



**Safe & Sound in
Queensland: *Enhancing safety
for young people who
go missing from care.***



An essential best practice guide for workers when children and young people in out-of-home care go missing.

Acknowledgements

In keeping with the spirit of Reconciliation, we acknowledge the Gubbi Gubbi/Kabi Kabi People, traditional owners of the lands where this toolkit was created. We also pay our respects to all Aboriginal and Torres Strait Islander peoples across Queensland where this toolkit's use is intended to improve outcomes for children.

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Taking a Rights Based approach.

All children, including those residing in out-of-home care, have an equal entitlement to feel safe, protected and free from harm. This includes access to positive environments, experiences and supports.



United Nations Convention on the Rights of the Child (UNCRC)

Throughout this toolkit you will see specific references made to children's rights found within the UNCRC. Each reference is highlighted using this small symbol alongside the corresponding Article. **Appendix 1.**

The UN Convention on the Rights of the Child (UNCRC) sets out the general human rights that must be realised in order for children to achieve their full potential. In 1990 Australia ratified the UNCRC, meaning Australia has a duty to ensure every child across the nation has equal access to these rights.

This includes ensuring:

- the safety, wellbeing and best interests of a child are paramount.
- the general principles that recognise and support the rights of a child, including the *Charter of Rights* for a child in care, are upheld.
- the cultural needs of children, particularly that those of Aboriginal and Torres Strait Islander children are recognised, respected, and met accordingly.
- all children are provided with the opportunity to express their views in a way that is age and developmentally appropriate and that those views are considered in any decisions made in relation to the child.

The **Safe & Supported, National Framework for Protecting Australia's Children (2021-2031)**, prioritises children and young people who experience disadvantage, or who are vulnerable. Including those in out-of-home care or transitioning out of care.

► What is out-of-home care?

In Queensland, the term 'out-of-home care' refers to the provision of short, medium, or long-term accommodation for children aged 0–18 years, who are unable to live with their parents, commonly due to abuse and/or neglect. This may include foster care, residential care, kinship care or other types of statutory, public, or alternative care.

There are a wide range of reasons why children and young people go missing from care. However, it is widely considered that a key driver is a lack of connection to carers, fellow residents, and the home itself.

Every week children in out-of-home care across Queensland are disproportionately more likely to go missing. While many children and young people don't go missing for more than a few hours, others may be missing for longer periods of time. Some remain in the local area and end up with extended family or friends. Evidence suggests that looked after children can be at increased risk of many of the harms known to be linked with missing episodes, such as sexual and criminal exploitation. Sadly, when children are absent or go missing from out-of-home care, they are often not met with the same urgent response as other children in the community, due to the incident of going missing in itself being inaccurately viewed as either a baseline behaviour for the child or an act of defiance. It is therefore important that professionals and carers responsible for a child's care prioritise the response to missing episodes and know how to respond appropriately.

► MISSING DEFINITION

The term "missing", along with a number of other language statements, such as "running away," has become normalised when referring to children absent from their home/place of care (Morewitz, 2016). However, groups such as the Queensland Law Society (2012) have made the point that the use of some language can have negative connotations for children and are best avoided. For this reason, it is recommended that frontline workers and professionals avoid using terms such as "absconding," "couch-surfing," "self-placing," and even "eloping" because such terms are victim-blaming in tone and have the potential to distract from what might actually be occurring – e.g. child exploitation.

For the purpose of this toolkit the following definitions and terminology will be used:

- A **missing child** is any child whose location is unknown and there are fears for the safety or concern for the welfare of that child.
- An **absent child** is a child who is absent for a short period without permission, and where the child's location is known or can be quickly established.

► *For the purpose of this toolkit, the terms 'child' or 'children' means anyone under the age of 18 years.*

The term '**frontline support worker**' has been used throughout to refer to anyone working in a face-to-face capacity with children in out-of-home care. These include but are not limited to, job titles such as youth worker, residential youth worker, community support worker, case worker, care coordinator, house manager etc.

Line Manager has been used to refer to anyone who has oversight for frontline support workers and is responsible for overall care and decision making for the child.

► About this toolkit

Safe and Sound in Queensland: Enhancing safety for young people who go missing from care is a practical toolkit intended to provide effective, professional support for children who go missing from their home or place of care. It suggests strategies and practical steps that workers may take to:

- Engage and communicate effectively with children to prevent missing episodes.
- Better understand the push and pull factors associated with missing episodes.
- Assess contributing risk factors and be able to respond appropriately if a child leaves their home or place of care.
- Support conversations with a child, following an episode of missing.
- Consider appropriate, responses to various factors within the home or place of care to help reduce risk.
- Consider effective approaches for reporting concerns to statutory agencies, such as the Police and Child Safety Services.

This toolkit contains critical information to help frontline support workers involved in the care of a child in out-of-home care to navigate situations where those children are at risk of and/or going missing from their home/place of care. It is acknowledged that most agencies will have practice frameworks in place to inform their work with children and young people. On this basis, the toolkit is intended to enhance and strengthen existing practice and policy, complementing the way agencies currently respond. This will ensure that families, friends, and communities can be confident that when vulnerable children go missing from out-of-home care in Queensland, the agencies responsible for responding, do so consistent with international best practice.

Highlighted throughout the toolkit are best practice principals and considerations when working with children identified with the following icon.



The toolkit is not intended to be just about completing check lists or documents. It is also about walking alongside children to change and shape their experiences before, during and after they return from being missing.

This resource draws on current best practice relating to children who go missing from out-of-home care arrangements. It has been developed with direct input from children and frontline professionals working across a number of domains, including out-of-home care, therapeutic intervention, youth justice, child safety, law enforcement and education.

Each section of the resource is intended to be an essential component of the toolkit. There are four colour coded components – **'Before'**, **'During'**, **'After'** and a **'Pocket Guide'** that is found within the 'Before' component. Accompanying each component are a range of pull-out templates, activities, and checklists to help guide the user.

Before

During

After

Pocket Guide

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Before



► Before

This 'before' component of the toolkit focuses on helping frontline support workers to connect with children in out-of-home care by utilising resources that help the child to maintain and sustain positive self-image, increased resilience, and healthy connections in their own life. The intended outcome is, that by taking a holistic approach before the child experiences an episode of missing, frontline support workers and other professionals can create an atmosphere of safety and stability, decreasing the likelihood of future missing episodes.



3



**BEST INTERESTS
OF THE CHILD**

27



**FOOD, CLOTHING,
A SAFE HOME**

31



**REST, PLAY,
CULTURE, ARTS**

► Building Connection

Building connection is an essential part of building a positive, healthy relationship, fundamental to the child's emotional and mental health, where they feel seen, heard, valued, and loved. A lack of connection to carers, fellow children and the home or places of care may lead children to seek connection elsewhere in the community, which could be unsafe.

Queensland Family & Child Commission, (2018). "Young people's perspectives of residential care, including police call-outs.



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Queensland Government, Out-of-home Care Outcomes Framework, **connected** domains states; *Children and young people feel a strong sense of identity and belonging, have stable and long-lasting relationships with family and friends and are connected to culture and community.*

► Taking the time

- Spend each day engaging in child-led interactions, having a chat, and showing that you care.
- Support and promote strong, positive friendships with family (where possible), friends, peers, and teachers. You can role model healthy relationships with the people that you interact with. Consider using the 'Networks of Support' activity. **Activity 6.**
- Listen and pay attention to what the child is saying. Using interpersonal skills like reflection and summarising. This helps to make sure that you have understood correctly, but also shows the child that you are listening to them. Consider using the 'Conversation Approaches' guide. **Appendix 2.**
- Interests and hobbies. What does the child enjoy doing? Are there new things they would like to try? Is there something they currently do, that you could get involved with? Consider using 'What Makes Me Happy' activity. **Activity 5.**
- Support interests with enthusiasm and dedicate time each day/week to cultivating these.
- What are the child's dreams and goals? How can you support the child to achieve these goals? Your organisation may already have a case plan in place that has the child's goals written down. Keep these in mind when you're with the child as there may be opportunities to help achieve them.

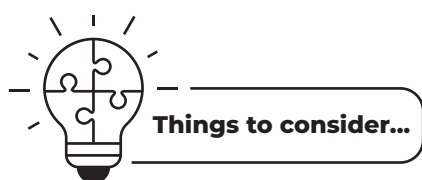
► A focus on feelings

Social and emotional skills are essential in building healthy relationships, managing emotions and developing empathy. Helping children to recognise and name their feelings aids them in understanding themselves better. It also supports their ability to develop effective strategies for managing their own emotions. When children have greater social and emotional awareness, it can be easier for them to navigate positive and negative relationships. As such, they are more likely to self-regulate and problem solve in a healthy way when challenges arise, instead of running away from problems or strong emotions they do not fully understand.

The words we use to describe a child and their behaviour can negatively impact the way they might view themselves. It can also influence how others might view them and the care they receive. Consider using the 'Language Choices Matter' guide. **Appendix 3.**

Queensland Government, Out-of-home Care Outcomes Framework, **resilient** domains states; *Children and young people have strong social and interpersonal skills and feel confident to pursue life goals and manage challenges.*

- Consider the environment in the home. Can anything be changed within the home or place of care to make the child feel safe and more comfortable?
- Get to know their specific challenges or triggers. Try to understand what they find challenging and explore how you can support them with this. Is there a particular trigger they have? The 'Feelings Wheel', 'Feelings List/Cards' or 'Mindfulness' activities can be useful ways to do this. **Activity 1,2,4.**
- Find opportunities to develop social and learning skills specifically problem-solving skills – play problem solving games, identify problems and work collaboratively to encourage solutions.
- Are you introducing coping strategies to manage difficult situations? Consider using the 'Feelings Wheel' or 'Feelings List/Cards' activities. **Activity 1,2.**
- Consider how you can demonstrate empathy and concern when engaging with the child, rather than taking a punitive approach. Consider using the 'Language Choices Matter' or 'Conversation Approaches' guides. **Appendix 2,3.**



► Vulnerable groups

The over-representation of Aboriginal and Torres Strait Islander children and children with disability in out-of-home care are a focus of the National Framework for protecting Australian children.



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Additional vulnerable groups to consider.

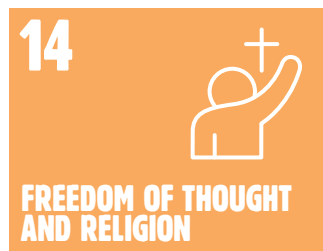
- **LGBTIQ+:** Refers to lesbian, gay, bisexual, transgender, intersex, and queer/ questioning. For those who end up in residential care and out of home care environments, more broadly, research reveals that many LGBTIQ + children experience high levels of abuse and trauma before coming into care.
- **Culturally and Linguistic Diverse (CALD):** Refers to Australia's non-indigenous groups that have a cultural heritage different to the dominant Anglo-Australian culture. Frontline support workers need to be aware that there may be variations across cultural and religious beliefs, perspectives, life experiences and ideologies. Children from non-English speaking backgrounds who are not proficient in English may experience additional vulnerability.
- **Neurodiversity/Neurodivergent:** Refers to children with learning disabilities. This can include but is not limited to; autism spectrum disorder (ASD), Cerebral Palsy (CP), developmental delay,

attention deficit hyperactivity disorder (ADHD), sensory impairments, dyslexia and dyspraxia. Research reveals that children in contact with welfare and justice systems have higher rates of neurodiversity, potentially impacting their decision making capacity and behaviour. Frontline support workers may be required to support these children to a greater degree, to engage in everyday activities.

- **Physical Disability:** Refers to any physical limitations that inhibit physical function. It can be temporary or permanent. Physical and neurodiversity learning disabilities can also coexist. Foetal Alcohol Spectrum Disorder (FASD) is both a physical and a cognitive disorder and varies case by case. Research reveals that increasingly, children with high and complex needs are entering or are in the care system without access to the required therapeutic supports.
- **Mental Health:** Refers to those mental health conditions that include, but are not limited to, a range of disorders affecting mood, thinking and behaviour. This includes depression, anxiety (including post-traumatic stress disorder), schizophrenia, eating disorders, mood disturbances, addiction, and suicidal behaviour.

**NB. Many children are not being recognised as experiencing a disability because it may not be obvious or documented correctly.*

It is important to consider the child holistically as these vulnerabilities may intersect with one another. As such, a thorough understanding of the child is necessary.



Listening and responding to the voices and views of children, and the views of those who care for them.



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► Children's choice and voice

Children in out-of-home care tend to have limited opportunities to participate in decisions that impact their lives. Providing opportunities for the child to be listened to and for their thoughts, feelings and ideas to be validated and heard, supports children to have a sense of agency. This helps to create feelings of empowerment, fostering self-identity, and developing important skills like problem-solving, critical thinking and decision-making.

- Are they aware of how to give feedback regarding their care?
- Has the child received a copy of the pocket guide on page 14 – ‘*Keeping Safe*’?
- Together with the child, consider completing the ‘*Useful Contact Numbers*’ section in the pocket guide.
- Try to create a sense of belonging in the home or place of care by involving them in the day-to-day tasks, like chores, food shopping, meal planning.
- Consider how they communicate? What phrases, facial gestures and tone do they tend to use?
- Consider what their body language might be communicating. The ‘*Feelings Wheel*’, ‘*Feelings List*’ and ‘*Mindfulness*’ activities can help in supporting effective communication. **Activity 3,1,4.**
- Is there a particular place where the child feels more comfortable chatting? If possible and safe, try to utilise their preferred location when having sensitive conversations.
- Consider how best to assist the child to explore their thoughts and feelings about an experience. Consider using the ‘*Feelings Wheel/Cards/List*’. **Activity 1,2,3.**
- You might consider using the ‘*Networks of Support*’ or ‘*What makes me happy*’ activities. **Activity 6,5.**

Queensland Government, Out-of-home Care Outcomes Framework, **Healthy** domains states; *Children and young people make healthy lifestyle choices and access health care services.*

► Developing self-esteem

Supporting children to develop positive self-esteem is important for helping them to navigate negative experiences, gain confidence to try new things and set healthy expectations and boundaries in relationships. Identifying positive activities that build in elements of success and failure, can help to create a strong sense of self-worth and competence. Try to identify opportunities for the child to make positive contributions, connections, and experiences within the home or place of care. This gives children a sense of belonging and reduces the likelihood of them seeking to fulfill this need elsewhere outside of the home.

Consider trying;

- Listening to and acknowledging the child’s thoughts and feelings. Consider using the ‘*Feelings Wheel*’, ‘*Feelings List*’ or the ‘*Mindfulness*’ activities. **Activity 3,1,4.**
- Provide activities that are problem solving in nature and work together to find solutions, finding

opportunities for the child to succeed and fail.

- Offer more opportunities to make decisions that directly impact their life.
- Reassure the child that they are special, loved and wanted – take care to use language that is appropriate and relevant in context to the child. Consider using the ‘*Language choices matter*’ or ‘*Conversation Approaches*’ guides. **Appendix 3,2.**
- Find opportunities to use encouraging dialogue with the child, such as; “*We’re proud of you!*,” “*look at how well you did!*,” “*good job!*,” “*keep it up!*,” “*that’s a great idea!*,” etc.
- Try teaching positive self-talk skills. Consider using the ‘*Feelings Wheel*’, ‘*Feelings List*’ or the ‘*Mindfulness*’ activities. **Activity 3,2,1,4.**

► Health and sexuality

- It’s important for children to be provided with accurate and age-appropriate information about healthy relationships. Key topics include; equality, boundary setting, consent, communication, trust, self-care after the breakdown of a relationship, and what to do if one of your friend is in an unhealthy relationship. Listen to the child’s experiences and consider whether the child may need additional support.
- Are you having regular, robust and supportive conversations around sexuality? Having these conversations isn’t easy but it’s important for children to have a healthy understanding of what puberty, sexual development, and health should look like. There are many resources you can use, such as books, websites, educational teachings, etc. The Raising Children Network (<https://raisingchildren.net.au/>) have some great resources to support these kinds of conversations.

► Internet Safety

- Explore websites, apps, games, and social media together and speak about the dangers of online grooming. The eSafety Commissioner provides useful guidance on their website aimed at supporting conversations about privacy and safety, as well as other tips for keeping safe online.
- QFCC have a range of resources for staying safe online <https://www.qfcc.qld.gov.au/youth/information-and-resources/protecting-children-online-danger>

Online Resource

Websites or social media pages that may be helpful to discuss these topics.

(As of 29/4/2024)

Online safety | eSafety Commissioner

A Safe Place to Chat Anonymously, Get Support & Feel Better | Reach Out Australia

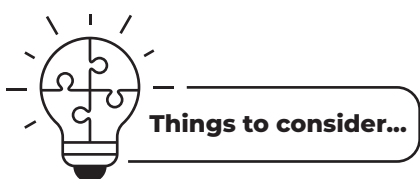
Pre-teens entertainment & technology | Raising Children Network

Kids Helpline | Phone Counselling Service | 1800 55 1800

Resources, Tools, Project Paradigm

<https://www.accce.gov.au/report>

<https://www.carlyryanfoundation.com/resources/fact-sheets>



► **Safety** Practice with the child memorising the full name and contact details of someone they can trust. Keep practicing this safety tip.



► Vulnerability and Risks

Missing episodes and homelessness are both issues for children living in out of home care who experience sexual and criminal exploitation. There is also evidence that perpetrators of these forms of exploitation intentionally target residential care homes, or other locations where they know children are being cared for, because they are likely to be more vulnerable to grooming and exploitation.

Push and Pull Factors

These are factors that might 'push' or 'pull' a child away from their home environment towards potentially harmful people or situations, causing them to be absent or missing.

PUSH FACTORS

- Isolation from positive peers and social networks
- Family history of mental health problems
- Low self-esteem/mental health concerns
- Family history of alcohol/drug misuse
- Family history of Domestic Family Violence
- Breakdown of family relationships/conflict
- Unsuitable accommodation
- Lack of positive relationship with protective adult
- Unhappy in out-of-home care placement
- Problems at school e.g. bullying
- Experienced neglect, physical, emotional, or sexual abuse
- Unsure where to go for help/seek help

PULL FACTORS

- Visiting friends and/or family and away from home/place of care
- Feeling loved and cared for by unknown individuals away from home
- Acceptance from peers
- Wanting to feel normal
- Involvement with gang activity/criminal exploitation
- Sexual exploitation
- Influenced by peer relationships
- Being offered a more appealing place to stay
- Current substance use and dependency

Before



Warning signs/Indicators Behaviours to be aware of:



- Talking about running away.



- Use of mobile phone/Internet that causes concern.



- Multiple callers (unknown adults/older young people) to the home.



- Change in mood or behaviour (e.g., depressed, irritable).



- Expressions of despair (self-harm, overdose, eating disorder, challenging behaviour, aggression).



- Exclusion from school or unexplained absences from school/college/training.



- Sexually transmitted infections or sexual health problems.



- Repeated miscarriages and pregnancies.



- Disclosure of sexual assault (including if followed by withdrawal of allegation).



- Relationship of concern with an adult (male or female) or older young person, which might involve physical and/or emotional abuse.



- Entering/leaving vehicles driven by unknown people.



- Uses public transport to visit locations beyond their usual radius of travel.



- Peers involved in sexual exploitation.



- Unexplained amounts of money, clothing, mobile phones, or other items.



- Returned home under the influence of alcohol, drugs or substances.



- Has developed a dependence on controlled or illegal substances.



- An increase in reckless behaviour and/or rule breaking.



- Saving money for no apparent reason or keeping belongings packed in a bag.

► Risk Assessment

Consider the warning signs/indicators when completing your organisation's risk assessment. Following completion of the risk assessment, you may consider speaking to your Line Manager about the need for a safety plan to be created.

► Safety Planning

If possible, the safety planning process should involve the child and be developed together with them. This can help them to feel heard and may reduce the likelihood of them going missing or absent again. When completing your organisation's safety plan, you could consider asking or incorporating other questions, such as:

- *What warning signs or indicators might tell us that things aren't, okay?*
- *What things have helped you to stay safe in the past?*
- *What can we do to help when you feel this way?*
- *What would I tell a friend to do if they were in a similar situation?*

Safety plans should be reviewed and updated after every missing or absent episode and kept on file in a location that is easily accessed by other staff involved with the care of the child. All agencies involved in the care of the child, should be aware of the safety plan and any actions that they are responsible for undertaking.

► **POCKET GUIDE** While everyone wants children to be safe and happy in their place of care and frontline workers will do everything possible to discourage running away, it is acknowledged that there will be times where a child may, for a range of reasons go missing or absent. Providing useful and accurate information for children ahead of time can support them in keeping safe when such instances occur.

This QR code can be used to access a useful guide on how to keep safe and can be used as part of a safety planning conversation with children. It can be downloaded to smart phones or tablets to enable easy access for children wherever they might be. Credit card sized hard copies can be obtained from info@projectparadigm.com.au



Things to consider...

- **Confidentiality** Information sharing is crucial in helping to support the needs and rights of children. Collaboration between frontline support staff across agencies positively contributes to the most effective strategies for responding to challenging situations involving children in out-of-home care. Sharing relevant information, no matter how small, helps to develop regional or location specific knowledge that can help identify people of concern, CSE or CCE 'hot spots', emerging issues and child specific issues or concerns.

You as the frontline support worker are protected under the *Child Protection Act 1999* if you share information for the purpose of protecting children from harm. The Act affords service providers the ability to share information with each other for the purpose of identifying, assessing and responding to child protection wellbeing concerns, without consent if necessary.



Before



Things to consider...

Be curious- don't assume anything, ask questions, and explore. How is the child responding to these questions? Are they happy to chat or are they defensive and wanting to end the conversation?

✔ Before Checklist

	Yes	No	Comments
Example Is there a history of the child or young person going missing?	✔		<i>31/1/2024 - History of going missing, documented in case notes and incident report.</i>
Is there a history of the child going missing?			
Has a risk assessment been completed?			
Has a safety plan been completed?			
Does the child associate with peers who have a history of going missing?			
What were the circumstances of the child being found or returning home last time?			
Are there patterns of the child going missing?			
Is there periods of the child going missing overnight or longer?			
Is there a history of the child historically going to the same locations? Is this known for exploitation?			
Is there a history of the child missing days at school or classes and their whereabouts unknown?			
Is there a history of the child returning home in unknown vehicles?			
Does the child have a history of being sexually and/or criminally exploited?			
Who are their friends and peers? Where did they meet?			



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During

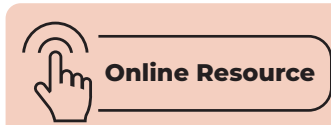


► **During**

This ‘**during**’ component of the toolkit focuses on helping frontline support workers to undertake the necessary steps when a child goes missing or absent from home or place of care. This is not intended to replace your organisation’s relevant policies and procedures, but instead should be considered alongside them. The overall aim is to enhance safety and decrease the likelihood of future missing or absent episodes by standardising response actions.



Queensland Family & Child Commission, (2018). ‘Joint agency protocol to reduce preventable police call-outs to residential care services.’



[Click here](#) ► or scan the code →



Queensland Government, Out-of-home Care Outcomes Framework, **safe and nurtured** domains states; *Children and young people feel cared for and nurtured in stable environments, safe from abuse, neglect, violence, and threat.*

THE CHILD IN OUT-OF-HOME CARE IS ABSENT OR MISSING...

Immediately contact 000 if you know or reasonably suspect a child has been abducted or is in immediate danger.

After notifying the Police, please contact your Line Manager, the Child Safety Service Centre, or the Child Safety After Hours Service Centre if outside business hours.

CHECKLIST - THINGS TO CONSIDER AND TRY:

- Residential staff should make necessary enquiries in an attempt to locate the missing child.
- Call and text the child, continue to try to make contact.
- Check the house.
- Check the garden.
- Check the driveway and street.
- If during school hours, contact the child's school/education provider to check their whereabouts.
- Try to determine who the child was last seen with, including when and where.
- Have they gone missing with someone else?
- If so, do you know the other person's details or know someone who does?
- Have any other children/friends mentioned anything about who they are with or where they were going?
- What was the child wearing when they were seen last?
- If known and possible to do so, physically check the actual location where the child intended to go.
- Check the local area.
- Check with the neighbours.
- Check places where the child frequently attends, such as shops, parks, friends' homes or other 'special places' they may like to go.
- Check with other members of your team to determine if there is anywhere, they may know the child is likely to visit.
- Are there any emergency contacts that you could call to see if they know the whereabouts of the child?
- Monitor social media as a potential way of locating the missing child – you might need to consult your organisation's policies to make sure this is ok for you to do.

- ▶ It may also be appropriate to contact the child's parents or family members and enquire if the child is in contact with them. It may be preferable for this action to be undertaken by a Child Safety Officer.



Online Resource

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Things to consider...

▶ 16–17-year-olds

When a 16- or 17-year-old runs away or goes missing they are no less vulnerable than younger children and are equally at risk, particularly from sexual exploitation or involvement with gangs.

If you have completed the checklist on page 17 and failed to locate the child.

Speak to your Line Manager and follow your Organisational Policies and Procedures, below are a few other things that you may want to consider:

- Keep detailed notes of what is happening during the time the child is missing and the steps that you take.
- Record who you speak to, name, date/time, contact details.
- Contact Police
- Pages 20 & 21 provide useful information and guidance on reporting to police.
- After making the missing person report, make note of the QPRIME number created by the Police, the date/time the missing person report was made, the name of police officer who received the report and their badge ID.
- You can also request a Communication ID from the police officer.

If you have contacted Police, remember to also contact the Department of Child Safety.

- Provide details to the Child Safety Officer (CSO) of the information provided by the Police. Such as the QPRIME number.
- If outside business hours, you can call the Child Safety After Hours Service Centre QLD on **1800 177 135**.
- Due to the child being reported missing the CSO is required to complete a referral to the Suspected Child Abuse and Neglect team (SCAN) that requires regular information sharing. This may be something that frontline support workers can assist with.



Key Tips

- Keep your phone on and charged. Check it regularly for updates.
- Regularly share information between the child's care team.
- Information sharing – Consider what information is relevant to share.
- Remain in regular contact with police regarding any updates.
- In the event that police need to release additional information, including a photograph that will potentially identify the missing child as a child in out-of-home care, under the *Child Protection Act 1999*, police must seek written authorisation from the Chief Executive of the Department of Child Safety Regional Directors have the statutory delegated authority to provide written permission in these circumstances. If a request is made to you directly for this information, always seek guidance from your Line Manager.
- Continue attempts to contact the child. Send text messages letting them know that you are worried about them and encourage them to make contact.
- If the child contacts you, remain calm and ask the following questions:
 - ▷ *Are you ok?*
 - ▷ *Is there anything I can do to help?*
 - ▷ *What is the best way for me to stay in contact with you?*
 - ▷ *Where are you at the moment?*
 - ▷ *Do you feel safe?*
- Remain in regular contact with your Line Manager so they are up to date with the most current information.

Child is located

If the Police did not return the child, immediately advise Police and provide QPRIME reference number to Child Safety Team

Also make sure you report to the Police and Child Safety if the child:

- Has suffered any harm
- Has been a victim of any offence



Reporting a missing child to Police

Before reporting a child to police be aware that Police have no powers in relation to issues involving:

- ▶ behaviour management
- ▶ returning a child to placement, or otherwise transporting them
- ▶ potential criminality (e.g. property damage) where no criminal complaint will be made



Things to consider...

▶ Joint Agency Protocol

The Joint Agency Protocol has revealed that residential care services who establish a proactive relationship with local police tend to experience a more positive relationship, rather than a reactive, punitive one.

You will normally need to report to police once you have completed the **'during'** checklist, but failed to locate the child.

Police will require you to share as much relevant information as possible to assist them in making a missing report.



Things to consider...

► **First Responder**

Be aware that officers responding to calls for service are more likely to be uniformed general duties officers. These officers are unlikely to have had significant exposure to children who have experienced trauma. The intentions of these officers when attending a call for service will be to ensure the physical safety of all persons present and to determine whether a criminal offence has occurred. Despite this, it is important to establish your concerns regarding the child.

- We suggest you write all necessary information down to be as prepared as possible for your conversation with Police. The following list is not intended to replace any existing policies or procedures, such as the Queensland Government's Missing Child checklist and is not a substitute for making a missing person report to police.

Information to prepare

- Personal information such as name (including aliases), age, date of birth and gender.
- Physical appearance, including identifying features (height, eye colour, hair colour, complexion, scars, birthmarks, tattoos, piercings etc)
- Any distinguishing features?
- Language spoken.
- What were they wearing last?
- Current address.
- Any locations that the child may frequent? Whether they have been checked.
- Address gone missing from/last known whereabouts.
- Time that they were last seen and by whom.
- Medical history, including current medications.
- Did they take their medication with them?
- Does this medication have any side effects?
- Are you aware of any special/complex behavioural or emotional needs?
- Triggers that might be relevant for agencies attempting to locate child to be aware of.
- Social media accounts/use. Has anyone reported any activity amongst their friends or family?



- Bank account that they use.
- Details of their peers, family, connections across the community.
- School or employment details.
- Necessary enquires that you have made to locate the child.
- Have they taken any of their possessions with them or left something behind that is out of character for them?
- If the child has gone missing before, the circumstances surrounding this and how they returned home/ place of care.
- Share any circumstances which increase the risk to the child.
- Any significant life events, relevant to the current situation.



Things to consider...

► Regarding perceived inaction by police

Be clear about why you have called them and what your concerns are.

If you feel that your concerns aren't being listened to and that police haven't acted on behalf of the child, there are things that you can do. Ask for the police badge number/ name, station.

Ask the details of their commanding officer/ officer in charge. Reiterate that there is a missing child, their whereabouts are unknown and you have concerns for their safety.

Immediately write down details of your interaction.

Speak with your line manager and relay all the information clearly and factually.

Check with management regarding agency protocol/ organisational procedure regarding a formal complaint process to QPS.

- Police may request a recent photograph of the missing child to assist their efforts to locate the child. Make sure the photo that you provide is current.
- Note the details of the police officer that you will remain in contact with regarding the missing child.
- If there is additional information that you think may be helpful for police to know, make contact and provide this as soon as possible.



Useful Numbers

Listed here are phone numbers that may be useful for you (as of 29/4/2024). Space has also been provided for you to write down your own 'go to' numbers.

Child Safety phone number is different depending on the Region in QLD that you live in.

Monday-Friday 9-5pm

Brisbane and Moreton Bay.....**1300 682 254**
Far North Queensland.....**1300 684 062**
North Queensland.....**1300 706 147**

South East.....**1300 679 849**
South West (Darling Downs).....**1300 683 390**
South West (West Moreton)**1800 316 855**
Sunshine Coast and Central Queensland ..**1300 703 762**

After Hours Child Safety

Outside business hours.....**1800 177 135**

Police

Police - If in need of urgent help call emergency services (Police, Ambulance, and Fire) on **000**

Police Assistance Line if there is no immediate danger or you want to report non-urgent crime, contact 24-hour service **131 444**

If your concern is about online child exploitation and abuse you can report directly to the Australian Centre to Counter Child Exploitation at Report abuse | ACCCE <https://www.acce.gov.au/report>

If you would prefer to report in confidence visit Crime Stoppers at <https://crimestoppers.com.au/> or by phoning **1800 333 000**



Helplines

Lifeline (24 hours a day, 7 days a week) free crisis helpline **13 11 14**

Kids Helpline - 5- 25 years (24 hours a day, 7 days a week) **1800 55 1800** or go to <https://kidshelpline.com.au/>

eheadspace - 12-25 going through a tough time, you can talk to eheadspace youth mental health professionals (9am-1am, 7 days a week) **1800 650 890** or Connect with a mental health clinician 1-on-1 | headspace

Sexual Assault Counselling Australia - Over 18 years (24 hours a day, 7 days a week) **1800 211 028**

LGBTIQ+ Violence Service - Over 18 years (24 hours a day, 7 days a week) **1800 497 212**

Statewide Sexual Assault Helpline - All ages (7.30am-11.30pm, 7 days a week) **1800 010 120**



Your 'go to' numbers

		
.....
		
.....

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After



► After

This 'after' component of the toolkit focuses on improving frontline support workers' connection with children in out-of-home care. By taking a holistic approach, frontline support workers can create stability and decrease the likelihood of future missing episodes.

When a child returns, it's imperative that aside from ensuring compliance with legislative reporting and operational policies and procedures, their return is met with unconditional positive regard, and a focus on ensuring there are ample opportunities for conversation.



Queensland Government, Out-of-home Care Outcomes Framework, **safe and nurtured** domains states; *Children and young people feel cared for and nurtured in stable environments, safe from abuse, neglect, violence, and threat.*

Research undertaken with children living in out-of-home care arrangements reports that they often felt that key people involved in their care (caseworkers, carers, police, biological family, etc.), were not very concerned about the reasons **why** they had left the home or place of care and made assumptions about why they might have gone missing. This contrasted with what children wanted when they returned, such as some form of support and demonstration of care for their well-being – for example, receiving a home cooked meal and listening to the young person's concerns.

We know from research that the attitudes of police and frontline support staff towards children can have a huge impact. Whether that be in a positive or negative way, especially in relation to how the child will engage with subsequent investigations and safety planning. You may find that the child has had a previous negative experience when interacting with statutory agencies, therefore they may struggle to engage

positively in future interactions. For this reason, good practice guidance might be needed to help inform professional actions when a child is missing and subsequently returns.

Queensland Family & Child Commission (2018). *Young people's perspectives of residential care, including call-outs.*



Online Resource

[Click here](#) ► or scan the code →



Children should be given the opportunity to nominate who undertakes the return home conversation. Article 12 of the United Nations Convention on the Rights of the Child holds that the child has the right to have a say in all matters that affect them. In Queensland, the *Human Rights Act 2019* also guarantees the right of every person to take part in public life without discrimination.



You probably already have a range of strategies that are utilised in your practice to build relationships with children, but here are a few other practical strategies that you may like to consider, specific to when a child returns to their home or place of care.

First and foremost, keep an open mind and be curious.

- Be non-judgemental in the language you use.
- Be accessible to the child, so they can talk whenever they are ready.
- Consider using open ended questions that begin with the following words; **why, how, what, tell me about, what do you think about.**
- Be open and honest in conversation. You don't need to know everything.
- Be calm, listen, understand, compromise, and show kindness.
- Make sure they are safe and well.
- Help them to feel loved and cared for.
- Take any verbal threats to run away again seriously.



**Things to consider...****► Negative approaches**

- Avoid the heat of argument, blaming, scolding, or guiltning them.
- Try to avoid overly punitive responses.
- Consider whether the house rules are reasonable, fair and age appropriate.
- Avoid making assumptions, try to understand their reasons for leaving.

**Things to consider...****► Language**

However, “streetwise” or self-sufficient a child who goes missing may appear, they are first and foremost a child and may be extremely vulnerable to multiple risks, such as criminal or sexual exploitation in the community. Victim blaming language that implies knowledge beyond their years, or a lack of childhood innocence, impacts risk assessments, attitudes and narratives surrounding the missing child and should therefore be avoided. Consider using the ‘*Language Choices Matter*’ activity. **Appendix 3.**

Return Home Conversations

Every child that has returned to their home or place of care from being missing should be offered a return home conversation. This should be conducted as soon as reasonably possible after the child has returned, usually within 72 hours.

There are instances where completing the return home conversation within 72 hours is not possible or appropriate.

For example, if the child is hospitalised for physical or mental health reasons, under criminal investigation or appearing too distressed to talk. In any other circumstance where it is not immediately possible, a return home conversation should happen as soon as is reasonably practicable after the time of return.

A return home conversation is an important safeguarding mechanism, providing an opportunity for the child to be heard and their experiences, worries or concerns about what happened while they were missing can be discussed.

The child may decline or refuse to meet with any frontline support worker. If this is the case, be curious and ask the child for feedback to help understand why they do not want to talk. Sometimes they might just need space to process what has happened.

This refusal and conversation should be recorded in case notes and may in itself be an indicator that something is wrong.

If they decline the first time, ask again. If the child continues to go missing, offer a return home conversation when/if they return.

You probably already have a range of strategies that you utilise in your practice to undertake return home conversations with children. Here are a few other practical tips and strategies you may wish to consider:

- Arrange to hold the conversation in a neutral place where the child feels safe.
- Mean what you say, say what you mean. Ensure your words are clear and consistent and your body language reflects your words.
- Your conversation needs to be caring, creative, engaging and courageous in order to develop a sharing culture and relationship - use child friendly discussion techniques. Consider using the 'Conversations Approaches' guide. **Appendix 3.**
- At the start of the conversation, be open and honest about confidentiality and your obligations.



Things to consider...

► Confidentiality

- How will the information be used?
- Will this information be shared directly with professionals already involved with the child?
- Does the child understand with full knowledge, the limitations of confidentiality and how information might be used.

Consider whether to:

- Convene a multi-agency strategy meeting;
- Arrange an early out-of-home care review;
- Review any prevention/support work currently being undertaken with the child.

What happens during a Return Home Conversation if the child discloses child sexual abuse and exploitation, trafficking, or criminal activity?

- Remind them of your obligations regarding confidentiality and duty of care.
- Be transparent with the child about the steps that will need to be taken.
- Continue to build a positive relationship with the child.
- It is important to follow your Organisational Policies and Procedures (Reporting to Management/ Incident reports/Notifications, etc).

- Following a disclosure of sexual abuse and exploitation, you need to contact the Police. If you need to report online sexual exploitation this can be done via the Australian Centre to Counter Exploitation at <https://www.accce.gov.au/>



- Following this you need to contact Child Safety to complete a notification.
- Have a follow up conversation with the child's current Child Safety Officer.
- Consider utilising the 'Reflective Cycle' activity. **Activity 7.**

What happens if you suspect Child Sexual Exploitation or Criminal activity is happening, but there hasn't been a disclosure?

- Continue to build a positive relationship with the child.
- Discuss your concerns with your Line Manager.
- Speak to other agencies that are supporting the child to see if they have similar concerns. For example, school, Youth Justice, health etc.
- It is important to follow your Organisational Policies and Procedures (Reporting to Management/ Incident reports/Notifications, etc).

- Consider convening a multi-agency stakeholder meeting. Consider the fact that you may hold critical information that they are unaware of.
- Together work out a clear plan to support the child and manage any concerns.
- Continue to gather information and share amongst agencies.
- Consider utilising the 'Reflective Cycle' activity. **Activity 7.**



Article 16 of the UNCRC outlines the importance of privacy. It states:

"No child should be subjected to arbitrary or unlawful interference with his or her privacy, family, home or correspondence, not to unlawful attached on him or her honour and reputation."

Moving Forward, together

The objective is to create a supportive, caring environment where the child is less likely to be pushed or pulled to leave the home or place of care.

Factors that reduce the chance of going missing include:

- strong relationships with family, friends, supportive adults, peers and teachers;
- knowing what the child or young person is allowed to do or not do and having clear boundaries;
- developing social and learning skills, including problem-solving skills and ways of coping with difficult situations;
- close positive adult role model in the child's life; and
- a strong and supportive community.



Here are a few practical tips and strategies that you may wish to consider moving forward.

- Take a solution focused approach, by helping the child to think of safe and healthy ways to problem solve. Consider utilising the *'Conversation Approaches'* guide. **Appendix 3.**
- Encourage opportunities for regular catch ups.
- Invite opportunities to explore feelings safely. Be empathetic and supportive in helping the child understand their experiences, triggers, feelings and events and take time to reflect on this. Consider utilising the *'Feelings List/Cards'*, *'Feelings Wheel'*, *'What makes me happy'* activities. **Activity 1,2,3,5.**
- Continue building a positive relationship with the child.
- Learn to notice potential triggers. Try to work collaboratively with the child to reduce their occurrence. To support this process, consider utilising the *'Feelings List/Cards'*, *'Feelings Wheel'*, *'What makes me happy'* activities. **Activity 1,2,3,5.**
- Give the child a sense of control through simple choices. Respect the child's decisions.
- Don't take the child's behaviours personally.
- If the child is going to be referred to additional supports, encourage them to attend appointments and support them to do so. This could be as simple as reminding them about upcoming appointments and/or transporting them.
- Refer to your safety plan as needed.
- Update and review the safety plan after every missing or absent episode.
- Reflect on your own practice – Consider utilising the *'Reflective Cycle'* activity. **Activity 7.**

How to support yourself.

Sometimes it can be difficult to switch off from work, especially if a child we support is currently missing or absent.

Here are some things to consider that may help.

- If the positive relationship and connection with the child means you are the one taking the lead, consider what support you need from your team. Sharing the load can be instrumental in helping to avoid burnout.
- Keep clear case notes and make sure safety plans are kept current and updated daily. This will enable colleagues to pick up where you left off, if you are called away to deal with other matters unexpectedly.
- During the next supervision with your Line Manager, consider discussing any current concerns you have about the impact your work may be having on you – the *'Reflective Cycle'* activity can be a useful tool for this. **Activity 7.**
- Consider utilising external supervision – This can be a useful way to develop your professional identity and practice that supports growth within your role.
- Frontline staff are not always adequately equipped or supported to work with such complex cases, which can undermine their confidence and ability to work effectively. Consider undertaking

professional development that enhances your ability to better support the children you work with. **Project Paradigm** provides CPD endorsed Child Sexual Exploitation awareness training to frontline support workers and professionals across Queensland. Visit their website for more information.



Online Resource

<https://projectparadigm.com.au/>



After Checklist

After the child returns to place of care/home.

Update	Yes	No	Comments
▶ Check the child's medical condition and make any necessary arrangements			
▶ Update Line Manager			
▶ If the Police did not return the child or young person, notify them immediately.			
▶ Update the Child Safety Officer/Child Safety after hours			
▶ Update the staff/team that work in the home/place of care			
▶ Contact all agencies that are involved in the child's care.			
▶ Contact education/training provider (if applicable)			
▶ Update family members or friends (if applicable)			
▶ Have return home conversation.			



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Activity Resources & Appendices



ACTIVITY#1/Feelings List

IDEAS

- Pick a card • Ask how they help • Explore how others might feel • Match emotions to scenarios • Colour can be the start of a conversation about their feelings. e.g. are you feeling red?

This activity helps children to develop both, their emotional literacy and emotional intelligence. The Feelings Cards and Feelings List are an easy and fun way to help children understand their feelings and support the development and practice of emotional self-regulation.



Angry

angry	stressed	jealous
enraged	critical	frustrated
frustrated	annoyed	skeptical
irate	selfish	livid
irritated	hurt	bitter
hostile	irritated	envious
cross	raving	exasperated
vexed	displeased	
furious	spiteful	



Strong

powerful	proud	focused
empowered	confident	important
faithful	successful	aware
appreciated	creative	worthwhile
courageous	respected	valuable
strong	loyal	discerning
persuasive	controlling	influential
dynamic	able	dominant
forceful	forcible	capable



Sad

sad	guilty	ashamed
remorseful	fragile	sleepy
vulnerable	isolated	apathetic
lonely	miserable	inferior
depressed	bored	stupid
indifferent	wronged	desolate
sorrowful	despairing	grieving
down	mournful	
gloomy	tired	



Happy

happy	interested	energetic
optimistic	hopeful	sensuous
excited	aroused	cheerful
playful	joyful	amused
content	valued	creative
accepted	curious	stimulated
satisfied	glad	blessed
delighted	jubilant	blissful
elated	lively	thrilled



Scared

scared	rejected	bewildered
weak	worthless	discouraged
insecure	inferior	insignificant
confused	perplexed	inadequate
threatened	nervous	ignored
anxious	bothered	distraught
panicked	distracted	jittery
shaken	tormented	troubled
worried	excluded	



Calm

peaceful	intimate	safe
connected	belonging	content
trusting	sensitive	nurturing
thankful	loving	pensive
secure	serene	responsive
thoughtful	relaxed	attentive
tranquil	quiet	prudent
composed	placid	cautious
calm	restful	careful



- Use as a poster to help children identify their emotions.
- Identify feelings.
 - Role play.
- Emotional check-ins.

Feelings Cards

			
WORRIED anxious, overwhelmed, uncomfortable, unsafe, fearful	PROUD self-reliant, strong, empowered, pleased	CALM quiet, relaxed, peaceful, serene	HAPPY loved, joyful, safe, cheerful, hopeful
			
SAD unhappy, disappointed, miserable, hopeless, gloomy	BRAVE courageous, fearless, empowered, strong, daring, independent	ANGRY annoyed, frustrated, cross, outraged, hurt, mad	SCARED frightened, terrified, fearful
			
DISAPPOINTED unhappy, sad, upset	CONFUSED overwhelmed, puzzled, muddled	LONELY sad, overwhelmed, ignored, forgotten, unhappy, hurt	SHAME unhappy, unsafe, guilty
			
GUILTY shame, confused, unhappy, uncomfortable	EMBARRASSED confused, worried, sad, uncomfortable, shy, unhappy	EXCITED happy, joyful, thrilled, curious, silly, interested	CONFIDENT relaxed, secure, comfortable

✂ Cut out each card.

Reference: Socialworkerstoolbox.com

ACTIVITY#3/Feelings Wheel

This activity helps children to develop their emotional literacy. The Feelings Wheel is an easy and fun way to help children understand their feelings and support the development and practice of emotional self-regulation. Practice using the Feelings Wheel often, use it to talk about an experience, provide words for their feelings and/or talk about something that has happened in their day.

IDEAS

- Use the feelings wheel to ask focused questions about how the child feels.

HOW DO I USE THE WHEEL?

Suitable for ages 5+



HOW STRONG IS THE FEELING FROM 1 - 10?
1 BEING NOT STRONG &
10 BEING STRONG FEELING



HOW LONG HAS THE FEELING LASTED?



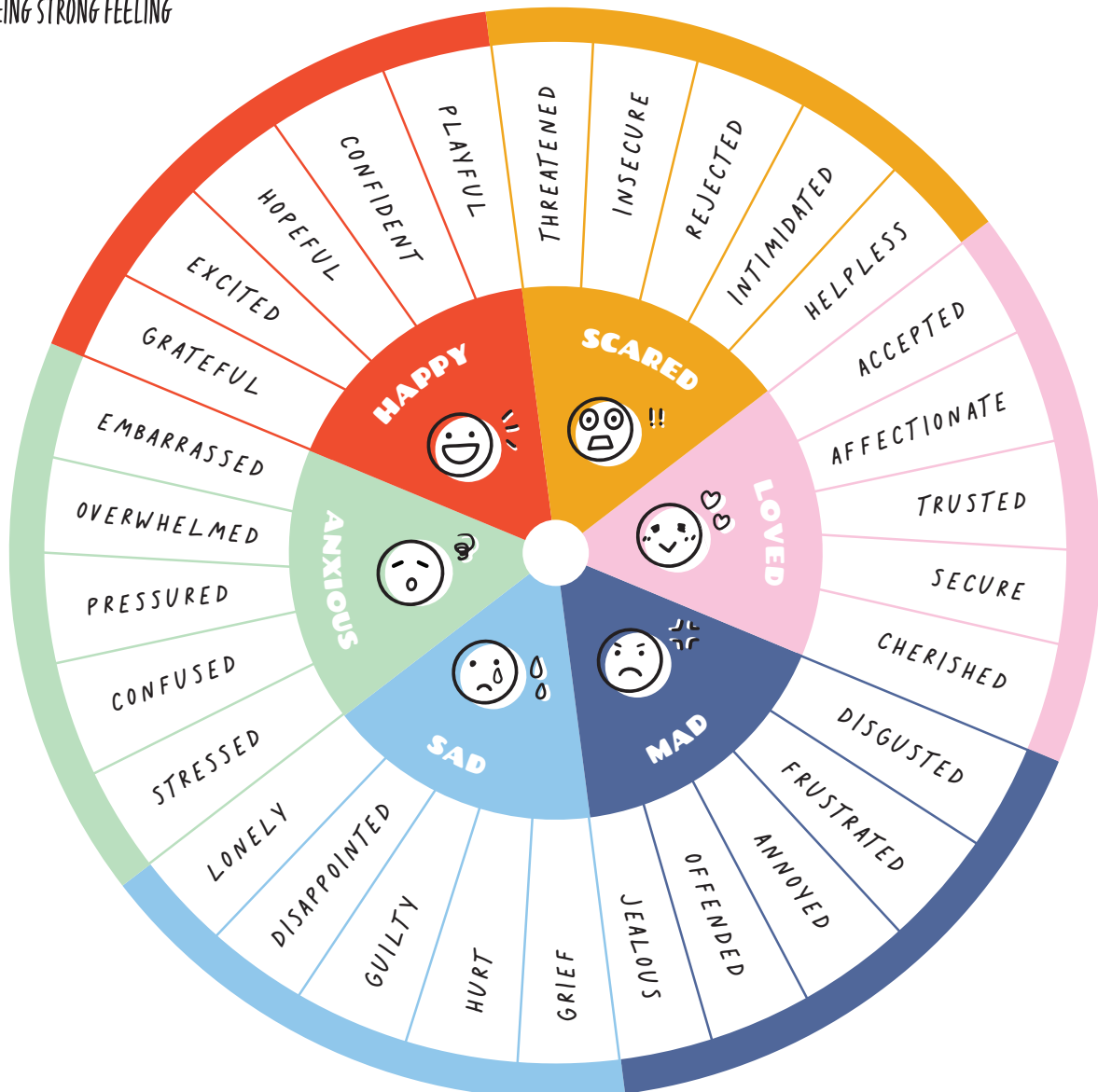
WHEN WAS THE LAST TIME YOU FELT THIS WAY?



WHAT THOUGHTS ARE YOU HAVING?



WHAT IS HAPPENING IN YOUR LIFE RIGHT NOW?



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ACTIVITY#4/Mindfulness

These activities help children to manage their emotions, focus and develop positive feelings.

IDEAS

- Practice Journaling
- Guided Meditation
(viable options online)
- Exercise
- Muscle Relaxation
- Colouring in
- Positive Self Talk
- Use Fidgets
- Talk to Loved Ones

Mantras

Set up mantras, find a quiet place and focus on breathing and closing your eyes. Speak your mantra out loud several times.

"I am enough, I do not have to change myself to be enough."

"I believe in me and in what I am capable of doing."

"I am smart and clever and am willing to learn."

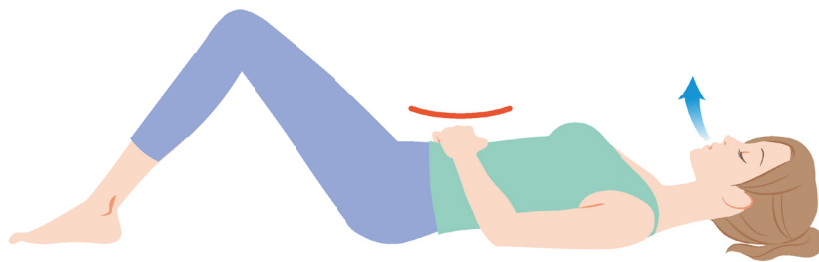
"I am strong and can overcome challenges."

"I am safe and loved by my friends and family and those that know me."

► Practice breathing activities like the ones below.

Belly Breathing

Lay somewhere comfortable on your back. You can place a soft toy on your belly. Close your eyes if you would like to. Focus on slowly breathing in, feeling your belly expand slightly; and then slowly, breathing out. Repeat for several breaths.



Breathe

4

Close your mouth, inhale through your nose to a count of **FOUR**

7

Hold your breath for a count of **SEVEN**

8

Exhale completely through your mouth to a count of **EIGHT**



ACTIVITY#5/What makes me happy?

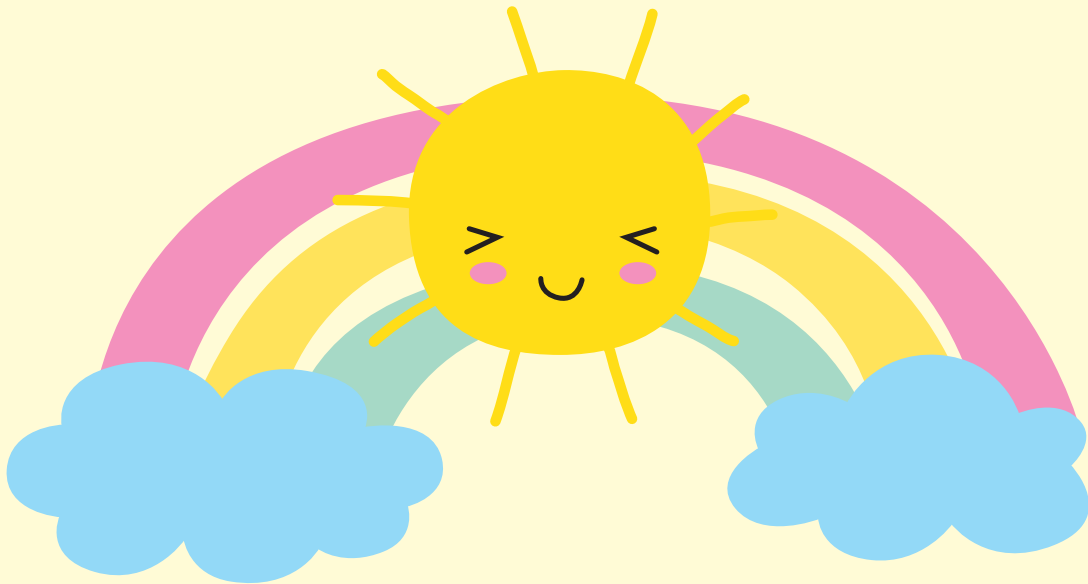
This activity is a great way for a child to explore who, what and where makes them feel the happiest. This activity can be placed straight onto their case file and used as a tool to identify supports and activities for a child to build connection to/with.

IDEAS

- Pets
- Reading
- Drawing
- Dancing
- Hugs
- The Beach

What makes me happy?

- Can you draw all the **things** that make you happy?
- Can you draw all the **people** that make you happy?
- Can you draw your **happy** place?
- Is there anything else that makes you **happy**?



Name: _____ Date: ____/____/____ Reference: Inspired by twinkl.com.au

ACTIVITY#6/Networks of Support

This activity is a visual tool that is designed to help identify a child's safety and support network.

TIP

Use this as an idea, you could draw this out with the child and create your own.

Questions that you could ask the child to assist in completing this activity.

These questions are not exhaustive, utilise your professional expertise and relationship with the child to complete the networks of safety. Consider using the key words within each circle and ask questions about the child's connection to these people/places.

- ▶ Who could you rely on for support?
- ▶ Who could you talk to if you were worried about something?
- ▶ In what ways can they help you?
- ▶ Who could you call if needed support?
- ▶ Is there someone that could provide you with support?
- ▶ Is there someone that you no longer want to provide you with support?
- ▶ Who do you feel safe talking with about how you feel?
- ▶ Are there any Organisations that could support you?
- ▶ Is there anybody in the neighbourhood that could support you?
- ▶ Is there anyone you see outside of school that could support you?
- ▶ Are there any resources that you could use? E.g. Kids Helpline
- ▶ Who makes things harder for you?
- ▶ Who doesn't know anything about you?
- ▶ Is there someone who has recently started supporting you? (There are many ways support can be provided, such as information, financial or practical support).



Things to consider...

Sensitivity

Exercise sensitivity as this may be more difficult and take more time for some children than others, for example some children may not feel safe talking to or about their individual situations. This activity may also be confronting for children who have minimal supports and/or networks.

Be prepared for any disclosures the child may give regarding their respective supports.

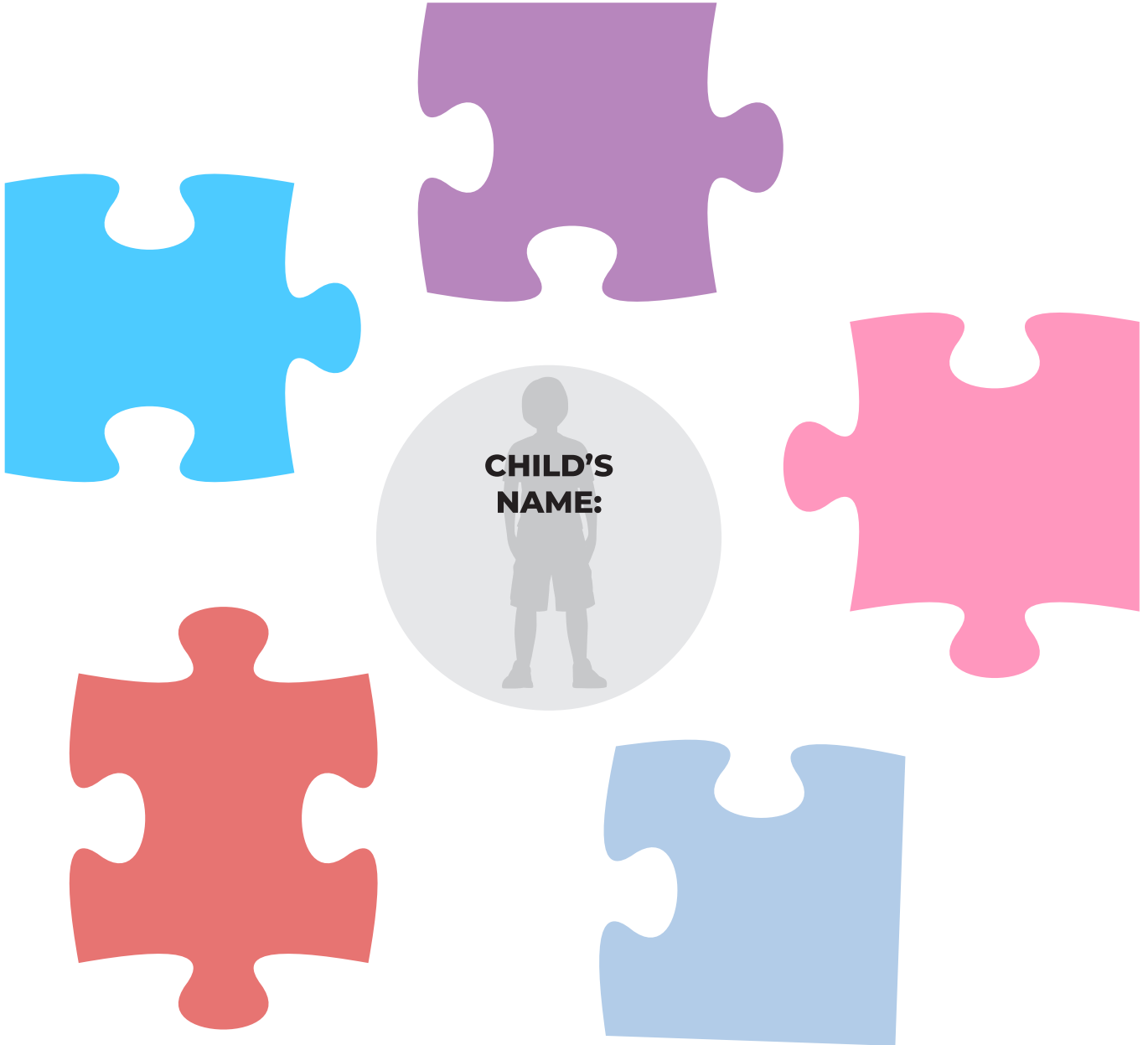


Reference: (Inspired by) Sonja Parker 2015

ACTIVITY#6/Networks of Support

Name: _____ Date: ____/____/____

Person completing the activity: _____



Add extra pieces if needed.



ACTIVITY#7/Reflective Cycle

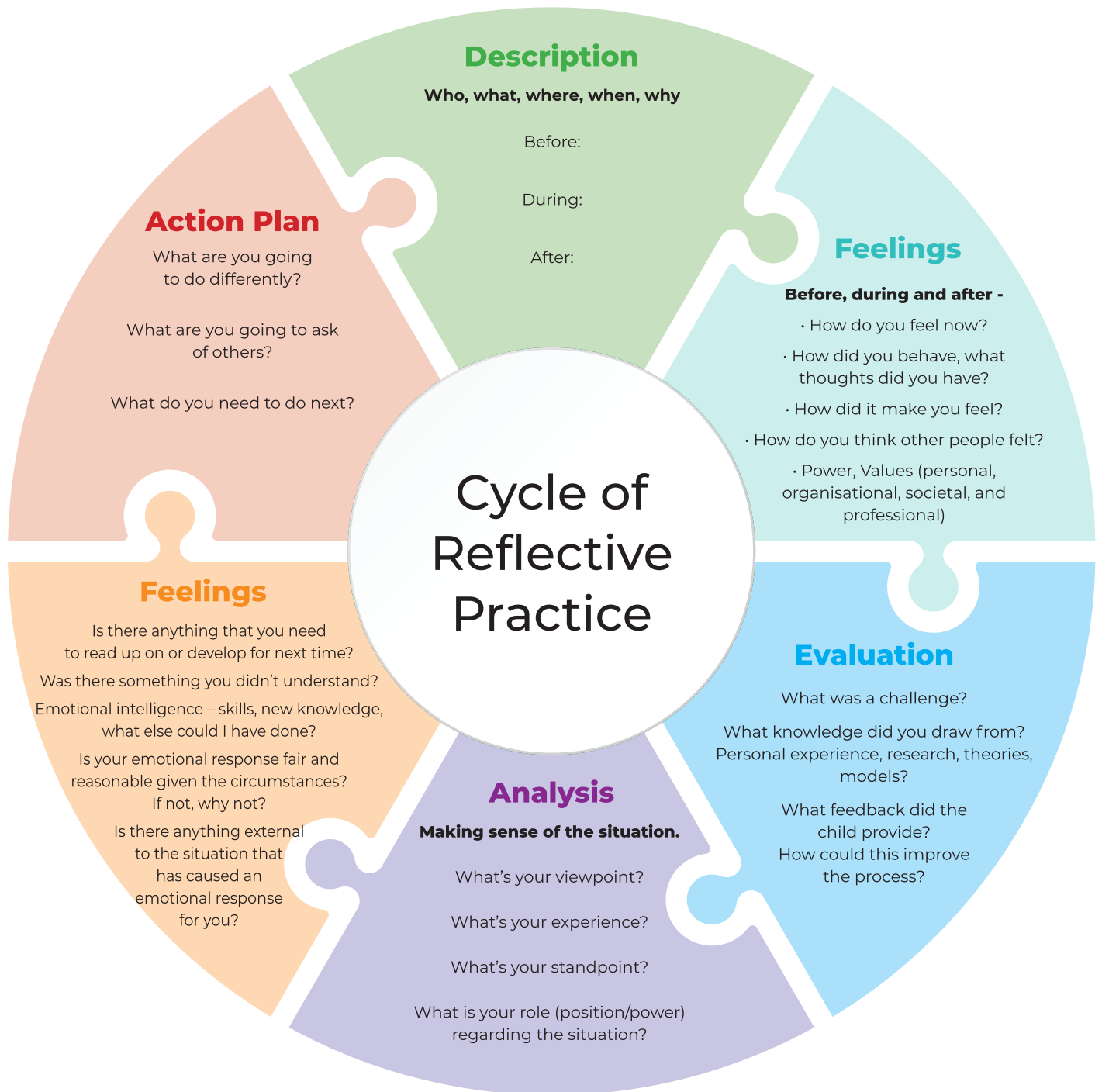
TIPS

Use this tool to think, feel and 'do' differently about an experience.













































Things to consider...

This activity can help to develop your critical reflective practice, helping learn through experience, to gain new insight and enhance practice. This could be used for individual reflection, care team discussion, clinical supervision, or for incident debrief. Consider discussing with your Line Manager or in your next supervision.



Appendix 1

UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD Child friendly adaptation (Article 1 - Article 42)

1 DEFINITION OF A CHILD 	2 NO DISCRIMINATION 	3 BEST INTERESTS OF THE CHILD 	4 MAKING RIGHTS REAL 	5 FAMILY GUIDANCE AS CHILDREN DEVELOP 	6 LIFE SURVIVAL AND DEVELOPMENT 	7 NAME AND NATIONALITY 
8 IDENTITY 	9 KEEPING FAMILIES TOGETHER 	10 CONTACT WITH PARENTS ACROSS COUNTRIES 	11 PROTECTION FROM KIDNAPPING 	12 RESPECT FOR CHILDREN'S VIEWS 	13 SHARING THOUGHTS FREELY 	14 FREEDOM OF THOUGHT AND RELIGION 
15 SETTING UP OR JOINING GROUPS 	16 PROTECTION OF PRIVACY 	17 ACCESS TO INFORMATION 	18 RESPONSIBILITY OF PARENTS 	19 PROTECTION FROM VIOLENCE 	20 CHILDREN WITHOUT FAMILIES 	21 CHILDREN WHO ARE ADOPTED 
22 REFUGEE CHILDREN 	23 CHILDREN WITH DISABILITIES 	24 HEALTH, WATER, FOOD, ENVIRONMENT 	25 REVIEW OF A CHILD'S PLACEMENT 	26 SOCIAL AND ECONOMIC HELP 	27 FOOD, CLOTHING, A SAFE HOME 	28 ACCESS TO EDUCATION 
29 AIMS OF EDUCATION 	30 MINORITY CULTURE, LANGUAGE AND RELIGION 	31 REST, PLAY, CULTURE, ARTS 	32 PROTECTION FROM HARMFUL WORK 	33 PROTECTION FROM HARMFUL DRUGS 	34 PROTECTION FROM SEXUAL ABUSE 	35 PREVENTION OF SALE AND TRAFFICKING 
36 PROTECTION FROM EXPLOITATION 	37 CHILDREN IN DETENTION 	38 PROTECTION IN WAR 	39 RECOVERY AND REINTEGRATION 	40 CHILDREN WHO BREAK THE LAW 	41 BEST LAW FOR CHILDREN APPLIES 	42 EVERYONE MUST KNOW CHILDREN'S RIGHTS 

Appendix 2 Conversation Guide

TIPS
Breathe, Relax,
Stay Calm
and Listen

There are a range of methods that may assist when having the Return Home/
Place of care conversation with the child, these include:

Motivational interviewing.

Motivational Interviewing aims to enhance a person's motivation to change problematic behaviour by exploring and resolving their ambivalence about change. The main goal of Motivational Interviewing is to increase the child's readiness to change and to help them plan for, make, and maintain change.

Open ended questions.

Are useful for gaining insights, understanding and context from a child. Ask questions that start with **who, what, why, when, did you, have, has, where and how.**

Make affirmations/give praise.

Giving praise boosts a child's self-esteem and shows them how to think and talk about themselves in a positive way.

"I appreciate that it took a lot of courage to meet today and chat about what happened while you were missing."

Strength based.

Notice strengths, skills, and resources – children are experts in their own lives. Talk with the child about these Strengths and focus on these when speaking to other frontline staff.

'Being heard' gestures.

Gestures such as smiling, maintaining eye contact, nodding from time to time while they are speaking and showing appropriate facial expressions contribute to the child's perception that you are listening.

Validate their feelings.

Recognize, understand and express acceptance of their feelings. Use phrases like, **"I understand that you are..."**, **"I can see how you would feel that way?"** **"That sounds difficult."**

Use resources Feelings List, Feelings cards.

Talking about feelings can be uncomfortable, therefore combining discussion with an external activity will often help children open up about their feelings.

Externalising practice.

This allows conversations to move from locating the problem from the identity of the child and recognise the influence of the problem across domains such as self, thought, action, school, home, relationship as well as locating the problem in context to broader contexts. (Narrative Theory).

Summarising.

Check in to make sure that you have understood what has been said and allows the child to correct if there has been a misunderstanding. Summarising shows active listening. Be fully present, attentive, and receptive to the child's words and non-verbal cues.

Person centred.

Focus on the child and their specific needs, interest, values, and unique circumstances. Listen to what's important to them and value their perspective.

Emotional intelligence/literacy.

Teach the child words to identify and describe their feelings when they are calm, words they can use when they get upset. Show acceptable ways for them to deal with.



Appendix 3

Language Choices Matter Guide

To understand the impact of language on a child, thought needs to be given to the powerful role language holds in shaping the identity of children and how stigma, shame and silencing is associated with certain words and phrases.

Whilst this guide does not offer an exhaustive list of phrases, it does present as an opening to shape broader conversations about the types of language and terminology used, regarding children in care.

The aim of this guide is to encourage the use of language that adopts a child's rights approach, where every child is given a fair go and treated with respect in a trauma informed way.

Language relates to not only our spoken word but also the way in which we write about; (recording, notetaking, and reporting) and act (non-verbal) with children in care.

What is victim blaming?

Victim blaming language is language that implies that the child is in some way (wholly or partially) responsible for the abuse and/or harm that they have experienced. This can be intentional or unintentional in nature.

What is the impact of victim blaming?

Victim blaming language trivialises the experiences of the child and sets the tone regarding the action, care and supervision provided to the child in question. The child may themselves, feel to blame and go on to internalise the victim blaming language used about them. They may be less likely to disclose further incidences of abuse or harm or choose to seek support.

What could I do differently?

When considering the language, **context is important.** For example, if someone is saying a child is 'shut down, or 'has shut down' consider what might have happened directly beforehand. Have they recently been in contact with someone? Has something been difficult at school? Have they had a recent disagreement or tension within the home/place of care? This list is not exhaustive and needs to be contextual to the child. All relevant events should be part of the child's narrative. Be curious and ask questions.

Choose different language that reflects the power and control elements exerted on the child, remembering that the child is never responsible for the abuse.

Reflect on your own practice and the language that you use.



Do you use any of the language in the list provided?



Does the language you use/read/hear reflect the situation of the child appropriately?



Does the language choose to place the problem on the child?





Are you curious about the language used regarding a child and where it has come from?



Can you help support a child in ensuring that their story is correctly reflected and shared?

Appendix 3

Language Choices Matter Guide

 Avoid Using	 Consider Using
<ul style="list-style-type: none"> ■ Abscond 	<ul style="list-style-type: none"> ■ Running away or going missing. Absent from placement means absent for a short period without permission. Child's location is known or can be quickly established.
<ul style="list-style-type: none"> ■ Associating with/in a relationship with (adult or older young person) 	<ul style="list-style-type: none"> ■ Child is being abused groomed/coerced/manipulated/controlled by/ being exploited by.....(To learn more about exploitation visit Project Paradigm, https://projectparadigm.com.au/)
<ul style="list-style-type: none"> ■ Attention seeking 	<ul style="list-style-type: none"> ■ The child may need closeness. ■ The child may be seeking connection. ■ The child may feel insecure, threatened, and unsafe.
<ul style="list-style-type: none"> ■ Boyfriend/girlfriend (with an older young person or adult) 	<ul style="list-style-type: none"> ■ There are concerns around an association that the child considers a 'relationship' in regards to disproportionate age, imbalance of power and there are concerns that the child is being groomed and exploited.
<ul style="list-style-type: none"> ■ Disengaged 	<ul style="list-style-type: none"> ■ The child may not feel safe enough to disclose. ■ Services were unable to engage with the child. ■ The child may be exploited and groomed and therefore unable to engage.
<ul style="list-style-type: none"> ■ Dishonest/Sneaky 	<ul style="list-style-type: none"> ■ The child may be confused. ■ The child may be scared. ■ The child may not understand their actions and how they are perceived. The child might be confused. The child may be displaying behaviours that are the result of coercive control and are fearful of the consequences. The child may be feeling threatened, unsafe, and hypervigilant. Child may not have a positive and nurturing relationship with an adult.
<ul style="list-style-type: none"> ■ Placement 	<ul style="list-style-type: none"> ■ Home or place of care
<ul style="list-style-type: none"> ■ Promiscuous 	<ul style="list-style-type: none"> ■ The child may be being sexually exploited or abused (Visit Project Paradigm, https://projectparadigm.com.au/) ■ The child may be coerced and exploited by an adult.
<ul style="list-style-type: none"> ■ Risky behaviour/putting themselves at risk/ risk taking behaviours 	<ul style="list-style-type: none"> ■ The child may have been/is being groomed. ■ There are concerns that the child may be/ is being exploited/sexually abused. ■ The child may be at increased vulnerability of being abused or exploited.
<ul style="list-style-type: none"> ■ Self-sabotage 	<ul style="list-style-type: none"> ■ The child may feel threatened and unsafe. ■ The child may be fearful of change and potential consequences.
<ul style="list-style-type: none"> ■ Shut down 	<ul style="list-style-type: none"> ■ The child may be feeling overwhelmed.
<ul style="list-style-type: none"> ■ Street wise 	<ul style="list-style-type: none"> ■ The child may be representing themselves in an adult way for safety. Their behaviour may be as a result of survival in social and peer situations. This can be a clear indication of exploitation by others

12,000

children living in out of home care in Queensland



12-17
YEAR OLDS

The most common demographic of missing children



53%

Of children in out-of-home care reported missing and were responsible for **77%** of missing episodes



Females

are more likely to go missing, including from Out-of-home care, than males



FACTS
ABOUT
MISSING
CHILDREN

Perpetrators

of child sexual exploitation were found to have deliberately targeted out-of-home care placements



RISK

of going missing increases if they have gone missing before



MISSING

Most prominent indicator of Child Sexual Exploitation



RESEARCH

has identified that brief daytime absences can conceal sexual and criminal exploitation. Missing episodes are short enough to escape the scrutiny of police and other agencies



1/4



Indigenous children comprised over a quarter of missing children, and **18%** of missing youth

9/13%

Those from a CALD background comprised almost **9%** of missing children and **13%** of missing youth



(As of 29/4/2024)