



Queensland Child Protection Parent Perspectives Study

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- Family Inclusion Network (SEQ)
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1. Introduction

Systematically obtaining client opinions about human services is a mechanism to give a voice to clients in performance measurement, and is essential to continuous improvement and ongoing quality assurance. It is also consistent with the principle of recognising service users as active agents in interventions and promoting their autonomy. This research explored levels of parent satisfaction with statutory child protection services in Queensland, Australia. Through a self-administered survey, parents whose children were subject to statutory child protection intervention were asked about their satisfaction with aspects of service delivery. The survey was conducted in two waves during 2016.

Previously, Victoria's Child Protection Client and Family Survey (1999), Queensland's Client and Carer Survey (2001), the Family Inclusion Network's Partnership with Parents project (2011), and QATSICPP's Knowledge Circles process (2015) all sought to elicit parent perspectives to inform child protection service development.

The impetus to obtain input from parents in Queensland's child protection system was part of the development of a revitalised approach to statutory child protection work. The *Strengthening Families, Protecting Children* framework for practice introduced in 2015 was designed to enhance engagement with all clients - children, young people, and families - during assessment and within collaborative safety planning and case planning processes.

2. Previous research

Working constructively in partnership with parents is a long-established principle in child welfare, (Thoburn, Lewis & Shemmings, 1995) that has been incorporated in child protection legislation in many jurisdictions internationally (Dickens et al., 2015). However, many studies have shown partnership has been difficult to achieve in statutory practice contexts (Healy and Darlington, 2009). The importance of relationship-building and the working alliance between parents and child protection practitioners has recently been re-asserted to counter investigatory, procedural and compliance-oriented intervention styles that have been found to contribute to mistrust and adversarial relationships (Featherstone et al., 2014). The meaningful involvement of parents can reduce hostility and increase engagement when interventions are involuntary (Gladstone, et al., 2012).

There are multiple reasons advanced to listen to parents and involve them in decision-making:

- Justice and rights: Parents have both legal rights and moral rights to be treated fairly when the State intervenes in family life, and procedural unfairness can engender feelings of intimidation and powerlessness resulting in anger and resistance to authority (Ivec et al., 2012)
- Improved outcomes for children: Better decisions are made when parents are informed and can participate in decisions about their child's safety and development (Thoburn, et al., 1995). While children are in care, parents need support to maintain contact with their children to facilitate continuity and to foster the child's family connections and identity (Lee & Ayon, 2007).
- Therapeutic reasons: Engaging parents means more effective casework that is likely to lead to desired changes in parental knowledge, skills, behaviour, and resources (Platt 2012; Lee & Ayon, 2007)

Research shows that the process of being asked about their own opinions may change a client's perceptions about workers and services; may help to reduce power asymmetry that exists between workers and child welfare clients; and may assist to provide client-centred and family-focused casework practice (Alpert & Britner, 2009; Ayala-Nunes, Jumenez, Hidalgo, & Jesus, 2014). Systemic cultural bias may be addressed through integrating the perspectives of parents from indigenous and minority groups, especially given the racial disparities evident in child protection systems (Clarke, 2012).

However, relationships between parents and child protection practitioners are inherently unequal: while workers are encouraged to be strengths-based and work with parents, there are times when they are required to make decisions and take action they know parents will not agree with (Healy & Darlington, 2009). The challenges of participation are exacerbated by the wider social context of poverty and inequality that affects the lives of most of the parents who are involved with the child protection system (Featherstone et al., 2014).

There have been significant advancements in the conceptualisation of research designed to measure parent satisfaction with child protection services. A systematic literature review was conducted of published empirical research that investigated parental perspectives on the child protection services they received (Tilbury & Ramsay, under review). It identified 52 studies published between 2000 and 2016 on parent satisfaction. Most used qualitative methods, and eight standardised survey instruments were used in the quantitative studies. There were 21 factors most frequently associated with parent satisfaction or dissatisfaction, categorised as attitudes of workers, skills of workers, worker actions or interventions provided, and aspects of the child protection system.

Factors associated with high parental satisfaction

The factors that were associated with parental satisfaction related to workers attitudes, skills, and actions.

Attitudes of the worker

1 Respect: Respectful treatment included receiving positive acknowledgement, recognition of the parent's cultural background, and a non-judgemental approach whereby attention was focused on the situation, rather than negatively labelling parents.

2 Honesty: Honesty was exemplified by clear communication of expectations and providing rationales for decisions. It included demonstrating accountability and transparency by sharing information about progress and outcomes of assessments and providing clarity about child welfare roles and processes.

3 Trust: Trust involved listening to parents' opinions and taking account of the issues they raised, such as the barriers they faced to good parenting, concerns for the safety of their children, and levels of partner violence.

Skills of the worker

4 Good interpersonal skills: The interpersonal skills that were valued included being a good listener, having a sense of humour, being relaxed, accessible, and approachable. Parents identified that these skills contributed to a positive relationship.

5 Courtesy: Courtesy was expressed by timely service and caseworkers who were organised, reliable, kept in touch regularly, returned phone calls, kept appointments, and followed through with promises.

6 Qualified/Experienced: Factors associated with being qualified and experienced were being knowledgeable and respectful of the parent rather than employing a top down approach. Some participants valued the advice of, and felt more able to make an authentic connection with, caseworkers who were older and also parents.

Actions of the worker

7 Collaboration: Collaboration meant that workers valued the involvement of parents in the child welfare process, kept parents informed, and enabled active participation in meetings and decision-making processes. Parents appreciated being involved in decisions and care planning when their voice was valued and they had a degree of control over the process.

8 Practical support: Practical support included assistance with negotiating the child welfare system, preparation for case conferences or meetings, and referral to helpful and appropriate services. It involved providing in-home support, financial assistance, arranging transport, practical parenting advice, and mediation between family members.

9 Social and emotional support: Social and emotional support was conceptualised as intangible aspects of a parent/caseworker relationship including a connection with a caseworker, a feeling of being able to safely raise issues, and receiving emotional support.

Factors associated with low parental satisfaction

Research has also identified factors associated with lower parental satisfaction. These factors relate to both workers and the organisation as a whole.

Attitudes of the worker

10 Stigmatises or labels: Workers who were judgemental and focused on parental faults, while ignoring the situation or context that caused child welfare to become involved, caused parents to feel stigmatised and labelled as ‘the problem’. Some parents self-referred to the child welfare system in an attempt to access help but found themselves under investigation.

11 Dismisses parents: When their concerns were dismissed, parents reported feeling disqualified, diminished, humiliated or belittled. Some felt that their concerns were not acknowledged until a crisis point was reached.

Skills of the worker

12 Discourteous: Discourtesy and rudeness included a failure to return calls, being late, or regularly cancelling appointments. For example, Dale (2004) reported that parents often perceived their caseworkers as being superior, bossy, and not caring. In particular, unannounced visits made parents feel they were under surveillance and their privacy was being invaded.

13 Unqualified or incompetent: Unqualified workers were reported to be ignorant about the dynamics of issues, including domestic violence, poverty, cultural differences, mental health and disabilities. Some caseworkers were reported to have textbook understanding but lack real-life knowledge. Incompetence also referred to workers who did not follow policies or procedures, were coercive, or who retaliated when parents did not cooperate.

14 Poor interpersonal skills: Examples of poor interpersonal skills included when the worker did not display the capacity to listen or provide explanations that parents could understand.

Actions of the worker

15 Does not collaborate: Not being collaborative meant the worker was not open to developing mutual understanding or exploring a range of options to assist.

16 Does not share information: The worker withheld information from parents, and without information parents felt ill-informed about the child welfare system and its purpose. Parents reported not being given information about what was considered appropriate parenting, why decisions were taken, and why children had been removed.

17 Disempowers parents: Worker actions that were reported as disempowering included requiring participation in services that were inappropriate or inaccessible, asking for complex formal documents written in English from non-English speaking parents, and interviewing children without parental knowledge or consent.

System Faults

18 Poor service provision: The most frequently reported factor contributing to dissatisfaction was poor service provision, characterised by long wait times between visits or before receiving services, a lack of follow-up on promised actions and plans, a lack of support, and service provision that was not individualised.

19 Accountability and power imbalance: System features that were reported as disadvantaging parents encompassed the power imbalance between parents, the caseworker, and other professionals. Parents did not know what their legal rights were or how to access legal advice. This lack of transparency was compounded by not understanding the system, meetings, language, or paperwork, and lacking access to files and other information. It was noted that the system particularly disadvantaged parents from culturally and linguistically diverse communities.

20 Inaccurate or unfair assessment: Assessments related to parent dissatisfaction included investigative assessments where the worker did not gather all the relevant information and only focused on parental weaknesses. Parents were frustrated with a reluctance to modify assessments based on new developments and reported that assessment could be coercive and threatening.

21 High worker turnover: Parents disengaged when there was no continuity because no-one knew or could understand the whole situation accurately. For example, Buckley, Carr and Whelan (2011) reported on single parents seeking to restrict child access visits to the domestically violent parent who found their requests were viewed with suspicion or ignored, when previously a worker had judged them poorly for not leaving the violent relationship.

Obtaining parental perspectives on these elements of child protection practice that enhance satisfaction can be used to assess program efficacy, design service delivery improvement strategies, and enhance professional practice, which in turn may increase parental engagement (Tilbury, Osmond & Crawford, 2010).

3. Methods

Procedure

A self-administered questionnaire was distributed to parents whose children were currently or recently (within the past 3 months) subject to statutory child protection intervention. The survey was open to all parents with children subject to Intervention with Parental Agreement (IPA) or

intervention undertaken with a Child Protection Order (CPO) in Queensland. The survey could be completed online via a survey link or in hard copy. The survey was conducted in two waves: January/February/March 2016 and August/September/October 2016.

The survey was promoted through Queensland child protection services, peak bodies, and parent advocacy groups, particularly via the Family Inclusion Network, the Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP), and PeakCare Queensland. Information about the project was distributed directly through service providers, including Child Safety Service Centres (Child Safety) and non-government services, particularly Family Intervention Services that work directly with families subject to statutory child protection intervention. Agencies distributed hard copies of the survey as well as a leaflet and email that contained the survey link.

During the survey, parents could elect to receive a newsletter about the project and have their name placed in a draw to win a \$100 Coles-Myer voucher as an encouragement to participate in the study. The prize draws were conducted in April 2015 and December 2016 and the winners (names confidential) were contacted. Identifying information collected for the prize draw was not retained.

Instrument

Parents were asked to respond to 35 statements about their current Child Safety Officer (CSO). These statements were adapted from two existing scales, the Strengths-Based Practices Inventory (Green, McAlilister and Tarte, 2004) and the Parents with Children in Foster Care Satisfaction Scale (Harris, Poertner, & Joe, 2000). Statements related to explanations provided by CSOs, understanding displayed by CSOs, practical help, strengths-based approaches, CSOs' expectations of parents, how consistently CSOs engage with families, involvement in decision making, and cultural support. Out of the 35 statements, 26 were put to all parents, with the remaining 9 statements put to parents with children living in out-of-home care at the time of the survey. Parents were asked to respond on a five-point scale: 'never', 'rarely', 'sometimes', 'often', or 'a lot'. An open-ended question was asked about what parents considered to be important when having contact with Child Safety. Questions about demographics and length of involvement with Child Safety were also included. The survey instrument is attached (Appendix 1).

Ethics

The study was conducted with approval from the Griffith University Human Research Ethics Committee. Participation was voluntary and confidential, and no identifying information was collected on the questionnaire.

4. Results

Demographics

A total of 83 parents responded to the survey. Demographic characteristics for these respondents are included in Table 1 below.

Table 1: Demographic characteristics of parents (n=83)

Parent characteristic	Parents	
	n=83	%
Gender		
Female	69	83%
Male	14	17%
Age in years		
Under 20	0	
20 to 40	47	57%
over 40	36	43%
Indigenous status		
Indigenous	24	29%
Non-Indigenous	55	66%
Missing	4	5%
Location		
Brisbane	17	20%
Other	66	80%
Place of birth		
Australia	65	78%
Other	12	14%
Missing	6	7%
Language		
English	80	96%
Other	3	4%
Wave		
Wave 1	48	58%
Wave 2	35	42%

Most of the respondents were female (83%) with a small group of men also responding to the survey (17%). There was a roughly even split between parents aged 20 to 40 and parents aged over 40 years. Just under one-third (29%) of parents who responded to the survey were Indigenous, with two-thirds (66%) of parents identifying as non-Indigenous. Four-fifths (80%) of respondents were located outside of Brisbane at the time of the survey, and a similar proportion listed their place of birth as Australia (78%). Almost all respondents (96%) reported English as their main language.

Involvement with Child Safety

Parents were asked a number of questions about their involvement with Child Safety. Firstly, parents were asked how many children they had in total. Noting that some of their children may have been involved with Child Safety while others may not have been, parents were also asked how many of their children were involved with Child Safety. Finally, parents were asked how many of their children were living at home with them.

Table 2: Parents by the number of children they have, number of children involved with Child Safety, and number of children living at home

	Parents	
	n	%
How many children do you have? (n= 74)		
1 child	9	12%
2 children	19	26%
3 children	9	12%
4 children	9	12%
5 or more children	28	38%
How many of your children is the Department of Child Safety involved with now? (n=71)		
no children	3	4%
1 child	23	32%
2 children	19	27%
3 children	11	15%
4 children	10	14%
5 or more children	5	7%
How many of your children are currently living with you at home? (n=65)		
no children	31	48%
1 child	16	25%
2 children	8	12%
3 children	5	8%
4 children	3	5%
5 or more children	2	3%

Half of the parents who responded to these questions reported having one, two, or three children. The same number of parents reported having four, five, or more children. As expected, reported numbers of children involved with Child Safety were slightly lower, indicating that parents had some children involved with Child Safety and some children not involved with Child Safety. Three-quarters (75%) of parents had one, two, or three children involved with Child Safety, while only 21% of parents reported having either four or five or more children involved with Child Safety. Three parents (4%) indicated that, at the time of the survey, none of their children were involved with Child Safety.

Parents were asked how long they had been involved with Child Safety. The question was posed as an open ended question so some of the responses did not indicate a specific timeframe. For example, parents reported, ‘Since last child’ and ‘On and off’. The remaining 65 responses, which did indicate specific timeframes, were used to compile Table 3 below.

Table 3: Length of time the department had been engaged with parents (n=65)

Length of departmental involvement	Parents	
	n	%
Less than 1 year	8	12%
1 to 2 years	9	14%
3 to 5 years	21	32%
More than 5 years	27	42%

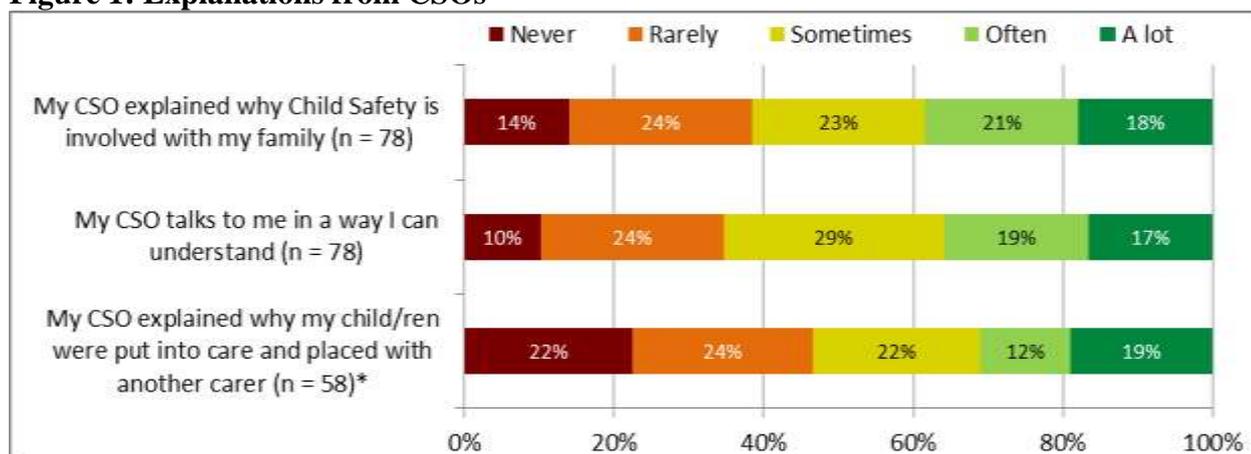
Most parents had been involved with the department for relatively lengthy periods of time. Almost three-quarters (74%) of parents had been involved with the department for at least three years, including 42% who had been involved with the department for more than five years.

Parental perceptions of CSOs

As described above, parents were asked to respond to 26 statements about their perceptions of their CSO. A further 9 statements were asked of parents with a child currently living in out-of-home care, and 59 parents responded to at least one of those statements. Parents were asked to respond on a five-point scale from ‘never’ to ‘a lot’. Responses are grouped into eight categories: explanations provided by CSOs, understanding displayed by CSOs, practical help, strengths-based approaches, CSOs’ expectations of parents, how consistently CSOs engage with families, involvement in decision making, and cultural support. Comments from parents relevant to each category are presented alongside quantitative data.

Three statements related to the explanations that CSOs gave to parents. The first two statements were relevant for all parents and related to explanations given about why Child Safety is involved with the family and how understandable CSO explanations were. The third statement applied to parents with a child in care. Parents were asked whether their CSO had explained why their child or children and been placed in out-of-home care. Responses are set out in Figure 1 below.

Figure 1: Explanations from CSOs



*Only asked of parents with children living in out-of-home care

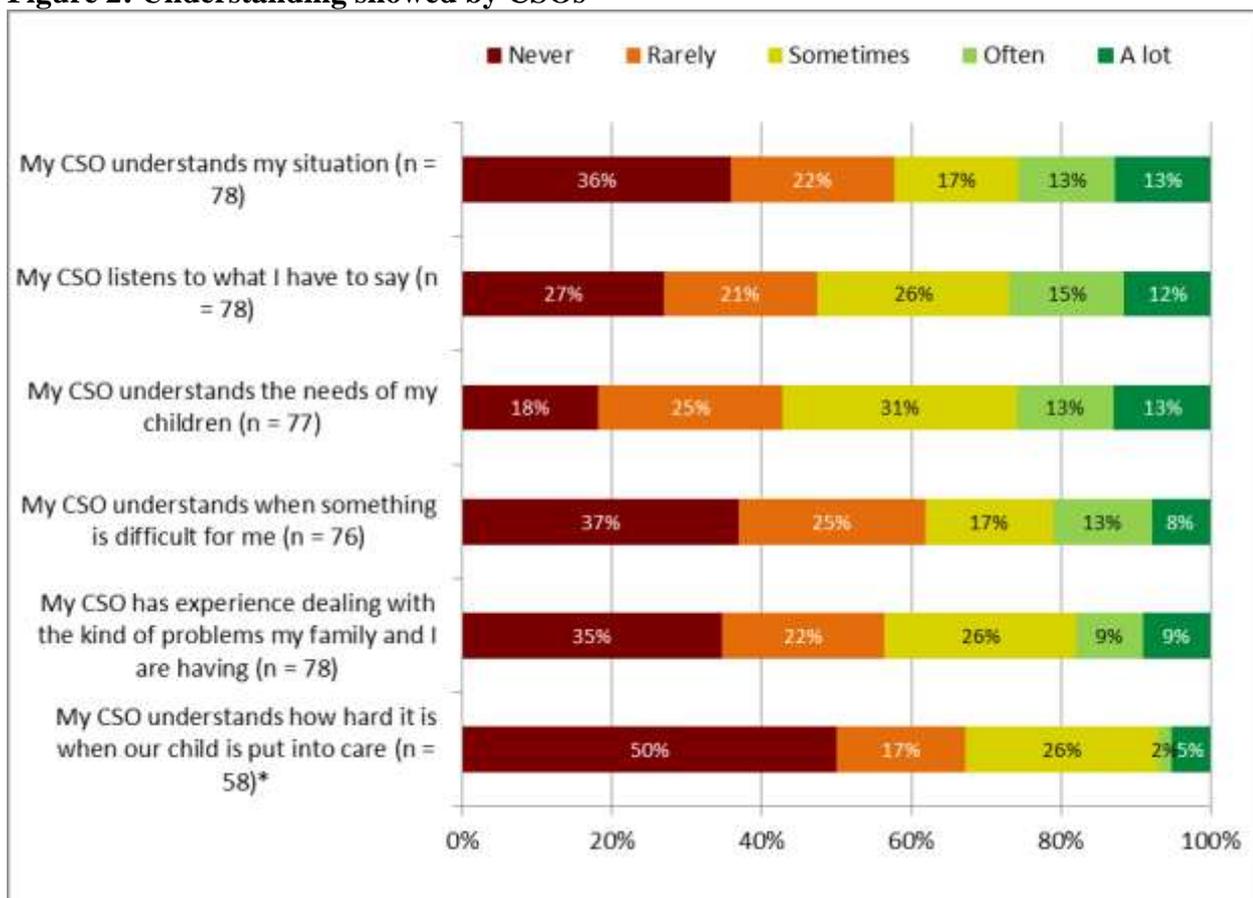
Most parents (62%) indicated that their CSO explained why Child Safety was involved with their family at least sometimes. Just under a quarter of parents (24%) indicated that they received this explanation rarely and 14% indicated that their CSO never explained why Child Safety was involved with their family. Similar proportions of parents reported that their CSO talked to them in a way that they could understand. Of parents with at least one child in out-of-home care, almost one-quarter

(22%) indicated that their CSO never explained why their children were placed in care and a similar proportion (24%) indicated this explanation was provide rarely.

The next group of questions, included in Figure 2 below, relate to understanding displayed by CSOs. Parents were asked about whether their CSO understood their own situation and experiences, and were also asked whether their CSO understood their children’s needs. Parents with at least one child in care were also asked whether they thought their CSO understood how hard it was when their child was placed in care.

Most parents indicated that their CSO listened to what they had to say at least sometimes (53%), and likewise, a majority of parents indicated that CSOs understood the needs of their children (57%) at least sometimes. However, across the remaining four statements, parents were more likely to indicate that their CSO understood rarely or never. A majority of parents indicated that CSOs rarely or never understood their situation (58%), understood when something was difficult for them (62%), or had experience dealing with the kind of problems their family had (56%). Of parents with a child living in out-of-home care, half (50%) indicated that the CSO never understood how hard it was when their child was put into care, although a substantial minority (33%) indicated their CSO understood at least sometimes.

Figure 2: Understanding showed by CSOs



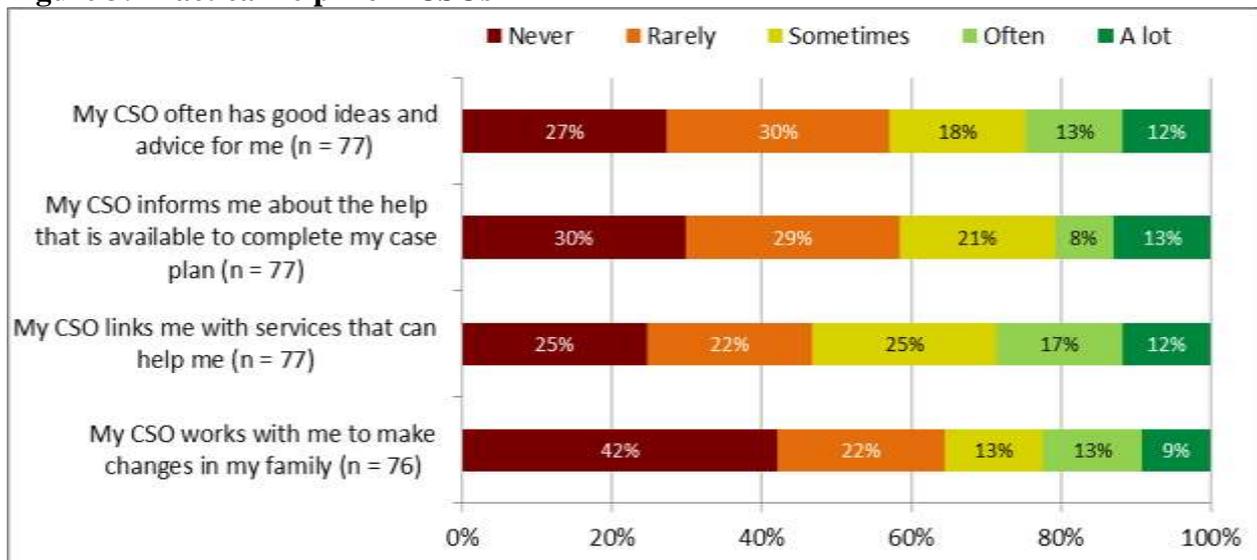
*Only asked of parents with children living in out-of-home care

Parents made a number of comments that related to how well CSOs understood them and their situation, including the following:

- *They need to Listen show more empathy Understand not everything is black and white. Not every case is the same.*
- *Listen and help, don't demand and order.*
- *Your parenting of older children isn't taken into account. The CSO doesn't take into account a holistic view of the parent – there may be things happening in my life that impact how I'm feeling / responding at different times.*
- *Disability is never taken into account. There is only the standard decision making in place. I can't physically do the same as an able bodied parent and am seen as 'deficient' and they then question my 'capacity to care'.*
- *Being heard, understood and respected not only as a human being but as a mother.*
- *The focus is on the child, which I understand, but no focus whatsoever on the trauma of the parents.*
- *I want my CSO to see, acknowledge and understand that I am in pain. I am traumatised by this experience. This is hell and there is never any understanding of what impact this has had on my life.*
- *That Child Safety take the time to get to know me and who I am rather than overlook me. I feel this occurs as I am a male and the department has a policy to reunify with the parent that they removed from and in my case the mother which is not appropriate.*

Four statements, set out in Figure 3, related to the practical assistance provided by CSOs. These statements related to both direct assistance in the form of ideas, advice, and working with families, and to referrals to services. These questions were asked of all parents.

Figure 3: Practical help from CSOs



Of the four statements about the practical help and support offered by CSOs, parents were most positive about the frequency with which CSOs linked parents with services. Almost a third (29%) of parents indicated that CSOs linked them with helpful services often or a lot and a further 25% indicated that CSOs did this sometimes. Parents were less positive about the ideas and advice offered by CSOs with the majority (57%) indicating good ideas and advice were offered rarely or never. Similar proportions (58%) of parents indicated that CSOs informed them about help available to complete their case plan rarely or never. Parents were least positive about the work that CSOs did to make changes in families, with almost two-thirds (64%) indicating that CSOs did this rarely or never.

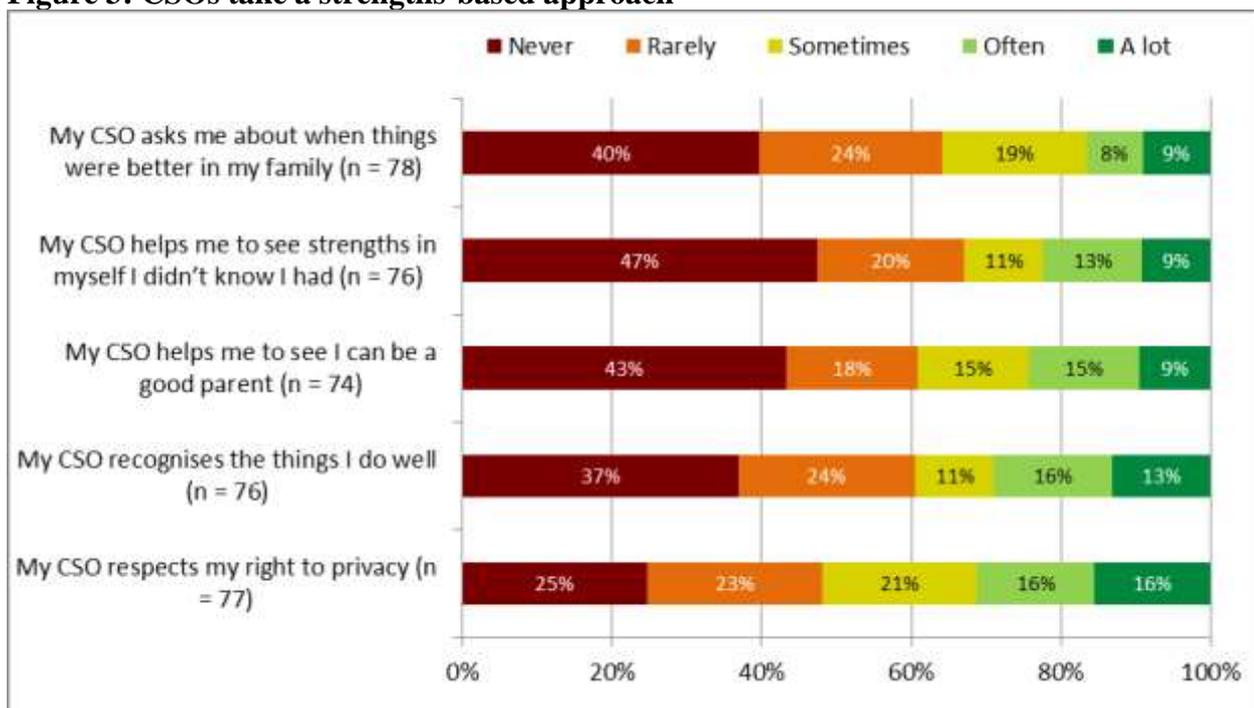
Some parents made comments requesting more support from CSOs, including:

- *More support.*
- *Feel supported by my CSO.*

Parents were asked to respond to five statements about whether CSOs took a strengths-based approach. These statements related to the extent to which CSOs were positive and empowering, and were able to help parents focus on their own strengths. Parents were also asked to respond to a statement about whether CSOs afforded parents with an appropriate level of privacy. These statements were put to all parents. Responses are presented in Figure 3, below.

Parents perceived that CSOs recognised strengths only to a limited extent. Substantial proportions of parents indicated that CSOs rarely or never asked about how things were better in their family (64%), helped them see strengths (67%), helped them see that they could be a good parent (61%) or recognised the things parents did well (61%). Parents were more likely to indicate that CSOs respected privacy with a majority of respondents indicating that CSOs did this at least sometimes (52%), including almost one-third of parents (31%) who reported that CSOs respected their privacy often or a lot.

Figure 3: CSOs take a strengths-based approach



The sense that CSOs did not recognise strengths or the possibility of change was also reflected in the comments made by parents.

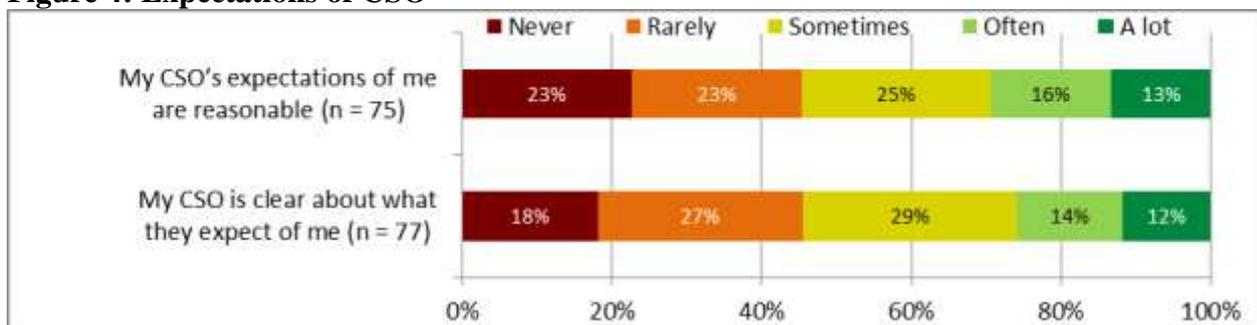
- *That they stop seeing me for the mistakes I made in past. I am very different now.*
- *Have a grasp on the case details and confidentiality. Refrain from passing judgement and / or verbalise to others their own personal opinion of parents.*
- *I was a child in care myself and felt very judged by my first CSOs and was told I won't change.*
- *They will never let you forget your past and move forward from it. Therefore you are still seen as a risk way after you have learnt why there was a risk, how to change that*

and now understand what is expected of you. It makes no difference. You can learn and grow but they still won't give you a chance to prove yourself.

- *Once the department has made a decision about the type of person you are, you can never shake that perception, no matter how much you try.*
- *Acknowledge support & encourage parents. Give credit when its due – progress / increase visits. Positive feedback as reward.*
- *Remain impartial / open minded and focused on supporting family unit and reunification.*
- *Allow me to feel that I am a parent who is capable of making good choices for my children.*
- *His mother stuffed up on drugs. Me (the father) and my son are being punished for that.*
- *Why does the CSO have to look down on me when I am poor and they come to my home dressed in expensive clothes and designer shoes? Can't the CSO know that makes me feel even badder about myself than I do already?*

All parents were asked to respond to two statements about their CSO's expectations. Parents were asked if these expectations were reasonable and if these expectations were clear, as per Figure 4, below. Most parents perceived their CSOs expectations of them as reasonable and clear, with 55% of parents indicating that this was the case sometimes, often, or a lot. However, a substantial minority of parents (45%) indicated that expectations were reasonable and clear rarely or never. One parent commented, "I struggle to understand their demands."

Figure 4: Expectations of CSO



All parents were asked to respond to five statements about the consistency with which CSOs engaged with them. Parents with children currently living in out-of-home care (n=59) were asked to respond to a further three statements. These statements related to whether CSOs were contactable, reliable, dedicated sufficient time to the case, and kept parents up to date with important information. Responses are presented in Figure 5, below.

Parents were most positive about how often CSOs returned phone calls and kept appointments, with 58% of parents indicating that CSOs did this sometimes, often, or a lot. In contrast, parents were more critical about how often the CSOs met with them at least monthly (62% indicated this happened rarely or never). A similar proportion of parents (60%) indicated that CSOs rarely or never provided an alternative contact for periods of absence.

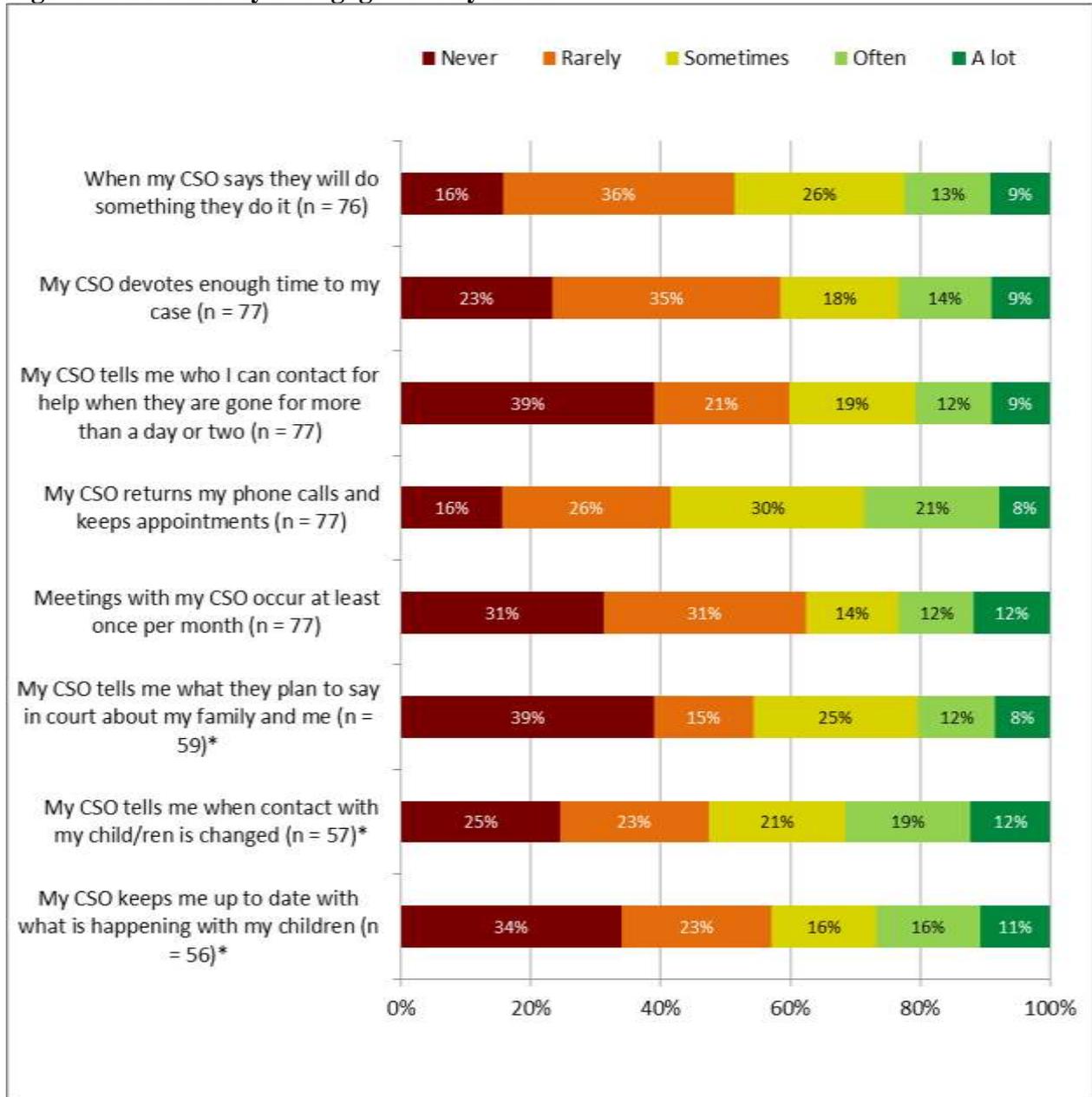
Substantial proportions of parents also indicated that CSOs rarely devoted enough time to their case (35%) and rarely did the things they said they would (36%). However, proportions of parents reporting that CSOs never did these things were relatively low (23% and 16% respectively).

Most parents (57%) with at least one child living in out-of-home care indicated that their CSO rarely or never kept them up to date with what was happening with their children. However, parents were more positive about how often CSOs kept them informed when contact with their children was changed with a majority (53%) indicating that CSOs did this at least sometimes. Parents also indicated that CSOs tended not to provide information about what they planned to say in court about families, with just under two in five parents indicating CSOs never provided this information.

A number of comments from parents related to these issues of consistency and engagement, including:

- *The department needs a skeleton staff on duty over the Christmas New Year break to handle crises when they occur.*
- *Due to a shortage of CSO personnel, there is often a shortage of time allocated to visits.*
- *It should be compulsory that every child safety officer should do parenting meetings.*
- *Return calls is a good start, there are too many other things to talk about here.*
- *Emails and phone calls are rarely returned which makes parents feel frustrated and unsure about what is happening with their children. Parents then feel that they are not a significant component in the reunification process.*
- *Regular communication (general updates, school matters, medical issues, contact etc).*
- *Child Safety are inconsistent.*
- *Child Safety...don't share stuff with us, just the carers, such as school meetings and concerts*
- *Contacted when they can't make appointments.*
- *I want to know more than the afternoon before that she is going on leave for a month. Changing CSOs too often, retelling story.*
- *CSOs change every 6 months (incessant) with no warning.*
- *I am very rarely informed of doctor's appointments my 2 year old son attends and they do not do regular checks on my son, they actually don't and haven't since he entered their system.*

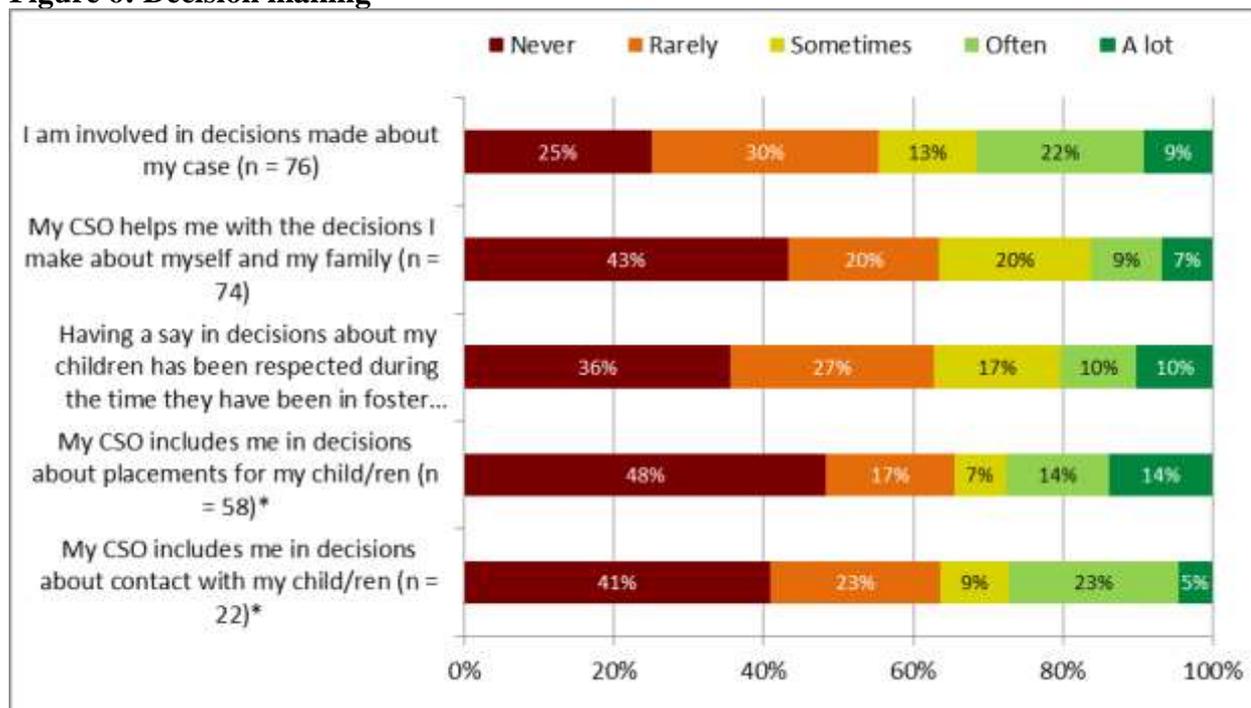
Figure 5: Consistency of engagement by CSOs



*Only asked of parents with children living in out-of-home care

Responses to statements about decision making are presented in Figure 6, below. Parents were asked about whether they had a say in relevant decisions, and were also asked if CSOs helped with the decisions that parents make. Parents with children in care were also asked how often CSOs included them in decisions about placements and contact.

Figure 6: Decision making



*Only asked of parents with children living in out-of-home care

Relatively few parents (25%) reported that they were never involved in decisions about their case but a further 30% reported that they were involved rarely. A substantial minority (32%) reported that they were involved often or a lot. Parents were less likely to report that CSOs helped them with the decisions that they made about their own life and family, with 43% reporting that CSOs never helped and a further 20% reporting that this happened rarely. Only 16% reported that this help was provided often or a lot.

Parents with children living in out-of-home care reported less frequent involvement in decisions. Almost two-thirds (63%) of parents indicated that their right to have a say about decisions about their children had been respected rarely or never while their children had been in care. Reported involvement in decisions about contact was comparable with 64% of parents reporting involvement rarely or never. Parents reported the least involvement in decisions about placement with almost half (48%) of parents reporting that they had never been involved in these decisions and a further 17% reporting that this happened rarely.

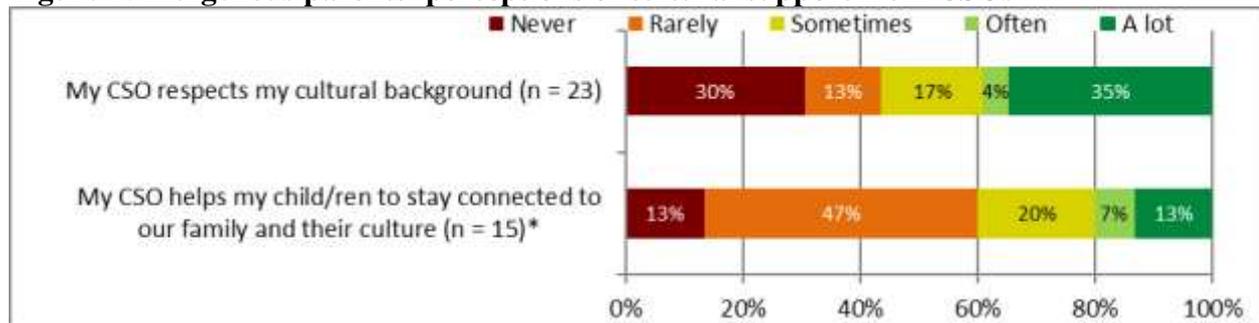
Some of the comments about decision making included:

- *The department needs to work closer with both parents to help resolve the issues and worries that they have.*
- *I just want Child Safety to be friends with me so I can feel comfortable and confident to work with them in being the best parent I can be.*
- *Be treated with respect, have our rights respected; be kept involved with ALL matters*
- *I want them to come to me to me questions about my children. I have so much knowledge and want to be involved but I'm never asked.*
- *As a kinship carer, I am not involved in case reviews or discussions. Instead I am used as a placement option.*
- *My CSO does not think it is important to tell me anything cause I am only the Gran. I want to know more about what is happening.*
- *I want to have as normal a contact as possible, not always in a park.*

- *I am having to constantly remind them to inform carers regarding changes to visitations.*
- *I want to not miss out on contacts because she is constantly away.*

Parents were asked to respond to two statements about cultural support. The first statement, which was relevant to all parents, related to how often CSOs respect parents cultural background. The second statement related to parents with at least one child in out-of-home care, and was about whether the CSO helped children to stay connected to culture. Responses parents who identified as Indigenous are presented in Figure 7.

Figure 7: Indigenous parents' perceptions of cultural support from CSOs



*Only asked of parents with children living in out-of-home care

Due to small cell sizes, these findings should be interpreted with caution. Most Indigenous parents who responded to the first statement (13 out of 23) indicated that their CSO respected their culture at least sometimes with more than one-third (8 parents) indicating that their CSO respected their culture a lot. Of the 15 responses from Indigenous parents with a child in care, seven (47%) indicated that their CSO rarely helped their children stay connected to family and culture, and a further two parents (13%) indicated their CSO never did this. A minority of parents (six out of 15) indicated that their CSO helped their children stay connected at least sometimes.

Comments from parents about connection to family and culture included:

- *[I want Child Safety to] give contact to both sides of my child's family, not just one side of her family.*
- *They need to understand about Aboriginal people*
- *[CSOs should] have an awareness of how Aboriginal families work for we are family oriented.*

Other comments

Most of the comments that parents made related to the topics identified above. However, there were some comments that fell outside of these categories. Although the survey was about perceptions of CSOs, a number of parents made comments that related to child protection system more broadly. Many of these comments related to accountability, fairness of processes, and the integrity of workers. For example:

- *Change the entire system. Stop DOCS from being secret police / judge / jury of families and be social workers that they're supposed to.*
- *Families need a completely independent body to handle any complaints about the department.*
- *The truth - which child safety cannot do, and to be professional in the attitude and be educated to deal with human life.*
- *Everyone would benefit if child safety disappeared for good!*

- *The department is a law unto itself. There is little or no accountability for decisions made.*
- *Complaints about CSOs need to be followed up.*
- *Accountability is required for Child Safety abuse of human rights.*
- *CSOs should believe children when they disclose child sexual abuse.*
- *CSOs manipulate reports, do not follow other experienced professional's opinions and reports.*
- *CSOs lie on affidavits. Magistrates assume that CSOs are professional and therefore simply rubberstamp the recommendations put forward by CSOs. Re-education of magistrates and Child Safety staff needs to be a priority.*
- *When you read an affidavit compiled by the department you will observe that the CSO has repeated the main very bad points, said in slightly different ways, every 6 or 7 pages - magistrates don't read all the material they are given - they flick through the material. This guarantees the magistrate is bombarded with the same information multiple times.*

5. Discussion and conclusion

Rates of reported parental satisfaction were generally low. Across all 35 statements, only a minority of parents responded 'often' or 'a lot', and in many cases, a majority of parents responded 'never' or 'rarely' to indicators of satisfaction. Parents are not likely to be pleased about their involvement with Child Safety, regardless of the approach taken by their CSO. Negative responses to statements about CSOs are likely, to some extent, to be an expression of general dissatisfaction and negative sentiment towards the organisation or system as a whole. There were numerous comments from parents about the system more broadly, especially in relation to accountability and transparency. However, there was considerable variation in levels of reported satisfaction across the different topics covered by the survey. It is therefore possible to identify the areas of relative satisfaction and dissatisfaction.

Parents tended to be most satisfied with aspects of practice related to courtesy and practical support. For example, parents were more likely to report that CSOs returned phone calls and attended meetings with relatively high frequency. Similarly, most parents indicated that CSOs followed through on the things that they said they would do, and linked them to helpful services. However, many parents indicated that CSOs never or rarely engaged in more resource intensive activities such as regular case planning and working with them to make changes. A majority of parents indicated that monthly meetings were held rarely or never, and that CSOs rarely or never devoted enough time to their case. Ongoing efforts to help CSOs to manage busy caseloads and administrative tasks that reduce time available for direct contact with families may improve parental perceptions against these measures over time.

There were some other areas of practical assistance that CSOs may be able to improve without substantial investment in new resources. For example, most parents indicated that CSOs rarely or never provided alternative contact details while they were away. Most parents indicated that they were usually not informed about what would be said about them before going to court. More than one-third of parents with a child in care indicated that their CSO never kept them up to date with what was happening with their children in care. These are all basic elements of good practice. It should be possible to improve these measures with adjustments to practices and improvements to administrative processes to ensure that parents have access to crucial information in a timely fashion.

In addition to these practical issues, there were clear patterns in measures of interpersonal communication and relationships. Parents reported the greatest satisfaction with statements that

related to communication from CSOs to parents. That is, most parents indicated that their CSO provided explanations at least sometimes and that CSOs spoke in language that parents could understand. Parents tended to concentrate in the middle of the scale with relatively few parents selecting 'often' or 'a lot' in response to these statements, so there is still room for improvement here, but overall, these statements elicited some of the most positive responses. Furthermore, most parents indicated their CSO's expectations were clear, and most parents with children living in out-of-home care indicated that CSOs informed them about changes to contact. Parents were relatively positive about communication of information from CSOs to parents.

While parents indicated that they could understand their CSO, parents were considerably less likely to indicate that CSOs understood parents. Parents indicated that CSOs rarely or never understood them, their situation, their family, or how hard their experiences had been. Parents appeared to make a distinction between CSOs listening, which parents indicated CSOs did frequently, and CSOs understanding, which most parents indicated CSOs did rarely or never. Of all 35 statements, the most negative response related to CSOs' understanding of how hard it was when children were placed in out-of-home care. Half of the parents who responded to this question indicated that CSOs never understood. It is perhaps unreasonable to expect CSOs to fully understand this experience or to adequately convey such understanding to parents. However, it is important to note that a number of parents did believe that their CSO understood at least sometimes, so this sense of understanding and empathy is achievable in some cases. Comments from parents provided insight into ways that CSOs could convey more understanding to connect with parents effectively. Several comments related to the individual circumstances and needs of parents including their gender, culture, disability status, parental status, and broader circumstances. Parents expressed a desire for CSOs to understand and engage with these important aspects of their identities. Parents also reported a desire for CSOs to acknowledge and empathise with their experiences and trauma.

Similarly negative responses were provided in response to statements about strengths-based practice. Most parents indicated that their CSO rarely or never engaged with their strengths either by asking about them, acknowledging them, or helping parents to uncover their own strengths. There was considerable overlap between comments about understanding, discussed above, and comments about strengths-based practice. Parents indicated that they felt unfairly judged and that they had been given a label based on their past actions that they could not escape from. This may reflect the responsibility of CSOs to make clear statements about their assessment of child protection concerns to parents. Comments from parents indicated that they did believe that they had strengths and that they had grown over time, but they were pessimistic about CSOs' ability to understand these strengths, or work with them. These comments indicate the extent to which strengths-based practice relies on workers being able to understand parents and to convey empathy and a genuine desire to help.

Parents were asked to respond to a series of statements about decision making. While parents indicated that CSOs expectations were reasonable and clear, there was less satisfaction with decision-making processes. Decisions are made throughout child protection intervention and are not confined to forums such as family group meetings. Responses indicated that, from parents' perspective, decisions were not made collaboratively. Most parents indicated that they were rarely or never involved in decisions about their case. Responses were even more negative from parents with children living in out-of-home care, with substantial proportions of parents indicating that they were never included in decisions, especially about placements and contact. At the same time, parents indicated that CSOs provided little assistance with decisions made by parents, with almost two-thirds of parents indicating CSOs helped in this regard rarely or never. Overall, decision making was an area of relatively high rates of dissatisfaction for parents. There is considerable scope for improving collaborative practices that are compatible with the child protection statutory context.

Most Aboriginal and Torres Strait Islander parents indicated that their CSO respected their cultural background at least sometimes, with over one-third indicating that their CSO respected their culture a lot. Although, it should be noted that only 23 responses from Indigenous parents (out of a total 24 Indigenous parents included in the sample) were gathered in response to this statement, so these findings should be interpreted with caution. There were even fewer Aboriginal and Torres Strait Islander respondents with children living in out-of-home care, so it is difficult to draw conclusions about the extent to which Indigenous parents believe CSOs help children remain connected to family and culture. Further research on the experiences of Aboriginal and Torres Strait Islander parents and perceptions of respect for their culture is warranted.

It is important to note some limitations of the present study. Firstly, the parents who responded to the survey may not be representative of the views of all parents, given the non-randomised sampling. Some parents who felt negatively about Child Safety may have been more motivated to respond, while others may have felt pessimistic about the extent to which their input would lead to improvements. Most parents who responded to the surveys had long-term involvement with the Department and some or all of their children in out-of-home care, so they may feel more aggrieved. The findings here may therefore represent levels of satisfaction that are either higher or lower than the broader population of parents engaged with Child Safety. Secondly, despite a range of strategies to promote the survey, the number of responses was low. A survey such as this requires the support of busy practitioners in statutory and community agencies to approach and recruit participants (Mirick, 2016). Most parents who responded (78%) were born in Australia and 96% reported English was their main language, so the cultural diversity of the sample was limited. The smaller proportion of fathers who responded may be due to them being a somewhat overlooked population in child protection work (Maxwell et al., 2012). Due to the small sample size, it was not possible to draw conclusions about relationships between parental factors, such as gender and Indigenous status, and perceptions of CSOs, or to make meaningful comparisons over time.

Notwithstanding these limitations, the findings show areas of relative satisfaction and dissatisfaction and provide insights into the type of approaches CSOs could take to enhance parental satisfaction. In addition to their relationships with CSOs, parents commented on aspects of the child protection system, especially concerning a perceived lack of accountability, and assessments they felt did not accurately or fairly reflect the situation in their family. Findings from this research could be used to inform policy as well as professional development initiatives with practitioners and carers to promote learning that is informed by the lived experiences of parents. Hearing parents' opinions helps child protection policy makers and practitioners to understand their impact on families and develop strategies for practice improvement. It is a vital mechanism for continuous improvement and ongoing quality assurance.

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These questions are only if you have a child in care (e.g. foster care or kinship or residential care). If your children are still living with you at home, skip to the last question.

13. How much do you agree with these statements?

	Never 1	Rarely 2	Some times 3	Often 4	A lot 5
Having a say in decisions about my children has been respected during the time they have been in care.	<input type="checkbox"/>				
My CSO includes me in decisions about placements for my child/ren	<input type="checkbox"/>				
My CSO includes me in decisions about contact with my child/ren	<input type="checkbox"/>				
My CSO tells me what they plan to say in court about my family and me.	<input type="checkbox"/>				
My CSO helps my child/ren to stay connected to our family and their culture	<input type="checkbox"/>				
My CSO explained why my child/ren were put into care and placed with another carer	<input type="checkbox"/>				
My CSO understands how hard it is when your child is put into care.	<input type="checkbox"/>				
My CSO tells me when contact with my children is changed.	<input type="checkbox"/>				
My CSO keeps me up to date with what is happening with my children	<input type="checkbox"/>				

14. Last question. Are there further comments you would like to make about what is important to you when you have contact with Child Safety?

Thank you for taking part in this survey. We hope it will contribute to improving child protection services.

Return survey to: HSV-Tilbury, Griffith University Logan campus, University Drive, Meadowbrook 4131.

(This section will be detached to protect your confidentiality)

OPTIONAL – If you wish to enter the prize draw, or to receive a newsletter about the project, please provide a contact point for us.

Yes, I would like to have my name placed in the draw to win a \$100 Coles-Myer voucher

Name

Postal address

Email Telephone

The prize draw will be held December 2016.



Queensland Child Protection Parent Perspectives Survey

Survey Consent

You are invited to participate in the Queensland Child Protection Parent Perspectives Study

This study is being undertaken by Professor Clare Tibury from Griffith University.

All parents who are currently involved with the Department of Communities, Child Safety and Disability Services (Child Safety) and subject to Intervention with Parental Agreement (IPA) or a Child Protection Order (CPO) are invited to participate.

What we are asking

We are asking that you join this research project by completing this survey which should take about 10 minutes to complete.

What we will do in return

To thank you for your participation you will be invited to:
(i) enter in a draw to win a \$100 Coles-Myer voucher and
(ii) receive a short newsletter about the findings of the study.

The purpose and expected benefits of this study

The purpose of this study is to find out what parents think about the quality of the child protection services offered by the Department of Communities, Child Safety and Disability Services. We are asking questions about what it is like when you have contact with your Child Safety Officer (CSO). We hope that your participation in the study will assist to improve child protection practices.

Your participation is voluntary

Your participation in the project is entirely voluntary. You may withdraw from participating at any time without providing an explanation. The information supplied by you will be strictly confidential and will not be disclosed to anyone but the Griffith University researchers. All questionnaires will be de-identified.

they do not record your name. Written reports or feedback to the Department of Communities, Child Safety and Disability Services on the findings from the project, and academic publications of the findings, will only describe information at the group level it will not identify any specific individuals.

Ethical guidelines

Griffith University conducts research in accordance with the National Statement on Ethical Conduct in Human Research if you have any complaints concerning the manner in which this research project is conducted it may be given to the researchers, or, if an independent person is preferred, please contact the Manager, Research Ethics and Integrity on (07) 373 54375 or email research-ethics@griffith.edu.au.

The conduct of this research involves the collection, access and/or use of your identified personal information. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory authority requirements. A de-identified copy of these data may be used for other research purposes. However, your anonymity will be safeguarded at all times. For further information consult the University's Privacy Plan at www.griffith.edu.au/about-griffith/plans-publications/griffith-university-privacy-plan or telephone (07) 373 54375.

To get further information

If you have further questions or concerns, please feel free to contact the researcher by email at cpd_parents@griffith.edu.au

By continuing with the survey, you are indicating that you are at least 18 years old, are a parent involved with the department under an IPA or CPO, have read and understood this consent form, and agree to participate in this research study.

Return survey to: HSV-Tilbury, Griffith University Logan campus, University Drive, Meadowbrook 4131.

Parents – what is important to you when dealing with your Child Safety Officer?

This survey is being conducted by Griffith University researchers. We would like to know how satisfied parents are with the child protection services offered by the Queensland Government Department of Communities, Child Safety and Disability Services (the Department).

We are asking questions about what it is like for you when you have contact with your Child Safety Officer (CSO). As parents who are child safety clients, what should Child Safety know from parents – how do you want your CSO to talk to you, what sort of approach should CSOs have, and what is important to you? If the CSO was doing a good job, how would this look?

Please read the information about the survey, and only answer the questions if you want to.

The research is totally **confidential**. We will be writing a report about the results of the survey, but no-one will be identified. We will not be telling anyone who answered the survey questions, or where they are from.

We will ask you to provide a few details about yourself – whether you are a mum or dad, how many children you have, and what sort of contact you have with child safety. But we won't be asking any personal questions that can identify you, and we won't be asking you anything personal about your family.

Let's start. This section is about you.

1. Are you:

male female

2. Your age group:

under 20 years
 20-30 years
 30-40 years
 over 40 years

3. What country were you born in?

Australia
 New Zealand
 Europe
 Asia
 Other _____

4. Is English your main language?

yes no

5. Do you identify as

Aboriginal or Torres Strait Islander or both
 neither Aboriginal or Torres Strait Islander

6. Where do you live?

Brisbane outside of Brisbane

7. How many children do you have?

1
 2
 3
 4
 5 or more

These questions are about your contact with the Department of Child Safety

8. How many of your children is the Department of Child Safety involved with now?

1
 2
 3
 4
 5 or more

9. How long has the Department of Child Safety been involved with your family?

less than 1 year
 1 - 2 years
 3 - 5 years
 more than 5 years

10. Have any of your children been in care (placed with a foster carer, a relative, or someone else) because of a child protection order during the last 12 months?

yes no

11. How many of your children are currently living with you at home?

0
 1
 2
 3
 4
 5 or more

These questions are about the CSO you have been working with in the last 12 months

12. If you have had more than one CSO, think about the CSO you had the **most** contact with in the last year. How much do you agree with these statements?

	Never 1	Rarely 2	Some times 3	Often 4	A lot 5
My CSO explained why Child Safety is involved with my family.	<input type="checkbox"/>				
My CSO talks to me in a way I can understand.	<input type="checkbox"/>				
My CSO understands my situation.	<input type="checkbox"/>				
My CSO asks me about when things were better in my family.	<input type="checkbox"/>				
My CSO often has good ideas and advice for me.	<input type="checkbox"/>				
My CSO informs me about the help that is available to complete my case plan.	<input type="checkbox"/>				
My CSO's expectations of me are reasonable.	<input type="checkbox"/>				
My CSO listens to what I have to say.	<input type="checkbox"/>				
My CSO understands the needs of my children.	<input type="checkbox"/>				
When my CSO says they will do something they do it.	<input type="checkbox"/>				
My CSO devotes enough time to my case.	<input type="checkbox"/>				
My CSO tells me who I can contact for help when they are gone for more than a day or two.	<input type="checkbox"/>				
My CSO links me with services that can help me.	<input type="checkbox"/>				
My CSO returns my phone calls and keeps appointments.	<input type="checkbox"/>				
My CSO has experience dealing with the kind of problems my family and I are having.	<input type="checkbox"/>				
My CSO is clear about what they expect of me.	<input type="checkbox"/>				
Meetings with my CSO occur at least once per month.	<input type="checkbox"/>				
My CSO respects my right to privacy.	<input type="checkbox"/>				
My CSO respects my cultural background.	<input type="checkbox"/>				
I am involved in decisions made about my family.	<input type="checkbox"/>				
My CSO helps me to see strengths in myself I didn't know I had.	<input type="checkbox"/>				
My CSO works with me to make changes in my family.	<input type="checkbox"/>				
My CSO helps me to see I can be a good parent.	<input type="checkbox"/>				
My CSO understands when something is difficult for me.	<input type="checkbox"/>				
My CSO helps me with the decisions I make about myself and my family.	<input type="checkbox"/>				
My CSO recognises the things I do well.	<input type="checkbox"/>				