IN BRIEF

New study uses NSW Human Services Dataset to analyse child protection involvement for families experiencing domestic and family violence, alcohol and other drug issues and mental health issues

Context

- Within child protection, domestic and family violence (DFV) is often observed alongside other parental risk factors such as the parents' use of alcohol and other drugs (AOD) and/or parental mental health (MH) issues.
- Families experiencing the co-occurrence of these issues are often referred to as having "complex needs" and have been identified as a national priority in Safe and Supported: The National Framework for Protecting Australia's Children 2021-2031 (Department of Social Services, 2021).
- There has long been consensus that DFV, parental MH issues and AOD use are strongly linked and increase the risk of children and young people entering out-of-home care (OOHC).
- This study is one of the first external projects to
 use the newly established <u>NSW Human Services</u>
 <u>Dataset (HSDS)</u>. This extensive dataset makes it
 possible to see how families interact with a
 range of services, including police, child
 protection and health, over time.
- The report is the last publication from the <u>2020-2022 ANROWS Core Grant Research Program</u>.
 This body of work has produced nation-leading evidence on the DFV experiences of children and young people.
- The project builds upon a body of work, some led by ANROWS, into the unique experiences and needs of children where this complex trio of issues exist.

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Key findings

Intersecting issues

- 33 per cent of children reported to NSW's Child Protection Helpline had either experienced parental DFV or DFV alongside parental AOD use and/or MH issues.
- The most frequent concern was DFV on its own (82%). The most common concern identified alongside DFV was parental AOD use (16%).
- Children whose families had more co-occurring risk factors for DFV or DFV alongside parental AOD use and/or MH issues were younger at first report, had more child concern reports, and had more child concern reports that met the threshold for Risk of Significant Harm (RoSH) throughout their interactions with the child protection system.

Parent interactions with services

- When Helpline reports identified parental DFV, AOD use and MH issues, there were often corresponding markers in parental records (e.g. court appearances, police reports, use of mental health services, and admissions to hospital for MH issues or AOD use) before the children's first Helpline report.
- Over 40 per cent of the 127,884 children reported to child protection who experienced DFV (either alone or in conjunction with parental AOD use and/or MH issues) in the 12 months after the first report had at least one parent (usually the mother) who was previously recorded in police reports as a victim of a DFV incident.
- Only 26 per cent of children with flags for parental MH issues in their child concern reports had at least one parent with a record of access to mental health services prior to first Helpline report.

Entering out-of-home care

• 5 per cent of children entered OOHC at least once, and 2 per cent entered OOHC for the first

- time in the 12 months after the first child concern report.
- When all variables are controlled for, children who are experiencing DFV, parental AOD use and parental MH issues are twice as likely to be removed from their parent's care.
- Sibling order also appeared to alter the likelihood of a child entering care, with younger siblings more likely to be removed: 3.3 times for the second oldest sibling, 2.1 times for the third oldest sibling, and 4.8 times for the fourth oldest or younger sibling.

Engagement with targeted family support programs

- Engagement in the targeted family support program, Brighter Futures, prior to the children's first Helpline report was low and there was a higher representation of mothers in Brighter Futures (10%) compared with other parents i.e. fathers (4%).
- More parents took part in the Brighter Futures program in metropolitan areas compared to regional and remote areas.

Geographic area observations

 Families reported to child protection for parental DFV with AOD use and/or MH issues most frequently resided in certain areas of NSW, suggesting opportunities for greater targeted investment in early intervention services.

Key practice and policy recommendations

- Integrated models of care for MH issues, AOD use and DFV are critical, along with evidence-based, trauma-informed early interventions for children.
 These integrated models of care must address the whole person and the intersecting nature of this complex constellation of issues.
- The report suggests a missed opportunity in the use of the early intervention service Brighter Futures for families experiencing DFV, MH issues,

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and AOD use. To maximise engagement, the NSW Department of Communities and Justice should assess referrals and promote the program among relevant services.

- The analysis suggested that greater investment in preventive therapeutic services is needed in areas where there was a higher number of reports for all three issues. Partnering with community in the development of these services is vital to avoid over-surveillance and its potential consequences on families.
- Ongoing staff training is essential for providers dealing with the intersecting nature of DFV, MH

- issues and AOD use. This includes ensuring practitioners are equipped to notice and respond to tactics of coercive control that weaponise mental health issues and substance use.
- Specialist training, like in the Safe & Together Model, should continue across all relevant sectors.
- The report highlights the possibilities of using linked administrative datasets to identify key intervention opportunities, especially at a local level.

View the project page and download the research.

Report number	Name	Suggested citation	Date published
Research report 1	Critical interpretive synthesis: Child protection involvement for families with domestic and family violence, alcohol and other drug issues, and mental health issues	Wright, A. C., Metcalfe, L., Heward-Belle, S., Collings, S., & Barrett, E. (2021). Critical interpretive synthesis: Child protection involvement for families with domestic and family violence, alcohol and other drug issues, and mental health issues (Research report, 06/2021). ANROWS.	16 November 2021
Research report 2	Analysis of linked longitudinal administrative data on child protection involvement for NSW families with domestic and family violence, alcohol and other drug issues and mental health issues	Luu, B., Wright, A. C., Schurer, S., Metcalfe, L., Heward-Belle, S., Collings, S., & Barrett, E. (2024). Analysis of linked longitudinal administrative data on child protection involvement for NSW families with domestic and family violence, alcohol and other drug issues and mental health issues (Research report, 01/2024). ANROWS.	22 February 2024

STATUS OF PROJECT:

Complete