



## SUBMISSION TO SENATE INQUIRY INTO MENTAL HEALTH SERVICES IN AUSTRALIA

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### INTRODUCTION

The National Research Centre for the Prevention of Child Abuse (NRCPCA) is a Monash University-based Centre whose mission is to understand and prevent child abuse. The Centre represents a unique collaboration with the Australian Childhood Foundation, a national child welfare organisation.

The Centre undertakes research that is of national and international significance and publishes in national and international academic journals as well as the media. The child centred research undertaken at the Centre leads the world in creating an opportunity for children and young people to contribute to policy and practice.

The aims of the NRCPCA are to:

- To prevent and reduce the incidence of child abuse and the harm it causes;
- To produce research relevant to Australian children, upon which clinical, preventative and education programs may be based; and,
- To inform policy and practice in all areas that affect children who have been abused or neglected, or who are at risk of abuse and neglect

***The Centre recommends that the organisation commissioned to produce the report on mental health services in Australia give due consideration to the following:***

- The strong links between childhood abuse and mental health problems in adulthood;
- Ensuring that children are regarded separately and should form an integral part of this inquiry. Children should not be regarded as additions to adult mental health services nor subordinate to the needs of adults;
- Children's vulnerability to abuse and their high risk to developing mental health problems in the absence of timely and appropriate mental health services should form a significant part of the inquiry;
- Children and young people should be provided with a voice on this issue and their views incorporated into programs and services;
- Developing relevant therapeutic services for children as primary prevention of adult mental health problems; and,
- Providing adequate and necessary funding to meet the mental health needs of children who have been abused.

The Centre has based these recommendations on the following.

## **THE LINK BETWEEN CHILD ABUSE AND MENTAL HEALTH**

Child abuse is a major risk factor for the development of mental health problems in childhood, adolescence and adulthood (Rutter, 2000; Putnam, 1998).

Numerous studies show that child abuse has major harmful short and long term effects on mental and physical health, cognitive ability, educational achievement and social and behavioural development (Thornberry, Ireland & Smith, 2001; Chalk, Gibbons, Scarupa, 2002; Mabanglo, 2002). In particular, the last two decades of neurobiological research has linked the trauma of abuse to the impact on brain development.

A plethora of research demonstrates strong links between childhood abuse and its impact on adult mental health (see Chartier, Walker & Naimark (2007; Lang, Rodgers & Lebeck, 2005). Recently, Massie & Szajnberg (2006) concluded a 30 year study which reported a significant link between maltreatment in childhood and psychiatric illness in adulthood (depressions and anxiety disorders), poorly developed psychological defence mechanisms and an emergence of personality disorders. Other studies document the significant risk of developing major depressive disorders (MDD) in children who experienced physical and sexual abuse and neglect (Widom, DuMont,& Czaja, 2007).

In light of the recent research, it seems clear that any inquiry into mental health issues must take into account the downstream effects of child abuse.

## **RESOURCING MENTAL HEALTH SERVICES FOR CHILDREN WHO HAVE BEEN ABUSED**

The number of reports of child abuse has more than doubled in a period of 5 years, from 115, 471 in 2000/2001 to 266,745 in 2005/2006. The number of substantiated reports has also more than doubled in this period, from 27,367 in 2000/2001 to 55,921 in 2005/2006. (AIHW, 2007). In spite of this increase, there remains an enormous gap in resources that promote the healing of children suffering from the short and long term effects of abuse. These include:

- Specialised therapeutic services for child victims of abuse and violence,
- Emergency therapeutic places of care for children in risk situations;
- Therapeutic care options for children and young people at severe risk of self harm or harm to others;
- Availability of appropriate mental health services to assess the emotional, physical and therapeutic needs of children who have experienced abuse and violence.

## **CHILDREN'S EXPERIENCES OF THE IMPACT OF CHILD ABUSE AND VIOLENCE: 'It just creeps into every part of your life' (18 year old female)**

At the NRCPCA, listening to the voices of children is a vital part of child abuse research. The following quotations are from children who participated in various research studies undertaken by the NRCPCA. The quotes describe a range of behaviours in which the children engaged after being subjected to abuse by adults responsible for their care and protection. These reflections and comments draw attention to children's outward expressions of the physical and emotional trauma that they suffered. If left unattended, this trauma and its expression may be the beginning of a life trajectory into adult mental health problems

## **Long term effects of abuse and violence**

Many children anticipate that the impact of the abuse may remain with them for the rest of their lives

*You can't forget something like that. I'll still be dealing with things later down the track. It's always going to be in the back of your mind. I don't think it will ever go away (18 year old female)*

*Think about it...(hitting children), you can see a bruise but you can't see how it mentally affects someone and they'll carry that right through their childhood, right through their adulthood.' (12yrs)*

*Probably, I think it will be there really the rest of my life, ...like, I don't really like remember the stuff but ... if someone says something I know, then I think about what happened... (12 year old male)*

*[Smacking children] shouldn't be done...it just...hurts people...physically and mentally...Just because [children] made a mistake and they did something wrong they're gonna get punished in like an extreme way (/12yrs)*

## **ADULT EXPERIENCES OF CHILDHOOD ABUSE**

One study undertaken at the NRCPCA explored the relationship between poverty, childhood adversity and child abuse from the perspective of adulthood. Many adults interviewed were affected by mental health problems and were on prescribed medication. A significant number of them were subject to violence and abuse as children

*I copped it since I was a little baby. I can't remember much as a baby, but I know I did. Once he damn near killed me. I like screwed his smokes up and that. I was just a little baby crawling around and that and he started throwing me around the room ... he just gets violent all the time ... he's kicked my old lady in the guts when she was pregnant ... he'd just go off his head for no reason. (Neville)*

*I can't ever remember her saying, 'I love you'. It doesn't upset me any more. I accept it now, but it has taken a long time. There is no relationship with my mother now. (Anna)*

## **CONCLUSION**

Research undertaken at this Centre as well as other research demonstrates the link between early experiences of child abuse, violence and mental health problems during childhood, adolescence and adulthood. The voices of children and adults also confirm the pathway from abuse to long term mental health problems.

Funding for mental health services in Australia is a major issue. According to SANE Mental Health Report (2004), Australia allocates under 8 per cent of its annual budget to mental health. This is significantly less than comparable OECD (Organisation for Economic Co-operation and Development) countries where the proportion is 12 per cent or more. This shortfall in funding places considerable limits on the capacity of services to meet mental health needs in the community.

The developmental and structural vulnerability of children makes them particularly susceptible to abuse and violence (De Bortoli, 2007; Mudaly, 2006). It is therefore incumbent on the Inquiry to give due recognition to child abuse. And to ensure that any prevention and reduction of later mental health problems must direct resources and programs that target children who are victims of abuse and violence.

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#### **References**

Australian Institute of Health & Welfare. (2007). Child protection Australia 2005- 2006. Child welfare series. Number 40. Union Offset. Canberra.

Chalk R, Gibbons A, Scarupa H. 2002. The multiple dimensions of child abuse and neglect: new insights into an old problem. *Child Trends: Research Brief*, <http://www.childtrends.org/PDF/ChildAbusRB.pdf> [20/1/2003]

Chartier, M. J., Walker, J. R., & Naimark, B. (2007). Childhood abuse, Adult health and health care utilisation: Results from a representative community sample. *American Journal of Epidemiology*. 165(9): 1031-1038.

De Bortoli, L (2007) Towards effective child abuse prevention: Strengthening the public health approach. Unpublished Masters Thesis, Monash University, Melbourne.

Frederick J. (2004) *"The help I need is more than the help they can give me": a study of the life circumstances of emergency relief clients*. (Unpublished PhD Thesis, Monash University, Melbourne).

Frederick J. & Goddard C. (in press). Exploring the relationship between poverty and childhood adversity and abuse from the perspective of adulthood. *Child Abuse Review*.

Lang, A.J., Rodgers, C.S. & Lebeck, M.M. (2006). Associations between maternal childhood maltreatment and psychopathology and aggression during pregnancy and postpartum. *Child Abuse & Neglect*. 30: 17-25

Mabanglo M. 2002. Trauma and the effects of violence exposure and abuse on children: a review of the literature. *Smith College Studies in Social Work* 72: 231-251.

Mudaly, N. & Goddard, C. (2006). The truth is longer than a lie: Children's experiences of abuse and professional interventions. Jessica Kingsley Publishers. London.

Putnam, F. (1998) 'Trauma Models of the Effects of Childhood Maltreatment'. In: Rossman, B. and Rosenberg, M. (Eds.) Multiple Victimization of Children: Conceptual, Developmental, Research and Treatment Issues, New York: The Haworth Press.

Rutter, M. (1987) 'Psychosocial Resilience and Protective Mechanisms', *American Journal of Orthopsychiatry*, 57, 316-331. In: Davies, D. (1999) Child Development: A Practitioner's Guide, New York: Guildford Press.

SANE Mental Health Report (2004), 'Dare to Care!',  
[http://www.sane.org/images/assets/Research\\_reports\\_and\\_images/MHR2004text.pdf](http://www.sane.org/images/assets/Research_reports_and_images/MHR2004text.pdf) (23/1/2005)

Saunders, B.J. (2005) 'Because there's a better way than hurting someone': The nature, effects and persistence of physical punishment in childhood', Unpublished PhD thesis, Monash University.

Thornberry T, Ireland T, Smith C. 2001. The importance of timing: the varying impact of childhood and adolescent maltreatment on multiple problem outcomes. *Development and Psychopathology* 13: 957-979.

Widom, C.S., DuMont, K. & Czaja, S. (2007). A prospective investigation of major depressive disorder and comorbidity in abused and neglected children grown up. *Arch General Psychiatry*. 64: 49-56.