

**Submission
No 62**

CHILD PROTECTION AND SOCIAL SERVICES SYSTEM

Organisation: Australian Psychological Society

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Committee on Children and Young People
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To Whom It May Concern,

Submission to the Inquiry into Child Protection and Social Services System

The Australian Psychological Society (APS) welcomes the opportunity to provide a submission in response to the Inquiry into Child Protection and Social Services System. This Inquiry has been established to examine the effectiveness of the NSW child protection and social services system in responding to vulnerable children and families.

The APS is the peak professional body for psychology in Australia, representing over 25,000 members nationally. A key goal of the APS is to actively contribute psychological knowledge for the promotion and enhancement of community wellbeing. Psychologists consider child protection and prevention of child abuse crucial for reducing the burden of health in Australia and upholding the rights of children.

The APS is committed to supporting efforts to prevent child abuse, working with people who have experienced child abuse, working constructively with those who have committed or been charged with criminal offences, and increasing child safety. These efforts are central to the APS mission, values and ethics and involve applying knowledge from many areas of psychological research and practice. The APS strongly affirms the need for the highest quality evidence-based services to be provided in this area and is committed to support our members to uphold the highest level of professionalism and ethical standards.

Impact of child abuse and neglect

Many people who have experienced child abuse can endure significant and long term harms. As stated in the [APS submission to the Productivity Commission Inquiry into Mental Health](#), certain types of adverse childhood experiences (ACEs), many of which occur within the family context, predict the development of a range of mental health conditions (e.g., depression, anxiety, substance misuse and posttraumatic stress disorder) and suicidality.^{1 2} ACEs include child abuse and neglect, parental substance abuse and mental illness, intimate partner violence, incarceration or death, and poverty.

¹ Cecil, C.A.M., Viding, E., Fearon, P, Glaser, D. & McCorry, E.J. (2017). Disentangling the mental health impact of childhood abuse and neglect. *Child Abuse & Neglect*, 63, 106-119.

² Taillieu, T. L., Brownbridge, D. A., Sareen, J. & Afifi, T.O. (2016). Childhood emotional maltreatment and mental disorders: Results from a nationally representative adult sample from the United States. *Child Abuse & Neglect*, 59, 1-12.

The APS acknowledges the ubiquitous nature of child neglect and abuse and the associated long-term effects that it can have on individuals and families. The negative impact of exposure to ACEs is cumulative and exposure to particular types of ACEs at critical developmental points in childhood and adolescence is predictive of specific mental health diagnoses and involvement in the criminal justice system.^{3 4 5} In Australia, it has been estimated that for females, child maltreatment accounts for 23 per cent of the burden for depressive disorders, 31 per cent for anxiety disorders and 33 per cent for self-harm with similarly high proportions for males.⁶

The current system is failing children and families

The findings of four major reviews⁷ conducted over the last few years consistently demonstrate that the current system is failing children and their families. According to NSW child protection data⁸, out of the 110,000 children who met the criteria for Risk of Significant Harm (ROSH) only 29% received a face-to-face assessment. The APS believes that this is an unacceptable level of intervention.

COVID-19 has increased the strain on already vulnerable families and children in NSW, with an increase in rates of child abuse. The pandemic has exacerbated the weaknesses in the system and led to an increase in demand for services.

A whole of government response is required

It is both critical and timely to address the unacceptable shortcomings of the system. The APS recognises the need for a whole of government approach to child safety where federal government is actively involved in state and territory government approaches to child safety. The system requires fundamental reform, including reform to funding, evaluation, and monitoring. Evaluating program outcomes and ensuring evidence-based strategies are employed is necessary to reduce the incidence and prevalence of child abuse, ensuring children get the right care they need to be safe and to have the trauma addressed.

It is important for there to be appropriate ways to sensitively manage the voices of children in the process so that they are not unduly influenced by perpetrators of abuse and to ensure they are empowered to have a voice in the process. This is critical to ensuring child safety.

With access to appropriate professional support, people who have experienced abuse have the opportunity to recover. Treatment and support is required for children and their families for

³ Anderson, S. L. & Teicher, M. H. (2008). Stress, sensitive periods and maturational events in adolescent depression. *Trends in Neuroscience*, 31,183-91.

⁴ Schalinski, J., Teicher, M. H., Nischk, D., Hinderer, E., Muller, O., & Rockstroh, B. (2016). Type and timing of adverse child experiences differentially affecting severity of PTSD, dissociative and depressive symptoms in adult inpatients. *BMC Psychiatry*, 16, 295.

⁵ Malvaso, C.G., Delfabbro, P.H, Day, A. (2016). Risk factors that influence the maltreatment offending association: A systematic review of prospective and longitudinal studies. *Aggression & Violent Behavior*, 31, 1-15.

⁶ Moore, S. E., Scott, J. G., Ferrari, A. J., et al. (2015) Burden attributable to child maltreatment in Australia. *Child Abuse & Neglect*, 48, 208–220.

⁷ Wood report 2008; Tune review 2016; Donnelly inquiry 2017; and Family is Culture 2019.

⁸ NSW Government (2020). Caseworker Dashboard March 2020 Quarter.

https://www.facs.nsw.gov.au/data/assets/pdf_file/0004/784903/Caseworker-Dashboard-March-2020-quarter-final.PDF

long-term prevention of later problems and is currently under-emphasised and under-resourced.

There is an overrepresentation of poor outcomes among children who are abused and an overrepresentation of children who are abused in mental health and forensic settings. The APS recommends that additional investment is needed to implement effective preventative action and system wide reform, to effectively support children and families who are at risk, slow the rate at which children enter out of home care, and reduce the burden on the NSW Government in the long-term.

The APS particularly acknowledges the challenges faced by Aboriginal and Torres Strait Islander Australians, as individuals and communities, who must deal with ongoing cultural, familial and community violence and trauma. Recognising the effects of colonisation is vital for understanding current health disparities and for informing equitable access to culturally appropriate treatment and support. Addressing such a significant problem may be supported by partnering with Aboriginal and Torres Strait Islander communities to co-design program interventions to reduce child abuse and harm.

In summary, the APS is concerned that the psychological factors underlying child abuse are important and require greater attention and resourcing to effectively support families and the wider community.

The APS has written many relevant submissions and resources relating to child safety and the prevention of child sexual abuse, which may be useful and relevant for this Inquiry. Last year the APS also convened a [Taskforce into Child Sexual Abuse and Psychology](#). You can find further information on the [child abuse advocacy section](#) of our website.

If the Committee requires further APS input, I may be contacted through my office on [REDACTED]

Yours sincerely

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Chief Executive Officer