

Maltreatment and Delinquency: Examining the Contexts of Offending Amongst Child Protection-Involved Children

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Abstract

Child protection-involved children experience disproportionately high criminal justice system contact, yet little is known about the circumstances in which such children offend. This study sought to identify the contexts in which this group of children offend and factors associated with children being charged in each context. A mixed-methods analysis of Children's Court case files was conducted utilising a cross-sectional sample of 300 children who came before three Children's Criminal Courts in Victoria, Australia, and who also had statutory Child Protection involvement. Three key contexts of offending were identified: adolescent family violence (AFV), residential care-based offending and group-based offending. A total of 33 per cent of children had engaged in AFV (23 per cent had AFV-related charges), 36 per cent of children ever placed in residential care acquired charges relating to their behaviour in these settings, while 44 per cent of children had engaged in group-based offending. More than one-third of children (38 per cent) also had criminal charges stemming from justice system interactions (e.g. resisting arrest). Children's cumulative neurodevelopmental, mental health and substance abuse challenges correlated with offending in each context. Strategies to reduce youth justice contact amongst child protection-involved children should consider systems responses to AFV and behavioural challenges in residential care.

Keywords: child protection, youth justice, children and adolescents, residential care, challenging behaviour

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Introduction

A growing body of research evidences the increased risk of youth justice contact amongst child protection-involved children (Stewart *et al.*, 2002; Ryan and Testa, 2005; Malvaso *et al.*, 2017; Widom *et al.*, 2018). This group of children are alternately referred to as ‘crossover’, ‘dual-jurisdiction’ or ‘dually-involved’ children, though their cross-system involvement need not be concurrent (Herz *et al.*, 2010). Social workers are likely to encounter crossover children in several settings, including child and family welfare, youth justice and mental health services. Given that most children involved with child protection services are not charged with offending, research efforts have focused on identifying individual, environmental and systemic factors contributing to the over-representation of this group in the justice system. Such knowledge can support the development of programmes, policies and practices able to prevent or divert children’s trajectories from child protection into youth justice systems.

Individual factors

Research has established clear links between experiences of abuse and neglect in childhood and later offending in adolescence and adulthood (Maxfield and Widom, 1996). Studies analysing the maltreatment–offending relationship, primarily from the USA and Australia, have highlighted socio-demographic factors (gender, race/ethnicity, socioeconomic status) (Jonson-Reid, 2002; Malvaso *et al.*, 2017), maltreatment-related factors (type, recurrence, persistence into adolescence) (Jonson-Reid and Barth, 2000; Thornberry *et al.*, 2001; Jonson-Reid, 2002; Stewart *et al.*, 2002, 2013; Malvaso *et al.*, 2017), out-of-home care (OHC) placement (particularly residential care) (Widom, 1991; Ryan *et al.*, 2008; Baskin and Sommers, 2011; Malvaso *et al.*, 2017), reason for entry into care (behavioural reasons versus maltreatment) and older age at care entry (Widom, 1991; Jonson-Reid and Barth, 2000; Baskin and Sommers, 2011; Ryan, 2012) and placement instability (Ryan and Testa, 2005; DeGue and Widom, 2009; Baskin and Sommers, 2011) as risk factors for justice system involvement amongst maltreated children.

Environmental and systemic factors

Familial criminal justice involvement (Kenny and Nelson, 2008) and exposure to offending peers (including in residential care and youth justice

settings) constitute additional environmental risks for some crossover children (Taylor, 2006; Shaw, 2014). Systemic factors increasing the risk of criminal justice system involvement for this group have been identified in qualitative studies, with quantitative evidence beginning to emerge. Such systemic factors include the criminalisation of children's challenging behaviours through police responses in residential care (Shaw, 2016; McFarlane, 2018; Gerard *et al.*, 2019), and systemic disadvantage in criminal justice system processing against children in care, resulting in longer remand periods, greater policing of criminal justice orders and harsher sentencing (Ryan *et al.*, 2007; McFarlane, 2018). Furthermore, the lack of ongoing support for young people leaving care has been suggested to disadvantage crossover children, potentially contributing to offending during the transition from state care to adulthood (Lee *et al.*, 2014; Mendes *et al.*, 2014a).

Characteristics of crossover children and their offending

Research concerning the maltreatment–offending association continues to unfold, alongside that generating a profile of crossover children's offending characteristics. A growing body of evidence demonstrates that crossover children are younger on average compared to other justice-involved children (Ryan *et al.*, 2013; Australian Institute of Health and Welfare, 2018), reflecting their younger offending onset. For instance, the seminal US study of Widom (1989) found that maltreated children ($n=908$) had a younger mean age of first offence compared to a matched control group ($n=667$). Similarly, an Australian study found that crossover children were three times more likely to have been first sentenced before 14 years of age compared to all justice-involved children (Baidawi and Sheehan, 2019). The dimension of gender is also of interest: while males constitute the majority of crossover children, both US and Australian studies show that relative to broader youth justice population, females are over-represented amongst crossover children (Jonson-Reid and Barth, 2000; Ryan *et al.*, 2013; Australian Institute of Health and Welfare (AIHW), 2018).

Another aspect of offending which has garnered attention is the relative risk of violent offending between maltreated and non-maltreated children. Research in this area has identified that child maltreatment nearly doubles the risk of later violent offending throughout adolescence and adulthood (Fitton *et al.*, 2018), with child protection-involved youth evidencing more violent offending than broader youth justice cohorts (Baidawi and Sheehan, 2019). The volume of offending amongst maltreated children also appears higher than both matched controls of non-maltreated children (Widom *et al.*, 2018) and that of the broader population of justice-involved children (Baidawi and Sheehan, 2019).

The literature concerning the contexts of offending amongst child protection-involved youth largely comprises small-scale qualitative studies from the UK and Australia, often focusing on children's acquisition of charges in residential care. The behaviours described in these studies which lead to children being criminally charged tend to encompass challenging or disruptive behaviours, including threats or assaults towards staff/carers and co-residents or damage of the physical environment (e.g. breaking windows) (Taylor, 2006; Shaw, 2012; Mendes *et al.*, 2013; Shaw, 2014). Studies, primarily from the UK and Australia, have suggested that charges sometimes arise from residential care staff inappropriately contacting police in response to minor behavioural incidents (Shaw, 2012; Mendes *et al.*, 2014a; McFarlane, 2018; Gerard *et al.*, 2019).

Aside from offending in residential care environments, two small-scale qualitative studies that included interviews with crossover children also identified group-based crime as an offending context amongst some children (Taylor, 2006; Mendes *et al.*, 2013). The limited evidence from these studies suggests that this category of offending takes place outside the residential care setting and may involve a range of criminal activities including shoplifting, disturbing the peace while intoxicated and burglaries. Crossover children's desire for group belonging and to avoid bullying or a low place in the residential care social hierarchy were described as facilitators of group-based offending (Taylor, 2006; Shaw, 2012; Mendes *et al.*, 2013; Shaw, 2014). Additionally, several young people have identified their feelings of being 'uncared for' in OHC as a catalyst for their escalating criminal behaviour. Children in these studies reported experiencing a lack of positive self-regard, or a sense that there was no one who would 'be let down' by their offending behaviour (Taylor, 2006; Marsh, 2016). A propensity for group-based offending amongst crossover children might reflect their disproportionate exposure to risks for group antisocial behaviour, such as association with offending peers (including those introduced through care placements), poor attachment to parents/carers, harsh parenting, poor supervision, exposure to family violence, low self-esteem and direct experiences of abuse and neglect (Fitch, 2009; O'Brien *et al.*, 2013).

While the available studies suggest residential care-based offending and group-based offending constitute two offending contexts observed amongst crossover children, these conclusions are largely drawn from small qualitative studies. It is unclear to what extent these contexts reflect the overall settings of offending amongst child protection-involved youth, including those not placed in OHC.

Aims

Contact with the youth justice system amongst child protection-involved children is a socially and economically costly outcome for children, services and the broader community. Involvement in youth justice system carries an increased risk for progression to the adult criminal justice system (Chen *et al.*, 2005), with attendant poor life outcomes. At the same time, little is known about the contexts in which child protection-involved children are charged with crime, hindering the capacity to prevent this trajectory, and to better respond to this group.

This study, therefore, aimed to identify the common relational and environmental contexts in which offending by child protection-involved children occurs and to understand what factors were associated with offending in each context.

Methods

This article presents selected findings from the 2016 to 2018 Cross-Over Kids Study, conducted in partnership with the Children's Court in Victoria, Australia. Ethics approval for this study was obtained from the Justice Human Research Ethics Committee and the Monash University Human Research Ethics Committee. Consent from individual children or their guardians was not obtained, and while waiver of consent is commonplace in social research utilising agency data, ethical complexities remain to be grappled with (Hayes and Devaney, 2004). Consistent with Australian research ethics standards (National Health and Medical Research Council, Australian Research Council and Universities Australia, 2018), waiver of individual consent was granted on the grounds of impracticality of obtaining informed consent for the volume of children we wished to include in the study (many of whom were transient, uncontactable or in uncertain guardianship arrangements), alongside assessment that the likely benefits of the study outweighed probable risks.

Study context

The Victorian Children's Court includes two divisions. The Family Division (FD) of the Children's Court hears applications relating to the care and protection of children aged 0–17 years at risk of abuse and neglect, as well as intervention order applications. The Criminal Division (CD) of the Children's Court deals with alleged offending of children aged 10–17 years, though children up to 21 years may be subject to youth

justice orders. Children may have concurrent matters across both divisions, and where children are subject to simultaneous court orders in both divisions, primary case management is negotiated between Child Protection and Youth Justice services ([Department of Health and Human Services, 2016](#)).

Sampling

The study adopted a mixed exploratory/descriptive design, examining the characteristics and trajectories into offending of a cross-sectional sample of crossover children. The sample comprised all children (aged 10–17 years at the time of criminal charges) before the CD of three Victorian Children's Courts who had current or historical FD matters in any Victorian Children's Court, indicating statutory child protection involvement. Study courts included two metropolitan and one regional Victorian Children's Court locations, which were purposively selected to form a diverse sampling frame in relation to children's CD and FD matters, socio-economic status, rurality and culture.

Cases were identified in chronological order of child presentation before the criminal courts from June 2016 until the quota of 300 cases was filled in April 2017. Excluded were children with non-statutory child protection involvement alone, children solely with interstate child protection involvement and children presenting only with infringement matters (e.g. failing to wear a bicycle helmet).

Data collection

Data were gathered via a manual audit instrument developed by the research team with advice from the Children's Court. Four data sources were audited for each child: court-based CD and FD electronic files and hard copy CD and FD files. CD files were those of the criminal matter(s) for which the child was currently before the court. FD files were those of the child's current or most recent FD matter. Case file audits were time consuming and varied according to the extent of children's court involvement.

Offending contexts

Key offending contexts were categorised through the repeated observation of social and environmental milieu in which children were charged with crime, currently or historically. This relied on specific charges being observed (e.g. family violence-related or assault police charges) or drew

on qualitative data from police briefs, youth justice reports and other reports/assessments. Qualitative data describing offending contexts were not available in all case files, nor for every single charge. Thus, findings represent a broad picture rather than precise quantification of offending contexts.

Correlates of offending

Qualitative and quantitative data were gathered for a range of individual and family measures, child protection and criminal justice administrative data, children's neurodevelopmental, mental and behavioural challenges, and service involvement. A childhood adversity score was calculated for each child (0–10) based upon their cumulative experience of the following circumstances: parental separation, parental death, physical abuse, emotional abuse, sexual abuse, neglect, family violence exposure, household mental illness, household substance abuse and household criminal justice system involvement. Identification of maltreatment was based on descriptions of abuse and neglect in case files which accorded with [World Health Organisation and the International Society for Prevention of Child Abuse and Neglect definitions \(2006\)](#).

A second score was calculated for each child totalling the cumulative number of the following challenges faced: intellectual disability, other neurodevelopmental condition, mental health diagnosis, self-harm/suicidality, substance misuse, challenging behaviours, sexualised behaviours, sexual exploitation risk and history of absconding. In recognising the complexity of mental health presentations amongst child protection-involved children ([Tarren-Sweeney, 2008](#)), mental health concerns included diagnosed mental health conditions or circumstances, where children displayed high levels of distress (e.g. repeated suicide attempts, severe self-harming) for which no formal diagnosis had yet been made. Neurodevelopmental and neurological disorders and disabilities include diagnosed intellectual disability, borderline intellectual functioning, learning disorder, attention deficit hyperactivity disorder/attention deficit disorder, autism spectrum disorder, Tourette's syndrome, foetal alcohol spectrum disorder and epilepsy. Mental health diagnoses included mood, psychotic, attachment and trauma-related disorder (post-traumatic stress disorder and reactive attachment disorder), 'emerging' personality' and behavioural disorders (conduct disorder, oppositional defiant disorder and severe/behavioural disorder).

Data availability and quality

Case file audits were fully completed for 91.3 per cent of children. Elements of some case files were incomplete (13/300 FD files and 14/300

CD files), when the file could not be located or was unavailable because of an ongoing matter at another court. In these cases, much of the required information was gathered from other reports/files minimising the amount of missing data.

Electronic records case file data were consistently available; however, information in hard copy files varied depending on the particular assessments and reports provided to the court. As such, quantitative findings represent minimum prevalence data regarding the variables examined, including offending contexts. Given the cross-sectional sample, and the nature of the data gathered, analyses of children's offending contexts should be regarded as exploratory rather than representative in nature.

As Epstein (2010, p. 69) highlights, there is both a science to clinical data mining and an artful negotiation of 'strategic compromise' to maximise the knowledge-generating potential of real-world data, despite limitations in consistency or availability. The data collection strategy permitted a balance of qualitative content which contextualised children's lives and offending, while generating a large enough sample size to support quantitative examination of key relationships. A further advantage of the chosen approach is that detailed data regarding children's current and historical circumstances could often be obtained from several sources, permitting cross-checking and triangulation for greater reliability.

Data analysis

Case file data were entered into SPSS24 for analysis, and cases were coded to identify children whose files indicated their involvement in the identified offending contexts. The findings presented are primarily qualitative, though quantitative findings are included where relevant. Bivariate and multivariate analyses are used to explore factors associated with each offending context.

Sample characteristics

Sample characteristics are outlined in Table 1, demonstrating that most children were aged between 15 and 17 years, and two-thirds were male. Where ethnicity was known, crossover children were most commonly from Aboriginal or Torres Strait Islander and Anglo-Australian backgrounds, though for 29 per cent of children, Indigenous status was not discernible. Just over one half (57 per cent) of children were under a current child protection order, including 43 per cent who were in OHC, predominantly residential care.

Table 1 Sample characteristics

Characteristic	Crossover children's sample (N = 300)
Age (years)	<i>m</i> = 16.2 (10, 21)
Gender (%)	
Male	68
Female	31
Transgender	1
Common ethnicities (%)	
Indigenous	18
Anglo-Australian	15
Māori/Pacific Islander	9
Middle Eastern	4
African	3
Children's Court location (%)	
Central Children's Court	63
Suburban Children's Court	10
Regional Children's Court	27
Current Child Protection (CP) order(%)	57
Current OHC placement (%)	
Yes	43
No	44
Over 18 years (ineligible for OHC)	13
Type of OHC placement (<i>n</i> = 130) (%)	
Residential care	69.2
Foster/kinship/permanent care	22.3
Independent living	6.2
Unknown/other	2.3

Children's most recent child protection matters commonly concerned emotional/psychological and/or physical harm (78 per cent), and their current protective risks generally reflected those identified for adolescents in the UK (Hanson and Holmes, 2014), including ongoing exposure to family violence, mutual family violence between the child and adults, caregiver rejection and abandonment, and concerns related to the child's welfare while running away from home or care placements, including due to substance abuse, risk of sexual exploitation and association with other youth or adults of concern. One difference appears to be formal 'gang' involvement, which appears more evident in UK and US contexts, compared to more informal 'group' antisocial behaviour seen in Australian contexts.

Findings

Three key contexts of offending were identified amongst crossover children: perpetration of adolescent family violence (AFV) (32.7 per cent, including 23 per cent of children with AFV-related charges), residential care-based offending (17 per cent or 35.7 per cent of children ever placed in residential care) and group-based offending (43.7 per cent). While the entirety of children's criminal charges is not captured by these identified

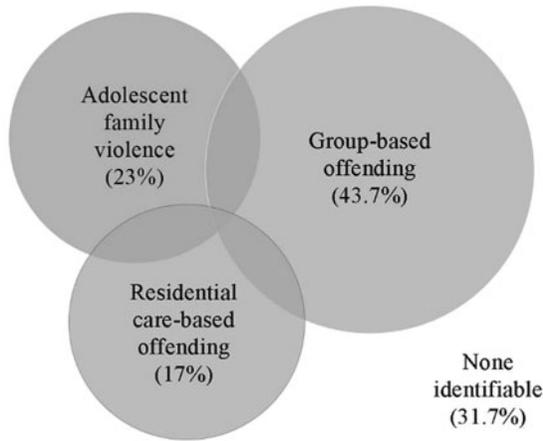


Figure 1: Proportion of crossover children with criminal charges relating to AFV, residential care-based and group-based offending.

contexts, at least one of these contexts was identified in 68.3 per cent of case files, for 19 per cent of children, two contexts were identified and for 3 per cent of children, all contexts were identified (Figure 1). A small but significant correlation was identified between the cumulative number of offending contexts identified (0–3) and the child having received a custodial sentence ($r = 0.22, p < 0.001$). Aside from these contexts, more than one-third of children received charges related to their interactions with the criminal justice system (38 per cent), such as resisting arrest, or property damage in police or youth justice custody. Other charges outside of these contexts arose from behaviours in which children engaged alone, for instance, shoplifting of food, alcohol or clothing, sexual offending, assaulting a member of the public, graffiti, trespassing or arson.

Table 2 presents the correlates of AFV incidents, residential care-based charges and group-based offending amongst the sample, discussed further in the next sections.

AFV

Incidents of AFV identified in case files included acts of physical and verbal violence, property damage and children’s threatening behaviour towards family members and current or former romantic partners. AFV incidents were observed for 32.7 per cent of crossover children, while fewer had identifiable AFV-related charges (23 per cent), reflecting variations in AFV reporting, policing and prosecution. AFV usually occurred in the context of long-standing conflictual parent-child dynamics, and AFV acts were most often directed towards the child’s mother,

Table 2 Correlates of AFV (all children), residential care-based offending (children ever placed in residential care), group-based offending (all children) and motor vehicle thefts (all children)

Variables	AFV (<i>p</i> -value)	Residential care-based charges (<i>p</i> -value)	Group-based offending (<i>p</i> -value)	Motor vehicle thefts (<i>p</i> -value)
Male gender			0.044	<0.001
Neglect			0.002	
Any neurodevelopmental disorder/disability	0.011		0.031	0.012
Borderline/intellectual disability				0.013
Neurodevelopmental/neurological conditions excluding intellectual disability	0.041			
ADD/ADHD	0.026	0.045		
Any mental health disorder	0.006	0.001		
Trauma/attachment-related disorder	0.010	0.009		
Behavioural disorder	<0.0001	0.040		
‘Emerging’ personality disorder		0.027		0.016
Substance abuse			<0.001	<0.001
‘Hard’ drug use ^a			<0.001	<0.001
Challenging behaviours	<0.001	0.002		0.008
Cumulative co-occurring challenges	<0.001	0.002		

^a‘Hard’ drug use includes chronic use of volatile substances, use of heroin or crystal methamphetamine (‘ice’).

ADD, attention deficit disorder; ADHD, attention deficit hyperactivity disorder.

though siblings, grandparents and ex/partners were also sometimes AFV victims. Behaviours constituting AFV ranged in severity, from throwing a candle to life-threatening violence (e.g. strangulation of partners or stabbing caregivers).

For a small number of children ($n = 11$ or 3.6 per cent), AFV incidents were the sole context of their criminal charges. Compared to the overall group of children with AFV incidents in their files, the group who solely had AFV charges did not differ by gender, age or Indigenous status. However, this group was significantly more likely to come from the regional court location, potentially indicating geographic differences in reporting, policing or prosecution of AFV.

Intervention order data were not systematically collected, though case notes revealed many children as the subject of intervention orders, predominantly taken out by family (usually mothers). Overall 19 per cent of children had criminal charges related to contravening an intervention order. Intervention orders taken out by caregivers (parents, kinship or foster carers) regularly precipitated children’s exclusion from home, entry into OHC and specific entry to residential care. Complexities were observed regarding the use of intervention orders with this group, including children’s lack of understanding regarding intervention orders and encouragement by family members to have contact, in breach of intervention orders.

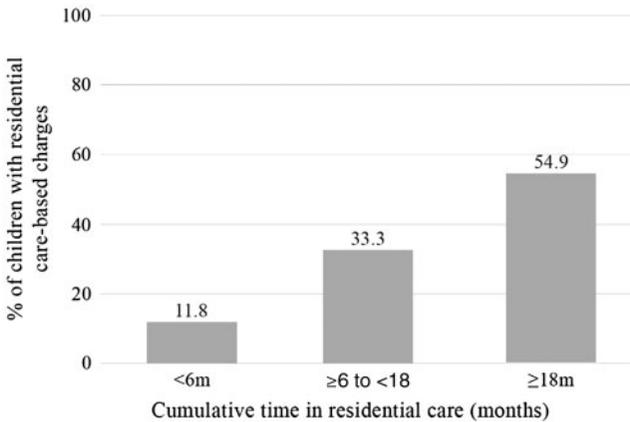


Figure 2: Minimum proportion of children with residential care-based charges.

No significant differences were identified by gender or Indigenous status in relation to AFV, nor were any adverse childhood experiences (including maltreatment) correlated with AFV. Other correlates of AFV are listed in [Table 2](#), demonstrating that neurodevelopmental, mental and behavioural health disorders were more prevalently diagnosed amongst those children displaying AFV (40–53 per cent of children with AFV incidents).

Residential care-based offending

Children's acquisition of criminal charges within and in the surrounds of residential care placements was another prominent offending context amongst crossover children. At least 17 per cent of children had residential care-based charges, including over one-third (35.7 per cent) of crossover children ever placed in residential care. Amongst children placed in residential care, the proportion with residential care-based charges increased with the cumulative time spent in residential care ($r = 0.171$; $p = 0.046$; [Figure 2](#)), and this relationship could not be accounted for by the child's advancing age (see [Table 3](#) for logistic regression results).

Children acquired a range of charges in residential care, including property offences (criminal damage or intentionally destroying property), deception offences (e.g. theft of co-resident's property) and offences against the person (typically assault, threats to harm, throwing objects or reckless conduct endangering life). The severity of the incidents leading to residential care-based charges ranged from children smashing an egg or a mug, or putting graffiti on the carpet, to damaging or breaking the homes' windows and walls, vehicles, threatening to harm

Table 3 Logistic regression: time spent in residential care (months) versus acquisition of residential care-based charges

Variable	B	SE	OR	95% CI	Wald statistic	p-value
Age	-0.33	0.13	0.72	(0.556–0.927)	6.45	0.011
Cumulative time in residential care (<6 m, ≥6 to <18 m, ≥18 m)	0.73	0.26	2.07	(1.238–3.473)	7.68	0.006

staff or co-residents and assault of staff or co-residents. Children often incurred additional charges for resisting arrest or assaulting police called to respond to these incidents.

Residential care-based offending often reflected children's sudden reactivity to real or imagined internal or external threats. These behaviours occurred in the context of a range of child stressors, including challenging family interactions (such as cancelled access visits), feeling rejected or ignored by carers (e.g. being denied requests for goods or practical support), changes to the home's stability or routine, conflict with co-residents and attempts to gain carers' love, care or attention. Case files often described children as experiencing rejection following caregiver relinquishment which resulted in their residential care placement. Two-thirds (66 per cent) of children ever placed in residential care experienced caregiver relinquishment compared with 16 per cent of those children never in residential care ($p < 0.001$). Children with residential care-based charges were significantly more likely to have caregiver relinquishments recorded in their case files compared with children without residential care-based charges (72.5 per cent versus 32.9 per cent, $p < 0.001$). Furthermore, such figures fail to reveal the complex dynamics sometimes underlying relinquishment. Observed dynamics included parental use of relinquishment (or threat thereof) to emotionally punish a child, where parents have themselves exhibited similar behaviours (with no apparent consequence), or where there has been a refusal or reluctance by parents (currently or historically) to access services which might have better supported the child. However, amongst children ever placed in residential care, caregiver relinquishment did not differentiate children receiving residential care-based charges from those with no such charges. Inconsistency was apparent in relation to the charging of children in response to residential care-based incidents, reflecting other study findings (Shaw, 2016). As with AFV, for a handful of children, offending *solely* consisted of charges acquired in residential care placements ($n = 6$), though several more had acquired the vast majority of their charges in residential care. Also identified were incidents that could have led to police involvement, but for which children were not criminally charged, again demonstrating varying responses to these incidents.

While the association between cumulative childhood adversity and receiving residential care-based charges approached significance ($p = 0.05$), when only considering the group of children who experienced residential care placements, greater adversity did not differentiate those children who received criminal charges from those who did not. Nor were significant differences observed by gender or Indigenous status in relation to receiving residential care-based charges. However, several other factors were significantly correlated with having residential care-based charges (Table 1), including children's history of challenging behaviours, mental health concerns and specific diagnoses of 'emerging' personality disorder, trauma/attachment-related disorders or behavioural disorder.

Children with an intellectual disability were no more likely to receive these charges compared to other children in residential care. However, children with intellectual disabilities were over-represented amongst children placed in residential care, and overall were twice as likely to have received residential care-based charges compared to other children sampled (31.3 per cent versus 15.6 per cent, $p = 0.014$).

Group-based offending

The most common context of offending amongst the sample was group-based offending or 'co-offending' in which at least 44.1 per cent of children had engaged. A further 8.4 per cent of children had indications of likely participation in group-based offending (e.g. child protection reports describing engagement with offending peers). Children's co-offenders included family and romantic partners, though co-offending most commonly occurred with others from residential care or children's home environments, youth justice or homelessness networks. The involvement of adults in children's group-based offending was at times evident, including parents, kith and kin, others with whom children were involved in sexually exploitative relationships and acquaintances encountered while homeless or absconding. No significant differences were identified in engagement in group-based offending by Indigenous status, court location or OHC placement (including placement type). Other correlates of group-based offending included male gender, experiences of neglect and substance abuse (Table 1). These factors, though of interest, should be interpreted with caution due to difficulties consistently identifying group-based offending from case file data.

Qualitative data indicated that children's group-based offending was generally more serious, violent, visible and injurious to the broader community compared with other identified offending contexts. Group-based offence types included property offences (e.g. property damage, thefts and burglary), trespassing and aggravated burglary, robbery and armed

robbery and assault and affray in groups of varying sizes. In some instances, this offending was opportunistic and spontaneous (e.g. shoplifting, assaults or robberies committed with other children), while other group-based offending was planned and coordinated, often involving older youth and adults. Qualitative data depicted many children as being easily embroiled in group-based dynamics due to a desire for connection, belonging and access to drugs and alcohol.

A key offence related to group-based offending was motor vehicle thefts, a charge acquired by 34.6 per cent of children, and sometimes accompanied by police pursuits. This type of charge is examined in detail as an indicator of more serious group-based offending. Theft of motor vehicle charges were more prevalent amongst children receiving custodial sentences (40.8 per cent versus 3 per cent, $p < 0.001$), and appeared to be associated with children's involvement in a group-based dynamic including heavy substance use. Correlates of motor vehicle theft charges are listed in [Table 1](#), including male gender, any neurodisability, and specifically intellectual disability or borderline intellectual functioning, substance abuse including 'hard' drug use and a history of challenging behaviours.

Criminal justice system-related charges

Many children incurred charges through their interactions with a range of other systems in which adult roles were to support the child's care or well-being. Alongside charges acquired in residential care, 38 per cent of children were charged with offenses related to their interactions with police and the criminal justice system. This excludes charges related to offences against justice procedures such as breaching bail conditions, but includes charges for assaulting police and resisting arrest, property damage and assaults in police or youth justice custody, and breaching the good order or security of custodial facilities.

Discussion

The increased risk of youth justice involvement amongst children involved with child protection is well documented, yet limited evidence about the circumstances in which this group are charged with offending hampers the capacity for targeted prevention, diversion and response strategies. The purpose of this study was to address this evidence gap by identifying key contexts of offending amongst crossover children.

The study found that at least 33–44 per cent of crossover children displayed incidents of AFV, were charged with residential care-based offending (for those placed in residential care), or were charged with

offending in groups or with co-offenders. The identification of AFV as a frequent offending context amongst crossover children is novel. While this pathway for entry to care has been described in the literature relating to AFV (Miles and Condry, 2015), UK policy guidance overtly discourages children's criminalisation in such situations (Home Office, 2015). This finding is also consistent with US and Australian research, which has observed that crossover children regularly enter OHC or residential care following behavioural challenges in the family home and other care environments (e.g. foster care), leading to caregiver relinquishment (Ryan, 2012; Mendes *et al.*, 2013). It also reflects previous research documenting a strong relationship between parental rejection and delinquency (Agnew, 2001). The findings suggest that efforts to better understand the antecedents, consequences and effective responses to AFV may be helpful in reducing the flow of children from child protection into youth justice systems.

The study findings also support the observation that children in residential care are often charged with offending occurring in and around their placement (McFarlane, 2018), and extend this knowledge by demonstrating that children's likelihood of acquiring such charges escalates with cumulative time spent in residential care. This finding accords with those of a UK study which observed criminal justice responses seemingly being applied proportional to the frequency and persistence of residential care-based incidents, rather than their seriousness (Shaw, 2016). While research often identifies children's entry to residential care to be associated with the onset or rapid escalation of offending, this has primarily been attributed to environmental and systemic influences, including the impact of being placed with offending peers, deficits in staff training and the adoption of police responses to children's behavioural incidents in residential care (Shaw, 2016; Gerard *et al.*, 2019). Alongside these explanations, the current study's findings suggest that the circumstances leading to children's placement in residential care may also contribute to their sudden onset or escalation of offending in these environments, particularly for children navigating the socio-emotional impacts of exclusion from their family home following parental relinquishment. Such assertions reflect findings of qualitative inquiries in which former crossover children describe their offending as arising from feelings of rejection, disconnection, lovelessness and worthlessness in the context of their estrangement from significant relationships with family or carers (Taylor, 2006; Marsh, 2016).

Ongoing attention to research and practice which reduces the criminalisation of children in residential care seems also a necessary component of addressing the needs of crossover children. Particular attention should be paid to responses to children with neurodevelopmental disabilities and mental health challenges in these settings. While the cumulative neurodevelopmental, mental and behavioural health challenges

faced by children were more likely to correlate with their being criminally charged in residential care, crossover children with intellectual disabilities and greater childhood adversity were more likely to enter residential care in the first instance. Neurodevelopmental disability (including intellectual disability) amongst crossover children has received scant research attention, a surprising oversight given the known associations between neurodevelopmental risks and each of childhood maltreatment, child protection involvement and delinquency (Moffitt, 1993; Jones *et al.*, 2012; Stalker and McArthur, 2012). Future research should ascertain the impact of neurodevelopmental disability in mediating the relationship between child welfare and criminal justice involvement, including examining parental relinquishment and OHC placement amongst maltreated children with neurodisability.

This research also identified that group-based offending was extensive amongst crossover children, sometimes incorporating elements of ‘criminal exploitation’ by adults and older youth, a phenomenon also reflected in UK reports indicating that care-involved children are recruitment targets of gangs (London Safeguarding Children Board (LSCB), 2009). The heightened prevalence of cognitive impairment amongst crossover children displaying group-based offending highlights their vulnerability to such exploitation. Crossover children’s risk of significant harm through these affiliations is also a potential trigger for child protection re/involvement (London Safeguarding Children Board (LSCB), 2009). Given the prevalence of group-based offending amongst crossover children, alongside the lack of evidence in this area, further investigation into this phenomenon may prove useful for supporting targeted responses.

The findings affirm the usefulness of holistic or ecological models, which can consider individual (e.g. neurodevelopmental challenges), environmental (e.g. contact with offending peers and adults) and systemic (e.g. responses to AFV) risk factors for crossover children’s offending. Yet the results also emphasise the often relational nature of delinquency in this group, and the subsequent usefulness of attachment and trauma theories to explore the mechanisms by which childhood maltreatment may lead to justice system contact, echoing previous studies (Taylor, 2006; Mendes *et al.*, 2014b; Marsh, 2016). Consistent with understandings of attachment insecurity and developmental trauma (van der Kolk *et al.*, 2005; Schore and Schore, 2008), much of children’s offending in the present study is related to emotional and behavioural regulation challenges, particularly in the context of interpersonal interactions with ‘authority’ and attachment figures, including parents, carers, romantic partners and police. Other offending appeared related to children’s attempts to regulate emotional arousal, particularly through drug and alcohol use, or to facilitate connection with other children and adults, including romantic partners and adults.

Limitations

Typical of studies based on administrative or clinical data-mining approaches, the adopted method held both advantages and challenges (Epstein, 2010). The findings solely represent available case file information, which was somewhat variable between children, preventing the quantification of the context of each criminal charge. The identified contexts, therefore, do not account for the volume of offending in each setting. Additionally, the study did not generate a representative sample and was undertaken in a single Australian jurisdiction, thereby requiring caution in generalisation of findings. Finally, the study more greatly emphasises individual rather than structural and systemic factors influencing the criminal justice outcomes of child protection-involved children. Yet it is acknowledged that factors outside the scope of the study such as racism, poverty and criminalisation of children in care likely influence crossover children's justice-related outcomes. Despite these limitations, the findings extend current understandings concerning the nature of offending amongst crossover children, and their implications help inform future research and practice in this area.

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