

## **Making Queensland Safer (Adult Crime, Adult Time) Amendment Bill 2025**

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<b>Submitted by:</b>	The Qld Network of Alcohol and other Drug Agencies
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15 April 2025

Justice, Integrity and Community Safety Committee  
[JICSC@parliament.qld.gov.au](mailto:JICSC@parliament.qld.gov.au)

Dear Committee Members

Thank you for the opportunity to provide feedback to the *Making Queensland Safer (Adult Crime, Adult Time) Amendment Bill 2025*. The Queensland Network of Alcohol and other Drugs Agencies (QNADA) submission is attached.

QNADA represents a dynamic and broad-reaching specialist network within the non-government alcohol and other drug (NGO AOD) sector across Queensland. We have more than 55 member organisations, representing the majority of specialist NGO AOD providers. This submission is made following consultation with QNADA members.

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Yours sincerely

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Rebecca Lang

**CEO**





Submission to the *Making  
Queensland Safer (Adult  
Crime, Adult Time)  
Amendment Bill 2025*

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*April 2025*



This submission has been prepared by the Queensland Network of Alcohol and Other Drug Agencies (QNADA). Its content is informed by consultation with QNADA member organisations providing alcohol and other drug treatment and harm reduction services across Queensland, as well as a review of relevant research and reports.

This submission focuses on the challenges with:

- the 'exceptional crisis situation'
- punitive approaches to youth offending.
- removing the principle of detention as last resort.
- disproportionate impacts on Aboriginal and Torres Strait Islander young people
- allowing cautions and restorative justice agreements to appear on the criminal history of a child.
- equitable access to appropriate healthcare for young people engaged with the justice system.
- enabling media to be presenting during criminal proceedings

QNADA's member services work at the intersection of multiple different systems and provide support to young people and their families who are in contact with, or are at risk of having contact with, the youth justice system. This makes us uniquely positioned to comment on the proposed amendments, which are contradictory to what we know works when responding to youth crime and out of step with other Australian jurisdictions.

QNADA is supportive of responses which are evidence informed and likely to increase individual and community safety, as outlined in our policy position paper on [System Responses: Young People and the Justice System](#). We are concerned that the proposed amendments will increase the number of young people in custody, without improving community safety.

Given that most young people leave the youth justice system worse off than when they entered it<sup>1</sup>, it is problematic to extend a system currently failing to deliver public value. Instead, we would like to see increased investment in programs and policies which aim to divert children away from the justice system entirely.

### **Criminalising young people who use drugs**

We are concerned that these reforms will have a significant net-widening effect which will disproportionately affect young people who use drugs. While we know that a young person's substance use is often not the primary reason they come to the attention of police, over-policing and high visibility policing increases the risk of further engagement and subsequent over-criminalisation of young people. In particular, we find it problematic that this amendment inserts the offense 'Trafficking in dangerous drugs' into section 175A of the *Youth Justice Act 1992*. We know from experience that this will not produce the desired deterrent effect and will instead compound the potential for harms associated with drug use.

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<sup>1</sup> Department of Health and Human Services, Victoria. Youth Justice Review and Strategy: Meeting Needs and Reducing Offending (2017) [https://apo.org.au/sites/default/files/resource-files/2017-08/apo-nid101051\\_11.pdf](https://apo.org.au/sites/default/files/resource-files/2017-08/apo-nid101051_11.pdf).



Evidence from our member services is consistent - contact with agencies like police, justice and child safety are associated with a range of adverse outcomes, including treatment effectiveness through disruptions to access. It is widely agreed that incarcerating young people who use drugs is associated with a host of negative outcomes including recidivism, with the experience of being in a youth detention facility increasing the likelihood of future offending<sup>2</sup>. Incarcerating young people who use alcohol and other drugs is also certain to negatively impact long term health outcomes<sup>3</sup>. For young people who inject drugs, incarceration increases the risk of hepatitis C and other bloodborne virus transmissions, as the lack of harm reduction services in correctional facilities increases high-risk injecting behaviours such as needle sharing<sup>4</sup>.

Young people who are caught up in these systems often become 'stuck' moving between these systems which can lead to compounding harm, exclusion and disadvantage that has detrimental impacts over the longer term, including by increasing the likelihood of further system engagement, limiting future employment and/or restricting access to secure housing.

To support effective relationships and engagement, alcohol and other drug treatment and harm reduction services must be voluntary, confidential and delivered in a way that ensures that young people and their families feel safe. This is because most:

- have complex histories of abuse and trauma;
- prior poor experiences with police and other statutory bodies;
- a general distrust of services; and
- experience stigma and discrimination in their daily lives, including from police and the courts.

Prison is not an effective method of rehabilitation for people experiencing problematic drug use. Depriving young people who use drugs of their liberty will not have the effect of reducing their drug use (and may in fact increase use) or the harms themselves or their communities experience as a result of problematic use.

### **The 'exceptional crisis situation'**

We suggest the claim that there is 'an exceptional crisis situation constituting a threat to public safety' is fundamentally flawed. While it is true that a small number of young people are being detected for more offences, the overall rate of youth crime in Queensland has dropped substantially in the past decade. On a longer view, it has dropped even further. Queensland Police Data shows that the rate of offending by children fell by 2% in 2023-2024 and the number of offences fell by 6.7%<sup>5</sup>. In 2022, the rate of offending by children in Queensland was the lowest it has ever been in recorded history.

It is also questionable whether the proffered justification for the measures should satisfy ss 43 and 44 of the *Human Rights Act 2019* (Qld). That fundamental rights, including the right against cruel, inhuman or degrading treatment, could be violated on the basis that "*these measures and the*

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<sup>2</sup> PeakCare Queensland Inc. Youth Crime – Get Smarter, Not Tougher Youth Crime - Get SMARTER, Not Tougher (2023).

<sup>3</sup> Barnert, Elizabeth S., Rebecca Dudovitz, Bergen B. Nelson, Tumaini R. Coker, Christopher Biely, Ning Li, and Paul J. Chung. "How does incarcerating young people affect their adult health outcomes?." *Pediatrics* 139, no. 2 (2017).

<sup>4</sup> Australian Institute of Health and Welfare, "The health of people in Australia's prisons 2022" (2023).

<sup>5</sup> Queensland Police, 'Queensland Police Service release latest crime statistics for 2023/24 financial year' (26 July 2024).



*purposes to which they are directed are clearly supported by Queenslanders and are a direct response to growing community concern and outrage over crimes perpetrated by young offenders”<sup>6</sup>* raises significant questions about what constitutes an ‘exceptional case’ for the purposes of s 43 of the Act. From the perspective of international law, it is inconceivable that simply having popular support would legitimate the violation of such fundamental rights.

United Nations Committee on the Rights of the Child chair Ann Skelton described the Adult Crime Adult Time reforms as a *“flagrant disregard for children’s rights under international law”<sup>7</sup>*. We also note that the compatibility of this bill with domestic and international human rights law was also questioned by:

- The Australian Human Rights Commission
- The Queensland Human Rights Commission
- Amnesty International
- Legal Aid Queensland
- Queensland Law Society
- Queensland Sentencing Advisory Council
- The Independent Ministerial Advisory Council
- The Office of the Public Guardian
- The Bar Association of Queensland

### **Punitive responses to youth offending**

The bill will certainly result in further criminalisation of young people who use drugs and is incommensurate with evidence-based strategies currently being implemented by government agencies like [Better Care Together](#) and [Shifting Minds](#). Punitive policies and practices directly undermine the key outcomes that governments are seeking to achieve through these policies, including those aimed at reducing recidivism and improving community safety.

Evidence overwhelming demonstrates that the younger you deprive children of their liberty, the more likely it is that they will go on to commit more serious and violent crimes. That is because offending by children is a symptom of underlying causes and needs related to the social and cultural determinants of health that we are failing to address. This failure is the cause of the escalation in offending. The proposed measures in the Bill are certain to result in more crime, not less.

There are important factors to consider when policing young people. Young people aged 15 to 24 years are more likely to be victims of crime, including of physical and/or threatened assault, than any other age group<sup>8</sup>. There is no real way to predict how these experiences will impact a child or young person’s ongoing health and behaviour, however, for young people who do offend, there is a significant likelihood that they have been victims of more serious offences than they have committed, and that they have experienced multiple forms of disadvantage, abuse, and neglect.

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<sup>6</sup> Making Queensland Safer Bill, Statement of Compatibility, 5.

<sup>7</sup> Maxwell, Rudi, “UN slams Queensland laws as a *“flagrant disregard for children’s rights”* (Webpage, December 2024)

<sup>8</sup> Australian Bureau of Statistics, “Crime Victimisation, Australia, 2021-2022 financial year,” (2023).



Many children in contact with the criminal justice system are dealing with multiple and complex issues including neurological disabilities, cognitive and learning problems and mental health disorders. Poverty, intergenerational trauma, violence and abuse, racism, homelessness, and inadequate healthcare are contributing factors in their contact with the justice system. When children enter the justice system, their disabilities and mental health issues are exacerbated by detention and harmful conditions, including extended periods of time in isolation in their cells, as noted by the [Australian Human Rights Commission](#).

The current settings imply youth detention can act as a deterrent and a solution to youth crime, despite overwhelming evidence that our youth detention system is the most expensive and least effective approach we have for reducing youth crime.

Queensland already has an overreliance on detention. For many years Queensland has detained more children than any other state, with the highest rates of unsentenced detention and the most nights spent in custody. During 2022-23, Queensland had the second highest rate of young people in youth justice custody on an average day (5 .0 per 10,000) and the second highest rate of young people under community-based supervision on an average day (15 .8 per 10,000)<sup>9</sup>.

This approach has resulted in more than 90% of young people who enter detention reoffending and 66.9 per cent of young people that enter detention have been in detention previously. Evidence from our member services is consistent - contact with agencies like police, justice and child safety are associated with a range of adverse outcomes, including negative impacts on treatment effectiveness through disruptions to access. It is widely agreed that early intervention and diversion into treatment are preferable to justice responses for young people<sup>10</sup>.

Punitive responses to children and young people also impacts their willingness to report their experiences of victimisation to the police and erodes their confidence in an effective justice response. This point is important given that a key aim of the proposed Act is to “*increase community confidence in the justice system.*”

Detention is not only ineffective, but also expensive. In Queensland, the average cost per day for keeping a young person in detention is \$1,833.72 – 65% above the national average. In contrast, the average cost per day per child for community-based supervision for 2022-23 was \$304.30. In 2023, state government expenditure on youth detention was over \$207 million—almost double what it was a decade prior<sup>11</sup>.

### **Detention as a last resort**

We are concerned by the proposed removal of the principle of detention as a last resort and the principle that a non-custodial order is better than detention in promoting a child’s ability to reintegrate into the community. These are fundamental principles upon which Australian youth

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<sup>9</sup> Australian Bureau of Statistics, “Youth justice in Australia 2022–23,” (2023).

<sup>10</sup> Green, R., Bryant, J., Gray, R., Best, D., Brown, R., Rance, J., & MacLean, S. J. (2016). *Policing and Pathways to diversion and care among vulnerable youth people who use alcohol and other drugs*. Canberra: National Drug Law Enforcement Research Fund.

<sup>11</sup> Productivity Commission (Cth), *Report on Government Services 2024* (Web Page, January 2024)



justice systems are based, and we are certain that removing them will fail to have desired effect on crime and will instead result in further harm to children and communities.

As noted by the [Bar Association of Queensland](#), removing Youth Justice Principle 18 from the Charter of youth justice principles creates a perverse situation where the sentencing regime for youth offenders is more punitive than the scheme that applies to adults<sup>12</sup>. This removal is also incommensurate with recommendations 3 of the Atkinson report “Keep children out of custody”<sup>13</sup>.

UN studies have highlighted the potentially harmful effects of detention on children, especially their health, mental health and development<sup>14</sup>. Recognising this potential for harm, the UN Committee on the Rights of the Child urges nations to immediately embark on a process to reduce reliance on detention to a minimum<sup>15</sup>. Article 37(b) of the UN Convention on the Rights of the Child (UN CROC) establishes that detention or imprisonment of a child shall be used only as a measure of last resort and for the shortest appropriate period of time.

Many children are entering detention with pre-existing vulnerabilities, such as neurodevelopmental disabilities and mental ill-health. Current models of detention are likely to compound trauma for these children. The Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability found that detention settings exacerbate the vulnerabilities of children with disability who often lack access to therapeutic support and trauma-informed care<sup>16</sup>.

Children with cognitive or intellectual disabilities are also overrepresented in youth detention in Queensland. Of the children in Queensland youth detention centres or police watch houses in 2022:

- 26% had diagnosed or suspected cognitive or intellectual disability
- 19% had a diagnosed or suspected developmental/language disorder
- 12% had diagnosed or suspected foetal alcohol spectrum disorder
- 6% had diagnosed or suspected autism spectrum disorder.<sup>17</sup>

These conditions are found to compromise a child’s capacity to understand the consequence of their actions. Offending behaviours can be driven by issues relating to impulsivity, hyperactivity, risk-taking, and emotional regulation as symptoms of underlying, and possibly undiagnosed, disabilities and neurological conditions.

A February 2023 judgment of the Children’s Court of Queensland recorded that a 14-year-old child with Fetal Alcohol Spectrum Disorder and a history of neglect and abuse had been confined to his cell for 20 hours or more on 78 of the 87 days for which records were available during his period of remand. For 10 of those days, he had been confined to his cell for 24 hours. The court stated that the

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<sup>12</sup> Bar Association of Queensland, Submission to the Making Queensland Safer Bill 2024 (2024),

<sup>13</sup> Bob Atkinson, Report on Youth Justice (Version 2, 8 June 2018).

<sup>14</sup> Manfred Nowak, Independent Expert leading the UN Global Study on Children Deprived of Liberty, United Nations Global Study on Children Deprived of Liberty (11 July 2019) 167, 178 ; Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, UN Doc A/HRC/38/36 (10 April 2018), [53]– [55], [60]– [69].

<sup>15</sup> United Nations Committee on the Rights of the Child, General Comment 24 on children’s rights in the child justice system, UN Doc CRC/C/GC/24 (18 September 2019) para 83.

<sup>16</sup> Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability (Final Report, September 2023) vol 8, 81.

<sup>17</sup> Department of Children, Youth Justice and Multicultural Affairs, ‘Young people in youth justice custody (2018 to 2022)’, Youth Justice Census Summary (Web Page).



circumstances of his detention were “*cruel, inappropriate and have served no rehabilitative effect*”. The judge was satisfied that the detention was likely to have caused the child “*significant harm*” and that the detention “*may well have increased the risk of further offending by the child*”<sup>18</sup>.

Nearly 90% of children in Queensland’s detention centres are on remand. The imposition of higher maximum penalties and removal of the principle of detention as a last resort is also likely to mean that an even greater number of children will be detained pending trial<sup>19</sup>.

### **Disproportionate impacts on Aboriginal and Torres Strait Islander young people**

These reforms will have the most impact on Aboriginal and Torres Strait Islander children, who are consistently targeted by criminal justice systems, as well as child safety systems. Despite making up 8.2% of children and young people aged 10-17 in Queensland, Aboriginal and Torres Strait Islander children:

- accounted for 53% of all distinct young people convicted
- accounted for between 65 and 71% of children in youth detention on an average day over the last 4 years
- represented 87% of all children aged 10 to 13 years old in detention centres on an average day<sup>20</sup>

The reasons for First Nations people’s contact with the justice system are inextricably linked with dispossession, colonisation, discrimination and experiences of institutional racism<sup>21</sup>. In addition, there is clear evidence of institutional racism within Australian criminal justice systems, with over-representation of Aboriginal and Torres Strait Islander people increasing at every stage of the criminal justice process<sup>22</sup>.

The Australian Law Reform Commission found that First Nations children are more likely to be arrested than non-Indigenous children, “*even after factors such as the offence, offending history and background factors are taken into account*”<sup>23</sup>. This is consistent with data reported by the Queensland Family and Child Commission in 2023, showing that First Nations children in Queensland “*are less likely to receive a diversion decision, and less likely to be granted bail*”, as well as being disproportionately exposed to the watch house system<sup>24</sup>.

We note that the National Closing the Gap targets include reducing the rate of young people (ages 10 to 17 years) in detention by 30% by 2031. In order for government to achieve this goal, it must place Aboriginal and Torres Strait Islander community organisations and Peak Bodies at the heart of designing and implementing new solutions. Such organisations have long advocated for community

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<sup>18</sup> R v TA [2023] QChC 2, 5.

<sup>19</sup> Childrens Court of Queensland, Annual report 2022–23 48.

<sup>20</sup> Ibid.

<sup>21</sup> Youth Justice Reform Select Committee, *Inquiry into ongoing reforms to the youth justice system and support for victims of crime* (Interim Report, April 2024)

<sup>22</sup> Australian Law Reform Commission, *Pathways to Justice – Inquiry into the Incarceration Rate of Aboriginal and Torres Strait Islander Peoples* (Report No 133, 28 March 2018)

<sup>23</sup> Ibid.

<sup>24</sup> Queensland Family & Child Commission, *Who’s responsible: Understanding why young people are being held longer in Queensland watch houses* (30 November 2023)



driven solutions such as Murri Courts, which provide culturally responsive approaches to youth justice by incorporating the guidance of Elders and community representatives.

These courts prioritise rehabilitation and accountability while addressing consequences of offending and the unique cultural needs of Aboriginal and Torres Strait Islander youth. Evidence from these programs show reduced recidivism rates and increased engagement with rehabilitative programs. These courts align with restorative justice principles by ensuring that cultural connection and community support are central to the judicial process. Expanding access to culturally tailored courts can complement broader reforms, addressing the overrepresentation of Aboriginal and Torres Strait Islander children in the justice system<sup>25</sup>.

### **Allowing cautions and restorative justice agreements to appear on the criminal history of a child**

We do not support the proposed removal of sections 15(3), 21(4), and 252G(3) of the Youth Justice Act, which currently prohibit cautions and contraventions of a supervised release order from appearing on the criminal history of a child.

The removal of these protections would have the effect of further criminalising young people's drug use. Last May, the expanded Police Drug Diversion Program (PDDP) was introduced with the intention of diverting people away from the criminal justice system and this aspect of the proposed Act will directly undermine the programs stated intention. Allowing drug diversions and cautions to form part of a child's admissible criminal history has the effect of criminalising their drug use.

We know from domestic and international evidence that criminalising drug use carries with it a range of negative consequences, and is ineffective in reducing drug use. Further, diversion from criminal justice systems has been recommended by the numerous state and federal government inquiries and reports dating back to 2010<sup>26</sup>.

The Queensland government should, in keeping with bipartisan commitments under successive drug and alcohol strategies, aim to criminalise drug use as little as possible, including allowing cautions and diversions of children to be kept out of future proceedings.

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<sup>25</sup> Queens and Department of Justice and Attorney General . (2016). *Evaluation of the Murri Court: Final report*. Brisbane, Australia: Department of Justice and Attorney General

<sup>26</sup> Such as: Hear her voice - Report two - Women and girls' experience across the criminal justice system (2022); Shifting Minds Strategy 2023-2028; Inquiry into the Opportunities to Improve Mental Health Outcomes for Queenslanders (2022); Towards a healthier, safer more just and compassionate Queensland: decriminalising the offences affecting those most vulnerable (2022); Achieving balance: The Queensland Alcohol and Other Drugs Plan 2022-2027; Qld Productivity Commission Inquiry into Imprisonment and Recidivism (Reducing Imprisonment) (2020); Women in Prison 2019: A human rights consultation report (Anti-discrimination Commission Qld); Report on Youth Justice (2018); Action on Ice: The Qld Govt's plan to address use and harms caused by crystal methamphetamine (2018); Drug and Specialist Court Review: Final Report (2016); Inquiry into cannabis-related harm in Queensland Report No . 10 (2010)



## Poor access to equitable and appropriate healthcare within Queensland prisons

Despite the fact that most people who use drugs do not experience problems, many people involved with justice systems have poorer physical and mental health than the general population and a large proportion have a history of alcohol, drug use and dependence<sup>27</sup>. Considering that this Act will increase the number of young people who are incarcerated, challenges to equitable access to appropriate healthcare must also be addressed.

Periods of incarceration provide an opportunity to provide health and support interventions, including identifying people with mental health and drug use issues and providing treatment. However, in practice, this opportunity is currently being squandered as Queensland prisons are desperately lacking in appropriate alcohol and other drug treatment and harm reduction programs. Within correctional settings, harm reduction is not available and treatment offerings are not connected to services delivered in the community. This policy will bring inevitable higher demand and greater complexity in presentations.

The [2022 Inquiry into the Opportunities to Improve Mental Health Outcomes for Queenslanders](#) recommended “Increasing mental health and alcohol and other drugs service delivery in correctional facilities” (Rec 15). This recommendation was accepted in full, however the problem very much still exists. The issues around current AOD treatment and harm reduction programs within Queensland correctional settings, and the need for immediate expansion, has been raised consistently within government reports and strategies dating back decades<sup>28</sup>.

This is of particular concern given that:

- People entering prison were more than 4 times as likely to report illicit drug use in the preceding 12 months as people in the general community (73% and 17%, respectively)
- Younger prison entrants were more likely to report current drug use than older entrants
- Almost one-third (29%) of prison entrants reported they had injected drugs at some stage in their lives
- Almost 2 in 5 (37%) prison dischargees reported using illicit drugs in prison<sup>29</sup>
- Rates of recidivism are significantly higher for people with a history of substance dependence.<sup>30</sup>

Poor levels of access to services when imprisoned means that people receiving treatment or medication before going to prison don't always have access to these supports once they are

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<sup>27</sup> Snow, K. J., D. Petrie, J. T. Young, D. B. Preen, E. Heffernan, and S. A. Kinner. "Impact of dual diagnosis on healthcare and criminal justice costs after release from Queensland prisons: a prospective cohort study." *Australian Journal of Primary Health* 28, no. 3 (2022): 264-270.

<sup>28</sup> Such as the Achieving balance: The Queensland Alcohol and Other Drugs Plan 2022-2027; Qld Corrective Services Drug and Alcohol Action Plan 2020-21; Action on Ice: The Qld Govt's plan to address use and harms caused by crystal methamphetamine 2018; Parole System Review 2016; Women in Prison 2019: A human rights consultation report (Anti-discrimination Commission Qld)

<sup>29</sup> Australian Institute of Health and Welfare, "The health of people in Australia's prisons 2022" (2023).

<sup>30</sup> Sullivan et al. "Recidivism, health and social functioning following release to the community of NSW prisoners with problematic drug use: study protocol of the population-based retrospective cohort study on the evaluation of the Connections Program." *BMJ open* 9, no. 7 (2019): e030546.



imprisoned. This can leave them waiting for medication, leading to issues such as withdrawal or mental health instability<sup>31</sup>.

This lack of access to health care and AOD treatment increases the risk of:

- overdose
- self-harm
- suicide
- poorer health outcomes.<sup>32,33</sup>

We point to the provision of NSPs within QLD prisons as an illustrative example. There is a wealth of evidence which shows that NSPs within prisons lead to a marked reduction in the transmission of blood-borne viruses, reduce risk behaviours, reduce death, improve prison safety, and reduce rates of reoffending while there is no evidence to suggest that these programs have unintended negative consequences<sup>34</sup>. Having no access sterile injecting equipment means people in prison are at increased risk of contracting bloodborne viruses as a result of sharing injecting equipment, particularly hepatitis C. It is concerning then that data from AIHW shows that about 1 in 7 (14%) prison discharges<sup>35</sup> reported injecting substances in prison<sup>35</sup>.

Queensland Health must take the lead to ensure people in Queensland Watch Houses and Prisons have immediate access the full complement of treatment and harm reduction services delivered in the community by the non government sector.

In this context, it is clear that service commissioning and contract management processes through Youth Justice are problematic and not aligned with similar processes Health procurement. Planning and commissioning of health services should be undertaken by Queensland Health to ensure equitable access to health services (as required by the Queensland Human Rights Act 2019) and to provide some system level accountability to balance the operational requirements of youth justice facilities (such as suspended access to health or education services due to a lack of youth justice staff).

Detention centres and the broader youth justice system must also work more collaboratively with community-based support and treatment services, in a way that prioritises confidentiality, choice and continuity of care. Early coordinated planning with relevant service providers before a young person is released from custody is essential, including to address their housing, education and employment needs.

### **Enabling media to be present during criminal proceedings**

The proposal to amend the Children's Court Act 1992 to enable the media to be present during criminal proceedings by omitting the ability of a court to make an exclusion order under section 20(2) is incommensurate with the protection of the child's right to privacy and reputation (as contained in

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<sup>31</sup> Australian Institute of Health and Welfare, "The health of people in Australia's prisons 2022" (2023).

<sup>32</sup> Australian Institute of Health and Welfare, "The health of people in Australia's prisons 2022" (2023).

<sup>33</sup> Butler, Amanda, Jesse T. Young, Stuart A. Kinner, and Rohan Borschmann. "Self-Harm and Suicidal Behaviour among Incarcerated Adults in the Australian Capital Territory." *Health & Justice* 6, no. 1 (2018)

<sup>34</sup> Rutter, S., Dolan, K., Wodak, A., & Heilpern, H. (2001). Prison-based syringe exchange. A review of international research and programme development. NDARC Technical Report No. 112.

<sup>35</sup> Australian Institute of Health and Welfare, "The health of people in Australia's prisons 2022" (2023).



section 25 of the Human Rights Act). The proposed amendment is also incompatible with Action 40(2) of the UN CROC which provides that child offenders should be “*treated in a manner consistent with the promotion of the child's sense of dignity and worth’ and that their privacy be ‘fully respected at all stage of the proceedings’*”.

Research sets out the dangers of ‘naming and shaming’ policies, including the breach of the child’s right to privacy, increased stigmatisation, reduced prospects of rehabilitation and social integration, and sabotage of future employment opportunities<sup>36</sup>. Furthermore, media reporting on matters relating to Aboriginal and Torres Strait Islander issues has a history of causing damage and harm through the perpetuation of negative and racist stereotypes<sup>37</sup>.

Allowing media into children’s courts will certainly have the effect of further stigmatising any children who are also using drugs, given that illicit drug dependence is one of the most stigmatised health concerns in the world (according to the World Health Organisation)<sup>38</sup>. Research has also consistently shown that media reporting on illicit drugs is heavily biased towards sensationalised and moralistic framings of drug use, which serve to perpetuate stigma<sup>39</sup>. We are also concerned with the effect that this may have on the broader narrative, considering the evidence that shows media reporting tends to influence both the publics and policy-maker’s attitudes and beliefs<sup>40</sup>.

Children’s courts should always be closed courts to the media, and journalists should not identify any child involved in legal proceedings in their reporting. We draw attention to [comparative research](#) of a UK and Scandinavian case study which demonstrates that when children’s identities are protected and they are not imprisoned, compared to ‘naming and shaming’ and incarceration, they are less likely to reoffend<sup>41</sup>.

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<sup>36</sup> Kate Fitz-Gibbon and Wendy O’Brien, “The Naming of Child Homicide Offenders in England and Wales: The Need for a Change in Law and Practice,” *The British Journal of Criminology* 57, no. 5 (2016): 1061–79.

<sup>37</sup> Australian Human Rights Commission (2024) *Submission to the Making Queensland Safer Bill*. [00000147.pdf](#)

<sup>38</sup> Robin Room et al., “Cross-Cultural Views on Stigma, Valuation, Parity, and Societal Values Towards Disability,” in *Disability and Culture: Universalism and Diversity*, ed. Faculty of Social Sciences Stockholm University, Centre for Social Research on Alcohol and Drugs (SoRAD) (Seattle: Hogrefe & Huber Publishers, 2001).

<sup>39</sup> Hughes, C. E., Lancaster, K., & Spicer, B. (2011). How do Australian news media depict illicit drug issues? An analysis of print media reporting across and between illicit drugs, 2003-2008. *The International journal on drug policy*, 22(4), 285–291. <https://doi.org/10.1016/j.drugpo.2011.05.008>

<sup>40</sup> Seale, Clive. “Media and health.” (2002): 1-256.

<sup>41</sup> Green, D. A. (2008) *When Children Kill Children: Penal Populism and Political Culture*, Oxford: Clarendon Press.