

Child Protection and Parental Mental Health



What is the Department of Child Safety's role?

During the intake process:

- the CSO guides the discussion with the notifier by using focused questioning to gather accurate information and determine whether there is a reasonable suspicion that a child is in need of protection
- this information informs decision-making and enables the CSO to determine whether the concerns meet the departmental threshold for a notification

The CSO will probe for information about:

- **the child:** the actual harm or risk or harm to the child (neglect, physical or emotional harm or sexual abuse)
- **the parent:** their willingness and ability to protect the child, parenting patterns, perceptions of the child, information about their mental illness and how this impacts on their parenting of the child, symptoms, treatment, other stressors
- **the environment:** other adults in the home, social support available to the family, housing, other environmental factors

During the investigation and assessment, the CSO:

- sights/interviews the child, interviews the parent and observes interaction between the child and parent
- seeks information about the child and parent from a variety of sources including Queensland Health
- seeks specialist assessments if require i.e. mental health assessments
- assesses the parent's ability to protect and care for their child including their ability to meet the child's ongoing safety, well-being and developmental needs

During ongoing intervention, the CSO:

- assesses the child's and parent's strengths and needs
- involves the child, parent, other family and stakeholders (including mental health workers) in a Family Group Meeting to develop a case plan for the child
- makes appropriate referrals to service providers to meet the child's and parent's needs and ensure ongoing support
- works with the family and collaborates with other service providers to meet the case plan goals

What do our staff need to know:

- the impact of the parent's mental illness on their parenting and their ability to provide a safe environment for their child
- if a parent:
 - displays extreme lethargy or irritability
 - feels a lack of hope
 - displays delusional beliefs or hallucinations
 - is homicidal or suicidal
 - is emotionally unavailable or does not feel attached to the child
 - leaves the child unsupervised

Child Safety staff need to be guided by mental health professionals who will understand:

- The degree to which a parent's illness might impair his or her ability to provide adequate care and protection for a child. This ability will be affected by a variety of factors including:
 - type and severity of the illness
 - phase of the illness
 - available treatment and support
 - individual insight into the illness
 - social, environmental and family context

Child Safety staff need to know if particular risks to a child are present:

- a parent's symptoms significantly impair their daily functioning or specific parenting capacities such as responsiveness, judgement and stress management
- the child is implicated directly in a parent's hallucinations or delusional system
- a parent experiences mood swings or is emotionally unavailable to an infant or young child
- adequate spouse, extended family or social support and supervision are absent

The questions we need to ask about children:

- Does the child appear withdrawn, emotionally/socially?
- Is the child experiencing sleeping difficulties (insomnia, nightmares, too much sleep)?
- Does the child display a noticeable level of anxiety?
- Has the child regressed in any way?
- Is there a recent history of unexplained and consistent school refusal?
- Does the child display unwarranted anger or aggression?

In summary:

- Mental illness can interfere with a parent's ability to carry out the tasks of parenting, however mental illness alone need not indicate significant risk to a child
- Many parents fear that their children will be taken away and overstate their coping ability to avoid this occurring when in reality this is often not the case
- I must emphasise the importance of notifying when children who have a parent with mental health issues may have been harmed or are at risk of harm, abuse or neglect