

Submission to the Queensland Child Safety Commission of Inquiry on Corporate Parenting

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Background and experience

I have a PhD from Deakin University (awarded in 1999). I am a Registered Psychologist with the Australian Health Practitioner Registration Agency (PSY0001121396), and a member of the Australian Psychological Society. I supplemented my formal training in psychology with studies in sociological aspects of history. My current research interests cross the discipline boundaries of psychology, criminology, sociology, social work, and public health.

I was a senior manager in the Commonwealth public service for more than 12 years at the Australian Institute of Family Studies (AIFS) in a variety of roles. From August 2004, I was manager of the National Child Protection Clearinghouse; then from October 2005, I also had responsibility as General Manager for a range of research projects and knowledge translation and exchange services to inform policy and practice across a spectrum of child/family welfare areas, as well as leadership and strategic management responsibilities across the Institute. From March 2011 to February 2017, I was Deputy Director (Research), with responsibility for AIFS' research projects and research communication outputs across a broad range of topic areas relating to families including family relationships, social and economic participation, and child and family wellbeing.

In 2017 I was appointed Professor and Director of the Institute of Child Protection Studies (ICPS) at the Australian Catholic University (ACU). ICPS enhances outcomes for children, young people, and families through quality research, program evaluation, training and community education, advocacy, and policy development. We are recognised nationally for our expertise in child protection, preventing and responding to the abuse and neglect of children, and addressing vulnerability. We promote children's participation, strengthen service systems, inform practice, and support child-safe communities.

Research—to understand, and improve the circumstances of vulnerable children, young people, and their families—has been my passion for over 30 years. As an academic in psychology, then a senior manager and deputy director at AIFS, and now as director of a research institute at ACU, I have contributed to over 400 publications (including more than 145 peer-reviewed publications and journal articles), and over 1000 presentations and media engagements. I have led innovative knowledge translation/exchange functions that have increased access to the evidence-base for policy makers and practitioners working to protect children and promote family and community wellbeing.

Introduction

This submission focuses on the role that an effective approach to adoption of 'corporate parenting' can improve both the child safety and youth justice systems.

There are many benefits if Queensland's child safety system was to be radically reframed, and oriented away from a 'risk and removal model' toward a public health approach (see

Higgins, 2020). If it prioritizes primary prevention of child maltreatment, this would allow greater resources to focus the always-limited resources within the tertiary sector (child safety and youth justice responses) towards playing a greater role in healing, therapeutic recovery, preventing the harms from child maltreatment having ongoing and lingering effects, including intergenerational transmission of risk.

I refer to my earlier submission in September 2025, which drew on national and international evidence, including findings from the Australian Child Maltreatment Study (ACMS), to outline a population-level strategy to reduce harm and promote child wellbeing (i.e., a public health approach to child maltreatment prevention).

While prevention is critical, children who have experienced abuse and neglect require **trauma-informed, culturally responsive care**. The tertiary sector must evolve beyond risk management to embrace healing and recovery.

Key strategies include:

- **Embedding trauma-informed care** across all child and family services
- **Expanding therapeutic programs** that support recovery through counselling, group therapy, and family-based interventions, as well as focused mental health supports for those who have experienced the most intense forms of maltreatment, usually of multiple types – who are over-represented in the out-of-home care and youth justice systems.
- **Supporting continuity and stability** in care environments to foster relational healing.

Without a consistent trauma-informed framework, children risk re-traumatization and fragmented care. The tertiary sector, as the corporate parent, must be equipped to address complex trauma and promote long-term wellbeing.

Proposal: Prevention Expert Roundtable

The Commission would be well-placed to convene a roundtable focused on a public health approach to preventing child abuse and neglect.

Such a workshop, roundtable or hearing focused on a public health approach would enable the Commission to hear from those who can deploy prevention-oriented strategies – those who have the access points, the physical spaces, the trust of parents and community, and the non-stigmatising levers to encourage engagement with prevention education and skill building.

Routinely, in conversations about child safety and youth justice, and through formal mechanisms such as the National Framework for Protecting Australia's Children, we hear from the child protection system or the minister, about safety.

But what is needed now is to hear from collectively, and discuss opportunities and strategies for collaboration, from those who are often excluded or overlooked from these discussions.

They are sectors like:

- Education (schools – government, Catholic, and independent)
- Early childhood education and care
- Health and community services, particularly GPs and maternal & child health services
- Local government (who run or fund public spaces libraries, community centres, neighbourhood centres where parents and children congregate)

The focus of discussion would need to be on **primary prevention of child maltreatment** – not on responding to high-level risk once it is already elevated.

My firm view is that the only way to have a workable child protection and OOHC system is to stem the tide into the child protection system so that it is not overwhelmed, and the responsibility can be shared. So the purpose of child protection attending is primarily to listen, to identify opportunities for collaboration and new practice frameworks that might be needed from them, and whether the proposals that are put forward by the Roundtable attendees are ones that will at the population level, address the known risk factors for child protection involvement (see Higgins & Hunt, 2023).

It would need to be a broad representative group of stakeholders who can speak to the interconnected elements that wrap around families and children. It would create a space for the Commission to hear from experts on the breadth of public health considerations and then have some of those experts speak at a public hearing focused on prevention and early intervention.

Representative organisations like PeakCare would be able to identify many of the stakeholders who could contribute to this from Queensland. The Qld Family and Child Commission, through groups such as the members of their child death review board, would also be able to identify representatives of various sectors who understand what a public health approach to prevention could look like, and the contribution that their sector could make to this.

A new, prevention-oriented strategy, shared across the community (and not led by statutory child protection) can link to existing early intervention services, but fundamentally requires a new focus and investment in non-stigmatising provision of support for all parents. If the focus of services is only on high-risk groups, then accessing evidence-based parenting supports is still seen as ‘stigmatising’.

Prevention and early intervention means delivery of evidence-based parenting supports (which includes, but isn’t limited to, formal parenting programs). As my colleagues and I have outlined, there is a desperate need for policies that support access to evidence-based parenting supports (see Doyle et al., 2022). In this paper, my colleagues and I outline both what parenting support is, the evidence for its effectiveness, and the need for policy reforms to enable it to occur.

In short, the solid foundation for any approach to corporate parenting, is equipping and supporting all parents in the community with supports to adopt effective, non-violent, non-coercive parenting practices in their own families. This requires a new workforce that is trained, and able to work with professionals in places and spaces where families already engage – in maternal and child services, GPs, hospitals, early childhood centres and schools (see Russ et al., 2024).

For the much smaller group of children and families who might need greater intensity of support, that’s where existing specialist family support services can play an important role – through referral, but also through operating in different ways (e.g., for family support services to be based in community hubs or schools or early childhood centres)

Holding such a prevention workshop or roundtable would enable the Commission to hear from the variety of sectors about evidence based, early intervention programs operating here or elsewhere and is open to any submissions regarding early intervention. It provides an opportunity to see what a new approach to coordinating prevention efforts across sectors and silos could do to drive down risks, and enhance protective and resilience-promoting factors, across the population.

Benefits to statutory services if prevention initiatives are prioritised

Overtime, this would lead to reduced demand on tertiary services, enabling government to achieve its aims of being the best corporate parent that it can. Otherwise, intractable problems, such as high levels of re-referrals to child protection will continue (families where a report has been made, even if it is not substantiated, then has subsequent notifications made). Australia should be ashamed of its high rates of re-referrals to statutory child protection services – one of the best indicators of unmet need and gap between community concern and system response.

To be a better corporate parent, the statutory systems (child protection and youth justice) also need to pay greater attention to the accumulation of harm that most of the children they serve have already experience. However, our systems are poor at identifying, measuring and developing response frameworks to recover from and health from these acculated experiences of violence, trauma and exposure to risk. See: Bryce et al., 2024; Harris et al., 2026.

A major focus on prevention would also mean that current barriers to effective, quality services within statutory systems (such as the high levels of mental health need) can more easily be addressed (see Annakin, Harris & Higgins, 2025)

Conclusion

Queensland stands at a pivotal moment. By embracing a public health approach and prioritizing both prevention and healing, we can build a child safety system that is proactive, inclusive, and effective. This submission calls for bold leadership and sustained investment to ensure all children grow up safe, supported, and thriving.

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