The Cost of Damaged Attachment Versus Safe Enough Parenting – Weighing the Risks

A/Prof Carolyn Quadrio

School of Psychiatry

University of NSW

Legal Aid NSW

Care & Protection

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OVERVIEW of PRESENTATION

- Attachment and development: the importance of maintaining attachments

- Out of home care: meeting child's needs when the family environment is not "good enough".

- Systems issues
- Case study
- Q&A

ATTACHMENT & SEPARATION

- Separation: primal fear/trauma of the immature: triggers survival mechanisms: ie Attachment
  - Attachment is assessed in terms of separation
  - Children attach to primary carers, independent of time
- Secure: 60%
- Insecure: 30%
- Disorganised: 10%
  - Poor prognosis: most go on to MH problems

HUMAN INFANT: DEVELOPMENTAL IMMATURITY

- Experience of needs/distress

  →arousal

- → activates attachment system

- Cannot scamper to carer
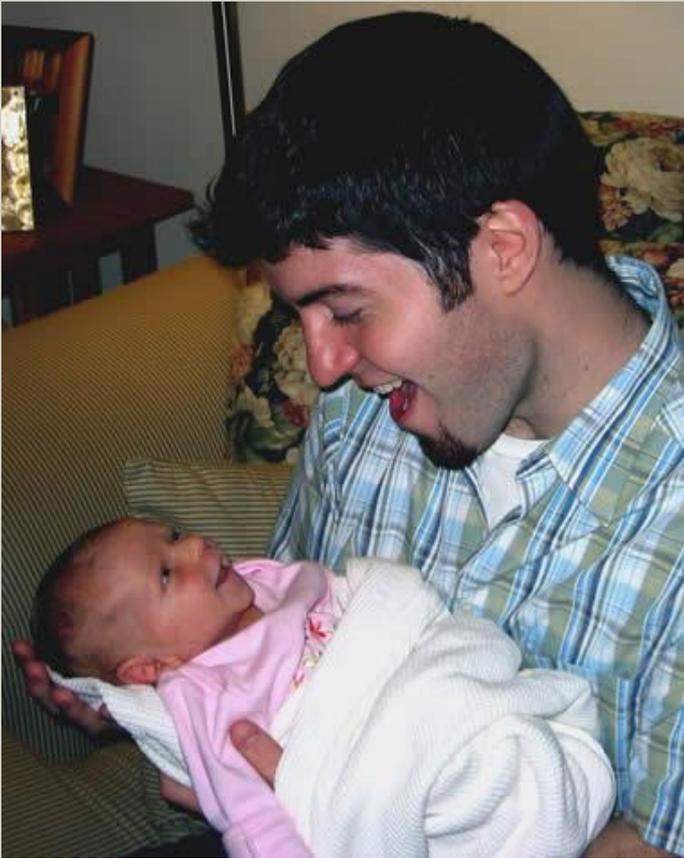
- Can only call/signal thro crying

ATTACHMENT & DEVELOPMENT

- Early attachment experiences

- Templates for life long

  relationships

- Patterns of behaving and

  relating: create personality

- Image of self and others:

  - I'm OK/Not OK & You're OK/Not OK

EMPATHY & SELF-REGULATION

- Infant regulates its world via carer

- empathically attuned, responsive carer: minor traumas contained

- micro-experiences fashion the developing self

IMPAIRED SELF SOOTHING

■ Poor self regulation →

■ Stress → reactions of fear (panic) or despair

■ Chronic dysphoria/depression

■ Chronic anxiety

■ Self loathing

■ External soothing:

  ■ compulsive behaviours: D&A, Food, Spending, Sex

CHILD ABUSE: AUSTRALIAN DATA

- CSA: 15-30%

- Severe CPA: 11%

- Witnessing DV: 14%

- Neglect: 12%

- Emotional maltreatment: 11%

CHILD ABUSE: LONG TERM EFFECTS

- Brain: cognitive, language

- Childhood: behavioural, academic, ADHD

- Teens: delinquency, school failure; D&A; mental health, sexual risk-taking, pregnancy,

- Adult mental health: depression, anxiety; PTSD, D&A

- Social: antisocial, borderline, violent traits, & crime

- Relationship difficulties: family, partners, parenting

OUT OF HOME CARE
Foster & Residential

- When home is not safe, ROH

- Common issues: D&A, abuse

- D&A = abuse

- Is out-of-home safer?

- Often not

ASSESSING ROH

- Always difficult

- Often subjective

- Balance of factors:

- Harm at home vs harm of separation

- Quality of options: multiple placement trauma

- Always work with the family if possible: can child be made safe at home?

SYSTEMS APPROACH (Reason, 2000)

- "Swiss Cheese": harm occurs when hazards align and form a hole through the entire block

- Design systems to minimise errors > blame focus

- Acknowledge that errors will occur

- Engagement and partnership with family to develop safety plan

- Assist parents with MH or D&A, and to acquire better regulation and skills.

SOCIAL/SYSTEMIC ISSUES

- Media influence

- Abusive parents: may challenge empathy

- Repeated patterns: may exhaust empathy

- Removing child: may punish parent but perhaps child also, eg:

- Alcoholic Mo and 6/12 infant, removed for 9/12, restored, removed at 15/12

- **They are not pot plants**

RESOURCES & PREVENTION

- Political time lines are short: 3-4 years
- Scarce resources + short term goals: limit outcomes
- Prevention is fundamental:
  - requires very early or primary intervention
  - ideally start in pre-school years
  - delays: inadequate assessment, medicalisation, eg ADHD
  - after 11, secondary or tertiary intervention

PUBLIC HEALTH MODEL

- Primary prevention: eg vaccination

- Secondary prevention: acute treatment

- Tertiary: minimise complications of chronicity

ROH & OUT OF HOME CARE

- Children are removed because of abuse, but:
- Children in care suffer significant abuse +
- Separation trauma: from family, multiple placements

- Reported abuse is 2-3x higher, mostly physical but also sexual, including older male children
- MH problems at least 2x community rates

ABUSE IN FOSTER CARE

- 80% prior abuse

- Most = prior emotional, behavioural, learning issues

- Reports of abuse in care, 7–8x increase

- Perpetrators: foster carers, 41%; natural parents on contact 23%; children, 20% of incidents (Hobbs et al, 1999).

- Half abused or neglected prior; abuse 'in care', physical and sexual, 2-3x higher (Nunno et al, 1991)

- Mostly physical, also sexual, esp older male children;

  27% perpetrators, prior allegations (Rosenthal et al, 1991).

REUNIFICATION

- More negative outcomes than non reunified: behaviour problems, D&A, arrests; lower grades, school drop out

- Perhaps factors leading to removal persist? High rates

  of re-abuse and neglect

- Mixed emotions: most youth thought fostering was in their best interests; things would have got worse at home, but missed their biological families (Taussig et al, 2001)

PROCESS IN REUNIFICATION

- Lack of attention to process: poor outcomes:

- Half maltreated, half broke down, esp parental D&A

- Older children: more placement instability

- Need: preparation, appropriate services, good SW and foster-carer assistance; set conditions w written agreements & clear goals for change; swift action if problems (Farmer, 2012; Lutman et al, 2013)

DELAYS IN FAMILY COURT

- Cases may take 2-3 years

- Children uprooted again

- No contact orders: bond of attachment wanes or is extinguished

- Suspicions become realities

GOOD NEWS?

- South Australia: 80 per cent of children were satisfied with case-worker and placement; residential (group) care less satisfied than those in foster care; foster homes generally considered secure, happy and supportive; case-workers helpful, caring and willing to listen (Delfabbro et al, 2002)

CASE STUDY: ROSIE

- Family of origin: family violence
- 2yo: removed, 1yr good temporary placement
- 3-9: placed with childless couple, contact with N/M
- breakdown of placement due to new baby
- 10yo: good temporary placement
- 11yo: long term placement: sexual abuse by F/Fa
- 12yo: restoration to Mo; DV with older bro
- 14 yo: placed with Fa, conflict with St/Mo
- 15 yo: runaway: placed in residential group
- Psychiatric assessment: complex trauma, chronic PTSD, chronic depression, personality disturbance

OUT OF HOME CARE

- Questions?

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