

REVIEWING IMPLEMENTATION OF
THE ABORIGINAL AND
TORRES STRAIT ISLANDER
CHILD PLACEMENT
PRINCIPLE
QUEENSLAND
2021-23



SNAICC
National Voice for our Children

Acknowledgement

SNAICC shows respect by acknowledging the Traditional Custodians of Country throughout Australia and their continuing connections to land, waters and communities. SNAICC head office is located on the lands of the Wurundjeri People of the Kulin Nation, and SNAICC operates nationally. SNAICC acknowledges Traditional Owners of all lands and waters across this continent and pays respects to Elders past and present. We acknowledge and respect their continued connection to Country, care for community and practice of culture for generations uncounted.

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Acronyms and abbreviations

Acronym	Full name of acronym
AFLDM	Aboriginal Family-Led Decision-Making
AIHW	Australian Institute of Health and Welfare
ATSICCO	Aboriginal and Torres Strait Islander community-controlled organisation
Child Placement Principle	Aboriginal and Torres Strait Islander Child Placement Principle
DCSSDS	Department of Child Safety, Seniors and Disability Services
FPP	Family Participation Program
FSS	Family Support Service
GCO	Guardianship custody orders
IFSS	Intensive Family Support Service
IPA	Intervention with Parental Agreement
MRF	Monitoring and Review Framework
National Agreement	National Agreement on Closing the Gap
NATSIHS	National Aboriginal and Torres Strait Islander Health Survey
OOHC	Out-of-home care
Our Way	Our Way: A generational strategy for Aboriginal and Torres Strait Islander children and families 2017–2037
PCO	Permanent Care Order
QATSICPP	Queensland Aboriginal and Torres Strait Islander Child Protection Peak
QFCC	Queensland Family and Child Commission
ROGS	Report on Government Services
Safe and Supported	Safe and Supported: the National Framework for Protecting Australia's Children 2021–2031
SCRGSP	Steering Committee for the Review of Government Service Provision
SDM	Structured Decision Making
SNAICC	SNAICC – National Voice for our Children
TPPRO	Third-Party Parental Responsibility Order

Introduction

This report reviews the progress of the Queensland Government, primarily through the Department of Child Safety, Seniors and Disability Services (DCSSDS), in implementing the full intent of the Aboriginal and Torres Strait Islander Child Placement Principle (Child Placement Principle).

The five elements of the Child Placement Principle are: *Prevention, Partnership, Placement, Participation and Connection*.

The aim of the Child Placement Principle is to:

- embed an understanding that culture is integral to safety and wellbeing for Aboriginal and Torres Strait Islander children and young people and is embedded in law, policy and practice
- recognise and protect the rights of Aboriginal and Torres Strait Islander children, family members and communities in child safety matters
- support self-determination of Aboriginal and Torres Strait Islander people in child safety matters
- reduce the over-representation of Aboriginal and Torres Strait Islander children in child protection and out-of-home care (OOHC) systems.

This year's review analyses implementation efforts over 1 July 2021 – 30 June 2023. Quantitative data for 2022–2023 are included where available. The qualitative analysis considers developments occurring to 30 June 2024.

The annual jurisdictional reviews are developed by SNAICC – National Voice for our Children (SNAICC) with input from Aboriginal and Torres Strait Islander community-controlled organisations (ATSICCO) and state and territory governments. The reviews are informed by the best practice approach set out in SNAICC's Child Placement Principle resource series (SNAICC 2017, SNAICC 2018A), a 2018 baseline analysis (SNAICC 2018b), and subsequent annual reviews undertaken by SNAICC.

Quantitative and qualitative analysis is used to measure and review jurisdictions' progress against the five elements and across five interrelated systems elements—legislation, policy, programs, processes and practice.

Quantitative data is taken primarily from the 2024 Report on Government Services (ROGS) Chapter 16 – Child Protection (SCRGSP 2024), the Australian Institute of Health and Welfare (AIHW) *Child Protection Australia 2022–23* report (AIHW 2024a), and the AIHW *Aboriginal and Torres Strait Islander Child Placement Principle Indicators 2021–22* report (AIHW, 2024). OOHC figures in this review comprise 'out-of-home care' and 'third-party parental responsibility orders' from the AIHW report or, where indicated, 'out-of-home care' and other supported placement data from ROGS. Data on 'children of unknown Indigenous status in out-of-home care' have not been included in this review's figures, where relevant.

These reviews arise from *Safe and Supported: the National Framework for Protecting Australia's Children 2021–2031* (Safe and Supported). These reviews map implementation progress and gaps across Australia, highlight governments' reform successes and hold governments accountable to their efforts—or lack thereof—in achieving better outcomes for Aboriginal and Torres Strait Islander children and their families. In this way, these reviews align with the priority reform areas of the National Agreement on Closing the Gap (National Agreement), including Priority Reform 4 on improving Aboriginal and Torres Strait Islander peoples' access to data that affects them and their communities.

Overview

Queensland was the first jurisdiction in Australia to enshrine all five elements of the Child Placement Principle into child protection legislation. In May 2022, Queensland also became the first jurisdiction to embed a legislative requirement that child protection authorities make 'active efforts' to apply the Child Placement Principle when making significant decisions about Aboriginal and Torres Strait Islander children. Active efforts refer to purposeful, thorough, and timely efforts by child protection authorities to apply all elements of the Child Placement Principle. As the Queensland Family and Child Commission (QFCC) states, this is a positive shift away from the previous legal requirement of 'having regard to' the Child Placement Principle (QFCC 2022a).

The active efforts legislative requirement came into effect in May 2023, and, to assist with compliance, the Queensland Aboriginal and Torres Strait Islander Child Protection Peak (QATSICPP) released an *Active Efforts Guide* for practitioners working in the community-controlled sector with Aboriginal and Torres Strait Islander children and families (QATSICPP 2023a). Promisingly, the latest QFCC survey of the child protection workforce found that 92% of respondents agreed that they understood how the Child Placement Principle applies to their role—a statistically significant increase from 2022 (QFCC 2023a). While this indicates a growing awareness of the legislative requirement to apply the Child Placement Principle, progress is needed to see active efforts being made by authorities. In a 2022 analysis of case files of Aboriginal and Torres Strait Islander children in residential care the QFCC found there was no evidence of active efforts being made (QFCC 2022a). QFCC also raised concerns that the five elements of the Child Placement Principle are being reflected in programs and processes as 'separate and linear', despite the elements being interdependent (QFCC 2022a). This lack of a holistic approach means there is a risk of uneven implementation of the five elements.

Prevention

Aboriginal and Torres Strait Islander families and communities have been raising happy, healthy and resilient children who enjoy a strong connection to culture for generations. Despite these strengths, as of 30 June 2023, in Queensland, Aboriginal and Torres Strait Islander children were 9.4 times more likely than non-Indigenous children to be in OOH or other supported placements.¹ This is the highest rate of over-representation seen in the past decade (SCRGSP 2024, Table 16A.2, 16A.3 and 16.A.42).

¹ The source of this data is different from the Family Matters 2024 report and numbers will therefore differ

In 2022–23, 11.4% of Queensland government expenditure on child protection went to Family Support Services (FSSs) and Intensive Family Support Services (IFSSs), below the national rate of 15.3% (SCRGSP 2024, Table 16A.8). This was a slight drop from a rate of 12.3% in 2021–22 and part of a steady decline from 16.4% in 2017–18 (SCRGSP 2024, Table 16A.8). Despite this—when compared across all jurisdictions—Queensland had the second highest proportion of expenditure on Aboriginal and Torres Strait Islander community-controlled organisations (ATSICCOs) for the delivery of FSSs and IFSSs in 2021–22, at 20.3% (SNAICC 2023, Table 3).

Partnership

In September 2023, the next action plan for *Our Way: A generational strategy for Aboriginal and Torres Strait Islander children and families 2017–2037* (Our Way) was released, titled *Breaking Cycles*, which will cover 2023–2025. This action plan, co-designed with QATSICPP outlines several actions towards transforming how the government partners with ATSICCOs, including a plan for delegating decision-making authority about child protection and transitioning service investment towards ATSICCOs. There were also continued calls for the establishment of a dedicated Commissioner for Aboriginal and Torres Strait Islander Children and Young People in Queensland.

Placement

As of 30 June 2023, 24.5% of Aboriginal and Torres Strait Islander children in Queensland OOHC were placed with Aboriginal and Torres Strait Islander relatives/kin, below the national rate of 32.2% (SCRGSP 2024, Table 16A.23). This was an increase from a rate of 22.8% as of 30 June 2022 and 21.7% as at 30 June 2021.

Efforts are being made to identify and support kinship carers to be able to care for Aboriginal and Torres Strait Islander children, such as establishing Kinship Care teams in different regions. A significant barrier for Aboriginal and Torres Strait Islander kinship carers had been successfully receiving a ‘Blue Card’ (i.e. working with children check). The QFCC highlighted that the Blue Card is not a fit-for-purpose process to assess kinship carers, recommending it is removed entirely (QFCC 2023d). In response, the *Working with Children (Risk Management and Screening) and Other Legislation Amendment Bill 2024* was introduced, which will remove the Blue Card requirement for kinship carers.

Unfortunately, the use of residential care as a placement option has been increasing. QATSICPP analysis found the use of residential care for Aboriginal and Torres Strait Islander children increased by 182% between 2013 and 2022, the fastest-growing rate in any jurisdiction (QATSICPP 2023c, Page 5). A government review of the residential care system was completed between July to December 2023, with a proposed five-year Roadmap based on review findings currently under consideration by the government.

Participation

Aboriginal and Torres Strait Islander family-led decision-making in child protection continued through the Family Participation Program in Queensland. The program is delivered through 15 ATSICCOs and the government announced an additional \$22.5 million in funding over four years from 2024–25 for

the program (DCSSDS 2023b). Outcomes data from the program was not publicly available. In 2023, the DCSSDS also released a *Decisions about Aboriginal and Torres Strait Islander children* policy to guide Child Safety practitioners, which steps out in detail about how Aboriginal and Torres Strait Islander people must be supported to participate in decisions about children.

Connection

As of 30 June 2022, Queensland was the jurisdiction with the second-highest reported proportion of Aboriginal and Torres Strait Islander children with a current cultural support plan, at 95.2% which was slightly lower than the Australian Capital Territory's result of 95.5% (AIHW 2024, Table 10.5). However, there are concerns about the detail and quality of these plans (QFCC 2022a). As of 30 June 2022, 7.3% of Aboriginal and Torres Strait Islander children in OOHC (including those on long-term guardianship, custody and third-party parental responsibility orders) were reunified with family (AIHW 2024a T3, AIHW 2024b: Table 10.18). There are concerns about an increase in permanency arrangements where children are placed under the guardianship of Child Safety, with 85% of Aboriginal and Torres Strait Islander children in 2022 on a child protection order being under long- and short-term guardianship orders (QFCC 2023e). This is concerning when reunifications should be the priority or a permanent care arrangement with relatives/kin.

Prevention

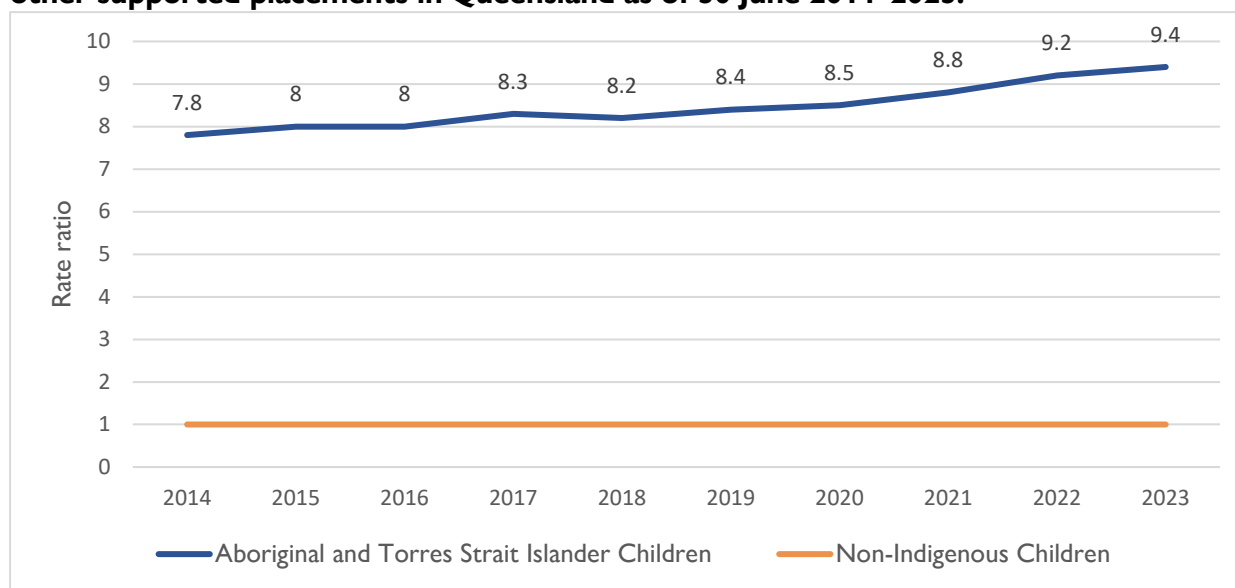
The prevention element of the Child Placement Principle aims to ensure that Aboriginal and Torres Strait Islander children and their families grow up healthy and safe, and within their own family and community. Preventing children and families from entry into the child protection system requires collaboration between various services and programs that span multiple government sectors, such as health, education, housing, and economic development.

Over-representation in out-of-home care

As of 30 June 2023, Aboriginal and Torres Strait Islander children accounted for 46% (5,396 out of 11,658 children) of the total number of children in OOHC or in other supported placements², despite only making up 8.4% of the total population of children (0–17) in Queensland (SCRGSP 2024, Table 16A.2, 16A.3 and 16A.42). This is compared to a proportion of 45% (5,159 out of 11,378 children) in 2022 and 44% (4,911 out of 11,110 children) in 2021.

As of 30 June 2023, Aboriginal and Torres Strait Islander children were 9.4 times more likely than non-Indigenous children to be in OOHC or in other supported placements, increasing from 9.2 times more likely in 2022 (SCRGSP 2024, Table 16A.2, 16A.3 and 16A.42). This is the highest rate of over-representation of Aboriginal and Torres Strait Islander children in the child protection system seen in the past decade in QLD (see Figure 1).

Figure 1 – Rate ratios of Aboriginal and Torres Strait Islander children in OOHC and other supported placements in Queensland as of 30 June 2014–2023.



Source: SNAICC calculation of rate ratios, with data drawn from - Report on Government Services 2024, Part F, Section 16 Child Protection Services. Table 16A.2, 16A.3 and 16A.42

² National out-of-home care counting rules changed for all states and territories in 2018-19 and now exclude children on TPPROs from the count of children in OOHC. SNAICC believes that this change seriously undermines transparency and accountability, effectively rendering these children invisible in the system. The number of children on TPPROs is reported in the annual AIHW *Child Protection Australia* publication. Children in 'other supported placements' include TPPROs and certain types of immigration orders. SNAICC has elected to use data on other supported placements for 2022-23 as disaggregated data about children on TPPROs has not yet been released. Past years' data are included for comparison. Because these calculations are based on other supported placements, they will differ slightly from overrepresentation data which only includes children in out-of-home care and on TPPROs. For calculations of overrepresentation rates based on only children in out-of-home care and on TPPROs, see the annual *Family Matters* Reports.

The QFCC regularly publishes detailed data on over-representation in the Queensland child protection system. QFCC regular reporting and the annual Family Matters Report both state that reducing over-representation of Aboriginal and Torres Strait Islander children will require:

- exits to exceed entries into child protection
- a reduction in the duration of time children spend in care
- a short-term focus on reunification to increase exits from out-of-home care
- a long-term focus on reunification to reduce the duration of time in out-of-home care (QFCC 2023b; SNAICC 2023)

An issue related to the duration of time in care is the early age at which Aboriginal and Torres Strait Islander children enter OOHC, sometimes as infants (under one year old). It is promising to see that the over-representation rate of Aboriginal and Torres Strait Islander infants in OOHC has been reduced. As at 30 June 2022, Aboriginal and Torres Strait Islander infants were placed into OOHC at 7.9 times the rate of non-Indigenous children, compared to 9.0 times the rate of non-Indigenous children as at 30 June 2021 (AIHW 2023, Table S5.5). It should also be acknowledged Queensland's 2022 infant over-representation rate is lower than the national average of 13.6 as at 30 June 2022 (noting ACT and NT data is not available). To further reduce this over-representation, families need to be supported earlier to address any concerns and, where prenatal notification or 'unborn reports' are made, ATSICCOs must be involved and adequately resourced to support families to avoid the removal of infants into OOHC.

Preventing entry into the child protection system is most effective when initiated as early as possible, to prevent any kind of intervention by child protection authorities altogether. Before exploring efforts focused on this, it is important to recognise efforts to improve the quality of early interactions with the child protection system.

Action 1.5 from the *Breaking Cycles Action Plan 2023–25* (Breaking Cycles) commits to the implementation of a culturally safe and responsive intake process. Two trial sites were underway in 2023 to pilot a new intake model, which could reduce cultural bias in how investigation and assessment are carried out by child protection authorities (DCSSDS 2023a). The pilot model involves Aboriginal and Torres Strait Islander staff within the intake team receiving all the intakes for Aboriginal and Torres Strait Islander children, aiming to redirect matters to the secondary system where possible. Whilst this is a positive step forward, this model was not co-designed with Aboriginal and Torres Strait Islander people and is likely to increase the number of referrals to ATSICCOs without any increase in funding.

Relevant to this reform is the DCSSDS's decision in August 2022 to remove three of the eight Structured Decision Making (SDM) tools from practice, on advice from the Queensland First Children and Families Board Research into the SDM screening tool, which is used for decisions about child protection intervention. The research found that the screening tool resulted in racially biased outcomes and inaccurately predicted risks for Aboriginal and Torres Strait Islander children and families (ABC 2020).

To prevent the removal of children into OOHC in Queensland there is the option to utilise an Intervention with Parental Agreement (IPA). QFCC highlight that an IPA can avoid a court-ordered intervention which means Child Safety services work to support parents to meet a child’s protection and care needs. In Queensland, there was a total of 778 Aboriginal and Torres Strait Islander children subject to an IPA in 2020–21, making them eight times more likely to be subject to one than non-Indigenous children (QFCC 2022b, page 11). While an IPA has the potential to prevent the removal of children, the QFCC in its 2022 report highlighted that implementation must align with the Child Placement Principle, with a priority being resourcing of ATSICCOs to design and deliver services to those subject to an IPA (QFCC 2022b). Early intervention should be based on facilitating access to support services for families and children who are in need and may be subject to an IPA, rather than being used as a case to remove children from their families.

While these efforts regarding intake reform, screening tools and IPA do contribute to prevention, there is a narrow focus on preventing the removal of children into OOHC. As the QFCC concluded in its investigation into children in residential care, the prevention element of the Child Placement Principle is often narrowly interpreted in Queensland, instead of a broader consideration of the social determinants of health (QFCC 2022a), which can help prevent any kind of interaction with the child protection system.

Family Support and Intensive Family Support Services

In 2022–23, 11.4% of Queensland Government expenditure on child protection went to FSS and IFSS, below the national rate of 15.3% (SCRGSP 2024, Table 16.8). This continues a year-on-year decrease, as shown in Table 1 below:

Table 1 – Proportion of Queensland government child protection expenditure on FSS and IFSS, by year

	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23
The proportion of expenditure on FSS and IFSS	16.4%	16.3%	15.9%	14.2%	12.3%	11.4%

Source: Report on Government Services 2024 report, Table 16A.8

In 2022–23, Aboriginal and Torres Strait Islander families were 12.3 times more likely to commence IFSS than non-Indigenous families (SCRGSP 2024, Table 16A.35 and Table 16A.42). This is consistent with previous years, with rates of 12.5 in 2021–22 and 11.5 in 2020–21 (SCRGSP 2024, Table 16A.35, Table 16A.42). In regard to IFSS expenditure per child, in 2022–23 the real recurrent expenditure per child in Queensland was the equivalent of \$116.86, above the national average of \$100.20 (SCRGSP 2024, Table 16A.8). This is an increase from 2021–22, where the real recurrent expenditure per child in Queensland was \$110.26, and \$113.65 in 2020–21 (SCRGSP 2024, Table 16A.8).

Queensland had the second highest proportion of expenditure on ATSICCOs for the delivery of FSS and IFSS in 2021–22, at 20.3% (SNAICC 2023, Table 3). In Queensland, these services by ATSICCOs

are accessible from Family Wellbeing Services, a ‘one-stop shop’ for Aboriginal and Torres Strait Islander family services (FWS 2023). Evaluation has found that Family Wellbeing Services are effective—of the Aboriginal and Torres Strait Islander children who had most—or all—of their needs met through Family Wellbeing Services, as at 30 June 2023, 89.4% required no further contact with the DCSSDS for the following six months (FWS 2024). A 2023 QFCC survey of statutory child protection system workers found that the introduction of ATSICCO-operated Family Wellbeing Services has resulted in improved access to early intervention for Aboriginal and Torres Strait Islander families (QFCC 2023a).

Social determinants of child protection involvement

From 2021 to 2023, in Queensland, there continued to be a range of social, economic and health challenges that can contribute to Aboriginal and Torres Strait Islander children entering OOHC. These challenges, as well as recent activity to address them, are outlined below:

Barriers to education

QATSICPP consultation with communities found the high cost of early childhood education and care excludes many families from accessing these services (QATSICPP 2022). Service data echoes this, with Aboriginal and Torres Strait Islander children aged 3–5 years old less likely than non-Indigenous children in Queensland to be enrolled in a government-approved preschool program (SNAICC 2023). Actions 7.4, 7.5 and 7.6 from *Breaking Cycles* relate to building culturally responsive education but do not address this affordability gap.

Homelessness and lack of affordable housing

Aboriginal and Torres Strait Islander people in Queensland are 6 times more likely to experience homelessness than non-Indigenous people and twice as likely to experience severe overcrowding (Queensland Government 2023). The government is establishing the *Aboriginal and Torres Strait Islander Housing Action Plan 2024–2027* to address this challenge. Action 7.3 of *Breaking Cycles* also commits to the development of an integrated service response to address the housing needs of families in contact with the child protection system.

Poverty

21.1% of Aboriginal and Torres Strait Islander households have incomes of less than \$400 a week, compared to 9.9% for non-Indigenous households; and seven out of 10 Aboriginal and Torres Strait Islander people live in the highest ranges of social disadvantage in Queensland (QATSICPP 2022). QATSICPP consultation with communities when developing *Breaking Cycles* recommended flexible funding packages for services to purchase basic goods and services for families to address intergenerational poverty, as well as financial counselling and literacy programs for families. (QATSICPP 2022).

Gaps in health and mental health provision

A QFCC 2023 community survey found that Aboriginal and Torres Strait Islander respondents were more likely to disagree that youth mental health services in their area were culturally appropriate (22% compared to 15% of non-Indigenous respondents) (QFCC 2023c). Action 7.2 of *Breaking Cycles* commits to a review of all *Health Equity Strategies 2022–2025* to ensure access to culturally safe health

and mental health services. Action 4.3 of Breaking Cycles also commits to the implementation of the *Growing Deadly Families Aboriginal and Torres Strait Islander Maternity Services Strategy 2019–2025*. QATSICPP consultation with communities found that many communities want to establish wellbeing or health centres within their community or on Country (QATSICPP 2022).

Disability

According to the ABS National Aboriginal and Torres Strait Islander Health Survey (NATSIHS), children under 18 years of age accounted for 24% of all First Nations people living with disability (NATSIHS, page 45). There is also a concern that disability support is being provided too late and not acting as a preventative mechanism, with many Aboriginal and Torres Strait Islander children potentially only registering for NDIS support after entering residential care (QATSICPP 2023c).

Family violence

Recent research into Aboriginal and Torres Strait Islander children and families who experience family violence in Queensland highlighted the lack of culturally responsive family violence support services (Morgan et al 2023). While the Queensland Government has the *Domestic and Family Violence Prevention Strategy 2022–2026* currently in place, it is lacking a focus on the specific needs of Aboriginal and Torres Strait Islander people. A short Aboriginal and Torres Strait Islander Domestic and Family Violence Framework was released in 2019, but it is now significantly out of date (Queensland Government 2019).

Partnership

To improve the wellbeing of Aboriginal and Torres Strait Islander children and families, governments and key stakeholders must establish and maintain genuine partnerships with Aboriginal and Torres Strait Islander communities. Ensuring meaningful involvement of Aboriginal and Torres Strait Islander people in all aspects of design, delivery and decision-making within child protection systems is an essential element of the Child Placement Principle.

In May 2023, an amendment commenced to the Queensland *Child Protection Act 1999* to clarify the partnership element of the Child Placement Principle and the rights of Aboriginal and Torres Strait Islander peoples. The relevant section now reads:

- “(b) *the principle (the partnership principle) that Aboriginal or Torres Strait Islander persons have the right to participate in—*
- (i) *significant decisions under this Act about Aboriginal or Torres Strait Islander children; and*
 - (ii) *decisions relating to the development and delivery of services, provided by the department, that—*
 - (A) *support Aboriginal or Torres Strait Islander families; or*
 - (B) *provide for the care or protection of Aboriginal or Torres Strait Islander children”*

This establishes a strong legislative requirement for partnership, and monitoring the degree to which this is adhered to will be an ongoing priority to hold the government accountable.

In September 2023, the next action plan for Our Way was released, titled *Breaking Cycles*, which will cover 2023–2025. The release of this action plan follows an extensive evaluation of the previous action plan, *Changing Tracks*, and community consultation undertaken by QATSICPP, which made several recommendations for improving approaches to partnership. A key finding was that many stakeholders wanted a stronger whole-of-government commitment to the implementation of Our Way, including central agencies, instead of sole responsibility for the child protection portfolio (Deloitte Access Economics 2022).

Adequately resourcing the ATSICCO sector to engage in partnership is another prerequisite for the success of a strategy like Our Way. The Queensland First Children and Families Board (Board) has continued to be supported to provide oversight of Our Way since the Board's establishment in 2018.

Delegated authority and service transition

The DCSSDS provides funding to QATSICPP to co-design and implement the statewide delegation of authority for child protection functions to the ATSICCO sector. In April 2023, the *Reclaiming our Storyline* delegated authority implementation plan was released that outlines the steps that need to be taken for full and sustainable delegation to occur by 2032 (DCSSDS and QATSICPP 2023). Delegation of powers and functions began in 2020 through early adopter organisations Central Queensland Indigenous Development (CQID) and Refocus. A Delegated Authority team has been set up in the DCSSDS with 14 regionally based staff and a central team of five. QATSICPP have been funded for a Delegated Authority team of five, and the evaluation of the project (QATSICPP 2023b). The DCSSDS reports that a total of \$107.8 million over four years from 2023–2024 to 2027–2028 has been allocated to support the implementation of delegated authority (DCSSDS 2023b).

Under *Breaking Cycles*, there is a commitment to transfer the funding and services for Aboriginal and Torres Strait Islander children from non-Indigenous NGOs to ATSICCOs by 2032. One of the initial deliverables is an ATSICCO sector readiness plan that is yet to be released. As highlighted above in Prevention concerning ATSICCO delivery of FSS and IFSS, there is still a significant way to go to achieve the transition of service delivery. It should also be noted that Queensland has a very low rate of investment for ATSICCOs to deliver OOHHC services at 0.6%, compared to other jurisdictions such as NSW (7.4%), Victoria (5.34%) and South Australia (5.1%) (SNAICC 2023, Table 3).

Accountability mechanisms

Mechanisms that hold parties accountable are key to any partnership. Under *Breaking Cycles*, Action 8.2 commits to establishing a mechanism for Aboriginal and Torres Strait Islander young people to have a voice to influence the implementation of Our Way.

During community consultations in relation to Our Way in September 2022, QATSICPP made several recommendations about accountability. This included co-creating performance indicators for government departments to demonstrate how they are transforming to be more culturally responsive (QATSICPP 2022). There has been no action on this recommendation from government departments to date.

Another piece of the accountability framework that is missing in Queensland is a dedicated, fully empowered and legislated Commissioner for Aboriginal and Torres Strait Islander children and young people, although a commitment was made in April 2024 to establish one. Both QFCC and QATSICPP have consistently called for a dedicated and independent role to be established. These calls were further reinforced by a report of the Legal Affairs and Safety Committee of Queensland Parliament, which recommended that the Queensland Government consider implementing several QFCC recommendations including a dedicated Commissioner for Aboriginal and Torres Strait Islander children and young people (Queensland Parliament 2024).

Also relevant to accountability and partnership is progress towards a treaty between Aboriginal and Torres Strait Islander people and the Queensland Government. In May 2023, the *Path to Treaty Act 2023* passed the parliament and committed to establishing a legal framework for a truth-telling and healing inquiry to occur across three years, and for a First Nations Treaty Institute to be established. However, in October 2023, the Queensland Liberal National Party withdrew its support for the treaty process and subsequent comments from then QLD Premier Anastacia Palaszczuk indicated that bipartisan support is needed for implementation to occur (Guardian 2023).

Placement

When a child is to be placed in OOHC, the Child Placement Principle placement hierarchy ensures that Aboriginal and Torres Strait Islander children maintain connection to their family, community, culture and Country.

The DCSSDS's *Strategic Plan 2022–2026* (Strategic Plan) has two specific performance indicators in relation to placement aiming for a reduction in the proportion of children in residential care and an increase in the proportion of children in kinship care (DCSSDS 2022). While not stated in the Strategic Plan, the DCSSDS states it aims to increase the proportion of children in kinship care to 70% by 2026 (DCSSDS 2023b, DCYMA 2022). A specific target for the reduction in residential care has not been stated, currently sitting at 15.5% in 2022 (DCYMA 2022).

Table 2 – Aboriginal children in QLD aged 0–17 in out-of-home care, by caregiver type (per cent), as of 30 June 2017–2023.

	2017	2018	2019	2020	2021	2022	2023
Placed with relatives/kin or other Aboriginal carer							
Aboriginal relative/kin	23.8	24.7	21	20.5	21.7	22.8	24.5
Non-Indigenous relative/kin	19.3	18.5	13.9	15.6	17	17.5	19.0
Total placed with relatives/kin	43	43.2	34.8	36.1	38.7	40.3	43.5
Other Aboriginal and Torres Strait Islander carer	12.7	12.2	13.3	12.6	11.9	11	10.3
Total	55.8	55.4	48.1	48.7	50.7	51.3	53.8

In another care arrangement							
Other non-Indigenous carer	35.7	35.4	40.7	39	35.6	33.3	30.4
Residential care or family group home	8.6	9.1	11.2	12.3	13.7	15.5	15.8
Independent living/living arrangements unknown	-	-	-	-	-	-	-
Total	44.2	44.6	51.9	51.3	49.3	48.7	46.2

** Note 2017 and 2018 data included % for Aboriginal and Torres Strait Islander residential care and non-Indigenous residential care - these have been added together. Also, 2017 and 2018 data include children in care and other supported placements.

* – Nil or rounded to zero.

Source: Report on Government Services 2024, Part F, Section 16 Child Protection Services, Table 16A.23

As Table 2 shows, the proportion of placement with relatives/kin remains relatively stable between 2017 and 2023, while placement in residential care has in fact increased during that period. This indicates there is significant work required to change these trends.

As at 30 June 2023, 24.5% of Aboriginal and Torres Strait Islander children in Queensland OOHC were placed with Aboriginal and Torres Strait Islander relatives/kin—which is the third lowest rate in Australia, above Tasmania’s 17% and the Northern Territory’s 23.8% (SCRGSP 2024, Table 16A.23).

Kinship carers

In May 2023 an amendment to the *Child Protection Act 1999* commenced which clarified the definition of kin to ensure that determination of kin for Aboriginal and Torres Strait Islander children includes mapping, identification and support for people who have a cultural connection to a child.

To follow through with this legislative requirement, the DCSSDS has established Kinship Care teams across regions to find, assess and support kin carers with some of these teams partnering with ATSICCOs (DCSSDS 2023b). In addition, the DCSSDS reports that new Kinship Care Investment Specifications are being trialled to improve financial support to carers and carer households (DCSSDS 2023b). QATSICPP reported, from community consultation on *Our Way*, that more kinship carers are needed and recommended that approving more than one kinship carer is effective so responsibilities can be shared across the kinship system (QATSICPP 2022).

Action 5.2 of *Breaking Cycles* commits to implement the Family Caring for Family model of care, which aims to identify and support families to care for their children and maintain connections to family, culture and Country. The DCSSDS reports that in partnership with QATSICPP, it is currently trialling this model, which aims to enable families to care for children outside of the OOHC system. QATSICPP’s modelling for the Family Caring for Family program found that in one region, the program would cost a quarter of the current cost of accommodating 119 children in residential care (QATSICPP 2023c). This activity also relates to the Connection element of the Child Placement Principle. There is limited public information about the program to date with an information guide for carers not currently tailored to Aboriginal and Torres Strait Islander people (DCYMA 2021).

A significant barrier for Aboriginal and Torres Strait Islander kinship carers had been successfully receiving a 'Blue Card' (i.e. working with children check). As the QFCC highlighted in a 2023 report, often Aboriginal and Torres Strait Islander kinship carers are provisionally approved as a carer by the DCSSDS but then are not approved to receive a Blue Card, managed by a separate area of government (QFCC 2023d). The QFCC highlighted that the Blue Card is not a fit-for-purpose process to assess kinship carers, recommending it is removed entirely as a requirement and instead elevating the DCSSDS provisional assessment to a formal approval process (QFCC 2023d). In response, the *Working with Children (Risk Management and Screening) and Other Legislation Amendment Bill 2024* was introduced, which will remove the Blue Card requirement for kinship carers.

Residential care

There has been significant attention on the increased use of residential care as a placement option for Aboriginal and Torres Strait Islander children in Queensland, which QATSICPP calculates has increased by 182% between 2013 and 2022, not including the normal increase in demand for OOHC placements (QATSICPP 2023c). This makes Queensland the jurisdiction with the fastest-growing use of residential care in Australia (QATSICPP 2023c). Aboriginal and Torres Strait Islander children are disproportionately represented in residential care, making up 47% of all children in residential care in Queensland (QATSICPP 2023c, page 4).

The QFCC highlights that it appears residential care use is increasing, and is often being perceived as a first placement option, due to a lack of availability of suitable family-based care placement options, such as foster care and kinship care, due to the overextension of the system. Children are 'fail[ing] into residential care', with authorities defaulting to residential care as the first placement option (QFCC 2022a). This approach is despite the fact that residential care should not be utilised as a placement according to the placement hierarchy (SNAICC 2018a).

QATSICPP also highlights that the overall evidence is that long-term outcomes for children placed in residential care are poor and specific evidence for Aboriginal and Torres Strait Islander children is lacking (QATSICPP 2023c). QATSICPP, in its recent submission to the Queensland Government's Residential Care Review, recommended that Aboriginal and Torres Strait Islander communities and organisations be urgently engaged to develop placement alternatives to the predominant three placement options of foster, kinship and residential care (QATSICPP 2023c). QATSICPP notes that this is an interim measure while the broader system reforms under *Our Way* occur, to prevent further increased use of residential care as a placement (QATSICPP 2023c).

The Queensland Residential Care Review delivered its findings in 2024 and released a proposed Roadmap for Residential Care that is currently being considered by the government. This proposed review commits to several actions including establishing an innovation fund as per the above recommendation from QATSICPP, as well as reviewing every Aboriginal and Torres Strait Islander child in residential care and redesigning the Safe House model (DCSSDS 2024).

Participation

It is important that children in contact with the child protection system—along with their families—are actively involved in any decisions concerning their care. This is particularly important for Aboriginal and Torres Strait Islander children and young people.

In Queensland, efforts to implement the Participation element primarily occur through the Family Participation Program (FPP), a program specifically for Aboriginal and Torres Strait Islander families, often known in other jurisdictions as Aboriginal Family-Led Decision-Making (AFLDM). Action 5.1 of Breaking Cycles commits to increased investment in FPP and, in 2022–23, the Queensland Government committed \$14.9 million to the program (DCSSDS 2023b). The DCSSDS reports that FPP is delivered through 15 funded ATSICCOs and that an additional \$22.5 million in funding over four years from 2024–25 has been allocated to expand the program.

Unfortunately, data on the usage of FPP was not made available by the DCSSDS for this review. Outside of FPP, QATSICPP has identified concerns with a lack of governance frameworks for Aboriginal and Torres Strait Islander people to take part in placement decisions (QATSICPP 2023c). QFCC survey data indicates this lack of governance frameworks is leading to child protection decision-making that is not responsive. In 2023, the QFCC’s survey of parents found that only 39% of Aboriginal and Torres Strait Islander respondents agreed their culture, background, language and practices were respected, understood and considered in decisions about their family (QFCC 2023g). QATSICPP recommends that a ‘best interests test’ be embedded into decisions about Aboriginal and Torres Strait Islander child placement, which would require Aboriginal and Torres Strait Islander oversight and leadership (QATSICPP 2023c).

In 2023, the DCSSDS released the *Decisions about Aboriginal and Torres Strait Islander children* policy to guide child safety practitioners, which steps out in detail about how Aboriginal and Torres Strait Islander people must be supported to participate in decisions about children. This detailed guidance is an important step in ensuring that active efforts are made in relation to the Participation element that is enshrined in the *Child Protection Act 1999*.

Connection

When placing an Aboriginal and Torres Strait Islander child in OOHC, maintaining a strong connection with culture, family and community is a vital component to ensuring a child’s ongoing wellbeing and safety.

It is promising to see QFCC survey data that found that Aboriginal and Torres Strait Islander respondents were more likely than non-Indigenous respondents to agree that their children and young people in their community are supported to connect with their culture (73% compared to 58% overall) (QFCC 2023c). However, maintaining this connection for Aboriginal and Torres Strait Islander children remains a significant challenge, especially for those involved in the child protection system and those placed with non-Indigenous carers.

The DCSSDS reports that it is replacing its current Integrated Client Management System with the 'Unify' system, which will improve the collection and use of client cultural information (DCSSDS 2023b). This is especially relevant to the Connection element and other Child Placement Principle elements; however, it is unclear how this information will be shared with ATSCCOs.

Cultural support plans

As at 30 June 2022, Queensland was the jurisdiction with the second-highest reported proportion of Aboriginal and Torres Strait Islander children with a current cultural support plan, at 95.2%, which is far above the national average of 78% (AIHW 2024, Table 10.5). In 2022, the Queensland Government Child Safety Practice Manual was updated to include a short section titled 'Who should participate in the development of the cultural support plan?', further building on other information in the manual about cultural support plans. However, in a recent analysis of cultural support plans for children in residential care, the QFCC found that these plans 'lacked detail and did not document how the child or young person would maintain connection with kin, country, and culture' (QFCC 2022a). This indicates that there may be an underlying pattern of cultural support plans being in place that are not fit for purpose, which is deeply concerning.

Reunification

Children on long-term guardianship custody orders (GCOs) and third-party parental responsibility orders (TPPROs) are not considered to be candidates for reunification, due to the fact they are placed on orders that typically last until they are 18 years old—reflecting policymakers' desires for permanent outcomes.

Nationally, 73% of Aboriginal and Torres Strait Islander children in OOHC in 2021–22 were on long-term GCOs and TPPROs. This means the majority of Aboriginal and Torres Strait Islander children in OOHC are on orders that do not prioritise reunification (AIHW 2024c, Table S4.10). SNAICC has calculated the proportions of children reunified using the total number of children in OOHC, including children on long-term GCOs or TPPROs as the denominator (AIHW, 2024a: Table T3). Children on long-term orders have often progressed to long-term care as a result of inadequate efforts to prioritise reunification or even connection with their families—or inadequate efforts to support families to address the barriers to providing safe care for their children, or as a result of policies that limit reunification due to short and unreasonable legislative or policy-imposed timeframes. Excluding these children from the denominator masks the failures of child protection systems to prioritise reunification and artificially inflates reunification rates. Including these children in these calculations provides a more accurate overview of the proportions of children reunified, even though children on long-term care orders are substantially less likely to be reunified.

As of 30 June 2022, 7.3% of Aboriginal children were reunified from OOHC (including long term Guardianship orders) in Queensland (AIHW 2024a T3, AIHW 2024b: Table 10.18). In comparison, 7.5% of non-Indigenous children were reunified from OOHC in the same period (AIHW 2024a T3, AIHW 2024b: Table 10.18). Children who are reunified with their families from OOHC occasionally return to care, but this is not the case for the majority of children. This is significant because it is a potential indicator of whether the supports provided to the family has been sufficient and effective for

the family in the long term. AIHW reports this data by whether a child returned to OOHC within 12 months after exiting to reunification.

In Queensland, 82.9% of Aboriginal and Torres Strait Islander children who were reunified did not return to care within 12 months, slightly lower than the non-Indigenous rate of 87.7% (AIHW 2024a T3, AIHW 2024b: Table 10.18). This was slightly below the national rate, where 83.1% of Aboriginal and Torres Strait Islander children who were reunified did not return to care within 12 months (85.6% for non-Indigenous children) (AIHW 2024a T3, AIHW 2024b: Table 10.18).

Note: The source for these calculations has changed from previous reviews, due to changes in AIHW reporting. Source data is from Table 10.18 of the Aboriginal and Torres Strait Islander data table from Child Protection Australia 2021–22 (which includes reunifications for children on long-term orders) while previous reviews drew from Table S2.3a from the ATSI CPP Supplementary tables 2022 released by AIHW (which excludes reunifications for children on long-term orders). Proportions have been calculated as the total number of Aboriginal and Torres Strait Islander children who exited to reunification (regardless of the type of reunification) each year divided by the number of Aboriginal and Torres Strait Islander children in OOHC and TPROs. The same formula was used for non-Indigenous children.

Permanent care arrangements

Outside of the OOHC system, children can be placed into permanent care arrangements with another person other than the child's parents. In Queensland, in May 2023, the *Child Protection Reform and Other Legislation Amendment Act 2022* introduced a preferred placement hierarchy for these permanent arrangements, which, for Aboriginal and Torres Strait Islander children, is as follows:

1. the child cared for by their family
2. the child cared for by a family member other than their parent, or another suitable person
3. the child cared for under the guardianship of the Chief Executive (Child Safety)
4. adoption under the *Adoption Act 2009*.

The key difference for Aboriginal and Torres Strait Islander children is that adoption is last, with guardianship under Child Safety occurring before adoption, whereas for non-Indigenous children this is reversed.

Note: Not included in this hierarchy is a cultural recognition order that can be made under the *Meriba Omasker Kaziw Kazipa* legislation that recognises Ailan Kastom child-rearing practice in Zenadth Kes/Torres Strait.

In 2021–22, 486 Aboriginal and Torres Strait Islander children aged 0–16 years exited OOHC to a permanency arrangement (SCRGSP 2024, Table 16A.41). This was consistent with previous years of 472 children in 2020–21 and 470 in 2019–20.

The QFCC has highlighted a concerning trend that there is a steady increase between 2017–2022 in all children being placed under the guardianship or custody of the Child Safety Chief Executive and that, in 2022, 85% of Aboriginal and Torres Strait Islander children on a child protection order were under guardianship (QFCC 2023e, Figure 7.3). This increase is concerning when the priority should be to increase the reunification of children with their families or for a permanent arrangement to be with relatives/kin.

In Queensland, another recent type of permanent arrangement has been the introduction of Permanent Care Orders (PCOs) in 2018. PCOs can be issued by the Children’s Court and do not require the oversight of Child Safety in future decision-making about a child. The QFCC has noted an increase in the use of PCOs for Aboriginal and Torres Strait Islander children, from 3 in 2018–19 to 28 in 2021–22 (QFCC 2023f). QFCC analysis found that all PCOs for Aboriginal and Torres Strait Islander children in 2021–22 were made to kin, with 93% made to Aboriginal and Torres Strait Islander kin, and that half of the PCOs were finalised within three months (QFCC 2023f, page 4). QFCC highlighted that at this early stage, PCOs appear to be a timely method to achieve permanent kin care for Aboriginal and Torres Strait Islander children without the involvement of Child Safety. However, it must be noted that prevention of removal from family in the first instance is of course a priority over a PCO being made. There were no Aboriginal and Torres Strait Islander children in Queensland adopted during 2021–22 (DCSSDS 2023b).

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