

7 Fatal assault and neglect

Over the last 5 years, 28 children died due to fatal assault and neglect. Over half of these children were known to the child protection system within the 12 months prior to death.

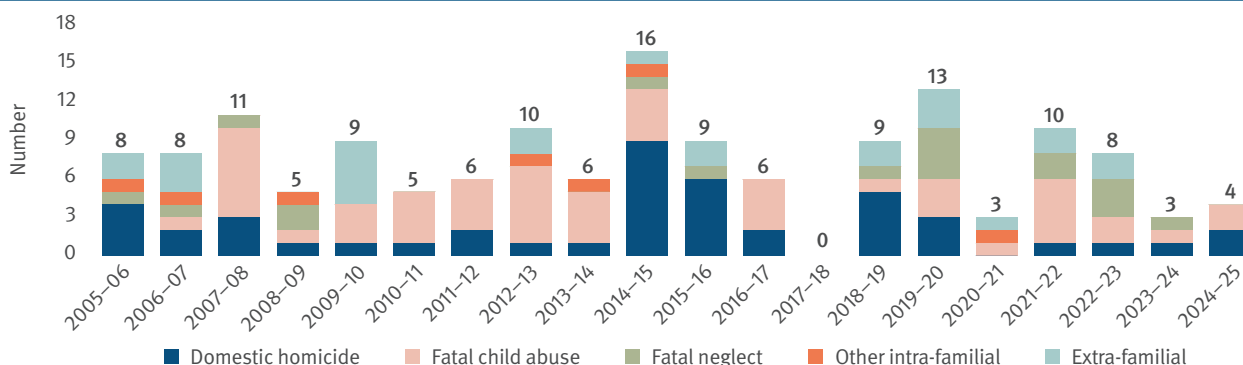
We remain committed to helping to prevent the occurrence of fatal assault and neglect incidents. This year we advanced a project aimed at strengthening the screening and classification of fatal assault and neglect cases within the Register. Through enriched classification we can deliver more robust and reliable identification of cases and better capture and report on the complex nature of risk factors contributing to these deaths. Through enhanced quality and depth of data, we can better support research, policy development and evidence-based action that strengthens early intervention and protection measures. This work is vital to safeguard at-risk children and helping to prevent future deaths.

We engaged Dr Holly Blackmore and Anna Butler to speak at the Australian and New Zealand Child Review and Death Prevention Conference about the Australian Domestic and Family Violence Death Review Network report, *Filicides in a domestic and family violence context 2010–2018*. The study examined cases of filicide that occurred within the context of domestic and family violence in Australia over a 9-year period. Prior domestic and family violence reports, missed intervention opportunities, and limited interagency coordination were identified as common characteristics across cases. The presentation emphasised the need for a unified, multi-agency response to prevent future filicide cases and ensure at-risk families receive the support they need before reaching crisis point.

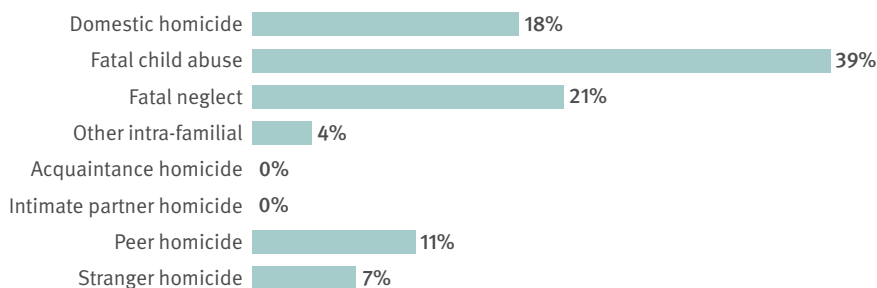
We were invited by Open Access Government, an international digital publication, to contribute an article on the findings of research we conducted with the University of Queensland. The study analysed filicide events between 2004 and 2020 to help identify critical indicators of elevated risk. By recognising and responding to red flags, professionals can play a vital role in preventing future tragedies. The article reinforces the importance of vigilance, cross-agency collaboration, and informed intervention strategies.

Key facts on child deaths from fatal assault and neglect

2005 to 2025

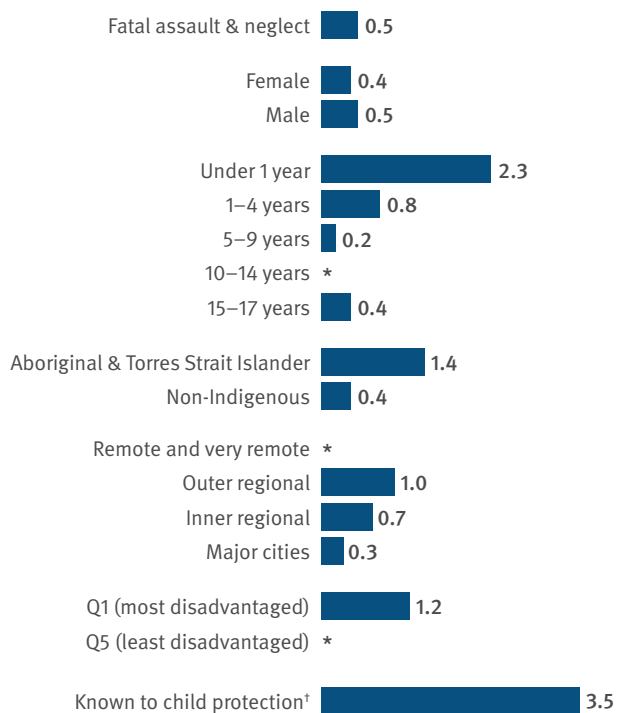


5-year summary (2020–2025) | Incident type



Proportion of fatal assault and neglect

Demographics



Rate per 100,000

Intra-familial fatal assault and neglect risk factors

78% child experienced previous abuse

52% household domestic and family violence

39% alleged perpetrator had history of offending

43% alleged perpetrator had alcohol and/or substance misuse

57% alleged perpetrator had suspected or diagnosed mental health issues

Notes: Counting is by date of death registration. Percentages may not add to 100 due to rounding.

* rate not calculated for numbers less than 4.

† in the 12 months prior to death.

Key findings

Deaths are classified as fatal assault and neglect where evidence available to the Commission indicates the child died as a result of inflicted injury or neglect, irrespective of whether a perpetrator has been identified and/or charged. Definitions for the types of fatal assault and neglect can be found in [Appendix C](#) and a description of the Commission's screening criteria can be found in [Appendix G](#) (both available at www.qfcc.qld.gov.au/sector/child-death/child-death-reports-and-data).

Based on information available to the Commission at the time of reporting, 4 deaths were identified as being the result of fatal assault and neglect in Queensland during 2024–25.

Over the last 5 years, 28 children died in fatal assault and neglect incidents. Twenty-three deaths were categorised as intra-familial, meaning that the alleged perpetrator was a parent, family member or person acting in a parental role. Five children died in domestic homicides. Eleven children were found to have died as a result of child abuse, 6 died from neglect and one was other intrafamilial.

Five deaths in the last 5 years were extra-familial homicides. Three deaths were peer homicides and 2 were stranger homicides.

Further summary information on deaths from fatal assault and neglect can be found in [Table A.9](#) in [Appendix A](#).⁸³

Age and sex

Infants under 1 year had the highest rate of death from fatal assault and neglect over the last 5 years (2.3 per 100,000), followed by children 1–4 years (0.8 per 100,000) and 15–17 years (0.4 per 100,000). Twenty-one out of the 23 children who died in intrafamilial homicides were aged under 9 years, while all of the extra-familial homicide deaths were young people aged 15–17 years.

Of the 28 children who died from assault or neglect in 2020–25, 12 were female and 16 were male (a rate of 0.4 and 0.5 per 100,000, respectively). Males are more at risk of experiencing extra-familial homicide, 4 out of the 5 extra-familial homicide deaths over the last 5 years were male.

Charges and criminal proceedings

Of the 28 fatal assault and neglect incidents during 2020–25, alleged perpetrators for 23 incidents have been charged, including one perpetrator who was subsequently deceased in a separate incident.

Vulnerability characteristics

Of the 28 child deaths from assault and neglect during 2020–25, 18 (64%) children were known to the child protection system within the 12 months prior to death. It is noted that 2 of the 18 children were only known to child protection due to the incident leading to their death.

Available evidence indicated the following factors⁸⁴ were present for the 23 children who died from intra-familial homicide in 23 incidents over the last 5 years:

- 78% had experienced child abuse prior to the incident (18 of 23 children)
- 52% had evidence domestic and family violence was present in the child's household (12 of 23 children)
- 39% of the alleged perpetrators had a history of criminal offending (9 of the 23 incidents)
- 43% of the alleged perpetrators had a history of alcohol or substance use (10 of the 23 incidents)⁸⁵
- 57% of the alleged perpetrators were identified as either having a diagnosed or suspected mental health issue (13 of the 23 incidents).

⁸³ Tables with data for 2005–25 are available online at www.qfcc.qld.gov.au/sector/child-death/child-death-reports-and-data

⁸⁴ The Commission collects information on vulnerability characteristics relating to the child, family and, where relevant, the perpetrator. The information is based on statements of fact or clear statements of opinion by credible external sources, as recorded in source documents (primarily police and coronial reports). The information is subject to limitations, in that it is based on those factors which can be identified in the source information. Given the small numbers in this analysis and these limitations, the findings are considered indicative only.

⁸⁵ Alcohol use – evidence the person exhibited problematic drinking behaviours such as binge drinking or the consumption of alcohol in settings or circumstances where it is not appropriate or safe to do so (e.g. while driving). Substance use – evidence of the use of illicit drugs, misuse of prescription medication or volatile substances.

Learnings

2025 Australian and New Zealand Child Death Review and Prevention Conference

Australian Domestic and Family Violence Death Review Network data report: *Filicides in a domestic and family violence context 2010–2018*



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Presenting at the 2025 Australian and New Zealand Child Death Review and Prevention Conference, Dr Holly Blackmore and Anna Butler spoke to the Australian Domestic and Family Violence Death Review Network data report, *Filicides in a domestic and family violence context 2010–2018*. This report is a product from the ongoing partnership between the Network and ANROWS.

The study examined cases of filicide that occurred within the context of domestic and family violence (DFV) in Australia between 2010 and 2018. Drawing from detailed case analyses, the study revealed how filicide intersects with histories of DFV and examined a range of issues including parental separation, mental health and alcohol or substance issues, and interactions with services, with all cases ending in the tragic deaths of children at the hands of their caregivers. Furthermore, the study identified common characteristics across cases, including prior DFV reports, missed intervention opportunities, and limited interagency coordination.

The presentation drew attention to key characteristics found within a NSW case study, for example, perpetrator complex health issues, financial hardship, coercive control, and systemic failures to adequately assess threats to a child's safety in a DFV-affected household. The presentation also exposed the compounding effect of DFV with other vulnerabilities, such as health issues and substance use, on the decision-making and protective capacity of parents.

The presentation concluded by emphasising the importance of early identification, the need to strengthen intervention pathways and for professionals in child protection, police, health, and education to operate under a coordinated, trauma-informed framework. Ultimately, there is a need for a unified, multi-agency response to prevent future filicide cases and ensure families receive the support they need before reaching crisis point.

View the presentation: www.qfcc.qld.gov.au/2025/ANZCDRPG-Conference

Read more:

www.anrows.org.au/publication/australian-domestic-and-family-violence-death-review-network-filicides/

<https://www.anrows.org.au/resources/fact-sheet-what-we-know-about-parents-killing-their-children-in-the-context-of-domestic-and-family-violence/>