



THIRRILI

**Submission to the Queensland Child Safety
Commission of Inquiry**

On behalf of

Thirrili Ltd

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About Thirrili Ltd

Thirrili Ltd is a national Aboriginal and Torres Strait Islander community-controlled organisation focused on reducing suicide and trauma-related loss in our communities. We deliver culturally safe, trauma-informed postvention services and advocate for system-level reform that centres community voice and leadership to strengthen outcomes for Aboriginal and Torres Strait Islander peoples.

Executive Summary

Thirrili welcomes the opportunity to contribute to the Queensland Child Safety Commission of Inquiry. This submission is guided by the National Child Protection Week 2025 theme: *“Every conversation matters – shifting conversation to action.”* For too long, Aboriginal and Torres Strait Islander children, families, carers and communities have spoken about their experience of the child safety and justice system. These conversations have been heard but not acted upon.

The reality remains confronting, Aboriginal and Torres Strait Islander children continue to be over-represented in both out-of-home care and residential care. As of 30 June 2024, the Queensland Government’s own data revealed that 55.1 per 1,000 Aboriginal and Torres Strait Islander children were on care and protection orders, compared to just 6.9 per 1,000 non-Indigenous children¹. Indigenous youth were 22 times more likely than non-Indigenous peers to be under supervision, and 26 times more likely to be in residential care.²

The impact of these systems on social and emotional wellbeing (SEWB) is profound. Research consistently demonstrates that young people in care and residential care are at heightened risk of trauma, disconnection from culture, and suicide. A Queensland study found that forty per cent of children in out-of-home care who also had youth justice involvement had attempted suicide, while fifty-six per cent had self-harmed.³ The Queensland Family and Child Commission reported that in both 2021-22 and 2022-23, twenty children died by suicide, many of whom had prior involvement with the child protection system.⁴

As Commission Ann Hollands has said, *“Australia needs more evidence-based action to make child safety and wellbeing a national priority. The evidence exists, and it is strong. What is required now is urgent and coordinated action to shift outcomes”*. This submission draws together national research, insights from the national peak Aboriginal and Torres Strait Islander Community Controlled organisation SNAICC and lived experience evidence to identify systemic challenges and practical reforms that can move Queensland from conversations to meaningful change.

The Child Safety System in Queensland

Queensland’s child safety system remains heavily weighted towards crisis intervention rather than prevention. The majority of funding continues to be directed to statutory interventions and placements in out-of-home care and residential care. In contrast, early interventions and family strengthening programs receive less than twenty per cent of expenditure.⁵ This imbalance entrenches a cycle of removals, particularly for Aboriginal and Torres Strait Islander children, whose families are less likely to receive culturally appropriate support before statutory intervention occurs.

Key Issues Identified

The risks to social and emotional wellbeing are profound. Children in out-of-home care and residential care have significantly higher rates of self-harm and suicide than other children.

¹ Queensland Government, Our Performance – Aboriginal and Torres Strait Islander Children (2024)

² AIHW, Youth Justice in Australia 2023-24

³ The Courier-Mail (Brisbane) “Youth crime Qld: 100 living in resicare alongside vulnerable children” (true crime Australia)

⁴ Queensland Family and Child Commission, Annual Report: Deaths of Children and Young People 2022-23

⁵ SNAICC, Family Matter Report, 2024

Despite this evidence, investment in prevention remains inadequate. The SNAICC Family Matters Report 2024 shows that less than one-fifth of Queensland's child safety budget is directed to early intervention and family strengthening programs (SNAICC, 2024). This chronic underfunding of prevention means that families are often not supported until they are already in crisis, when removal becomes more likely. The result is a system that responds late, at higher cost, and with far greater harm to children and families.

Experiences of Children, Families, Carers and Communities

Children and young people in care consistently report feeling unheard. CREATE Foundation consultations show that many children describe placements as unsafe, unstable, and culturally disconnected. They often lack trust in complaint systems, sharing that their views on placement, family contact, and cultural connection are not respected. For Aboriginal and Torres Strait Islander children, this disconnection from kin and Country undermines identity and wellbeing.⁶

Families emphasise the absence of early, voluntary supports. Parents frequently encounter statutory intervention without first being offered holistic, culturally safe services that could prevent removals. SNAICC's research demonstrates that Aboriginal and Torres Strait Islander families are far more likely to engage with supports when they are designed and led by Aboriginal and Community Controlled Organisations (ACCOs). Carers, meanwhile, describe insufficient training, lack of respite, and inadequate cultural supports, which contribute to placement breakdown and instability for children.

Workers in the child safety system report unmanageable caseloads, high staff turnover, and insufficient therapeutic resources. These working environments carry a workplace risk for vicarious trauma. These concerns are further compounded in regional and remote communities, where access to specialist mental health and disability services is already limited. Community members have voiced strong concerns about safety in residential care, the placement of vulnerable children alongside high-risk offenders, and instances of children being left in watch houses for weeks while suicidal and without access to healthcare. These conditions amount to breaches of children's rights and erode community trust in the system.

Early Intervention and Prevention

The principle of early intervention is universally acknowledged but poorly realised in practice. Evidence from SNAICC's Family Matters Report 2024⁷ shows that investment in prevention for Aboriginal and Torres Strait Islander families remains minimal despite repeated commitments. Queensland's Our Way strategy, while promising, has not yet been matched with the level of resourcing required.

Examples of what works are clear. Aboriginal community-controlled initiatives such as the kinship care redesign program led by ATSICHS Brisbane demonstrate the importance of cultural leadership, holistic supports, and wrap-around services. These programs show higher engagement, stronger family restoration outcomes, and greater stability for children. Yet these proven approaches remain small-scale and inconsistent across the state.

Postvention Supports

In addition to prevention, the system must provide comprehensive postvention supports in the tragic event that a child or young person dies by suicide or a traumatic incident while in care. Postvention is not an optional add-on but a critical component of suicide prevention, as loss and grief can trigger further risk for peers, siblings, carers, and staff.

⁶ CREATE Foundation, Voices in Care Response (2023-24)

⁷ SNAICC Family Matters Report 2024

Thirrili's national postvention experience shows that without culturally safe, trauma-informed responses, families and communities experience compounded harm, and systems risk retraumatisation. A trauma informed postvention response is also advocated by researchers in the suicide prevention and postvention space. Supports should include:

- Immediate, culturally appropriate crisis response for families, carers, and peers.
- Long-term healing supports led by Aboriginal Community Controlled Organisations (ACCOs).
- Accountability and transparent reviews to ensure lessons are acted upon to prevent further deaths.

A recent [ABC News investigation \(August 2025\)](#) highlighted disturbing failures in Queensland's residential care system, where concerns about suicide risk were raised but not adequately responded to, prompting a Child Safety Inquiry.

These findings reinforce the urgent need for system-wide postvention protocols and accountability.

Out-of-Home Care, Residential care, Trauma and Suicide

Children in out-of-home care frequently experience multiple placement moves, fractured sibling relationships, and limited cultural support. While there has been progress in placing Aboriginal and Torres Strait Islander children with kin, implementation of the Aboriginal and Torres Strait Islander Child Placement Principle remains inconsistent. SNAICC has highlighted the need for governments to demonstrate "active efforts" across all five elements of the principle: prevention, partnership, placement, participation, and connection.

Residential care presents an equally concerning picture: Aboriginal and Torres Strait Islander children make up nearly two-thirds of Queensland's residential care population. Many are on remand, reflecting systemic barriers to bail support. Reports of children, including those who are suicidal, being held in police watch houses for extended periods without appropriate healthcare are deeply alarming. Such practices breach the rights of the child and contribute to further trauma.

Child Safety staff must be equipped with clear, system-wide guidance on the early identification and escalation of mental health concerns. Too often, intervention occurs only once a crisis has escalated, leaving children without timely support. Workers require structured decision-making tools and risk assessment protocols to help them recognise early signs of suicidal distress and know when to escalate concerns to specialist services. These pathways must prioritise culturally safe, ACCO-led mental health and healing supports, ensuring that young people receive help at the "talking stage" rather than after self-harm or suicide attempts.

Mandatory training in suicide prevention, trauma-informed practice, and cultural safety should be embedded across the workforce, supported by ongoing supervision and reflective practice. Escalation protocols must also be integrated across agencies including child safety, health, education, and justice to prevent gaps, with accountability mechanisms in place when responses fail.

Raising the Minimum Age of Criminal Responsibility

Detaining children as young as ten years old is inconsistent with international human rights standards and exacerbates the trauma already experienced by children in the child safety system. The United Nations Committee on the Rights of the Child has repeatedly recommended that Australia raise the minimum age of criminal responsibility to at least fourteen years. Detention disrupts development, entrenches disadvantage, and

disproportionately impacts Aboriginal and Torres Strait Islander children, who already make up the majority of the detention population in Queensland.

Evidence shows that early criminalisation increases the likelihood of lifelong involvement with the justice system, whereas diversion and therapeutic support pathways significantly reduce reoffending and improve wellbeing outcomes. Raising the minimum age to fourteen, combined with investment in culturally safe, community-led diversion programs, would represent a critical step in reducing over-representation and addressing the underlying drivers of offending. This reform would ensure that children are supported, not punished, during formative years and that they remain connected to family, culture, and community.

Roles of Agencies

The Department of Child Safety holds statutory authority for child protection but has not consistently embedded cultural safety or active efforts in practice. The Queensland Family and Child Commission provide important oversight and reporting functions but requires stronger authority to compel reform. The Office of the Public Guardian advocates for individual children but has limited capacity to drive systemic change.

By contrast, Aboriginal Community Controlled Organisations bring cultural authority, community trust, and proven approaches to prevention and restoration. Yet their role is constrained by underfunding and short-term commissioning. Thirrili argues that without significant investment in the ACCO-led service delivery and governance, systemic inequities will persist.

Recommendations

1. Queensland government must implement and resource standardised escalation protocols for child safety staff, including mandatory suicide prevention and cultural safety training, structured risk assessment tools, and cross-agency referral pathways into ACCO-led therapeutic and mental health services. These measures should be supported by accountability mechanisms to ensure consistent and timely escalation of concerns, preventing reactive responses and safeguarding children before crises occur.
2. Queensland government must legislate to raise the minimum age of criminal responsibility and detention to at least fourteen years, in line with international human rights standards, and invest in culturally safe, ACCO-led diversion and therapeutic programs that address the root causes of offending.
3. To shift from conversation to action. Queensland government must legislate and fund full implementation of the Aboriginal and Torres Strait Islander Child Placement Principle, ensuring measurable targets, active efforts, and transparent public reporting. It must redirect at least thirty per cent of new child safety funding into Aboriginal community-controlled prevention and family restoration services, with secure long-term funding agreements.
4. Expansion and support of kinship and foster care networks are required, with appropriate training, cultural support, and respite to ensure stability and cultural continuity for children.
5. Every placement in out-of-home care and every residential care centre must embed social and emotional wellbeing supports and suicide prevention measures, including mandatory therapeutic services, suicide-safe training, and ACCO-led healing programs.

6. Queensland government must also end the harmful practice of detaining children in policy watch houses and instead invest in community-led diversion, bail support, and justice reinvestment trials.
7. An independent, child-safe complaints mechanism and advocacy service must be established, accessible to children in both out-of-home care and residential care.
8. Finally, a Child Safety Reform Partnership Board should be created, co-chaired by government and ACCOs, with oversight of implementation and regular public reporting against agreed outcomes.

Conclusion

The Queensland government has an opportunity to lead the nation by turning evidence into action. Every conversation, whether with a child in care, a grieving parent, a frontline worker, or a community leader, matters. But conversations alone cannot protect children. Action is required to prevent removals, keep children safe, and uphold their right to grow strong in their culture and community.

This submission provides that evidence and outlines the steps needed. With courage and cultural leadership, the Queensland government can make this inquiry into the moment where conversations are finally translated into systemic change.