

Introduction

The following questions are designed to pursue transparency through data in the child protection system. They are focused on people aged under 18 who allege sexual abuse by a parent.

1. What percentage of allegations of child sexual abuse were deemed unfounded per annum since 2014?

More than 14 parliamentary questions (see Appendix A) and two FOI requests have been submitted since 2018 pursuing this percentage. Tusla repeatedly says they “do not collate” that percentage. In parliamentary question “6984/20” (see Appendix B), Tusla indicated that *“Each local social work area has a system in place to manage the throughput of notifications of suspected child abuse on the individual case files.”* This suggests that they have the data.

In a number of responses to parliamentary questions about the % allegations of child sexual abuse deemed unfounded each year, Tusla indicated that “a paper is being developed in respect of data collection to enhance reporting, assurance and governance”. The same assertion was made by the Minister for Children in communications included in Appendix E.

As a matter of urgency, will Tusla collate % allegations of child sexual abuse deemed unfounded please?

Why this is important: It will show what outcomes people who allege child sexual abuse can expect.

2. Of the child sexual abuse referrals received each year since 2014, what percentage of allegations are from people aged under 18 at the time they made the allegation? What % are from people under 18 who are accusing their parent of CSA?

In 2019, Tusla received 56,561 referrals in total. Of these 31,134 were child welfare referrals and 25,427 abuse/neglect referrals (ref. appendix E). The abuse/neglect referrals are broken down as follows: 6,488 physical abuse, 10,722 emotional abuse, 3,909 sexual abuse, 4,308 neglect. A breakdown of what percentage of people making the allegations by age and by family profile would give clarity to what is happening to children who allege sexual abuse in their own families.

Why this is important? Current data doesn’t separate when an allegation is made by a child or by an adult. Where a child is alleging sexual abuse, there are implications for safety of the child as well as for custody and family law matters.

3. If a child has made an allegation of sexual abuse and it is deemed unfounded, and that child makes another allegation at a later date, is a new file opened for that child?

We are hearing anecdotal evidence that only one file per family is ever opened. Can Tusla please confirm that child sexual abuse is dealt with on an allegation by allegation basis please?

Why this is important? Clarify that if a child has one allegation deemed unfounded, they can be heard if they make another allegation.

4. What number and percentage of parents who relay their child's allegation of sexual abuse by their other parent, are subsequently subject to psychiatric assessments?

This article by [Kitty Holland in the Irish Times](#) refers to Tusla recommending parents who have relayed their children's allegations of child sexual abuse being subjected to psychiatric assessments. Within a family where a child has alleged sexual abuse, what % of both parents are referred for psychiatric assessment?

Why this is important: It would allow parents to consider the likelihood that they would be subjected to psychiatric assessment for alleging sexual abuse on behalf of their child.

5. What number and percentage of parents who relay their child's allegation of sexual abuse by their other parent, subsequently lose custody of their child(ren)?

This article by [Kitty Holland in the Irish Times](#) refers to Tusla recommending parents who have relayed their children's allegations of child sexual abuse having their children moved from their custody into the custody of the parent against whom the child made the allegation.

Why this is important: It would allow parents to consider the likelihood that they would lose custody of their children for alleging sexual abuse on behalf of their child.

6. Tusla is responsible for investigating allegations of child sexual abuse. What % of Tusla staff who conduct these investigations are trained in investigating child sexual abuse and/or coercive control?

Why this is important: It would be useful to know that all staff conducting investigations of child sexual abuse are trained in doing so and/or in identifying patterns of coercive control.

7. Of the 3,909 sexual abuse allegations made in 2019, what number and percentage of those who were aged less than 18 when they made an allegation against a family member, resulted in a criminal court case?

We believe there is almost no criminal justice system through which a child can bring an allegation of sexual abuse in their own family. Are we correct?

Why this is important: This data would clarify what outcome a child can expect when they allege sexual abuse in their own family.

8. Can Tusla provide national data similar to the data provided by St. Clare's in Temple Street that show the number and % per outcome category please?

Parliamentary question number 39561/20 (see Appendix C) was answered by St. Clare's Unit in Temple Street, an independent agency that provides assessment and therapy to children and families where sexual abuse is a concern. They indicated that between 2016 and 2020 between 29.5 and 43.3% of the allegations that were referred to them were found to be credible.

In parliamentary question number 39560/20 (see Appendix D) Tusla indicate that cases are referred to St. Clare's Unit where "a social worker has reasonable grounds to suspect that a child may have been sexually abused."

What n and % of "credible account", "not credible account", "assessment did not conclude", "Concerning", "Assessment did not proceed", "No information provided" does Tusla consider acceptable?

Why this is important: It will provide a national picture that shows what outcomes people who allege child sexual abuse can expect.

Appendix A: Link to Parliamentary Questions

URL

<https://www.kildarestreet.com/wrans/?id=2020-12-01a.1407&s=Cian+O%27Callaghan+sexual+abuse#g1408.q>
<https://www.kildarestreet.com/wrans/?id=2020-10-13a.1354&s=Cian+O%27Callaghan+sexual+abuse#g1355.q>
<https://www.kildarestreet.com/wrans/?id=2020-07-14a.2431&s=unfounded#g2432.q>
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<https://www.kildarestreet.com/wrans/?id=2018-11-14a.538#g540.r>
<https://www.kildarestreet.com/wrans/?id=2018-11-06a.2445&s=Clare+Daly+and+unfounded#g2446.q>
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<https://www.kildarestreet.com/wrans/?id=2018-09-25a.1058&s=founded+unfounded#g1064.r>

Appendix B: Parliamentary Question About Data Collection



[REDACTED]

May 25th 2020

Cian O'Callaghan TD
Dáil Eireann
Kildare Street
Dublin 2

To ask the Minister for Children and Youth Affairs the reason Tusla does not have a record of the number of child sex abuse cases that were referred to An Garda Síochána for 2016 to 2019; the reason Tusla does not have a record of the outcome of the cases; and if she will make a statement on the matter. 6984 20

Dear Deputy,

Child Abuse Notifications to An Garda Síochána are an integral component of the local operational management of social work cases therefore this data is not collated nationally. Each local social work area has a system in place to manage the throughput of notifications of suspected child abuse on the individual case files.

These cases and outcomes may also be the subject of Tusla/ An Garda Síochána joint case liaison meetings as outlined in the Joint Protocol for Tusla/ Garda Síochána Liaison but again the numbers are no collated.

As part of the full implementation of Tusla's Child Abuse Substantiation Procedure, a paper is being developed in respect of data collection to enhance reporting, assurance and governance.

Please do not hesitate to contact me if I can be of further assistance.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'M Halpin'.

Madeleine Halpin
General Manager

Cc Linda Creamer, Service Director

Appendix C: St. Clare's Unit in Temple Street



10th December 2020

Deputy Cian O'Callaghan
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.

PQ 39561/20

"To ask the Minister for Health further to Parliamentary Question No. 481 of 13 October 2020, the detail of the six broad categories mentioned; the percentage of outcomes that were designated per category in each year since 2014; and if he will make a statement on the matter".

Dear Deputy O'Callaghan,

I refer to your parliamentary question above to which I have been asked to provide a response.

St. Clare's Unit (SCU) is an independent agency that provides assessment and therapy to children and families where sexual abuse is a concern. In relation to our assessment service, we provide a clinical opinion that is detailed in a report forwarded to Tusla. We do not conclude that sexual abuse has occurred as this responsibility lies with Tusla, with reference to all of the information available to that agency, including our report. As I understand, Tusla selects two categories of conclusion in this regard, founded or unfounded.

The six broad categories in relation to the assessment outcome comprise of the following:

- Opinion that there was a credible account provided.
- Assessment did not conclude (e.g. family disengaged, length of time following disclosure and referral to SCU may have affected engagement)
- Concerning (Insufficient information to provide an opinion but there is concerning information / behaviour provided by child)
- No information provided. Child attended but did not provide information in relation to the allegation / concern. There may be different reasons for this information not being provided.
- Opinion that there was not a credible account provided.
- Assessment did not proceed. Parents decided not to proceed with assessment.

In the event that there are further questions in relation to the response, I thought that it may be useful for the following information to be provided.

Mission – To generate and provide child-centred, research-led and learning informed healthcare, to the highest standards of safety and excellence. We do this in partnership with each other, with children, young people and their families through a network of children's services in Ireland.

CRA Registered Charity Number RCN: 20202255 **Revenue Charitable Status** CRN: 22235

Board Members: Prof James Browne (Chairman), Prof Niamh Brennan, Mr Don Cronin, Ms Mary Cryan, Mr Liam Downall, Prof Martin Elliott, Ms Catherine Guy, Dr Anne Hignett, Dr Gavin Lavery, Ms Bridget McMorris, Mr Turbough O'Sullivan, Mr Sean Sheehan



Children's Health Ireland



Does unfounded or not credible mean there definitely was no child sexual abuse in the case?

As we do not offer an outcome of founded/unfounded we cannot comment on this. Regarding an outcome of credible account of CSA, this refers to an opinion reached by the assessment team rather than a statement of fact. This opinion is provided to Tusla as part of their own assessment, following which they then reach a conclusion whether the allegation is founded or unfounded. The outcome of an assessment is arrived at through a rigorous assessment process which is underpinned by international recognised practice guidelines and undertaken by experienced clinicians. As this is an opinion rather than a statement it cannot be wholly definitive.

How reliable is a 'not credible' finding as proof one way or the other as to whether there has been child sexual abuse?

It is not possible to quantify reliability of credible findings as the conclusions reached by SCU are a professional opinion based on the account of the child/young person. The SCU assessment outcome is reached following detailed consideration of credibility, which is governed by international best practice procedures. These procedures have demonstrated good reliability in facilitating young people to provide a narrative account of their experiences. Internal quality assurance measures are in place to ensure adherence to best practice. Due to the secrecy surrounding sexual abuse, and given that abuse is generally not witnessed, it is not possible to comment on "proof" of CSA, rather the credibility of an account.

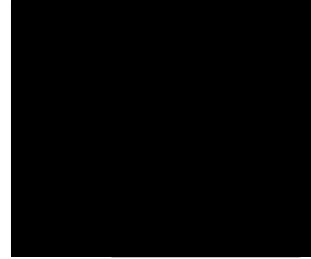
Year	Credible account	Not a credible account	Assessment did not conclude	Concerning	Assessment did not proceed	No information provided
2016	30.4%	21.7%	26.1%	0%	0%	21.7%
2017	43.3%	33.3%	6.6%	3.33%	6.6%	6.6%
2018	29.5%	15.9%	40.9%	2.2%	0%	11.36%
2019	33.3%	12.5%	29.1%	8.33%	4.2%	12.5%
2020	35.4%	3.2%	41.9%	3.22%	3.22%	12.9%

Yours sincerely,

Joe Gannon
Chief Operations Officer
Children's Health Ireland

Email

Appendix D: Under what circumstances does Tusla refer to St. Clare's Unit?



December 1st 2020

Cian O'Callaghan TD
Dáil Éireann
Dublin 2

To ask the Minister for Children; Equality; Disability; Integration and Youth the circumstances under which the Child and Family Agency refer an allegation of child sexual abuse to the St. Clare's unit in Temple Street Hospital; and if he will make a statement on the matter. 39560/20

Dear Deputy,

St. Clare's Unit is an assessment and therapy service based in Temple St. Hospital for children, young people and their families where sexual abuse is a concern. The catchment area includes North Dublin, Blanchardstown and Clonee.

Where a social worker has reasonable grounds to suspect that a child may have been sexually abused the child can be referred to St. Clare's Unit. St Clare's Unit offers assessment and therapeutic services. Should Tusla decide that a referral to St Clare's Unit be made, a strategy meeting ought to take place with the referring social worker, the Gardaí and St Clare's Unit. At this strategy meeting a recommendation is made regarding the most appropriate way forward for the child which could include assessment in St Clare's Unit or Specialist Interview by An Garda Síochána.

Please do not hesitate to contact me if I can be of further assistance.

Yours sincerely,

Appendix E: Response from Minister for Children on % allegations deemed unfounded

----- Forwarded message -----

From: **Minister O'Gormans Office** [REDACTED]

Date: Sun, 23 Aug 2020 at 13:39

Subject: DCDEI-MOGO-00192-2020

To: -----

23rd August 2020

Dear -----,

Thank you for your well wishes on the Minister's recent appointment, and I apologise for the delay in responding to you. In light of your recent correspondence I hope it will be useful if I to explain more fully the pathway of a referral to Tusla.

Referral:

Child protection and welfare services in Tusla begin with a referral of concern for a child or family.

- Such referrals are received by the local social work duty service or through the Tusla Web Portal.
- Referrals are subject to initial screening, which is normally completed within 24 hours, to see whether they fall within the remit of child protection and welfare services.
- To be considered a referral the subject of the report must be a child and the essence or character of the referral a concern (for the subject) that can be categorised as one of the following report types: physical, sexual abuse, emotional abuse, and neglect and welfare concerns.
- Referrals can also be received regarding adults of concern in the case of retrospective abuse.
- If a referral does not meet Tusla's threshold, information and advice will be provided to the referrer on how best to redirect the child and/or family.

Preliminary Enquiry:

Referrals which do meet the threshold for a child protection service move to the next stage. This is called a preliminary enquiry.

The purpose of a preliminary enquiry is:

- To gather and consider relevant information regarding a referral of concern about a child;
- To consider the immediate safety of a child and to take necessary immediate protective action, if required;

- To examine all information held by Tusla and determine whether the referral meets the threshold for harm for child protection and welfare social work services and to divert cases where this threshold is not met;
- To decide the primary referral type and priority status of accepted reports and to respond to these accepted reports in a proportionate and timely manner.

There are three possible outcomes following a preliminary enquiry:

1. An initial assessment is required;
2. The referral can be appropriately diverted for an alternative response;
3. The referral will be closed with no further action.

Initial Assessment:

The purpose of an initial assessment is to assess the child's situation through engagement with the family and other professionals to decide what response is the most appropriate to protect or support the child.

There are a number of possible outcomes following an initial assessment:

- The case is closed;
- The case can be diverted to an early intervention response, which doesn't require Tusla social work intervention, and closed;
- The case requires a family support or early intervention response, led by Tusla and community services;
- The case requires a child welfare assessment and response, led by Tusla;
- The case requires a family welfare conference;
- The case requires a child protection assessment and response, led by Tusla.
- The child is admitted to care through a voluntary order or Tusla apply to the courts for a care order.
- If it is determined that further assessment is required this allows for more time to make a final decision on the outcome for the child and family referred.
- Children and families receive a range of community and social work interventions or in a small number of instances a child may be registered on the Child Protection Notification System* (CPNS) or taken into care.
- Children registered on the CPNS remain living with their parents or carer but are subject to a detailed plan that is monitored by Tusla and has actions for parents and the professionals involved with the child and family.
- Children who are placed in care generally live with foster carers or occasionally are placed in a residential care setting. Children in care are subject to care planning as set out under the 1995 Placement of Children in Care Regulations.

* The CPNS is a secure record held by Tusla and has two main objectives: to 'provide a clear pathway and oversight into the management of child protection cases within a framework of interagency, interdisciplinary assessment, planning and intervention and (to) identify and list children who are at ongoing risk of significant harm and subject to a child protection plan (CPP).

In 2019 Tusla received 56,561 referrals in total. Of these 31,134 were child welfare referrals and 25,427 abuse / neglect referrals.

The abuse/neglect referrals are broken down as follows;

- 6,488 physical abuse
- 10,722 emotional abuse
- 3,909 sexual abuse
- 4,308 neglect

A preliminary enquiry was completed on 98% of these referrals (23,673).

A total of 21% referrals (5,047) required an initial assessment following a preliminary enquiry. There can be multiple referrals for one child.

A total of 2,797 (55%) had an action recorded following initial assessment. The remaining initial assessments were either ongoing or not commenced at the time the data was collated.

The outcome of initial assessments is as follows;

- 1, 229 (44%): No further action/closed
- 390 (14%): Child protection plan
- 333 (12%): Child welfare/ family support plan
- 458 (16%) Further assessment
- 91 (3%) Admission to care
- 13 (<1%): Family welfare conference
- 58 (2%): Divert – Early Intervention Response/close
- 225 (8%): Divert – Another agency /close

Tusla, the Child and Family Agency and An Garda Síochána engage with each other under an agreed Joint Protocol. At its core is the promotion of the safety and welfare of the child. It also highlights the assistance extended between the bodies in An Garda Síochána carrying out investigations and Tusla carrying out assessments. It also looks at the flow of information between the bodies and advocates that decisions and actions occur on the foot of consultation between the bodies.

More information can be found here:

https://www.tusla.ie/uploads/content/CF_Joint_Protocol.pdf

Joint working between Tusla and An Garda Síochána forms an integral part of the child protection and welfare service. Once a report of child sexual abuse has been screened by a duty social worker, a strategy meeting is held to decide which service is most suitable for the child. One of the available options is a Joint Specialist Interview with Gardaí taking the lead role.

All suspected current and retrospective child abuse cases are formally notified to An Garda Síochána, as outlined in the Joint Protocol for Tusla/ Garda Síochána. Child Abuse Notifications to An Garda Síochána are an integral component of the local operational management of social work cases therefore this data is not collated nationally. Each local

social work area has a system in place to manage the throughput of notifications of suspected child abuse on the individual case files.

These cases and outcomes may also be the subject of Tusla/ An Garda Síochana joint case liaison meetings as outlined in the Joint Protocol for Tusla/ Garda Síochana Liaison but again the numbers are not collated.

You may also be interested to know Tusla's IT system, the National Child Care Information System (NCCIS) a case management system and interactive database that has drawn together the disparate manual and other systems previously has embedded and is in use in Tusla's 17 areas. Developed over several years and launched in 2018 it is the first nationally connected social work system for child protection and welfare, with all 17 social work areas accessing one integrated information system. Options for further refinements and reporting from this system is always being investigated by Tusla.

Tusla does not currently collate the percentages of child sexual abuse allegations that were founded or unfounded.

The increase in Parliamentary Questions relating to reporting on founded and unfounded cases has been noted. As you may be aware from the responses you have seen, Tusla, the Child and Family Agency, is currently reviewing it's policy and procedures in this complex area.

As a part of that effort the Service Director leading on the implementation of Tusla's Child Abuse Substantiation Policy has confirmed that a paper is being developed in respect of data collection to enhance reporting, assurance and governance. The paper will guide the next steps to be taken, that may include the need for reporting on child sexual abuse allegations that were founded or unfounded.

Yours sincerely

Lisa Hughes

Private Secretary to Minister Roderic O'Gorman TD