

Child Abuse: Public Health Model Required

AUSTRALIAN DEMOCRATS ACTION PLAN
CHILD ABUSE: PUBLIC HEALTH MODEL REQUIRED
CHILDREN AND YOUTH

Australia is at the crossroads in the history of child protection. Disturbing escalations in child abuse notifications and substantiations and in the numbers of children entering out-of-home care have placed child protection systems under tremendous pressure and at risk of collapse. The single most important factor in the escalating incidence of child abuse is parental substance abuse, a reality exacerbated by families experiencing a succession of social ills such as joblessness, poor health, limited education and little social support. This is a serious national problem with massive inter-generational consequences. It is a problem identified by the Australian Medical Association as perhaps the most grave public health issue confronting Australia. Evidence suggests that it is time to reconsider the direction that child protection policy is heading in Australia. It is time to consider a multi-layered public health model as a preferred policy approach for the prevention of child abuse.

“While a legal model of child protection is necessary to protect some abused and neglected children, a public health model has much greater potential to reduce the level of child abuse in the community.”

**Professor Dorothy Scott,
Director, Australian
Centre for Child
Protection, University of
South Australia**

Democrats Action Plan

- Advocate for targeted population-based research to be undertaken for the development of a multi-layered public health model for child protection.
- Continue to urge federal governments to show national leadership to address the child abuse crisis in Australia (see National System of Child Protection Action Plan).
- Persist with our call to have a royal commission held into the criminal assault of children (see Royal Commission into Child Criminal Assault Action Plan).

Dangers of Overloaded Child Protection Systems

In 1999-2000 there were 107,134 child abuse notifications, a number that more than doubled by 2005-06 to a total of 266,745. Approximately one in five was substantiated as child abuse and one in four resulted in a court order.

This epidemic of child protection notifications has overloaded child protection services, a situation considered potentially dangerous because:

- Children in serious danger can be missed in an overloaded system struggling to avoid collapsing under the weight of escalating notifications; through superficial assessments; or through prematurely closing cases.
- Children can be left at risk or disadvantaged because they have been graded as falling below what is considered necessary for statutory intervention.



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- Children and young people already in care can be adversely affected when resources are diverted to deal with more investigations.
- Families already experiencing stress and social isolation can be further alienated and suffer humiliation from inappropriate reporting.
- Overloaded child protection services cause high levels of stress and staff turnover which further weakens the service and causes acute staff shortages which are now widespread.

All of the above clearly indicate the need for a change in child protection policy, a change guided by preventative rather than reactive measures. Far better to use resources in areas such as health, education and housing to reduce the social problems that lead to child abuse and neglect.

A Public Health Model of Child Protection

A public health approach is multi-layered and would target child maltreatment as part and parcel of other social problems. This would require sound population-based data that informs more about the wellbeing of children in a community rather than responding to notifications or substantiation numbers. It could include:

Primary Prevention – interventions aimed at the whole community and that focus on environmental modification, for example, health promotion campaigns and education programs targeting parental substance abuse.

Secondary Prevention – comprising universal services to reach higher risk sub-groups, such as a sustained nurse home visiting service and early childhood education and care services for vulnerable children and parents.

Tertiary Prevention – where statutory child protection services focus on those children who are either clearly at risk or who are already in care.

If governments had the political will to tackle head on the worsening epidemic of reported child abuse and neglect, so much could be achieved. Further neglect of long-term policy in this area can only continue to demand massive budgetary expenditures on the consequences of abused childhoods, such as criminal behaviour, mental health problems, failed relationships and welfare dependency. We need our children to become healthy and economically and socially competent citizens. They are after all a country's most precious resource.



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