

Unborn reports

Information for professionals and service providers

November 2024

OFFICIAL

About this document

This guide has been developed for people who, within their professional roles, support, care for, or engage with expectant mothers where an unborn child protection report has been made.

About unborn reports

An unborn report is a report made to child protection before a child's birth.

It occurs when someone has 'a significant concern for the wellbeing of the child after their birth' (s. 29, *Child Youth Families Act 2005*).

Anyone can make an unborn report.

An unborn report record is made in the same way as any other report to child protection.

How child protection responds to unborn reports

Child protection works within (but not limited to) the following legislation:

- *Children, Youth and Families Act 2005* (CYFA)
- *Child Wellbeing and Safety Act 2005*
- *Family Violence Protection Act 2008*.

Under this legislation, child protection can:

- provide advice to the reporter, including if the reporter is a family member
- refer the expectant mother to The Orange Door or other service
- contact the expectant mother to tell her about the report. Child protection can ask for her consent for us to provide advice and assistance during her pregnancy
- [share information](https://www.cpmanual.vic.gov.au/our-approach/information-sharing)¹ with (or request information from) other prescribed Information Sharing Entities (ISEs). Child protection can do this for the wellbeing or safety of the unborn child. to assess and manage family violence risk. Child protection also shares information to provide assistance, referrals or advice to the mother
- convene a case conference with professionals. This can be done without the expectant mother's consent. If the expectant mother does not provide consent, child protection **must** close the unborn report after the case conference

¹ <<https://www.cpmanual.vic.gov.au/our-approach/information-sharing>>

- progress an unborn report to a born report when the child is born. This includes completion of an intake risk assessment. The intake risk assessment will determine whether child protection need to undertake an investigation.

If the expectant mother is a victim survivor of family violence, child protection **must** undertake a MARAM assessment. Child protection must also make any necessary referrals for safety planning and to manage the risk to the mother.

What child protection cannot do

Under the CYFA, child protection **cannot**:

- continue to provide advice and support to the expectant mother if the mother does not consent to this
- contact the father or other family members without the consent of the expectant mother
- refer the expectant mother to services if she has been contacted and not provided consent
- request a report to child protection be made upon birth
- conduct and record a SAFER risk assessment in the unborn report
- issue a protection application or commence planning for a legal intervention.

Considerations for Aboriginal and Torres Strait Islander people

When the parents and unborn are identified as Aboriginal and Torres Strait Islander, child protection must consult the Aboriginal Child Specialist and Support Service (ACSASS) in the relevant area.

ACSASS must continue to be involved while the unborn report remains open.

Considerations for victim survivors of family violence

Pregnancy is a time of heightened risk of violence from an intimate partner.

If violence is already present in a relationship, its severity is likely to increase during pregnancy and the first months after birth.

If the expectant mother is identified a victim survivor of family violence, child protection is legally required to undertake a MARAM assessment.

This includes providing referrals and safety planning to ensure her safety.

What child protection can do if the expectant mother provides consent

If the expectant mother provides consent, child protection may:

- give advice and assistance to the expectant mother
- share information with prescribed ISEs and other relevant professionals. This information can be used to assess whether and how to provide support, referrals or advice to the expectant mother
- request or complete a MARAM assessment if family violence is identified
- engage with the father and other family members (with the expectant mother's consent)
- convene a case conference with professionals

- convene a prebirth meeting with professionals and the expectant mother (with her consent)
- consider and make appropriate referrals for support
- offer her a referral to a legal service for independent advice and advocacy.

Child protection can only determine if an investigation is required **after** the baby is born, a born report is opened, and intake SAFER risk assessment is completed

What child protection can do if the expectant mother does not consent

If the expectant mother does not provide consent, child protection must close the unborn report.

However, child protection may share information with prescribed ISEs and other professionals.

This may only occur if the appropriate requirements are met. These include that the information-sharing is reasonable and necessary for the recipient to fulfill their duties and functions.

How you can support the expectant mother

Early intervention is vital to preventing or reducing families' involvement with child protection.

Where appropriate, you can:

- assist the expectant mother to engage with services in the early stages of pregnancy. This is likely to reduce the number of reports either in the later stages of pregnancy or at the time of birth.
- consider seeking information through Family Violence Information Sharing Scheme (FVISS) or Child Information Sharing Scheme (CISS).
- make an unborn report to child protection. However, you will need to use your professional judgement about whether this is necessary.
- make a referral to an alternative service such as The Orange Door or another community-based child and family service.
- consider referring the mother to another specialist service. This includes alcohol and other drugs services, housing services, family violence specialist services and area mental health services.

For an Aboriginal or Torres Strait Islander unborn child, you may consider a referral to a local Aboriginal community-controlled organisation (ACCO). ACCOs may be best placed to provide culturally appropriate support.

You can often make direct referrals to an ACCO. [The Orange Door can also help to refer you to an ACCO in your area.](#)²

The [Child protection manual](#)³ provides further information about unborn reports to child protection.

Independent advice and advocacy for parents

If you are considering making an unborn report or are working with a parent involved with child protection, you can:

- advise the parent(s) of their right to access independent advice and advocacy from a legal service

² <<https://www.orangedoor.vic.gov.au/aboriginal-torres-strait-islander>>

³ <<https://www.cpmmanual.vic.gov.au/home>>

- provide contact information or, with the parent's consent, make a direct referral to a legal service.

Legal service contacts:

- Victoria Legal Aid, phone 1300 792 387 or [email](mailto:childprotectionreferrals@vla.vic.gov.au) <childprotectionreferrals@vla.vic.gov.au>
- Djirra (First Nations women), phone 1800 105 303 or [email](mailto:info.afvls@djirra.org.au) <info.afvls@djirra.org.au>

Victorian Aboriginal Legal Service (First Nations clients), phone 1800 064 865 or [email](mailto:familyadmin@vals.org.au) <familyadmin@vals.org.au>.

To receive this document in another format, [email the department's OPP Directorate](mailto:OPPDirectorate@dffh.vic.gov.au) <OPPDirectorate@dffh.vic.gov.au>.

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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.