

Certainty for Children in Care

A study into the placement history and social background of infants placed into South Australian Out-of-home Care 2000-2005

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Based on the findings of this study, persistent neglect or physical abuse are the dominant reasons why very young children enter care. Such abuse arises in environments affected by significant poverty, homelessness, mental illness, substance misuse and domestic violence. Infants entering the care system come from families with multiple difficulties; however, parental substance misuse and neglect are becoming increasingly more common. These same factors, and parental intellectual disability, significantly decrease the likelihood of successful reunification. Children's abuse history was found to be highly predictive of subsequent abuse.

This study was designed to gain insights into the nature and range of social and family difficulties contributing to infants being placed into care. The study was conducted as a collaborative research project between the Department for Families and Communities and the University of Adelaide (Dr. Paul Delfabbro), and is part of the larger research project titled 'Certainty for Children in Care' which involves three major interrelated study components. This component, 'A study into the placement history and social background of infants placed in South Australian Out-of-home Care 2000-2005', focuses on young infants, whose need for stability and continuity of care is so fundamentally important to their long-term developmental wellbeing.

Context

According to the Australian Institute of Health and Welfare (2006), 38% of young people who enter out-of-home care in Australia are under 5 years of age, with 13% of these children being less than one year of age. Despite this, relatively little research has been conducted to examine the placement histories and outcomes for very young children and infants.

The purpose of this study was therefore to examine the early placement history and social backgrounds of the youngest children entering care in South Australia during a five year period. It aimed to examine:

- why these children enter the care system,
- what proportion of these children remain in care, and
- the placement trajectories of these children.

It was anticipated that the results of the study would help to:

- inform policies and services relevant to the needs of families with very young children, and
- assist practitioners in timely and appropriate decision-making for this very vulnerable population of children.

Research methods and sampling

In South Australia, a total of 1155 infants aged 0-2 years were placed in at least one out-of-home placement between 1st June 2000 and 30th June 2005. A random sample of 500 of these infants was drawn from Families SA 'Client Information System' data base and data was obtained for 498 of these cases.

A pro-forma was developed to record data in relation to these infants and specifically, to examine the following:

- · factors contributing to the child's placement in care
- · placement orders, authorities and type
- placement destinations
- re-notifications and concerns since leaving care.

Analysis of the random sample showed that the sample of 489 infants was statistically representative of the general population of infants entering care. For example:

- Male and female infants were evenly represented
- Aboriginal and/or Torres Strait Islander infants were significantly over-represented (approximately 9-10 times the population average) and
- Just under a third of infants were from regional South Australia.

On average, infants in the sample group were 1.3 years old when they first entered care. Further breakdowns are as follows:

- 7.5% of infants entered care in their first month of life
- 10% of infants had first entered care by 3 months of age
- Over a third entered care between 3 and 12 months of age
- 56% first entered care after 12 months of age

The average age of the infants as at 30th June 2005 was 5 years.

Findings

Factors contributing to the child's placement in care

Infants came from families experiencing multiple difficulties:

- Over two thirds of the infants came from families where there was evidence of severe neglect and financial hardship.
- Approximately half of the sample were from families affected by domestic violence, substance misuse, or physical abuse.
- 43% of infants lacked a stable home (i.e. family backgrounds of homelessness and housing instability).
- Parental mental illness played a significant role in over a third of cases (specifically, post natal depression).
- Smaller proportions of children were in care because of the loss of parents due to physical illness or imprisonment.

The factors most likely to be observed in combination were:

- severe neglect
- financial problems
- homelessness
- · domestic violence and
- physical abuse.

The data also indicated that:

- Parental substance misuse and neglect had become significantly more common in 2005 compared to 2001 as factors influencing entry into care.
- Infants born to teenage parents and parents with an intellectual disability tended to come into care at a significantly younger age.
- Infants from families with financial problems entered care at a significantly later age.

Aboriginal and/or Torres Strait Islander status was also found to be significantly associated with the reasons why young people were in care:

- Aboriginal and/or Torres Strait Islander infants were more likely to be severely neglected and come from families experiencing financial difficulties, homelessness, domestic violence and substance misuse, whereas
- Non-Aboriginal and/or Torres Strait Islander infants were more likely to be in care because
 of parental mental health or intellectual disabilities issues.

Placement orders, authorities and type

Infants in the sample experienced an average of 5.35 orders and/or authorities during their lifetime, of which 3.01 of these were court orders. A substantial proportion of infants had experienced multiple orders:

- Almost half the infants had been placed on at least one court Order with almost 10% having had 11 or more Orders (this included 6 infants who had 20 or more: maximum = 24)
- Many children had been subjected to number Investigation and Assessment Orders with some experiencing as many as nine
- 15% of infants had six or more interim custody or 12 month guardianship Orders
- 19% of infants were eventually placed under the guardianship of the minister until 18 years after having being placed on an average of 8.88 Court Orders (compared with only 1.9 for the rest of the sample).

Infants with parents with an intellectual disability or who had been subjected to neglect were significantly more likely to be placed under the Guardianship of the Minister until 18 years.

Placement numbers were higher for infants who had experienced both neglect and physical abuse. Overall:

- Approximately 45% of the children who entered care as infants between 2000 and 2005 experienced only respite placements,
- 55% of infants experienced at least one non-respite placement (usually an emergency or short-term foster care placement)
- 20% of the infants had been exposed to higher levels of placement instability (7 or more non-respite placements)
- 26 infants had experienced 10 or more non-respite placements with a maximum of 18 placements.

Only around 10% of infants had been placed in formally listed relative care (i.e. relative placements where the Department provides payment for the provision of care), and relative care was much more likely to used for Aboriginal and/or Torres Strait Islander children.

Placement destinations

An analysis of the children's placement status as at 30th June 2005 was undertaken, and specifically, in relation to those infants who had entered care for protective reasons, i.e. as opposed to respite care only. These analyses showed that:

- Approximately 40% of infants had remained in foster care
- Approximately 41% had been reunified with birth parents
- Approximately 12% had been placed with relatives

Of those still in foster care 70% had been placed under Guardianship to 18 years.

The majority of children in the sample entered and exited the care system on many occasions, mainly due to the provision of respite care. 71 children were identified as re-entering the care system after having been reunified with birth parents. In terms of the types of placements involved:

- 60% of the re-entries to care were to emergency placements
- 16% were to short-term placements
- 12% were to long-term placements
- 9% were to non-Families SA placements or shared care arrangements, and
- 4% were to the care of relatives.

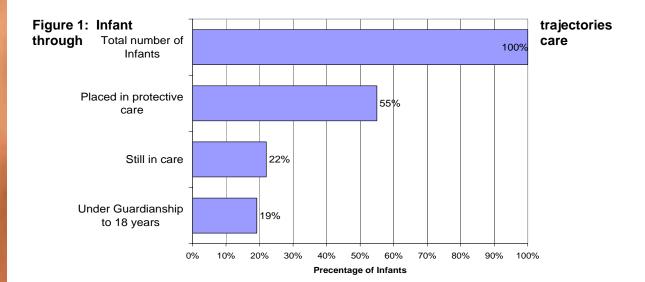
Given that 60% of re-entries were unplanned (i.e. emergency placements) these findings suggest that the majority of re-entries into care were in response to a crisis situation and/or a Section 17 removal.

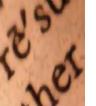
Children's demographic and social background factors were analysed in terms of factors influencing placement trajectories. This analysis showed:

- Children were more likely to remain in foster care if they had entered care at a younger age.
- The presence of parental substance misuse, intellectual disability and neglect significantly decreased the likelihood of successful reunification.

Summary: Infant trajectories through care

In South Australia, a total of 1155 infants aged 0-2 years were placed in at least one out-of-home placement between 1st June 2000 and 30th June 2005. A summary of the infants' trajectories through care is provided in Figure 1. Approximately 45% of the children who entered care as infants between 2000 and 2005 experienced only respite placements. 55% of infants experienced at least one non-respite placement (usually an emergency or short-term foster care placement). Only 22% were still in protective care at the time the audit was conducted and 19% were under the Guardianship of the Minister to 18 years. 41% of infants who had experienced a protective care placement had been reunified with their parents by the time the audit was conducted.





Re-notifications and concerns since leaving care

Where infants had been reunified with birth families or were living with relatives, information was collected concerning ongoing problems or concerns about these care arrangements. Ongoing concerns were recorded on the Families SA 'Client Information System'. This analysis indicated:

- 34% of families were seen to have significant financial difficulties
- Approximately 1 in 5 families were known to be experiencing ongoing difficulties in relation to substance abuse, domestic violence, mental illness and parenting
- 35% of children who left out-of-home care were returning to homes where at least one potential risk factor was present
- Almost 1 in 10 children were returned to situations where three or more risk factors were present.

The prevalence of these risk factors was, however, lower when children returned home than when they had first entered care. Indeed, many of the problems (approximately half) contributing to the initial placement into care were no longer considered a concern once the children had returned home.

Details of all re-notifications of abuse received since children had last exited the out-of-home care system were examined. These results showed that:

- Over 60% of infants had been the subject of a notifier concern since leaving care
- A quarter had been the subject of a Tier 3 notification
- 45% had been the subject of a Tier 2 notification, and
- Just over 1 in 10 had been the subject of a Tier 1 notification

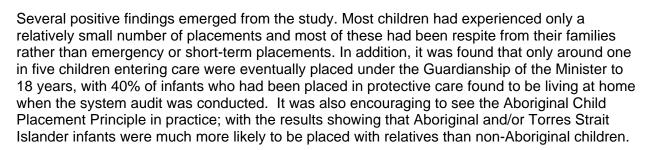
Neglect was the most commonly reported issue of concern. Children who had left care had typically attracted around two reports of neglect, and one report of physical abuse. Subsequent abuse was confirmed in 26% of cases.

A final series of analyses were undertaken to identify which demographic and social background factors had the most influence on post-care re-notifications. This showed that:

- A history of physical abuse was associated with a three to fourfold increase in the risk of future notifications of every type (physical, sexual and neglect).
- There was also a significantly greater risk of neglected children having further notifications when they left care (3 times more likely).
- The strongest predictor of ongoing Tier level notifications was a previous history of physical abuse.

Policy and practice implications

The findings of this study have important policy and practice implications for child protection and out-of-home care services. The results indicate that persistent neglect or physical abuse are the dominant reasons why very young children enter care, and that such abuse arises in environments affected by significant poverty, homelessness, mental illness, substance misuse and domestic violence. Any developments in social policy relating to the reduction of domestic violence, substance abuse and mental illness may therefore have a significant influence on the out-of-home care system. It may be that commonly cited problems in the out-of-home care system (e.g. increased demand for placements, the increasing complexity of children's needs) are possibly as much a reflection of wider social problems as the problems inherent in the out-of-home care system. The challenge is therefore to develop a range of family focused services that are targeted to specific problem areas and to recognize that families may have a range of highly complex and co-occurring problems that must be addressed if positive child welfare outcomes are to be achieved.



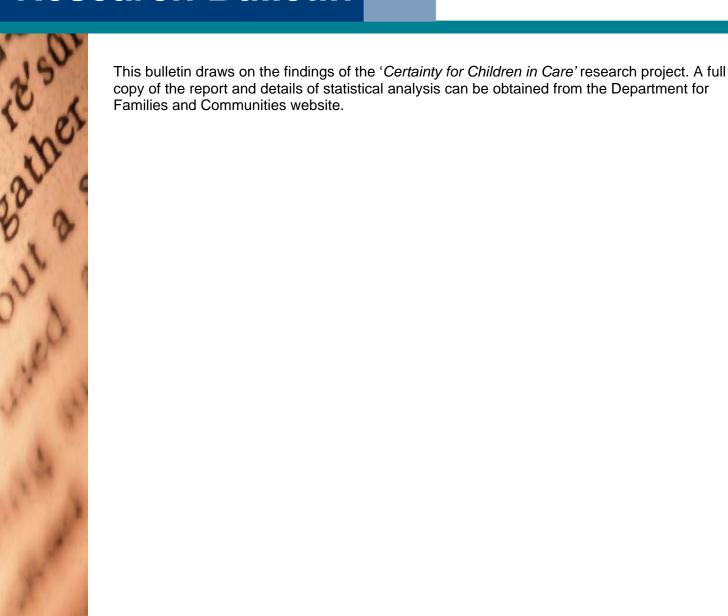
However, the results also indicated that children's social and family background factors influenced placement trajectories. Infants entering the care system come from families with multiple difficulties and co-occurring problems. In particular, parental substance misuse and neglect were found to be increasingly more common. These same factors and parental intellectual disability significantly decreased the likelihood of successful reunification. Many studies have found that families with co-occurring problems have difficulty achieving reunification; further, that where progress does occur, it is often slow. These studies suggest, however, that families who make progress in each specific problem area are more likely to achieve reunification. Families therefore require tailored and targeted services that are responsive to need, able to work on a range of co-occurring problems and have demonstrable impact in terms of progress in order to influence outcomes.

There was also a low utilization of relative care for this sample, only 10% of infants had been placed with relatives. These results suggest, (consistent with the AIHW, 2006 statistics) that this placement option is still under-utilized in South Australia.

A concerning finding from this study was, however, that almost 40% of children had returned to homes where at least one social or family risk factor was still present and that approximately one in ten children were returned to homes where three or more risk factors were still present. Moreover, over 60% of children who had exited care had attracted at least one form of renotification, with 10% of the total sample having received a Tier 1 notification. Subsequent abuse was confirmed in 26% of total cases.

The statistical analysis of demographic and social background factors found that the risk of further abuse is moderate to high if infants are returned to families with a previous history of physical abuse, and that parental substance misuse, severe neglect and intellectual disability significantly decreased the likelihood of successful reunification.

The findings of this study suggest that the Department's recent emphasis on enhancing training around the issue of decision-making in relation to reunification in child protection cases is very well placed, and that considerable expertise and caution must be exercised when making these decisions. In particular, due consideration must be given to the extent to which family circumstances have improved since the child first came into care, and the extent to which families have been willing, and able to work towards goals, and access the appropriate services to resolve the problems leading to the original child protection notification.



For more information please contact:

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