Monitoring child maltreatment using administrative data

HSRC Research Conference
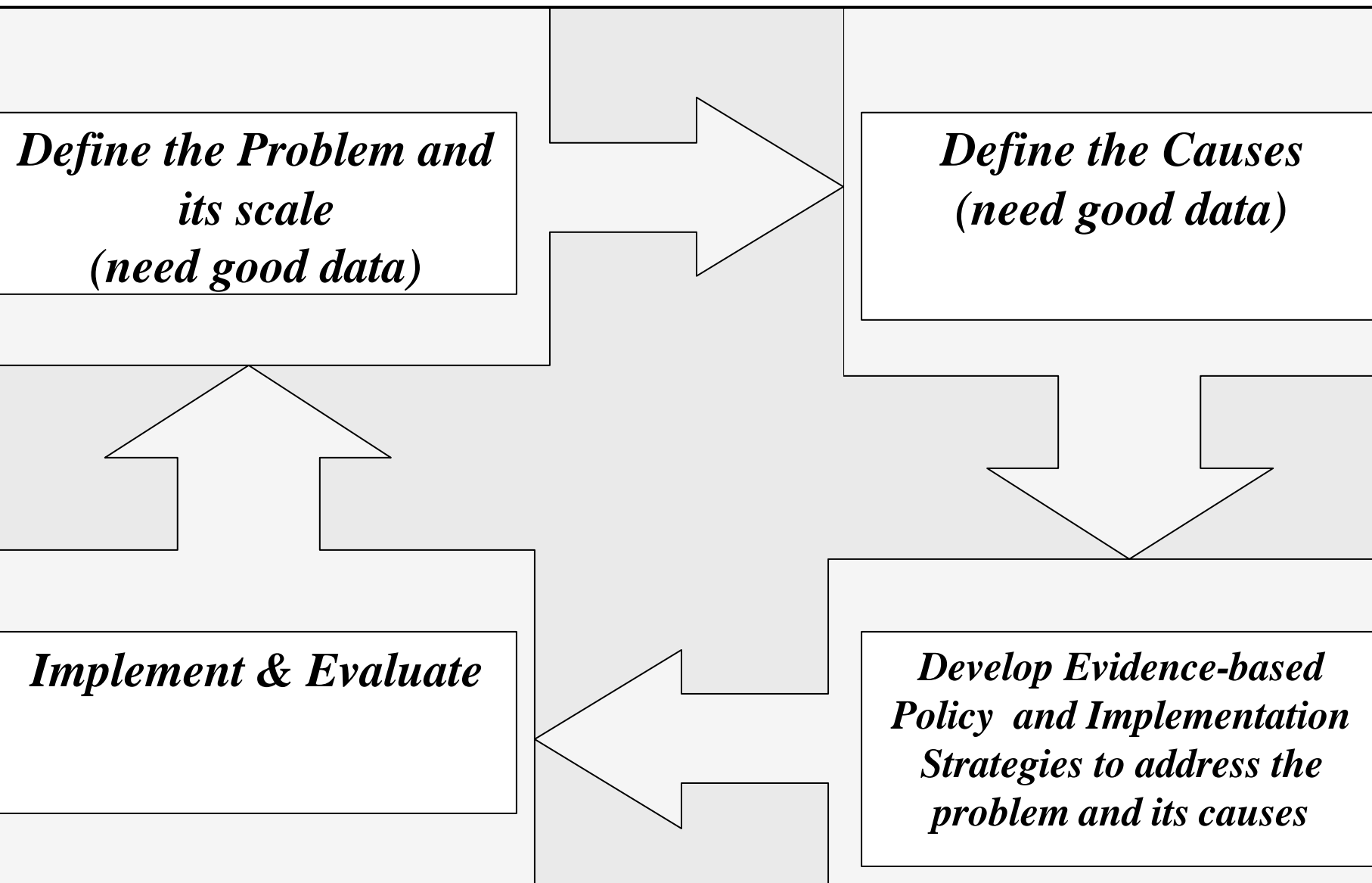## September 2007

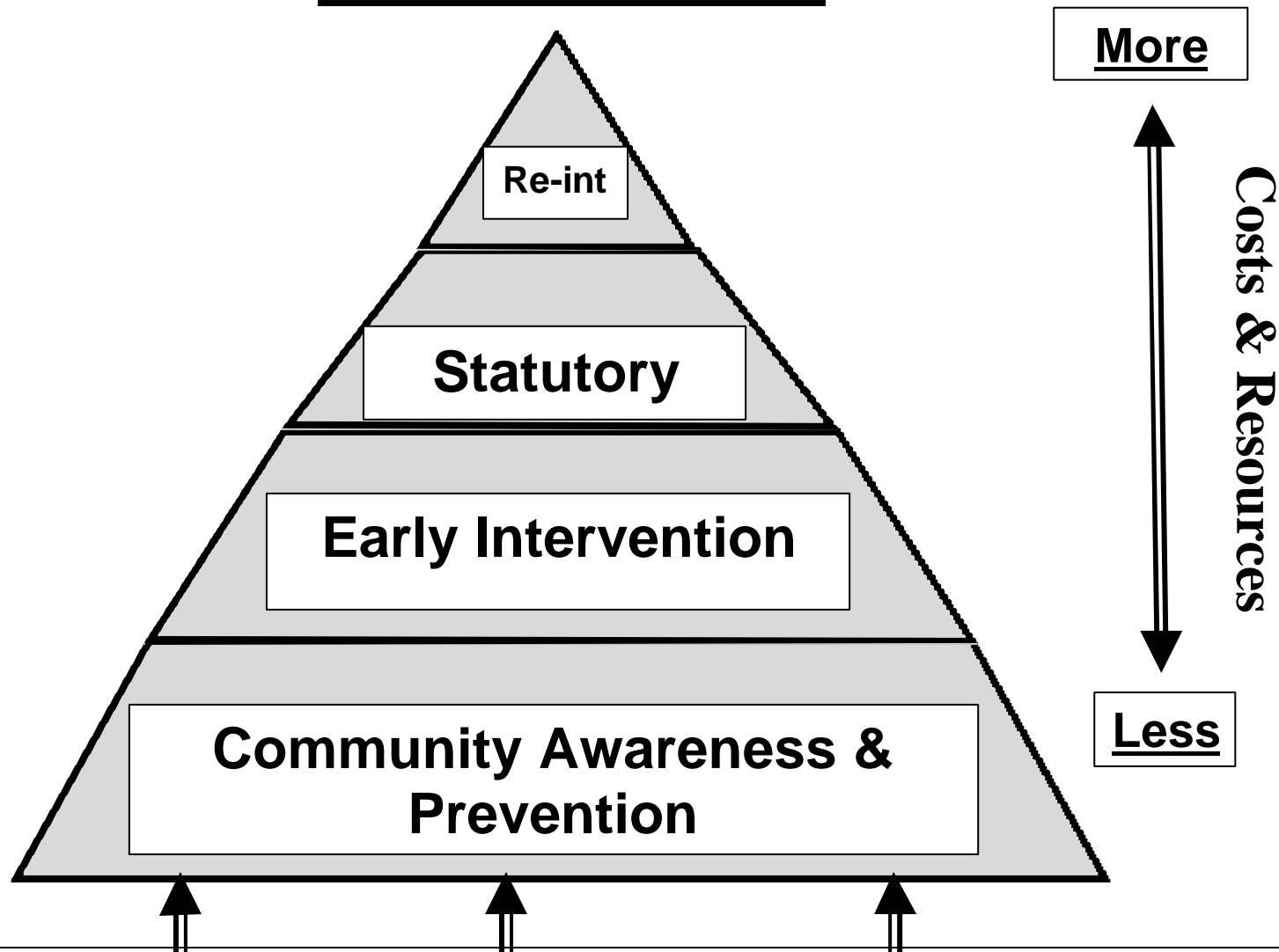Andy Dawes, Cathy Ward, Lameez Alexander & Wahbie Long

HSRC

Outline of Presentation

1. Evidence-based Policy
2. Study Objectives
3. Methods
4. Findings
5. Recommendations

Evidence-Based Social Policy Interventions

Define the Problem and its scale
(need good data)

Define the Causes
(need good data)

Implement & Evaluate

Develop Evidence-based Policy and Implementation Strategies to address the problem and its causes

A hierarchy of interventions to improve Child Protection

More

Re-int

Statutory

Early Intervention

Community Awareness & Prevention

Costs & Resources

Less

Legislation; Protection Policies; Social Protection; Budgets; Advocacy
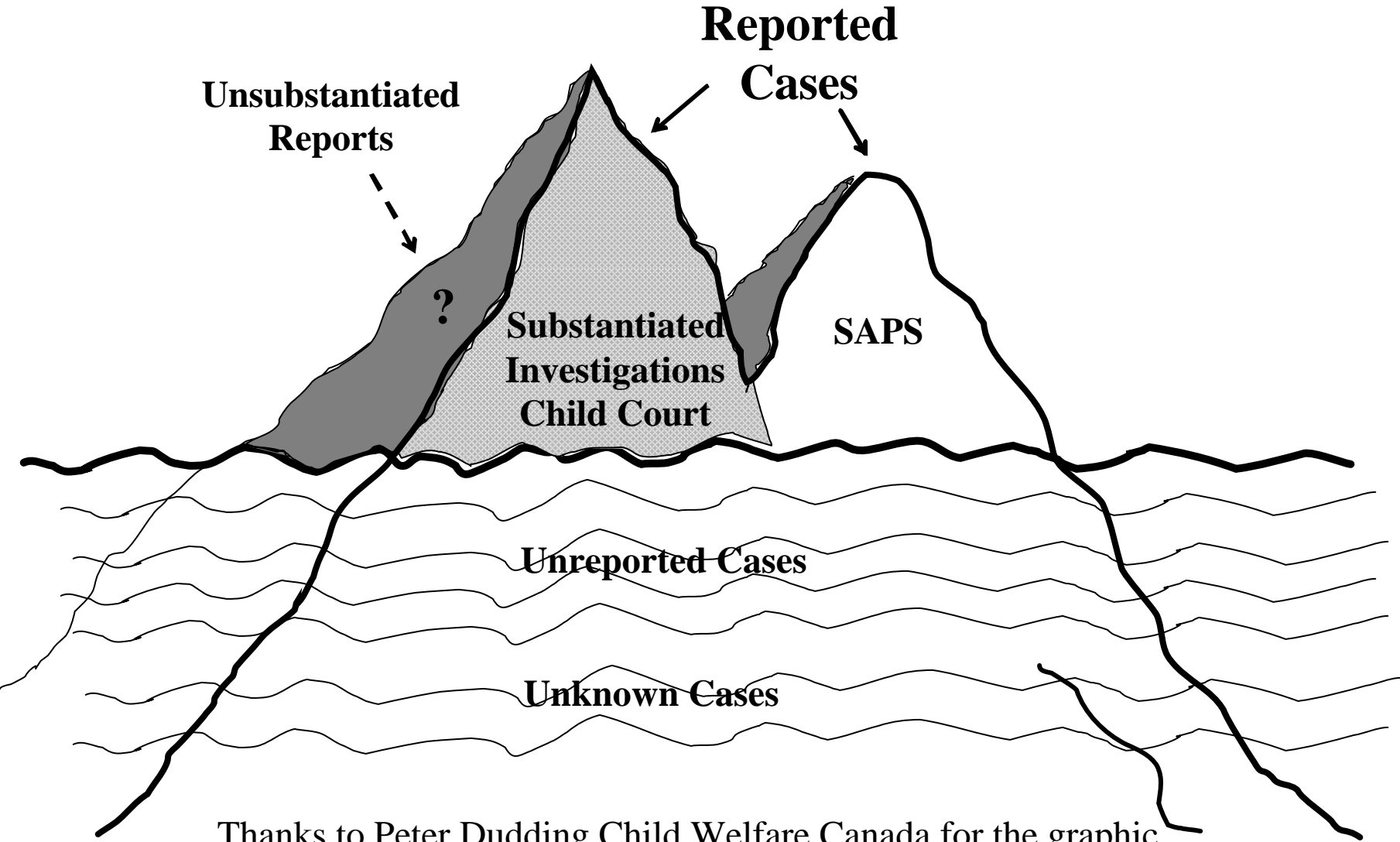
Study Focus: Child Maltreatment

A key problem for policy and intervention:
No incidence or prevalence studies have been
conducted on Child abuse & Neglect (*cost*).
Objectives:
1. to provide an evidence base for child
   protection (Western Cape) that does not rely
   on high cost studies;
2. to provide information on districts in which
   children may be particularly at risk for Child
   maltreatment (abuse & neglect);
3. to comment on admin data quality and make
   recommendations for improvement.

Child Abuse data: The Tip of the Iceberg

Reported Cases

Unsubstantiated Reports

?

Substantiated Investigations Child Court

SAPS

Unreported Cases

Unknown Cases

Thanks to Peter Dudding Child Welfare Canada for the graphic

Study Methods

1. **Several sources of data for the period 2000 – 2006 accessed:**
*   **Provincial Government administrative data (*SAPS; DSD; Education; Health; Justice*)**
*   **Peer reviewed research (very little);**
*   **data from child protection NGOs.**
2. **Secondary analysis admin data to construct incidence rates and trends if possible;**
3. **Possible High risk areas identified**
4. **Comment on admin data quality**

Findings: Maltreatment

Physical Abuse: Health Admin Data

    Tertiary Hospital data tells us that:

- **Most physically abused children are <u>typically male and under 5 years</u>;**

- **The perpetrator is typically male and often the child's father or mother's partner;**

- **Most assaults occur in the child's home.**

    Data on the extent of this form of abuse is not readily available.
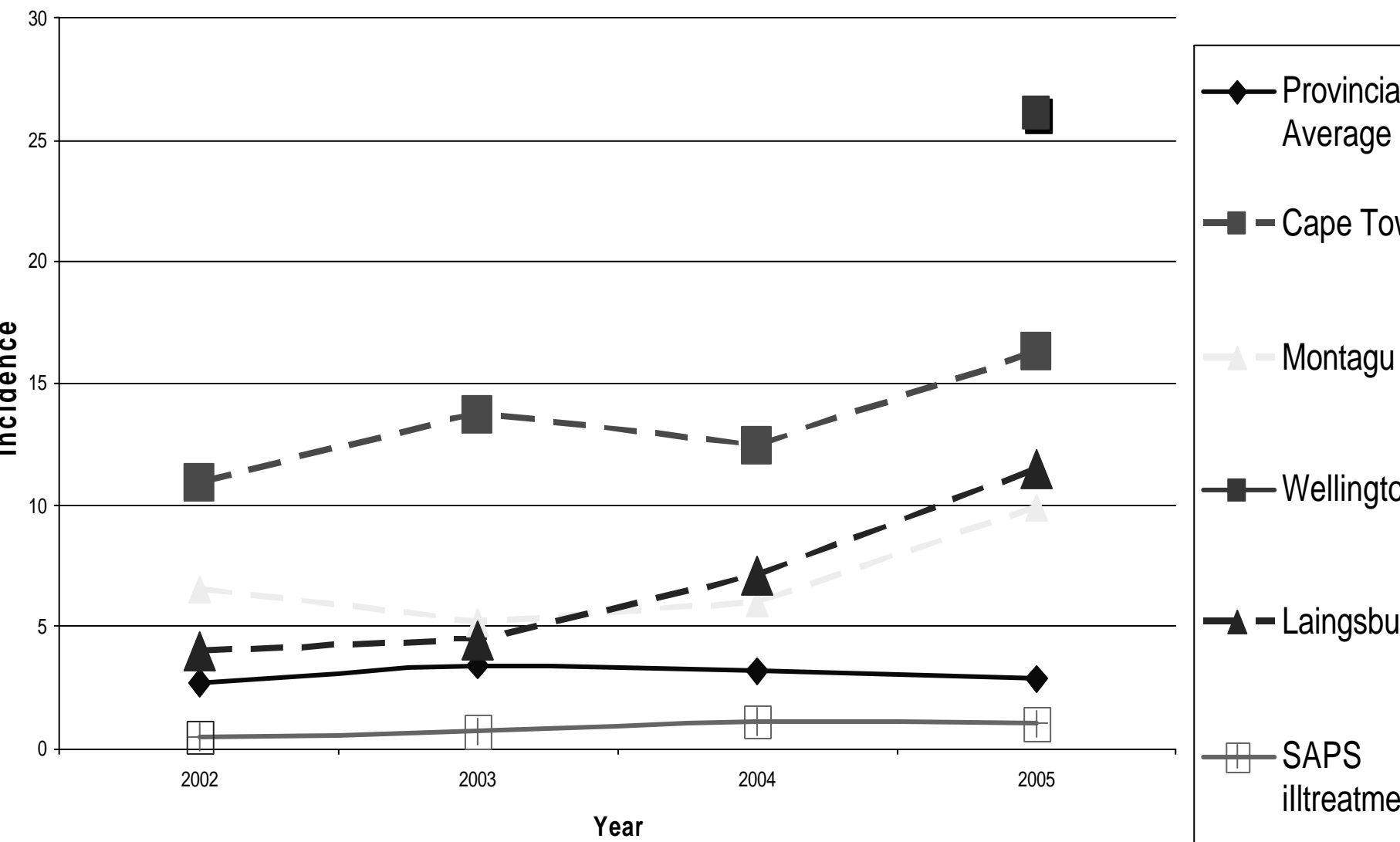
Findings: Maltreatment

Sexual Abuse: Health Admin Data

Red Cross H.: Data 1991 – 1999: an average of 78 cases admitted per annum (87%F);

Other sources: Childline: Western Cape accounted for the highest proportion of all calls in the country relating to sexual abuse (22% of all calls received were in regard to this issue);

Justice Department Children's Court Inquiry (CCI) Data could assist us to get a rough picture of incidence?

CCI Data: Incidence of Probable Maltreatment per 1000 children by selected districts

Incidence (y-axis: 0, 5, 10, 15, 20, 25, 30)

Year (x-axis: 2002, 2003, 2004, 2005)

Legend:
- Provincial Average
- Cape Town
- Montagu
- Wellington
- Laingsburg
- SAPS illtreatment

District Patterns

What could affect the high or low incidence figures?

- Rates may be *low* when SW. services are under-resourced?

- Rates may be *up* when S.W. services do their work *well*?

- Affected by criteria used by officials to control case flow to courts.

- Poor data capture.

- Repeat cases within the reporting year.

CCI Incidence data suggests:

- 3 in every 1 000 children were the subject of an inquiry during 2005 (4 358 children).
- If UK data is considered: only 5% cases of maltreatment likely to reach a Court Inquiry;
- So: True W.C. rate is likely to be much higher (? 87 per 1000 or 86 000 children).
- But <u>we do not know </u>the % referred for maltreatment.
- Even so, we should be seeing much higher reporting rates.
- Note: The 2005 Western Cape ratio for (<u>all</u>) social workers in post to children is:

  1 : 2 200 *Half* that required for a minimum level service.

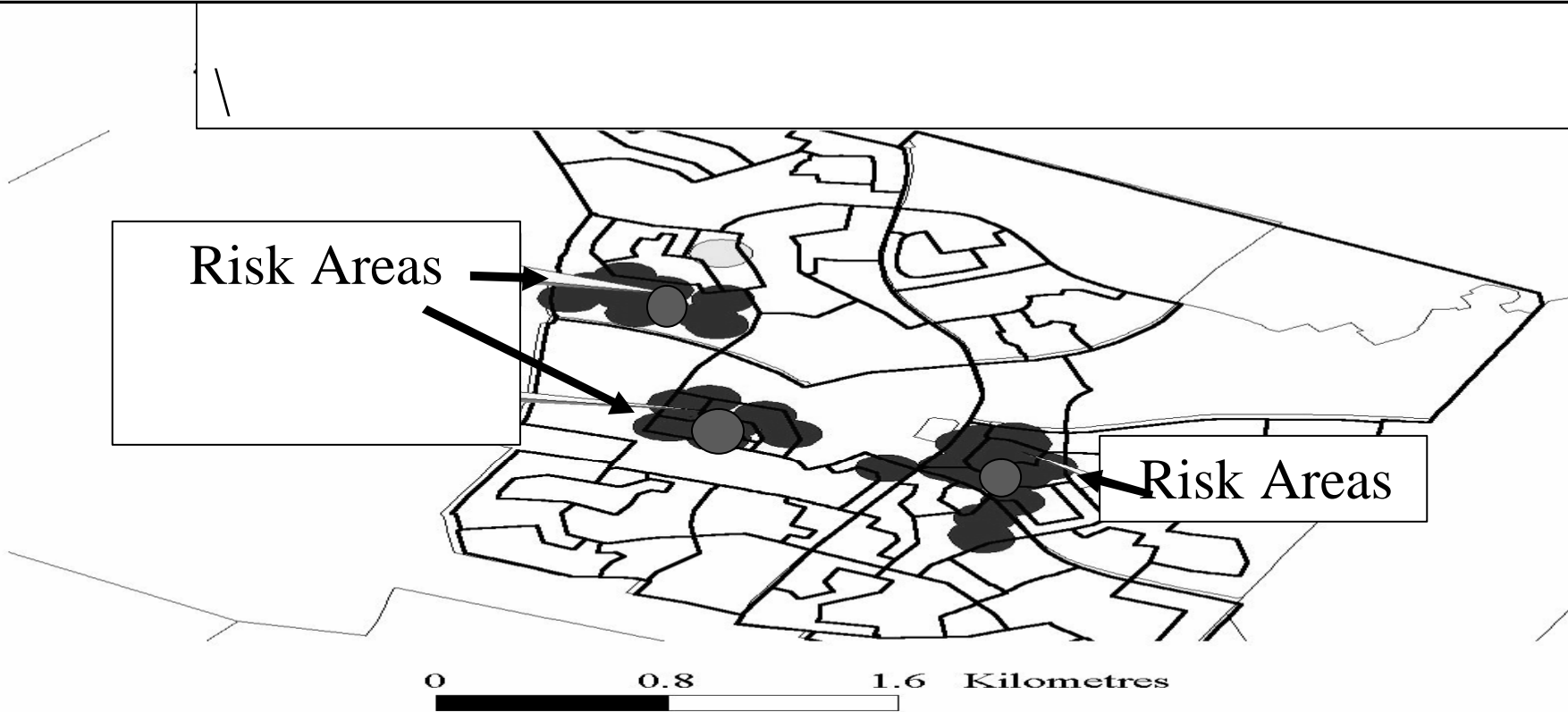## SAPS Crime Data – is it useful for Estimating child rape incidence?

In data *supplied for this project* by SAPS, the age of the rape victim was unknown in:

- 60% of cases for 2003;
- 82% of cases 2004 …………..!

Recommendations

1. Investigate CCI data further (current);
2. Improve admin data quality;
3. Develop a <u>comprehensive research strategy</u> to inform evidence-based policy for child protection (including incidence and prevalence studies);
4. Investigate the <u>causes</u> so as to inform <u>appropriate</u> solutions;
5. <u>Budget</u> to support child protection services.
6. Identify high risk communities and families for preventive _and_ intensive intervention >>>>>

Where we want to be: Local level evidence-based Intervention

Risk Areas

Risk Areas

0   0.8   1.6   Kilometres

Areas where young children are at most at risk

Services should be here!

N
W   E
S