

Removals of infants by the child protection system: Examining their nature, extent and impact to guide prevention and early intervention

FACSIAR Research Seminar

Stephanie Taplin PhD

15 March 2018



SIB

State Intervention with Babies Study

Outline

- Research literature
- Prenatal reporting
- Infant removals
- Published data
- Policy questions





PROJECT TITLE: Removals of infants by the child protection system: examining their nature, extent and impact to guide prevention and early intervention.

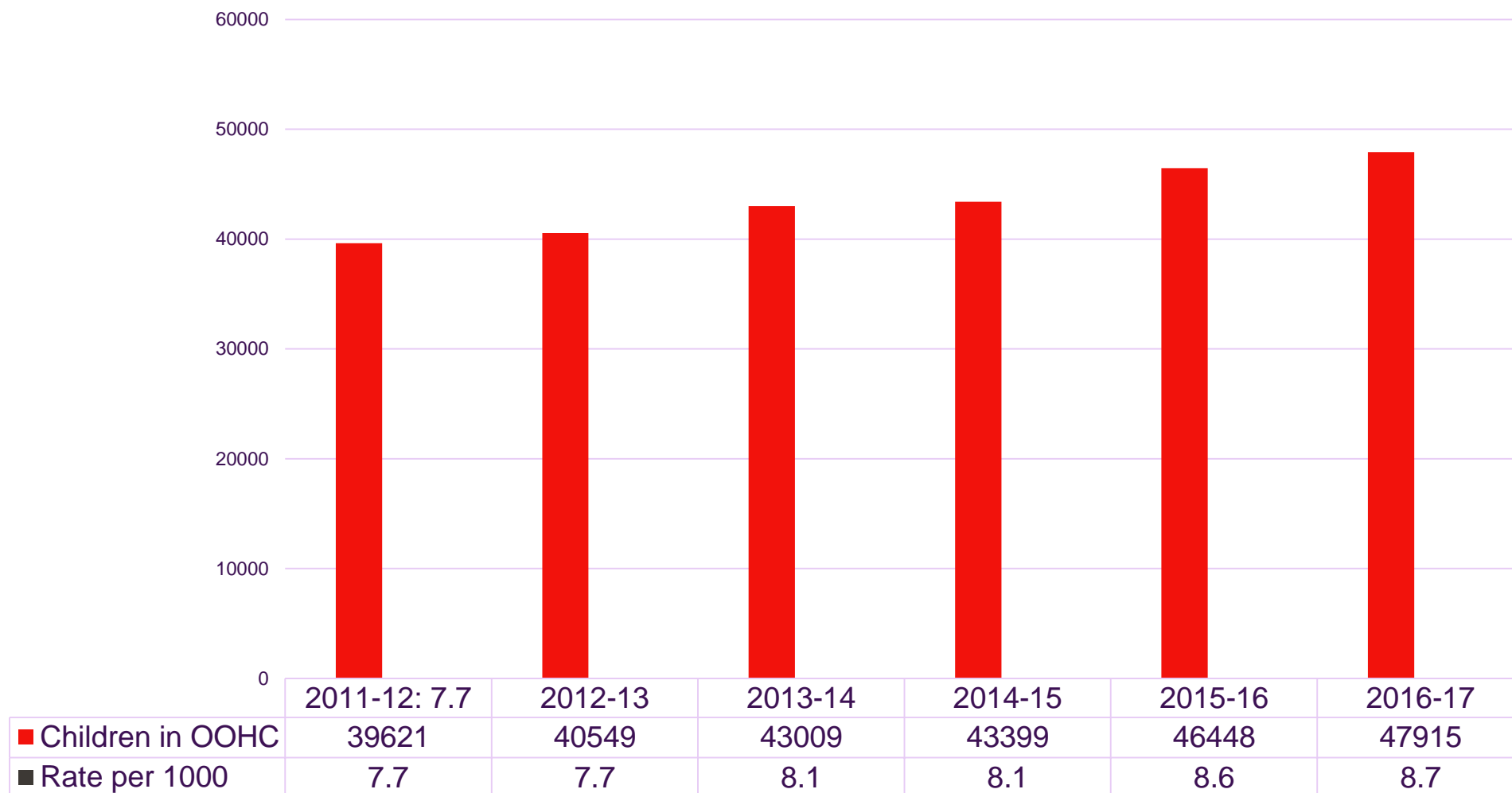
AIMS: To increase our knowledge about the nature, extent and impact of the removal of infants (< 1 year old) and newborns (<31 days old) from their mothers.

RESEARCHERS:

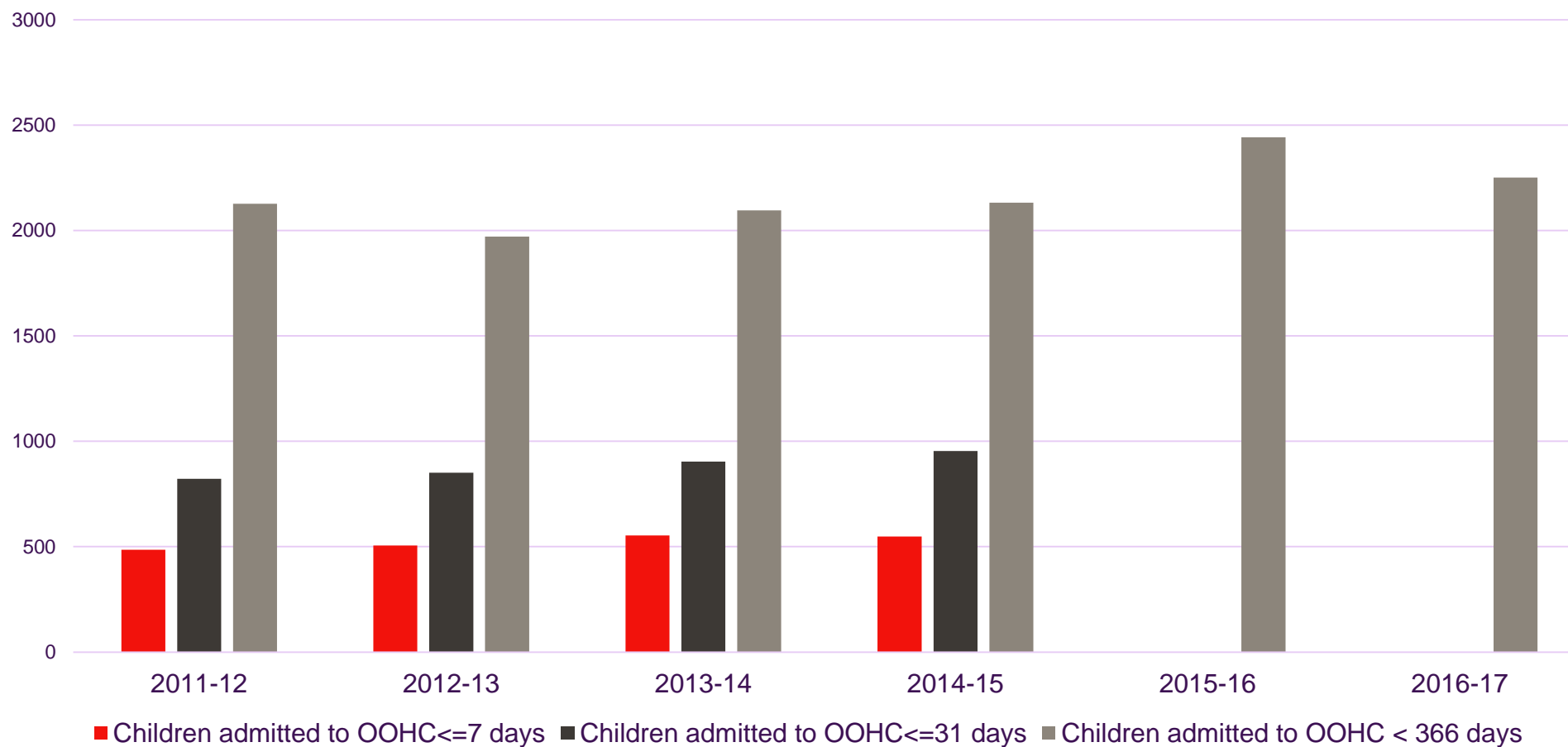
Assoc Prof Stephanie Taplin (NSW); Dr Melissa O'Donnell & Prof Rhonda Marriott (Aboriginal health and wellbeing) (WA); Prof Karen Broadhurst (UK); Dr Fred Wulczyn (USA)

Trends in number of children in OOHC

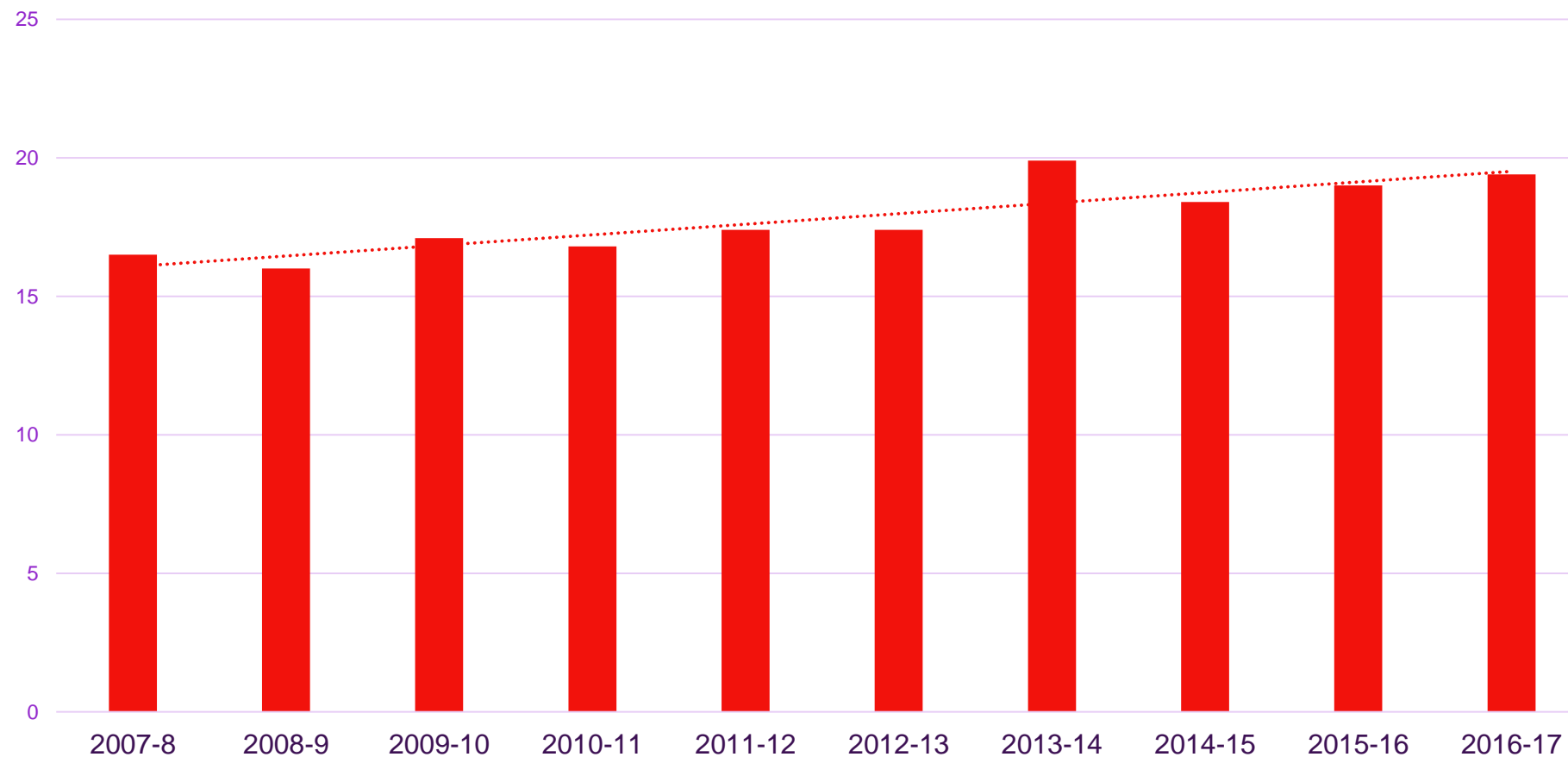
(AIHW national data)



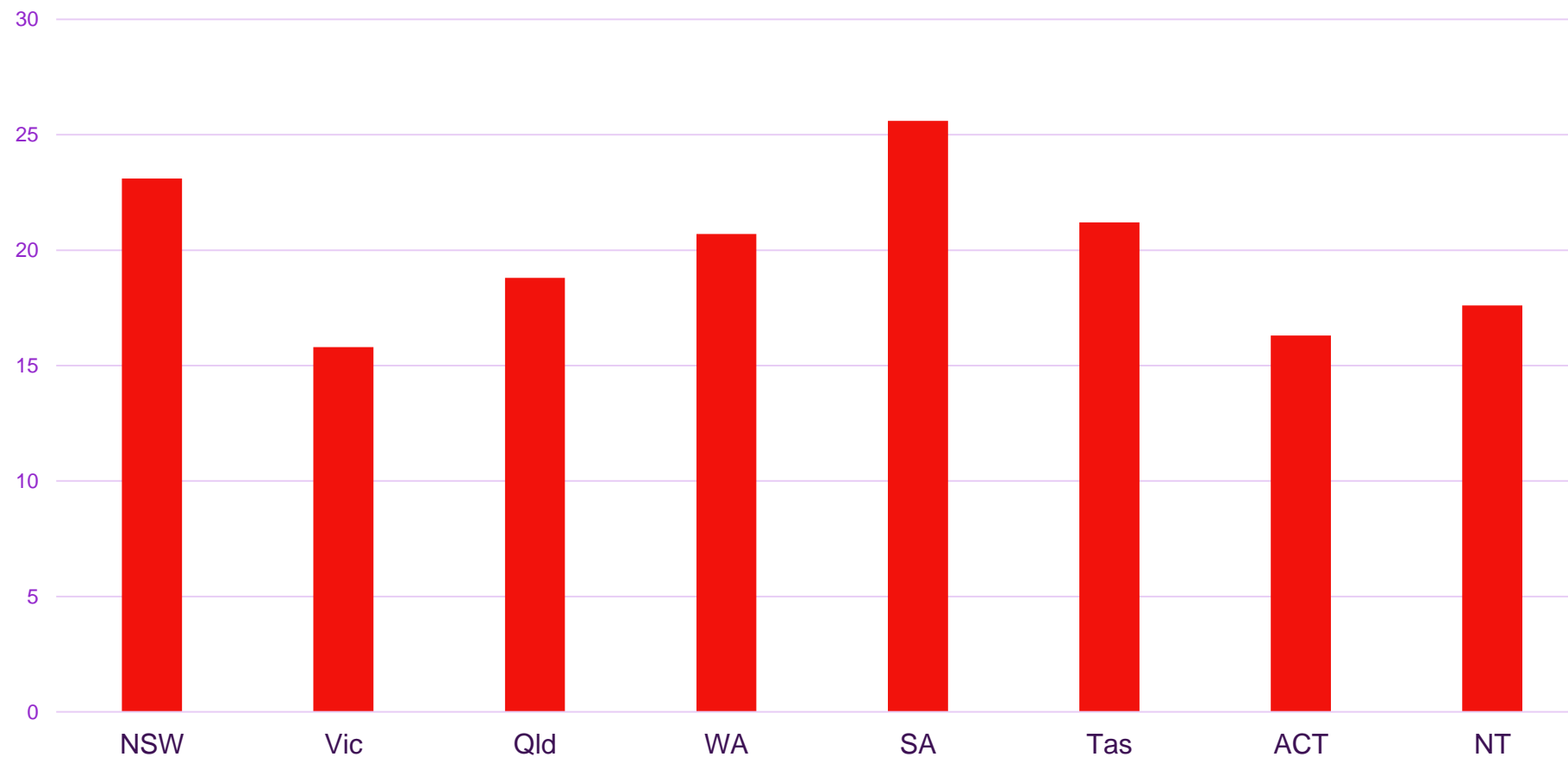
Number of infants admitted to OOHC (AIHW national data)



Infants as a proportion of all OOHC entries (trends) % (National data: AIHW)

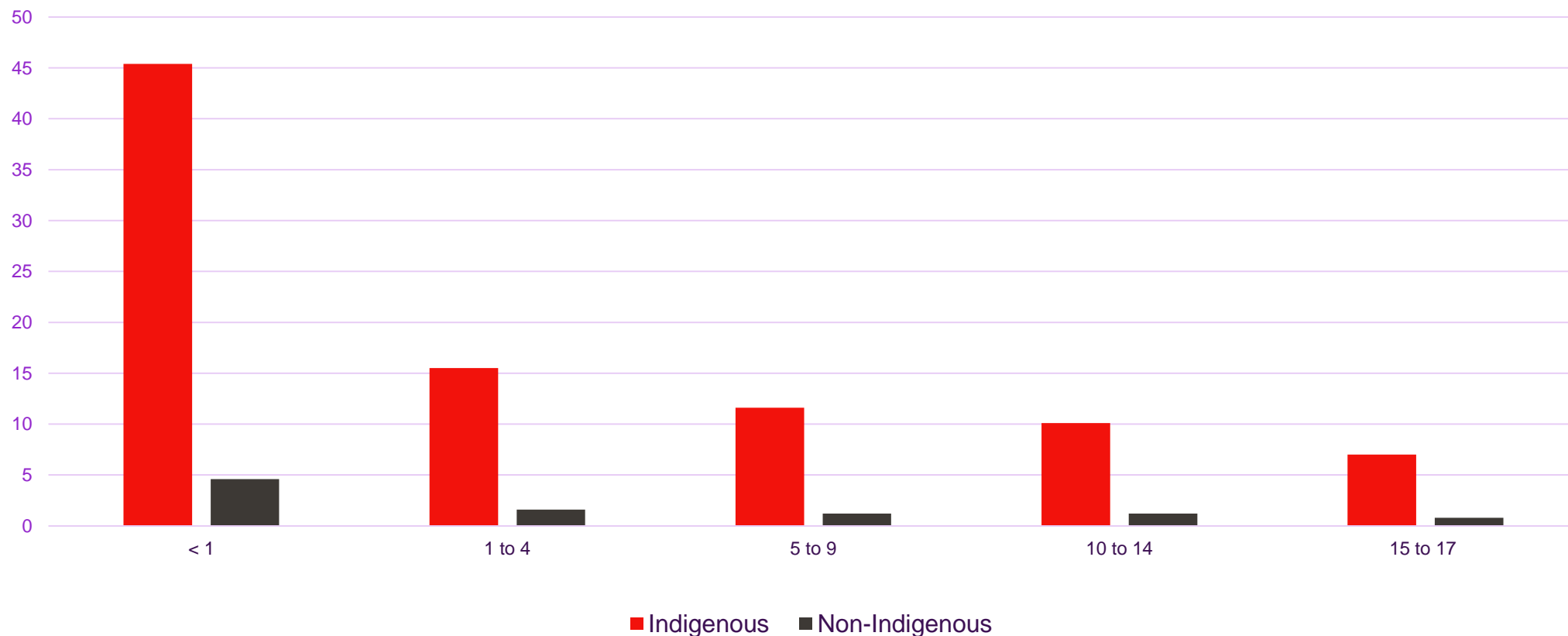


Infants as a proportion of all OOHC entries by jurisdiction (AIHW data: 2016-17)



Indigenous and non-Indigenous children admitted to OOHC: Number per 1,000

National data as at 30 June 2017 (AIHW 2018)



Prenatal reporting: overview

- Most Australian jurisdictions have reporting of ‘unborn child’ in their legislation
- Aim is to work with the pregnant woman to reduce risky behaviours that may impact on the foetus or newborn and either prevent the need for the baby to be taken into care and protection once born, or to identify early the need for removal.
- Interventions provided prenatally are voluntary and require the consent of the pregnant woman.

Legislation (NSW and ACT)

NSW: *Children and Young Person's (Care and Protection) Act 1998* –S. 25 *Pre-natal reports*

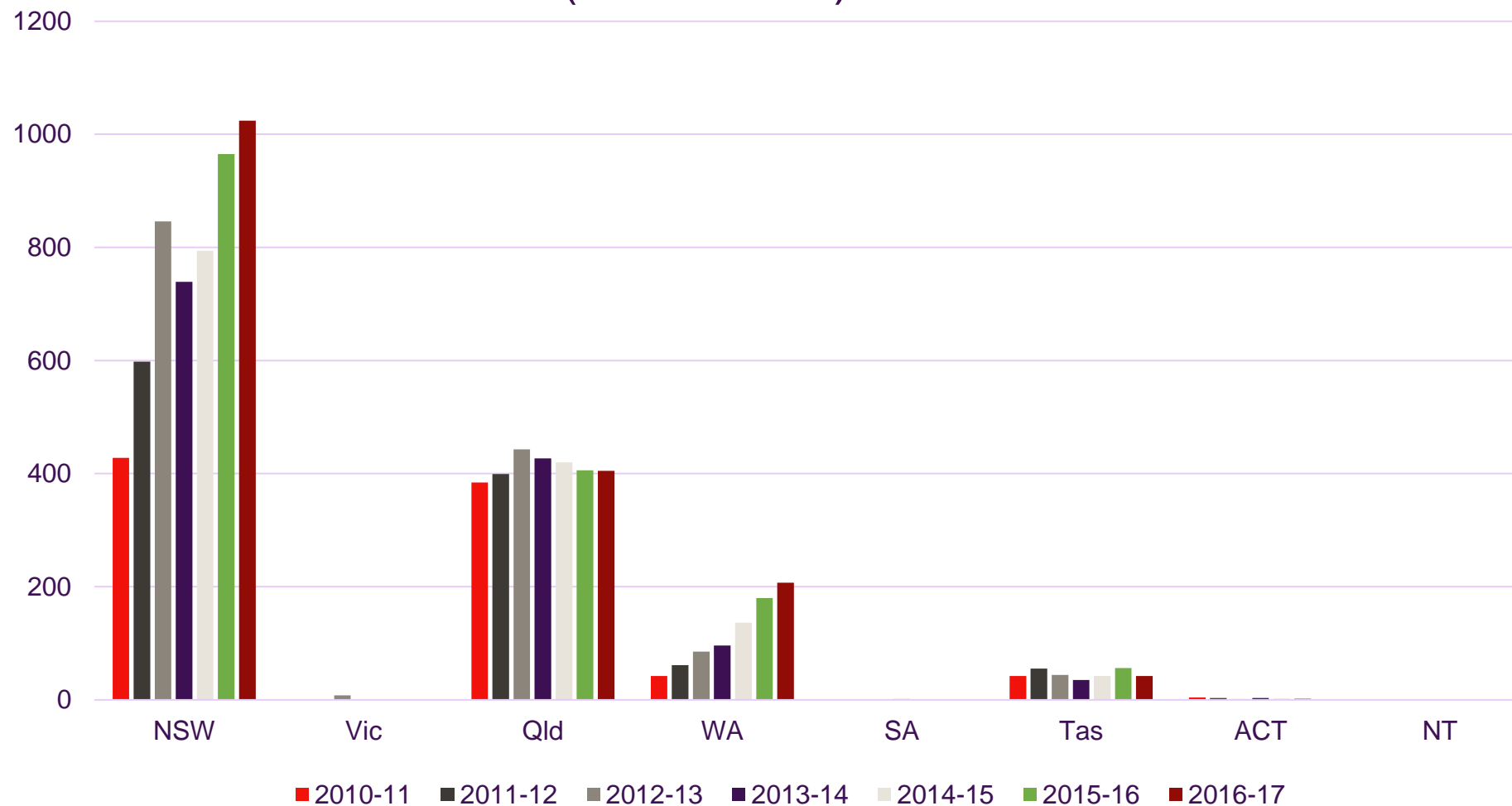
A person who has reasonable grounds to suspect, before the birth of a child, that the child may be at risk of significant harm after his or her birth may make a report

ACT: *Children and Young People Act 2008 (ACT)* s.362 Prenatal reporting - anticipated abuse and neglect:

A child who may be born as a result of the pregnancy may be in need of care and protection.

Prenatal reporting: trends by jurisdiction

(AIHW data)



Which pregnant women are reported to the child protection system?

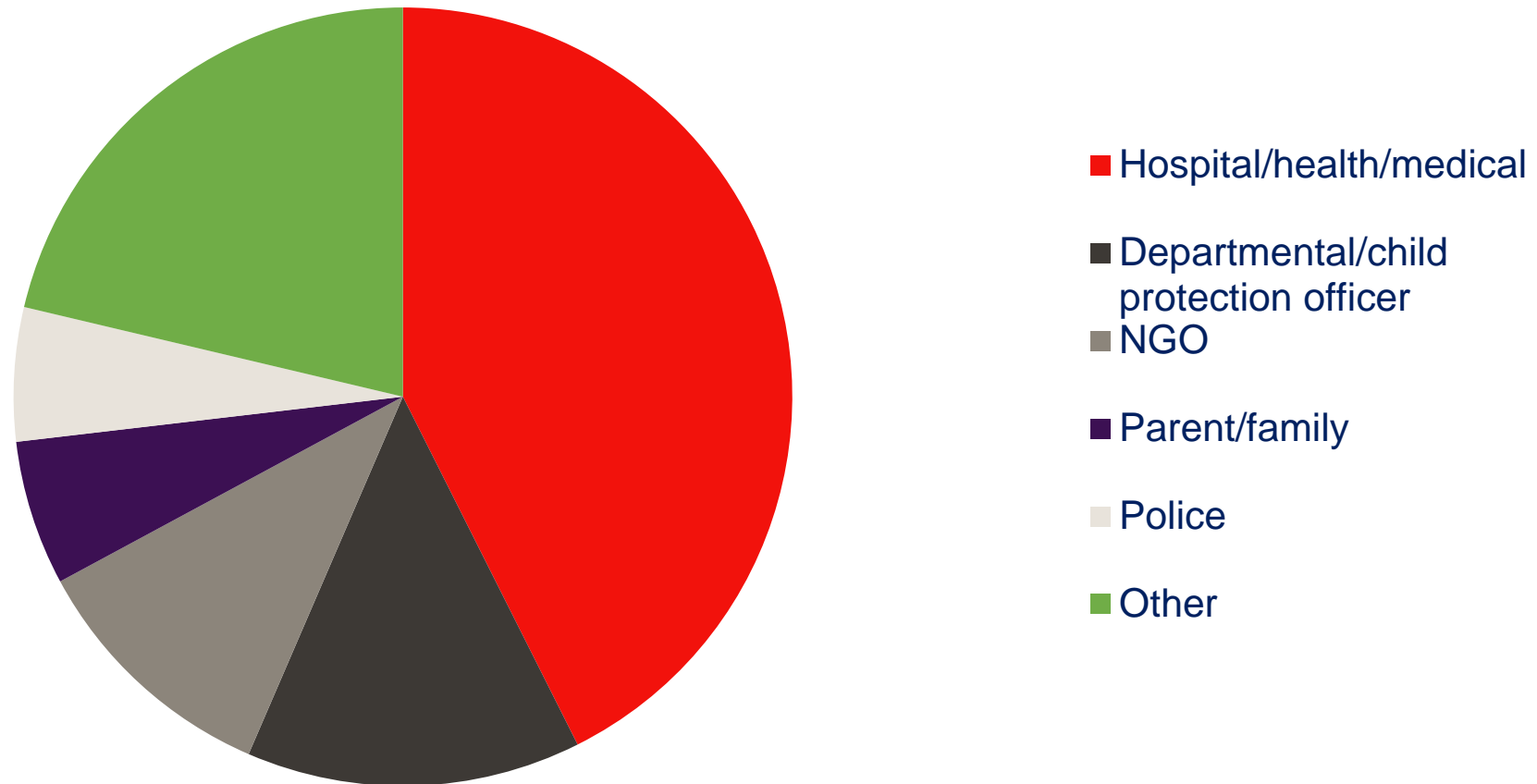
- Young and disadvantaged
- Age at first birth: 19.5 yrs (median)
- Greater numbers of children (2.3 on average)
- Aboriginal
- Women who have children removed previously
- 37% reported during first pregnancy

Taplin, S. (2017). Prenatal reporting to child protection: Characteristics and service responses in one Australian jurisdiction. *Child Abuse & Neglect*, 65, 68-76.

When are pregnant women reported to the child protection system?

Trimester first reported	Percentage %
Third trimester (within 3 mths of birth)	52.6
Second trimester	40.8
First trimester	6.6

Who reports ?



Prenatal reports: reasons

Reason for all prenatal reports	No. reports	Percent %
Future risk concern	144	66.7
Family (domestic) violence	29	13.4
Abuse - neglect	12	5.6
Parent's mental health concern resulting in harm to child / young person	12	5.6
Parent's substance use concern resulting in harm to child / young person	10	4.6
Abuse – physical or emotional	6	2.8
Other	3	1.5
Total	216	100.0

Child protection responses to prenatal reporting

- Approximately two-thirds were provided with some prenatal support (median 133 days, including post-natal).
- 12% of the 'babies' reported were removed within 100 days of their birth.
- Women with more CP reports were more likely to get service support but also to have their baby removed within 100 days.

Substance use in pregnancy and parenting

- Identifying and screening for substance use
- To identify risk to developing foetus and/or parenting capacity
- Risks in avoiding antenatal care and treatment
- Importance of engaging women in support and treatment

Taplin, S., Richmond, G. & McArthur, M. (2015) *Identifying alcohol and other drug use during pregnancy: Outcomes for women, their partners and their children*. ANCD Research Paper 30. Canberra: Australian National Council on Drugs.
http://www.acu.edu.au/data/assets/pdf_file/0004/755275/AOD_Use_During_Pregnancy.pdf

Policy and practice implications



**kContact: a trial of a supervised contact
intervention for children in out-of-home care
and their parents**

Investigators: Assoc Prof Stephanie Taplin (ACU), Prof Morag
McArthur (ACU) Prof Cathy Humphreys (Uni of Melb)

NSW Project Managers: Dr Aino Suomi, Dr Debbie Noble-Carr
(ACU)

Funding: Australian Research Council, ACT CSD, NSW FaCS, NGO
partners



kContact study design

- Cluster RCT of an intervention to support contact between parents and kids in long-term OOHC
- Originally in two Australian jurisdictions: ACT and Victoria (ARC Linkage 2014-18)
- Additional 4 sites funded in NSW by FaCS (2017-18)
- Intervention currently being supported in 2 sites
- Follow-up interviews to start (parents, carers, workers)
- Data collection to conclude in August 2018
- Comparison sites to be offered training in intervention

Hypotheses

That the intervention will:

- reduce child distress related to contact (*primary outcome variable*);
- improve relationships between children and their parents;
- improve the ability of parents to support children at contact visits;
- reduce the proportion of contact visits cancelled.

Taplin, S., Bullen, T., McArthur, M., Humphreys, C., Kertesz, M., & Dobbins, T. (2015). kContact, an enhanced intervention for contact between children in out-of-home care and their parents: protocol for a cluster randomised controlled trial. *BMC Public Health*, 15, 1134.

Infant references

AIHW (2016 etc) *Child Protection Reports*. www.aihw.gov.au

Broadhurst, K., Alrouh, B., Yeend, E., Harwin, J., Shaw, M., Pilling, M., . . . Kershaw, S. (2015). Connecting Events in Time to Identify a Hidden Population: Birth Mothers and Their Children in Recurrent Care Proceedings in England. *British Journal of Social Work*.

Marsh, CA, Browne, J, Taylor, J & Davis, D. (2017) Characteristics and outcomes of newborns entered who entered into care (EIC) within 7 days of birth in NSW, *Children and Youth Services Review*, 81, 261-267.

Taplin, S., Richmond, G. & McArthur, M. (2015) *Identifying alcohol and other drug use during pregnancy: Outcomes for women, their partners and their children*. Canberra: Australian National Council on Drugs.

Taplin, S. & Mattick, R.P. (2015) The nature and extent of child protection involvement amongst heroin-using mothers in treatment: high rates of reports, removals at birth and children in care. *Drug & Alcohol Review*. 34, 31-37.

Taplin, S. (2017) Prenatal reporting to child protection: characteristics and service responses in one Australian jurisdiction. *Child Abuse & Neglect*. 65, 68-76.

Wulczyn, F., Ernst, M. & Fisher, P. (2011) *Who Are the Infants in Out-of-Home Care? Issue Brief*. Chapin Hall. Chicago

Zhou, A. & Chilvers, M. (2008) Infants in Australian Out-of-Home Care. *British Journal of Social Work*, 40 (1), 26-43.

Associate Professor Stephanie Taplin
Institute of Child Protection Studies
Australian Catholic University
stephanie.taplin@acu.edu.au
<http://www.acu.edu.au/icps>