







Safer Family Services

Practice Paper Assessment of Risk and Protective Factors

The Child and Family Support System (CFSS) plays a crucial role in the government reform of the child protection system in South Australia. CFSS partners work with families who have multiple and complex needs and are at risk of entering the child protection system. Through the provision of targeted and intensive support to these families, the CFSS aims to reduce the incidence of child abuse and neglect, and support families to keep their children safe and well at home, in community and culture.

Within this work, practitioners must identify the presence of risk and protective factors that indicate a likelihood of present and future cumulative harm for children and formulate plans to work with the family and service partners, to address the risk and safety concerns.

1. Definitions of Risk and Harm

Safer Family Services (SFS) defines risk as:

... the exposure or likelihood of exposure to harmful behaviours or environments which compromises the safety, wellbeing and/or development of a child, young person or family. When assessing the level of risk, the impact of cumulative harm must be considered. Cumulative harm to a child can be profound and reduces their sense of safety, stability and wellbeing'.¹

A child or young person is defined in the *Children and Young People (Safety) Act 2017*² (the Act) as being at risk if they have suffered harm, they will suffer harm, they will be submitted to an unlawful medical procedure or an invalid marriage or will be enabled to engage in acts or activities that would constitute a criminal offence. In addition, the Act includes instances of harm where parents or guardians are unable or unwilling to care for the child or young person or where the young person of compulsory school age is consistently absent from school, without satisfactory explanation. Section 17 of the Act refers to harm as the result of physical, psychological, sexual, mental or emotional impacts of abuse and/or neglect.

Cumulative harm refers to the chronic nature of the abuse, and despite absence of a singular major incident, the ongoing nature and daily impact of cumulative harm diminishes a child's sense of safety, stability and wellbeing. It speaks to complex patterns of abuse that persist and directly impact safety now, and negatively impacts a child's life trajectory. Section 18 of the Act refers to cumulative harm as the effects of multiple adverse or harmful events over the course of a child's life.

² Children and Young People (Safety) Act 2017, Government of South Australia pp. 17-18





¹ Government of South Australia, Child and Family Support System, Common Elements 2022





2. Assessing Risk

Risk factors and risk levels can change frequently and so risk assessment is an ongoing process which starts at intake and continues until the intervention is finalised.³ Risk is dynamic and assessed along a continuum from low through to extreme, dependent on the severity and likelihood of harm. When assessing the level of risk, the impact of cumulative harm is also considered.

The combination of risk and protective factors for children and families informs practitioner assessments of the likelihood of harm. Risk factors are the circumstances, conditions or events that increase the probability that a child will have poor outcomes in the future. When combined with limited protective factors, they increase the probability of children experiencing child abuse or neglect⁴. Practitioners must consider the history of adverse experiences and their likely cumulative effect on the child, as well as the likelihood of future harm based on indicators of risk⁵.

Practitioners should recognise that risk factors are not causes of child abuse or neglect and the presence of risk factors does not necessarily mean abuse and neglect will occur, just as the presence of protective factors does not guarantee a child's safety⁶.

Legislation in South Australia mandates practitioners to report reasonable suspicion of child abuse and neglect to the Child Abuse Report Line (CARL): 131 478.

3. CFSS Pathways Service Risk Assessment

CFSS Pathways Service is a central point for referrals into CFSS Intensive Family Services (IFS) and Child and Family Safety Networks (CFSNs).

CFSS Pathways Service risk assessments not only take into consideration the presenting risk and protective factors for families but target intervention toward four priority populations (based on epidemiological data) which shows the families most at risk of statutory intervention⁷. This assessment is a snapshot of a moment in time, determined by the information available to the CFSS Pathways Service at the point of referral.

When referrals are received at the CFSS Pathways Service and immediate safety concerns are identified, the CFSS Pathways Service liaise with the Department for Child Protection (DCP) to determine an appropriate response. Referrals that do not meet the risk threshold for service provision by IFS are declined and an alternative response is recommended through diversionary advice.

⁷ Roadmap for reforming the Child and Family Support System 2021-2023





³ Child Safety Practice Manual, 2022 QLD Government

⁴ Australian Government. Australian Institute of Family Studies. Risk and protective factors for child abuse and neglect, 2017

⁵ Interagency Code of Practice (ICP) Department for Child Protection, DHS

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CFSS Priority Populations

- Young parents (mother aged under 23 years at first birth or pregnancy and fathers aged under 25 years).
- Parents with a history of childhood trauma including experiences of significant child abuse, out of home care or Youth Justice involvement.
- Aboriginal families with multiple and complex needs.
- Infants at risk families for whom a notification to DCP has been made in relation to their unborn child.

4. Working with Risk

For practitioners to fully understand the family situation and the level of risk, a risk assessment is required early in the engagement process. Practitioners may find that the risk level is higher or lower than the initial referral indicated. The risk assessment is a process of gathering information about the family and the child as well as extended family, kinship and community networks, support services and environmental factors to determine the extent and probability of current and future harm. When practitioners assess risk they also consider protective factors and strengths that can be drawn upon and strengthened, with the aim of limiting the current or potential harm and supporting and increasing safety.

It is important that risk assessments are holistic, strengths based and grounded in relationship-based practice. Relationship building allows practitioners to engage more effectively with children and families to better understand family functioning and conduct comprehensive risk assessments. It allows for the inclusion and consideration of the cultural and historical context, the connected nature of kinship systems and the family's capacity to address risk and build on strengths and protective factors.

Effective risk management requires strategies and mechanisms to ensure that children are the focus, that practitioners are equipped to do intervention work and organisations provide adequate support, policy, and procedures to assist with underpinning this work⁸. Risk cannot be eliminated, managed, or mitigated by one strategy alone.

Escalation is required when immediate safety concerns are identified that cannot be mitigated or when the ongoing risk to the children cannot be reduced, despite safety planning and case management attempts by the practitioner.

Risk and risk levels within families are influenced by static risk factors such as criminal history, disability, age of parents at the birth of their first child or childhood trauma. These are not likely to change over time. However, dynamic risk factors such as parental behaviour, domestic and family violence, parental mental health issues and substance use can fluctuate and so risk levels can change quickly. Any risk assessment is only able to capture a point in time. Risk is not static and practitioners work with and within risk.

⁸ lannos & Antcliff 2013













5. Risk Thresholds for Service Provision

IFS are targeted to work with families in the very high and high-risk rating categories at the time of referral, as well as referrals assessed as medium risk for unborn children.

Very high risk

There is a very high likelihood that the unborn child, child or young person will suffer serious harm given their current circumstances and/or history of safety and risk concerns. Very high-risk factors may be:

- Ongoing and persistent domestic violence (DV) and family violence (FV)
- Chronic and frequent substance use that directly impacts on the safety of the infant/child/young person
- Chronic parental mental health concerns that directly impacts on the safety of the infant/child/ young person
- Serious neglect or deprivation of an infant/child/young person's emotional, physical and/or medical needs leading to harm or serious illness
- Evidence of squalor / unsafe conditions greater than 12 on the Severe Domestic Squalor (SDS) assessment scale
- Young person has chronic / unstable mental health with suicidal ideation, self-harming and/or at risk-behaviours (alcohol and other drugs, sexualised behaviours).

High risk

There is a high likelihood that the unborn child, child or young person will be at risk of harm, given their current circumstances and/or history of safety and risk concerns. High risk factors may be:

- Sporadic DV and FV
- Ongoing substance abuse which impacts on the wellbeing of the infant/child/young person
- · Likelihood of cumulative harm
- Family/young person at risk of homelessness (e.g. couch surfing).

Medium risk (unborns only)

There is a medium likelihood that the unborn child will suffer serious harm, given their current circumstances and/or history of safety and risk concerns.

Medium risk factors for unborn children may be:

- Intervention is required to maintain safety and wellbeing
- The lack of additional support may escalate to a higher degree of risk for the unborn child.











6. Risk and Protective Factors

When assessing risk, practitioners need to be aware of the range of risk and protective factors for consideration and inclusion in the safety planning and case management process.

Risk factors

Risk Factors⁹ are the measurable circumstances, conditions or events that increase the probability that a family will have poor outcomes in the future. The following examples illustrate some risk factors, but this list is not exhaustive.

Individual child factors

- Infant birth weight
- Pregnancy or neonatal complications
- · Accessibility of antenatal care
- · Children with behaviours of concern
- Child disability and/or chronic health condition
- · Developmental delays
- Child/young person risk taking behaviours.

Family/parental factors

- Young parents (under the age of 23 at birth of first child)
- Parental history of trauma experiences of child abuse and/or neglect as a child
- Domestic and/or family violence or coercive control
- Mental health issues
- Substance misuse
- · Quality/strength of psychological attachment
- · Parenting capacity
- · Family history and functioning
- Socioeconomic disadvantage
- Financial stress
- Parental employment
- Unplanned pregnancy
- Parental understanding of child development
- · Child perceived as problem by parents
- · History of harm to children, e.g. excessive discipline

⁹ Adapted from Australian Institute of Family Studies. Risk and protective factors for child abuse and neglect, 2017











- Parental disability and/or chronic health condition
- Interrupted prenatal care
- Unsuccessful service engagement
- Housing instability
- Lack of social/community supports
- · Lack of professional supports
- Lack of connection to culture and community
- Chronic school absenteeism
- Squalor.

Protective Factors

Protective factors are attributes or conditions present at individual, family, community or wider societal level that can moderate risk and promote healthy development and child and family wellbeing. The following examples illustrate some risk factors, but this list is not exhaustive.

Individual child factors

- Social competence
- Emotional intelligence/resilience
- Psychological attachment to parents, caregivers and key people in the kinship system
- Meeting developmental milestones.

Family/parental factors

- Connection to culture
- Strong parent/child relationship
- · Parental self-efficacy
- Family cohesion
- · Family functioning
- Knowledge of parenting and child development
- Parental resilience
- · Practical support for parents
- Meeting physical, emotional, spiritual and cultural wellbeing
- Engagement of parent/child with community and professional support.



