

## Case studies reveal State fails to protect children adequately Long waiting lists for childcare 'dangerous'



**ANALYSIS:** Internal HSE reports show Ireland's system for looking after children at risk of abuse is simply not working, writes **CARL O'BRIEN**

NEVER AGAIN. It was a sentiment widely expressed following the Ryan report into the abuse of children placed in the care of religious orders by the State. Taoiseach Brian Cowen said the report was an indictment of those who perpetrated abuse, while the State and religious congregations admitted that they had failed in their duty of care.

Yet, it is clear the State is continuing to fail children at risk by not providing a system that provides them with sufficient care or protection.

Social services in many areas are not able to respond adequately to hundreds of cases of children at risk of abuse or neglect due to staff shortages and the under-resourcing of social work teams.

In general, child protection teams reported that most admissions to care are being made on an emergency basis rather than being planned, in contravention of the official policy.

Furthermore, family support, a system of providing care to children and families in crisis to prevent problems escalating into emergencies, is patchy and, in some cases, nonexistent.

The result is a compromised service which is affecting the quality of support available to vulnerable children and their families, and which flies in the face of official policy which states that children should be admitted to care as a measure of last resort.

We know this from the details of internal reports by childcare managers across the State into the adequacy of child and family services. These reports – not intended for publication – were used to compile a heavily-edited annual report on the state of social services in 2007.

Take Roscommon, which is currently at the centre of a major inquiry into the handling of a child abuse case. The local childcare manager reported: "There is ongoing concern that the threshold for accessing the service is getting higher and, therefore, the risk of ongoing abuse and neglect is becoming greater.

“Cases initially referred to as lower priority tend to become higher priority over time due, in the main, to the lack of early, appropriate interventions.”

In Laois/Offaly, the childcare manager reported that long waiting lists of suspected cases of abuse or neglect were “dangerous”. The manager added: “I cannot say that our child protection system is adequate . . . While it is clear to me that there are many committed and dedicated staff within the child protection system, I am concerned due to waiting lists and the lack of development of family support services.”

It would be encouraging if family support services – regularly talked about as the future model of child protection – were being rolled out across the State. The truth is, they’re not. While there are encouraging developments in some areas, there is a uniform pattern of such services being isolated and underfunded.

In Clare, Limerick and North Tipperary, managers have warned that current resources only allow them to deliver the most limited range of such services. In other areas, services are so thin on the ground as to be meaningless.

Yet, family support is not a new concept. The department’s own strategy on family support, published a few years ago, pledges to promote and protect the health, wellbeing and rights of all children, young people and their families in their own homes and communities. There’s little sign on the ground that this is happening to a meaningful degree.

Other gaps relate to the way child protection concerns are reported. *Children First* was published in the late 1990s as a uniform set of guidelines for reporting child abuse.

Yet, even a cursory glance at local services shows that the guidelines aren’t being followed or implemented properly. This is an extraordinary situation, 10 years after the guidelines were introduced.

The Government says it is tackling these issues through pledges such as the recruitment of additional social workers, putting *Children First* on a statutory basis, limiting caseloads for young social workers.

These are sensible – and overdue – steps. But it is questionable whether relatively modest amounts of funding, in addition to reforms and cost savings within the Health Service Executive can resolve these issues in the space of a few years. More fundamental reforms, such as establishing a separate agency to run child protection, with its own budgets, need to be examined. The system is broken and it needs to be fixed sooner rather than later.