Sector insights paper

In this month's insights paper

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Youth justice re-involvement among young people released from youth justice supervision in 2023-24

YOUTH JUSTICE

The Australian Institute of Health and Welfare (AIHW) have released the annual update for young people who returned to sentenced youth justice supervision after previously being released. The following data refers to young people who had been released from a supervised sentence (community-based supervision or detention) who then returned to another supervised sentence before they turned 18 years old.

Key National Findings

- Young people with a first sentence of detention were more likely to return to youth justice supervision than those with a first sentence of community supervision (51% to 41% respectively).

- In 2022-23, 260 out of 309 (84.1%) of young people released from detention returned to sentenced supervision within 12 months.

- In 2022-23, 87.8% of First Nations young people released from detention returned to supervised supervision within 12 months, compared to 74.03% of non-Indigenous young people.

- Earlier age at first supervised sentence also increased the likelihood of returning to sentenced supervision. In 2022-23, 97% of 10–12-year-olds returned to sentenced supervision, compared to 15% of 17-year-olds.

Key Findings from Queensland

In 2023-24, Queensland had the highest rate of young people returning to youth justice supervision nationwide.* In 2022-23:

- 71.4% of young people released from community supervision returned to youth justice supervision within 12 months; and

- 92.6% of young people released from detention returned to youth justice supervision within 12 months.

Proportion of young people released from youth justice supervision in Queensland who returned within 12 months, by year and type

Released from community-based supervision — Released from detention
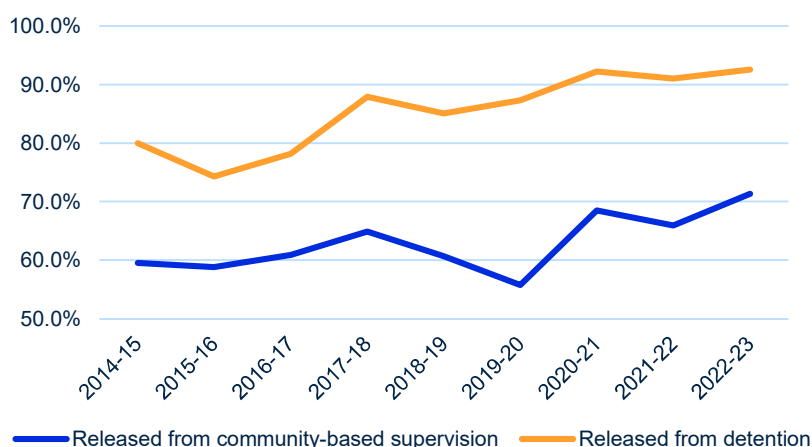
The number of young people released from detention in 2022-23, who returned to youth justice supervision within 12 months, by jurisdiction

Young people released from detention — Young people who returned to supervision within 12 months — Proportion who returned to supervision — National average proportion
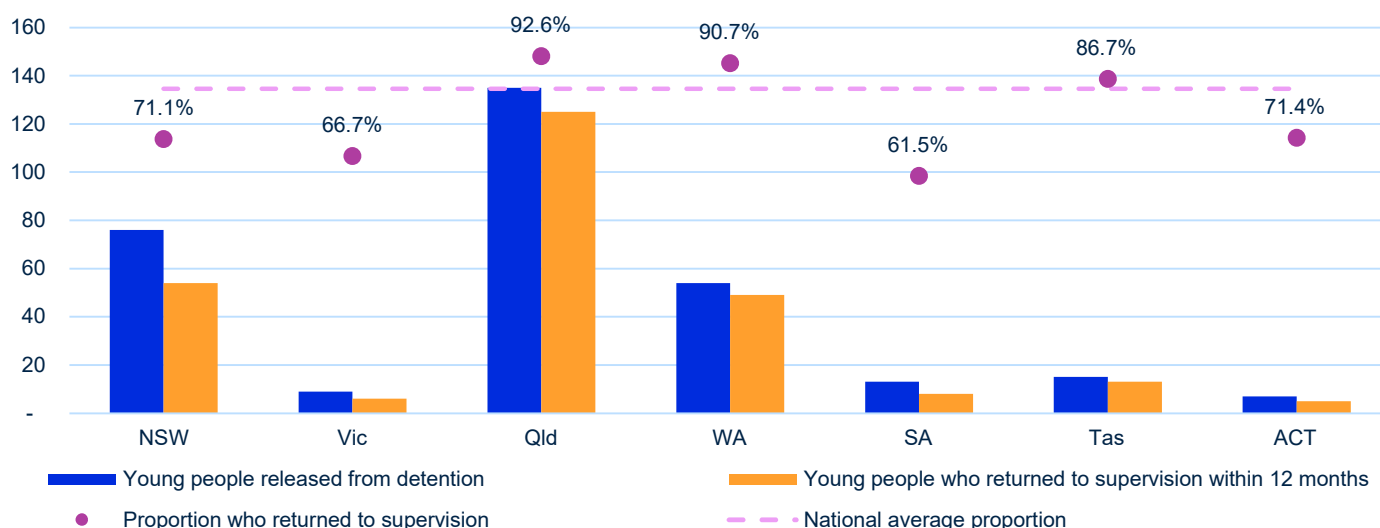
*Data from the Northern Territory was not available for young people released from sentenced supervision in 2022-23, and was excluded from this dataset.

Australian Institute of Health and Welfare. (2025). *Young people returning to sentenced youth justice supervision 2023–24.* AIHW. https://www.aihw.gov.au/reports/youth-justice/young-people-returning-to-youth-justice-2023-24/contents/about

Multiple unmet service needs among NSW families with child protection system involvement

CHILD SAFETY   **DFV**

A study published in *Child Protection and Practice* analysed population-level linked administrative data to explore rates of domestic and family violence (DFV), parental substance misuse (SM), and parental mental health (MH) concerns identified within 12 months of initial child protection reports in New South Wales. The sample consisted of 584,365 children with a child protection Helpline record between 2004 and 2018.
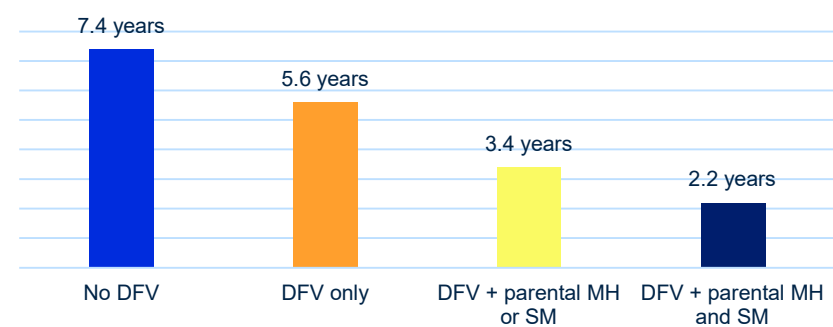
Key Findings

- DFV concerns were identified among 193,705 (33%) children reported to child protection
- Parental MH and/SM were identified among 19% of children with identified DFV concerns
- Children from families with identified DFV concerns were younger when first reported to child protection
- Parents from families with identified DFV concerns had a high rate of interactions with other services prior to their children being reported to child protection
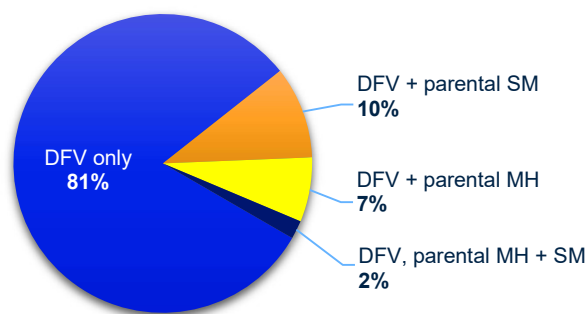
Children reported to child protection

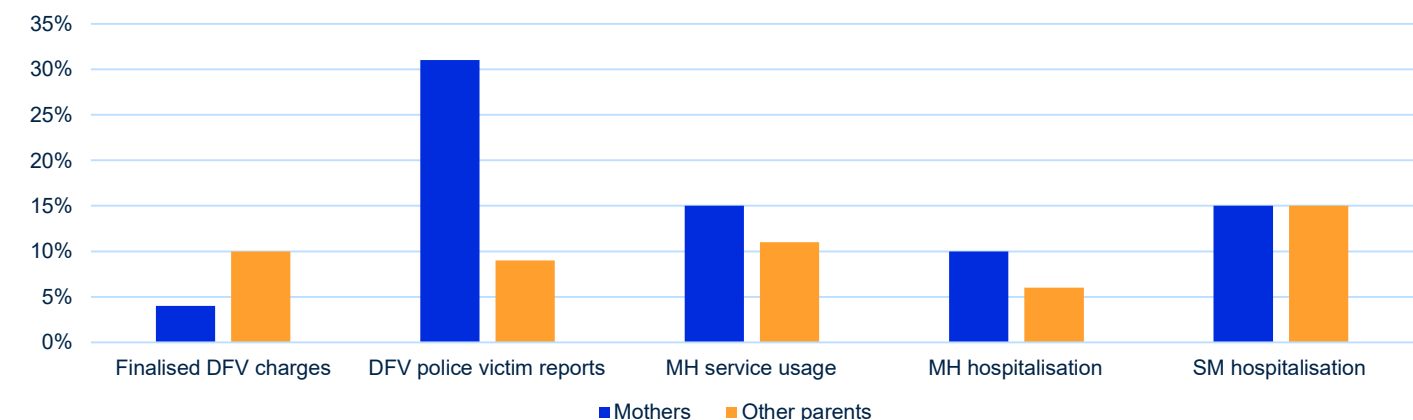| Demographics	N= 584,365
Gender	Female 49.8% Male 50.2%
Geography	Metropolitan 71% Regional 28% Remote 1%
Age at first report	6.7 years (average)

Average child age at first report by identified concerns

- No DFV: 7.4 years
- DFV only: 5.6 years
- DFV + parental MH or SM: 3.4 years
- DFV + parental MH and SM: 2.2 years

Co-occurrence of DVF

- DFV only 81%
- DFV + parental SM 10%
- DFV + parental MH 7%
- DFV, parental MH + SM 2%

Parental service interactions prior to their children's first child protection report

Mothers / Other parents

- Finalised DFV charges: Mothers 4%, Other parents 10%
- DFV police victim reports: Mothers 31%, Other parents 9%
- MH service usage: Mothers 15%, Other parents 11%
- MH hospitalisation: Mothers 10%, Other parents 6%
- SM hospitalisation: Mothers 15%, Other parents 15%

Conclusion

This study has identified that families who come to the attention of child protection often have multiple complex needs including DFV, parental MH and SM, and previous interactions with other service systems. Workforce training and better coordination between services systems are needed to ensure families are referred to appropriate early intervention supports before coming to the attention of child protection. Families involved with the child protection system can benefit from a more integrated and holistic model of service delivery to support their recovery from the trauma of DFV and associated parental MH and SM concerns.

Luu, B., Conley Wright, A., Schurer, S., Collings, S., Metcalfe, L., Heward-Belle, S. & Barrett, E.L. (2025). Understanding families with multiple, complex, and unmet service needs in the child protection system through the lens of linked administrative data in New South Wales, Australia, *Child Protection and Practice*, 100224, https://doi.org/10.1016/j.chipro.2025.100224

Family and cultural connections to support reunification for Aboriginal children in NSW

OVER-REPRESENTATION   **OUT-OF-HOME CARE**

The *Australian Journal of Social Issues* has published new findings from Bring Them Home, Keep Them Home, an Aboriginal-led study of pathways to reunification from out-of-home care for Aboriginal children in New South Wales. Thematic analysis of findings from 9 practitioner forums held in 2023 is presented.

Key Findings

Distinct service approaches are needed to support reunification of children on interim or long-term care orders due to differences in experiences, service accessibility, parental expectations, and system engagement. Specifically:

- Unreasonable demands are placed on parents of children on short-term orders to achieve restoration goals within two years with limited support
- The possibility of reunification for children on long-term orders is rarely reviewed in practice, leading many children to self-place with parents with limited support.

Reunification should be conceptualised from an Aboriginal perspective that values healing and preservation of family and community networks, rather than a legal perspective grounded in surveillance and control.

Current practices often isolate families from broader social supports and lack community consultation and collaborative work on Country that could prevent removals and facilitate restorations.

Family group conferences are often poorly timed, and viewed as an administrative task rather than a tool for family engagement and planning.

Aboriginal family-led decision making is challenging for families case-managed by DCJ or NGOs due to a lack of cultural support, leading to disrupted connections and delayed reunifications.

Ongoing-intensive supports are vital to families before and after reunification but are under-resourced. The levels of required support will change over time based on family need.

Number of participants by employer type

Aboriginal Controlled Community Organisation (ACCO)	21
Department of Communities and Justice (DCJ)	23
Non-governmental Organisation (NGO)	40
Total	**84**

"Family should be involved right there and usually they are not... It should be everyone, because as Aboriginal people, that is how we support each other, and it takes a community to raise a child."
- Aboriginal participant (ACCO)

"You have to tick all of these really extensive boxes and the court does not care if you are going through sorry business or if you just had a massive family breakdown or something happened or if you are about to lose housing."
- non-Aboriginal participant (DCJ)

"…there are really some unrealistic expectations that mum and dad both need to achieve, and I think there is this idea that mum and dad should be the best versions of themselves at the worst possible time of their lives."
- non-Aboriginal participant (NGO)

Conclusion

This study highlights how current child protection and court systems undermine reunification for Aboriginal families. Genuine progress requires resourcing and empowering Aboriginal community-led approaches, embedding Aboriginal legal and cultural frameworks, and ensuring holistic, long-term support for families to keep children connected, safe, and strong in culture.

Newton, B. J., Gray, P., Falster, K., Katz, I., & Cripps, K. (2025). Realising Aboriginal Community Controlled Approaches to Child Reunification. *Australian Journal of Social Issues, p.* 1–12. https://doi.org/10.1002/ajs4.70065

Economic case for reinvestment in Aboriginal and Torres Strait Islander community-controlled organisations in NSW

FAMILY SUPPORT SERVICES **OVER-REPRESENTATION**

A report by AbSec provides an evidence-based economic case for greater investment in Aboriginal-controlled community organisations (ACCOs) in New South Wales. It describes an economic model that was developed through a participatory process with ACCOs and community members.
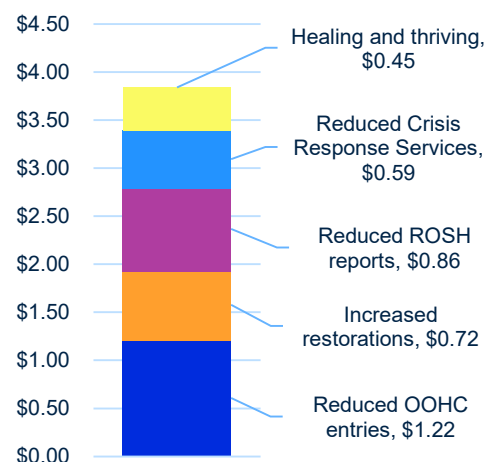
Key Findings

The economic model identified $3.83 in benefits for every additional dollar invested in early support through ACCOs.

Stakeholders advocated for greater investment in:

- Community-led child and family hubs and maternal-child health
- Peer-led advocacy and support services to build self-confidence and culturally-centred connections
- Housing, financial, and food security assistance because basic needs must be met for families to thrive
- Culturally-centred, trauma-informed, strength-based, therapeutic services in holistic health and early childhood education
- Invest in evaluation and research, workforce training, and regional and remote service accessibility

Economic return on ACCO investment

Healing and thriving, $0.45
Reduced Crisis Response Services, $0.59
Reduced ROSH reports, $0.86
Increased restorations, $0.72
Reduced OOHC entries, $1.22

Conclusion

Greater investment in ACCOs is needed to build on the strengths of Aboriginal families to ensure and young people remain safely with their families and strong in their connections to community, kin, culture and Country.

Absec. (2025). *The economic and social returns of Reinvesting in Families: Evidence-based economic case for investing in earlier, Aboriginal and Torres Strait Islander community-controlled organisation-led services*. Absec. https://apo.org.au/sites/default/files/resource-files/2025-08/apo-nid331892.pdf

Culturally-relevant program design in early intervention with Aboriginal and Torres Strait Islander families

FAMILY SUPPORT SERVICES **OVER-REPRESENTATION**

A literature review published in *Child & Family Social Work* examined 13 studies on early intervention programmes for Aboriginal and Torres Strait Islander families published between 2007 and 2024.

Features of Culturally Relevant Program Design

Aboriginal Governance and Leadership
- Delivery by Aboriginal community-controlled organisations, community co-design, multi-agency partnerships

Aboriginal Program Staff
- Enables trust and rapport-building

Aboriginal Cultural Safety Practices
- Communication styles, flexibility, integration of traditional child rearing practices

Conclusion

Culturally relevant early intervention program design promotes high participant engagement, improved parental well-being, and reduced rates of child protection involvement for Aboriginal and Torres Strait Islander families.

McGuire, E., and S. Roche. 2025. A Scoping Review of Public Health Approaches to Child Maltreatment Prevention With Aboriginal and Torres Strait Islander Families in Australia. *Child & Family Social Work* 1–14. https://doi.org/10.1111/cfs.70053.

Rapid review into child safety in early education and care in Victoria – key national and state recommendations

CHILD SAFE ORGANISATIONS

The Victorian Government has released a rapid review into child safety in early childhood education and care (ECEC) settings in response to allegations of sexual assault against children in long day care services in Melbourne. The review was conducted over a 6-week period and included jurisdictional data, findings from previous inquiries, other research, and stakeholder consultations with service providers, peak bodies, regulators, and groups representing the rights of parents and children.

National Recommendations

- New legislation to make the safety, rights and best interests of children paramount to the ECEC system as current frameworks are often interpreted as prioritising procedural fairness for employees and preventing proactive information sharing due to privacy laws.
- Create an inter-governmental agreement to clarify and better coordinate the roles and responsibilities of Commonwealth, state and territory, and local governments.
- New legislation to increase penalties for offences improve accessibility of information about service quality ratings to parents.
- Mandatory child safety training for everyone involved in ECEC provision, including those who do not work directly with children, and provide funding for time release to enable staff attendance
- Increased funding for effective regulation and a Child Care Quality Improvement programme
- Implement a National Early Childhood Reform Commission, capability review and modern risk assessment within the growing and complex sector
- Develop a long-term plan to move from a market-driven model towards a greater focus on quality and safety through funding reform, investment in high-quality and non-profit providers, and limiting unreasonable profit from public funding
- Stronger action to address poor-quality training courses
- Increase lines of sight and trial the use of closed-circuit television in centres
- Address organisational cultures which create barriers to reporting child safety concerns, including: blurred professional and personal relationships between staff, fear of reprisal about speaking up, and a lack of openness to feedback and complaints.
- Enhance workforce by improving staffing arrangements. A casualised, low-paid, undervalued, and in-experienced workforce with high rates of turnover is less able to promote child safety and respond to concerns.
- Implement a national approach to Working With Children Checks and a National Early Childhood Worker Register, including national information sharing and a database to enable continuous monitoring of clearance holders against police information, disciplinary findings and other information nationally.

Recommendations for the Victorian Government

- Improve information sharing within the Reportable Conduct Scheme
- Better support parents and workers to raise and report concerns
- Implement a new statement of expectations for best practice in recruitment and induction for employers
- Modify ratings certificates and publish enforcement activity more frequently
- Implement a professional support programme on quality, child safety, and safeguarding, including mandatory child safety training grounded in evidence on risks and prevention

Conclusion

The review made 22 recommendations on immediate and long-term actions to prevent predators from entering the ECEC system, quickly detect and exclude them, and prevent them from working with children again. It identified that the rapid expansion of a market-driven ECEC model creates service quality and safety risks that need to be addressed through a more assertive, directive and coordinated government approach to funding and management.

Weatherill, J. & White, P. (2025). *Rapid Child Safety Review.* State of Victoria (Department of Premier and Cabinet). www.vic.gov.au/rapid-child-safety-review

Child sex offenders' self-reported strategies to desist in offending behaviour

CHILD SAFETY   **CHILD SEX ABUSE**

An Australian Institute of Criminology study analysed anonymous posts in a darknet forum to explore undetected child sexual offenders' strategies to desist in offending. The dataset included 715 forum posts made between February 2012 and June 2022 by 276 unique international users who were mostly male.

Key Findings

- Forum users described formal help-seeking strategies, environmental changes, and behavioural changes to desist from engaging in child sex offences.
- The most frequently described strategy to avoid contact offending was viewing child sexual abuse material to avoid contact offending, including synthetic forms to avoid 'real' material. This strategy was often framed as morally acceptable and less risky, while failing to acknowledge how it harms children.
- Some forum users negatively viewed formal help-seeking strategies, framing them as conforming to societal norms and at odds with the group identity. These users used cognitive distortions to deny responsibility for offending and the harm that it causes.
- Forum posts rarely cited concern about harm to children caused by sexual offending, suggesting the desire to cease offending behaviour is motivated by fear of detection and associated life difficulties.

Identified help-seeking strategies	Forum user considerations
Individual psychological treatment	• Mostly viewed as effective, but it increased the risk of detection. • Some advised disguising the behaviours they wished to change or engaging in hypothetical discussions to avoid mandatory reporting.
Online therapy or sex addict support forums	• Services are anonymous to avoid detection.
Consuming child sexual abuse material	• Considered as a substitute for contact offending to reduce detection • Guilt or shame for this behaviour was rarely expressed. • Identified alternatives to 'real material' included 3D animation, literary erotica, roleplay and computer-generated materials. These were not considered by forum participants as harmful to children even when developed by altering genuine images of children.
Engaging in 'healthy' behaviours	• Some recommended physical activities, creative outlets, or spending time with other adults to reduce sexual thoughts about children.
Limiting contact with children	• Some recommended limiting contact to protect children and prevent fantasies. • Others indicated exposure helped to humanise children and reduce sexual urges.
Abstaining from the internet or restricting online behaviours	• Some stated they were not capable of self-control, so limited opportunities to offend by avoiding darknet forums that encourage offending or disconnecting internet connections.
Medication to reduce libido, aid self-control and support desistance	• Some expressed an interest in this strategy, but none indicated that they had tried it. • Others were opposed because they felt it would alter their personality or would not address the root cause of the problem.

Conclusion

Leveraging child offenders' fear of law enforcement detection can help reduce harm to children. Strategies may include public awareness campaigns focused on the risk of arrest and jail coupled with evidence-based psychosocial interventions which are perceived to have a low risk of detection.

Cahill, M., Cubitt, T., Wolbers, H., Napier, S., Ball, M., Hancock, J., & Broadhurst R. (2025). Self-reported desistance and help-seeking approaches of child sexual offenders on the darknet. *Trends & issues in crime and criminal justice* no. 716. Canberra: Australian Institute of Criminology. https://doi.org/10.52922/ti77925

Demographic Predictors of mental health outcomes following childhood sexual abuse

OUT-OF-HOMECARE   CHILD SEX ABUSE   ADOLESCENT MENTAL HEALTH

A study published in *Children & Youth Services Review* explored demographic variables linked to mental health conditions among children and young people who received services from a paediatric hospital-based sexual assault service in Victoria. Data consisted of hospital records for 1931 children and young people referred and accepted treatment between 2009 and 2019 after experiencing child sexual abuse (CSA) or engaging in problem/ harmful sexual behaviours (PSB/ HSB).

Key Findings

- 24% of the sample population had a diagnosed mental health condition, most commonly: anxiety/ suicidal ideation (9.4%), PTSD (9.2%), depression (7.7%), and self harm (6.9%).

- A logistical egression model assessed the impact of nine predictor variables for a mental health condition and correctly identified 77.1% of cases.

- Children and young people referred due to experiencing CSA were 2.10 times more likely as those referred for PSB/ HSB to have a mental health condition after controlling for all other variables.

- Five other independent variables made a unique statistically significant contribution to the model.

- Intellectual disability, older age, exposure to family and domestic violence (FDV), and female sex increased the odds of a mental health diagnosis.

- Placement in foster/kinship care decreased the odds of a mental health diagnosis, potentially due to under-detection.

- Three variables did not make a statistically significant contribution to the model, including: nationality/race, residential care placement and single or coupled parent

- The study did not examine: parental factors; onset/timing of abuse; online sexual exploitation or disaggregate most findings by reason for referral (CSA victim-survivors and PSB/ HSB).

Sample Demographics (n=1932)

Reason for referral
CSA	1413 (73.2%)
PSB/ HSB	490 (25.4%)
Other	*29 (1.5%)*

Sex
Female	1137 (58.9%)
Male	795 (41.1%)

Age at referral
0-4 years	191 (9.9%)
5-12 years	1133 (58.6%)
13-18 years	604 (31.3%)
19-25 years	4 (0.2%)

Nationality/ race
Non-Indigenous Australian	1465 (75.8%)
Indigenous Australian	136 (7.0%)
Other	*341 (17.2%)*

Living arrangement
Single parent family	891 (46.1%)
Coupled parent family	762 (39.1%)
Foster/kinship care	231 (12.0%)
Residential care	48 (2.5%)

Other variables
Intellectual disability	149 (7.7%)
Exposure to FDV	536 (27.7%)
ADHD	160 (8.3%)
ASD	155 (8.0%)
Mental health diagnosis	468 (24.2%)

Predictors of Mental Health Conditions

- Female: 0.63
- Intellectual disability: 1.79
- FDV exposure: 1.59
- Older age: 1.19
- Foster/kinship care: -0.37
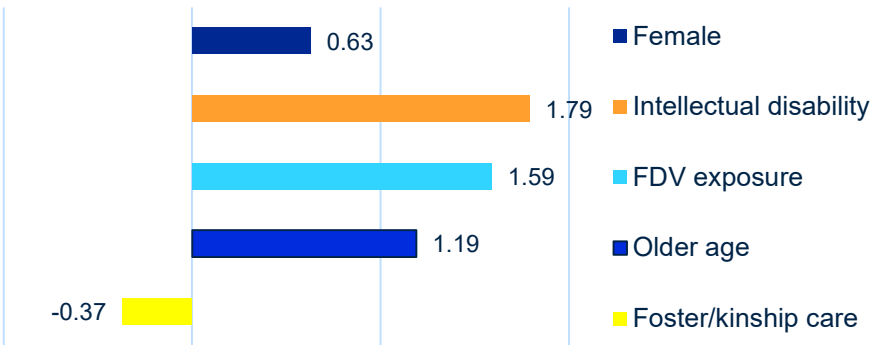
Conclusion

Children and young people who have experienced CSA have high rates of mental health conditions. Targeted early interventions is especially needed for children and young people with intellectual disabilities, those exposed to FDV, and older adolescents.

Sim, S. & Kambouridis, H. (2025). Relationship of demographic variables with mental health conditions in a childhood sexual abuse sample in a Victorian sexual assault service, *Children and Youth Services Review*, 108519, https://doi.org/10.1016/j.childyouth.2025.10851