

Reflections on ethical use of PRM at the frontline

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Child Maltreatment in New Zealand

2013 compared with 2012:

- More notifications requiring further action
- More substantiated findings of abuse
- More distinct children and young people with substantiated abuse findings

Ethical Review: Conclusions

‘Application of predictive risk modelling to child maltreatment does raise significant ethical concerns’

....‘Concerns may plausibly be regarded as outweighed by the very considerable potential benefits’

Ethical Review: Recommendations

- Information disseminated narrowly
- Interaction with 'high-risk' families does not look 'different'
- Engage with media to promote understanding of child maltreatment and PRM
- Expand PRM databases
- Intervention is not intrusive
- Maintain current early identification referral processes
- Mitigate consequences of mistaken 'high-risk' identification
- ***Supportive*** intervention; training emphasises that many 'high decile' families will ***not*** abuse their children
- ***Offer intensive preventive intervention to families in the two highest risk deciles, engagement voluntary***

Māori Ethical Review: Conclusions

Emphasises poverty / child maltreatment link

Notes that Māori are more likely to live in poverty - questions PRM's potential to ameliorate poverty and other social ills

‘Since Māori are disproportionately represented...one might argue that [PRM], which helps target resources, is beneficial to Māori. Universalism can advantage low risk populations at the expense of high need groups.

However, this presupposes that there exists a targeted response service that will be *effective* for Māori high risk populations’

Māori ethical review: Recommendations

- Consultation on benefits and risks of PRM - especially mitigation of potential hyper-vigilance and stigmatisation
- Gap-analysis of the needs of vulnerable Māori families. Services must be perceived as ***providing useful support*** to meet a wide range of actual needs while facilitating aspirations
- Increase Māori workforce so service providers have skills to engage people who are ***wary*** of service providers / ***fear*** that professionals will disapprove of their way of life or intervene in distressing or unhelpful ways

Towards implementation

Services are accessible

‘The vast majority of parents know when help is needed, but too often cannot get access to it’

(Taylor et al., 2008, p. 1194)

Towards implementation

Services are perceived as useful

‘Services may be offering activities which are inappropriate to meet the needs of the families who currently need help ...In such cases, services need to listen to families to discover their needs’

(Boag-Munroe & Evangelou, p.217)

Towards implementation

Services ameliorate the environment

‘Predictive tests...are based on the assumption that available interventions are capable of changing individuals, without any fundamental changes in societal attitudes and actions towards children, or in the material circumstances associated with high risks of harm of many kinds’

(Taylor et al, 2008, p. 1197)

Towards implementation

Services do no harm

‘What might be the consequence for a family where there was violence or threat of violence from father to the mother on learning that they had a high score, or where the mother was finding it difficult to cope with child care demands? Will support always be able to help with additional burdens knowledge may bring?’

(Daro & Dodge, 2009, p.7)

Some alternatives

PRM could be used to:

- Identify families who need help to reconnect to networks (Māori Ethical Review)
- Target particular communities (Māori Ethical Review)
- Interrogate likely needs in a particular area
- Introduce extra help to high-risk families via universal service provision ('proportionate universalism' or 'cascading service provision')

References

Boag-Munroe, G. & Evangelou, M. (2012). From hard to reach to how to reach: A systematic review of the literature on hard-to-reach families. *Research Papers in Education*, 27(2), 209-239.

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Taylor, J., Baldwin, N. & Spencer, N. (2008). Predicting child abuse and neglect: ethical, theoretical and methodological challenges. *Journal of Clinical Nursing*, 17, 1193-1200.