

# Literature review

Understanding and responding to child sexual and criminal exploitation



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Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

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In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.

**ISBN 978-1-76171-082-7 (pdf/online/MS word)**

Available at [Child sexual exploitation practice guide for Child Protection Manual Victoria <www.cpmanual.vic.gov.au/advice-and-protocols/specialist-resources/child-sexual-exploitation/child-sexual-exploitation>](http://www.cpmanual.vic.gov.au/advice-and-protocols/specialist-resources/child-sexual-exploitation/child-sexual-exploitation)



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# Executive summary

This review of the literature synthesises national and international evidence on child sexual exploitation (CSE) and child criminal exploitation (CCE).

It draws on a literature review of more than 300 publications that was commissioned by the Victorian Department of Families, Fairness and Housing (the department). It is designed to outline the knowledge foundation for the practice tools released concurrently.

## Context

CSE and CCE are distinct but overlapping forms of child abuse involving coercion, manipulation and exploitation of power imbalances.

Policy and practice in relation to CSE is more developed than for CCE, which remains under-recognised and poorly defined in Australia.

Both forms of exploitation cause significant and long-lasting harm. They need coordinated, trauma-informed, rights-based responses that extend beyond traditional family-focused child protection models.

## Key findings

### Vulnerability is intersectional, not inherent

Characteristics such as age, gender, sexuality, culture, disability or neurodiversity can make children and young people more vulnerable to CSE and CCE. However, these characteristics alone do not mean a child or young person will be exploited.

Rather, exploitation risk increases where characteristics such as age, gender, sexuality, culture, disability or neurodiversity intersect with other risk factors such as trauma, socioeconomic disadvantage, discrimination, disrupted home environments, school exclusion and social isolation.

Aboriginal and Torres Strait Islander children and young people are disproportionately affected due to structural disadvantage and systemic failures.

### Risk factors are dynamic and cumulative

Key risk factors include:

- running away (or being 'kicked out') and being missing from home
- living in out-of-home care
- disengagement from education
- online exposure to grooming and abuse
- substance use
- harmful peer or family influences
- prior abuse or neglect.

These factors interact and can escalate rapidly, particularly during adolescence.



## **Agency and victimisation coexist**

Many children and young people do not self-identify as victims.

In CSE, grooming can create perceived consent. In CCE, criminal involvement may be framed as choice, survival or economic necessity.

This creates practice dilemmas where protective interventions risk further alienation or criminalisation if practitioners misunderstand or over-emphasise a child or young person's agency.

## **System responses can increase harm**

Exclusionary school practices, inconsistent police responses and punitive or restrictive interventions can deepen disengagement, undermine trust and increase exposure to exploitation.

In CCE particularly, children and young people are often treated as offenders rather than victim survivors. They have limited legal protections in Australia. This can cause further criminalisation and adverse outcomes for children and young people.

## **Exploitation is relational and contextual**

CSE and CCE occur through patterns of grooming, coercion and control that are shaped by children's relationships, environments and unmet needs.

Harm frequently occurs outside the family, in peer groups, schools, neighbourhoods and online spaces, challenging child protection systems that primarily focus on intrafamilial harm.

## **Evidence-based responses**

### **Trusting, supportive relationships**

Consistent, trusting relationships with safe adults – including with parents, caregivers, practitioners and mentors – are the most robust protective factor for both CSE and CCE.

Relationship-based, trauma-informed practice is central to prevention, engagement, exit from exploitation and recovery.

### **Contextual safeguarding**

The strongest evidence supports approaches that address the social environments where harm occurs, not just individual behaviour or parenting capacity.

Contextual safeguarding shifts responsibility from individual agencies and practitioners to systems – including education, community services, policing and local settings. Success in this context results in changes to risky environments, as well as better outcomes for individual children and young people.

### **Multi-agency collaboration is essential**

Effective responses require shared language, clear roles, strong leadership and reliable information-sharing across child protection, education, health, youth justice, police and specialist services.

Schools are critical but often under-integrated partners.

### **Promising interventions exist but gaps remain**

For CSE, evidence supports screening tools, psychoeducation, mentorship and targeted therapeutic interventions.

For CCE, the evidence base is emerging, with promising models including contextual safeguarding, flexible case management and adapted family-based therapies. However, there is limited Australian evaluation of these interventions.

## Implications for Victorian practice

Clear, consistent definitions of CSE and especially CCE are needed to improve identification, data collection and coordinated responses.

Child protection practice must better integrate responses to extrafamilial harm, particularly where parents are willing to be protective but lack control over external risks.

Prevention efforts should prioritise school engagement, early intervention for missing-from-home behaviour, and safer online environments.

Workforce capability requires sustained investment in training, supervision and support to address complexity, bias and vicarious trauma.

Recovery and healing require long-term, wraparound support that builds agency, safety and stable relationships.

## Conclusion

**CSE and CCE are complex, overlapping harms shaped by intersecting vulnerabilities and systemic conditions.**

**Effective responses must move beyond individualised or punitive models toward intersectional, trauma-informed and contextually grounded approaches. These approaches recognise children as victim survivors, support agency and address the environments that enable exploitation.**



# Introduction

This foundational knowledge guide summarises the evidence base on child sexual exploitation (CSE) and child criminal exploitation (CCE).

It is derived from a literature review commissioned by Office of Professional Practice at the Department of Families, Fairness and Housing (the department). The literature review was completed by La Trobe University in partnership with Berry Street Yooralla. It considered more than 300 publications from Australia and overseas.

The literature review focused on definitions and evidence-based approaches to prevention, intervention and responses to CSE and CCE.

It also explored the vulnerability, risk and protective factors that shape a child's likelihood of being exploited, and the impact of that exploitation.

This document sets out the evidence for the approaches outlined in the *Practice guide for understanding and responding to CSE and CCE* and the [Child Protection Manual](https://www.cpmanual.vic.gov.au).<sup>1</sup>

## Who this is for

This document is for Victorian child protection practitioners, including those who work directly for the department and those based in community service organisations and Aboriginal community-controlled organisations.

It is for practitioners working with children who are already engaged with the child protection system who may be vulnerable to exploitation.

## Terminology

There is a wide range of terminology in the literature to describe similar acts. This document uses terminology consistent with the department's SAFER Children Framework.

We use the term **perpetrator** to describe those who seek to exploit children and young people. We use the term **victim survivor** to describe children who have been exploited.

The term **child sexual exploitation** is defined on p. 10. It is commonly used in Victoria's child protection, policy and community services sector.

It replaces older terms such as 'child prostitution' and 'child pornography' (which we now call 'child sexual abuse material'). Naming these acts CSE makes it clear they are crimes against children and therefore fundamentally different to acts involving consenting adults.

Other jurisdictions use terms such as 'commercial exploitation of children', 'child sex trafficking', 'domestic minor sex trafficking', 'sex trafficking of minors' and 'survival sex'. They all describe exploitative sexual abuse involving children and young people.

<sup>1</sup> <https://www.cpmanual.vic.gov.au>

The term child **criminal exploitation** is defined on p. 30. It is a relatively new term, but the problem it describes is not. It involves behaviours where perpetrators coerce or control children into criminal activity.

This document distinguishes between **vulnerability factors** and **risk factors**. These intersect in complex ways to increase the likelihood of CSE and CCE occurring.

Vulnerability factors are things that increase a person's susceptibility to CSE or CCE. These factors can also increase the harmful impact of these acts.

**Vulnerability factors** include:

- individual children's characteristics and needs
- family and community context
- parents' or caregivers' capacity to meet their child's needs and prevent harm.

Vulnerability is determined by the intersection of power and disadvantage. It includes the interplay of the social contexts in which the child or young person lives.

For example, a child who identifies as LGBTQIA+ is not inherently more vulnerable to CSE. However, a child or young person who is LGBTQIA+ may be vulnerable if their family and social contexts reject, dismiss or discriminate against them (Hornor & Sherfield, 2018).

**Risk factors** are characteristics or conditions that increase the probability that CSE or CCE will occur.

They can change relatively quickly, and they interact with vulnerabilities.

Like vulnerability factors, risk factors are not determinative, but they are influential contributing factors.

All likelihood factors can be linked with vulnerabilities, such as trauma and discrimination.

Appendix 1 contains a glossary of terms.



# Policy context

**The legal and policy context for CSE and CCE has evolved over recent decades. This has been shaped by our growing knowledge of children and young people, vulnerability, trauma, violence, intersectionality and systemic failures.**

Historically, children and young people who experienced CSE or CCE were characterised as ‘troubled youth’ or ‘young people with high-risk behaviours’. They were often treated as offenders rather than victims (Marshall, 2022, p. 395).

Over the past 20 years, this view has changed. Increasing awareness of domestic and international human trafficking, online exploitation, family violence, intersectionality and lived experience advocacy has shifted perceptions.

Sexually exploited children and young people are now recognised as victim survivors – although there is less public awareness of criminal exploitation.

Recent public inquiries and royal commissions have exposed systemic failings in institutional responses to child vulnerability. This has prompted reform across the social services system in Victoria, including family violence, child protection, policing and youth justice systems.

The Victorian Government has introduced legislation, policies and practice frameworks to protect and support children and young people who experience CSE (and CCE to a lesser extent).

These laws, policies and procedures provide trauma-informed, intersectional and rights-based approaches that recognise the complex interplay of coercion, vulnerability and systemic neglect.

Appendix 2 sets out:

- relevant legislation
- policy frameworks
- departmental procedures.



## The SAFER Children Framework

The SAFER Framework<sup>2</sup> (2021) is the risk assessment framework for Victorian child protection practitioners.

It provides a guided professional judgement approach to understanding how a child or young person's environment influences the likelihood of harm.

It distinguishes between 'risk', 'likelihood' and 'vulnerability', which aligns with much of the existing literature in the field. This distinction is also relevant to children and young people who may experience CSE and CCE.

SAFER incorporates responsibilities and obligations from the Multi-Agency Risk Assessment and Management (MARAM) Framework. It requires practitioners to use an intersectional lens in their assessments and decisions.

SAFER treats risk as dynamic and shaped by the child or young person's circumstances.

It invites practitioners to use their emotional intelligence, practice wisdom, values, formal knowledge and reasoning. These are particularly important in cases where CSE or CCE may be present.

SAFER incorporates key elements and language that align closely with a 'contextual safeguarding' approach (Firmin, 2017). This includes analysing 'opportunities for harm' and 'patterns of behaviour'.

As a framework, SAFER guides practitioners through the five practice activities, which when combined with professional judgment, facilitate effective risk assessment and risk management.

SAFER aligns with the legislative framework of Victorian child protection functions, the *Children, Youth and Families Act (2005)*.

The CYFA establishes the statutory functions in a way which is most commonly applied with harm occurring within the familial context, though supports applicability to extrafamilial harm. An example of this may be circumstances where the parent/s may be unable to protect a child from (significant) harm, despite their intention or efforts to do so, and the child may be assessed to be in need of protection.



<sup>2</sup> <https://www.cpmanual.vic.gov.au/our-approach/safer-children-framework/safer-children-framework-guide>

# Child sexual exploitation

## Overview

### Definition

There is no universally accepted definition of CSE. Some definitions align with US government policy. Others adopt frameworks informed by the United Nations, or use narrower, behaviour-specific definitions.

CSE is not defined in Victorian legislation.

A robust, recent CSE definition comes from Laird et al. (2023).

This defines CSE as:

**an abusive act where an individual or group takes advantage of a power imbalance to use, force, coerce or deceive a child or young person into completed or attempted sexual activity, on or offline.**

The definition includes acts that involve:

- solicitation or exchange of the child or young person's unmet needs or wants (for example, food, clothing, shelter, money, protection, belonging, affection or anything of perceived value)
- economic or social benefits for the perpetrator.

It is immaterial whether the child or young person believes they consented, or whether the contact appeared to be initiated by the child or young person, or the perpetrator.

### Determining the presence of CSE

Laird et al. (2022) developed a decision tree to determine the presence of CSE.

CSE may be present if:

- the person is a child (developmentally or below the legal age of adulthood)
- the act is intended to seek sexual gratification for the perpetrator or another person
- the act constitutes abuse because –
  - it occurs within an interaction where the child or young person is in a position of inequality
  - it exploits the child or young person's vulnerability
  - children cannot provide consent to sexual activity
- the act is exploitative because it –
  - manipulates the child or young person into sexual activity they cannot consent to through inducements such as money or other goods (food, clothing, shelter et cetera) for the benefit of the perpetrator.

### Examples

This definition of CSE can include:

- street-based exploitation
- trafficking for sexual exploitation
- technology-facilitated sexual exploitation and abuse (such as sexting coercion, text or image-based sexual exploitation of a child)
- survival sex
- organised sexual exploitation
- gang involvement
- sexual exploitation parties
- 'intimate partner' abuse
- peer-to-peer abuse.



## Prevalence

There is limited data on the prevalence of CSE. One study suggests that 2.5% of school-aged children and young people in Europe have been affected by CSE (Pereda et al., 2025).

Other issues that make it difficult to determine prevalence include:

- the 'hidden' nature of CSE, as perpetrators commonly target vulnerable and hard-to-reach children and young people
- children and young people's reluctance to disclose CSE
- lack of uniform case recording designed to track CSE
- lack of a consistent definition of CSE as distinct from other forms of child sexual abuse.

There is evidence in the international literature to suggest that rates of online CSE have risen due to social media, online gaming and video streaming apps. This allows perpetrators to target, groom and exploit children and young people across geographic boundaries.

## Help-seeking behaviour

One of the reasons estimating prevalence is difficult is that children and young people may not perceive themselves as victims of CSE and thus may not seek help.

They may adopt the perpetrator's worldview. This can mean they perceive intervention or support as threatening.

We know that younger children are more likely to seek help by speaking to an adult they trust.

Older children and young people are less likely to seek help.

Gender and ethnicity also play a role in help-seeking behaviour, with cis-gender white females being the most likely to seek help.

Children who had positive experiences of help-seeking had better mental health outcomes and were more likely to seek help in the future.

## Impacts

CSE is a form of child sexual abuse. It has physical, psychological and behavioural harms and consequences.

Children and young people who have experienced CSE commonly have trauma symptoms and have significant adverse outcomes across their lifespan.

These may result in harms resulting from:

- missing extended periods of formal education
- a disrupted or altered sense of self
- feelings of loneliness, isolation and fear, and self-harm
- adverse physical health outcomes including unwanted pregnancy and sexually transmitted infections
- unsafe or distorted understandings of romantic relationships and lack of trust in adults
- post-traumatic stress disorder (PTSD).

## How CSE occurs

To identify and respond to CSE, we need to understand the processes involved.

Baird and Connolly (2023, p. 193) suggest there is an exploitation continuum that has 3 components or phases: recruitment context, entrapment tactics and enmeshment process.

### Recruitment context

The recruitment context includes the characteristics of the perpetrator, who is commonly male and often perceived by the young person as a boyfriend or other type of friend.

They may or may not also be the person who uses the child or young person for sex.

## Entrapment tactics

Perpetrators use 2 kinds of tactics to entrap children and young people: relational tactics and aversive tactics.

Relational tactics target children and young people's need for love and belonging. The perpetrator may pose as a loving boyfriend or girlfriend, or a supposedly more understanding adult.

This can be described as 'counterfeit attachment'. It is particularly powerful where the child or young person has few secure and safe attachment figures in their life.

Perpetrators commonly use tactics such as interspersing their abuse with gifts, attention or affection. These tactics create a sense of attachment and loyalty to the perpetrator.

Aversive tactics are less common but do occur.

They involve overtly violent methods of control and sexual harm such as abduction, threats and gang rape. This can also include withdrawal of attention, time or other goods.

These tactics create a sense of fear and shame. They make children and young people feel they cannot escape their situation.

## Enmeshment process

Enmeshment prolongs exploitation beyond the recruitment and entrapment phases. It creates barriers to exiting the exploitative relationship.

The perpetrator may use coercion and control through relational dynamics with the child or young person.

This can sometimes lead to what is described as a 'trauma bond' (Baird & Connolly, 2023).

These patterns are also seen in family violence. They can include distortion of relationships, use of fear and threats and use of coercive control.

## Vulnerabilities

**Vulnerability factors by themselves do not lead to CSE. Vulnerability also depends on family and cultural context.**

**However, the evidence shows that perpetrators exploit certain demographic and other factors such as age, gender, sexuality and culture. This makes children outside the dominant culture appear more vulnerable to exploitation.**

### Age

CSE usually occurs in adolescence, but it has been documented in both primary- and secondary-school-aged children and young people. It has been reported in relation to children as young as 3 years old.

During adolescence, children and young people commonly explore their identity, including sexual identity. They are more likely to take risks and assert their autonomy by seeking independence from adults.

This can involve reduced communication with trusted adults, especially in relation to risk-taking behaviours.

These behaviours are typical of healthy adolescent development. However, in certain contexts, they can increase susceptibility to exploitation.

When a child or young person faces compounding factors, such as trauma, child protection involvement or living in out-of-home care, normal adolescent behaviours may escalate into 'high-risk' behaviours that increase vulnerability to CSE.

## Gender

There is a gendered component to CSE. Significantly more girls and young women experience CSE than boys and young men. This is consistent with the gendered nature of sexual violence and family violence.

For example, Victorian girls and young women living in residential care are more likely to have been sexually exploited than boys and young men (Commission for Children and Young People, 2021).

However, emerging research suggests that male victims of CSE are less likely to be identified or recognised by professionals.

Internalised gender norms may lead professionals to perceive boys and young men as less vulnerable.

These norms may also contribute to boys and young men being reluctant to disclose CSE due to feelings of shame.

## LGBTIQA+ young people

LGBTIQA+ young people are disproportionately affected by CSE. Transgender young people are particularly vulnerable. There is a complex interplay between identity-based marginalisation and structural or relational risk factors.

For example, family rejection or conflict arising from a young person's sexuality or gender identity is a common reason why LGBTIQA+ young people may run away from home or be 'thrown away' (kicked out) of home. This, in turn, increases their vulnerability to exploitation.

Barriers to accessing safe and affirming support services further compound this risk. These systemic challenges can leave LGBTIQA+ young people without protective support networks.

Transgender young people in particular experience poorer mental health outcomes, which increases their risk of exposure to CSE. These children and young people are also more likely to have an autism spectrum disorder (Strauss et al., 2017).

These intersecting vulnerabilities, including mental health, disability and social exclusion, increase exploitation risk for LGBTIQA+ children and young people.

Importantly, this demonstrates that LGBTIQA+ young people are not a homogenous group and they need inclusive, tailored interventions.

## Culture and race

The evidence shows that a disproportionate number of children and young people from racial or cultural minorities, and Indigenous groups, experience CSE.

One study concluded that race and ethnicity were predictive factors for exposure and re-exposure to CSE (Cutbush-Starseed et al., 2024).

This study also noted that the over-representation of children and young people from certain cultural groups as victims of CSE is similar to these groups' over-representation in child protection and out-of-home care.

In Australia, Aboriginal and Torres Strait Islander children and young people are over-represented in child protection and out-of-home care. This situation is not improving.

The Commission for Children and Young People (2015) drew links between the over-representation of Aboriginal and Torres Strait Islander children and young people in care and their exposure to higher risks of CSE.

## Prior sexual, physical or emotional abuse and neglect

A history of childhood abuse – particularly sexual abuse – is one of the most consistently reported vulnerability factors for CSE.

Many studies identify prior abuse as the most prevalent characteristic shared by CSE victim survivors. Estimates suggest the prevalence of prior abuse is 73% to 86% among CSE victim survivors.

Experiences of abuse and neglect are often chronic and longstanding. These sustained patterns of adversity can make it harder for a child or young person to identify unsafe relationships or seek help when a perpetrator exploits them.

Children and young people who have experienced abuse and neglect may view themselves as defective or unwanted. They may have trouble expressing their thoughts and feelings. They may expect others to hurt or abuse them (Alderson et al. 2022, p. 69).

Family violence is also associated with CSE. Some young people may form intimate partner relationships that mirror the family violence they experienced when younger.

There is also a strong association between CSE and psychological symptoms of physical, emotional and sexual abuse, and neglect.

In addition, children and young people who experience childhood sexual abuse may run away from home, which is a factor that increases the likelihood of CSE. This underscores the interconnected nature of vulnerability and risk factors.

Early experiences of harm, especially when untreated, can create pathways into further victimisation.

## **Disability and neurodivergence**

Disability includes physical, mental, intellectual and sensory impairments.

Combined with other factors, children and young people with disability may be more vulnerable to CSE. One study found a diagnosis of autism spectrum disorder was associated with increased vulnerability to CSE (McMinn et al., 2024).

Children and young people with intellectual disabilities and developmental delays face increased vulnerability. These children and young people may have a limited understanding of sexuality and sexual exploitation, and they may not be able to recognise abuse. They may also self-identify as victims.

This places them at disproportionate risk of online forms of exploitation, where signs of CSE may be less obvious.

This cohort may also be more susceptible to manipulation, particularly by perpetrators who pose as boyfriends or friends. They may not understand safe and healthy relationships, and they may not be able to distinguish between appropriate affection and exploitation.

Social isolation and a desire to cultivate friendships can compound their vulnerability. Perpetrators may deliberately target and exploit this.

Children and young people with disability may also have communication barriers. They may have trouble expressing their distress or concerns about CSE. Their parents and caregivers may be reluctant to discuss topics related to sex and abuse.

Addressing CSE among children and young people with disability requires providing targeted education about grooming, consent and healthy relationships.

Professionals who work with this cohort need to understand their vulnerabilities and be able to recognise and act on signs of exploitation.

## **Mental health conditions**

Mental health diagnoses are frequently reported among victim survivors of CSE.

This cohort has high rates of depression, anxiety, attachment disorders and 'acting-out' behaviours including oppositional defiance and conduct disorders.

These mental health conditions typically emerge when children and young people have experienced trauma associated with childhood abuse and neglect.

Unresolved trauma can affect daily functioning and emotional regulation.

This can lead to maladaptive coping strategies such as running away or engaging in substance use, which exacerbates their risk of exploitation.

Trauma-informed approaches are particularly important when working with children and young people living in out-of-home care.

### **Economic and housing instability**

Economic and housing instability create conditions where children and young people may become dependent on perpetrators for access to basic needs such as food, shelter, clothing and phones.

This also deepens the perpetrator's control, making external intervention more difficult.

Children and young people who experience economic and housing insecurity may be vulnerable to exploitative relationships that appear to offer stability, protection or material security.

A UK study showed that perpetrators often exploit economically marginalised girls and young women by offering perceived status such as alcohol, drugs, clothing and access to VIP areas of clubs. These offers confer a sense of social status that the girls and young women could not access otherwise (Arnull et al., 2025).

Children and young people who have experienced CSE frequently report that perpetrators groom them by promising economic opportunities or material gain.

This underscores the relationship between socioeconomic disadvantage and vulnerability to exploitation. Intervention and prevention efforts must also include addressing this disadvantage.

## **Risk factors**

**Risk factors interact with vulnerabilities to increase the likelihood a child or young person will be targeted for CSE.**

### **Family and peer influence**

Children and young people whose parent-child relationships are disrupted, difficult or absent are at greater likelihood of CSE. This also holds for children who experience abuse and neglect.

Abuse and neglect may also contribute to a child or young person's decision to run away from home, which increases their risk of exposure to exploitation.

Families may also be perpetrators of CSA and CSA material. Family members or peers may introduce the child or young person to CSE.

Typically, male perpetrators initiate this type of exploitation, but some mothers have been found to play a role in CSE.

Peer and family engagement in CSE or sex work is also linked to increased risk of CSE.

Children and young people may be introduced to perpetrators or exploitative environments by family members or peers who receive money or other goods in return.

Additional family and psychosocial risk factors include parental mental health issues, involvement with the justice system and intergenerational patterns of childhood abuse.

The literature also shows that families may struggle to provide structure and support for children and young people exposed to CSE. Many parents are unaware their child is involved in CSE, and they often faced challenges associated with socioeconomic disadvantage or substance misuse.

This increases the risk a child may be re-exposed to CSE.

These factors point to the importance of families and caregivers. Children and young people who may be vulnerable to CSE need supervision and warm and loving care and support from trusted adults.

### Living in out-of-home care

Child protection involvement and living in out-of-home care are associated with increased likelihood of CSE. However, these factors may function as proxy indicators rather than a direct cause of exploitation risk.

The contextual and relational dynamics of living in out-of-home care may increase risk.

These include:

- the absence of a consistent, trusted attachment figure or primary caregiver, which can make it more difficult for children and young people to disclose exploitation
- the presence of other vulnerable children and young people, which may facilitate peer-to-peer recruitment or indirect exposure to perpetrators
- common episodes of being absent from home, which is a widely recognised risk factor.

A small but significant body of research indicates that networks or gangs of exploiters may target out-of-home care environments.

An Australian qualitative research study from 2020 spoke to 27 children and young people with residential care experience.

The study found that adults outside the care system sometimes took advantage of children and young people in care. Perpetrators often initiated seemingly benign relationships that escalated into CSE (Moore et al., 2020).

Exploitation can also occur within out-of-home care from peers or staff. This reinforces the need for safeguarding approaches within the care system.

The care system itself may erode a child or young person's sense of safety, security, connection, self-worth and belief that others will care for them and keep them safe. It also normalises the monetisation of their care (Bowman & Kinnish, 2024).

### Running away or being 'kicked out' of home

There is a strong association between CSE and running away from home or placement.

Children who frequently go missing are at greater risk of CSE. 'Running away' is the most common term in the literature, but some studies differentiate between running away and being 'kicked out' or 'thrown away'.

Running away suggests agency on the part of the child or young person – whereas being 'kicked out' points to circumstances beyond the individual's control.

However, even those children and young people who do choose to run away may do so as a survival strategy to flee violence or seek connection and love.

Understanding this distinction can help professionals provide more targeted responses.

For example, if a child or young person's running-away behaviour stems from feelings of being 'kicked out' or rejected, practitioners could focus on improving the child or young person's placement experience rather than interventions that seek to restrict them.

One study found that running-away behaviour created a 19-fold increase in the odds of CSE victimisation (Hornor et al., 2023).

Another study examined the risk profiles of children or young people who had experienced CSE. It found that 83.8% had been absent from care for at least one night during the 30 days before CSE was identified (Landers et al., 2017).

The Commission for Children and Young People (2021) found that systemic failures in the out-of-home care system often drive children and young people to seek connection elsewhere, which can lead to exploitative relationships.

This report also argues that children and young people who run away are often perceived as making active choices, and therefore they are seen as less deserving of system resources – when in fact, the opposite may be true.

In addition, research involving Victorian residential care workers shows that frontline police responses when a child or young person is missing from placement may be inconsistent or inadequate.

Police may not have a shared understanding of what constitutes a 'missing' child, or they may not take absences seriously.

This can leave workers feeling limited in their capacity to act proactively when a child is absent from placement (McKibbin & Humphreys, 2019).

## School and education difficulties

Not attending school or engaging with education may increase the likelihood a child or young person will be exposed to CSE.

It also indicates the presence of vulnerability factors like neglect, family violence, homelessness or discrimination (for example, due to LGBTIQ+ status).

Having a poor school experience can lead children and young people to feel unsupported, unsafe and isolated.

Children and young people who do not attend school also miss out on sex education, which may mean they lack important information about sexual health and safety, including CSE.

Attending school also provides access to other protective relationships, such as school nurses, psychologists, social workers and support staff.

## Internet exposure

The internet and social media create constantly changing risks.

Perpetrators use the wide availability of social media and online gaming and video messaging services to access and distribute child sexual abuse material.

Laird et al. (2023) state that sexually exploitative online acts may include:

- production and distribution of child sexual exploitation material and child sexual abuse material
- exposing children and young people to sexual material or dialogues of a sexual nature, such as receiving sexually explicit texts, photos and videos
- online grooming, including sexual chatting or enticement for sexual purposes
- live online child sexual abuse
- online sexual extortion.

Research shows that the risk of online CSE affects children and young people from all communities and socioeconomic backgrounds.

However, children and young people are at greater risk of online CSE if they:

- have a disability
- are from a non-English-speaking background
- have previously been exposed to CSE.

Perpetrators may target families of children and young people they perceive as more susceptible to exploitation.

Online perpetrators tend to focus on building rapport and establishing trust over time, whereas offline perpetrators are more likely to use overtly controlling or violent behaviour.

Children and young people generally have poor awareness of the risks of online communication.

Online perpetrators may also coerce children and young people to create and distribute child sexual exploitation material (CSEM). This is a commercialised form of child sexual abuse.

Bloxsom et al. (2024) identify 5 forms of this type of self-produced CSEM:

- solicitation, where adults ask children and young people for sexual images without blackmail or financial coercion
- peer sexting, where children and young people feel pressured to send sexual images to their peers
- viral challenges, where children and young people upload videos as part of viral challenges. They may not realise they are creating sexual content
- sextortion, where perpetrators blackmail children and young people to produce CSEM
- financial coercion, where perpetrators offer money or gifts in exchange for CSEM.

Each of these forms of self-produced CSEM is inherently coercive because they occur without true consent within abusive power relationships.

### **Alcohol and other drug use**

Children and young people who have experienced CSE are more likely to use alcohol and other drugs than their peers and other high-risk young people.

They start using alcohol and other drugs earlier and have more severe impacts from substance misuse.

In this context, alcohol and other drug use can be seen as adaptive strategies to cope with the impacts of CSE and other traumatic experiences. Trauma-informed approaches see alcohol and other drug use as part of a trauma response.

Substance misuse and CSE are thus interconnected and contribute to and perpetuate each other.

The experience of CSE may make it even harder for victim survivors to recover from substance misuse issues.

### **Youth justice involvement**

Some evidence suggests that involvement in criminal activity and in the youth justice system may increase the likelihood of CSE.

There is no research that examines the mechanisms by which youth justice involvement can lead to CSE. It is, however, recognised as a correlate along with other vulnerability and risk factors.

### **High-risk sexual activity**

Early, risky and abusive sexual behaviours are risk factors for CSE.

Other high-risk behaviours include:

- sex without a condom
- sex in public
- meeting face-to-face for sex with strangers from an online environment.

High-risk sexual activity is correlated with other vulnerability and risk factors such as abuse and neglect, and living in out-of-home care.

## Protective factors

There is limited research that examines protective factors.

One way to consider protective factors is that they are the absence of vulnerability and likelihood factors, such as positive school engagement and stable placements.

However, a consistent theme that emerged across the literature is the protective role of supportive, stable relationships, both intrafamilial and extrafamilial.

### Supportive, stable relationships

Supportive interpersonal relationships that model healthy boundaries and emotional safety are key protective factors against CSE.

Victim survivors often emphasise the importance of strong support networks. These networks may include family and extended family, as well as trusted practitioners, mental health professionals and mentors.

Extrafamilial support systems are especially important for children and young people whose family environments are unsafe.

The research also shows that while close family relationships can be powerful protective factors and motivators to help young people exit exploitative situations, family dynamics can be complex and contradictory in relation to CSE.

This is because families may also:

- facilitate CSE through direct recruitment
- contribute to increased risk through inadequate supervision or attention.

This underscores the fact that children and young people affected by CSE are not a homogenous group.

Victim survivors also state that exposure to healthy, non-exploitative relationships fosters resilience and prevents re-victimisation.

Intervention strategies that focus on building supportive relationships between children and young people and caregivers can reduce vulnerability and build protective capacity.



## Identification, prevention and response

There are many examples in the literature of identification, prevention and intervention strategies to combat CSE. These are set out below.

### Identification tools

Identification and screening tools help to identify at-risk children and young people when they interact with the service system.

The literature review highlighted 5 tools that were shown to be reliable. These tools were all developed in the US or the UK. They would need to be validated and adapted for the Victorian context.

#### Commercial Sexual Exploitation Identification Tool

The Commercial Sexual Exploitation Identification Tool (CSE-IT) (Basson, 2017) is a 46-item tool that takes around 5–7 minutes to complete. It is used in the US service system, including child protection, youth justice, education and community services.

The tool evaluates 8 domains:

- housing and care
- prior abuse or trauma
- physical health or appearance
- environment and exposure
- relationships and belonging
- signs of current trauma
- coercion
- exploitation.

Likelihood is assessed on a scale of 0–23, with 3 possible risk categorisations: no concern / not enough information (0–3), possible concern (4–8) and clear concern (9–23).

#### Sex-Trafficking Assessment Review

The Sex-Trafficking Assessment Review (STAR) (Andretta et al., 2016) is a 12-item tool designed for use by youth justice professionals. It uses a risk-based scoring system to identify children and young people as being at low, moderate or high risk of CSE.

It was developed for the US justice and court system, which may limit its usefulness in the Australian context.

#### Sexual Exploitation among Youth (SEY) risk assessment

The Sexual Exploitation among Youth (SEY) risk assessment framework (Panilio et al. 2022) is a 26-item tool. It is scored on a scale from 1–20.

It measures 7 domains:

- prior abuse
- running away
- substance use
- behaviour and appearance
- cognitive capacity
- mental health
- relationships of exploitation.

It was designed to be used in the child protection system.

Panilio et al. (2022) found that the SEY effectively distinguished between levels of CSE risk. It supported objective decision making in assessing those risks.

#### Healthcare system screening tool

This screening tool was designed for clinical environments such as emergency departments in the US healthcare system (Greenbaum, Dodd, et al., 2018). It is a 6-item screening questionnaire that helps healthcare providers to identify potential victim survivors of CSE.

Items measure:

- substance use
- running away
- involvement with the justice system
- traumatic injuries
- sexually transmitted infections
- multiple sexual partners.

Although the positive predictive value was only 51%, meaning a positive result does not confirm that CSE has occurred, the tool can help identify children and young people who may be at risk.

A positive result can prompt practitioners to investigate further using a trauma-informed approach.

### Human Trafficking Screening Tool

The Human Trafficking Screening Tool (HTST) (Kenny et al., 2020) is used by US child protection and CSE-specific services to identify victim survivors of human trafficking (including CSE).

It includes common risk indicators for CSE with more specific detail about whether the child or young person:

- has run away to a hotel or known sex-work area
- has sexually suggestive online activity
- has been reported to be involved in CSE by a family member or professional
- is associating with others known to be involved with CSE.

Rather than providing a scored result, the tool prompts practitioners to form a judgement about the presence of CSE. Professionals must then validate their judgement with 3 pieces of evidence.

Children and young people identified as at risk are referred to a multidisciplinary team and then a CSE treatment program and other services as appropriate.

### Prevention programs

This section sets out the prevention programs identified in the literature review.

Some are primary prevention programs, while others cover both primary and secondary prevention (preventing children and young people from being re-exploited).

### Mentorship and awareness programs

Children and young people's engagement with services such as education and healthcare can be positively influenced by trusted adults, such as mentors.

Mentors can help children and young people overcome barriers to accessing support, including

- shame and being judged
- confidentiality
- police involvement
- general mistrust of services.

Children and young people at risk of CSE may also have a tendency towards self-reliance that often stems from mistrust of adults.

The **My Life My Choice** program (Rothman et al., 2020) is a US-based program to support girls and young women who are at high risk. It pairs them with women survivor mentors who experienced CSE in childhood.

Mentors receive comprehensive training in trauma-informed care, healthy boundaries and substance use. Children and young people are matched with a mentor. They receive regular visits, case management services and opportunities to engage in community-building activities.

Evaluation showed the program had promising results, including reductions in CSE, offending behaviour and substance misuse.

This suggests that mentorship from adult victim survivors can improve outcomes for children and young people. It underscores the importance of trusting and meaningful relationships to reduce vulnerability and risk of CSE.

The program also offers a 10-session group workshop to teach girls and young women at risk of CSE to recognise and avoid recruitment tactics of perpetrators.

The workshop is co-facilitated by a trained professional and a survivor mentor.

Sessions aim to change behaviour by addressing barriers to safe decision making – particularly in online contexts. They also build self-esteem and personal resilience.

Mentors also participate in the sessions to foster a sense of belonging and empowerment.

Longitudinal evaluation showed that the workshop led to positive changes in knowledge, attitudes and behaviour. This included a substantial reduction in self-reported sexually explicit behaviour and experiences of victimisation and abuse in relationships.

Participants also had increased trust in police and greater confidence in their ability to support a friend who may be exposed to CSE.

### **Education programs to prevent online CSE**

The literature review highlighted 2 school-based education programs aimed to prevent online CSE.

The first program was for educators to raise awareness of online grooming. It used simulated social media interactions designed to mirror the grooming process (Reeves & Crowther, 2019).

The simulations were based on case studies and existing research on online grooming.

Evaluation showed the simulations increased children and young people's knowledge of CSE, online safety and grooming.

The second program was a collaboration between Lancashire police and practice experts in the UK (Halford & Davies, 2021).

It aimed to educate children and young people about cyber crime and online CSE. It was developed in response to local data that showed most grooming and sexual offences against children and young people began online.

The program was delivered in primary and secondary schools by community volunteers. It included age-appropriate case studies, risks, threats and solutions.

Evaluation showed that while the program had a greater impact on younger children, there were positive trends for all age groups in:

- changing online behaviour
- confidence to report contact from unknown people online
- being careful about what they post online.

It demonstrated that school-based interventions of this kind can be cost-effective strategies to inform large numbers of children and young people about the dangers and risks of online CSE.

### **Sexual safety and CSE awareness psychoeducation programs**

**Project PREVENT** (Kruger et al., 2016) is a small-group intervention that creates supportive environments for children and young people identified as at risk of CSE. It provides targeted psychoeducation to prevent CSE.

It was developed with school administrators, teachers, police and local professionals. It also used socioeconomic mapping to better understand CSE within the local context.

Despite limitations and a lack of evidence about effectiveness, the program is a good example of a school-based consultation model.

It focused on promoting positive skills, including building trust, making good decisions and challenging stereotypes.

A UK-based **theatre-in-education program** (May et al., 2021) involved a live theatre performance for students from years 9 and 10 from multiple schools. The performance explored safe relationships, consent and exploitation.

After the performance, students attended focus groups to assess the impact of the performance.

The evaluation showed students had improved knowledge of CSE, including how and where to seek help. Young people also reported they could relate to the characters in the performance, and it helped them retain information.

Another psychoeducation program aimed to address **male-specific risk factors for CSE** (Fitzgerald et al., 2021). It was trialled with 80 young men in youth detention.

It recognised that boys and young men can be involved as victims, perpetrators or sex-buyers.

The curriculum aimed to increase awareness and knowledge, foster empathy for victim survivors and improve understanding of legal processes.

A second program for girls and young women at high risk, called the Girls Group, provided education about sexual safety and CSE (Berry et al., 2017).

The program covered health relationships, internet safety, substance misuse and self-respect.

It was found to reduce risk-taking behaviours and to improve adaptive coping strategies.

## Intervention strategies

Intervention strategies are for children and young people who have been identified as victim survivors of CSE.

They include case management strategies, multi-agency collaborations, psychoeducation programs, mentorship programs and treatment programs in residential settings.

## Engagement and rapport-building strategies

The literature consistently highlighted the value of safe, trusting relationships between children, young people and the professionals who care for them. These relationships can take time to develop – sometimes months or years.

Professionals should use trauma-informed approaches that foster relational connections with children and young people who are victim survivors of CSE.

This is particularly important for this cohort, who may have experienced grooming that seeks to erode their trust in parents, family and the service system.

Lefevre et al. (2017) identify 4 key factors for building trusting relationships:

- relationship-based practice
- child-centred practice
- an ethically grounded approach
- being skilled and knowledgeable in working with CSE.

Practitioners are most effective when they treat children and young people with respect and acceptance.

Demonstrating professional competence instils confidence in children and young people. This includes responding effectively to disclosures and talking to children and young people about risk.

Interactions with children and young people should be ongoing, informal in approach and without displays of authority.

Children and young people with lived experience of CSE report negative experiences of interactions that make them feel unheard or that were 'unfriendly'.

Young people emphasise the importance of having a consistent, reliable practitioner who demonstrates genuine care and commitment and makes them feel seen, heard and supported (Gilligan, 2016).

## Disruption strategies

Interventions that target perpetrators are outside the scope of this document.

However, the literature highlights some general strategies for disrupting CSE, including:

- a victim-centred approach, particularly in relation to peer networks
- a child-first approach that prioritises protection rather than gathering evidence
- collaboration across government departments and community service providers to divert children at risk of CSE
- legislative reform that moves beyond traditional child protection and prosecutorial modes.

Police interactions must be trauma informed and supportive so as not to re-traumatise children and young people.

### **Schools and education strategies**

Schools are important settings for educating children and young people about abuse and safe relationships.

Teachers and support staff can be trained to recognise warning signs of CSE.

This includes working with parents, carers and external services.

The School-Based Protocol for Reporting CSE (Chesworth et al., 2020) is one such process.

It supports schools to respond to identifications and disclosures. Schools respond to student needs by providing a supportive environment and enlisting help from trained personnel. School staff gather information from the student without formal interviews or assessment.

Teachers, counsellors and administrators are then involved in the reporting process. Schools follow up with the student and family to provide resources and assess the student's readiness to resume normal school activities.

Another school-based approach involved ecological theory and acknowledging factors such as socioeconomic disadvantage. This framework had 6 components:

- training and awareness
- policy development
- universal interventions
- selected interventions
- indicated interventions
- evaluation and sustainability.

### **Multi-agency approaches**

Multi-agency partnerships are increasingly common responses to keep children and young people safe and address CSE as a broader social issue. They may involve child protection, out-of-home care, police, youth justice, and health and education services, as well as specialist CSE intervention and recovery programs.

Despite interagency challenges, such as different reporting systems and ideological frameworks, the literature shows clear benefits to multi-agency approaches. These include:

- better sharing of information and resources
- strengthened safeguarding practices
- better ability to challenge negative stereotypes
- improved service provision and greater accessibility.

Multi-agency approaches can also foster shared and consistent training and the use of universal screening tools.

They can also include wraparound community-based support, such as psychological care, mentorship, recreation activities and respite care.

### **Participation and personal agency**

Children and young people can feel unheard and not respected by professionals.

Practitioners must balance statutory responsibilities to keep children safe with protecting their right to a voice, privacy and autonomy.

When practitioners prioritise safety, this can lead to children and young people feeling unheard and restricted in their social lives.

In addition, practitioners may interpret reduced engagement from children and young people as signs of increased risk, which can lead to more intrusive practices that further restrict autonomy.

This has been described in the literature as a 'double bind' – a no-win situation where acting protectively can alienate children and young people and lead to risky behaviours, while inaction also heightens the risk of harm.

Some recommendations to navigate these challenges include:

- maintaining a clear understanding of when to prioritise protection over autonomy
- engaging in ongoing training and reflective practice
- involving young people in decision-making processes to foster empowerment and validation
- building trust and creating safe spaces for children and young people to express their views
- providing recognition and incentives for ongoing engagement
- embedding children and young people's voices in organisational processes and procedures.

### Staff and carer programs

The literature emphasises the need for staff and carers to be trained to prevent and respond to CSE.

This training needs to equip professionals with the knowledge, confidence and skills to support children and young people at risk of CSE.

It should be part of wider efforts to foster organisational cultures that prioritise safety, responsiveness and the voices of children and young people.

Some of the lessons from the literature on staff training include:

- drawing on lived experience
- including carer perspectives
- introducing gamified learning
- centring concepts like love and critical reflection.

### Harm mitigation and recovery

This is a relatively new area of research. It is limited to exploratory, descriptive and quasi-experimental studies with small sample sizes. Most studies are from the US, with contributions from the UK, Canada, Italy and Australia.

The harm mitigation strategies in the literature have 3 common elements:

- direct services to children and young people, focusing on safety, basic need, skill development and healthy relationships
- community partnerships, such as multidisciplinary teams
- organisational capacity building to support service delivery.

In general, emerging evidence supports a multiphase wraparound intervention model for harm mitigation and recovery.

This model integrates practical assistance, psychoeducation and mentorship. It addresses key vulnerability and likelihood factors.

The research shows that trauma-informed therapeutic interventions are essential. These focus on caregiver support, strengthened family relationships and tailored, evidence-based interventions.

In particular, interventions should foster personal agency and stable, trusting relationships with safe adults.

# Child criminal exploitation

## Overview

### Definition

Child criminal exploitation (CCE) is less researched than CSE, but there is growing awareness of the phenomenon.

CCE involves elements of coercion or force to exploit imbalances of power that involve children and young people in criminal acts for other people's gain.

There is no single accepted definition of CCE in Australian legislation and policy, and Australia lacks a national framework and policy to address CCE.

The most widely used definition comes from the UK Government's *Serious violence strategy*:

**Child Criminal Exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur through the use of technology (UK Home Office, 2018, p. 48).**

This definition captures the complexities of CCE, including ethical considerations of the role of the child or young person – who is commonly seen as both victim and offender. Children and young people who are exploited this way often enter the youth justice system and may not receive therapeutic support they need as victim survivors of exploitation.

Many children and young people involved in CCE perceive their participation as a conscious choice. This highlights issues of their perceived consent and agency. They may not recognise the grooming process that draws them in to various forms of exploitative relationships.

CCE is not a single event, and it does not have a simple, linear causal pathway. It is 'a pattern of behaviour or events that emerge from the relational dynamics between children, motivated perpetrators and the environment that they both share over time' (Barlow et al., 2022, p. 159).

### Key concepts

#### County lines

A substantial body of research from the UK examines the 'county lines' mode of exploitation. This form of CCE involves networks of adult offenders who coerce vulnerable children and young people into trafficking illegal drugs across county boundaries from urban areas to rural areas. Offenders use networks of burner phones to coordinate drug distribution.

The UK now recognises that this form of CCE is a complex issue that requires a multi-agency response.

There is little data on the prevalence of children and young people who are exploited via county lines.

#### Child protection and extrafamilial harm

Most child protection policy, practice and legislation in Australia and internationally focuses on harm that occurs in the home.

The assessment frameworks used to identify this type of harm – home visits, observing interactions between children and parents and caregivers, and interviewing children and young people – may not be a good fit to determine extrafamilial harms.



One study from the UK (Lloyd & Firmin, 2020) examined serious youth violence and gang-related activity. In almost all cases, there was no evidence that the harm could be attributed to parental care. Instead, it occurred within neighbourhoods, peer settings and schools.

In some cases, parents struggled to control their children, but there were few grounds for statutory intervention.

This raises questions about the role of statutory services in cases of extrafamilial harm where the harm is not directly attributable to parents.

In some instances, parents actively seek to protect their child but are unable to do so due to factors outside their control. However, the question is then not about intent but capacity.

It is possible that statutory intervention is warranted on the grounds that:

- the child has suffered, or is likely to suffer, significant harm as a result of sexual abuse and the child's parents have not protected, or are unlikely to protect, the child from harm of that type;
- child has suffered, or is likely to suffer, emotional or psychological harm of such a kind that the child's emotional or intellectual development is, or is likely to be, significantly damaged and the child's parents have not protected, or are unlikely to protect, the child from harm of that type.

In other cases, such as where children and young people are criminally exploited by a family member or are already in the child protection and out-of-home-care system, child protection has a much clearer role.

## Demographic vulnerabilities

Like the vulnerabilities for CSE, demographic factors interact with likelihood, risk and protective factors.

The main differences compared with CSE are gender and the absence of research data about LGBTIQ+ children and young people.

Children with disability and neurodiversity are more prominent in the CCE literature than the CSE literature.

### Age

Children of any age can be exploited for criminal purposes, but the research indicates that adolescents are more vulnerable to CCE.

However, children younger than 12 are increasingly vulnerable to coercion and exploitation due to the proliferation of digital platforms and devices.

Hesketh and Robinson (2019) suggest that children aged 12 are targeted for recruitment into criminal networks. These children were approached either online or in person with offers of financial or material incentives.

Perpetrators may target younger children because they are less likely to attract police attention and less likely to face harsh legal consequences if caught.

### Gender

The role of gender as a factor in CCE is under-researched.

CCE is typically framed as a male issue, with both perpetrators and victim survivors overwhelmingly described as male.

This contrasts with CSE, which is more commonly associated with female victim survivors.

While there is no evidence of a direct causal relationship between gender and CCE, gender identity appears to play a role in shaping the experiences and perceptions of children and young people affected by CCE.

Perpetrators may see traits associated with masculinity as advantageous when targeting victim survivors, including physical resilience, aggression and willingness to engage in violence.

Boys and young men are also less likely to see themselves as victims. Young men involved in county lines drug markets in the UK perceived themselves as having the experience and knowledge to navigate exploitative situations and relationships.

Their participation in CCE was tied to financial hardship and a sense of familial duty as the provider.

Hesketh and Robinson (2019) call this 'deviant entrepreneurship'. It explains how a masculine-coded motivation to provide financially for one's family can lead to involvement in CCE.

For girls and young women, particularly those living in out-of-home care, signs of criminal exploitation may often be missed by carers and practitioners. This can further marginalise them.

## **Culture and race**

Culture and race are similarly under-explored in the literature on CCE.

However, international evidence shows that race and culture strongly shape how the service system identifies, treats and responds to children and young people who may be involved in CCE.

Young people from culturally diverse backgrounds may be more visible to authorities, and they may be more likely to be criminalised rather than recognised as victim survivors.

This reflects broader patterns of structural racism and power imbalances that have contributed to the longstanding over-representation of Indigenous and culturally and racially diverse young people in the youth justice system.

This is particularly the case for Aboriginal and Torres Strait Islander children and young people, who are over-represented in youth justice and child protection systems. Research shows that, rather than reducing harm, removing Aboriginal children from their communities and families has a criminalising effect.

Recommended responses include least-intrusive, early intervention approaches to criminal offending by Aboriginal children.

## **Prior abuse and neglect**

Research shows that current or past involvement with child protection is associated with increased vulnerability to CCE.

Involvement with child protection is generally understood as a proxy for experiences of abuse, neglect or exposure to family violence. These factors can heighten susceptibility to exploitation.

However, child protection involvement is often presented as a risk marker without examining the context and dynamics of the young person's experience.

Some authors suggest that experiences of abuse or neglect may create unmet needs, including a need for belonging, which can increase vulnerability to exploitation.

Other studies note that child protection involvement may reflect the exploitation itself rather than pre-existing abuse or neglect.

A similar pattern appears in discussions of youth violence in the context of CCE. Violent behaviour is frequently mentioned, but there is little consideration of whether children and young people have experienced violence themselves.

The lack of analysis about pathways into statutory systems reflects a broader tendency to focus on behaviour. This can obscure the status of children and young people as victim survivors of violence and exploitation.

## Disability and neurodiversity

The literature shows that CCE perpetrators may deliberately target children and young people they perceive as easier to manipulate or coerce.

In the UK, children with disability and neurodiversity are consistently identified as being at heightened risk.

Evidence suggests their vulnerability to exploitation can stem from difficulties processing information, assessing risk or accessing appropriate support.

Some studies indicate these children and young people are over-represented as victims of CCE, and that perpetrators may actively target special educational settings.

There is also evidence that many exploited children have unidentified or unassessed learning needs. This further limits their access to protection and support.

Disrupted education also plays a role. Children and young people with disabilities are more likely to experience alternative education placements or unstable schooling. If disability intersects with disrupted school engagement – a known risk factor for CCE – this may increase the child or young person’s vulnerability to exploitation.

Broader literature on exploitation highlights similar risks for adults with disabilities, including intellectual disability, autism and mental health conditions.

Although direct links between disability and criminal exploitation are still under-researched, studies suggest that factors such as social isolation, a desire for belonging, cognitive rigidity or difficulties recognising coercion can increase susceptibility.

Overall, the evidence shows that disability compounds other vulnerabilities, such as mental health issues, disengagement from education, poverty and social isolation. This creates cumulative risk for exploitation and makes it difficult to disentangle cause from consequence.

## Mental health conditions

Mental health conditions can increase vulnerability to CCE.

Mental health concerns often co-occur with other factors, such as disengagement from education, instability and social exclusion, rather than acting as a stand-alone driver of vulnerability.

For example, there is a strong relationship between mental health conditions and school exclusion.

Mental health should be viewed within a broader context of cumulative vulnerability, rather than in isolation.



## Economic issues

The literature consistently identifies material gain as a key factor in CCE.

Exploitation commonly involves coercion through enticements such as money, designer clothing, and free drugs. This can make criminal activity appear attractive to vulnerable young people.

These tactics are particularly effective in relation to children and young people experiencing financial stress or limited access to legitimate opportunities.

Research also highlights the role of poverty and gendered expectations, particularly ideas about masculinity and the pressure to provide financially.

In contexts of economic hardship, socioeconomic disadvantage, limited education or restricted employment pathways, children and young people may perceive criminal activity as a viable alternative.

Economic disadvantage is also closely linked to adverse childhood experiences, including family violence, neglect, mental health difficulties and contact with child protection, all of which increase vulnerability to exploitation.

Research using social capital theory shows that in socially deprived, high-crime areas, weakened community institutions and limited protective structures can normalise criminal activity.

In these contexts, reduced access to education, visible criminal activity and harmful adult influences can create conditions that increase children's exposure to exploitation.

## Risk factors

### Family and peer influences

Family and peer relationships can expose children and young people to CCE.

In some cases, exploitation occurs directly within families. This includes families where intergenerational criminal activity is present, and children are drawn into offending that is normalised or actively taught within the family.

Seeing criminal behaviour modelled by caregivers can make it appear legitimate or expected, which increases a child or young person's vulnerability to exploitation.

In some cases, perpetrators are trusted members of extended family or close associates, highlighting that exploitation can occur within a child's existing social network.

Peers are also a major influence. The literature frequently cites the presence of gang involvement in relation to CCE. This can occur through direct coercion and violence, or through young people seeking belonging, protection, status or identity.

Gangs offer forms of connection and validation that statutory services struggle to provide, making them particularly attractive to vulnerable children. Gangs' grooming strategies may be reinforced by weak family relationships, social isolation or limited alternatives.

Beyond gangs, peer recruitment and peer pressure play an important role in exposing children and young people to exploitation.

This can be reinforced by shared risk-taking, excitement and the desire to maintain status or acceptance among peers.

Overall, the evidence suggests that close association with peers involved in criminal activity is one of the strongest factors increasing the likelihood of exploitation.

## Running away

The relationship between running away and CCE is complex and not linear.

It is also important to emphasise that the term 'running away' can imply agency on the part of the child or young person that may not be present. Children and young people can be lured away from home or placement. They may also be fleeing violence and discrimination.

Running away is commonly identified in the literature as a pre-existing vulnerability factor. It can increase exposure to coercion and exploitation due to unmet needs for money, shelter, safety or connection.

However, there is limited analysis of how running away specifically leads to involvement in CCE.

One key risk relates to increased exposure in the community, particularly when children and young people travel to unfamiliar areas.

As contact with safe adults decreases, the likelihood of contact with criminal networks increases.

Understanding where children and young people go provides insight into both the level of exploitation and the type of offending.

Evidence from the UK showed that missing-from-home reports reduced during the COVID-19 pandemic. This was linked to reduced mobility, transport restrictions and the closure of public spaces where grooming and on-street contact often occur. During this period, initial contact by perpetrators shifted more heavily to online platforms.

Australian evidence presents a different picture. The Commission for Children and Young People (2021) found variable but increasing patterns of children going missing from residential care during COVID-19, highlighting differences between jurisdictions and care settings.

Parents often report feeling powerless to prevent their children from running away and state that authorities did not take their concerns seriously.

The literature highlights the importance of recognising parents as key partners in identifying risk and reducing harm, particularly for children and young people who may not fit traditional 'high-risk' profiles.

## Living in residential care

Children and young people living with their families can be just as vulnerable to CCE as those in out-of-home care.

Living at home does not provide protection if there are other risk factors present, such as association with peers involved in exploitation or disrupted engagement with education.

This highlights that vulnerability is shaped more by cumulative and dynamic factors than by living arrangements alone.

At the same time, there is strong evidence that children and young people living in residential care face heightened vulnerability to harm and exploitation.

Most enter residential care following significant trauma and instability. Residential care increases the likelihood of contact with the criminal justice system, often through peer influence. Limited access to prosocial activities, inadequate staffing and feelings of exclusion or neglect can further increase risk.

Placement matching is an important protective factor, particularly given the complexity of situations where exploited young people may also influence or recruit peers.

In addition, residential care homes are often located in disadvantaged areas with limited informal surveillance. There is evidence to suggest perpetrators may target locations frequented by children in care, such as bus stops, shopping centres and fast-food outlets.

Trauma, unsafe placements and instability further compound vulnerability and contribute to criminalisation.

## Online exposure

UK research on county lines found that the internet and social media increase children and young people's exposure to CCE. This became more pronounced during the COVID-19 pandemic, when lockdowns and curfews reduced in-person contact and grooming and recruitment activities shifted to online spaces.

Social media platforms are the most cited online environments linked to CCE.

Practitioners consistently report that perpetrators use platforms such as Instagram and Snapchat to initiate contact, build trust and normalise criminal lifestyles through the glamorisation of drug-related wealth and status.

These platforms play a key role in the early stages of grooming, even though the specific methods used by perpetrators are often poorly understood.

One likely mechanism is increased exposure combined with isolation. Extended time online can heighten contact with perpetrators who use grooming behaviours. It also reduces connection to family, peers and other protective adults.

Research describes how intensive online grooming can rapidly desensitise children and young people, weaken their sense of agency and increase their dependence on exploitative relationships.



## Drug use and selling

There is a strong relationship between substance use and CCE. Drug and alcohol use is both a contributing vulnerability and as a consequence of, exploitation.

Exposure to parental substance use, as well as a child or young person's own use of drugs or alcohol, is widely recognised as increasing susceptibility to exploitation.

Illegal drugs are often central to models of CCE, particularly those linked to county lines activity.

Perpetrators may use substances to entice children and young people into criminal involvement, to facilitate access to locations through 'cuckooing',<sup>3</sup> and as the primary basis for criminal activity.

International evidence shows that perpetrators frequently use drugs to lure children and young people into exploitation. They then leverage this to maintain control, including through dependence or debt.

Australian evidence highlights similar patterns. Substance use is linked with periods of going missing from care and increased exposure to both sexual and criminal exploitation.

Perpetrators may offer drugs or alcohol as an incentive, to impair a child or young person's capacity to refuse or report harm, or to create dependency.

In some cases, perpetrators coerce children and young people into criminal or sexual activity to repay drug debts. These dynamics increase criminalisation while deepening exploitation and limiting opportunities for exit.

## Disengagement from school and education

Australian evidence shows that children and young people living in out-of-home care experience significantly poorer educational access and outcomes than their peers, which increases their vulnerability to CCE.

<sup>3</sup> Refer to the glossary entry on cuckooing.

Educational outcomes were poorest for children and young people living in residential care.

These patterns reflect factors including prior trauma, low expectations, stigma and bullying, placement instability, workforce turnover and exclusionary school practices.

The COVID-19 pandemic further reduced access to protective adults and supports, which weakens key protective factors.

Together, these conditions limit connection to education and increase opportunities for coercion and exploitation.

UK research points to similar pressures within education systems, including staff shortages, growing class sizes and increasing numbers of students with complex needs. These pressures include rising numbers of suspensions and expulsions, and reduced timetables and referrals to alternative education settings.

In addition, these alternative education settings are frequently identified as high-risk environments where vulnerable young people may be targeted for recruitment into criminal networks.

Overall, the literature highlights that exclusionary education responses can unintentionally increase vulnerability to CCE. Removing children and young people from mainstream education is often framed as a risk management strategy.

However, evidence suggests it may instead displace the problem, deepen disengagement and increase exposure to exploitation rather than reducing harm.

## Youth justice involvement

Youth justice involvement is often treated as a consequence of, criminal behaviour, but research shows it may be a pre-existing vulnerability for CCE.

Many studies note that victim survivors of CCE were already known to police or youth justice before the exploitation occurred. This indicates that justice involvement may increase a child or young person's visibility to perpetrators, rather than simply reflecting offending that results from exploitation.

The literature provides limited analysis of the specific mechanisms linking youth justice involvement to increased exposure to CCE.

However, it is likely to intersect with other known vulnerabilities, including substance use, residential care placement, and family or peer influences.

For example, children and young people living in residential care have reported that spending time with peers engaged in offending contributed to their own involvement in criminal activity.

There is also little discussion about whether it is appropriate to apply a purely criminogenic lens to children exploited through CCE.

Some authors argue that factors such as socioeconomic inequality, public policy settings, placement instability and trauma can be both criminogenic and harmful in themselves. From this perspective, youth justice involvement may contribute to further criminalisation rather than addressing underlying victimisation.

Research also identifies that contact with the youth justice system itself may have a criminogenic effect and may increase likelihood of ongoing offending.

Recent legislative changes in Victoria raised the minimum age of criminal responsibility from 10 to 12. This limits youth justice involvement for younger children. However, young children may still come into contact with police.

The literature suggests this shift may introduce new risks, including the potential for perpetrators to misrepresent legal consequences to children as a way of facilitating or justifying criminal involvement.

## Identification, prevention and response

### Awareness raising

While awareness raising is well established in responses to CSE, similar approaches for CCE are less developed, particularly outside the UK and Ireland.

This is due to the relatively recent recognition of CCE as a distinct form of harm, limited Australian data and the ongoing development of practice responses.

In the UK, where county lines exploitation is more widely recognised, the literature highlights emerging awareness-focused initiatives, often using creative and arts-based approaches.

These include interactive digital tools and theatre-based programs delivered in schools. They are designed to help young people recognise coercion, challenge assumptions about who is affected and prompt discussion about choice, pressure and harm.

Although evidence remains limited, valuations suggest that interactive and narrative-based formats can boost engagement and encourage meaningful conversations between young people and trusted adults.

The use of arts-based methods is well supported more broadly in work with children and young people, particularly where sensitive issues are involved.

Creative activities can reduce pressure, support emotional safety and enable deeper discussion about experiences of coercion and exploitation.

Unlike CSE, there has been little development of screening tools or formal identification aids for CCE. This likely reflects the emerging nature of the evidence base and the limited availability of dedicated intervention pathways.

The literature emphasises that identification alone is insufficient. Frontline practitioners must be able to offer early intervention or diversion responses or have clear referral pathways and resources in place to respond effectively when risk is identified.

### Multi-agency approaches

The literature consistently underscores the importance of multi-agency responses CCE. It also identifies significant barriers to effective collaboration. These barriers operate at both system and practitioner levels.

System-level barriers include limited resources, differing organisational frameworks and priorities, inconsistent information-sharing practices and a lack of clear policy or structural support for collaboration.

Practitioner-level barriers include limited understanding of other agencies' roles and constraints, unclear protocols and ineffective or infrequent communication.

Studies examining multi-agency responses to CCE highlight additional challenges, including the absence of a shared definition of exploitation, inconsistent practice approaches, limited funding and school exclusion processes that may increase vulnerability rather than reduce risk.

Poor interagency communication remains a central concern.

Evidence suggests that effective multi-agency collaboration requires shared language, role clarity, and strong leadership.

Key enablers include visible and proactive leadership, alignment between strategic intent and frontline practice and stable partnerships built on trust and shared values. This includes opportunities for reflection and challenge. Structures that promote contextual safeguarding and shared responsibility – such as multi-agency panels – are particularly valuable.

The literature also points to the usefulness of implementation frameworks, such as normalisation process theory, to support integrated practice.

These frameworks focus on how professionals make sense of collaboration, sustain collective commitment, embed new ways of working and evaluate impact.

Overall, practitioners consistently emphasise the need for clearer protocols, improved training and stronger interagency collaboration to support effective, timely responses to children and young people exposed to CCE.

## Suggested models for intervention

### Contextual safeguarding

Contextual safeguarding is a key approach in the CCE literature. It focuses on the social and environmental contexts that shape children and young people's safety.

It recognises that significant harm often occurs beyond the family, through relationships formed in neighbourhoods, schools, peer groups and online spaces. These are contexts over which parents and carers have limited influence.

Experiences of extrafamilial harm can also undermine parent-child relationships, limiting the effectiveness of family-focused interventions alone.

Rather than concentrating solely on risks within the home, contextual safeguarding shifts assessment and intervention into the wider environments where exploitation occurs.

While direct work with children, young people and their families remain important, the literature emphasises that meaningful change requires addressing the social conditions and settings that enable harm. Without intervention in these contexts, extrafamilial risks are likely to persist and undermine individual and family-based support.

Firmin's work (2017) highlights that many early responses to peer-on-peer abuse, including CCE, focus on family-based safeguarding. These responses functioned more as crime-reduction strategies than contextual responses.

To address this, contextual safeguarding provides a system-level approach that focuses on:

- intervening in harmful social conditions
- integrating extrafamilial contexts into safeguarding processes
- building partnerships with those responsible for spaces where young people spend time
- measuring success through changes to risky environments rather than changes in individual behaviour alone.

Subsequent research notes that risk-saturated and highly bureaucratic safeguarding approaches can discourage disclosure. This is particularly the case where young people feel unsafe or over-scrutinised.

More flexible, place-based approaches – such as routine engagement in everyday settings and timely intervention after key events like arrests or school exclusions – present important opportunities for effective intervention.

The literature also reinforces that parents are rarely the primary source of harm in CCE cases. This means that targeting peer groups, schools, community spaces and other social environments is often more effective than family-focused responses alone.

Overall, contextual safeguarding provides a framework for designing safeguarding systems that recognise the influence of peers, extend responsibility beyond families to wider sectors, and support coordinated interventions that address extrafamilial risk alongside work with individuals and families.

## Circle of analysis framework

The circle of analysis framework builds on contextual safeguarding by also examining the role and motivations of perpetrators, alongside the environments in which exploitation occurs.

It recognises that understanding CCE requires attention not only to children and young people's vulnerabilities, but also to the people who exploit them and the conditions that enable exploitation.

The framework draws on public health, modern slavery and criminogenic theory to explore the underlying drivers of CCE.

A public health lens highlights how poverty, health inequality and limited access to education can create unmet needs that perpetrators deliberately target. This shifts the focus from individual behaviour to the broader systems and conditions that shape vulnerability and exploitation.

CCE emerges from interactions between 3 systems: the child or young person, the perpetrator, and the environment.

Interventions in one system are likely to produce responses in the others, meaning that effective practice requires coordinated action across each system.

The framework emphasises the importance of anticipating how these systems may respond to interventions over time, rather than relying on isolated actions.

Used alongside the circle of analysis, the **Systemic Investigation, Protection and Prosecution Strategy** (SIPPS) provides a structured way to organise information about children and young people, perpetrators, and environments.

It groups relevant factors across domains such as home, education, behaviour and health, and considers both historical and current conditions, as well as immediate triggers for exploitation.

While SIPPS is described as evidence-based, it functions primarily as an evidence-gathering and sense-making tool that supports pattern recognition and professional decision making.

Evidence from the UK suggests that SIPPS can strengthen multi-agency collaboration by creating a shared understanding of risk, responsibility, and safeguarding priorities.

Its use in both CCE and CSE contexts indicates potential value for further exploration in Australian practice settings.

## Mapping

Mapping patterns of CCE across geographical locations can strengthen contextual safeguarding by identifying the environments where exploitation is most likely to occur.

This supports a situational prevention approach, where changes to places and routines are used to reduce risk and limit opportunities for exploitation.

In practice, mapping can help identify where children and young people encounter potential perpetrators, and where they may be coerced into criminal activity.

Although geographical analysis is well established in policing, it is used less frequently in social work and child protection practice.

The literature highlights that mapping harmful locations outside the home can improve understanding of local risk environments and support more informed assessments of how place and context contribute to CCE.

## Police and legal interventions

Children and young people are often treated as offenders, or as both victims and offenders, which makes legal responses more complex.

While CCE is formally recognised as a form of harm in the UK, it is not clearly defined in Australian law.

This lack of definition contributes to the overcriminalisation of exploited children and young people, particularly those in out-of-home care, as noted by the Commission for Children and Young People (2021).

In Victoria, legal and statutory responses rely on disruption strategies, including harbouring notices, intervention orders, secure welfare placements and police-led returns to care when children go missing.

While these measures may interrupt exploitation in the short term, they do not provide legal protection from criminalisation for children whose offending is linked to exploitation. Although the *Crimes Act 1958* criminalises adults who recruit children into offending, it does not offer a defence for the child or young person involved. *Doli incapax* – the legal principle that a child under the age of 14 cannot be held criminally responsible for their actions – offers some protection but its application is limited.

Young people who are missing from home and suspected of involvement in CCE often experience highly restrictive interventions, such as detention or transport in locked police vehicles.

Many report experiencing these responses as punitive and criminalising, which can further damage trust in support systems and reduce engagement.

Police discretion plays a critical role, but responses are inconsistent. While child protection frameworks encourage nuanced, trauma-informed judgement, police practice often relies on a rigid victim–offender distinction.

Research highlights variability in how police understand their safeguarding role in CCE cases. There needs to be clearer guidance, training and shared understanding across the community services and justice systems.

In the UK, CCE cases are often addressed under modern slavery legislation, which includes a ‘no punishment’ principle for children coerced into offending.

This provides a legal defence where the offending is a direct result of exploitation. Australia’s Modern Slavery Act does not include a comparable protection, although it recognises trafficking and the use of children for illicit activities, including drug-related offences.

The absence of an explicit legal defence for children exploited through CCE remains a significant gap in the Australian response.

## Family-based interventions

### *Multisystemic therapy (MST)*

Multisystemic Therapy (MST) is an evidence-based intervention designed to strengthen caregiver capacity and community supports to reduce behaviours linked to criminal offending.

While MST has a strong evidence base more broadly, its direct application to CCE is still emerging.

Research indicates that MST can reduce several risk factors associated with CCE, including substance use, association with harmful peers, running away and use of violence.

MST works by supporting caregivers to set clearer boundaries, strengthen relationships with their child and promote engagement with prosocial peers.

Improvements in caregiver–child relationships, increased parental warmth, clearer expectations and better supervision have been linked to positive behaviour change.

However, the literature also highlights significant barriers. Ongoing association with exploitative peers or adults can undermine MST interventions.

In some cases, the material and social rewards offered by gangs outweigh the influence of family-based and therapeutic support, limiting the sustainability of change.

Studies examining MST in CCE contexts identify several key areas of impact, including increased insight among young people into their behaviours and peer influences, improved caregiver–child relationships and clearer structures to support safety and accountability. At the same time, persistent exposure to perpetrators and unstable peer networks remain major obstacles.

Some adaptations to the standard MST model have been trialled for CCE, including longer intervention periods, trauma-focused work, psychoeducation about exploitation, increased monitoring (including online activity), safety planning and active support to build prosocial peer relationships.

These adaptations reflect the complexity of CCE and the need for sustained, developmentally appropriate responses.

More broadly, the literature reinforces that family stability and reduced conflict are protective factors, underscoring the importance of long-term, targeted support for families affected by CCE.

### ***Functional family therapy***

Functional family therapy (FFT) is a clinical model for working with children and young people with severe behaviours of concern using family therapy.

It focuses on improving safety, wellbeing and stability through stronger family relationships.

FFT has been adapted for gang intervention in the UK. The pilot focused on building engagement and motivation, understanding family interaction patterns, supporting behaviour change through skill development and helping families apply new skills in different settings such as school and community.

Early findings indicate the program is feasible, but further research is needed.

### ***Safeguarding children at risk – prevention and action (SCARPA)***

The Safeguarding Children at Risk – Prevention and Action (SCARPA) framework in northern England has shown promising outcomes for children and young people affected by CCE.

SCARPA uses a flexible, needs-led approach to case management for young people aged 10 to 18 who are missing or at risk of CCE and/or CSE.

Rather than relying strictly on age-based thresholds, the model prioritises continuity of support as young people transition into adulthood.

The approach recognises that rigid timeframes and system cut-offs can undermine engagement and increase harm.

Instead, SCARPA tailors responses to individual needs, with a strong emphasis on building trust, respect and long-term safety.

Children and young people are not treated as offenders, but as individuals who need sustained support to reduce risk and support meaningful change.

While the long-term effectiveness of SCARPA, along with other models such as MST and FFT-G, is still emerging, these approaches share common principles. These include flexibility, responsiveness, intensive support and a focus on reducing criminalisation.

Given the limited data on the scale and nature of CCE in Victoria and Australia, the literature highlights the need for further exploration and evaluation of intervention frameworks that reflect these principles.

### Voices of parents

Children and young people affected by CCE are often described as coming from highly disadvantaged or chaotic backgrounds.

While trauma, adverse childhood experiences and family stressors increase vulnerability, the literature shows a growing number of children outside these traditional risk categories are also being coerced into CCE.

Parents in families not typically considered 'high risk' often struggle to access timely support.

Many report sudden and severe changes in their child's behaviour, such as increased aggression, without initially understanding the link to exploitation.

These rapid behavioural escalations can signal deeper involvement in CCE, yet early intervention is frequently missed.

School suspensions and exclusions are commonly reported as responses that worsen outcomes rather than reduce harm.

Research highlights that parents' perspectives are often marginalised in service responses, despite their close involvement in their child's daily life.

Some parents initially interpret their child's behaviour as deliberate choice, particularly where family relationships are supportive and material needs are met.

However, evidence shows that exploiters actively isolate children from their families and undermine parental influence, weakening key protective relationships.

As CCE increasingly affects children who are less visible to statutory systems, parents play a critical role in early identification and safeguarding.

The literature emphasises the importance of services actively listening to parental concerns and responding with support rather than increased surveillance. This approach strengthens protective capacity and reduces harm.



# Implications for practice

**The evidence base highlights that CSE and CCE are complex, overlapping forms of harm that do not lend themselves to linear or standardised responses.**

While CSE and CCE share common mechanisms – including coercion, manipulation and exploitation of power imbalances – they are shaped by different patterns of harm, visibility and system response.

Effective practice depends less on categorising behaviour and more on understanding how exploitation emerges through relationships, environments and unmet needs over time.

The evidence supports practice that is adaptive, contextually informed and grounded in professional judgement, rather than reliance on fixed thresholds, profiles or checklists.

## Exploitation as relational and contextual

CSE and CCE are best understood as patterns of harm that unfold through relationships and environments over time, rather than as discrete incidents.

Exploitation is shaped by peer networks, online spaces, neighbourhoods, schools and service systems, often beyond the direct control of parents or caregivers.

For practice, this reinforces the importance of:

- looking beyond individual behaviour and family functioning in assessments
- recognising extrafamilial contexts as active sites of risk
- acknowledging that parental concern and engagement may coexist with ongoing harm.

This has implications for how responsibility, safety and protection are conceptualised where exploitation occurs primarily outside the home.

## Agency, consent and victimisation

When responding to CSE and CCE, practitioners must navigate tensions between recognising children and young people as victim survivors while also acknowledging their perceived agency.

Many young people do not self-identify as victims, particularly where grooming, material exchange or criminal involvement has been normalised or framed as choice, survival or autonomy.

Practice that over-emphasises victimhood risks undermining trust and engagement, while practice that foregrounds agency risks obscuring coercion and reinforcing criminalisation.

The evidence supports holding these tensions, recognising that perceptions of agency may shift over time and that consent cannot be understood outside power imbalance, coercion and context.

## Vulnerability as intersectional and dynamic

The literature does not support a single vulnerability profile.

Instead, it points to cumulative and intersecting factors – including trauma, disability, neurodiversity, sexuality, culture, socioeconomic disadvantage, school exclusion and system involvement – that interact with situational risks to increase both likelihood and impact of exploitation.

For practitioners, this means:

- avoiding assumptions based on identity alone
- understanding how discrimination and system responses can compound vulnerability
- recognising that vulnerability and risk are dynamic and can escalate quickly, particularly during adolescence.



This reinforces the need for culturally safe, inclusive and tailored engagement, particularly for Aboriginal and Torres Strait Islander children and young people and for LGBTIQ+ children and young people.

## Running away, exclusion and system effects

Running away or being absent from home or placement is one of the strongest and most consistent risk factors across both CSE and CCE.

The evidence cautions against interpreting this behaviour as simple non-compliance. For many children and young people, absence reflects attempts to escape violence, rejection or unmet needs.

Similarly, exclusionary responses – including school suspension, restrictive placements and punitive justice interventions – are associated with increased vulnerability rather than protection.

Practitioners should understand how system responses may unintentionally heighten risk by reducing access to protective relationships and environments.

## The protective nature of stable relationships

Stable, supportive relationships are the most consistent protective factor across the evidence.

Children and young people emphasise the importance of feeling believed, respected and supported by adults who demonstrate consistency, care and competence.

This reinforces the importance of:

- relationship-based, trauma-informed engagement
- continuity of practitioner involvement where possible
- careful attention to how children and young people experience authority and control.

While families can be sources of risk, they are also often critical protective resources.

Practice should remain alert to this dual role and avoid assumptions that either idealise or dismiss family involvement.

## Limits of the evidence and the role of judgement

The evidence base for CSE is uneven, and the evidence base for CCE in Australia remains limited.

Many identification tools and intervention models originate overseas and have not been validated in the Victorian context.

Long-term recovery outcomes, particularly for CCE, are under-researched.

This underscores the importance of reflective practice, supervision and professional judgement.

Rather than offering definitive answers, the evidence supports practice that is iterative, relational and responsive, grounded in collaboration and critical engagement with uncertainty.



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# Appendix 1: Glossary

Term	Description or example of definition
<b>Child criminal exploitation</b>	‘Child Criminal Exploitation occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur through the use of technology’ (UK Home Office, 2018, p. 48).
<b>Child sexual exploitation</b>	‘an abusive act where an individual or group takes advantage of a power imbalance, to use, force, coerce and/or deceive a child or young person into completed or attempted sexual activity, on or offline; (a) by the solicitation or actual exchange of unmet needs or wants of the child/ young person (e.g. food, clothing, shelter, money, protection, belonging, affection and/or developmental needs or anything of perceived value to the young person or child); and/or (b) for the economic or social advantage of the perpetrator or facilitator; (c) irrespective of consent or who initiates the contact (e.g. child/young person or perpetrator, adult, or peer)’ (Laird et al., 2023, p. 2255).
<b>Cuckooing</b>	Adults in the community, often with mental health issues, a disability, alcohol and other drug issues, financial issues or other vulnerability are pressured into allowing their property to be used as a base for drug operations, with the promise of cash and/or drugs in exchange. Fear and threats are then used to ensure the adult does not report the illegal activity (Glover Williams & Finlay, 2019; Stone, 2018; Swancott et al., 2025).
<b>Debt bondage</b>	Children and young people may be set up in a staged robbery, so they feel they have a ‘debt’ to pay and need to ‘work’ to pay it off. The threat of violence to the child or young person and/or their families is often used to keep them involved in the exploitation (Barlow et al., 2022; Glover Williams & Finlay, 2019; Mennim, 2022; Shaw, 2024).
<b>Grooming</b>	Psychological and physical process to lure victims away from their homes or to gain the trust and dependency of children and young people. It often includes use of violence, substance abuse, false promises and manipulation. It is present in both CSE and CCE.
<b>Intersectionality</b>	‘people’s lives are shaped by their identities, relationships and social factors. These combine to create intersecting forms of privilege and oppression depending on a person’s context and existing power structures such as patriarchy, ableism, colonialism, imperialism, homophobia and racism’ (United Nations Women & United Nations Partnerships on the Rights of People with Disabilities, 2021).

Term	Description or example of definition
<b>Multi-Agency Risk Assessment and Management (MARAM) Framework</b>	MARAM ensures services are effectively identifying, assessing and managing family violence risk.
<b>Perpetrator</b>	A person who deals in, uses or trades children or young people for sexual exploitation and/or criminal exploitation for gain. This includes those who organise or recruit children and young people into the exploitation and those who pay or in other ways exchange something for the exploitation. The literature uses many different terms such as person of interest, exploiter, abuser, pimp, recruiter, child sex trafficker.
<b>Recruitment</b>	Proactive targeting of vulnerability and grooming behaviours. It is usually applied to CSE but also relevant to CCE.
<b>Trauma bond</b>	Occurs when the victim survivor develops trust or affection for the person exploiting them. Due to psychological manipulation, the child or young person believes they are in a positive relationship. It can apply to both CSE and CCE.
<b>Trauma-informed practice or trauma-informed care</b>	'Trauma-informed practice is an approach that recognises that trauma is common and that people accessing services and people delivering services may be affected by trauma. Trauma-informed practice is an approach that is holistic, empowering, strengths-focused, collaborative and reflective. It promotes physical, emotional, spiritual and cultural safety' (Department of Families Fairness & Housing, 2022, p. 9).

# Appendix 2: Legislation and policy

## Legislation

Legislation	Functions
<b><i>Children Youth and Families Act 2005</i></b>	This legislation is foundational to child protection practice. It defines when a child is in need of protection, such as when (s. 162 (d)) the child has suffered, or is likely to suffer, significant harm as a result of sexual abuse and the child's parents have not protected, or are unlikely to protect, the child from harm of that type; and s. 162 (e) the child has suffered, or is likely to suffer, emotional or psychological harm of such a kind that the child's emotional or intellectual development is, or is likely to be, significantly damaged and the child's parents have not protected, or are unlikely to protect, the child from harm of that type.
<b><i>Commission for Children and Young People Act 2012</i></b>	Established the Commission for Children and Young People in 2013. This aims to provide 'independent scrutiny and oversight of services for children and young people, particularly those in the out-of-home care, child protection and youth justice systems'.
<b><i>Combatting Child Sexual Exploitation Legislation Amendment Act 2019 (Cth)</i></b>	Federal legislation that includes offences such as federal employees failing to protect a child at risk of child sexual abuse or not reporting child sexual abuse, individuals in possession of child-like sex dolls, possessing or controlling child abuse material obtained or accessed using a carriage service (such as phones or computers) and forced marriage.
<b><i>Crimes Act 1958</i></b>	This legislation defines offences to sexually assault or have sexual activity with or in the presence of a child under the age of 16 and between 16 and 17 years of age. It also covers the offence for an adult to encourage a child to engage in or be involved in sexual activity or to groom a child for sexual misconduct.  The Crimes Act also stipulates that an adult (21 years or older) cannot recruit a child (under 18) to commit criminal activity.
<b><i>Crimes Amendment (Protection of Children) Act 2014</i></b>	Failure to disclose: A new offence for failure to disclose child sexual abuse came into force on 27 October 2014. This offence requires that any adult (aged 18 and over) who holds a reasonable belief that a sexual offence has been committed by an adult against a child (aged under 16) disclose that information to police (unless they have a reasonable excuse).  Failure to protect: A new offence for failing to protect a child under the age of 16 from the risk of sexual abuse commenced on 1 July 2015. The legislation requires a person in a position of authority to reduce or remove the risk of sexual abuse of a child by an adult associated with their organisation if they negligently failed to do so.
<b><i>The Youth Justice Act 2024</i></b>	This legislation, which came into force as of 30 September 2025, has raised the age of criminal responsibility from 10 years to 12 years of age. This has potential implications for CCE.

Legislation	Functions
<b>Modern Slavery Act 2018 (Cth)</b>	Its inclusion of 'the worst forms of child labour' as described by the International Labour Organization (1999) is relevant to both CSE and CCE.
<b>Family Violence Protection Act 2008</b>	Defines family violence as including physical, sexual, economical, emotional or psychological abusive. If a child or young person is being exploited by a family member than this legislation applies.

## Policies and frameworks

Policy/framework	Description
<b>The National Plan to combat cybercrime (2013)</b>	Federal Attorney General's Department includes distribution of child exploitation material.
<b>The National Framework for Protecting Australia's Children (2021 to 2031)</b>	The current plan from this national framework, referred to as Safe and Supported, focuses on children and young people and their families with complex needs; Aboriginal and Torres Strait Islander children and young people experiencing disadvantage; children, young people and/or parents with disability who experience disadvantage; and children and young people who have experienced abuse or neglect including those in out-of-home care.
<b>National Strategy to Prevent and Respond to Child Sexual Abuse 2021–2030</b>	This is a strategic framework for preventing and responding to child sexual abuse. The National Strategy sets up a nationally coordinated and consistent way to prevent and better respond to child sexual abuse in all settings. This includes within families, by other people the child or young person knows or does not know, in organisations, and/or online.
<b>Royal Commission into Historical Sexual Abuse (2017)</b>	This national royal commission included reference to child sexual exploitation. Its recommendations have contributed to a focus on ensuring 'child safe' organisations and implementing child safety guidelines.
<b>eSafety Commissioner 2022</b>	The eSafety Commissioner's purpose is to help safeguard Australians at risk of online harms and to promote safer, more positive online experiences. eSafety is at the forefront of preventing online risks, reducing the impacts of harms and building safer digital spaces, such as through providing information on the social media age restrictions.

Policy/framework	Description
<b>AUSTRAC’s Fintel Alliance partners and Child Sexual Exploitation Response Team 2023</b>	The AUSTRAC-led public-private partnership known as the Fintel Alliance, developed a financial crime guide. The guide provides businesses with information on how to identify and stop the purchase of child sexual exploitation material and emphasise the importance of reporting of suspicious activity
<b><i>Roadmap for Reform: Strong families, safe children – the first steps (2016)</i></b>	Articulated the case for change leading to the State’s reform agenda in early intervention through to out-of-home care and sets out the directions and first steps for reform. This has been followed by plans with specific actions.
<b><i>Children and families research strategy 2017–2019</i></b>	To support the <i>Roadmap for Reform</i> , attention was given to creating a learning system where outcomes can be measured and services continually re-evaluated, refined and improved.
<b>The Aboriginal Children in Aboriginal Care (ACAC) program from 2017 onwards</b>	ACAC gives authorised Aboriginal community-controlled organisations (ACCOS) – under s. 18 of the <i>Children, Youth and Families Act 2005</i> – legal responsibility for Aboriginal children or young people who have been placed on a Children’s Court protection order. This has been gradually implemented since.
<b>A statewide specialist Children’s Court, including Marram Ngala Ganbu, 2016</b>	This court ‘aims to improve outcomes for Koori children and families involved in child protection proceedings. It seeks to provide a more effective, culturally appropriate and just response for Koori families through a culturally appropriate court process’.
<b>The Victorian Royal Commission into Family Violence (2016)</b>	This royal commission’s recommendations included a ‘lens’ on the impacts of family violence for children and young people. To implement the recommendations, the State Government established Family Safety Victoria and rolling action plans. The third rolling action plan was published in September 2025. <a href="https://www.vic.gov.au/family-violence-reform-rolling-action-plan-2025-2027">https://www.vic.gov.au/family-violence-reform-rolling-action-plan-2025-2027</a>
<b><i>Youth justice strategic plan 2020–30.</i></b>	This strategic plan is the roadmap to ongoing reform of the youth justice system. It includes a gender-responsive custodial operating model for girls and young women considering their needs and risks, to help to reintegrate with the community. The operating model provides for gender-specific health screening and admission procedures that respond to the predominance of trauma and sexual assault among girls and young women. It supports the delivery of gender-responsive programs and interventions that address specific issues, risks and needs of girls and young women

Policy/framework	Description
<b><i>Wirkara Kulpa 2020–2030</i></b>	<i>Wirkara Kulpa</i> is Victoria's first Aboriginal youth justice strategy. It is written for and by Aboriginal children and young people and captures the aspirations and changes Aboriginal children and young people, their families and communities want to see. It is a key initiative of <i>Burra Lotjpa Dunguludja</i> and the <i>Youth justice strategic plan 2020–2030</i> .
<b><i>Korin-Korin Balit-Djak</i></b>	This strategy, which translates to 'listen, learn and lead', is guided by the government's vision to achieve optimum health, wellbeing and safety for all Victorians, with a focus on addressing systemic racism within the Victorian health and human service sectors. The resulting plan (2017–2027) focuses on Aboriginal health, wellbeing and safety including Aboriginal children and young people.
<b><i>Framework for trauma-informed practice</i></b>	This framework provides a definition of individual and collective trauma as well as single incident and complex trauma. <a href="https://www.dffh.vic.gov.au/publications/framework-trauma-informed-practice">https://www.dffh.vic.gov.au/publications/framework-trauma-informed-practice</a>
<b><i>Framework to reduce criminalisation of young people in residential care</i></b>	This framework aims to reduce the unnecessary and inappropriate contact of young people in residential care with the criminal justice system. <a href="https://cfecfw.org.au/modules/reducing-the-criminalisation-of-young-people-in-residential-care/story_content/external_files/A_Framework_to_reduce_criminalisation_of_young_people_in_residential_care.pdf">https://cfecfw.org.au/modules/reducing-the-criminalisation-of-young-people-in-residential-care/story_content/external_files/A Framework to reduce criminalisation of young people in residential care.pdf</a>
<b><i>Program requirements</i></b>	The department sets out program requirements that outline the responsibilities and expectations for service providers relating to specific programs. For example, the draft updated <i>Program requirements for therapeutic residential care</i> include multiple references as to how community service organisations and Aboriginal community-controlled organisations should respond when there is concern of child sexual exploitation.

