



**Children and Young People  
with Disability Australia**

**Disability Safeguards Consultation**  
**CYDA's response to the survey questions**  
**January 2026**

**Introduction**

Children and Young People with Disability Australia (CYDA) is the national representative organisation for children and young people with disability, advocating for their rights, safety, inclusion and wellbeing. CYDA supports the consultation process undertaken to date to inform the development of the Disability Quality and Safeguarding Framework and Strategy. We welcome the collaborative approach outlined in the consultation paper, including engagement with the Australian Federation of Disability Organisations, Disability Representative Organisations, people with lived experience of disability and the National Disability Insurance Agency. This early engagement is an important foundation for reform.

For the Framework and Strategy to be effective for children and young people with disability, it is critical that it embeds a strong child-rights, child-safe and preventative safeguarding lens from the outset, reflecting the heightened risks, power imbalances and developmental considerations experienced by children and young people with disability across all service settings.

As a result of system failures and pervasive negative discourses and attitudes about people with disability, children and young people with disability are at heightened risk of experiencing abuse and maltreatment. Research<sup>1,2,3</sup> shows that:

- Children and young people with disability experience higher rates of violence and abuse than other children and often experience multiple and ongoing episodes of violence.
- Compared to their non-disabled peers, children with disability are:

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<sup>1</sup> Centre of Research Excellence in Disability and Health. (2020). Violence against young people with disability in Australia. Available at <https://objects.storage.unimelb.edu.au/2016UOM009:figshare/24753587/YoungPplViolenceDisabilityFactSheet.pdf>

<sup>2</sup> Wayland, S & Hindmarsh, G. (2017). Understanding safeguarding practices for children with disability when engaging with organisations. Available at [Understanding safeguarding practices for children with disability when engaging with organisations | Child Family Community Australia \(aifs.gov.au\)](https://www.aifs.gov.au/child-family-community-australia/understanding-safeguarding-practices-for-children-with-disability-when-engaging-with-organisations)

<sup>3</sup> Disability Person's Organisations Australia. (2019). *Violence, abuse, exploitation and neglect against people with disability in Australia. Available data as at March 2019*. Available at [https://dpoa.org.au/violence-abuse-exploitation-neglect-people-disability-australia-available-data-march-2019/violence-against-people-with-disability\\_dpoa\\_march-2019/](https://dpoa.org.au/violence-abuse-exploitation-neglect-people-disability-australia-available-data-march-2019/violence-against-people-with-disability_dpoa_march-2019/)

- o more than three times higher risk of physical violence
- o nearly three times higher risk of sexual violence<sup>4</sup>
- o over four times higher risk of emotional abuse and neglect.

It is therefore imperative that the framework: provides safe-guarding which focuses on children and young people with disability, is strong, effective, promotes high quality service delivery and provides robust safeguards.

For children and young people with disability, effective safeguards and quality must be grounded in the [National Principles for Child Safe Organisations](#), embedding child rights, cultural safety, participation and prevention of harm as core system features.

**CYDA's responses to the consultation questions are outlined below, informed by our systemic advocacy work and the voices and experiences of children and young people with disability and their families.**

## **Response to survey questions**

### **1. When you hear the words “safeguards” and “quality” in this context, what does it mean to you?**

For children and young people with disability, safeguards and quality mean systems, practices and cultures that actively protect their rights, safety and wellbeing, while enabling them to grow, learn, participate and exercise choice in age-appropriate ways. Safeguards must be preventative, not just reactive and quality must be experienced in everyday interactions, not only measured through compliance.

### **2. What do you like or dislike about the definition of safeguards? Is anything missing or confusing?**

CYDA supports the focus on protection from harm while maximising choice and control. However, the definition is adult-centric and does not sufficiently reflect the heightened safeguarding needs of children and young people, including power imbalances, dependency on adults and developmental vulnerability. What is missing is an explicit recognition of children's rights, child-safe organisational obligations and proactive prevention of harm, not only responding after harm occurs.

### **3. What do you like or dislike about the definition of quality? Is anything missing or confusing?**

The definition appropriately links quality to meeting participant needs and expectations, but it relies on individualised participant choice, which does not always translate for children, especially in the absence of recognition of the role of family and caregivers. Quality for children must also be assessed against developmental outcomes, safety, inclusion, participation and wellbeing and whether supports uphold

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<sup>4</sup> Note: This is reported data only, and the number is likely to be much higher given the barriers to reporting and data gaps.

children's rights under child-safe and human rights frameworks such as the National Principles for Child Safety<sup>5</sup> and Convention on the Rights of the Child.<sup>6</sup>

#### **4. Do you have anything to add?**

Safeguards and quality must be designed together, not treated as separate concepts. For children and young people with disability, quality support that is unsafe is not acceptable without meaningful inclusion and participation of children and their families and caregivers. This could include:

- establishing a lived experience advisory group that provides strategic direction and advice to the organisation,
- employing staff and volunteers who are young people from priority cohorts,
- providing co-design opportunities to children and young people from priority cohorts, where they can be involved in the development of organisational services, processes and/or resources,
- creating clear feedback channels (such as complaints processes, surveys, and access needs forms) for children and young people to provide their views and concerns.

#### **5. Who would you tell if you did not feel safe?**

Children and young people often tell someone they trust, such as a parent, caregiver, teacher, support worker or advocate. Many do not know how to access formal complaint or reporting pathways, particularly if the person causing harm is also their primary support.

CYDA also points to the need to outline complex safety risks for children and young people with disability in regional and remote areas. These locations pose unique challenges due to their small and often close-knit nature, where potential offenders may have multiple points of access to children and young people, as well as being deeply embedded and trusted by communities.

#### **6. How could it be made easier for you to tell someone you don't feel safe?**

Safeguards must include child-friendly, accessible and multiple reporting pathways, including trusted adults, independent advocates, and anonymous options. Children and young people need clear, repeated information about their rights and who to tell, delivered in accessible formats and reinforced across all settings.

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<sup>5</sup> <https://www.childsafety.gov.au/resources/national-principles-child-safe-organisations>

<sup>6</sup> United Nations. (1989). *Convention on the Rights of the Child*. <https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>

## **7. What makes it difficult for people to access, understand and use information to make decisions?**

Information is often fragmented, complex, inaccessible and written for adults. Children and young people with disability may face communication barriers, cognitive barriers, or reliance on adults who may not always act in their best interests. This undermines informed choice and safety.

## **8. Do you have anything to add?**

Information must be age-appropriate, accessible, culturally safe and disability-inclusive and not assume high levels of literacy, digital access or advocacy capacity from families and caregivers.

## **9. What are ways we can support people with disability to shape their own support system?**

As research shows, children and young people must be supported to express views and preferences in ways that work for them, including through supported decision-making, communication supports and trusted advocates.<sup>7</sup>

CYDA recommends the provision of targeted training and coaching to organisations on understanding the needs of and risks to child safety such as intersectional considerations, cultural awareness and disability awareness training.

Systems must recognise evolving capacity and ensure children's voices are not overridden by inappropriate or unnecessary adult intervention or system constraints.

## **10. Do you have anything to add?**

Choice and control for children must be balanced with strong safeguards, recognising that children cannot be expected to self-protect in unsafe systems.

## **11. What does person-centred support look like to you?**

For children and young people, person-centred support means safe, respectful relationships, consistency of workers, inclusion in everyday community settings, and supports that enable learning, development, identity and belonging, not just task completion.

## **12. How can services get better at putting the person first?**

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

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<sup>7</sup> Bates, S, Laurens, J, Cross, M, Rowe, B, Wilson, B, Canham, B, Hudson, L, Katz, I, Kayess, R, Fisher, KR. (2022). *Growing Up Making Decisions*. Social Policy Research Centre, UNSW Sydney. <http://doi.org/10.26190/72zt-dw17>

In addition to person-centredness, taking a child-centred approach that focuses on the individual with support from their families and caregivers is a positive way to support safety and inclusion.

Supporting frameworks and services should embed child-safe cultures, rights-based practice and trauma-informed approaches, and ensure workers are trained and supported to listen to and act on children and young people's views. Workforce stability and accountability are critical.

### **13. Do you have anything to add?**

Putting the person first requires system settings that prioritise safety and rights over efficiency or cost containment.

### **14. Do you think the services you receive are held accountable to deliver quality and safe services?**

CYDA consistently hears that accountability is inconsistent and often reactive, with action taken only after serious harm has occurred. Families and caregivers frequently carry the burden of monitoring quality and safety themselves.

### **15. Are there other forms of accountability you think would increase quality and safety?**

Yes. Stronger accountability requires independent oversight, transparent reporting, meaningful consequences for poor practice and routine inclusion of children's and young people's lived experiences in quality monitoring.

Any lived experience involvement of children and young people should be accompanied by information and support with appropriate parameters and safeguards.

As highlighted in Australia's Disability Strategy's Good Practice Guidelines for Engaging with People with Disability<sup>8</sup>, it is important to define the level of participation, provide an inclusive environment, identify any access barriers, give clear information in advance, pay participants for their time and provide feedback channels.

In the case of children and young people, extra safeguards will be necessary to ensure that there is no risk to safety or chance of exploitation.<sup>9</sup>

CYDA's response to the National Strategy to Prevent Child Sexual Abuse Final Development Consultation Paper provides examples of best practice approaches to working with children and young people with disability.<sup>10</sup>

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<sup>8</sup> Department of Social Services (2023) [Good Practice Guidelines for Engaging with People with Disability](#).

<sup>9</sup> Australian Institute of Family Studies (2017) [Understanding Safeguarding Practices for Children With Disability When Engaging With Organisations](#).

<sup>10</sup> Children and Young People with Disability Australia (2021) [Response to the National Strategy to Prevent Child Sexual Abuse Final Development Consultation Paper](#).

These approaches should be paired with significant therapeutic supports, as children and young people may not have completely processed their experience and reliving or sharing it may cause compounded trauma and/or re-traumatisation.

## **16. What could be changed to keep services accountable?**

Accountability should be strengthened through worker registration, mandatory child-safe standards, stronger complaints handling, regular audits focused on lived experience and improved information-sharing between regulators.

Safeguards must be enforceable, not discretionary and must apply consistently across disability, education, health and community settings.

## **17. Do you have anything to add?**

### *Creating a positive culture around accountability*

CYDA previously outlined in our 2025 submission to the National Office for Child Safety's (National Office) consultation paper on the proposed model for a child safety annual reporting framework child safety<sup>11</sup>. We recommend creating a positive culture around accountability by supporting the National Office for Child Safety's proposal of establishing a shared network with communities of practice where organisations can share ways to improve accountability.

There are proven benefits of peer sharing and mentoring, including the provision of up-to-date information and examples. We suggest that such a shared network should include a set of topics or working groups for organisations to focus their discussions around key issues.

These topics could be used to build communities of practice around shared focus areas, for example organisations working in culturally diverse communities or with children with disability.

Noting that the proposed framework would apply to a wide range of organisations, this would be a useful way to link commonalities and organisations could belong to several communities of practice at once.

One of these key topics could focus on ways to maintain and improve accountability. This would allow participating organisations to build a positive culture around accountability by discussing concrete examples, benchmarking and best practice.

Such a collective focus would elevate accountability beyond tick-boxing and reporting to become part of a shared practice and commitment.

## **18. Do you have any examples of when services have worked well together?**

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<sup>11</sup> Children and Young People with Disability Australia (2025) [submission on a Child Safety Annual Reporting Framework](#)

Effective collaboration occurs when services share information appropriately, respect family expertise, and work toward shared outcomes for the child, rather than protecting organisational boundaries.

An example of services working well together to improve quality and safeguarding for children is the National Best Practice Framework for Early Childhood Intervention for families and carers.<sup>12</sup>

The Best Practice Framework sets out shared principles and goals that support consistent, evidence-based practice across early childhood intervention services. It was developed through collaboration between researchers, early childhood intervention practitioners and representatives from the disability sector in consultation with the community. Importantly, it supports families to understand how early childhood intervention works, what to expect from practitioners and how supports can be tailored to their child's individual needs, while also guiding practitioners in delivering best-practice, rights-based and developmentally appropriate supports. This shared framework helps align expectations, improve service coordination and strengthen health, quality and safeguarding outcomes for children and families.

### **19. Are there things that stop services working well together in your experience?**

Barriers include fragmented systems, unclear roles, data-sharing restrictions, workforce turnover and funding models that discourage collaboration and prevent long term planning.

### **20. Do you have anything to add?**

Children and young people with disability experience service fragmentation as disruption, delay and increased risk, particularly during key transitions periods such as from early childhood to school and school to employment.

### **21. How else can we make safeguarding better? You can share a suggestion or anything else you think is important.**

CYDA recommends that a suite of accountability tools are made available for use by organisations and services to scaffold existing and new frameworks. These tools could be made available as part of supporting materials for organisations.

Such tools are already available at the Child Safe Organisations website and include an Introductory Self-Assessment Tool for Organisations to reflect on their child safe practices, a Child Safety and Wellbeing Policy template, a Child Safe Code of Conduct template, and a Checklist for Online Safety.<sup>13</sup>

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<sup>12</sup> University of Melbourne (2025) [The National Best Practice Framework for Early Childhood Intervention](#)

<sup>13</sup> Australian Human Rights Commission (2025) [Practical Tools for Implementing the National Principles for Child Safe Organisations](#).





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