**National Principles for Child Safe Organisations**   
**(National Principles) Resources Project**

**Children and Young People with Disability Australia**

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**Authorised by:**

Skye Kakoschke-Moore, (she/her) Chief Executive Officer

**Contact details:**

Children and Young People with Disability Australia  
E. [skye@cyda.org.au](mailto:skye@cyda.org.au)  
P. 03 9417 1025  
W. [www.cyda.org.au](http://www.cyda.org.au)

**Authors:**

Sharon O’Mara (she/her), Policy Officer

Madeleine Clarke (she/her), Youth Programs Coordinator

Dr Liz Hudson (she/her), Policy and Research Manager

**Contributors:**

Anderson Christie (he/they), Youth Council 2021/22

Ashleigh Keating, (she/her) Youth Council 2022/23

Emily Unity, (they/them) Youth Council 2022/23

Charlotte Young, (she/her) Youth Council 2022/23

Claire Bertholli, (she/her) Young Leader 2022

Natalie (omission of last name is intentional), (she/her) Youth Council 2022/23

Kay Barnard, (they/them) Youth Connection and Opportunities Officer

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# Glossary

**Accessibility:** The practice of making activities, environments (physical and online), equipment, information, and materials available to – and usable by – as many people as possible.  This includes taking steps to ensure there are no barriers that prevent individuals from accessing or interacting with these things.

**Adjustments:** An adjustment can also be known as a change or accommodation. These are actions that support people with disability to participate on the same basis as their peers. Adjustments can take the form of people (e.g., support workers), equipment, materials or changes in how things are done.

**Children and young people:** People aged between 0 and 25 years.

**Co-design:** A participatory approach that brings together people with lived experience and people with technical expertise in order to design solutions to a particular issue or problem. This should take place on an equal basis, where decision-making power is shared at all stages of project development.  These stages may include but are not limited to research, design and implementation.  Co-design should be an ongoing process in which meaningful participation is embedded across every aspect of a project.

**Disability:** CYDA defines disability as being inclusive of, but not limited to, neurodivergence, mental illness, intellectual disability, chronic illness, sensory disability, and physical disability. It encompasses individuals with and without a formal diagnosis.

Under Australian law (such as the *Disability Discrimination Act 1992)*, disability is a broad term that covers:

* Partial or total loss of bodily or cognitive function.
* Partial or total loss of a body part.
* Presence of organisms that cause or can cause disease or illness (e.g., HIV).
* Disorders of learning.
* Disorders of behaviour, emotions, judgement, or thought processes.

This legal definition covers past, present, future and assumed disability. A diagnosis is not required to be protected under Australian law.

These definitions are helpful in identifying cohorts of individuals – such as children and young people with disability – on which to focus laws, policies, programs, supports, funding, or anything else that requires inclusion or exclusion criteria (e.g., a list of attributes someone must have before they receive funding).

However, definitions of disability can also be framed through the *interactions* between individuals and societies. The social model of disability is one such example, which – put simply – posits that people are not disabled by their state of body, but rather by attitudinal, environmental, and institutional barriers that exclude or discriminate against them.

These understandings of disability are useful when contemplating cultural, environmental, and societal changes that should be made in response to systemic issues, such as those required by organisations under the National Principles.

**Inclusion:** Inclusion for children and young people with disability means that they are being nurtured and supported to access experiences and opportunities on the same basis as their peers.

This involves the provision of accommodations (also known as adjustments) to support their full and meaningful participation, but also opportunities to take risks, learn and develop. Inclusion must take place across all spaces (physical and digital) and should encompass physical, social, and emotional inclusion. It is enacted by everyone, for everyone.

Inclusion can also be understood through the lens of equality ─ where all people are treated, represented, and supported fairly and equitably. This covers individual, day-to-day interactions but also extends to representation in the community and the upholding of human rights.

Considerations of disability in isolation will fall short of achieving genuine inclusion. Rather, inclusion exists at the intersection of disability, gender, sexuality, race, culture, and other identities and ways of being that interact with systems and societies.

Inclusion without adjustments, without competent and engaged teams, and without dignity and communication, creates space for inequity, discrimination, neglect, abuse and violence.

**National Principles:** An abbreviated way of referring to the National Principles for Child Safe Organisations.

**Restrictive practices: ‘**Any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability’ (National Disability Insurance Scheme Act 2013). These practices include chemical restraint, environmental restraint (restricted access), mechanical restraint, physical restraint and seclusion. They can infringe upon a person’s human rights and put them at increased risk of abuse, neglect and exploitation.

**Safety:** Safety is more than the absence of physical and emotional harm, abuse and injury. It includes measures to prevent injury, exploitation, harm or trauma to a child or young person, as well as cultural safety and other vital considerations. Within the context of disability, safety gains additional dimensions, such as trust and its relationship to knowledge and attitudes.

For a deeper exploration of ‘safety’ as it relates to this report, please see the section [Evidence Review: What does it mean to keep children and young people safe?](#_Evidence_Review).

**Voice:** The ‘voice’ of children and young people with disability encompasses their needs, opinions, perspectives, knowledges, and experiences, as these are expressed to other people and to broader society, both by individuals and as a collective. This can be done through any form of communication and is not limited to the spoken word.

Key to the idea of ‘voice’ is its inception, where children and young people with disability are supported to find and activate their voice – for their voice to be acted upon and influence their own lives and the world around them, rather than being passively received by others.

# Executive Summary

Ensuring that children and young people with disability are safe has presented challenges for organisations both large and small, across Australia. Staff, volunteers and employers alike, have struggled to deliver responses that guarantee safety and protection against harm. Effectively responding to these challenges—while ensuring that organisational structures, systems and procedures support all children and young people with disability to safely engage—requires the most attentive development of programs and practices.

The National Principles for Child Safe Organisations (endorsed by members of the Council of Australian Governments in 2019) which aim to provide a nationally consistent approach to creating organisational cultures that foster child safety and wellbeing, is a laudable first step. The subsequent challenge is to implement the principles in a way that best supports all children and young people, including those with disability.

To address the challenge of implementing the principles, CYDA conducted consultations with a broad range of stakeholders to inform the development of resources to support this important next step. The consultations (many facilitated by young people with disability), sought the views of experts (including people with lived experience) to develop a proposal for the purpose and general content of resources that will support organisations to better keep children and young people with disability safe and supported. Drawing on the evidence and data gathered from the consultations, CYDA recommends the following:

|  |
| --- |
| Broad recommendations   * **CYDA strongly recommends** that a co-design framework is used to inform the design and development of child safety resources. All stages of project development should share decision-making power with those most affected by the issue to incorporate their needs and lived experience:   + staff and volunteers at organisations working with children and young people, and   + most importantly, children and young people with disability. * Each of the key messages should be fully read to understand the areas that must be addressed. CYDA recommends that all key messages are actioned to support organisations that engage with children and young people to understand and implement the National Principles in a way that promotes and encompasses the safety of children and young people with disability. * Any future designer of child safety resources should incorporate the key messages and participants’ experiences of the National Principles and child safety as outlined in the data from consultations presented in this report. |

The outcome from these consultations is contained within this report and presented as recommendations/key messages as detailed in the [Key Messages](#_Key_Messages) section. It is CYDA’s strong view that the broad recommendations described in the box above are fundamental to the success of any future development of resources that supports the safety of children and young people with disability.

# Introduction

Children and Young People with Disability Australia (CYDA) is the national representative organisation for children and young people with disability aged 0 to 25 years. CYDA has an extensive national membership of around 5,000 young people with disability, families and caregivers of children with disability, and advocacy and community organisations. Our vision is that children and young people with disability are valued and living empowered lives with equality of opportunity; and our purpose is to ensure governments, communities, and families, are empowering children and young people with disability to fully exercise their rights and aspirations. We do this by:

* Driving inclusion
* Creating equitable life pathways and opportunities
* Leading change in community attitudes and aspirations
* Supporting young people to take control
* Calling out discrimination, abuse, and neglect

CYDA has been funded by the National Office for Child Safety (NOCS) to undertake a series of consultations to inform the development of resources that will support organisations that engage with children and young people to understand and implement the National Principles for Child Safe Organisations (National Principles) in a way that promotes and encompasses the safety of children and young people with disability. The National Principles were developed in response to the recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse (2017). The Royal Commission detailed disclosures of harm, abuse and injury to children and young people in institutional care and highlighted the need for Australian federal and state and territory governments to introduce guidelines to keep children and young people safe.

Findings from the Royal Commission (2017) and studies (Jones et al. 2102; Robinson 2016) highlight how children and young people with disability are more vulnerable to discrimination and physical, emotional and sexual abuse. CYDA’s report interacts with these findings along with the insights gained from consultations with key stakeholders. The objective of this project is to help organisations foster cultural conditions that supports the safety and wellbeing of children and young people with disability.

This report is organised into four sections.

The first section, entitled the ‘Evidence review’, examines the context and interpretation of ‘safety’ established in contemporary literature, grey literature such as NOCS reports and as described by CYDA. Insights from the stakeholder consultations are also incorporated for further contextualisation.

The second section of the report describes the method and approach, outlining the participant recruitment process and details of the consultations. This section describes how the data from the consultations was analysed and categorised into themes. In the next section the findings from the consultations are presented and categorised into themes along with the ‘gaps’ outlined from the desktop audit summary (see accompanying report *Report on publicly available resources on the National Principles for Child Safe Organisations (National Principles)*.

The final section of this report presents the recommendations which are organised into ‘key messages’. The key messages map out what is needed in a resource which includes objective/s of the resource, ideas for the resource and content suggestions as evidenced from the consultations, the desktop audit and review of key literature.

**A key recommendation and priority of CYDA is that the resources will be co-designed with children and young people with disability.**

# Evidence Review

## What does it mean to keep children and young people safe?

In Australia, the abuse, neglect and mistreatment of children and young people detailed in the findings of the Royal Commission into Institutional Responses to Child Sexual Abuse (2017) resulted in the subsequent National Principles. NOCS sets out a nationally consistent approach to the safety of children and young people through the National Principles.

The approach of the federal government aligns to a child-rights approach adopted in the United Nations Convention on the Rights of the Child (UNCRC) (1989). The UNCRC is a universal, non-negotiable minimum standard for entitlements and freedoms that should be implemented by governments. The UNCRC expects that safety is more than the absence of physical and emotional harm, abuse and injury; it includes measures to prevent injury, exploitation, harm or trauma to a child or young person.

Aspects of safety enshrined in international treaties (such as UNCRC) and national policies and reports include cultural safety through ongoing connection to family, community and culture and the right to define and express one’s gender identity. The National Principles recognise the diversity of children and young people and expect that organisations will provide a safe and inclusive environment (as reflected in National Principle 4).

The Royal Commission detailed the role of community services and organisations in the lives of children and young people. Therefore, the National Principles place an expectation on staff and volunteers working with children and young people in the many sectors and activities where children and young people interact including school, sports and recreation clubs, support services and childcare centres. The intention set out in the National Principles is that protection, value and respect for the physical, mental and social wellbeing of children is instilled in practice and organisational culture.

**Perceptions of safety**

Safety, as outlined in the National Principles, is based in physical spaces in the community and in the virtual world online. In both these spaces organisations must take action to prevent, identify and respond to abuse or harm.

Research has found however that the perception of safety and requirements to feel safe may differ between adults and children and young people (Moore et al 2016; Moore 2017; Robinson 2016). Moore et al.’s (2016) online survey of 1,480 children and young people aged between 10 and 18 years of age found that children and young people felt safer simply from having adults pay attention to their concerns or worries. There is common agreement that providing opportunities for participation and including children and young people in strategies, policies and practices in organisations are positively associated with feelings of safety (Moore et al. 2015; Powell et al. 2020; Powell et al. 2021; Robinson and Graham 2021).

Similarly, the data from the consultations ran as part of this project found some distinctions between impressions and expectations of safety between young people, adults and staff from organisations, although there were many similarities.

**Youth perspective**

There was a greater emphasis on psychological safety in the youth cohort. Young people with disability connected safety to trust, feeling safer when barriers (access and attitudinal) were removed.

*‘… with CYDA and with the youth group you can just be. You’re not – your disability is not focused on. Even in person, at my youth group that I attend, it’s – we’re a bunch of youths. We’re not – it’s not focused on the disability. We’re able to be able – we’re able to represent who else we are. We’re not fighting for access. We’re not fighting for what we need constantly, so we’re actually able to express ourselves.’* – Young people with disability (2).

For young people a worker’s knowledge of disability and child safety – which includes a willingness to learn and make accommodations – supports participation. They explained that building trust takes time which, as many young people with disability expressed, does not align to the current bureaucratic model of service provision confined by market forces (Robinson and Graham 2019).

Young people with disability were particularly concerned by the failure of organisations to gain their perspective about what safety means to them. Safety, for young people, is about dignity of risk – having the right to make choices and learning from the decisions they make.

**Staff and volunteers**

Trust and promoting participation while managing risk was on the minds of participants during consultations with key organisations; however, this cohort’s focus was more orientated to practical aspects of safety in different spaces (i.e., online and access to physical space), the way some practices infringe on the rights of freedoms of an individual (e.g., abuse, restrictive practices and segregation of children and young people with disability) and broader systemic issues such as how child safety is understood and practiced.

**Views of parents and caregivers**

Parents and caregivers spoke in detail about safety through examples of unsafe practices of organisations, harmful and prejudicial treatment, the importance of collaboration and communication and building trust with a worker and organisation.

All participant groups raised a lack of recognition of intersectionality in the lives of children and young people with disability as an issue of concern.

*‘[O]ne of the biggest challenges organisations face is understanding that there are different barriers for different children with disabilities based on their cultural background or their gender’* – Disability advocacy organisations (2).

**The right to identity**

The identity of children and young people with disability intersect in different ways with categories of gender, sexuality and race. Russell et al.’s (2020) Australian study identified that gender diverse students felt less safe than their cisgender peers.

All participants spoke about the importance of taking a child rights based approach, explaining that an aspect of safety is supporting autonomy in children and young people.

There are many factors that impact upon the safety of children and young people with disability which must be recognised by organisations when implementing the National Principles. These include:

* Systemic barriers and prejudicial attitudes
* Willingness of staff to listen to the experiences of children and young people
* Building trust
* Knowledge and training of disability
* Providing children and young people the chance to be involved in decision-making on issues that relate to them and their care
* Making appropriate accommodations to support participation.

**CYDA’s work is founded on empowering children and young people with disability, and therefore we advocate for a model of safety that prioritises the voice and active participation of children and young people with disability.**

# Methods and approach

## Desk-top audit, evidence review and consultations with key stakeholders

The project used a desktop audit of child-safe resources, brief literature review and consultations with young people, parents/caregivers, and other stakeholders, to inform the development of resources that will support organisations that engage with children and young people to understand and implement the National Principles for Child Safe Organisations (National Principles) in a way that promotes and encompasses the safety of children and young people with disability.

## Inclusive participation of young people with disability

Although formal co-production and participatory research design falls outside the scope of this project, involvement of young people with disability throughout the process was used to provide a youth disability-lens which was key to ensuring an inclusive approach to the integrity of the data collection, analysis and reporting. This method aligns with:

* The Committee on the rights of people with disabilities (CRPD) in that research centres around the lived experiences of people with disability to ensure their meaningful participation (General Comment 6).
* The Convention on the Rights of the Child – the right to express their views freely in all matters affecting the child, (Article 12) and;
* The maxim of the disability community – ‘nothing about us without us’.

Seven young people with disability were engaged in the project as lived-experience experts, making a valuable contribution to key elements of the process including: providing input into the literature review; facilitation of stakeholder consultations; integrity-checking of the thematic analysis; and supporting the development of the key messages detailed in this report.

## Data collection (stakeholder consultations)

A total of 14 Stakeholder consultations (see list of stakeholders in Appendix A) were conducted between August and September 2022 to gain insights from young people with disability (n=14), parents/caregivers (n=15), and other stakeholders (n=53), about how organisations can implement the National Principles in a way that promotes and encompasses the safety of children and young people with disability. In addition to these consultations, discussions were held with stakeholder groups:

Australian and New Zealanders’ Children’s commissioners and Guardians (ANZCCG) – The project team attended the August 2022 meeting of ANZCCG committee members (n =14) with representation from all Australian states and territories, to gain their insights on the National Principles implementation. As this was the first in the series of stakeholder consultations, the data was not systematically reported, nor were direct quotes provided. Rather, the comments from the group were used to contribute to the development of subsequent stakeholder discussion guides and the shaping of the key messages.

Child Safe Sectors Leadership Group – On the invitation of the National Office for Child Safety, CYDA attended the September 2022 meeting of the Child Safe Sectors Leadership Group – a hybrid online/in-person event, to gain their insights on the National Principles implementation. As this event was in meeting format and not intended to be structured as a formal consultation, the project team did not obtain permission from participants to use their data in direct quotes. Alternatively, the comments from the group were used to contribute to the shaping of the key messages, providing an important offering to the final report.

## Young people and parent/caregiver stakeholders

Young people (aged 16-25) with disability living in Australia were invited to participate in the consultations and were recruited through CYDA’s community children and youth network. Potential participants were provided with clear, accessible information about how to take part and only interviewed with their informed consent. Consultations were co-facilitated by CYDA staff and young people with disability (who were each paid for their involvement). Facilitators included young people with disability so that participants could be interviewed by their peers. Consultations were conducted online using Zoom and were recorded with permission of the participants and transcribed verbatim for analysis.

Accessibility was a key consideration during the design and facilitation of all consultations. This included:

* Recruitment materials were written in plain language with accompanying Easy Read translations, and participants were supported to identify any access needs they required for online participation.
* Plain language research materials – including the consent form, discussion guide, information statement, agenda, and session slides – were provided in advance to allow participants time to prepare and ask questions beforehand.
* Google Slides were used to facilitate discussion during the consultations, with participants being supported to contribute verbally, type directly onto the slides, or respond in the Zoom chat according to their needs and preferences.
* Other accessible practices were used such as closed captions, rest breaks, and low-contrast slide formatting. Auslan interpreting was also available upon request.
* Due to the sensitive content of these discussions, a CYDA safety and wellbeing officer (trained in trauma-informed practice) was present during and after the consultations to support participants.

Parents and caregivers of children with disability were also invited to participate in the consultations following the same recruitment process as the young people via CYDA’s community network. The discussion guides each tailored to the different audiences – young people and parent/caregivers – are presented in Appendix B.

Co-facilitators including a young person with disability and 2 x CYDA staff consulted with 14 young people with disability and 15 parents/caregivers of young people with disability. Consultations were held using a group discussion format with the number of participants ranging from 3-9 per consultation. Participants in the study came from seven states and territories (ACT n=2, NSW n=15, QLD n= 10, SA n=1, TAS n=3, VIC n=19, and WA n=3). Gender representation in the parent / caregiver consultation skewed towards participants who were women, while a range of gender identities were represented in the young person consultations with over one-third of participants using they/them pronouns.

Data presented as direct quotes (both written and verbal) are italicised, amended for clarity where appropriate and are de-identified to ensure the confidentiality of participants. Quotes from young people are presented with the reference (Young Person). Quotes from parents/caregivers, are referenced with (Parent/Caregiver).

## Other stakeholders

Interviews with other stakeholders also sought to inform the development of resources that will support organisations that engage with children and young people to understand and implement the National Principles. Stakeholders were invited to participate in a scheduled group consultation. Those unable to attend the scheduled consultation were also offered to participate in a 1:1 interview. Four individuals attended a 1:1 interview representing organisations from the child, family and youth (n=1), NDIS provider (n=2) and disability advocacy (n=1) sectors.

The project team (together with the auspicing body, the National Office for Child Safety) identified stakeholders who provide services and supports for children and young people with disability and their parents/caregivers. Participants were purposely recruited to participate in the consultations and identified and recruited through existing CYDA networks.

A total of 53 stakeholders from 19 organisations participated in the consultations either in an individual interview or as part of a group discussion. Stakeholders included professionals from disability advocacy organisations, NDIS providers, child family and youth services, and child safety and risk assessment services. Stakeholder participants also included people with disability, young people, or parents/carers of young people with disability and provided multiple insights.

The discussion guides, each tailored to the different stakeholder groups were provided to participants prior to the consultation to allow time for preparation. Two discussion guides are presented in Appendix B as exemplars.

Direct quotes (both written and verbal) are italicised, amended for clarity where appropriate and de-identified to ensure the confidentiality of participants. Each quote is referenced with the appropriate stakeholder group (e.g., disability advocacy organisations)

## Data analysis

The consultation data was analysed thematically to identify the key messages outlined in this report. Using a deductive approach, key themes were identified prior to the analysis and based on the desktop audit of resources, relevant literature and the project aims. Data was thematically coded according to the pre-identified themes to identify:

* The safety needs of young people (and their families);
* Resources currently used to safely support children and young people as they interact with organisations and the service system; and
* To identify what additional supports were needed.

## Project outputs

* Desk-top audit is a report (provided separately) on publicly available resources on the National Principles for Child Safe Organisations (National Principles).
* Project report–this report outlines key messages and recommendations to inform the future design and development of child safety resources. CYDA strongly recommends that forthcoming resources be developed using a co-design framework.

# Findings

This section outlines the findings from the desktop audit and the consultations.

Three areas of opportunity were identified which are:

* Disability embedded in every principle
* Flexible and scalable
* Practical and implementation focused.

The findings from the consultations were analysed and organised into four key themes, under which a series of sub-themes have been identified (see Table 1).

The four key themes are set out as follows:

* Safe organisation\_Challenges
* Safe organisations\_Enablers
* National Principles\_Implementation
* Resources.

The key themes were then used to identify and inform the development of five key messages (see Table 2).

## Desktop audit of publicly available resources on the National Principles

This section provides an overview of existing, publicly available information products on the National Principles. Seventy-five resources were included in this audit from thirty-two different organisations.

These organisations can be categorised as:

* Disability advocacy and representative organisations
* Service providers
* Government initiatives
* Statutory bodies.

The resources produced by these organisations vary considerably and include PDF documents, webinars, workshops and training sessions, e-learning modules, posters, podcasts, videos, and guides for workers.

As a general trend, the most high-quality, comprehensive resources took the form of multimodal suites of resources developed by government departments or statutory bodies, and often considered multiple points of interaction within an organisation (e.g., from the needs of children and families to the needs of senior staff).

Our full report on publicly available resources includes an exploration of existing resources that serve as notable exemplars. For more information, please see *Report on publicly available resources on the National Principles for Child Safe Organisations (National Principles)* (provided separately).

**There is no one resource that has a national focus and is accessible, comprehensive, and supports staff working at organisations to understand and implement the National Principles in a way that meets the needs of children and young people with disability.**

**Gaps in the landscape**

This audit identified three main gaps or areas of opportunity for the project to respond to:

**1.** **Disability embedded in every principle.**

* Disability is seldom mentioned in resources that discuss the National Principles. Where it does appear, it is most often in connection to ‘Principle 4: Equity is upheld and diverse needs respected in policy and practice’. In explaining this principle, some resources include disability in a list of priority cohorts, or as an example. A small handful of resources provide an extended example or case study. None provided an in-depth exploration of disability (and its diversity) for individuals new to the topic.
* The small number of existing resources that focus on ‘priority cohorts’ take a siloed approach, with little if any reference to intersectional experiences.
* There are no resources that support organisations to implement every National Principle in a way that encompasses – and centres – the needs of children and young people with disability. This presents an opportunity to provide guidance to organisations on embedding disability within each principle.
* Doing so would also provide meaningful pathways for implementing Principle 4, by demonstrating what ‘upholding equity’ and ‘respecting diverse needs’ can look like beyond the abstract.

**2. Flexible and scalable.**

* Quality resources that explore disability and child safety often take the form of lengthy, jargonistic reports or documents. While valuable sources of information, they require a significant investment of time to a) consume, and b) translate into practice. They are not readily usable by casual staff, volunteers, or indeed time-poor executives and managers.
* By necessity, most existing resources seek to be applicable to as many different users as possible. There is a lack of resources that address – or are flexible to – the information and implementation needs of:
  + different types of workers (e.g., volunteers, administration, managers).
  + different types of organisations (e.g., local volunteer-led sports club, state-based non-profit, multinational corporate organisation).
* New resources could target this gap by providing varying levels and types of information that can be adapted to the needs of their audiences.

**3. Practical and implementation focused.**

* Many resources provided an overview of the National Principles, with some providing an explanation of each. However, very few resources focused on the practicalities of implementation, such as by providing templates, steps, guidelines, or case studies.
* Of those that did provide these supports, few or none:
  + focused on the National Principles specifically. For example, several practical, comprehensive resources have been developed that focus on the Victorian Child Safe Standards.
  + focused on disability. Existing resources focus on the general implementation of the National Principles, without any guidance on how to do this for children and young people with disability.
* There is a gap in the landscape for resources that detail best practice or provide guidance around the steps an organisation should take to be safe(r) for children and young people with disability.

## Themes

This section provides an overview of the key themes and sub-themes as summarised in Table 1 below. Direct quotes from the consultations are used to illustrate the specific concepts and definitions of each theme.

**Table 1 - Key Themes**

| Theme | Subtheme | Theme description |
| --- | --- | --- |
| 1. Safe organisations\_Challenges | Unique risks and barriers | Risks and challenges organisations face in being safe for children and young people with disability. |
| Knowledge and training | Knowledge and training of the diverse needs of children and young people with disability. |
| Attitudes and misconceptions | Assumptions, ignorance and prejudicial ideas. |
| Empowerment and meaningful inclusion | Including children and young people with disability in a meaningful way in design of programs, creation of policies and all practices of organisation. |
| 1. Safe organisations\_Enablers | Solutions | Specific actions to support the safety of children and young people. |
| Culture of support | Staff are supported by managers and leadership to implement Child Safe Principles. Principles embedded in culture and governance of organisation. |
| Standards for best practice | Setting standards for best practice. |
| 1. National Principles\_Implementation | Experiences | Experiences of implementing the National Child Safe Standards. |
| Consistency | Consistency in knowledge of and requirements for Child Safe Principles, e.g., state/territory or national-focused. |
| Collaboration and communication | Collaboration and communication between staff, other organisations, families and caregivers, children and young people and community. |
| 1. Resources | Access to information | Detailed resources and training available to all staff members at organisations. |
| Accessibility | Availability of resources to cater for all learning styles in accessible formats (Easy Read, Closed Captioned videos, etc). |
| Different cohorts | Resources address the needs of different cohorts (E.g., unique resource for children with intellectual disability, First Nations children with disability, etc). |
| Co-design | Resources are co-designed with children and young people with disability and families and caregivers. |

**Theme 1: Challenges**

**Challenges: unique risks and barriers**

Funding and resourcing were frequently raised as barriers to meaningful and non-tokenistic implementation. The example of a small, volunteer-run sports club was used by many participants, with one person highlighting the differences in capacity faced by small organisations, especially those in regional and remote areas and those without dedicated, paid staff:

*‘I think there’s been a misstep in how organisations actually get resourced for something as big as the National Principles...for tiny little local sports clubs, not just to be able to implement the principles but to be able to understand what it means.’* – Child safety and risk assessment.

Several participants from organisations discussed the difficulty they faced in balancing processes and practices with child safety, with even ostensibly beneficial child-safe policies creating barriers to information sharing, flexible service delivery, and accessibility. Another balancing act raised across consultation types was around dignity of risk:

*‘We actually have to allow young people and children to experience risk, so we have to find a balance here between capacity building and keeping young people safe.’* – Child safety and risk assessment.

Participants reflected on how the attitudes of well-meaning individuals could still present concerns.

*‘[There’s] this idea of, ‘Yes, but that wouldn’t happen here.’ And you can see that reflected even unconsciously in the way that we’ve written our policies or the way that we do our kind of risk management framework is that it talks about unintentional harm, but there is no acknowledgement of the fact that there is malicious kind of harm or that we are potentially attracting people who – like staff and volunteers, for example, who have a specific intention of being harmful to young people.’* – Child, family and youth services.

Inaccessibility was a significant barrier and source of risk, one that took many different forms and included – but was far from limited to – the physical environment.

*‘One of the other challenges is obviously communication, so kids with disabilities may not have verbal communication, they may not be able to understand the same literature and information that we provide, as an organisation.’* – NDIS providers, peaks and support coordinators.

There was seen to be an increased need for staff to be disability-aware, culturally safe, and trauma-informed when engaging with this cohort, with one young participant with disability describing how their feeling of safety within an organisation hinged on whether they trusted the public-facing staff member.

**Challenges: knowledge and training**

There was a strong consensus across consultations that organisations need – but very rarely receive – the right knowledge and training to work with and support children with different types of disability. Often it was parents, caregivers, or the children and young people with disability themselves who were left to fill in the gaps when organisations did not have the correct processes in place.

*‘My mum had to go in and be like, ‘okay, this is what she needs. This is how you need to do it.’ She had to train staff. Or she had to drag my OT in there for my OT to tell everybody the same stuff that my mum was telling them!’* – Young people with disability (2).

The duration of contact between child and organisation also influenced efforts and attitudes.

*‘In our experience they do not do a lot to learn about the child’s needs if they are only going to be engaged with them briefly. I think our concerns are more around emotional and psychological safety with ad hoc services (inclusion and ability to participate) and more physical safety at school e.g., bullying, medication, administration.’* – Parents and caregivers (2).

In the wake of negative experiences, many participants were faced with defensive staff and organisations, who were often unresponsive and unreceptive to feedback on their practices. It was not uncommon for organisations to dismiss the utility of training in disability and inclusion.

Several participants mentioned how organisations were faced with a shortage of skilled, trained workers. Others reflected on the dangers presented by undertrained support workers or by emergency responders who were unfamiliar with certain symptoms or behaviours. They also commented on the risks and barriers that were created when staff did not have the knowledge or training to support different communication needs.

Organisations reportedly faced significant challenges in finding information and resources needed to tangibly act on the National Principles. Many participants also highlighted the challenges of practical implementation.

*‘You need policies. But if no one’s following the policies, they’re worth nothing. Rather put your skills into the people that are working with the children.’* – Parents and caregivers (1).

**Challenges: attitudes and misconceptions**

During the consultations, several conversations explored the ways in which ignorance and prejudicial ideas towards disability led to staff members and organisations that judged or punished children and young people with disability for their symptoms and behaviours, and even for help-seeking.

*‘A lot of young First Nations children with disabilities instead of having their disabilities accommodated it’s assumed that it’s like a behavioural issue and they experience a lot of punitive treatment.’* – Advocacy organisations (2).

Participants discussed the consequences these attitudes and assumptions could have on staff practices, sharing stories of restrictive practices and segregated service delivery. Prior negative experiences created significant barriers to families engaging with organisations.

*‘The trust isn’t there. We haven’t built that foundational trust so that they know that we’re there on their side of the fence. And to disclose anything that’s difficult or hard, they are afraid that we’re going to take steps to refer in a way that will actually break them more.’* – NDIS providers, peaks and support coordinators.

Some families reported needing to navigate and plan around the ignorance of disability service providers, while young participants with disability had to educate staff on accessibility. Young people with disability were often treated as incapable and their voices were not considered.

*‘Receptionists can often be the worst as a person in a wheelchair; not looking at me, hiding behind a tall desk, talking to others, talking soft, talking as if a baby, massive emotional trauma.’* – Young people with disability (1).

Participants shared their negative experiences with staff and organisations, and with peers who bullied and excluded them. Staff could be unappreciative or unfamiliar with non-verbal forms of communication, and some held damaging preconceptions.

*‘Scared [I’ll] be ignored. [I]nvisible illness kinda situation. [P]eople don't believe me.’* – Young people with disability (2).

Deficit-based attitudes towards disability prevented some organisations from understanding the need for and potential of rights-based, inclusive practices and safeguards. Within healthcare or service settings, diagnostic overshadowing and assumptions around priorities could lead to physical and mental needs being left unaddressed.

**Challenges: empowerment and meaningful inclusion**

Participants reflected on the importance of children and young people with disability being supported to participate in organisational processes, especially when things went wrong, and on how organisations were often unequipped to do this in safe and accessible ways.

*‘A lot of the time complaints or even accountability mechanisms aren’t actually set up in a way to be pursued by children and young people with disability.’* – Advocacy organisations (2).

Organisational practices could influence whether they felt safe and supported enough to make a report when something went wrong. When it came to encouraging feelings of safety more broadly:

*‘[Organisations] often focus on more of the global or individualised ways in which we can create child safety, but sometimes it’s just as important around the environment. From the moment the child walks through the door, what language are we using? What does the environment look like? What do the signs look like on the wall? What messaging are we giving them around child safety and inclusion? That’s something tangible that I think sometimes gets left out is our physical environments and making sure that they’re inclusive and that we’re giving those messages.’* – Child, family and youth services.

Fear was identified as a reason behind practices that protected children and young people with disability at the expense of their empowerment and capacity building*.*

*‘[They should be told] ‘Yep, there’s some bad people out there, some bad things can go wrong but here, this is what you can do to navigate it, and this is what can give you the strength, and this is part of your rights’.’* – Child safety and risk assessment.

It was considered vital to support their access information and develop their capacity to self-determine and make their own decisions, and for organisations to respect these decisions.

Organisations often did not have a solid understanding of what genuine inclusion and participation meant. Many participants shared experiences of organisations refusing to make reasonable adjustments – even when they were agreed upon – or denying admittance to service dogs.

*‘Unless we can actually go and support as a parent, or have a designated caregiver, or use our NDIS funds for a support worker or a mentor, we’re having to provide that inclusiveness. Rather than what I’m seeing should actually be from the organisation, from that sporting club. And it is – it’s very, yeah, excluding in that way. Because as parents, caregivers, we’re busy.’* – Parents and caregivers (1).

Many participants were uncertain regarding the legal obligations of organisations.

**Theme 2: Enablers**

**Enablers: solutions**

There were many specific actions, strategies and processes raised by participants to increase the safety and wellbeing of children and young people with disability. Some of the tangible solutions suggested by participants include:

* Organisations employing a dedicated children’s rights officer.
* Ensuring an inclusion or wellbeing officer is available for online activities.
* Workers and volunteers to begin each session or activity explaining the processes in place to support the safety and wellbeing of their client.
* Respecting requests made for accommodations.
* Providing agendas or program details ahead of an event or activity.

One way to support participation of children and young people with disability outlined by many participants was through representation of disability. Participants suggested, for example, disability awareness speakers, visual images of disability at organisations and in the community and increasing numbers of people with disability who work at organisations. Ensuring representation in the upper echelons of an organisations was a priority for one participant:

*‘I like to suggest that organisations should have a board observer programme for under-age youths because directorship of most organisations is often open only to adults. The mere presence of under-age youths in board meetings will bring such group to the foreground of adult board members' decision-making. Indeed, it is ironic that a lot of the NGOs focusing on children do not have under-age youth on their board.’* – Young people with disability (1).

The value of feedback and an accessible complaints system was another focus of this subtheme. For one participant feedback (positive or negative) was integral to their program and was used for ongoing improvement to it and staff skills.

*‘[W]e have tried to integrate a little bit of feedback from the kids during the opening round sessions at the end of camp. So, we’ll sit together and we will sort of have a very informal debriefing around what we loved, and that’s quite a playful thing that we do. So, we do it in a setting that’s not threatening. We invite children to come and tell us any concerns privately, but trying to generate conversation around what did we love about the space we were in, what was fun, was there anything scary, did they know what to do if they were worried? So, sort of trying to integrate that as part of our normal wrap-up of a camp or activity.’* – NDIS providers, peaks and support coordinators.

These solutions improve the capacity and wellbeing of children and young people with disability and support access to vital services and participation in community activities, programs and events.

**Enablers: culture of support**

Early awareness and commitment from organisational leadership was considered vital to prevent harmful practices such as abuse, neglect, and restrictive practices. Participants discussed how processes and supports must be put into place at every level to allow organisations to implement the National Principles.

*‘We’ve just developed our child and adult safeguarding policy. Without a policy, there’s no guideline. We’ve got to have a clear policy. The policy is only helpful if we then apply it and use it and talk about it across the organisation. Once we’ve got the policy which is that framework and that base level, from there we’re now building out a toolkit of how to implement that policy... documented information so people can follow the steps clearly, they are kind of your first steps I think, in actually starting to form that child safety across an organisation.’* – NDIS providers, peaks and support coordinators.

Other suggestions included placing obligations on people who work with children and young people with disability and assigning responsibility for different key action areas under the National Principles.

One participant described the benefits of building an inclusive culture:

*‘Well, it’s also building culture, isn’t it? Culture of the organisation, around acceptance, and around even the typical people that use the organisation. The whole culture of inclusion there. Because really what you want is a community looking out for each other, whether the person has a disability or not. So, I think it’s not only giving them the information that they need to understand and be aware, but also then building the culture amongst their own team and their own users of the service.’* – Parents and caregivers (1).

Rather than relying on users to ask for what they need, another participant recommended that organisations make it clear what supports were available upfront. Organisations should also be responsive to individual needs rather than making assumptions based on cultural background or disability type.

A supportive culture could extend beyond individual organisations; one participant outlined potential ways to bridge capacity gaps, such as by having larger organisations act as a source of support or resources for small organisations.

**Enablers: standards for best practice**

Staff training and knowledge was a topic raised by most participants as a prerequisite to working with children and young people with disability. Many examples were provided of a general lack of knowledge and ignorance of marginalised communities from staff and volunteers. This gap in knowledge, as explained by participants, results in prejudicial and discriminatory treatment of culturally and gender diverse children and young people with disability.

Several participants pointed out that all staff working with children and young people should receive diversity awareness training. This participant was clear that staff should be competent in:

*‘[U]nderstanding what it means for an organisation not only to be culturally safe for First Nations people or culturally safe for trans and gender diverse people, but also what does it culturally mean to be safe for people with disabilities beyond just physical accessibility or beyond just having different sensory accommodations.’* – Advocacy organisations (2).

Many participants explained how people with lived experience of disability working at organisations was a key measure to improve the culture and practice of an organisation. This idea was prominent with young people. The youth cohort made it clear there was a connection between feeling safe and employees with lived experience of disability.

*‘Employ disabled people rather than nondisabled others. I always am safer around a disabled person than a well-meaning nondisabled person.’* – Young people with disability (1).

*‘Have young disabled people of marginalised identities actually in their organisation. It proves that they’re safe for people like me.’* – Young people with disability (1).

**Theme 3: National principles implementation**

**National principles implementation: experiences**

When asked about their experiences of implementing the National Principles, several participants detailed an account of the work involved and competing interests that hinders their successful and timely implementation.

*‘[A]ctually getting a lot of the work done - in regards to implementing the principles - has been difficult in getting people together, forming that sort of working group, and keeping that moving. So constantly driving that has been really tricky, because as soon as there’s a change to an award, or the NDIS, the focus shifts.’* - NDIS providers, peaks and support coordinators.

The National Principles expect the safety of children and young people be inherent to organisational culture. One participant spoke about the desire to ensure meaningful change to practice and to ensure this change is embedded in the fabric of an organisation. However, they noted the time that cultural change may take, especially for larger organisations.

*‘[T]he challenges are how we evolve our practice to really embed the intent of these documents in our organisational culture and make the adaptations that are required for all children and young people. I think that there is that compliance piece, and then there’s the practice piece, and I think that enduring cultural change is always most difficult in large organisations and takes time.’* - Child, family and youth services.

Another participant raised the challenge for organisations who do not have adequate knowledge of safeguarding or have safeguarding policies in place.

*‘[F]irst thing that organisations tend to make a mistake around is not having safeguarding in their structure, in their kind of governance and operational structures, so just trying to implement the principles willy nilly without working out how safeguarding actually operates and where roles and responsibilities sit around safeguarding. The principles and safeguarding itself isn’t designed to sit beside an organisation. It’s designed to be running through an organisation at every level. That doesn’t mean that every single person needs to know in detail how to do every aspect of safeguarding, but we need to have a key understanding of how it actually functions in our organisation before trying to just implement straight away. That often causes a lot of issues during the implementation phase, because there hasn’t been enough of a focus on really thinking about how organisation functions and where safeguarding fits into our organisation, particularly for those who don’t think about working with children as their core work’* – Child safety and risk assessment.

**National principles implementation: consistency**

Participants explained some of the challenges they experienced or envisaged in implementing the National Principles. These related to inconsistencies in their application, lack of regulation to ensure compliance and the variations in the National Principles at national, state and territory level.

*‘[T]here are differences in State and Federal requirements that can be difficult to navigate.’* – Advocacy organisations (1).

A participant from the parents and caregivers consultation explained how a regulator should ensure consistent adherence to the National Principles so that it does not become another responsibility that parents and caregivers take on.

*‘[W]hat I would love to see is a big stick, some sort of ombudsman, regulator, someone that can go in for us and make sure that these principles are being adhered to. So, it’s not us, the little people, the people with disabilities and their families that have to take them to task. Someone else will do it.’* – Parents and caregivers (1).

**National principles implementation: collaboration and communication**

This theme describes the importance of collaboration and communication between staff, other organisations and community leaders to share knowledge and increase skills. One participant explained that implementing the National Principles to keep children and young people safe should involve consultation with many groups including:

*‘[C]ollaborating with organisations and leaders within different communities.’* – Advocacy organisations (2).

Participants pointed out the way communicating with children and young people with disability increase safety and support safe practices.

*‘I suppose it falls down to the child’s voice. Have a policy around child’s voice, and adhering to that. Because when I do my things at work, I listen to my students’ voice. If they are tired, or if they need an adjustment at that moment, I need to act. So, organisations need to do the same thing.’* – Young people with disability (2).

**Theme 4: Resources**

**Resources: access to information**

Participants were asked about the resources that would help organisations be safe for children and young people with disability. The theme *Resources: access to information* describes participant responses about aspects of the way organisation can obtain greater access to relevant knowledge to support the safety of children and young people with disability. All participant groups (except for the youth cohort) provided responses under this theme, likely reflecting the varying degree of stakeholder expertise and capacity to comment. Whilst young people with disability are experts on their disability and the way it intersects with their life experiences, other stakeholders, such as staff and volunteers working with children and young people with disability are experts in what they need to perform their role. The workers’ experience enabled their active contribution to the discussion regarding access to resources.

Participants were keen to see resources provide examples of ‘best practice’ that may be outlined in case studies and the like. One participant highlighted how resources should aim for ongoing improvement, stating they would like to see:

*‘[A] resource that actually looks at guiding for best practice and that continual improvement element.’* – Advocacy organisations (1).

Another provided an example of a resource they found entertaining and may be useful to inform the development of resources for the National Principles.

*‘The most effective training that I’ve actually ever seen - recently, weirdly enough – is .... actually, IT security training. They are only five-minute comical kind of little skits, but they’re very, very well done. I think they’ve brought it in from America and it’s kind of the guy who does everything wrong who’s a bit of a douchebag and he kind of just – he makes stupid errors all the time. Then you have the voice of reason and then you have the person who does the right thing, and it’s just in five minutes you kind of end up with this comical little thing, but it helps to address kind of critical issues on safety and security...develop some sort of film or sorts of – that could be an interesting kind of five-minute – 12 sessions of five minutes each. You never know. I think that would have a lot of impact.’* – Child safety and risk assessment.

**Resources: accessibility**

The desire to produce resources to cater for various learning styles and languages, made accessible using a variety of formats was conveyed by many participants.

*‘Accessibility of documents and resources is important. As well as being pretty, easy to read, and including pictures to be engaging. There also needs to be text versions, and Auslan versions to ensure accessibility.’* – Advocacy organisations (2).

Many participants echoed this sentiment and came up with a variety of ways that resources may be accessible to reach various members of the community from staff and volunteers to parents/caregivers and children and young people with disability. The availability of resources that are accessible for children and young people with disability was echoed by several participants. When asked, what resources would help organisations be safe for children and young people, this participant thought about the lack of resources for their child stating what was needed are resources with:

*‘[E]asily accessible language … an easy-read guide, like a social story ... I’m sure they have lots of policies that are pages long, but I don’t think there’s an easy read.’* – Parents and caregivers (1).

**Resources: different cohorts**

Participants were asked if resources should address the needs of different cohorts of children and young people, for example who are neurodiverse, gender diverse or Indigenous Australians. This question engendered diverse reactions between participants. One participant explained the challenge to meet various needs of children and young people with disability.

*‘We’re trying to operate within meeting those multiple kind of needs, but the reality is that there's also contradictory needs. For somebody with sensory sensitivity who potentially wants a low stimulation environment versus somebody with a visual impairment who needs high contrast. How do we find a way to sort of get that middle ground, and essentially, it’s about our abilities to modify our environment and where we have dimmer switches on all of our lights and things like that.’* – Child, family and youth services.

Many participants described the way ‘disability’ became the defining factor for children and young people resulting in other intersecting identities being ignored (such as Indigeneity and gender diversity).

*‘I think you need to add to the resource about the intersectionality that does happen and occur for young people with disabilities who do relate and are a part of a LGBTQIA+ community.’* – Parent and caregivers (1).

The attention of some participants was on the lack of diversity within representations of disability itself.

*‘[I]t would be nice for the resources to acknowledge the variety of disabled experiences. when I notice some awareness raising campaigns, they sometimes only have 1 or 2 experiences, that might leave out minorities.’* – Young people with disability (2).

**Resources: co-design**

A significant issue raised by many participants was the importance of co-designing the resources with children and young people with disability. One participant acknowledged that because genuine co-design takes time and can add to the length of a project, it is not always the preferred option.

*‘I think people are very fast to rush in with ideas and be, ‘We want resources, blah, blah.’ For those with disabilities, but generally putting in the work, people view certain disabilities on a burden or for example, it takes too long. So, they want to create resources that address diversity and stuff, but they won't actually implement for example, getting someone to relay the opinion of a person with disability. So, putting actual care and time into it, rather than just wanting to get the resources done really fast, if that makes sense.’* – Young people with disability (1).

One participant succinctly communicated the need for representation of children and young people with disability when developing the resources stating:

*‘Nothing about us, without us.’* – Young people with disability (2).

# Key Messages

This section outlines recommendations made from the findings of the consultations and the desktop audit. The recommendations are organised into ‘key messages’ as outlined in Table 2 below.

**Table 2 - Key Messages**

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| Key Messages |
| 1. Organisational culture: knowledge and attitudes towards disability |
| 1. Organisational culture: safety |
| 1. Organisational culture: inclusion |
| 1. Systems, practices, processes and governance |
| 1. Accommodating smaller and medium-sized organisations |

Each key message describes a specific area – identified from analysing the data from the consultations – that must be addressed in the resources to support successful implementation of the National Principles.

The five key messages are set out as follows:

* A general overview of the key message
* Detailed explanation of the key message drawing on evidence from the consultations
* Aim of resources
* Ideas for resources based on the evidence from the consultations and exemplars and best practice identified from the desktop audit
* Content suggestions in light of the data from the consultations.

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| Resource development guidelines |
| 1. CYDA strongly recommends that a co-design framework is used to inform the design and development of child safety resources. All stages of project development should share decision-making power with those most affected by the issue – staff and volunteers at organisations working with children and young people and children and young people with disability – to incorporate their needs and lived experience. 2. Each of the key messages should be fully read to understand the areas that must be addressed. CYDA recommends that all key messages are actioned to support organisations that engage with children and young people to understand and implement the National Principles in a way that promotes and encompasses the safety of children and young people with disability. 3. Any future designer of child safety resources should incorporate the key messages and participants’ experiences of the National Principles and child safety as outlined in the data from consultations presented in this report. |

## Key Message 1 - Organisational culture: knowledge and attitudes towards disability

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| **Overview**: There is a gap in knowledge of disability and a pattern of prejudicial and harmful attitudes towards disability that must be addressed in the resources. These issues become embedded in the culture of an organisation and are difficult to shift. |

**Evidence from consultations**

The first key message identifies inconsistency in the training, skills and knowledge of staff and volunteers working with children and young people with disability. Participants raised concerns over:

* A general lack of knowledge of disability amongst workers and volunteers and an overall lack of knowledge of different disability types
* Staff and volunteers failing to meet the communication needs of children and young people with disability
* Staff and volunteers being unable to meet access needs or support participation for children and young people with disability
* Punitive responses used for behaviours of children and young people with disability
* Harmful attitudes towards disability
* Prejudicial treatment of children and young people disability
* Problematic attitudes, behaviours and practices are often embedded in the culture of an organisation.

All participant groups emphasised the need for all staff and volunteers working with children and young people to have a minimum standard of training on disability. One area of concern for the Child Safety and Risk Assessment cohort were service providers who may not regularly work with children and young people with disability.

*‘Organisations that don’t have work with children with a disability as their core business, I still think that they struggle with understanding what disability actually is and how it presents, and again, it’s all of the ideas of like it fits into this particular box and all we have to worry about is ramps, is consistent with organisations that work with a wide range of children and young people. So, I think resources on understanding disability as a starting point I think is still really important for a lot of organisations. And then being able to translate that into the way that they work with the children that they work with.’* – Child Safety and Risk Assessment.

The result of limited knowledge about disability may hinder service provision or may result in prejudicial or problematic assumptions from the worker.

*‘If somebody has neurodiversity, for example, ADHD, their ability to quickly transfer knowledge learnt in therapy to other environments, is impaired. We know this is the case. There’s lots of information and research that says that, but I think if a clinician, for example, or a service is not aware of that, then the assumption can be that they are not motivated, for example, or they’re not suitable for counselling.’* – Child, family and youth services.

The various ways that the participation of children and young people may be impacted was outlined in different ways by the participants. Young people with disability had a lot to say about the impact of harmful attitudes about disability on their ability to participate. During youth consultations one participant explained how their service dog not only supported participation but helped them to navigate the physical space and keep them safe. Section 9 of the *Disability Discrimination Act 1992* (DDA) (Cwth) makes provision for people with disability to be supported by ‘assistance animals’. The young person expressed concern when staff are not aware of their legal obligation as set out in the DDA or do not understand how the service dog was a necessity for them:

*‘Organisations not letting in service dogs is extremely dangerous in many ways.’* – Young people with disability (1).

For one young person, inadequate knowledge of disability and a lack of capability in school staff resulted in their parents being asked to provide ‘support’ at school camps. The young person explained how they wanted to enjoy the school excursion the same way as their peers which included getting up to ‘mischief’.

*‘I mean even school parents they were asking, ‘oh, do you want to come with [child’s name]?’ I’m like, ‘No, I don’t want my parents on school camp’. I want to get up to mischief. I don’t want to have my mum and dad there. But like why do I need my mum when they should cover that sort of thing. In certain disability camps there’s some independence or even certain freedom so me and my brother – we’ve got the same disability – we loved camp. We got up to lots of mischief on camps.’* – Young people with disability (2).

Participation could also be hindered by staff and volunteers failing to adequately support a child or young person’s communication needs. This was expressed by a parent/caregiver who highlighted how attempts to communicate may be ignored or even worse punished as a ‘behavioural issue’:

*‘I think one of the biggest things for us is understanding that behaviour is a form of communication. So, I guess, drawing from Ross Greene’s CPS model has helped us a lot and helped with my children’s safety. Because when we worked out why they behaved in a certain manner and what that underlying thing is and that need for my child has been met, it means that my children have been able to be successful within that service.’* – Parents and caregivers (1).

A worker’s inability to communicate with a child or young person with disability was related to increased vulnerability. When asked, ‘what are the unique risks and challenges faced by children and young people with disability when engaging with organisations?’, one participant pointed out:

*‘Communication … how do children communicate, whether their consent or their assent for different things? How do they let us know that this is not okay or, ‘I’m not happy’, especially when they do have different ways of communicating. And things like children are informed about their rights, communicating that to young children.’* – NDIS providers, peaks and support coordinators.

The issues outlined above become embedded in the culture of an organisation and are reflected in processes, practices and attitudes towards disability.

**Aim of resources:**

To address this key message the resources should aim to build knowledge of disability and provide practical strategies to embed a positive culture towards disability in all staff at organisations (from CEOs to volunteers). The resources should:

* Explain the importance of learning from children and young people with disability, and their parents/caregivers
* Help organisations create an environment that supports the participation of children and young people with disability
* Challenge prejudicial or harmful attitudes towards disability
* Provide examples of positive practice that staff and volunteers can employ
* Build skills and knowledge in all staff
* Provide links to further resources, information and support.

The resources should aim to embed a positive culture towards disability in all organisations (which includes community clubs and associations).

**Ideas for resources:**

Young people with disability have lived expertise and lived experience of disability, while staff and volunteers who work with them are experts in the requirements needed to perform their role. The ideas that emerged from consultations with these groups, in combination, inform the recommendations below.

Recommended formats for the resources include:

* Basic tips or a ‘disability 101’ to upskill a worker or volunteer with no training or experience of disability
* Practical examples or exemplars of best practice when working with children and young people with disability
* Guide for staff and volunteers explaining how to support the participation of children and young people with disability by providing an overview of common accessibility requirements and explain their obligations under Australian discrimination law
* Case studies in Easy Read and other accessible formats that illustrate the ways to positively change organisational culture to become more supportive of disability
* Toolkits to provide key information about disability for staff working with children and young people with disability, including different communication methods and common access needs
* Checklists that provide steps for organisations to take that support them to meet the requirements of the National Principles
* Templates which may be used as a starting point in understanding and implementing key aspects of the National Principles as they relate to children and young people with disability
* Videos with closed captions and Auslan interpretation that showcase the perspectives, opinions, and experiences of children and young people with disability to challenge assumptions and stereotypes
* Staff training videos that draw on lived experience of disability through the voices of children and young people with disability
* E-learning modules that staff can work through at their own pace (which can encompass many of the above points)
* Posters which include visual representation of disability.

These resources must be accessible to a wide audience. It is recommended that they are made available in a variety of formats such as audio, video (including Auslan interpretation), word documents, PDFs, plain language and Easy Read.

Participants required resources that address the current gap in knowledge and existing resources. Practical advice and information should help staff and volunteers connect the National Principles to practice.

The resources should be detailed enough to provide the essential information identified in the consultations as outlined in this key message. A series of resources rather than one resource may therefore be more suitable to achieve this aim.

Notable examples from the desktop audit that could be used as a template for the development of resources are the Australasian Disability Professionals’ [A Worker’s Guide to Safe-guarding People Living with Disability from Abuse](https://www.shinesa.org.au/media/2015/04/SafeguardingPeopleLivingwithDisabilityfromAbuse.pdf) and the Australian Human Rights Commission’s [e-learning modules](https://childsafe.humanrights.gov.au/learning-hub/e-learning-modules).

**Content suggestions:**

The key message ‘Organisational culture: knowledge and attitudes towards disability’ has been developed from participants accounts detailed during the consultations. With these participant experiences in mind, CYDA recommends content for resources that support the:

1. Participation of children and young people with disability

This includes:

* Educating staff and volunteers about different disability types including visible versus invisible (or hidden) disability, dynamic versus static disability, as well as broad categories of disability
* Supporting workers to understand the social and the cultural models of disability, and the limitations of only viewing disability through medical model
* Helping staff to understand some of the barriers to participation – covering different domains such as physical environment, social-emotional and communication – and how to remove them
* Creating awareness of participation requirements for children and young people with disability, including training staff on common access needs, their legal obligation to make reasonable adjustments and how to implement them
* Training staff on how to support different sensory needs
* A checklist of questions that staff and volunteers may use to find out about the child or young person as an individual such as:
  + What are their likes and dislikes?
  + What are their access needs?
  + How can the organisation or service provider support the child or young person?
* Providing materials to support the representation of people with disability in resources and all aspects of an organisation.

1. Communication with children and young people with disability

This includes:

* Creating awareness and providing information for staff to engage with and use different communication methods, i.e., verbal, Auslan, Braille, AAC (low tech or high tech eg. communication devices), utilising chat function in digital spaces, gesturing
* Helping staff to understand behaviours as a method of communication
* Outlining how safety issues may result from staff being unable to communicate with children and young people with disability and the importance and dangers of not enabling communication between a child or young person with disability and staff
* Establishing positive ways staff can de-escalate or calm a child or young person or redirect behaviours.

1. Prioritisation of the lived experience of children and young people with disability

This includes:

* Encourage staff to learn more deeply on disability topics by engaging with the lived experience of children and young people with disability
* Helping staff and volunteers translate knowledge gained from children and young people with disability into practice.

1. Establishment of a positive culture towards disability in organisations

This includes:

* Educating staff on the impact of harmful attitudes and prejudicial treatment of children and young people with disability (e.g., the use of restrictive practices)
* Setting practical steps and responsibilities that CEOs, managers, supervisors, permanent and casual staff and volunteers should take to contribute to cultural change in an organisation.

1. Development of additional skills in staff and volunteers by providing links to further resources and information.

## Key Message 2 - Organisational culture: safety

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| Overview: The National Principles have been developed to keep children and young people safe. Yet, some organisations do not adequately support children and young people with disability or fully understand what it means to keep them safe. This key message describes aspects of safety relevant to children and young people with disability, including the importance of building trust, supporting self-care and attending to medical tasks and emergency planning. |

**Evidence from consultations**

The second key message ‘Organisational culture: safety’details the aspects of safety that staff and volunteers must be aware of to support children and young people with disability, which include:

* + Physical, emotional and social safety
  + Building respect for bodily autonomy
  + Cultural safety
  + Building trust as a prerequisite to safety
  + Supporting self-care tasks and medical tasks of particular importance for children with disability, e.g., medication, feeding
  + Protecting children and young people from harm and abuse
  + Allowing children and young people to experience risk (dignity of risk)
  + Understanding restrictive practices or interventions as an infringement of rights
  + Having a clear and accessible complaints process
  + Supporting access to physical spaces
  + Safety in online spaces
  + Emergency planning and preparation.

When it comes to children and young people with disability, there are added dimensions to safety. During the consultations, a member of the youth cohort detailed the way in which the physical space itself could present a threat to their safety. In this instance, the failure of the organisation to make suitable accommodations raised concerns for the participant.

*‘For me over COVID, as an immunocompromised and disabled person, having things in person was a really big sign that an organisation wasn’t safe for me, and being unwilling to make accommodations so that I could access events and programs online, which I still need. I got COVID a couple of months ago and have been so disabled from it that I can barely leave my house, so I still need that. So, I think for me being willing to do things online makes spaces a lot safer for me as a disabled person.’* – Young people with disability (1).

Another aspect of safety prominent in discussion with young people with disability and advocacy organisations was the interrelationship between dignity of risk and safety. All activities, actions and events contain some element of risk. As one participant pointed out, supporting the autonomy of children and young people and arming them with appropriate tools to self-advocate helped them to take greater control in participation and, ultimately, have greater control over their safety.

*‘And often by increasing independence and participation and enabling people with more autonomy and to have their say, and to train them in self-advocacy is actually protecting them because it’s informing them about their rights, it’s making sure they have a say, that they’re able to report, that they’re able to complain. As much as there are some scenarios where that’s a relevant analysis, I think we sometimes fall into that trap of being like, ‘Oh well we just need to find the perfect balance’ when really sometimes increased independence, increased dignity, autonomy, participation is actually keeping people safe, it’s not putting them at risk or putting them in jeopardy.’* – Advocacy organisations (2).

Building trust is a vital aspect to safety that was expressed by all participant groups. Young people with disability, parents and caregivers and advocacy organisations lamented over the tension between the time taken to build trust and the profit-driven framing of service provision. Building trust is an ongoing process that each staff member must continue to work on.

*‘[T]here might be a really great staff member or a really great set of facilitators, but if there are other people running them, or if they’re contracted to run something then the things that they do to uphold safety and make me feel safe are less good. So, I think consistency is definitely a really big one because sometimes if a person that I trust isn’t running something or leading something then I do feel less safe, even if I trust the organisation overall.’* – Young people with disability (1).

Cultural safety was another aspect that organisations must take into account. One participant succinctly explained how safety is connected to broader systemic issues.

*‘I think a big one when you’re talking about safety is cultural safety, so not just like being safe for a disabled person by being physically safe, but what does that mean if your understanding of disability in institutions is different because you’re a migrant or refugee? And then I think another layer as well is being trauma-informed because something isn’t safe unless it understands that institutions inherently contribute to my oppression, and that they need to work around that and with that.’* – Young people with disability (1).

The use of restrictive practices was raised during several consultations and was a prominent issue that concerned staff from advocacy organisations. To prevent the use of restrictive practices, one participant recommended:

*‘Having some kind of framework or as you say, crisis prevention prior to that point [point where restrictive practices engaged].’* – Advocacy organisations (1).

The consultations highlighted differing perceptions of safety between young people, staff at organisations and parents and caregivers (as identified in the ‘Evidence review’ of this report). An important difference that should be taken into account when producing resources is the voice of youth who expressed how seeing themselves represented at an organisation, for example through staff members with disability or on posters, brochures, signage or other visual representation, made them feel safer.

**Aim of resources:**

In response to this key message the resources should aim to:

* Help organisations understand the dimensions to safety
* Detail elements of safety related to children and young people with disability
* Explain cultural safety
* Describe the interrelationship between trust and safety
* Provide practical advice for organisations to implement in practice
* Support organisations to develop a framework for safety (e.g., trauma informed)
* Set out what children and young people with disability should expect from organisations
* Help children, young people and parents/caregivers know their rights
* Be transparent with complaints processes, take all concerns seriously and act on them in a timely manner
* Represent the needs of children and young people with disability through visual representation and prioritise the voice and experiences of this cohort
* Outline complaints process.

New staff and volunteers should have access to this information as part of an organisation’s onboarding process for new recruits.

**Ideas for resources:**

Ideas for resources are based on the data collected from the consultations. All cohort groups provided relevant contributions that form the basis of these recommendations which include providing:

* Case studies connecting the National Principles to human rights policies and protocols to help staff and volunteers to understand safety from a rights perspective
* Toolkits developed to help organisations write and embed child safe policies in every aspect of their work with children and young people with disability
* Checklists with a series of prompt questions to help an organisation be child safe
* Practical examples or exemplars contrasting safe and harmful practices
* Templates that can be used to start conversations with teams or individual staff members around what their role is in engaging with children and young people with disability to support client safety, to encourage reflection and improvement on practice
* Animated videos to educate children and young people about what they can expect from an organisation and who they should approach if they have safety concerns
* Training videos for staff where children and young people with disability explain what safety means to them with positive examples of safeguarding
* Accessible documents (such as a poster) for children and young people with disability outlining their rights
* E-learning modules that train staff and volunteers on some of the practical elements of safety.
* Staff training modules about online safety with accompanying checklist of what to look out for when working with participants online
* Social stories to teach children and young people with disability the importance of feeling safe and how to speak up if they do not feel safe
* Brochure that encourages feedback and explains the complaints process to parents and caregivers and children and young people with disability
* Posters displayed in organisations which outline what children and young people should expect from staff to keep them safe, including visual representation of disability.

The resources should help staff and volunteers to understand safety in a practical way as well as some of the systemic barriers that may impact the safety of children and young people with disability. To this end, resources should aim to empower and build capacity in children and young people with disability.

Resources should be targeted to CEOs, managers, supervisors, permanent staff, casuals and volunteers who all play a role in keeping children and young people with disability safe, along with parents and caregivers and children and young people.

It is therefore recommended that a variety of resources – which include content targeted to different user groups in various formats – be provided.

Notable examples of best practice from the desktop audit include the National Office for Child Safety’s [Speak Up and Make a Complaint](https://www.childsafety.gov.au/resources/speak-up-make-complaint), the Western Australia Commissioner for Children and Young People’s [Engaging with Aboriginal Children and Young People Toolkit](https://www.ccyp.wa.gov.au/our-work/resources/aboriginal-and-torres-strait-islander-children-and-young-people/engaging-with-aboriginal-children-and-young-people-toolkit/) and the Commission for Children and Young People’s [Short Guide to Child Safe Standards](https://ccyp.vic.gov.au/assets/resources/New-CSS/Short-guide-to-the-Child-Safe-Standards.pdf).

**Content suggestions:**

Content for resources that achieves the key message ‘Organisational culture: safety’ should address the following areas as identified from the consultations:

(a) Dimensions of safety

This includes:

* Explaining the many elements to safety in the context of disability
* Practical tips for organisations to practice safety including the positive recognition of culture
* Helping organisations develop an approach to safety (e.g., trauma-informed)
* Explaining the importance of cultural safety (e.g., to overcome racism and prejudice)
* Explaining the relationship between intersectionality and safety (e.g., using correct pronouns)
* Explaining the interrelationship between safety and risk (dignity of risk)
* Informing clients and staff of complaints procedures and processes
* Ensuring rights are at forefront of an organisation’s policies and practice
* Clearly outlining rights protocols, frameworks and legislation for children and young people and parents and caregivers.

(b) Trust and safety

This includes:

* Detailing the importance of building trust with a client
* Providing time to develop a relationship of trust
* Allowing the child or young person to be an active participant in this process by expressing their likes, dislikes, goals and needs.

(c) Safety as representation and participation

This includes:

* Ensuring children and young people with disability are represented in an organisation
* Offering alternatives to physical space (online)
* Empowering children and young people to advocate for themselves
* Avoiding paternalistic approaches to prevention.

## Key Message 3 - Organisational culture: inclusion

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| **Overview**: This key message details what it actually means for an organisation to be inclusive; involving children and young people with disability in the development processes and practices of an organisation. The identity of a child or young person with disability may intersect categories of gender, sexuality, race and culture. The resources must promote meaningful inclusion based on respecting and responding to this intersectionality (in all aspects of the organisation) rather than exclusively focusing on their disability. |

**Evidence from consultations**

The key message ‘Organisational culture: inclusion’ outlines the ways an organisations’ policies and procedures, along with the attitudes and actions of individual workers and volunteers, can support or pose challenges to the meaningful inclusion of children and young people with disability. Some of the key issues participants raised in relation to inclusion include:

* The difference between promoting ideas of diversity, equity and inclusion, and achieving meaningful inclusion
* ‘Disability’ understood in terms of impairment rather than a series of systemic barriers, demeaning attitudes and social exclusion (medical model of disability versus social model of disability)
* ‘Inclusion’ should not be the role of one or a few individual staff members
* Attempts to change the culture of an organisation must address systems and processes that stereotype, stigmatise and discriminate
* Inclusion is about welcoming and valuing all members of the community and begins with the CEO, president or leader of an organisation or community group
* Organisations, community groups and associations must promote inclusion from the initial recruitment of staff members and should provide ongoing training
* Workers and volunteers lack an understanding of how multiple identities can intersect with disability (such as gender, sexuality, and culture).

During the consultation with the NDIS cohort, a participant stated that they believed the biggest challenge for organisations is in relation to inclusion and participation, and in understanding ‘what it actually means’. The tension rested on ‘tokenistic’ inclusion. They expressed this concern in relation to achieving meaningful inclusion based on:

*‘Active involvement of a child with a disability for the purpose of - like, in an activity of their choosing, that grows their relationships and connection to community. So, it’s really one of the challenges is true inclusion.’* – NDIS providers, peaks and support coordinators.

What was apparent was that the identity of children and young people with disability was often framed in terms of their disability, rather than the many aspects of their individuality. The concern outlined by one participant is that other health needs might become secondary.

*‘I think that people assume that people with disabilities or young people with disabilities, I guess, their ‘disability’ is their primary need rather than acknowledging their mental health and their psychological and emotional needs may be equally if not more, of a priority for that young person, so it becomes less of a focus’.* – Child, family and youth services.

This sentiment was echoed by a young person who pointed out how support for mental health issues may not be forthcoming if the focus is on disability:

*‘Some organisations don’t focus on the individual, rather they concentrate on their disability. This makes it difficult to be supported with, for example, mental health issues.’* – Young people with disability (2).

The National Principles for Child Safe Organisations aim to ensure that the wellbeing of all children and young people is embedded in all aspects of an organisation. To do this there may be times where considerations of a child or young person’s disability are prioritised to ensure their safety. However, the other elements of a child or young person’s identity should never be ignored or subjugated.

The ways that culture plays an important role in an individual's life and experiences was reinforced during the consultations. Advocacy groups and young people spoke candidly about the need to honour cultural diversity and support connection to cultural identity, especially for First Nations children and young people with disability.

*‘[E]nsuring that kids’ connection to culture and family is maintained, and that’s integrated within organisations, and that there isn’t a huge barrier between organisations, children and their communities ... allowing opportunities for community to interact with and be a part of the organisation, whether that be through governance, is really important as well.’* – Advocacy organisations (2).

A general frustration existed over staff and volunteers not having the knowledge or skills to respectfully engage with transgender and gender diverse young people with disability. Parents and caregivers and youth cohorts gave various examples of the harm misgendering caused, especially when this intersected with other forms of marginality.

*‘[N]ot being cisgender, which can be really difficult to explain, especially in a therapy environment where you’re already discussing issues and then you have to go back and explain the background as well.’* – Children and young people with disability (2).

Prejudicial and harmful attitudes that become embedded in the culture of the organisation can hinder inclusive practices from being achieved.

*‘[H]aving children being able to participate on an equal basis as all children … when engaging with organisations, there may be attitudes, discrimination, in being able to actually participate in some of these activities, and that comes back to that education/understanding of what inclusion is and how to support true inclusion.’* – NDIS providers, peaks and support coordinators.

When organisations fail to be inclusive, children and young people with disability and their families are left isolated and disconnected from their community.

*‘[W]e’re pretty isolated, because of the fact that there are these barriers where clubs aren’t inclusive. And so, we don’t belong to any clubs, actually. No swimming club, no soccer club, no footie club, no club. Because my child has got complex communication needs and he also has challenging behaviour, and so teamwork, even when he’s fully regulated, would be tricky for him. And so, we’re totally excluded. It’s like we’re not even a citizen in our local community.’* – Parents and caregivers (1).

Taking a child-centred approach that focuses on the individual was offered as a positive way to support inclusion. Participants prioritised a shift away from the medical model of disability to the social model of disability when discussing solutions. The social model of disability points out the way that social systems and structures create barriers that discriminate against and exclude people with disability from the community.

*‘[O]ne of the biggest challenges organisations face is understanding the social and the cultural model of disability rather than viewing disability through a medical model, and understanding that there are different barriers for different children with disabilities based on their cultural background or their gender’.* – Advocacy organisations (2).

**Aim of resources:**

The resources should aim to:

* + Help organisations implement positive cultural change
  + Define and provide examples of meaningful inclusion
  + Describe the positive benefits of a focus on identify along with some of its limitations
  + Provide basic information about identity and intersectionality
  + Explain and provide examples of cultural inclusion
  + Identify ways that inclusion can be implemented in policy and practice
  + Prioritise the voices of children and young people with disability
  + Promote pride in disability
  + Address the gap in resources for and about the LGBTQIA+ community.

**Ideas for resources:**

Recommendations for resources are based on consultation evidence. They include*:*

* Case studies with examples of practices that do and do not promote inclusion
* Toolkits developed with information on diverse cohort groups (e.g., First Nations and LGBTQIA+ communities)
* Checklists with a series of prompt questions to support staff and volunteers to reflect on their attitudes and actions
* Templates that describe the steps that an organisation and individual worker must take to ensure their service is inclusive
* Staff training videos that show positive examples of workers in their daily interactions with children and young people with disability
* Series of e-learning modules to train staff on some of the practical elements and ways to practice inclusion
* Posters displayed in organisations which include visual representation of disability.

The resources should provide clear guidelines on inclusion and the steps that should be taken to ensure that an organisation is inclusive for children and young people with disability*.*

All staff members (CEOs, managers, supervisors, permanent and casual) and volunteers should be targeted for these resources as they all have a role in keeping children and young people with disability safe. Resources should also be provided for parents and caregivers and children and young people with disability.

It is recommended that a variety of resources be provided, which include content targeted to different user groups in a variety of formats.

A notable example from the desktop audit that could be used as inspiration for the development of resources is SNAICC’s [Keeping our Kids Safe: Cultural Safety and the National Principles for Child Safe Organisations](https://www.snaicc.org.au/policy-and-research/child-safety-and-wellbeing/keeping-our-kids-safe/).

**Content suggestions:**

The key message ‘Organisational culture: inclusion’has been developed from participants accounts detailed during the consultations. With these participant experiences in mind, CYDA recommends content for resources that support the:

1. Promotion of inclusive practices when working with children and young people with disability

This includes:

* Educating staff and volunteers about inclusion
* Teaching staff how attitudes and systemic barriers can hinder inclusion
* Offering a range of support materials to educate staff and volunteers on intersectionality
* Ensuring that a culture of inclusiveness is embedded in the culture of an organisation.

1. Prioritisation of the lived experience of children and young people with disability

This includes:

* Upskilling staff on meaningful inclusion by connecting them to the lived experience of children and young people with disability
* Helping staff and volunteers translate this new knowledge into their practice.

1. Development of additional skills in staff and volunteers by providing links to further resources and information.

## Key Message 4 – Systems, practices, processes and governance

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| **Overview**: There are many aspects to the key message systems, practices, processes and governance, which includes the need for greater regulation of organisations to implement the National Principles, transparency of complaints processes, systems to support the sharing of client information, and stringent recruitment practices to ensure that the safety of children and young people with disability is prioritised. |

**Evidence from consultations**

Participants detailed various concerns with systems, practices, processes and governance. These related to:

* Accountability and regulation of organisations and individual staff members
* Siloing of practitioners
* Complaints processes
* Recruitment processes
* Funding constraints
* Allocation of responsibility for CEOs, managers, workers and volunteers
* Additional time and administrative work required to implement the National Principles in a meaningful way
* Access to resources and training
* Consistent implementation of the National Principles in all organisations.

Many participants raised concerns over the lack of accountability for organisations and service providers – some used very frequently by children and young people with disability – to implement the National Principles. A participant from the child safety and risk assessment group described how safeguarding work is expected to be absorbed by staff, rather than additional time being allocated to perform this role. The result, they feared, was that ‘people get crushed by taking on the additional work’. The potential for the National Principles to be seen as a ‘burden’ or extra work was a common theme in many of the consultations.

There was a general consensus that training should be mandatory for anyone who works with children and young people with disability, and not on an opt-in or user-pays basis. The capacity to access funding for services directly relating to safety (such as transportation) was raised in relation to a child or young person’s NDIS package:

*‘[T]he resourcing in terms of funding needs to be carefully considered there. So, what kind of funding say through NDIS packages is being made available for those organisations to actually provide safe spaces, safe transportation, et cetera?’* – Child safety and risk assessment.

A detailed picture was provided of participants’ expectations of governance procedures in respect to child safety and the way it should be embedded in every aspect of an organisation. Setting an expectation that leadership will come from the top to support safeguarding was one way to achieve this.

*‘[W]e need to have some of the CEOs of the really big child protection, child and family services around the table, because they’re actually the ones that are going to need to do the work within their own organisations.’* – Advocacy orgs (2).

The resources produced through this project have the potential to help organisations establish roles and responsibilities for staff members, outlining the expectations of each role as set out in the *Keeping Our Kids Safe* resource.

*‘One thing that the Keeping our Kids Safe Report does really well is that within each of the principles, it goes into kind of the action areas and the indicators, but then it breaks down – I’m not sure whether you’ve read it – but it breaks it down into like, ‘What does this mean for the executive leadership team?’ Or, ‘What does this mean for me as a middle management?’ ‘What does this mean for me as a clinician or as a client facing staff member?’* – Child, family and youth services.

The consultations detailed the need for child safety to be embedded in organisational recruitment processes.

*‘[F]rom an organisational perspective, they are the ones that meet any potential employee or volunteer first. Making sure that they understand that that’s side of their work and the legislation and the principles, adding in those levels of safeguarding questions regarding vulnerable adults and children into referee checks, into interview checks, ensuring that all our potential staff and employees have read and understood our child and adult safeguarding policy, all those sorts of things. Working with that team to really build their understanding of what’s changed and what needs to become part of their normal process now.’* – NDIS providers, peaks and support coordinators.

There was agreement among participants that implementing the National Principles in a meaningful way would take time and incur a financial cost.

*‘[A] challenge I’ve seen systemically in organisations in trying to implement organisational policy or operational elements to support child safety has been lack of funding to actually be able to implement that in an effective way.’* – Advocacy organisations (1).

To meet the philosophy of the National Principles, the voice and experience of children and young people must be at the forefront of policy and practice.

*‘[A]nother challenge is resourcing the changes that the Principles ask of us. For example, centering child and youth voice is big and important job, and needs skilled people to be leading that work otherwise it can be token and harmful.’* – Child, family and youth services.

In response to being asked about the challenges organisations face in being safe for children and young people with disability, participants from advocacy organisations and child, family and youth services reflected that ‘siloing’ of information and services was a major barrier.

*‘[T]he piecemeal impact of various agencies and organisations in a child’s life, so that kind of siloing ... lack of continuity or even understanding between these’.* – Advocacy organisations (1).

The frustration in accessing vital information about a young person was expressed by this participant:

*‘It’s really tricky to gain information, and I think each aspect of it works quite siloed. I understand there is obviously rules and regulations around clinical documentation and sharing and things like that, but I find that that is the hardest part of keeping children and young people safe, is that the lack of information and lack of communication between the key stakeholders is missing.’* – Child, family and youth services.

Sharing of information should not occur without the consent of the young person or their parent or caregiver.

**Aim of resources:**

It is expected that the resources should aim to strengthen existing governance processes and protocols to positively impact practice. The resources should aim to:

* Help organisations establish roles and responsibilities for staff members and volunteers to ensure the safety of children and young people with disability
* Outline the importance of complaints processes to an organisation
* Establish recruitment processes that are mindful of child-safe practices
* Provide free and accessible resources to all staff and volunteers
* Provide relevant information for children and young people and their families on how to make a complaint and what they can expect.

**Ideas for resources:**

Ideas for resources are based on the data collected from the consultations. All cohort groups provided relevant contributions that form the basis of these recommendations, which include:

* Webinar with detailed explanations of the process of recruitment drawing from the experience of managers and new staff members
* Checklists which outline key responsibilities for all staff members and volunteers from CEO and managers to casual staff members
* Checklists or guidelines that serve to ensure proper recruitment processes are followed which include referee checks, interview checks, and ensuring new recruits have read and understood relevant safeguarding policies
* Templates that detail elements of the National Principles that are to be implemented in the organisational culture and practices, which can be used as a resource for managers and supervisors to build the capacity of all team members and can be responsive to different organisational contexts
* Videos for new staff members and volunteers that explain key elements of the National Principles from the perspective of children and young people with disability
* Accessible documents (such as a poster) that outline the key steps and considerations in recruiting new staff members.

A notable example from the desktop audit that could be used as a template for the development of resources is SNAICC’s [Keeping our Kids Safe: Cultural Safety and the National Principles for Child Safe Organisations](https://www.snaicc.org.au/policy-and-research/child-safety-and-wellbeing/keeping-our-kids-safe/) which sets out roles and responsibilities for staff at an organisation. Another is the Commission for Children and Young People’s [Practical Guide to Choosing, Supervising and Developing Suitable Staff and Volunteers](https://ccyp.vic.gov.au/resources/child-safe-standards/#TOC-9) guide to help organisations recruit suitable staff and volunteers.

**Content suggestions:**

The following recommendations for content for this key message are based on data collected from the consultations. CYDA recommends content for resources that support:

1. Recruitment processes

This includes:

* Supporting management and leadership to recruit staff and volunteers who champion safe practices for children and young people with disability
* Teaching management and leadership staff how to onboard staff and volunteers with a mind to child safety, including the training a new recruit must complete and the skills they must obtain.

1. Outlining key roles and responsibilities for staff members

This includes:

* A detailed account of the expectations and responsibilities of each staff member and volunteer with relation to the safety of children and young people with disability
* Key steps that each staff member should take to complete these tasks.

## Key Message 5 – Accommodating smaller and medium-sized organisations

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| **Overview:** This key message outlines barriers specific to smaller and medium-sized organisations, sporting clubs and community groups who work with children and young people with disability. Smaller and medium-sized organisations must have access to the array of resources to implement the National Principles available to larger organisations that are relevant to their setting and dependence on casual and volunteer workers. |

**Evidence from consultations**

All participant groups raised the impact that implementing the National Principles can have on smaller to medium-sized organisations as an issue requiring attention. Participants were concerned that some of the challenges faced by small and medium-sized organisations would hinder their capacity to keep children and young people with disability safe. The issues raised by participants include:

* Funding constraints specific to small and medium-sized organisations and community groups to adequately train their staff in implementing the National Principles
* Small and medium-sized organisations may not have a peak body or professional association
* Accessibility of training and information for smaller organisations
* Affordability of training to casual and volunteer staff
* A general lack of resources that cater to smaller organisations
* Smaller organisations may rely on casuals (precarious workers) and volunteers who may not have the appropriate training and skills
* Volunteer workers may not receive training in child safety, may struggle to access resources, or may not be given adequate time to learn an organisation’s child-safe policies and processes.

The lack of resourcing made available to organisations to support all staff members – including managers, supervisors, full-time and part-time staff, casuals and volunteers – formed a key component of the discussion when participants were asked what resources would be useful for organisations to implement the National Principles. Participant’s attention was drawn to the challenges that smaller and community-based organisations may face in bearing the cost of providing resources and training staff to understand and implement the National Principles.

Young people with disability and parents and caregivers gave examples of their experiences with organisations that highlighted the inconsistency of knowledge and training, which may/ be more apparent in volunteer or casual, precarious workers. One participant explained how they were fortunate that there was a staff member available to fill the void, reflecting that without funding this might not happen for others.

*‘I think my biggest frustration is there’s no funding or support from my coaches. I can’t access NDIS funding for this, because that’s related to me as an individual, not as a community. So yes, they’ve had the people around, and they’ve really tried as much as they can, because they’ve had a spare person around to help me do my individual [study]. But not all organisations have that. So, if there’s grants or NDIS funding that can be used for community support, then that would be really good. And then they would have the resources and they would have what they need to support us.’* – Young people with disability (2).

Another participant’s experience spoke to inadequate funding for training that results in staff – often casual workers – bearing the cost.

*‘[I]n sporting groups and things like that, my observation is that the staff probably want to do the best job they can, but quite often they don't have the training or the information that they need to do that. They have to elect to do the additional training. It’s not just something they're all provided, And in a lot of swim companies they have to pay for the training themselves. So, I think that’s probably a bit of a barrier for a lot of young people are still doing their HSC and working for a bit of extra money, paying $300 for additional training might not be possible. So, I think that’s something for organisations to take on board too.’* – Parents and caregivers (1).

Young people with disability and parents and caregivers were clear from their experiences with smaller organisations that more support for volunteers and casual/precarious workers was needed. Volunteers are relied upon at many small and medium-sized organisations. They interact with children and young people with disability on a regular basis. Ensuring that volunteers receive adequate training before they engage with children and young people was a pressing issue for many participants.

*‘[O]ne of the most significant challenges that organisations face with respect to being safe for children and young people with disability is access to workforce and access to skilled workforce … lots of youth work grows out of a volunteer base.’* – Advocacy organisations (1).

Additional barriers for organisations who have a large volunteer base is ensuring that there is adequate staffing to meet adult/child ratios and manage risk.

*‘[S]porting is where huge amounts of children spend time and where it’s hard to get the right kind of supervision ratio of adults and where they’re really volunteer heavy and all of those things. If you’re looking at a risk register you’ve got red, red, red, red, red. So, they’re all kind of key areas of risk.’* – Child safety and risk assessment.

The training should help all people working with children and young people, including volunteers, to implement the National Principles in a meaningful way that will help produce positive cultural change.

*‘I think there’s been a misstep in how organisations actually get resourced for something as big as the national principles or something as big as trying to – not just change the culture within organisations, but these come out of the Royal Commission right, so change the culture of communities around children and safeguarding. And for tiny little local sports clubs, not just to be able to implement the principles but to be able to understand what it means to be able to implement the principles in a real way for them.’* – Child safety and risk assessment.

One participant recommended that the opinions of volunteers should be sought to ensure that their perspective and needs were taken into account in the development of resources, along with the inclusion of children and young people with disability to discuss what safety means to them. In response to being asked what resources would support organisation to understand and implement the National Principles in a way that promotes and encompasses the safety of children and young people with disability, the participant stated:

*‘[A]sking the organisations ‘how can volunteers digest information, what works for them?’, so gathering more data on how this resource will get home. And I know I said case studies before, because that’s how a lot of people will connect with the actual content, is seeing it in the flesh, understanding it and if we’re looking at videos, having people and young children in there talking about how to create a safe environment for them, and what’s important for them. Because in themselves, they are a resource for information, and so having that as that source of information is important.’* – NDIS providers, peaks and support coordinators.

The changing nature of client-based work with children and young people with disability, for one participant, has resulted in ‘gaps in the system’ that may be exploited by ‘people who are predatory’. This participant supported choice in the system but expected that existing regulatory provisions – such as the Working with Children Check – should still be required for workers in the new market.

*‘So I think a really large concern for us, and one that we’re hearing from lots of families about, is individual support workers and just the massive growth in the market system where it’s kind of uber based matching platforms because I think when you stop and look at the National Principles in terms of leadership, in terms of really robust worker screening, in terms of worker supervision, those things don’t exist at all in the uber market and platforms such as Mable. And yet families are wanting to engage support workers, they’ve got funding in their NDIS plans, they cannot necessarily see just on the face of it the various apps that you can use, that some are really quite different, and in fact have done absolutely the bare minimum of checks, and because they’re not the employer things like the Working with Children Check is never registered with them as an organisation, so they’ve simply floated one past.’* – Disability advocacy organisations (2)

Smaller and medium-sized organisations may not have a peak body of professional association and therefore the support and accessibility to information and training may not be as available compared to other organisations.

Small and medium-sized organisations in rural areas may face additional challenges, especially without the support of a peak body or professional association.

*‘I think I also want to reinforce what [name of participant] says and reinforce that if it’s a rural or regional area … I’m the only disabled player and it’s a bit isolating, and there’s no resources for my club to support me. I suppose I'm lucky that they’ve got people around. They’ve got a fairly strong volunteer base that can step in. But if I was at a smaller club that didn’t have that, then they would be up the creek.’*– Young people with disability (2).

**Aim of resources:**

The resources should aim to:

* + Address the gap in resources for smaller to medium-sized organisations, sporting clubs and community groups and associations
  + Train time-poor casual workers and volunteer staff about the National Principles for Child Safe Standards
  + Provide free, easy access to information for volunteers and casual workers
  + Identify the important role that casual staff and volunteers play in keeping children and young people with disability safe and ensuring participation and inclusion
  + Prioritise the needs of volunteer, casual workers and young people with disability when designing resources.

**Ideas for resources:**

Based on the consultation evidence, the following recommendations are made for the development of resources. These include:

* Repository of resources specific to the unique needs of small and medium-sized organisations, such as sporting clubs and community groups and associations
* Case studies that are co-designed by young people with disability and volunteer staff and explain the important role volunteers play in keeping children and young people with disability safe in a community group or organisation
* Toolkits developed for volunteer and casual staff with useful information, key tips and strategies to apply that are based on the objectives of the National Principles
* Checklists or factsheets that outline key aspects of safety (such as inclusion, participation, online safety, etc.) and provide key information about each area, as well as details on where to access further information as a time-poor casual or volunteer
* Template that outlines key information about the organisation or club for children and young people with disability and their parents and caregivers, including how to contact leadership staff at the organisation, details of the complaints process and relevant advocacy and government contacts for advice or support
* Templates that describe steps that an organisation and individual worker must take to ensure their service is safe and inclusive
* Resource that explains how safeguarding relates to relevant state/territory and federal legislation with a checklist to guide compliance
* Free and accessible training videos that show positive examples of workers in their daily interactions with children and young people with disability
* Free and accessible training videos that upskill volunteers and casual staff to work with children and young people with disability.

**Content suggestions:**

The key message ‘Accommodating small and medium-sized organisations’ reflects the need for free, accessible information to be made available to volunteer and casual staff. What information should be made available has been outlined in the previous key messages. Rather than repeat this detail, the following focus on specific suggestions related to the barriers explored in Key Message 5. It is therefore expected that the ‘Content suggestions’for Key Message 5 be read in conjunction with the ‘Content suggestions’of the previous key messages.

In light of the evidence gathered from the consultations, it is recommended that content for resources support the:

1. Development of knowledge and skills in volunteer and casual staff

This includes:

* Explaining the National Principles and the ‘do’s’ and ‘don’ts’ of safety
* Providing basic information about disability to empower volunteer and casual workers with knowledge and build their confidence and capacity to support children and young people with disability
* List a series of prompts to ask children and young people with disability about their access needs, as well as how to make common accommodations to meet these needs
* Helping volunteer and casual staff engage support different methods of communication used by children and young people with disability
* Teaching volunteer and casual staff to listen to the experiences of children and young people with disability
* Availability of free, accessible information.

1. Prioritisation of experiences of children and young people with disability

This includes:

* Centering the lived experience of children and young people with disability
* Providing quick, easy strategies that help volunteer and casual staff translate this newly gained knowledge into practice.

1. Detailing links to further resources and information.

# Conclusion

It is our recommendation that a suite of several resources (or resource sets) be chosen and developed based on a careful consideration of the evidence presented in this report, particularly within its key messages.

This decision-making should be done through a co-design process, in which formats are chosen and content is curated in partnership with the people who are most affected by this issue – i.e., a lack of knowledge and training regarding implementation of the National Principles for children and young people with disability.

Staff and volunteers from organisations that work with children and young people, as well as children and young people with disability themselves, should be supported to co-design the resources that will bridge this gap:

* **Staff and volunteers** are the end users of these resources and are experts in the operations and requirements of their roles
* **Children and young people with disability** are the ultimate beneficiaries of any knowledge, attitude, policy or practice changes that emerge as a result of these resources. They are the experts in their lived experience of disability and how this interacts with concepts of safety.

Furthermore, it is vital that the voices of children and young people with disability are strongly and meaningfully represented throughout these resources. Doing so will ensure that the resources developed genuinely reflect the needs, perspectives, and experiences of this cohort, and thus can support organisations to promote child safety in a way that is appropriate and resonates with them.

These resources should be responsive to the information and training needs of small and medium-sized organisations, as well as staff and volunteers of all different types. These resources provide an important opportunity to support organisations to develop safe and inclusive cultures, which stem from and sustain safe and inclusive systems, practices, processes and governance.

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# Appendices

## Appendix A: Stakeholder consultations – participant numbers

|  |  |  |  |
| --- | --- | --- | --- |
| **Stakeholder group** | **Individual interview** | **Group interview** | **Total** |
| Child safety and risk assessment organisations | 0 | 5 | 5 |
| Child, family and youth services | 1 | 4 | 5 |
| Disability advocacy organisations (1) | 0 | 4 | 4 |
| Disability advocacy organisations (2) | 1 | 4 | 5 |
| NDIS providers | 2 | 3 | 5 |
| Parents and caregivers (1) | 0 | 8 | 8 |
| Parents and caregivers (2) | 0 | 7 | 7 |
| Young people with disability (1) | 0 | 7 | 7 |
| Young people with disability (2) | 0 | 7 | 7 |
| **Total** | **4** | **49** | **53** |

## Appendix B: Discussion guides

**Community consultations**

The questions asked in consultations involving young people with disability (as in the example below) differed slightly from those asked of parents and caregivers.

Two consultations were run for each of these community groups, one focusing on organisations that were used ‘a lot’ and one on organisations that were used ‘from time to time’. These differences are also reflected in the discussion guide.

| **Number** | **Question** | **Sub-questions** |
| --- | --- | --- |
| *1* | How do you interact with organisations that you use FROM TIME TO TIME? And what are your experiences with them? | * What do you do? * Who do you do it with? * Where do you do it? * (Can we create a map or pathway for how children and young people with disability use these types of organisations?) |
| *2* | What do organisations that you use FROM TIME TO TIME do to be safe for children and young people with disability? | In your experience:   * What ways do they do this? What steps do they take? * What do they do well? * What do they need to change or improve on? |
| *3* | What should organisations do to be safe for children and young people with disability? | * What concrete actions or steps can organisations take to support and protect the safety of children with disability? * In your experience, would they need to do things differently depending on: * The type of person? (E.g., volunteer footy coach vs manager of an NDIS service) * The type of organisation? (E.g., old, new, small, large) |
| *4* | What resources would help organisations be safe for children and young people with disability? | * What areas or topics should these resources cover? * Who should they target? * What content should be included? * How can we make sure these resources are as accessible as possible? (e.g., Easy Read, language translation) |
| *5* | How can these resources address the diversity within disability? | * What advice do you have for organisations on this topic? * How do you want these resources to approach this topic? * What do you want these resources to include? * Are different resources needed for different cohorts? (E.g., unique resource for children with intellectual disability, First Nations children with disability, etc.) |

**Consultations with organisations**

The questions asked during consultations with organisational representatives varied slightly depending on the types of organisation present. The following discussion guide was used with organisations that work in child safety and risk assessment.

|  |  |  |
| --- | --- | --- |
| **Number** | **Question** | **Sub-questions** |
| *1* | What are the unique risks and challenges faced by children and young people with disability when engaging with organisations? | In your experience:   * How does this differ from the experiences of non-disabled children and young people? * How does this differ depending on factors such as disability type, multiple marginalisations (e.g., cultural background, gender, sexuality, etc), etc? * What lessons or experiences from your own organisation’s work would you like other organisations to know? |
| *2* | What has been your organisation’s experience of implementing the National Principles? | In your experience:   * What challenges (if any) has your organisation faced? * How have you responded to these challenges? * What information would have helped in this process? * What learnings (if any) would you share with other organisations? |
| *3* | What should organisations do to be safe for children and young people with disability? | In your experience:   * What tangible actions or steps can organisations take to implement the ‘National Principles for Child Safe Organisations’ in a way that supports the safety of children and young people with disability? * What differences emerge for different types of organisations? * What differences emerge for different types of people (e.g., volunteers, casuals, management, board, etc)? |
| *4* | What resources would support organisations to understand and implement the National Principles in a way that promotes and encompasses the safety of children and young people with disability? | * What areas should these resources seek to address? * What content should they cover? (e.g., What’s the entry point? What’s the scope?) * Who should they target? * What are the gaps or missed opportunities in existing resources? * How can we make sure these resources are as accessible as possible? (e.g., Easy Read, language translation) |