4.8 Vulnerable young people (aged 15–24)

For the purposes of this article, vulnerable young people are defined as those who are at risk of harm, have been harmed, or have limited social, educational or economic opportunities. While there are many factors associated with vulnerability, this article examines young people aged 15–24 who are: homeless or at risk of homelessness; in the criminal justice system; victims of violence, abuse or neglect; or living with disability.

Vulnerabilities may emerge for many young people while aged 15–24, as it is a time of rapid physical, sexual, social and emotional change. During this time of change, young people may display an increased level of risk-taking behaviour (Casey et al. 2008; Steinberg 2007) including the misuse of alcohol and other drugs (see Chapter 4 ‘How are young Australians coping?’). Further, according to the National Survey of Mental Health and Wellbeing, more than 1 in 4 young people aged 16–24 experience a 12-month mental disorder (ABS 2008). For more information on the health and mental wellbeing of young people, see Australia’s health 2014, Chapter 6 ‘Youth health: the prime of life?’ (AIHW 2014a).

Given the complex nature of disadvantage, vulnerable young people may be in need of multiple welfare and health services, and be supported by policy settings that maximise participation in school and employment (for information about young people’s engagement with education and employment, see Chapter 4 ‘Opposite ends of the spectrum’). To this end, all levels of government, as well as non-government organisations, offer a range of programs and services for young people, including those that aim to intervene early to prevent unnecessary or extended reliance on welfare, and improve outcomes for young people. Ensuring the income support system effectively supports young people’s economic participation and engagement was a key focus of the Australian Government’s recent Review of Australia’s Welfare System (final report A new system for better employment and social outcomes released 25 February 2015).

What do we know?

In 2014, there were 3.1 million young people aged 15–24 in Australia, with males slightly outnumbering females (1.6 million compared with 1.5 million) (ABS 2014a). Of these young people, some are vulnerable to harm and face limited social, educational or economic opportunities. Some key groups of young people recognised as being vulnerable are those who are: homeless or at risk of homelessness; in the criminal justice system; victims of violence, child abuse or neglect; or living with disability (Purcal et al. 2012; Smith & Ecob 2007; Sullivan & Knutson 2000; Topitzes et al. 2011). The proportion of young people aged 15–24 in the population experiencing these areas of disadvantage ranges from 0.3% under youth justice, to 8% with disability (Figure 4.8.1). Additionally, some of these young people may experience multiple types of disadvantage, and experience multiple health and welfare sector involvement. These young people may be particularly vulnerable. This article examines a range of issues in relation to these specific groups.
Evidence suggests that experiencing one of these risks increases the likelihood of involvement with another, highlighting the varied and complex nature of vulnerability. For example, a linkage study of young people in the child protection, youth justice and homelessness systems showed that young people involved in one of these sectors were more likely to experience involvement in each of the other sectors than the general population (AIHW 2012). (For more information on data linkage see Box 4.8.1.) Further, young people with disability may be vulnerable to abuse and neglect, and are more likely than the general population to require child protection services (Sullivan & Knutson 2000). It is also widely recognised that people with acquired brain injuries, cognitive impairments and learning disabilities are over-represented in the criminal justice system (Cowardin 1998; Dowse et al. 2011), and that there are links between involvement in the criminal justice system, maltreatment, and crime victimisation (Topitzes et al. 2011).
Box 4.8.1: Investigating pathways using data linkage

Children and young people may come into contact with a range of welfare services throughout their childhood and early adolescence. As such, it is important to know the relationships between use of various welfare services, and between educational outcomes and use of welfare services. This can help to gauge the effect of welfare-related events during these developmental stages and assist in developing effective interventions. By using data linkage, different pathways can be analysed and critical points for intervention determined.

Data linkage is a powerful tool for identifying multiple occurrences of individuals within a data set and for linking information across data sets (see Box 1.1.3, ‘Data linkage—expanding the information base’).

A range of data collections contain information on young people’s use of welfare services, as well as their educational attainment in schools. These collections include the Juvenile Justice National Minimum Data Set (NMDS), the Child Protection NMDS, the Specialist Homelessness Services Collection, the Child Care Management System, the Australian Early Development Census and the National Assessment Program. However, currently there is not a common unique person identifier across these collections that would easily allow person-level analysis of the interactions of the various services and sectors. Despite these difficulties, data linkage methods have been—and are currently being—used to link data sets from both the welfare and education sectors related to child development:

- In 2011, the AIHW published results on the academic performance of children on guardianship/custody orders from 2003 to 2006. The analysis data set was obtained by linking data on children on orders with education department-based school reading and numeracy testing results. This pilot project involved interdepartmental linkage of administrative data across multiple jurisdictions. The study found that a considerable proportion of children on guardianship/custody orders were not meeting national benchmarks for reading and numeracy (AIHW 2011).

- In 2014, the AIHW linked data from the Child Protection NMDS and NAPLAN testing to analyse the educational outcomes of children on protection orders (results are scheduled to be published late in 2015).

- In 2012, the AIHW completed linkage and analysis of data obtained from data collections on the use of services for homelessness, youth justice supervision, and child protection notifications and substantiations in Victoria and Tasmania. Results showed that young people with a child protection history entered juvenile justice supervision at a younger age, and that young people (particularly young women) completing a detention sentence were at greater risk of homelessness (AIHW 2012).

- In 2014, the AIHW started linking data from the Child Care Management System and the Australian Early Development Census for the purposes of research by the Australian Government Department of Education into the relationship between types of early childhood education and care experiences, and children’s school readiness. This project is ongoing.

- The AIHW is developing a linked data collection to report on the relationships between child protection and youth justice. Outcomes of this work are scheduled to be published in late 2015.
Disability
Some young people living with disability may be vulnerable and have a decreased opportunity to participate in education and employment. Additionally, evidence suggests that some young people with disability may be at an increased risk of abuse and neglect, particularly if they are from families who experience high levels of social and economic stress (Weatherburn et al. 2007). Therefore, providing targeted support for young people with disability who are vulnerable, or who have unmet needs, may be a critical factor in improving outcomes.

Disability support
Young people with disability aged 16 and over may be eligible to receive a range of income support payments, including the Disability Support Pension and/or the Mobility Allowance. Those who are under 21 may also be eligible for the Youth Disability Supplement (DHS 2015). This population may require assistance for much of their lives with activities of daily living, access to work and education, and independent living.

In addition to payments, young people with disability may access a range of disability support services. Since 2009, these services have been funded under the National Disability Agreement (NDA) between the Australian Government and the state and territory governments (DSS 2014). In 2013, this model was complemented by the introduction of the National Disability Insurance Scheme (NDIS) in selected trial sites.

The NDIS aims to allow those with disability to choose supports that are considered ‘reasonable and necessary’ to help them to reach their goals, objectives and aspirations in a range of areas, which may include education, employment, social participation, independence, living arrangements, and health and wellbeing (NDIS 2014).

As the NDIS is being rolled out in phases, there will be a crossover period where disability support services in Australia may be provided under either the NDIS, or the NDA (for information on the disability sector, see Box 1.1.2 ‘The changing face of the disability sector’).

How many young people in Australia have disability?
In 2012, an estimated 245,000 young people aged 15–24 had some form of disability, which equates to around 8%, or 1 in 13 of the 15–24 population (ABS 2013). Around 8 in 10 of these young people reported having a specific limitation or restriction; most reported having a schooling or employment restriction (67%), and around 1 in 3 (28%) reported having a profound or severe core activity limitation (Figure 4.8.2). When asked about needing assistance with core activities, 17% of those with disability reported that they received assistance, and felt their need for assistance was met; 7% reported that they received assistance but required more; and 3% reported that they needed assistance, but did not get it. The most common disability groups reported for this age group were intellectual (42%), physical restriction (41%) and psychological (30%).
How many accessed disability support services?

Around one-quarter (24%) of the estimated number of young people with disability accessed disability support services: 59,000 young people (15–24) received disability support services funded under the NDA in 2013–14 (ABS 2013; AIHW 2015b). One-half of these young people accessed disability employment services (50%), and just over one-third (37%) accessed community support services (tables S4.8.3 and S4.8.4). The majority of young people who received disability support services reported a pension as their primary source of income—the most common was the Disability Support Pension (44%), followed by ‘Other pension or benefit’ (17%). Paid employment was the main source of income for just 3% of disability support service users in this age group; however, 12% reported being employed (Table S4.8.5).

Of those who received disability support services, 64% were male and 7% were Indigenous. Almost all young people (90%) accessing disability support services were born in Australia. The primary disability group reported by service users in this age group was Intellectual (37%), followed by Autism (18%) and Psychiatric (14%). The majority of service users (67%) reported they lived with family.

As at December 2014, 55,347 young people aged 16–24 were receiving a Disability Support Pension (DSS 2015a).
Child protection

Children and young people who have been, or are at risk of, abuse and neglect may have multiple and complex needs—and the effects of abuse can have a lasting impact on the child, including throughout adulthood. Additionally, evidence suggests that many of these young people may be particularly disadvantaged, living in areas of high social and economic stress (Weatherburn et al. 1997). These young people are also more likely than the general population to come into contact with the criminal justice system (Dennison et al. 2006; Topitzes et al. 2011; Weatherburn et al. 1997), and experience homelessness (Johnson & Chamberlain 2008). As mentioned earlier, the AIHW linkage study between youth justice, homelessness and child protection services also provided evidence of these connections (AIHW 2012).

Child protection system

In Australia, statutory child protection is the responsibility of state and territory governments. Each department responsible for child protection provides assistance to children who have been, or who are at risk of being, abused, neglected or otherwise harmed, or whose parents are unable to provide adequate care or protection (AIHW 2015a). The child protection system covers those who are aged 0–17; young people aged 15–17 are therefore the oldest age group under the child protection system, and require additional support prior to exiting the system.

Supporting young people leaving care is outlined as a priority under the National Framework for Protecting Australia’s Children 2009–2020, in response to the known financial and social costs of poor outcomes experienced by that group (FaHCSIA 2010). Key actions under the National Framework are to create a nationally consistent approach to leaving care; to this end, reforms to the Transition to Independent Living Allowance (TILA) were introduced on 1 January 2014. The TILA is a one-off payment aimed at contributing to the costs of moving to independent living (DSS 2015b). During 2013–14, 1,434 young people aged 15–24 received the TILA, down on the 2,566 young people receiving it in 2012–13 (DSS 2014 unpublished data). This fall in the number of TILA payments arose as a result of the January 2014 reforms, which involved a transfer of administration to states and territories to ensure better targeting and greater reach of the payment. Initially, however, this resulted in a decrease in applications as jurisdictions established their own internal processes. The Department of Social Services is currently working with the states and territories to ensure that retrospective payments are made to people who were unable to claim during this time (DSS 2014 unpublished).

Although leaving-care plans differ in each state and territory, they generally include support for young people who need or want assistance with: staying in or returning to study; applying for jobs; finding accommodation; re-connecting with family; financial supports; and maintaining independence if the young person has already left state care.

Supporting those who are discharged from the child protection system is crucial in reducing the risk of further disadvantage, as evidence shows that these young people are at increased risk of entering the criminal justice system, or homelessness, when compared with the general population (AIHW 2012).
How many young people aged 15–17 are involved in the child protection system?
Nationally, in 2013–14, there were 16,186 children aged 15–17 who received some form of child protection service, which equates to 18.7 young people per 1,000 in the population (AIHW 2015a). Of those, 3,065 (or 3.5 per 1,000) were subjects of substantiated abuse or neglect. There were 789 young people aged 15–17 admitted to care and protection orders during the year, bringing the total number of young people in this age group on a care and protection order to 7,007 at 30 June 2014. In addition, within this age group, 6,301 were living in out-of-home-care at 30 June 2014 (Figure 4.8.3). (For more information see Chapter 3 ‘Child protection in Australia’.)

Indigenous young people are over-represented in the child protection system. In 2014, 5% of young people aged 15–17 were Indigenous; however, Indigenous young people made up 23% of those in child protection services (Table S4.8.6a). Indigenous young people were therefore 6 times as likely as non-Indigenous young people to be under the child protection system (rate of 81 per 1,000 compared with 14 per 1,000).

Of the 7,007 young people aged 15–17 on care and protection orders at 30 June 2013, the majority were in home-based out-of-home-care (62% or 4,314). Of all the age groups on care and protection orders, those aged 15–17 were the most likely to be living independently (97% of all children on care and protection orders).

As would be expected, due to the upper age limit of 18 for treatment as a child under the child protection system, those aged 15–17 were also the most likely to be discharged from out of home care—making up one-third of all young people discharged during the year (37% or 3,124 young people).

Victims of violence
Violence can occur in many forms, and may be inflicted by a family member, domestic partner, an acquaintance, or a stranger. Violence can have a variety of short- and long-term physical and psychological effects. For example, young people who are victims of violence are at an increased risk of acquiring an injury, disability or mental health disorder compared with those who do not experience violence. Additionally, research suggests that people who are victims are more likely than non-victims to report decreased occupational functioning and disruptions to social functioning (Hanson et al. 2010).
Victims of violence are also more likely than the general population to engage in delinquent behaviour and are therefore at greater risk of entering the criminal justice system, which can further limit social and economic opportunities (Topitzes et al. 2011). Interestingly, evidence also suggests that young people who are involved in the criminal justice system are also more likely to already be, or become, victims of crime when compared with the general population (Lauritsen et al. 1991; Smith & Ecob 2007).

Support for victims of violence
In each state and territory there is a range of services aimed at supporting people who are victims of violence—these include counselling, court and legal support, financial assistance and crisis accommodation. At a national level, the Australian Government provides financial support specifically for victims of family and domestic violence.

In 2013–14, specialist homelessness services provided assistance to 16,674 people aged 15–24 who were experiencing domestic and family violence. Of these, the majority (80%) were female (Table S4.8.7).

How many young people are victims of violence?
The Australian Bureau of Statistics (ABS) estimates that in 2013–14 around 5% of the Australian population were victims of assault (physical assault and threatened assault). However, the victimisation rate was highest for the younger age groups, with 7% of young people aged 15–24 estimated to be victims of assault in 2013–14. The most common type of assault for this age group was physical assault, followed by face-to-face threatened assault. Of those who were victims of assault, nearly 6 in 10 (59%) reported that they were victims of more than one incident. Further, around 6 in 10 victims of physical assault aged 18–24 believed that alcohol or other substances contributed to their most recent incident of assault (ABS 2015a), highlighting the need for health and welfare services to target substance and alcohol issues.

Criminal justice
Young people involved with the criminal justice system may be particularly vulnerable, as evidenced by their involvement in multiple health and welfare areas. These young people are more likely than the general population to have experienced homelessness, come under the child protection system (AIHW 2012) and have a high prevalence of intellectual disabilities, learning disorders and mental health issues (Dowse et al. 2011; AIHW 2013). People in the justice system also have a high prevalence of health issues, including asthma and hepatitis (AIHW 2013). Further, involvement with the criminal justice system at earlier ages is linked to continued and more serious involvement later in life (AIHW 2013). This highlights the need for an evidence-based early intervention model.

One possible early intervention model is known as the ‘justice reinvestment’ model, which aims to provide services within the community to support individuals, with the aim of reducing criminal behaviour and re-offending. A Senate inquiry into the value of justice reinvestment recommended that the Commonwealth Government takes a leading role in providing an evidence base for justice reinvestment, and supporting the implementation of justice reinvestment programs in Australia (Senate 2013).
Young people and the justice system

Young people aged 15–24 who commit or allegedly commit a crime may be dealt with under either the youth or adult criminal justice systems. The upper age limit for treatment under the youth justice system is 17 in all states and territories except Queensland, where the age limit is 16. However, some young people aged 18 and over may be supervised under the youth justice system due to their vulnerability or immaturity, or due to the ‘dual track’ system operating in Victoria—for further information on the youth justice system, see the AIHW report Youth justice in Australia 2013–14 (AIHW 2015c). Nevertheless, the majority of those aged 18 and over who are sentenced to supervision are supervised by the adult criminal justice system.

How many young people are involved in the criminal justice system?

Of the total offending population, the number and rate of offending is highest for those aged 15–24. In 2013–14, there were 153,000 young offenders—or 506 per 10,000 young people aged 15–19, and 479 per 10,000 aged 20–24 (ABS 2015b). Following this peak, the rate of offending falls steadily with increasing age (340 per 10,000 for those aged 25–29, 288 per 10,000 for those aged 30–34, decreasing to 14 per 10,000 for those aged 65 and over). The higher rates of offending for the younger population illustrates the need for programs targeting young people who are at risk of offending.

How many young people under justice supervision?

The AIHW collects data on all young people under youth justice supervision. While the majority of those under youth justice supervision are aged under 18, young people over 18 may be supervised due to their immaturity or vulnerability. (For information, see Chapter 3 ‘Young people aged 10–14 under youth justice supervision’.)

During 2013–14, there were 8,027 young people aged 15–24 under youth justice supervision (excluding Western Australia and Northern Territory), with 6,364 or 79% of these being 15–17. Of all people aged 15–24 under supervision, 7,176 experienced community-based supervision, and 3,119 experienced detention (around 28% of young people experienced both types of youth justice supervision during the year) (Table 4.8.1, Table S4.8.8).

Although 51% of young people aged 15–24 in the population are male, males made up 82% of those aged 15–24 under youth justice supervision during the year.

Indigenous young people were also over-represented in the youth justice system. Despite making up only 4% of those aged 15–24 in the population, Indigenous young people made up 31% of those aged 15–24 under youth justice supervision in 2013–14 (Table S4.8.9).

Young people aged between 18 and 24 who are dealt with under the adult criminal justice system and sentenced to detention are usually sentenced to an adult prison. At 30 June 2014, there were 5,985 people aged under 25 in an adult prison (ABS 2014b). The vast majority of these (94%) were male, and 40% were Indigenous.
Table 4.8.1: Number of young people aged 15–24 involved with the criminal justice system in 2013–14

<table>
<thead>
<tr>
<th>Type of criminal justice system involvement</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under youth justice supervision</td>
<td>8,027</td>
</tr>
<tr>
<td>Supervised in the community</td>
<td>7,176</td>
</tr>
<tr>
<td>In detention</td>
<td>3,119</td>
</tr>
<tr>
<td>In an adult prison at 30 June 2014</td>
<td>5,985</td>
</tr>
</tbody>
</table>

Note: Youth justice supervision total is not the sum of its components because 2,268 young people experienced both detention and community-based supervision during 2013–14.
Sources: Table S4.8.6; Juvenile Justice NMDS 2014; ABS 2014.

Homelessness within the young prisoner population
A large proportion of prisoners report having come from, or entering into, homelessness. Of all prison entrants surveyed over a 2-week period in mid-2012, those aged 18–24 were the most likely to report having lived in short-term or emergency accommodation in the 4 weeks prior to prison entry (32% or 73 young people). Around 6% (13 young people) reported living rough, with around 63% (144 young people) reporting having lived in their own accommodation. Over the same 2-week period, prison discharges were asked where they expected to sleep on their first night out of prison. Of discharges aged 18–24, just over one-half reported that they would be in short-term or emergency accommodation (53% or 41 young people) rather than their own accommodation (42% or 32 young people), with 2% expecting to sleep rough (AIHW 2013).

These prison entrants and discharges are likely to have accessed specialist homelessness services prior to entry, or upon discharge—in 2013–14, 1,585 clients of specialist homelessness services (SHS) aged 15–24 reported they had recently exited from custody (Table S4.8.10). For more information on the characteristics of SHS clients see Chapter 7 ‘The diversity of Australia’s homeless population’.

Mental health issues within the young prisoner population
People in prison are more likely than the general population to have a mental health condition. In the general population, an estimated 26% of 16–24 year olds will experience a mental health condition over a 12-month period (ABS 2008). However, in 2012, around 30% of prison entrants aged 18–24 and 29% of those preparing to leave prison reported having ever been told they had a mental health condition (AIHW 2013).

Unemployment on entry to and exit from prison
In 2012, almost 6 in 10 prison entrants aged 15–24 (57%) reported being unemployed in the 30 days before entry into prison. Only 1 in 5 (20%) reported having full-time work. Similarly, of those preparing to leave prison, 31% reported expecting to have paid employment within 2 weeks of leaving prison, but 52% reported expecting no paid employment.
Young people and specialist homelessness services

Young people experiencing homelessness may be particularly vulnerable and have multiple and complex needs which led to their homelessness (see Chapter 7 ‘The diversity of Australia’s homeless population’). For example, homelessness may arise from family conflict or breakdown, which may include violence and experiences of the child protection system (AIHW 2014d). Additionally, there is some evidence to suggest that the younger a person is when they first become homeless, the more likely they are to have longer lifetime durations of homelessness (Scutella et al. 2013). This potential for multiple instances of welfare sector involvement highlights the potential benefits of effective early intervention in improving wellbeing outcomes for young people.

Homelessness services

Governments across Australia fund a range of services to support people who are, or who are at risk of becoming, homeless. These services are delivered by non-government organisations on behalf of government, and include agencies that deliver services to target groups, such as young people or people escaping domestic violence (AIHW 2014d).

How many young people access specialist homelessness services?

In 2013–14, 57,557 young people aged 15–24 accessed SHS—around 2% of the 15–24 population (AIHW 2014c). Most young people who presented to SHS agencies were female (63%), and around 1 in 4 were Indigenous (24%) (Table S4.8.11a). For detailed information on homelessness within the Indigenous population, see Homelessness among Indigenous Australians (AIHW 2014c).

Further, most young people presenting to SHS presented alone (44,414 or 77%), with the remaining 23% (13,143) presenting with a child or other people (Table S4.8.11b). The main reasons for seeking assistance were ‘Housing crisis’ (17%), ‘Domestic and family violence’ (15%), ‘Inadequate or inappropriate dwelling conditions’ (14%), ‘Relationship/family breakdown’ (11%) and ‘Financial difficulties’ (11%) (Table S4.8.12). Of those whose homelessness status was known at the start and end of SHS support, 14,495 (47%) reported that they were homeless at the start of their support period—however, following support, 4,939 of these young people were housed (Table S4.8.13).

Some of these young people were involved with other sectors that are associated with vulnerability. Around 3% of those who accessed SHS reported they were exiting custody, and 3% reported exiting care (Table S4.8.10). Also, almost 1 in 10 (8%), of young people aged 15–17 accessing SHS reported that they were on a care and protection order (Table S4.8.14).

Almost three-quarters (71%) of those accessing SHS services reported an allowance or a pension as their main source of income (Table S4.8.15). The main sources of income reported by young people accessing SHS were Youth Allowance (30%), Parenting Payment (19%) and Newstart (14%). Only around 6% of young people reported an employee income as their main source of income.

(In interpreting these figures, readers should take into account that 24% of young people did not provide a response when asked about their main source of income).

Conclusion

In light of the results outlined in this article, the aims of the Australian Government’s recent Review of Australia’s Welfare System are highly relevant to the problems experienced by vulnerable young people. Supporting social and economic participation through measures that build family capability and provide incentives to undertake education, training and/or work, have the potential to be particularly beneficial.
What is missing from the picture?

In addition to the overlap of clients within various welfare sectors, there are clear links between disadvantage and health outcomes. This highlights the potential for significant overlap of clients between health and welfare sectors (AIHW 2014b) and suggests that solving welfare issues may also lead to reduced contact with the health sector, and vice versa.

Knowing the number, characteristics and needs of young people who access multiple levels of health and welfare services will assist in informing targeted services and interventions, reducing future sector involvement, and improving outcomes for vulnerable young people. This in turn will allow governments to provide a more efficient and effective welfare system. A comprehensive view of multiple service users can be achieved by data linkage among a range of health and welfare datasets. Data linkage has the capacity to highlight how and when these areas overlap.

The AIHW currently has several linkage projects in train. These aim to identify and analyse the characteristics and experiences of multiple service users, and those who are most at risk of future sector involvement. Current projects include developing a method to link child protection and youth justice data on an annual basis, and linking out-of-home-care to educational outcomes data. The AIHW also has the capacity to link national child protection and disability services data, which would allow for a further understanding of the associations between these two areas, building on the results of previous limited research.

Further linkage work following the pilot study on the overlap between child protection, youth justice and homelessness (AIHW 2012) could provide further understanding of the experiences of young people who move between these sectors.

In summary, all of these linkage studies could further identify current levels of cross-sector involvement, and the individuals who are most at risk of harm, limited social and economic opportunities, poor educational and health outcomes and future involvement with the health and welfare systems.

Finally, while this article provides a brief insight into some young people who are considered vulnerable, not all vulnerable groups are covered, due to limited data availability. These groups include lesbian, gay, bisexual, transgender and intersex young people, unaccompanied minors and young refugees, siblings of young people with disabilities, and unsupported pregnant teenagers. Also, data relating specifically to Indigenous young people were not available for all sections in this article.

Where do I go for more information?

More information is available at the links below.

All AIHW publications are available for free download at www.aihw.gov.au/publications/.
References
AIHW 2013. The health of Australia's prisoners. Cat. no. PHE 170. Canberra: AIHW.
AIHW 2014b. Child social exclusion and health outcomes: a study of small areas across Australia. Cat. no. AUS 180. Canberra: AIHW.
AIHW 2015b. Disability support services: services provided under the National Disability Agreement, 2013–14. AIHW bulletin no 130 Cat. no. AUS 192. Canberra: AIHW.


FaHCSIA (Department of Families, Housing, Community Services and Indigenous Affairs) 2010. Transitioning from out of home care to independence. Canberra: FaHCSIA.


