

Sector insights paper

MARCH 2025

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Queensland
Family & Child
Commission



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Senate interim report from the inquiry into Australia's youth justice and incarceration system

YOUTH JUSTICE

The Senate Legal and Constitutional Affairs References Committee recently released an interim report into the first Inquiry into Australia's youth justice and incarceration system. It includes AIHW statistics and evidence from 223 stakeholder submissions raising concerns about the human rights of disadvantaged children being held in detention.

Social determinants of justice involvement identified by stakeholders:

- Poverty and unequal access to resources
- Operation of the criminal legal system
- Systemic racism and discrimination
- Unsupported mental health and disability
- Early abuse and trauma
- Alcohol and drug use
- Poor education
- Disadvantaged location
- Early police contact
- Out-of-home care
- Indigenous
- Homelessness

Key issues

- Sensationalism and negative depictions of young people in the media leads to populist 'tough on crime' mentalities and reactive policy-making.
- Inadequate access to physical and mental healthcare within youth detention centres.
- The use of isolation, restraints and staff who are ill-equipped to respond to complex needs and challenges lead to systemic neglect and lasting psychological damage.
- Youth detention severs ties to family and culture, particularly for First Nations young people and those in regional and remote areas due to transportation issues.
- Youth detention leads to recidivism because it re-traumatises.
- Inadequate investment in prevention, diversion, intervention, rehabilitation and reintegration.
- Use of watchhouses is inhumane for young people.
- Unacceptably low minimum age of criminal responsibility in some jurisdictions.
- Inadequate progress on Closing the Gap reforms (over-representation, building the community-controlled sector, transforming government organisations, shared access to data at a regional level).

Australia's obligations as signatories

- United Nations Convention on the Rights of the Child articles 37, 39 and 40.
- Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.
- National Standards for Youth Justice in Australia authored by the AYJAs (endorsed by states and territories, but not enforceable).

"Watchhouses are not designed to cage children, and the impacts of these containments are devastating... These conditions reflect a fundamental neglect of the state's duty to care for the children in their care, placing the children at immense risk of lifelong trauma."

– Sisters Inside/National Network of Incarcerated and Formerly Incarcerated Women & Girls

Recommendations

The committee strongly recommends that the Senate continues to pursue an inquiry into the incarceration of children in Australia given the significant and disturbing evidence received.

The committee recommends that the Senate in the 48th Parliament considers whether to refer to the Senate Legal and Constitutional Affairs References Committee an inquiry into Australia's child justice and detention system, with particular reference to the Commonwealth's responsibilities as they relate to:

- The incarceration of children, including the disproportionate incarceration of First Nations children.
- Compliance with international obligations relating to the detention of children.
- Responding to the recommendations of the National Children's Commissioner's report entitled 'Help way earlier!': How Australia can transform child justice to improve safety and wellbeing.

Mental health outcomes among Queensland young people in care attending specialist services

A recent study published in *Child Abuse & Neglect* identified improved mental health and functioning outcomes among children and young people in out-of-home care attending Evolve Therapeutic Services (ETS) throughout Queensland. The study included 1,561 children and young people discharged between 2006 and 2020. Data consisted of two clinician-rated, standardised pre and post intervention assessments.

Study demographic characteristics (n=1,561)

Age		Sex		Identity	
0 – 4 years	104	Male	891	Non-Indigenous	942
5 – 8 years	487	Female	690	Aboriginal and/or Torres Strait Islander	617
9 – 12 years	537				
13 – 17 years	433				

Background

ETS is delivered by Child and Youth Mental Health Services (CAHMS) to children and young people in out-of-home care with complex psychological and/or behavioural concerns. It is a trauma-informed, intensive program typically delivered over 18 months. ETS consists of wrap-around services including individual grief and loss therapy, dyadic work with the carer and child or young person, and training for carers and professionals.

Overall results

Statistically significant reductions in clinical level symptoms were identified in the following domains:

- Disruptive/aggressive behaviour
- Overactivity/attentional difficulties
- Non-accidental self-injury
- Scholastic/language skills
- Emotional symptoms
- Peer relationships
- Self-care/independence
- Family life and relationships
- Poor school attendance
- Overall functioning

Other key findings

- Younger children showed greater improvements in overall functioning, scholastic/language skills, emotional symptoms, peer relationships, self-care/independence, and poor school attendance.
- Children and young people who remained in the program longer had an increased odds of clinical levels of overall functioning, overactivity/attentional difficulties, peer relationships and poor school attendance post intervention. This may be related to case complexity, multiple placement changes, school/peer disengagement, or disengagement by the child or young person, their carers or other stakeholders.

Conclusion

ETS is an effective treatment for children and young people in out-of-home care who have experienced severe, complex trauma. Adaptations may be needed to enhance outcomes for older young people, Aboriginal and Torres Strait Islander children and young people, and those requiring longer service duration.

New AIHW data on Aboriginal and Torres Strait Islander children in the child protection system

OVER-REPRESENTATION

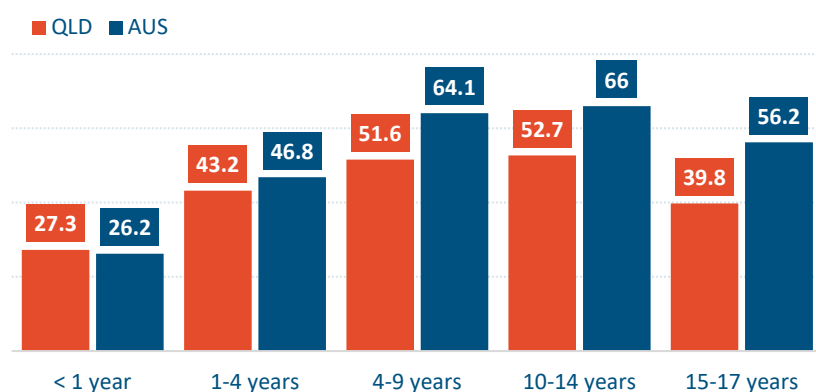
CHILD SAFETY

A recent update to the AIHW Child protection Australia 2022–23 report presents data on First Nations children in the child protection system and Aboriginal and Torres Strait Islander Child Placement Principle (ATSICPP) indicators.

Key national findings in 2022-2023 for Aboriginal and Torres Strait Islander children

- Reunification with family was the most common pathway leaving out-of-home care (39%).
- 69% of Aboriginal and Torres Strait Islander children in out-of-home care who had siblings in out-of-home care were placed with at least one of their siblings.
- When entering out-of-home care, 46% of Aboriginal and Torres Strait Islander children were placed with relatives or kin, an increase from 25% in 2016–17.
- In 2021–22, 84% of Aboriginal and Torres Strait Islander children who were reunified with their family, did not return to out-of-home care in the following 12 months.

Rates of out-of-home care per 1,000 Aboriginal and Torres Strait Islander children and young people, by age and jurisdiction

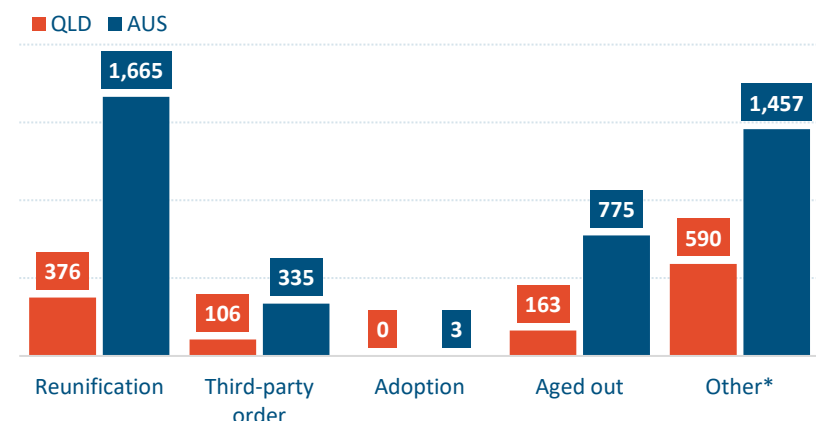


Over-representation in out-of-home care

Between 2019 and 2023 the rate of Aboriginal and Torres Strait Islander children on care and protection orders increased from 66 per 1,000 to 72 per 1,000 nationwide.

In 2023, the rate of Aboriginal and Torres Strait Islander children on a care and protection order was 10.9 times the rate of non-Indigenous children, an increase from 9.4 times the 2019 rate nationwide.

Out-of-home care exits among Aboriginal and Torres Strait Islander children and young people, by type and jurisdiction



*Includes out-of-scope placements, i.e. living independently, trial re-unification, detention, etc.

ATSICPP connection indicators

Current, documented, approved cultural support plan

↓ QLD: 93.7% AUS: 82.3%
1.5% decrease since 2021-2022

Reunified

↓ QLD: 11.0% AUS: 14.5%
0.8% decrease since 2021-2022

Reunified and did not return to out-of-home care within 12 months

↑ QLD: 85.6% AUS: 83.7%
2.6% increase since 2020-2021

Australian Institute of Health and Welfare. (2025.) *Child Protection Australia 2022-2023. Updates: Aboriginal and Torres Strait Islander Children*. Australian Government. <https://www.aihw.gov.au/reports/child-protection/child-protection-australia-2022-23/contents/aboriginal-and-torres-strait-islander-children/pathways-from-out-of-home-care>

Participatory action research about youth justice and substance abuse involving young people in regional Queensland

YOUTH JUSTICE

ADOLESCENT MENTAL HEALTH

A recent study published in *Child Abuse & Neglect* explored young people's views about youth justice and related health issues using participatory action research.

At-risk young people aged 12–25 involved in community organisations in regional Queensland were invited to participate in guided drama workshops used to develop short-form videos. The study included 68 workshop participants, five young people with creative arts expertise, and eight academic researchers.

Developing and distributing videos with at-risk young people led to an improved understanding of and engagement with youth justice issues. The videos have been viewed online over 10,000 times. The use of relatable, comedic audio-visual content (rather than text-based content) assisted with engagement rates.

Key findings

What young participants reported about substance use

- Alcohol consumption is their method for dealing with stress and pressures in their lives.
- The majority use vapes, which are easily accessible.
- Social norms and peer culture promote substance use in rural Queensland.
- Substance use makes them vulnerable to criminalisation through encounters with police.

What young participants reported about fear and dislike of police

- Fear and dislike law and often report a tendency to avoid or run from police encounters.
- Perceive police as lacking empathy based on their negative past experiences.
- Do not understand their legal rights, leading to the risk of unwarranted criminalisation due to refusing to disclose information when obliged or unknowingly committing an obstruction offence by "bolting."

What young participants reported about risk of cyber-bullying victimisation

- Very concerned about cyber-bullying, including rumor-spreading, unwanted sharing of private information and impersonation.
- Lack confidence in the ability of teachers and police to effectively address cyber-bullying.
- Desire guidance on how to identify, prevent and respond to cyber-bullying.

Implications

- Young people in regional Queensland have few opportunities to express concerns about their day-to-challenges.
- Action is needed to enhance relationships between young people and police in regional Queensland. This may include changes to police practices and community education strategies targeting young people and their parents or carers.
- Substance abuse education programs and strategies to prevent substance use in schools require further investment and specialised staffing.
- Additional efforts to respond to and prevent cyber-bullying are needed to support young people's mental health and to prevent future youth justice involvement among those bullied.
- Participatory action research provides valuable insights into young people's perspectives on youth justice concerns.

Masahiro Suzuki, M., Price, L., McEwan, A., Lorenza, L., Bloomfield, C., Pascoe, V., Power, D., & Stanton, L. (2025). *Young people's justice-related concerns in regional Australia: Insights from a participatory action research project on youth-led communication on health and justice*, Children and Youth Services Review, 171, 108192.

Population level outcomes among care-experienced young people in Western Australia

CHILD SAFETY

YOUTH JUSTICE

ADOLESCENT MENTAL HEALTH

A recent study published in *Child Abuse & Neglect* analysed population level datasets for a 15 year birth cohort of young people in Western Australia to compare outcomes between those involved with child protection, out-of-home care and the majority population. Examined outcomes pertained to the domains of physical and mental health, disability, education, social housing and criminal justice involvement.

Key findings

Care-experienced young people had the poorest outcomes in all domains, followed by young people with child protection contact only. This includes higher rates of:

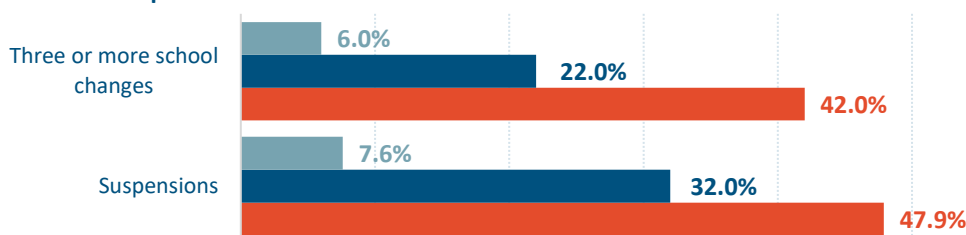
- Physical and mental health issues, including preventable hospitalisations.
- Disability, particularly intellectual and psychosocial disabilities.
- School instability, lower attendance, more suspensions.
- Public housing applications and tenancies.
- Police contact, offending, and time in custody as juveniles and adults.

Conclusion

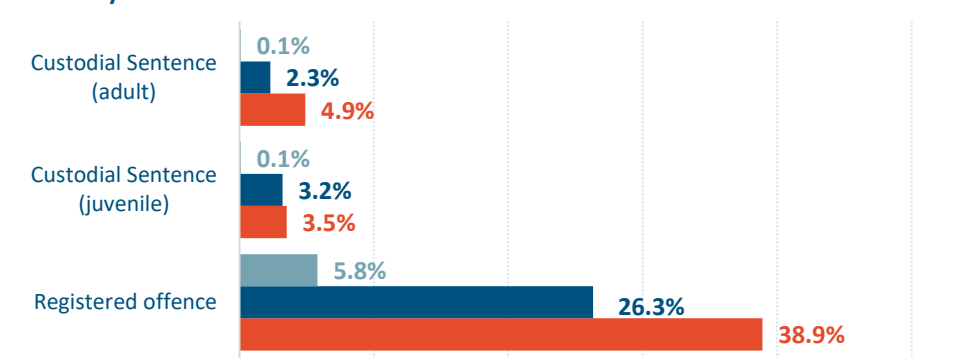
Findings from this study align with previous research indicating that child protection and out-of-home care experience increases the likelihood of challenges in a range of life domains.

The compounded effect of different challenges highlights the need for comprehensive services and supports.

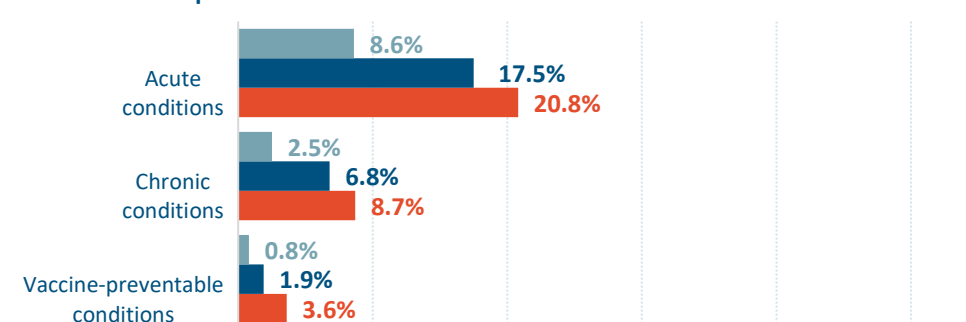
School disruption rates



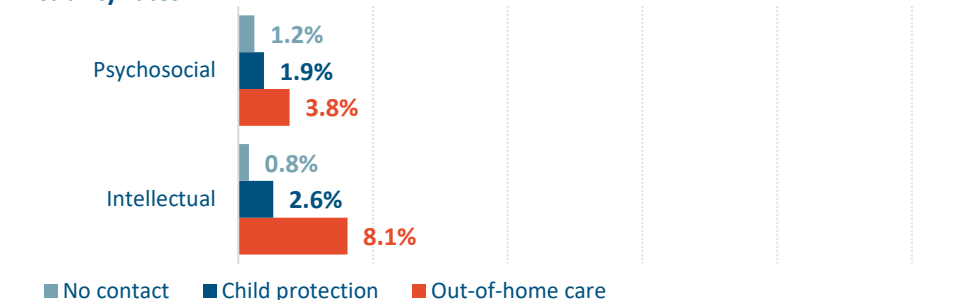
Justice system involvement



Preventable hospitalisation rates



Disability rates



■ No contact ■ Child protection ■ Out-of-home care

Parsons, L., Cordier, R., Chikwava, F., O'Donnell, M., Chung, D., Ferrante, A., Mendes, P., & Thoresen, S. (2024). Shedding light on the social and health realities of care-experienced young people in Western Australia: A population-level study. *Child abuse & neglect*, 157, 107053. <https://doi.org/10.1016/j.chiabu.2024.107053>

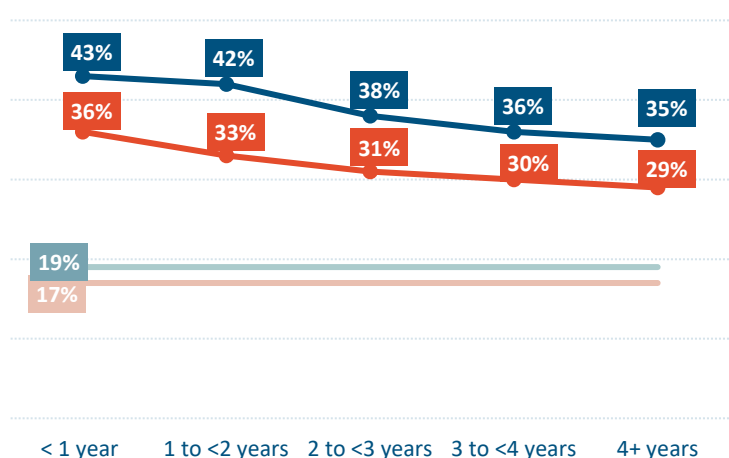
Relationship between child protection involvement in early childhood and developmental risks among young children

CHILD SAFETY

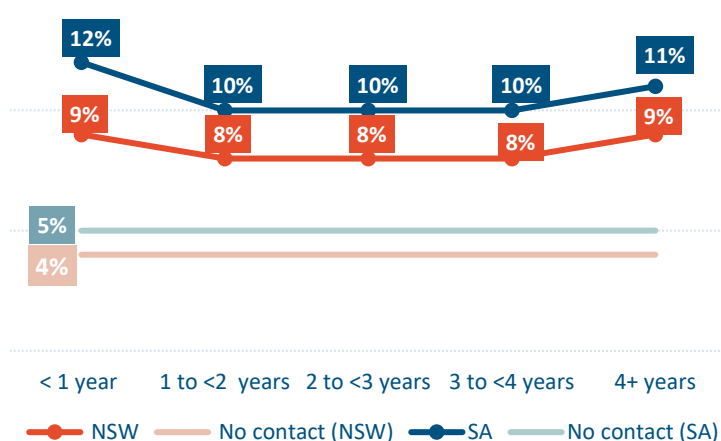
A recent study published in the *Journal of Epidemiology and Community Health* analysed population-level data to identify developmental vulnerabilities at age 5 among children with child protection involvement prior to starting school in New South Wales and South Australia.

The study identified 56,650 (14.2%) children in NSW and 12,617 (15.6%) children in SA who had one or more child protection contacts before school. Developmental risks were assessed using teacher-reported data from the Australian Early Development Census (AEDC): physical health and well-being; social competence; emotional maturity; language and cognitive skills; and communication skills and general knowledge.

Developmental vulnerability at age five by year of first child protection contact



Diagnosed condition with support needs at age five by year of first child protection contact



Key findings

- One in seven children in NSW and SA had a child protection report or more serious contact before school.
- The risk of developmental vulnerability in one domain was most common, with progressively lower risk of vulnerability on two to five domains, across all groups.
- Children with one child protection report had approximately 65% higher risk of developmental vulnerability at age five.
- Developmental risk was highest among children less than two years old at first child protection contact and decreased by age at first contact.
- Developmental risk was higher among children with more child protection reports.
- The risk of medically diagnosed conditions was highest among children placed in out-of-home care (NSW, 15–18%; SA, 15–22%).
- Developmental vulnerability in the physical health and well-being developmental vulnerabilities were most common among children with no child protection contact, child protection reports, investigations, and substantiations.
- Developmental vulnerabilities in the social competence and emotional maturity domains were most common among children in out-of-home care.

Conclusion

This study demonstrates that child protection reports signal a risk of developmental vulnerabilities at the population level. In addition to child safety screening, child protection reports offer an opportunity to provide early intervention health and social support for children with developmental support needs.

Falster K, Pilkington RM, Ahmed T, *et al.* (2025). Re-envisaging child protection contacts as an early prevention opportunity to support child development and well-being: an Australian data linkage study. *Journal of Epidemiology and Community Health*. In press. <https://jech.bmj.com/content/jech/early/2025/02/26/jech-2024-223006.full.pdf>

Views among young people in residential care in New South Wales about their relationships with staff members

CHILD SAFETY

A recent study published in *Children & Youth Services Review* explored the views of 38 children and young people in therapeutic residential care (TRC) in New South Wales. The study explored young people's views about their relationships with staff to inform the development of relational practice recommendations.

Practices that contribute to good relationships

Recognitional practice

- ✓ Prioritising spending time with young people
- ✓ Keep showing up despite difficult behaviours
- ✓ Open and compassionate communication
- ✓ Validating young people's feelings and using empathy
- ✓ Being honest
- ✓ Deep listening
- ✓ Valuing and respecting young people
- ✓ Respecting young people's personal space
- ✓ Treating young people as equal

Facilitating connection to culture

- ✓ Family finding and supporting connections with 'mob' and community
- ✓ Facilitating engagement in cultural activities

Facilitating safety and wellbeing

- ✓ Organising regular visits with GP and mental health professionals
- ✓ Deep listening and validating of feelings
- ✓ Rostering appropriate mix of staff

Facilitating connections to family

- ✓ Building a relationship with the family
- ✓ Organising regular family visits including transport
- ✓ Facilitating communication

Facilitating connection to social networks

- ✓ Supporting connections to sports and youth clubs
- ✓ Knowing when to bend the rules to support friendships
- ✓ Caring and speaking up for peers in the house

Facilitating participation and autonomy

- ✓ Facilitating involvement in decision-making
- ✓ Fostering a sense of agency

Fostering interests and life skills

- ✓ Supporting young people to pursue interests/hobbies
- ✓ Supporting young people to learn life skills
- ✓ Supporting young people to transition from TRC

Study demographic characteristics (n=38)

Age	12-14 years	11
	15-17 years	25
	18+ years	2
Gender	Female	11
	Male	25
	Other	2
Ethnicity	Non-Aboriginal	22
	Aboriginal	16

Practices that impede good relationships

- ✗ Unpredictable placement changes with little warning or transparency.
- ✗ Being moved from regional to metropolitan prevented young people from maintaining connections to their old communities.
- ✗ Disengagement from mainstream schooling with a lack of alternatives.
- ✗ Rules and policies that constrained connections to social networks, peers in the community and family.
- ✗ High staff turnover, instability and vacant positions.
- ✗ Administration tasks, funding and staffing issues prevented staff from spending quality time with young people.

Conclusion

Young people in residential care want and need to feel respected and valued beyond daily tasks of being cared for. Program design should reflect relational practice that connects young people to family, community and social networks, and is sensitive to issues of power, participation and the potential to perpetuate marginalisation.

Australian practitioner's conceptions of permanency for children and young people in residential care

CHILD SAFETY

A recent study published in *Children & Youth Services Review* explored how Australian practitioners managing and working in therapeutic residential care understand the concept of permanency, and the factors that they consider need to be addressed to support permanency for children in residential care. Data was collected from focus groups and individual interviews with 21 practitioners across three service providers in VIC, NSW, QLD and SA.

How participants define permanency for children and young people in therapeutic residential care

A place to grow

- Stability and safety, both physical and emotional, are foundational for permanency.
- Stability enables addressing children's higher growth needs like belonging.

Individualised responses

- Defined by the child or young person, consistent with their life histories, trajectories, needs and desires.
- Focused on the multiple, individualised pathways that can lead to a sense of permanency as defined by a child or young person.

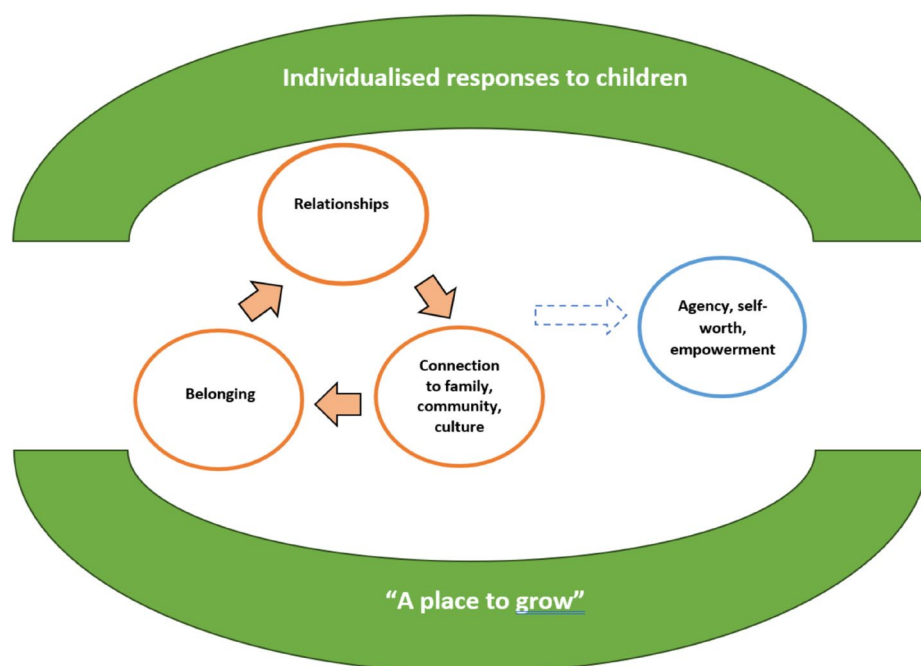
Promoting connections and belonging through relationships

- Enduring, meaningful relationships that foster a sense of belonging are central to permanency.
- Connections should span family, community, and culture, especially for First Nations children.

Supporting children's agency, self-worth and empowerment

- Enables children to develop the capacity to manage relationships and navigate the world post-care.
- A fundamentally relational construct, rather than focused on placements.

Conceptual model of permanency in residential care



Conclusion

Relational losses impact how children and young people in residential care understand and internalise 'permanency' within a context that is fundamentally different from a family-like environment.

Permanency can and should be applied to children and young people in residential care but requires for permanency to be reconceptualised as an inherently relational construct that is grounded in connections and belonging.

This necessitates creating safe, stable environments that foster safe and enduring relationships with unpaid carers and other important people.

Image reproduced from Corrales et. al, 2025

Corrales, T., McNamara, P., Smith, B., Bath, H., Clark, E., Goodchild, K.L., Grabda, S., Harrison, M., & McGrady, B. (2025.) "They just want people in their lives that will be there forever": A conceptual model of permanency for children and young people in therapeutic residential care, *Children and Youth Services Review*, 108211, <https://doi.org/10.1016/j.chilyouth.2025.108211>

Summary of evidence on parenting programs in Australia

FAMILY SUPPORT SERVICES

The Australian Institute of Family studies has released a policy and practice paper evaluating international evidence evaluating parenting support programs. 90 parenting programs were identified as effective in supporting child development, child behaviours, child mental health, and parent-child and family relationships. Most programs targeted multiple outcomes and were primarily effective at promoting parent-child relationships, parenting practices and child behaviours. Most programs were evaluated in the United States.

Program effectiveness

- Diversity in program elements and evaluation measures limits comparisons regarding effectiveness.
- No one program or component has been identified as most effective across all populations or outcomes.
- Treatment-focused programs tend to have larger effects on child behaviour and parenting practice outcomes for some populations compared to prevention programs.
- Program content aimed at increasing parent self-confidence is more effective than parenting skill development, mental health and emotional supports in programs addressing child maltreatment.

Program adaptations for specific populations

- Adaptations for local populations and individual families prevents strict adherence to evidence-based practice.
- Effective adaptations for culturally and linguistically diverse families include content specific to cultural context, influences and norms.

Conclusion

- Parenting programs can be effective for general populations and families with complex challenges.
- There is no clear evidence on which program elements are most effective.
- Research is needed to effectively adapt programs for Australian populations.

Strawa, C. (2025). *Effective parenting programs: What does the evidence say?*. Australian Institute of Family Studies.

A meta-analysis of placement breakdowns in out-of-home care

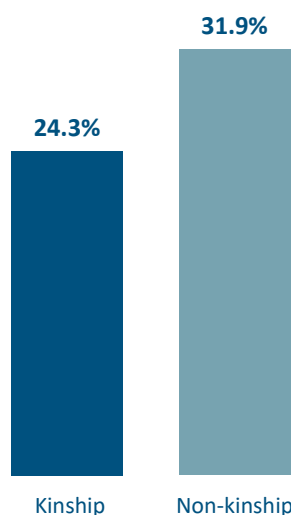
CHILD SAFETY

A study recently published in *Children and Youth Services Review* consisted of a meta-analysis to identify the prevalence and factors associated with out-of-home care placement breakdowns. Only foster placements (kinship and non-kinship) were examined. 47 studies published between 1983 and 2022, including three conducted in Australia, were included. The studies involved 80,654 children and young people, with a mean age of 9.7 years.

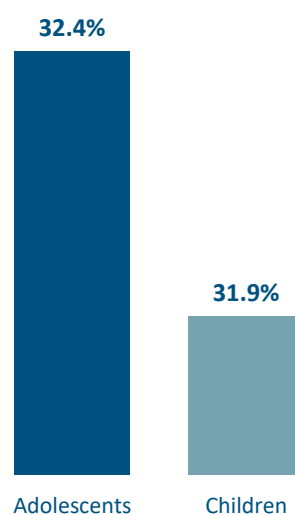
Key findings

- The overall prevalence of placement breakdown was 26.26%.
- More recent studies reported higher rates of placement breakdowns.
- No difference was found between general and therapeutic foster care.
- Prospective studies and those using foster parents as informants reported lower placement rate than retrospective studies and studies using file records.
- No association was identified between placement change frequencies and sex, ethnicity, or therapeutic versus general foster care.

Frequency of placement changes by placement type



Frequency of placement changes by age



Eltink, E. M.A., Waaijenberg, A., Broers, M., Marinda van Anrooij, M., van Rooij, F.B., Stams, G. J. J.M., & Assink, M. (2025). *The prevalence of placement breakdown in foster care: A meta-analysis*, Children and Youth Services Review, 108203.