.8, G47.9, R44.0, R44.2, R44.3, R44.8, R45.0, R45.1, R45.4, R48.0, R48.1, R48.2, R48.8, Z03.2); or
- MDC 20 (Alcohol/drug use and alcohol/drug induced organic mental disorders) (F10-F19, F55)