

Public health response to youth justice

Key messages

The known: Research has shown a strong link between child maltreatment and subsequent youth offending.

The new: This NT study found the risk of youth offending was associated with both the level and timing of early child protection system (CPS) contact. Compared to children with no CPS contact, there was a gradient of increasing risk of youth offending with increasing levels of early CPS contact, highest among those with substantiated reports of maltreatment in both early (0-4 years) and middle (5-9 years) childhood.

The implications: CPS contact in childhood provides opportunity for early intervention to reduce youth crime. Interagency collaboration is essential.

Public health approach to youth justice

The public health prevention model in youth justice settings (Myers and Farrell (2008)) can also encompass primary, secondary, and tertiary interventions (Figure 1).

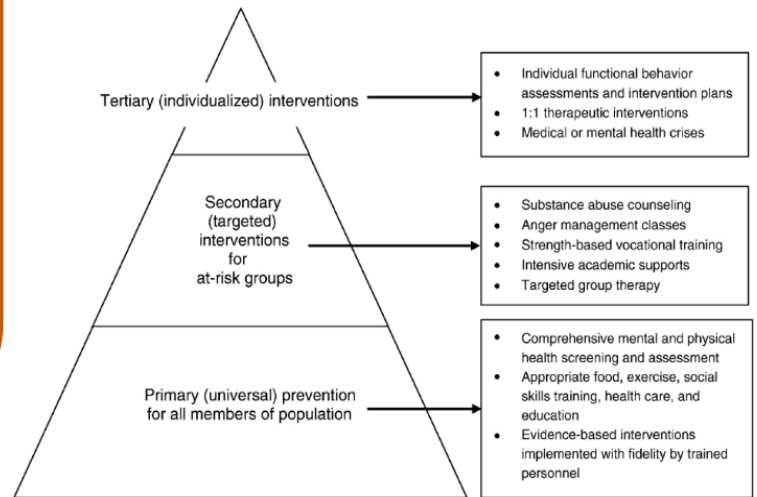


Figure 1: Public health prevention model applied to the juvenile justice setting (Myers and Farrell, 2008)

What do we mean by public health approach?

A public health approach aims to prevent or reduce the impact of an illness or condition at a population level. With this approach, action is taken to:

1. prevent a problem occurring;
2. respond to problem if it does occur; and,
3. minimise its long-term effects

(World Health Organization [WHO], 2006).

How does a public health approach apply in practice?

The public health model is recognised as a basis to ensure children's safety and wellbeing (National Framework for Protecting Australia's Children 2009-2020). It comprises three types of responses: primary, secondary and tertiary services.

The application of a public health approach in crime prevention is supported by the Australian Institute of Criminology (Australian Institute of Criminology, 2003). For example, the prevention of violence could occur in three different forms (a) universal interventions (eg. violence prevention curricula in school), (b) selected interventions (eg. parenting skills training), and (c) indicated interventions.

What do we know about the link between early childhood experience and youth offending?

There has been a growing call for responses to young offending which focus on primary prevention and early support in childhood rather than crisis management and intervention after offending has occurred. There is international evidence of a strong link between maltreatment in childhood and subsequent youth offending. However, most studies have been based on surveys of adults who report their childhood experience. There have been few studies that have assessed whether administrative records collected by child protection services can inform early intervention programs to prevent a pathway to youth offending.

The over-representation of Aboriginal and Torres Strait Islander children in both child protection and youth justice systems speaks to the urgency for a better understanding of protective and risk factors to inform a public health approach to prevention and early intervention. In the Northern Territory (NT), Aboriginal children comprise 44% of all NT children yet, in 2018-2019, made up 87% of children in out-of-

home care and 96% of all youth justice detainees (Australian Institute of Health and Welfare, 2020a, 2020b).

Study aim

To investigate the association between level and timing of child protection system (CPS) contact in childhood and subsequent youth offending.

How did we do it?

The Northern Territory (NT) has an extensive linked data repository which contains de-identified records of children and young people. We selected a study population of 10,438 Aboriginal children born in the NT between 1999 and 2006. There were too few non-Aboriginal children in youth justice data to include them in the study.

What did we find?

- This study found that young people with no CPS contact before age 10 were less likely to have a first alleged offence from age 10 to 18 than young people with a CPS record.
- There was a gradient of increasing risk for a first alleged offence as the level of CPS contact increased from a record of an unsubstantiated notification, substantiation or out-of-home care (Figure 2).
- Timing of CPS contact was also associated with increasing risk of a first alleged offence. This study found a higher risk of a first alleged offence among children with substantiated maltreatment in both early and middle childhood.

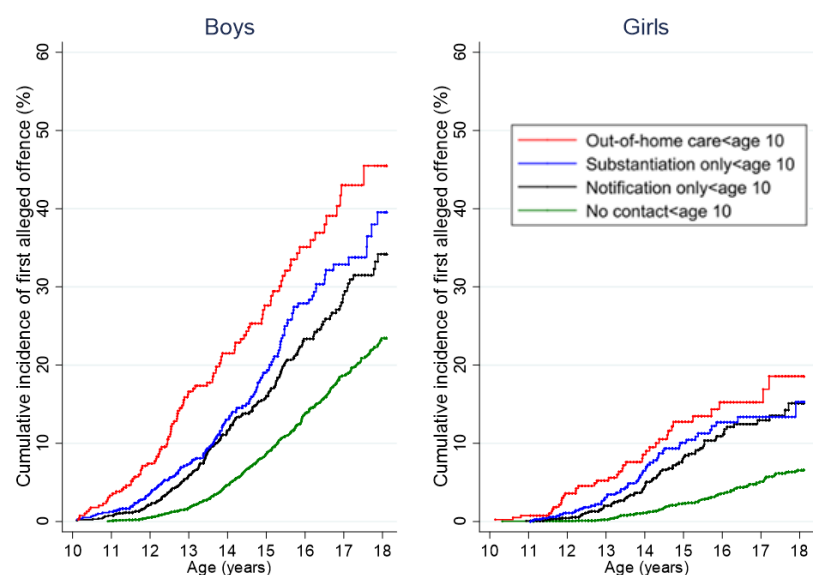


Figure 2: Cumulative incidence of first alleged offence by level of CPS contact

Implications

- CPS contact in early and middle childhood presents an opportunity for interventions to prevent youth offending.
- Children with unsubstantiated notifications have a similar risk of later offending to those with substantiated notifications – both much greater than those children with no record of CPS contact
- This study highlights the importance of interagency collaboration, confirming recommendations of the NT Royal Commission (Royal Commission and Board of Inquiry into the Protection and Detention of Children in the Northern Territory 2017),
- The study also supports a separate recommendation of the NT Royal Commission calling for more research into place-based strategies for community safety and crime prevention to inform a whole-of-community approach and inter-agency collaboration to child protection and youth justice.
- This study speaks to the need for broader public health initiatives that recognise the complex range of factors (individual, familial, historical and contextual) that underpin poor social outcomes.

Conclusion

The increased risk of offending associated with level and timing of early CPS contact highlights opportunities for a differentiated public health response to improve life trajectories for children and to reduce youth crime.

References

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Source: He VY, Leckning B, Malvaso C, Williams T, Liddle L, Guthridge S. Opportunities for prevention: a data-linkage study to inform a public health response to youth offending in the Northern Territory, Australia. *BMC Public Health* 21, 1600 (2021). Available at: <https://doi.org/10.1186/s12889-021-11645-4>

Acknowledgement: The study was funded by the NT Government through the Child and Youth Development Research Partnership.