

# Child Safety's policies on parents with disability

QAI Commentary

March 2024

# Contents

<b>Introduction</b> .....	3
A note on unintended consequences of contact with health professionals .....	5
<b>Concerning themes</b> .....	6
1. There is a notable absence of disability pride .....	6
2. Disability is often posed as a mandatory consideration.....	6
3. Disability is presented in an overtly negative context.....	6
4. There is no indication of consultation or co-design with the disability community .....	6
<b>Review of specific policies</b> .....	7
Working with a parent who has disability .....	7
Disability and impact on functioning .....	8
Practice Guide: Assess harm and risk of harm .....	9
Types of disability.....	10
Disability facts .....	10
Receive information from a notifier .....	11
Intervention with parental agreement.....	12
A parent's disability: Risk and vulnerability factors .....	13
<b>Conclusion</b> .....	17
<b>QAI's recommendations</b> .....	19

## Introduction

QAI is a community legal service and disability advocacy organisation. We do not practice law in the area of child protection. Through the course of our disability advocacy work in child protection matters however, we noticed that the guidance relied on for decision making in child protection matters is discriminatory and is likely contributing to the unnecessary removal of children from parents with disability.

The following commentary is based on a limited review of a sample of publicly available policies relating to child protection and disability. Based on this review, we identified four thematic concerns. This is not a comprehensive review as we do not have the access or resources to do so. However, we hope our commentary will demonstrate the underlying problems experienced by parents with disability. This is especially the case considering this documentation is used by child safety staff in the context of a broader cultural environment where ableism, discrimination and stigma are commonplace.

Relevantly, the Disability Royal Commission commissioned a research report into ‘Parents with Disability and their Experiences of the Child Protection Systems’<sup>1</sup>. This research sought to improve understanding of the experiences of parents with disability of Australian child protection systems. The research explained how parents with disability are framed as potential risks to their children.

---

<sup>1</sup> Law, U. (2023). *Research Report Parents with disability and their experiences of child protection systems*. <https://disability.royalcommission.gov.au/system/files/2023-07/Research%20Report%20-%20Parents%20with%20disability%20and%20their%20experiences%20of%20child%20protection%20systems.pdf>

The report notes:

The conflation of disability and risk is one of the most explicit forms of discrimination parents with disability face. The conflation is ostensibly based on past numbers of parents' involvement with child protection systems. It attests to the social, systemic and individual prejudice and absence of support faced by parents with disability historically and today.

As fieldwork participants and scholars assert, the assumption of "potential risk" lends itself to child protection authorities imposing lower thresholds for intervention on parents with disability, particularly parents with intellectual disability. Disturbingly, the literature and fieldwork participants regularly cited examples of assessments of risk being conducted in ways that were neither disability or culturally appropriate, nor by assessors who had the requisite tools, skills or knowledge to do so. They also cited failures by child protection authorities to refer parents to services prior to instigating court proceedings to remove children from their care.

The conflation of risk with disability contributes to an identified disability being the primary framework through which other, and often unrelated challenges are understood. While policy, and in some cases legislation, prohibit statutory intervention on the grounds of a parent living with disability, the literature and fieldwork reveal the way assumptions about disability nevertheless pervade risk assessment and child protection practice. Exposure to family violence and structural failings including poverty and inadequate housing are thus often attributed to the individual failings of parents or as confirmatory evidence of parents with disability's incapacities to ensure their children's safety. Parents who actively seek support or help from family or services can find their actions construed as signaling their inability to care for their children. Parents, advocates, lawyers and other fieldwork participants noted that

linking risk and disability often led to assumptions about apparent risks being immutable.

This Disability Royal Commission report said there needs to be a fundamental paradigm shift in legislation, policy and practice to address widespread discrimination against parents with disability across child protection systems. They said a first step is to amend legislation and policies to explicitly remove any equation between disability, parenting incapacity and risk.

We have considered this Disability Royal Commission report alongside our review of a sample of Queensland child protection documents. This commentary outlines the four concerning themes we found as a result of our review, some specific examples of where we found concerning content in the documentation, and our recommendations for how Child Safety can improve their documentation and subsequent processes.

### **A note on unintended consequences of contact with health professionals**

Parents with disability experience increased contact with the child protection system as a result of seeking support or making contact with the health system. For example, parents with disability become engaged with health professionals, including allied health, to prepare reports for NDIS applications or in response to applications under the Guardianship and Administration Act or the Mental Health Act. Reports written for these purposes are deficit focused and paint a picture of a parent's life on their worst day. In many instances, these reports lead to supports or risk-mitigating interventions such as NDIS plans, guardianship, administration orders or Treatment Authorities. However, mandatory reporting requirements start from the initial contact, funnelling parents with disability into the child protection system despite subsequent interventions to adequately address disability needs and satisfy equivalent legislative criteria concerning safety of self and others. These unintended consequences of seeking help or receiving health care increase the number of parents with disability who are scrutinised by child protection systems and can lead to parents experiencing the issues identified in this report.

## Concerning themes

### **1. There is a notable absence of disability pride**

Disability can be a protective factor for children. All children whose parents are disabled grow up with a greater understanding of diversity and adjustments. This is an advantage in building personal and professional relationships throughout life. Children with disability who have parents with disability can learn about specific strategies, tools and supports from observation and daily life. Parents with disability also have a lifetime of experience understanding and navigating the complex legislative and funding ecosystem of supports in the disability community. Our review showed a notable absence of any positive framing of disability as a protective factor in child protection documentation.

### **2. Disability is often posed as a mandatory consideration**

Workers are given tools to identify disability and then question whether supports are in place to minimise the impact. We note that, in many cases, disability is not relevant to child protection matters and an additional lens on parents with disability is therefore discriminatory.

### **3. Disability is presented in an overtly negative context**

We noticed that disability is often included as a list of negative characteristics, or alongside factors such as addiction or family violence. As noted above, disability can be a protective factor, whereas family violence and addiction are not. The documentation seems to be particularly negative toward parents with intellectual disability.

### **4. There is no indication of consultation or co-design with the disability community**

The disability specific resources for parents with disability bare no indication they have been co-designed or even developed in consultation with the disability community. Lack of co-design can lead to the inadvertent embedding of unconscious bias, prejudices, stigma and discrimination in the context of a broader culture of ableism.

## Review of specific policies

### Working with a parent who has disability<sup>2</sup>

In the 'Identify a parent's disability' section, this document states:

Some of the parents you work with have a clear disability diagnosis with existing supports in place. Their disability may be visible, or **invisible**, but nonetheless it has been verified. Some other parents you work with, however, may have a suspected disability however this not been explored with the parent or has not been confirmed. If this is the case, always address the suspected disability with the parent for a variety of reasons. A parent's disability may:

- affect the way they receive or understand important information when talking with them about the safety and wellbeing of their child.
- exacerbate other child protection concerns, for example, a physical disability could be contributing to neglect. Adequate supports for the parent's disability could address or reduce the severity of the presenting child protection issues.
- be mistaken for other concerns. For example, a neurological or intellectual disability may be mistaken for a parent being affected by drugs or alcohol, or a parent with physical limitations may be mistaken for not understanding their infant's needs if they are not playing with them on the floor.
- make them appear unwilling to engage with you or attend important meetings, when they actually may be physically unable to access particular locations or do not comprehend what is being asked of them.

---

<sup>2</sup> Queensland Government. (2022, March 22). *Identify a parent's disability | Child Safety Practice Manual*. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/practice-kits/disability/working-with-a-parent-who-has-a-disability/seeing-and-understanding/identify-a-parent-s-disability>

The presence of disability is not always relevant to a parent and stating that a suspected disability must always be addressed with the parent may open the door for unconscious bias or perceived bias. The statement that this must always be addressed “for a variety of reasons” is vague and should have further context. If the reason is so the worker can understand that characteristics of disability may otherwise cause discrimination in the assessment process, be clearer about this.

### **Disability and impact on functioning<sup>3</sup>**

This document in the Child Safety Practice Manual has a misleading title, as disability will not always impact on functioning.

The practice prompt for this model states:

Knowing a child or parent’s diagnosis is important, and understanding the way their disability impacts their functioning is critical to ensure appropriate supports are implemented to improve child and parent wellbeing and family functioning.

A parent’s diagnosis may not be relevant, so knowing this is not always important. The practice prompt seems to contradict the Bio-Psycho-Social Model of Functioning, Disability and Health referred to in the policy by presuming that disability impacts functioning, which is not always the case. This practice prompt implies the worker must ensure appropriate supports are implemented to improve functioning, rather than investigating whether appropriate supports are needed and/or already in place.

---

<sup>3</sup> Queensland Government. (2022a, March 22). *Disability and impact on functioning | Child Safety Practice Manual*. Cspm.csyw.qld.gov.au. [https://cspm.csyw.qld.gov.au/practice-kits/disability/overview-of-disability/disability-and-impact-on-functioning#International\\_Classification\\_of\\_Functioning\\_Framework](https://cspm.csyw.qld.gov.au/practice-kits/disability/overview-of-disability/disability-and-impact-on-functioning#International_Classification_of_Functioning_Framework)



### **Practice Guide: Assess harm and risk of harm<sup>4</sup>**

The DRC report mentioned above recognised that child protection policies fail to recognise a parent’s individual strengths and needs. It is also a concern where a document only mentions disability in a negative context or alongside risk factors such as family violence or drug use. This, combined with unconscious bias and ableist attitudes more broadly in society, can lead to stigma and discrimination.

This document contains no mention of a parent’s disability in its main body, aside from referencing a [Swedish study](#) identifying high risk of mental illness, injuries and violence in children born to intellectually disabled mothers.

Attachment 2 of this Practice Guide is an information gathering template to this practice guide. This information template provides:

Information about whether a parents’ ability to protect a child is impacted by an intellectual or physical disability, a health issue, or coercive control (where a parent is the victim of domestic and family violence).

Disability is not noted as a risk factor in ‘Attachment 1: Table of risk and protective factors’, but is listed beside other risk factors, such as coercive control in ‘Attachment 2: Information gathering template’ without explanation. This can lead to the incorrect presumption that disability is a risk factor.

There is also no guidance about the supports, devices or adjustments a parent might have in place to mitigate any impact of disability.

---

<sup>4</sup> Queensland Government. (2022c). *PRACTICE GUIDE Assess harm and risk of harm*.

<https://cspm.csyw.qld.gov.au/getattachment/83684e74-c0f7-4ba7-aca8-d9988a9b423b/PG-Assess-harm-risk-of-harm-Aug22.pdf>

## **Types of disability<sup>5</sup>**

This document lists six types of disability with 42 negative characteristics under the heading ‘Signs to look for’. There is no mention of appropriate supports or adjustments that are to be considered alongside these negative characteristics. There is also no guidance provided that this document is to be used in the context of a parent’s disability rather than to identify and support a child’s disability.

## **Disability facts<sup>6</sup>**

The facts listed are about quantity and deficits of people with disability, such as:

An estimated 261,300 Queenslanders of all ages have a profound or severe disability. People with a profound or severe disability require assistance in everyday activities, including core activities such as self-care, mobility and communication (Australian Bureau of Statistics, 2018).

There is a paragraph about myths which fails to identify any myths relevant to parents with disability and it contains a link to a school resource that does not appear to be relevant to parenting or child protection.

This would be a key opportunity to talk about disability as a protective factor and disability pride.

---

<sup>5</sup> Queensland Government (2022). *Types of disabilities | Child Safety Practice Manual*. [cspm.csyw.qld.gov.au](https://cspm.csyw.qld.gov.au/practice-kits/disability/overview-of-disability/types-of-disabilities). Available at: <https://cspm.csyw.qld.gov.au/practice-kits/disability/overview-of-disability/types-of-disabilities>.

<sup>6</sup> Queensland Government. (2019, November 19). *Disability facts | Child Safety Practice Manual*. [Cspm.csyw.qld.gov.au](https://cspm.csyw.qld.gov.au/practice-kits/disability/overview-of-disability/disability-facts). <https://cspm.csyw.qld.gov.au/practice-kits/disability/overview-of-disability/disability-facts>

## Receive information from a notifier<sup>7</sup>

When discussing how to determine whether there is a reasonable suspicion that a child does not have a parent able and willing to protect them, this document states:

Are the parents willing, but not able, to protect the child because of complicating factors, such as

- addiction
- mental health concerns
- disability
- fear of the alleged person responsible
- parent/adolescent conflict
- an existing parenting order under the [Family Law Act 1975](#). (Refer to Procedure 7 [Consider the implications of an existing parenting order.](#))

In this document, disability is presented in a negative context alongside addiction, fear and conflict. There is no mention of the relevance or impact of the disability or requirement to consider supports that are in place to mitigate any possible functional impact. There is also no distinction between disability which has the potential to have a protective element and these other harmful matters.

---

<sup>7</sup> Queensland Government. (2019a, August 20). *Receive information from a notifier* | *Child Safety Practice Manual*. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/procedures/receive-and-respond-at-intake/receive-information-from-a-notifier>

## Intervention with parental agreement<sup>8</sup>

This document states:

Intervention with parental agreement is not appropriate when one or more of the following apply:

- If the parents withdraw their agreement to the intervention, the child will be at immediate risk.
- There are serious risk factors linked with the parents' ability to consent, such as current alcohol or substance misuse or intellectual disability.
- There are serious risk factors linked with the parents' ability to carry out safety planning or meet case plan goals, for example:
  - the parents are highly mobile
  - the parents are unwilling to work with Child Safety or a family support service
  - a parent is the victim of coercive control or violence by another parent.
- The parents not meeting case plan goals would place a child at unacceptable risk of harm.

In this document, disability is again presented in a negative context alongside alcohol and substance misuse. There is no mention of the relevance or impact of the disability or requirement to consider supports that are in place.

---

<sup>8</sup> Queensland Government. (2023, November 27). *Intervention with parental agreement* | *Child Safety Practice Manual*. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/procedures/support-a-child-at-home/intervention-with-parental-agreement>

### **A parent's disability: Risk and vulnerability factors<sup>9</sup>**

This document contains one rare instance of inclusive messaging.

Two sentences at the start state:

A parent's disability does not preclude them from being able to parent, and many parents who have diagnosed disabilities successfully raise their children with no intervention or assistance from Child Safety. Parents are the experts of their children and their lives and are best placed to provide information to inform your risk assessment.

Unfortunately, the rest of the document is in contrast to these sentences, emphasising deficits and problems.

This document also states:

There are some factors that may increase the risk of harm to a child depending on the type or severity of a parent's disability. In these circumstances, we need to respectfully engage with the parent to understand the impact that their disability has on their functioning, including their parental capacity.

This statement is not correct and is misleading. It should be amended to talk about supports, such as by saying "There are some factors that, without adequate supports in place, may increase the risk of harm...".

---

<sup>9</sup> Queensland Government. (2021, July 2). *A parent's disability: Risk and vulnerability factors* | Child Safety Practice Manual. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/practice-kits/disability/risk-assessment/a-parent-s-disability-risk-and-vulnerability-facto>

### **Parent Mental Illness**

Parental mental illness can at times impact upon a parent's ability to meet the safety, wellbeing and belonging needs of their child. This will depend on a variety of factors, such as severity and duration of symptoms and interactions with other factors. Factors such as housing instability, economic insecurity and relationships with support networks can sometimes be complicated by a mental illness.

Some examples of how mental illness may impact on a child includes:

- A parent having disorganised or delusional thoughts, causing their child to live in a state of ongoing fear or hypervigilance resulting in emotional harm.
- A parent harming themselves or other people, resulting in significant emotional distress or physical harm to their child.
- A parent being out of touch with reality, resulting in their child being physically or emotionally harmed from failure to be fed, bathed, clothed or supervised adequately.<sup>10</sup>

This statement does not acknowledge that mental illness can be managed with medication and treatment so that it does not impact on a person's ability to parent. It does not recognise that a parent who has mental illness may bring other strengths to parenting, such as a deeper awareness of treatment, interventions and supports they have developed in their own life or a greater knowledge of resources.

---

<sup>10</sup> Queensland Government. (2021, July 2). *A parent's disability: Risk and vulnerability factors* | *Child Safety Practice Manual*. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/practice-kits/disability/risk-assessment/a-parent-s-disability-risk-and-vulnerability-facto>

### **Intellectual Disability**

The extent of a parent's intellectual disability and the impact this disability has on their functioning will influence the level of harm or risk of harm to their child.

**Attention:** "Learning disability is not correlated with the deliberate abuse of children" (Cleaver, Unell and Aldgate, 2011).

With appropriate support and education relevant to their needs and the needs of their child, many parents with intellectual disabilities safely and successfully parent their child. When considering risk associated with parents who have an intellectual disability, their child may be at risk of harm due to:

- A parent not understanding the full extent of their child's needs, for example, a mother may know that her newborn baby needs to be fed, but may not understand the frequency of feeding required resulting in malnourishment.
- A parent not being able to meet their own care needs due to the severity of their impairment, thus being unable to meet the needs of a child who is reliant on them.
- A parent being more susceptible to manipulation or coercion resulting in their child being harmed by another person.<sup>11</sup>

This statement is incorrect in its categorical statement the disability **will** influence harm. The quote provided leads to the assumption that there will be abuse, but not deliberate. It would be preferable to mandate consideration of supports that are in place and to make

---

<sup>11</sup> Queensland Government. (2021, July 2). *A parent's disability: Risk and vulnerability factors* | Child Safety Practice Manual. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/practice-kits/disability/risk-assessment/a-parent-s-disability-risk-and-vulnerability-facto>

amendments that affirm that intellectual disability may not influence the level of harm. We recommend that messaging about parents safely parenting with education and support should be placed foremost.

The three negative dot points should also be placed alongside suggested supports to mitigate harm. For example, the first point could talk about the need for a feeding schedule with reminders on the phone and the second one could talk about NDIS or family supports.

### **Physical Disability**

The extent of a parent's disability and the impact this disability has on their functioning will influence the level of harm or risk of harm to their child, however having a physical disability does not correlate with intentional harm to a child.

A parent's physical disability may impact them to an extent that they are unable to complete all parenting tasks, however they may have assistance from a spouse or other safety and support network members to ensure the safety, belonging and wellbeing needs of their child are met.

The child of a parent with physical disability may be at risk of harm if their parent lacks access to appropriate supports to enable them to complete necessary parenting tasks that their disability prevents them from doing. This is particularly true for younger children who are completely reliant on their caregiver. For example:

- A parent may be unable to intervene or stop their young child from hurting themselves if the child turns on hot water or a stove resulting in the child being physically injured.



- A parent may have issues with fatigue or seizures, resulting in their child being unsupervised.
- A parent may be physically unable to wash their child or change their child's nappies resulting in severe nappy rash or other physical health concerns.

The impact a parent's physical disability has on their child can be mitigated with the presence of supports who can assist the parent and child to complete tasks. The impact is also mitigated for older children who do not require physical care from their parent or caregiver.<sup>12</sup>

Again, this first statement is incorrect in its categorical statement that disability **will** influence harm. We also recommend removing the word 'intentional' from the first sentence.

Disability simply does not correlate to harm.

The remainder of the physical disability section acknowledges that supports can mitigate the risks. Further explanation of mitigation of risk in relation to the three dot points should be included so that the description of supports is just as detailed and colourful as the description of risk. It is not clear why in this document supports are recognised for physical disability to a greater extent than for mental health or intellectual disability.

## Conclusion

Many of the documents reviewed here emphasise disability as a risk factor to be considered.

The main policy on working with parents with disability emphasises difference and identification, promoting underlying assumptions that disability is always a relevant factor to

---

<sup>12</sup> Queensland Government. (2021, July 2). *A parent's disability: Risk and vulnerability factors* | Child Safety Practice Manual. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/practice-kits/disability/risk-assessment/a-parent-s-disability-risk-and-vulnerability-facto>

be considered. Difference is shown in prominent statements such as “Disabled parenting experiences are shaped by the intrinsic differences between different impairments...”<sup>13</sup>. It is clear from this brief review that Queensland’s Child Safety documentation needs urgent reform.

The Disability Royal Commission’s research report mentioned at the beginning of this review makes similar recommendations. Specifically, the need for reform of child protection risk assessment tools, processes, and policy<sup>14</sup>. These recommendations also state that child protection departments “must work with representative disability and children’s advocacy organisations, including First Nations and culturally and linguistically diverse organisations”<sup>15</sup>.

QAI calls on the Queensland Government to comprehensively update its Child Safety documentation through a co-design process. Reform of systems and processes are needed to ensure parents with disability only come in contact with child protection systems when truly required. QAI also strongly encourages the Queensland Government and Department of Child Safety specifically to consider the Disability Royal Commission report mentioned above and devise an action plan to fully implement its recommendations.

---

<sup>13</sup> Queensland Government. (2022, March 22). *Identify a parent’s disability | Child Safety Practice Manual*. Cspm.csyw.qld.gov.au. <https://cspm.csyw.qld.gov.au/practice-kits/disability/working-with-a-parent-who-has-a-disability/seeing-and-understanding/identify-a-parent-s-disability>

<sup>14</sup> Recommendations 6 and 8

<sup>15</sup> Law, U. (2023). *Research Report Parents with disability and their experiences of child protection systems*. <https://disability.royalcommission.gov.au/system/files/2023-07/Research%20Report%20-%20Parents%20with%20disability%20and%20their%20experiences%20of%20child%20protection%20systems.pdf>

## QAI's recommendations

The Queensland Government undertake a co-design or consultation process to update and reform their Child Safety documentation. These reforms should:

1. Remove all discriminatory and negative framing of parents with disability
2. Repeat positive messaging each time disability is addressed, in order to overcome unconscious and conscious bias.
3. Update all documentation to ensure clear and repeated guidance is given in relation to disability, ensuring this guidance explicitly states:
  - Disability can be a protective factor;
  - A parent's disability is not a risk factor;
  - Supports for some parents with disability can negate any perceived negative impacts on parenting in the context of the disability;
  - Some parents with disability do not need supports in place because their disability has no impact on their parenting;
  - Identification and assessments of disability should only be undertaken in relevant circumstances; and
  - When considering a parent with disability, parenting should only be considered with supports, devices and other disability related adjustments in place. An assessment should never be conducted of the parent without their supports.
4. Child protection policy, guidance and documentation should incorporate a longer exploration of ableism, similar to the exploration of racism in 'Disability in Aboriginal and Torres Strait Islander cultures'<sup>16</sup>.

---

<sup>16</sup> Queensland Government (2019). *Disability in Aboriginal and Torres Strait Islander cultures | Child Safety Practice Manual*. [cspm.csyw.qld.gov.au. https://cspm.csyw.qld.gov.au/practice-kits/disability/working-with-aboriginal-and-torres-strait-islander/seeing-and-understanding/disability-in-aboriginal-and-torres-strait-islande](https://cspm.csyw.qld.gov.au/practice-kits/disability/working-with-aboriginal-and-torres-strait-islander/seeing-and-understanding/disability-in-aboriginal-and-torres-strait-islande).