

**CHC Community Services  
Training Package Release 1.1**

# **CHCPRT001 Identify and respond to children and young people at risk**

**Learner guide**

**Version 1**

**Training and Education Support  
Industry Skills Unit  
Meadowbank**



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- *NSW Interagency Guidelines for Child Protection Intervention 2006*
- *Keep Them Safe: A Shared Approach to Child Wellbeing, March 2009*

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SAMPLE

## Section 1 Protecting children and young people

### An historical perspective

Child abuse is not a new discovery, but has occurred throughout history and across cultures. However, what has been defined as 'child abuse' has constantly changed, and has always reflected the value society puts on its children. How a particular society perceived its children determined how those children were treated. For example, until fairly recently, children were viewed as the 'property' of their parents (particularly their fathers) with no rights of their own.

During the 19<sup>th</sup> century and into the 20<sup>th</sup> century, society was more concerned with the control of delinquent youth than the protection of children and young people from harm. For much of the 20<sup>th</sup> century, the response to a child or young person in need of protection from harm was most likely that they would be removed from their parents' care, as such parents were deemed to be 'bad' or 'mad'. Social circumstances such as poverty were frequently seen as grounds for removal. Children generally remained in care, frequently in large state or church run institutions, until they were 18 years of age.

Over more recent years, however, there has been an increasing public and political awareness of child abuse in many countries. This has been accompanied by an increase in the legal status of children, and recognition of children as individuals with rights. There has also been increasing recognition during this time that governments need to step in to ensure that some children are protected from abuse, because of either the extent of harm they have already experienced or the harm they may be at risk of experiencing.

While many children may experience less than optimal care, the law now defines which children are of such concern that the statutory child protection services should intervene. At the same time, in Australia, the main response to children and young people at risk of harm has shifted from the removal of the child or young person from their home to early intervention and supporting and assisting the families of children and young people at risk of harm so that, wherever possible, children and young people can remain with their families.

Our changing view of child abuse also reflects changes and developments in child-rearing practices. Many child-rearing practices that are considered abusive today were once regarded as reasonable ways of disciplining and raising children. There has also been a shift towards focusing on the impact of parental or carer behaviour on a child, and whether the child has suffered harm, rather than solely focusing on the behaviour. As a society, we also increasingly recognise the vulnerability of young children, and the links between harm and deprivation in childhood and later life prospects and parenting capacity.



However, there are still issues for concern in the way societies treat their children. Some of the issues that continue to affect child-rearing practices in modern societies include:

- **parents' versus children's rights**
- ownership of children (for example in family law proceedings)
- the changing nature of families, and
- the impact of social, economic and cultural factors on children

There are also concerns as to how we as a society respond to children who are at risk of being harmed and their families. Do we respond in a way that puts the needs of the child or young person at risk of harm first? How do the various government and non-government institutions (for example the legal system, educational system, religious institutions, health systems, etc.) respond to children and young people at risk of harm? Should we as a society be putting more effort (money, services, and workers) than we are now into providing services to vulnerable families which will help them to meet the physical, social and emotional needs of their children, or should we wait until there is actual harm and then respond?

## Current responses

Over the past 10 years, it has been increasingly recognised that a large number of reports of child abuse to child protection authorities are in relation to parents who are not coping with their parental responsibilities. Many State government policies and legislation now reflect an emphasis on promoting and supporting prevention and early intervention with vulnerable families, as well as community education and involvement. For example, the NSW government developed the **'Families First' strategy to assist parents of children up to the age of eight** through building supportive communities and child and family services, and by connecting parents to each other. This strategy also reflects the move towards a greater involvement of other government and non-government services apart from the statutory child protection services in responding to risk of harm.

**'Families First' is delivered by five government agencies (Area Health Services, Community Services, Education and Training, Housing and Disability, and Aging and Home Care) in partnership with parents and community organisations.**

Equally, statutory child protection authorities across Australia are increasingly focusing on collaborating with and assisting parents through an early intervention approach, with the aim of preventing or minimising the need for more intrusive child protective interventions by the child protection system (such as removing children from their **parent's care**).

In NSW, Human Services – Community Services developed the **'Brighter Futures'** early intervention program which targets and supports families with

young children aged 0-8 years who are dealing with problems that affect their ability to care for their children, such as parental mental health problems, lack of parenting skills, child behaviour management problems, and parental drug and alcohol misuse. The program is voluntary, involves Early Intervention caseworkers working intensively with families and community agencies, and enables families to access services such as home visiting, parenting programs and quality education and care with the aim of strengthening positive parent-child relationships and improving long term benefits for children, including preventing abuse and neglect, and promoting healthy child development.

On 30<sup>th</sup> April 2009 the Council of Australian Governments (COAG) endorsed the **first "National Framework for Protecting Australia's Children"**. The National Framework recognises that the best way to protect children is by preventing abuse and neglect from happening in the first place. Child protection needs to move from a response to abuse to promoting the safety and well-being of children. States and Territories are making substantial reforms that focus on early intervention. The effectiveness of these reforms relies upon coordination with Australian Government programs, policies and payments. This national approach recognises that protecting children is a shared responsibility – within families, communities, professions, services and governments.

Some of the reforms include national standards for out of home care, improved information sharing and data collection, a common approach to assessment and referral, and a national research agenda for child protection.

In 2008, a *Special Commission of Inquiry into Child Protection Services in NSW* was conducted by retired Justice James Wood at the request of the NSW government to investigate changes needed for the child protection system to provide more effective services to protection children and to meet future levels of demand. The Inquiry stemmed in part from the deaths of two children known to Community Services the previous year, and from the difficulties the department had experienced in responding effectively to the increasing number of reports of risk of harm received each year.

Findings of the Commission identified that New South Wales had one of the lowest reporting thresholds in Australia, contributing to the overloaded system. The number of reports had significantly increased in recent years (four times that received in 2000). Only about 13 per cent of all reports were responded to by Community Services and a large number did not meet the threshold at all. More than half the total number of reports related to the top 20% of a group of frequently reported children and young people (between 2,500 and 7,500 families).

Organisations were using reports to update Community Services and multiple reports often related to the same child or family. Mandatory reporters did not receive sufficient information about the outcomes of reports made to Community Services. This often resulted in re-reporting in the hope of escalating the child

within the system. The Inquiry found that because of the increase in re-reporting most children now reported have a history of prior reports to Community Services.

Children and young people in Out of Home Care were increasing while the pool of carers was declining. Aboriginal children and young people were over-represented with 18.3% of reports referring to Aboriginal children and young people. This overloaded system was leading to vulnerable children being overlooked due to the focus on escalating reports, inappropriate reporting and investigation of low risk families.

The *Inquiry* made a number of recommendations for significant changes to the current child protection system in NSW. Key recommendations included raising **the mandatory reporting threshold to unblock the Helpline to 'significant harm'**, the establishment of a new intake, referral and management framework that provides alternate reporting pathways for less serious cases, comprehensive universal, secondary and tertiary services, the exchange of information between prescribed bodies, more cooperation between agencies, an enhanced role for non-government agencies, responses to the over-representation of Aboriginal children in the system, and improvements to the court process.

In response, the NSW government has adopted most of the suggested reforms in its five year Action Plan ***Keeping them safe: A Shared Approach to Child Wellbeing*** (March 2009). The emphasis in the Action Plan is on a **'whole of Government' response, rather than Community Services having the sole** responsibility for responding to reports of risk of harm to children and young people. The Department of Premier and Cabinet is the lead agency in the reform agenda. A \$750 million Keep Them Safe funding package over five years was announced by the Premier in the 2009-2010 State Budget. More than 40% of the package will go to non-government organisations (NGOs) to support their role in working with children and families and enhance collaboration and coordination across government agencies and NGO services.

This integrated system supports vulnerable children, young people and their families. It includes the establishment of new reporting and referral arrangements to allow families to access services without having to come into contact with the statutory child protection system.

Key reforms include establishing **Child Wellbeing Units** in various government departments (NSW Police, NSW Health, Department of Education and Training, and the Department of Human Services who are responsible for over 60% of all reports to the Community Services Helpline) to advise mandatory reporters of the new statutory threshold for **'risk of significant harm'**; **expanding the grounds for making a report to include where parents or carers fail to ensure a child's** education, and clarifies that the risk of significant harm may relate to a single act or omission or to a series of acts or omissions (cumulative harm); the expansion of services such as the Brighter Futures early intervention program (with priority

being given to Aboriginal children), as well as extending intensive family preservation services to support families. A new partnership with non-government agencies to provide funding for the establishment of new **Family Referral Services** (previously known as Regional Intake and Referral services); and a reform of funding arrangements to support Aboriginal communities to address the over-representation of Aboriginal children and young people in the child protection system are also included.

For mandatory reporters without a Child Wellbeing Unit, reports of risk of significant harm will still be made to the Community Services Helpline but mandatory reporters will be assisted by the use of a **Mandatory Reporter Guidance** tool using Decision Trees. New rules will also apply around the sharing or **exchange of information by 'prescribed bodies'** when it relates to the safety, welfare or wellbeing of a child or young person to assist with decision-making, assessment, investigation or service delivery. A common **database** will be developed for sharing of information to further assist in coordinated responses.

The establishment of **Family Referral Services** (FRS) will be a staged implementation with a trial initially in 3 locations (Dubbo, Mount Druitt and Newcastle). Two models will be trialled over the first 12 months:

- Telephone advice model
- Coordination of active referrals and case management model

NSW Health is the lead agency to implement FRS with services being run by NGOs and local government. There will be a state-wide roll out within 3 – 5 years.

The establishment of Child Wellbeing Units, Family Referral Services and raising the mandatory reporter threshold will rely on excellent cooperation between government and non-government agencies and is seen as the key to success. The change is seen as promoting the safety and wellbeing of children, rather than merely child protection.

Further information can be accessed at the Keep Them Safe website:  
<http://www.keepthemsafe.nsw.gov.au>.

In June 2009 the NSW Premier announced that the Department of Community Services would form part of the new Human Services Department following a decision to create 13 overarching departments in the NSW public sector. This is aimed to provide better services and more co-ordinated decision making by bringing together community services, ageing, disability services, housing, juvenile justice and Aboriginal Affairs. This agency is now referred to as Community Services (CS).

The key messages of the new responses to child protection are:

- Sharing the responsibility

- Collaboration
- Working and engaging with families, rather than just reporting
- New ways of working and new systems
- New threshold for reporting in New South Wales
- Supporting the care, safety and wellbeing of children, young people and their families

As you can now see the shift is from 'child protection' to 'child wellbeing' with the responsibility being shared and statutory intervention being seen as a last resort.

## Issues in defining child abuse

### Traditional Definitions

Traditionally under State law, four different forms of child abuse or harm have been recognised. These include sexual, physical and emotional abuse and neglect. Children who are living in situations where domestic violence is occurring are also now considered to be victims of child abuse or at risk of being harmed.

### Sexual abuse

Sexual abuse or ill treatment is any sexual act or sexual threat imposed on a child or young person.

Adults, adolescents or older children who sexually abuse children or young people exploit their dependency, immaturity and trust. Coercion, which can be physical or psychological, is intrinsic to sexual abuse. Perpetrators use a range of tactics including force, threats and tricks to engage children or young people in sexual contact and to try to silence the child or young person. They may also try to gain the trust and friendship of parents in order to obtain access to children and young people.

### Physical abuse

Physical abuse is non-accidental injury or pattern of injuries to a child caused by a parent, caregiver or any other person. It includes injuries caused by excessive discipline, severe beatings or shakings, bruising, lacerations or welts, burns, fractures or dislocations, attempted suffocation or strangulation and female genital mutilation. Death can also occur as a result of such physical abuse.

Female Genital Mutilation refers to the surgical excision of tissue from the female genitalia for cultural, religious or other non-medical reasons.

## **Emotional abuse (now termed Psychological abuse)**

Emotional or psychological abuse is behaviour by a parent or caregiver that destroys the confidence of a child, resulting in significant emotional deprivation and trauma. This can include a range of behaviours such as excessive criticism, withholding affection, exposure to domestic violence, intimidation or threatening behaviour. When there is neglect of basic psychological needs, the child or young person fails to achieve appropriate attachments with their carers. The child or young person's intellectual, emotional and physical development may be affected.

## **Neglect**

Child neglect is the failure to provide a child with the basic necessities for their proper growth and development, for example food, clothing, shelter, emotional security, affectionate attachments, medical and dental care and adequate supervision. Neglect may be an ongoing situation and can be caused by a **repeated failure to meet the child or young person's basic physical or psychological needs**. It is characterised by a continuum of omissions in parental care giving.

## **Domestic violence**

Domestic violence is any abusive behaviour used by a person in a relationship to gain and maintain control over their intimate partner. It can include a broad range of abusive and intimidatory behaviour causing fear and physical and/or psychological harm. Domestic violence can be physical assault, sexual assault or psychological abuse. It may also include behaviour such as restricting a partner or child's social contact and financial deprivation (*Interagency Guidelines on Domestic Violence 2006*).

The acts of domestic violence are usually perpetrated by men against women but can also occur within same sex relationships. There is strong evidence that domestic violence and child abuse exist within the same family dynamic, and that **the existence of domestic violence is a strong risk factor for children's safety**.

## **Current Definitions**

The definition of what constitutes abuse and neglect of children and young people has changed and broadened over recent times with the shift being away from narrowly defined incidents of abuse and neglect towards a broader assessment of whether a child or young person has suffered harm or is at risk of suffering harm or significant harm. This broader approach seeks to assess the protective needs of the child or young person rather than address the behaviour of the abuser or carer at risk of causing harm. Supportive intervention rather than interference is the principle being applied. Under the changes to the NSW Child Protection system from January 2010 the focus is on creating pathways for children and families to receive support and services without being reported to the statutory child protection agency.

There is a difference in the terminology used in some States or Territories to describe harm or risk of harm to children and young people. Some of the Acts refer to 'child abuse', some to 'maltreatment' and some to 'risk of harm'. What do these different terms mean?

In some legislation, the term 'child abuse' is the term used to describe different types of maltreatment or harm inflicted on a child or young person. It covers assault (including sexual assault and exploitation), ill treatment, neglect and exposing the child or young person to behaviour that might cause psychological harm.

### **Risk of Significant Harm**

The NSW Children and Young Persons (Care and Protection) Act 1998, has been amended and refers to '**risk of significant harm**' and has extended the definition of 'child abuse' by including serious psychological harm where the child or young person is exposed to domestic violence or not receiving necessary medical care, education, homelessness and exposing an unborn child to risk of harm from alcohol and other drugs. Some States, including NSW, also include female genital mutilation as a separate indicator that a female child or young person may be in need of protection.

### **Significant Harm**

From January 2010 in New South Wales members of the community and mandatory reporters who suspect that a child or young person is at risk of '**significant**' harm (the new statutory threshold) should report their concerns to Community Services. Significant is defined as being something that is not minor or trivial and may reasonably be expected to have a substantial and demonstrably adverse impact on the child or young person's safety, welfare or wellbeing, or, in the case of an unborn child, an adverse effect after the child's birth. This is similar to the legislation in other states and territories where what is reported is an act/s or omission/s that could cause a significant and detrimental effect on the **child's physical, psychological, or emotional wellbeing**.

What is considered to be 'child abuse' and 'harm to a child or young person' may vary across a community. Factors that will influence how child abuse is defined include:

- individual beliefs, attitudes and values
- cultural/community standards
- legal system definitions of abuse or harm
- policy in State organisations responsible for child protection, and/or
- the child's experience

There is a wide range of ideas in the community about child abuse and those ideas change over place and time. Because community ideas vary so widely, we need child protection legislation to clarify at what point there should be a statutory response to concerns about children. We also need legislation that enables us to better mobilise limited resources to assist children who have been identified as causing us concern. A legal definition of risk of harm is a way of working out which children should get priority. The development of a legal definition of risk of harm does not overcome the difficulty of different people having different views, but it does give a more independent standard.

Key factors in a legal definition of child abuse and neglect include:

- the behaviour results in some kind of injury or harm to the child or young person emotionally or physically
- the injury or harm is caused by someone who has care of the child or young person at the time
- the injury or harm to the child or young person is not the result of an accident but rather a deliberate act or failure to act
- The severity of the injury or harm is likely to cause ongoing detrimental effects to the child or young person

### **Risk of harm defined under New South Wales legislation**

In NSW, section 23 of the *Children and Young Persons (Care and Protection) Act 1998* has been amended from the end of January 2010 and now refers to **“risk of significant harm”** rather than categories of “abuse”. This allows for a wider range of circumstances in which children and young people can be reported as being ‘at risk of harm’ or actual harm. The change in raising the threshold will allow us to distinguish between children and families in need of support and those at risk of significant harm requiring statutory intervention.

A child or young person is at risk of significant harm if the circumstances that are causing concern for the safety, welfare or wellbeing of the child are present to a significant extent. This means that the circumstances are serious enough to warrant a response by a statutory authority (e.g. police or Community Services) **irrespective of the family’s consent (Keep Them Safe 2009).**

The supporting and early intervention role of Community Services and Non Government Organisations (NGOs) is better enabled under this legislation.

Section 23 of the Act **previously stated that a child or young person is ‘at risk of harm’ if one or more of the following circumstances is present:**

- a. **the child’s or young person’s basic physical or psychological needs are not being met or are at risk of not being met**



- b. the parents or other caregivers have not arranged and are unable or unwilling to arrange for the child or young person to receive necessary medical care
- c. the child or young person has been, or is at risk of being, physically or sexually abused or ill-treated
- d. the child or young person is living in a household where there have been incidents of domestic violence and, as a consequence, the child or young person is at risk of serious physical or psychological harm
- e. a parent or other caregiver has behaved in such a way towards the child or young person that the child or young person has suffered or is at risk of suffering serious psychological harm
- f. the child was the subject of a pre-natal report under section 25 and the birth mother of the child did not engage successfully with support services to eliminate, or minimise to the lowest level reasonably practical, the risk factors that gave rise to the report

Changes to the *NSW Children and Young Person's (Care and Protection) Act 1998* in 2010 will expand the categories of **significant risk** of harm to include the following new grounds:

- (b1) in the case of a child or young person who is required to attend school in accordance with the [Education Act 1990](#) -the parents or other caregivers have not arranged and are unable or unwilling to arrange for the child or young person to receive an education in accordance with that Act,
- (2) Any such circumstances may relate to a single act or omission or to a series of acts or omissions. (When viewed together these acts may establish a pattern of significant harm, demonstrating a cumulative effect).

Amendments have also been made to the Education Act 1990: as of January 2010 children will have to attend school until the end of Year 10 and then continue with school, engage in full-time work or participate in approved education or training until the age of 17 years. **Parent Responsibility Contracts**, which set out a **parent's responsibilities regarding their child's school attendance, will be used to address habitual non-attendance. Breaches of these contracts will be enforceable by the Children's Court.** Children who are of compulsory school age and who are habitually absent from school (absent a minimum of 30 days within the past 100 school days) may result in significant harm due to the lack of education.

The Act now states that a child or young person is at risk of significant harm if current concerns exist for the safety, welfare or well-being of the child or young person because of the presence of to a significant extent of those circumstances described above. The Mandatory Reporter Guidance tool used for decision making about whether to report to Community Services or to obtain support for the child, young person and/or their family uses these same circumstances in the construction of the Decision Trees.

### Categories of Significant Harm used on the Mandatory Reporter Guidance (MRG) tool (in NSW)

The MRG has been developed to assist reporters to decide if any of the following conditions are present to a significant extent:

- **Physical abuse** – injuries will require medical assessment and/or treatment; or there are fractures, head, neck or back injury, abdominal trauma, burns, lacerations requiring sutures, female genital mutilation. Explanation is suspicious, inconsistent or injuries are of various ages.
- **Neglect**
  - **Supervision** – child or young person is alone or not adequately protected
  - **Physical shelter / environment** – homelessness or living in a dangerous environment
  - **Food** – not receiving adequate nutrition
  - **Medical care** – has an untreated or inappropriately treated medical condition
  - **Mental health care** – has an untreated or inappropriately treated mental health condition
  - **Education** – a child of compulsory school age is not enrolled or is habitually absent
- **Sexual abuse** – disclosure of abuse, pregnancy, STI, trauma to genital area, contact with known offender, exposure to pornography, coercion or grooming behaviours
- **Problematic sexual behaviour** by a child or young person – coercion, aggression, grooming behaviours, contact with known offender
- **Psychological harm** – exposure to chronic or severe domestic violence, severe carer mental health or substance abuse, carer behaviours that are persistent, repetitive or having a negative impact on the development, self worth or self esteem of the child; parental criminal or corrupting behaviour; or deliberate exposure to traumatic events.
- **Relinquishing carer** – carer no longer willing to provide shelter, food, or supervision effective immediately, or placed in an alternative care arrangement for next 72 hours.
- **Carer Concerns**
  - Parent / carer substance abuse
  - Parent / carer mental health
  - Parent / carer domestic violence

Carer's substance abuse, mental health or incidents of domestic violence impacts on or is likely to impact on ability to meet child's needs or cause significant harm;

child is subject of prenatal report and mother failing to engage in reducing the risk

- **Unborn Child** – previous history of sibling abuse; circumstances suggest carer unable to care for child after birth (suicidal, substance abuse, mental illness, domestic violence, cognitive disability, medical condition, homelessness, or inadequate preparation for birth).

Decision Trees for each of these concerns assist mandatory reporters in their decision to make a report to Community Services.

Those not meeting the threshold of 'significant' harm are to be offered or provided with support.

Adapted from The Structured Decision Making System – New South Wales Mandatory Reporter Guide, 18 December 2009; Children's Research Center.

### Other Legislative definitions of 'risk of harm'

The terms "harm", "significant concerns for wellbeing" or "detrimental effect of significant nature" are also used in Victoria, Queensland, Western Australia, and the Northern Territory. The concept of 'risk of significant harm' focuses on the impact of abuse or neglect on the child or young person's safety, welfare and wellbeing and factors which may increase the child or young person's vulnerability, rather than on the nature or intent of the carer's actions.

The following table lists the specific section of State child protection Acts which defines 'risk of harm'.

State	Relevant Act	Section
<b>New South Wales</b>	<i>Children and Young Persons (Care and Protection) Act 1998</i>	s. 23
<b>Victoria</b>	<i>Children, Youth and Families Act 2005</i>	s. 27
<b>Queensland</b>	<i>Child Protection Act 1999</i>	s. 9
<b>Tasmania</b>	<i>Children, Young Persons and Their Families Act 1997</i>	s. 4
<b>Western Australia</b>	<i>Children and Community Services Act 2004</i>	s. 28
<b>Northern Territory</b>	<i>Care and Protection of Children Act 2007</i>	s. 15
<b>Australian Capital Territory</b>	<i>Children and Young People Act 2008</i>	s. 344
<b>South Australia</b>	<i>Children's Protection Act 1993</i>	s. 6

### **Extent of abuse or harm**

Precise figures on the real prevalence of abuse and neglect in Australia do not exist; statistics reflect only those cases that have been reported to and investigated by Community Services or its equivalent welfare department in each State. Between the States, definitions of what constitutes child abuse, policies and practices regarding the way reports of harm are classified, the range of designated professional groups mandated (legally obliged) to report, and community willingness to report can vary, and this makes it difficult to obtain consistent and comparable national statistical data. However, what data collection does show is that the number of child protection notifications has markedly increased across most of Australia in recent years, jumping from 137,938 in 2001-02 to 317,526 in 2007-08 (Australian Institute of Family Studies, National Child Protection Clearinghouse, March 2009).

In NSW, there were more than 189, 928 reports of risk of harm to children and young persons in 2008 as compared with 72,986 in 1999-2000 (Australian Institute of Health and Welfare 2008). The Department of Community Services Annual Report for 2007-2008 claims that there were 303,121 child protection reports in NSW in the 2007-2008 period and 185,198 in the 2003-2004 period.

These increases may be due to changes in legislation, policies and practices within States, or it may be due to increased community awareness and responsiveness to concerns about the safety, welfare and wellbeing of children and young people. It may equally indicate an actual increase in the number of children and young people at risk of harm.

**Aboriginal children** were clearly overrepresented in the child protection system across all States and Territories. In NSW, the *Special Commission of Inquiry into Child Protection Services (2008)* found that Aboriginal children and young people are 3 times more likely to be reported to Community Services than non-Aboriginal children, are more likely to be the subject of multiple reports, and comprise one third of children in Out of Home Care (*Keeping Them Safe Report, 2009*). This is even more significant when you consider that 2.1% of the NSW population identify as Aboriginal and Aboriginal children account for 4% of the total NSW population of children aged 0 – 17 years.

In the 2007/2008 period Aboriginal children and young people accounted for 18.3% of all reports. Aboriginal children aged under one year were 5 times more likely to be reported than non-Aboriginal children and more likely to be the subject of multiple reports. Aboriginal children and young people are similarly over-represented in the juvenile justice system. (Special Commission of Inquiry into Child Protection in NSW, Final Report 2008).

**Also, see the Resource Sheet published by the AIFS entitled "Child Protection and Aboriginal and Torres Strait Islander Children" at <http://www.aifs.gov.au/nch/pubs/sheets/rs10/rs10.html> . The authors cite ATSI**

children accounting for 23% of all confirmed reports of abuse or neglect, making them 6 times more likely than other children to be subject of a confirmed report.

The latest statistical data on the incidence of reports of risk of harm, substantiated (risk of harm has been established) abuse cases and children in out of home care across Australia is available from the Australian Institute of Health and Welfare, *Child Protection Australia 2007-08* available at:

<http://www.aihw.gov.au/publications/index.cfm/year/2009/subject/5>

The Wood Inquiry in 2008 found that in New South Wales 60% of the reports were made by police, health, education and human services. Police accounted for approximately one third of all reports, followed by health and schools/education and care services. Most reports concern domestic violence, psychological abuse, neglect, carer substance abuse, carer mental health and/or sexual abuse.

**A large proportion of reports are of the same 'frequently reported families'.**

The top 20% of the children and young people who were frequently reported in 2006-2007 accounted for more than half the reports made. Of the reports made **to Community Services 13% were not 'risk of harm' as defined under the Act** and that while the family may have required assistance they should have been referred to a more suitable agency for support. 33% of reports received some attention but not a face to face visit. Only 13% of reports resulted in a home visit form a Community Services case worker as part of the assessment process. 20% of the reports made concerned children and young people already being assessed.

The overall finding was that too many reports are made that do not warrant a statutory intervention, considerable resources were used to manage these reports, and the majority made were receiving little assistance.

These findings showed that there was an overwhelming need for change in the NSW child protection system and this change would need to share the responsibility across the community to ensure the safety, welfare and wellbeing of children, young people and their families. Services would need to be reshaped and support provided earlier to those requiring support and intervention.

### **Our role**

As educators dealing with children and young people, we do have specific roles and responsibilities relating to the protection of children from harm or risk of harm. In order to do this we need to be able to:

- understand why abuse happens and what we can do about it
- recognise physical and behavioural indicators of harm or risk of harm
- determine the significance of the impact of the indicators and report appropriately or consult with Child Wellbeing Units if appropriate and available; or

- refer to support services concerns not meeting the threshold for significant harm
- respond appropriately following organisational policies and procedures
- protect children and young people from further harm
- maintain a child-focussed practice
- apply ethical and nurturing work practices

### Learning activity 1.1



Write a response

If you are interested in the history of child abuse in Australia and how child protection measures have been developed over time, read Adam Tomison's 'A History of Child Protection' (in *Family Matters*, No. 60, Spring/Summer 2001, Australian Institute of Family Studies).

1. Write down some examples of child-rearing practices that were accepted in the past but would now be considered harmful to children.

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2. What are some current issues that may impact negatively on child rearing practices in Australia?

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### Learning activities 1.1 (cont'd)

3. As noted in this chapter, government departments with statutory responsibility for child protection are increasingly focusing on early intervention approaches. Why do you think they are taking this approach?

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Discuss your ideas with your facilitator, other learners or a work colleague.

(Information on the NSW Department of Community Services approach can be accessed at:

[http://www.community.nsw.gov.au/html/child\\_protect/early\\_intervention.htm](http://www.community.nsw.gov.au/html/child_protect/early_intervention.htm) )

### Section summary

This concludes section one (1). This section has given you the opportunity to;

- develop your understanding of the historical background relative to protecting children and young people
- learn about current responses and issues in defining child abuse
- reflect on the role of the educator in protecting children and young people

At this stage you should be able to;

- show an awareness of protective issues and using child protection procedures where appropriate
- ensure decisions and actions taken are within own level of responsibility, work role, state legislation and service policies and procedures
- identify child protection legislation in the relevant state or territory