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Missing persons: Who is at risk?

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Introduction

Between 2008 and 2015, over 305,000 missing persons reports were made to Australian state and territory police, with an average 38,159 reports each year over this time period (Bricknell & Renshaw 2016). Despite the numbers reported missing, there is still a limited understanding of the phenomenon, in particular the susceptibility among different population groups to go missing and the risk of harm while the person is missing. Most of the missing person research to date has focused on children and young people (see, for example, Biehal & Wade 1999; Hill et al. 2014; Patterson 2007), particularly the latter, who are consistently over-represented in the missing person population (Bricknell & Renshaw 2016; Henderson, Henderson & Kiernan 2000; James, Anderson & Putt 2008; National Crime Agency & UK Missing Persons Bureau 2014; Sedlak et al. 2002; Tarling & Burrows 2004). There has been much less attention on missing adults, other than descriptions of general characteristics such as age, gender and ethnic background and some examination of outcomes.

In 2008 the Australian Institute of Criminology (AIC) released a comprehensive study on missing persons in Australia, which presented national data on at-risk groups and identified best practice related to prevention, early intervention, referral processes and support services (James, Anderson & Putt 2008). This report followed an earlier AIC study that examined the incidence and impact of missing person events (Henderson & Henderson 1998). The current study, commissioned by the National Missing Persons Coordination Centre (NMPCC) of the Australian Federal Police, updates missing person statistics (first published in Bricknell and Renshaw 2016) and describes the extent to which known risk factors correlate with categories of missing persons.

Definitions

A missing person is defined in Australia as:

Anyone who is reported missing to police, whose whereabouts are unknown, and there are fears for the safety or concern for the welfare of that person (NMPCC n.p.)

State and territory police have implemented their own operational definition of a missing person based on the national statement. Each definition emphasises the dual conditions of whereabouts being unknown and genuine concerns for safety and welfare existing.

Police services also employ additional operational terms to describe specific categories of persons otherwise missing. The category 'Absent' is used in some jurisdictions to record persons whose whereabouts are unknown but whose circumstances indicate there are no serious concerns for either the safety or welfare of the person in question. 'Absconder' is a general term applied in some jurisdictions to persons who are reported absent or missing from a health or care facility (such as a hospital, mental health care facility or aged care facility) or wards of the state absent or missing from out-of-home care.

The Australian definition of a missing person also includes a person, deceased or living, who comes into contact with police but whose identity is unknown.

'Long-term missing' refers to persons who remain missing after a sustained period of time. The standard definition of a long-term missing person in Australia refers to those missing for more than three months.

Methods

The study was confined to the collection of quantitative and qualitative data from Australian state and territory police and Commonwealth government agencies, with reference to the Australian and international missing persons literature.

Quantitative data

Only police data were collected for the purposes of this study. Australian state and territory police provided data for the years 2007 to 2015 against an established data collection form developed by the NMPCC. The data collection form was revised to include additional data items that had not been previously collected by the NMPCC, although most jurisdictions were unable to populate these data items. Data quality was highly variable and affected the time series coverage and comprehensiveness of the final data collection. Specific data issues identified related to inconsistency in definitions of key data items, jurisdictional differences in data recording practices and jurisdictional variation in the data items recorded or provided to the study.

Six of the eight jurisdictions provided aggregate data against the data item list and two jurisdictions provided unit record data. The predominance of aggregate data in the data collection substantially restricted the types of analyses that could be undertaken, limiting the study to basic descriptive statistics. Only unit record data from Queensland and the Northern Territory could be interrogated more fully, although these data were not provided using the agreed data items. Similar limitations with police data were described by James, Anderson and Putt (2008). The current status of the data inhibits exploration of research questions that have been investigated in the international literature.

Qualitative data

Twelve semi-structured interviews were conducted with representative officers from the eight state and territory police services responsible for missing person cases and personnel from the Australian Federal Police (AFP), Attorney-General's Department, Department of Foreign Affairs and Trade and International Social Service Australia. The interviews were led by personnel from the NMPCC with AIC research staff in attendance. Each agency was asked to describe current agency knowledge about specific groups at risk of going missing, evidence for changes in vulnerability status (including emerging vulnerable groups) and the adoption of new operational or investigative procedures. Interviews were audio recorded with the permission of interview subjects.

Characterising missing persons

The classification of missing persons

Multiple classification systems have been developed to categorise missing persons and operationalise responses. An often-cited classification is the missing continuum developed by Biehal, Mitchell and Wade (2003). The act of going missing is defined as ‘a break in contact which either the missing person or someone else defines as missing’ (Biehal, Mitchell & Wade 2003: 2) and which may be intentional or unintentional.

Persons who go missing intentionally comprise two primary groups: those who decide to leave and those who drift (Biehal, Mitchell & Wade 2003). The former group includes individuals who resolve to leave and do not tell family or close affiliates of that decision. Such individuals may choose to go missing because of family, financial or related tensions and/or because of their mental health status (for example, they decide to leave to commit suicide). The second group—those who drifted—refers to people who do not consciously choose to break contact but nonetheless make the decision to move away or not come back. Biehal, Mitchell and Wade (2003: 3) describe this loss of contact as ‘less purposeful’ and relates to individuals who depart or follow a transient lifestyle and do not have the need, inclination or thought to tell others they are leaving.

Towards the other end of the missing continuum are the ‘unintentional missing’. The unintentional missing comprise those who have wandered, become lost or are otherwise unaware they are missing, such as persons with dementia or an intellectual disability or those who are reported lost after a significant event (eg a natural disaster) or during recreational pursuits (eg bushwalking, fishing). It also includes the ‘forced missing’—the missing murdered and other victims of crime taken against their will.

Based on the findings from case file analysis and follow-up interviews with missing persons (n=294), Biehal, Mitchell and Wade (2003) estimated that the majority of the adult missing person population decide to go missing. Just under two-thirds (64%; n not specified) went missing because of relationship breakdown, financial difficulties, family and domestic violence or to attempt suicide. A fifth (19%) had drifted and 16 percent unintentionally went missing (due to dementia, mental health issues or accident/harm). Just one percent of the missing population was forced missing.

The same research also indicated that most children and young people decide to go missing (70%; n not specified). Like adults, the decision to leave was related to relationship breakdown, mental illness or suicidal ideation but many were described as runaways, escaping conflict or physical or sexual violence that was occurring in the home. A tenth unintentionally went missing after their parents separated or divorced, their missing person status inferred after a parent had tried to renew or had been denied contact with their child(ren). The proportion of children and young people categorised as forced missing was higher than for adults (8% vs 1%). Among this group, some had been forced to leave, were abducted by a parent or had been thrown out of home. Four percent of missing children and young people had drifted or lost contact with other family members when their family moved away or after they had left out-of-home care placements.

James, Anderson and Putt (2008) identified social indicators and other risk factors for young and adult missing persons as they aligned with different categories of the missing continuum. Parent-child conflict, parental separation, family and domestic violence, alcohol and illicit drug use, problems at school, bullying, peer pressure and mental illness were associated with children and young people who had decided to leave or had drifted. Unintentional missing episodes were characterised by alcohol and illicit drug use or experience of sexual abuse and forced missing episodes by parental divorce/separation and child custody issues. Adults who decided to go missing or drifted had experienced personal crisis, financial problems, bereavement, alcohol and illicit drug use and/or mental illness. Adults missing unintentionally left due to mental illness or family and domestic violence.

Lost-Missing-Murdered

A more recent classification system endorsed by the Australia New Zealand Policing Advisory Agency (ANZPAA) and adopted in Australia classifies missing persons into one of three categories—lost, missing and murdered (see Table 1). This classification system is used to differentiate missing events where the person reported missing is the primary concern (ie those lost or missing) and those where the circumstances indicate the suspected commission of a serious crime (ie those murdered).

Table 1: Categorisation of missing persons	
Lost	
Lost	Lost includes a person who has control over their actions and is temporarily disorientated and wishes to be found (for example, a bushwalker gone missing, or a person lost at sea)
Wandered	Wandered includes an infant or young child, a person suffering physical or mental incapacity as to be wholly or substantially reliant upon others for support or survival, or missing from mental or social care facilities and who poses a danger to themselves or to others by being unaccounted for
Missing due to an event	Missing due to an event includes a person who is missing due to an unexpected event (for example, a natural emergency or unexpected weather event)
Missing	
Voluntary missing	Voluntary missing includes a person who has control over their actions and who has decided upon a course of action, for example runaway child; or a person whose absence is not suspicious (a suspected suicide)
Involuntary missing	Involuntary missing includes a suspected crime such as abduction, suspicious and unusual circumstances, or someone who is missing against their will
Unidentified living person	Unidentified living person occurs when a person comes into the care or custody of police or another government service provider but who has not been identified
Unidentified human remains	Unidentified human remains, where remains (whole or part) have been discovered but their identity is unknown
Murdered	
Missing murdered	Missing murdered is where there are reasonable grounds to suspect the person has been murdered.

Source: Australia New Zealand Policing Advisory Agency (ANZPAA) 2015

Lost

‘Lost’ refers to those who have control over their actions but have found themselves in circumstances or an environment that has disoriented or incapacitated them. This group comprises the unintentional missing described by Biehal, Mitchell and Wade (2003), who are reported missing after failing to return from a planned activity or whose whereabouts are unknown due to an unexpected significant incident. The lost category also comprises those who have wandered, such as children or persons with a cognitive impairment or mental illness, who are reliant on others for their care and wellbeing. The latter includes residents of mental health or aged care facilities who leave without permission or knowledge of family or facility staff and may be at risk of harming themselves or others.

Missing

'Missing' includes the voluntary missing (ie the person has control over their actions and/or decision making and their absence is not suspicious) and the involuntary or forced missing (ie it is suspected the person has gone missing against their will and may be the subject of a serious crime). The 'missing' category encapsulates the decided, drifted and forced missing categories of Biehal, Mitchell and Wade's (2003) missing continuum. Any unidentified living person who comes into the care or custody of police or another government service provider may also be designated 'missing', as are unidentified human remains.

Murdered

'Murdered missing' refers to missing persons situations where there are reasonable grounds to suspect the person has been the victim of a homicide.

National consistency and coordination of response

The issue of missing persons continues to be one that requires national consistency and coordination. The National Missing Persons Coordination Centre was established in 2006 to drive national coordination in response to missing persons in Australia, and to complement the investigative role of state and territory police.

The key functions of the NMPCC are to coordinate national police efforts and to educate the Australian community to prevent the incidence and impact of missing persons in Australia. This is primarily achieved through the biannual Police Consultative Group on Missing Persons (PCGMP), chaired by the AFP, and represented by all state and territory police Missing Persons Units.

Since 2015 the PCGMP has:

- produced *Missing Persons—A Policy for Australian Policing*, to foster mutual agreement to ensure national coordination and best practice in the investigation, profiling, and management of missing persons in Australia. The policy for the first time defined a missing person in Australia (and parameters around long-term missing persons); identified categories of missing persons; and introduced procedures around missing persons in Australia, child abductions, and Australians missing overseas;
- endorsed the establishment of a public missing persons register for all long-term missing persons at www.missingpersons.gov.au;
- with the Department of Foreign Affairs and Trade, established and endorsed the Australians Missing Overseas protocol, to ensure nationally consistent reporting and responses to Australians missing abroad; and
- administered the national rollout of the Facebook Amber Alert child abduction system in the immediate response to child abduction in Australia.

Missing persons in Australia—a 2015 snapshot

In 2015, 40,580 missing person reports were received by Australian state and territory police. The national rate was 168 reports per 100,000 population, a 12 percent increase in the rate of reporting since 2005–06 (150 per 100,000; James, Anderson & Putt 2008). Reporting rates in 2015 varied considerably across jurisdictions, from 26 per 100,000 in Tasmania to 654 per 100,000 in South Australia. Some of this variation reflects real differences in the number of reports made to police across the jurisdictions as well as state and territory police practices in recording matters as a missing person case. James, Anderson and Putt (2008) also described marked jurisdictional differences in rates of reported missing, with much higher rates recorded in South Australia and the Australian Capital Territory. Trend data covering the period 2008 to 2015 are described in Bricknell and Renshaw (2016).

Similar proportions of missing person reports received in 2015 related to males (51%; n=20,134) and females (49%; n=19,117; see Table 2). Young people aged 13 to 17 years comprised almost half of all missing person reports (49%; n=19,082), four times the rate of children and adults. The next most common age group reported missing were adults aged 25 to 34 years (11%; n=4,090). Children and other adults made up 10 percent or less of all reports received by state and territory police in 2015.

Almost all persons who were reported missing in 2015 were located, the majority alive. Ninety-eight percent (n=17,389) of missing person reports from New South Wales, Queensland, Tasmania and the Australian Capital Territory (ACT) resulted in the person being found alive (data were not available for other jurisdictions). Less than one percent (0.6%; n=107) were found deceased. Two percent of reports (n=347) related to people who had not yet been located by the end of 2015.

Two-thirds of reports (64%; n=17,603) received in New South Wales, Victoria, Queensland, Tasmania and the ACT were resolved within 48 hours and another fifth within a week (22%; n=6,071). People reported missing in less than one percent of reports were located after three months, the cut-off period that denotes the long-term missing.

Table 2: Missing person characteristics, 2015		
	n	%
Gender^a		
Male	20,134	51.3
Female	19,117	48.7
Total	39,251	100.0
Age group^b		
0–12	3,011	7.7
13–17	19,082	48.8
18–24	3,861	9.9
25–34	4,090	10.5
35–44	3,621	9.3
45–59	3,025	7.7
60+	2,385	6.1
Total	39,075	100.0
Location status^c		
Alive	17,389	97.5
Deceased	107	0.6
Not yet located	347	1.9
Total	17,843	100.0
Time frame located^d		
<48 hours	17,603	64.0
<1 week	6,071	22.1
<1 month	2,990	10.9
>1 month	653	2.4
>3 months	172	0.6
Total	27,489	100

a: Excludes data from WA and 48 reports from other jurisdictions where gender was not recorded

b: Excludes data from WA and 224 reports from other jurisdictions where age was not recorded

c: Includes data from New South Wales, Queensland, Tasmania and the ACT only

d: Includes data from New South Wales, Victoria, Queensland, Tasmania and the ACT only. Excludes 489 reports where the location timeframe was not recorded or the person had not been located

Source: State and territory police data

The application of risk and measurement of vulnerability

The assessment of risk for missing person incidents is critical. Risk assessment is ‘the key determinant for the level of investigative activity that follows’ yet remains sensitive to subjectivity and inconsistency (Vo 2015: 25). The uniqueness of missing person incidents and the small number of incidents that result in adverse outcomes complicates the identification of who is at greatest risk of harm. Professional judgement has subsequently been the de-facto method to assess risk (Newiss 2004). Risk assessment tools and risk matrices were introduced to improve consistency, prioritisation and identification of harm but few have been formally evaluated.

Police risk assessment

Each missing persons report received by police in Australia is assessed for known risk factors relating to the individual, the circumstances and the environment in which the person went missing. The level of risk and other known factors around the missing event direct the approach taken by police to investigate each incident and the notification and contribution of specified divisions within the agency to the response.

The information collected by police about the missing person and the form and application of risk assessment tools differ across state and territory police services. Six of the eight police services use multi-indicator assessment forms that vary in the detail of information collected and the method used to allocate the level of risk. The New South Wales Police Force applies a risk matrix to determine the likelihood and consequence (ie harm) of identified risk factors to calculate the overall risk rating for each incident (using a 5 point scale from extreme to low risk). Victoria Police and ACT Policing use a weighted system of indicators to designate high and medium risk incidents. The Queensland Police Service designate incidents as high risk if any one of a specified list of 18 risk factors is recorded. Tasmania Police and Northern Territory Police do not currently employ a formal risk assessment framework, although they rely on known indicators to identify high risk cases.

Risk factors applied by all or most state and territory police services (excluding Tasmania Police and Northern Territory Police) refer to the following characteristics of missing persons:

- known mental, cognitive and physical condition;
- intent to self-harm or attempt suicide;
- drug and/or alcohol dependence;
- need for essential medication;
- experience of family and domestic violence or other serious family conflict and abuse;
- education, employment and/or financial issues; and
- likely exposure to inclement weather conditions.

Each of these risk factors is denoted as high risk in at least one of the three jurisdictions that rank risk factors (New South Wales, Victoria and the ACT). Of note is that only one of the aforementioned risk factors—being a victim of family and domestic violence—represents an indicator of extreme risk in the (proposed) New South Wales risk assessment framework. Other extreme risk factors in the New South Wales Police Force risk matrix relate to the missing person being subject to a significant crime or violent, sexual or racist attack; their links to organised crime; whether they are a police or prosecution witness—each of which suggests an elevated risk of homicide or other violent victimisation—or being a child aged nine years or under.

Victoria Police provided data on the number of reports in which individual risk factors were identified. As the data were in aggregate form, it was not possible to calculate the number of reports which had multiple risk factors or the number that indicated a high risk case. It was also not possible to identify whether specific patterns of risk factors were associated with specific demographics or vulnerable groups, as had been undertaken by James, Anderson and Putt (2008). Instead the data were used to compare the weighting scheme used for the 22 risk indicators, and the number and proportion of reports in which these risk factors were identified, to examine the relationship between incidence and assessed levels of vulnerability (see Table 3). The risk indicators comprised personal characteristics that may heighten vulnerability if the person went missing, potential reasons for going missing, population groups with a higher propensity to go missing, and situations that suggested the person had gone missing.

The risk factors with the highest incidence among the 43,663 missing person reports recorded by Victoria Police between 1 January 2011 and 31 December 2015 were:

- Indicator 8—vulnerability due to age or infirmity (49% of reports; n=21,208);
- Indicator 10—known physical illness, disability or mental health condition (35%; n=15,110);
- Indicator 12—client of Victorian Department of Human Services or other care facility or special accommodation (33%; n=14,576);
- Indicator 3—risk of self-harm or suicide (18%; n=7,812); and
- Indicators 5 and 6—known to have left personal belongings behind (15%; n=6,738)/ Reported to the police by a non-resident other (15%; n=6,732).

Four of these indicators (Indicators 3, 5, 6 and 8) imply high risk or, in the words of the Victoria Police risk assessment form, 'the risk posed is immediate and there are substantial grounds for believing that the missing person or the public is in danger'. Further, three indicators (Indicators 8, 10 and 12) specify age-related or physical, cognitive, mental health or psychiatric conditions associated with identified vulnerable groups.

Almost half (49%; n=21,208) of all missing person reports received by Victoria Police identified age- or infirmity-related risk and a third (35%; n=15,110) noted the existence of a specific debilitating condition; however, the data could not be further interrogated to determine the proportion of reports that indicated both risk factors. A third of reports (33%; n=14,576) related to clients reported missing from out-of-home care or mental health or aged care facilities and 15 percent (n=6,732) to persons reported missing by someone they did not reside with, which includes care facility staff. This group of missing persons includes absconders and hence a substantial proportion of recidivist missing persons.

Of the eight indicators denoting high risk, four had an incidence score in the top five most commonly recorded indicators and five indicators had an incidence score in the top 10. Of the other high risk indicators, six percent of reports identified the missing person to have been the subject of serious family conflict or abuse (incidence score of 13), noting that five percent of reports also indicated the missing was either a victim or perpetrator of domestic violence (incidence score of 16). Less than one percent of reports indicated the missing person was suspected to be the subject of a significant crime (incidence score of 21).

A subset of missing person risk factors used by Victoria Police was mapped against the missing continuum and ANZPAA classification system. While similar mapping efforts have used information from missing person case files and/or interviews with those that have returned, this exercise illustrates the extent to which the application of risk factors may ascertain the type of missing event. A few of the risk factors clearly aligned with specific categories of missing but most could be distributed across multiple categories. Biehal, Mitchell and Wade (2003) noted similar ambiguity despite their access to more detailed case file notes. For example, missing persons who have been the subject of family conflict or abuse may decide to go missing to avoid further violence or they may have been fatally wounded by that violence. The allocation of persons with a history of mental illness is not straightforward either. Whether someone with a mental illness intentionally or unintentionally goes missing will depend on their state of mind (eg suicidal, experiencing a psychotic event, choosing to abscond from a care facility) and their situation prior to leaving. The data used in this exercise are based on initial risk assessment and hence only indicative of the actual circumstances of the person going missing.

Table 3: Weighting and incidence of risk factors recorded for missing person reports, Victoria, 2011–15 (N=43,663)

Risk factor	n	%	Incidence	Risk factor no.
Vulnerable due to age or infirmity or any other similar factor	21,208	48.6	1	8
Suffering from a physical illness, disability or mental health condition	15,110	34.6	2	10
Currently a client of DHS or other care facility or special accommodation	14,576	33.4	3	12
Likely to cause self-harm or attempt suicide	7,812	17.9	4	3
Known to have left behind personal belongings/ items required for a period of absence	6,738	15.4	=5	5
Reported missing by a person other than someone they normally reside with	6,732	15.4	=5	6
Drug or alcohol dependent	6,248	14.3	7	19
Exhibiting behaviour that is out of character	5,449	12.5	8	15
The presence of circumstances that give rise to an aspect of suspicion or concern	5,106	11.7	9	1
Likely to be exposed to inclement weather conditions that would seriously increase risk to health (especially if a child or elderly person)	3,775	8.6	10	9
Did not complete their last known intended action/keep intended appointment	3,656	8.4	11	22
Known to have previously gone missing and was exposed to harm	3,616	8.3	12	17
The subject of a recent history of serious family conflict/abuse	2,746	6.3	13	4
Subject to other unlisted factors which police consider should influence risk	2,655	6.1	14	21
Known to have school, college, university, employment or financial problems	2,266	5.0	15	20
The victim or perpetrator of domestic violence	2,012	4.6	16	14
Unable to interact safely with others or in an unknown environment	1,769	4.1	17	11
Said to have been last sighted at a point of departure	1,328	3.0	18	18
The subject of ongoing bullying or harassment	819	1.9	19	16
Last seen in or near body of water (reasonable probability person has drowned)	417	1.0	20	7
Involved in a violent, homophobic and/or racist incident or confrontation	262	0.6	=21	13
Suspected to be subject of a significant crime in progress	248	0.6	=21	2

Source: Victoria Police

With these caveats in place, the data suggest that a large proportion of missing person reports in Victoria relate to the voluntary missing, because their current circumstances or dependencies compelled them to leave (see Table 4). While the aggregate nature of the data precludes calculating the proportion of missing person reports characterised by one or more of the relevant risk indicators denoting the decision to leave, it is possible to propose that at least a third of reports described voluntary missing events. This is based on the assumption that the risk indicator describing the care facility status of missing persons largely refers to absconders and other voluntary leavers. Other indicators referring to the likelihood of self-harm, drug and alcohol dependency, the experience of violence, abuse and/or harassment and financial, employment or educational stresses, while not mutually exclusive, suggest the overall proportion of voluntary missing is higher than a third.

Of note is the potentially large number of reports about people who were lost. This category supposes a high proportion of children and the elderly (ie those who have wandered), as well as persons reported lost, and may include a sizeable proportion of reports flagged as involving persons ‘vulnerable due to age or infirmity’. In Victoria children aged 0–12 and adults 60 years and over comprised 16 percent (n=7,201) of missing person reports between 2011 and 2015.

A very small proportion of those reported missing are forced missing. Some victims of family conflict, family and domestic violence or harassment who are reported missing may be the subject of still-to-be-determined foul play. However, the proportion of reports that suggest the missing has been killed, abducted or the victim of other serious crime (0.6%) is consistent with the one percent estimated by Biehal, Mitchell and Wade (2003).

Table 4: Risk factors and missing categories, Victoria, 2011–15

Risk factor	%	ANZPAA missing category	Missing continuum
Vulnerable due to age or infirmity or other similar factor	48.6	Lost Missing (involuntary)	Unintentional
Suffering from a physical illness, disability or mental health condition	34.6	Lost Missing (voluntary)	Unintentional Decided
Currently a client of DHS or other care facility or special accommodation	33.4	Missing (voluntary) Lost	Decided Unintentional
Likely to cause self-harm or attempt suicide	17.9	Missing (voluntary)	Decided
Drug or alcohol dependent	14.3	Missing (voluntary)	Decided Drifted
The subject of a recent history of serious family conflict/abuse	6.3	Missing (voluntary) Missing (involuntary)	Decided Forced
Known to have school/college/university/employment or other financial problems	5.0	Missing (voluntary)	Decided Drifted
The victim or perpetrator of domestic violence	4.6	Missing (voluntary) Missing (involuntary) Murdered	Decided Forced

Table 4: Risk factors and missing categories, Victoria, 2011–15 (continued)

Risk factor	%	ANZPAA missing category	Missing continuum
Unable to interact safely with others or in an unknown environment	4.1	Lost Missing (voluntary)	Unintentional Decided
The subject of ongoing bullying or harassment	1.9	Missing (voluntary)	Decided
Involved in a violent, homophobic or racist incident or confrontation	0.6	Missing (voluntary) Murdered	Decided Forced
Suspected to be a subject of a significant crime in progress	0.6	Missing (involuntary) Murdered	Forced

Data from the Northern Territory categorised reports against the Lost-Missing-Murdered classification. Of the 1,145 missing person reports recorded between 2011 and 2015, 87 percent (n=998) were considered voluntary missing. Just 12 percent (n=141) referred to those who were lost, a little less than the 16 percent estimated by Biehal, Mitchell and Wade (2003) and much lower than the proportion suggested by Victorian data. No reports concerned persons who had been murdered.

Two-thirds of the lost in the Northern Territory were male (67%, n=94). Around 30 percent of lost reports related to children (28%; n=39) or the elderly (30%; n=42), the two age groups assessed at greatest risk of wandering. Males comprised 51 percent of the voluntary missing (n=513) and females comprised 48 percent (n=478; excludes seven reports where gender was not recorded). The majority of female voluntary missing were aged 13–17 years (58%; n=277) compared with just over a third (37%; n=190) of voluntary missing males.

Ninety-eight percent (n=1,119) of missing person reports in the Northern Territory between 2011 and 2015 resulted in the person being located alive. Twenty-five people were deceased when located. Reports about the lost were more likely to result in the person found deceased—five percent compared with one percent of voluntary missing.

Vulnerable groups

While there are inherent risks attached to any missing event, specific population groups are recognised as particularly vulnerable to harm while missing. These include children under the age of 12, young people aged 13–17 years with a known vulnerability, persons with a mental illness (eg anxiety and depression, bipolar disorder, schizophrenia or other psychotic illness), persons expressing suicidal ideation, and those with dementia, an intellectual or physical disability or without lifesaving medication. Additional groups that may be at an elevated risk of harm include persons known or thought to have been last located in potentially life-threatening environmental conditions (eg lost at sea).

Despite these established categories of vulnerable missing, the literature describing the experiences and outcomes of these (and other) groups of reported missing, and its application to operational responses, remains slim. Analysis undertaken for the Grampian Police (Gibb & Woolnough 2007) in the UK describes predicted location time frames and sites for eight groups of reported missing and the factors that need to be considered for each category of missing to implement the appropriate investigative response. Missing groups considered in the analysis included children, children and adults with attention deficit hyperactivity disorder, persons with depression, persons with psychosis or schizophrenia, persons with bipolar disorder or dementia, persons at risk of suicide and persons missing in water.

The UK Missing Person Behaviour Study, which collected data between 2000 and 2011, described similar statistics for a larger number of population groups, including distance travelled, the environment the person was located in and the outcome for the person reported missing. Data from the most recent published study found the highest fatality rates in 2011 among the so-called 'despondents' (ie persons with depression, experiencing stress/distress and/or with the intention to suicide). Fatality rates ranged from 20 to 56 percent depending on the person's gender and the terrain they were found in. However, at least one-fifth of persons with dementia (18%), mental illness (21%) or a known substance abuse issue (30%) were also found deceased. Children, including children with an intellectual disability, had the least adverse outcomes, with a fatality rate of less than five percent and nine in 10 unhurt.

The experiences while missing have also been detailed in a small number of UK studies. For example, among persons reported missing from a selected sample of 17 police areas in the UK in 2012–13 (n=56,661), around 40 percent sought out familiarity by staying with a friend (28%; n not provided), meeting up with a friend or acquaintance (12%) or travelling to a location where they had previously lived (4%; National Crime Agency & UK Missing Persons Bureau 2014). Another eight percent either went to a location they did not have any known connection with (6%) or stayed in a hotel or other similar accommodation (2%). Three percent had 'slept rough'. The vast majority (97%) were assessed as not having experienced any harm while missing. One percent or less had experienced physical injury, accidental harm or sexual assault and one percent had self-harmed. The fatality rate was 0.4 percent of all those reported missing.

Vo (2015) examined the perpetration of, and victimisation from, harm among persons while they were missing compared with three months before they were reported missing and three months after they had been located. The incidence of harm, measured using the Crime Harm Index, which weights the impact of offences related to the harm experienced, was greatest for persons while they were missing and among persons who went missing multiple times (Vo 2015). Males were associated with a greater incidence of harm and were more likely to be a perpetrator of harm, whereas females were more likely to be a victim of harm. Children and young people, particularly those from out of home (or 'local authority') care, had a much higher risk of harm while missing than adults, and were more likely to be perpetrators of harm (Vo 2015). Harms commonly associated with missing incidents related to assault (common assault and assault causing actual bodily harm), shoplifting, criminal damage and other theft. Nonetheless, risk of perpetrating or experiencing harm while missing, irrespective of the demographic examined, was low.

Mental illness and suicidal ideation

Missing persons with a mental illness are at increased risk of harm because their state of mind may place them in unsafe settings and/or because they have gone missing with the intention to self-harm. This group of missing persons may leave voluntarily or involuntarily and may not necessarily comprehend they are considered missing (Biehal, Mitchell & Wade 2003; Stevenson et al. 2013). State and territory police list missing persons experiencing a mental illness as one of the three highest risk groups and one of the larger categories of reported missing with a known vulnerability (personal communication).

Estimates of the missing person population clinically diagnosed with or reported to have a mental health condition range markedly, from 31 percent (Biehal, Mitchell & Wade 2003) to 80 percent (Gibb & Woolnough 2007) of the reported/interviewed missing person population (see Table 5). This variance is affected by the data source (eg records from police or other reporting agency, survey or interview data), whether the condition was clinically diagnosed or disclosed by another authority (eg family) and the health conditions considered (eg, some studies include dementia, which is a cognitive disability).

Table 5: Estimate of missing person population with a mental illness (%)

Percent	Data source	Citation
31	Follow-up survey	Biehal, Mitchell & Wade 2003
46	Police records	Tarling & Burrows 2004
60	Clinical diagnosis	Holmes et al. 2013
62	Interviews	Henderson & Henderson 1998
76	Interviews	Stevenson et al. 2013
80	Police records	Gibb & Woolnough 2007
4–16	Police records ^a	This study

a: Missing person reports made to New South Wales Police Force, Queensland Police Service and South Australia Police 2011–15

The proportion of missing person reports received by Australian state and territory police in which mental health is established as a risk factor are similarly variable but much lower than the proportions cited in the literature. Between 2011 and 2015, 16 percent of reports (n=9,579) in New South Wales related to a person with a known mental illness. In South Australia it was eight percent of reports (n=4,361) but in Queensland just four percent (n=1,254). Data from other jurisdictions were not available, although Tasmania Police indicated that a sizeable but not quantified number of missing person reports received in this jurisdiction related to someone with a mental illness.

Among the missing person population recorded by Queensland Police between 2011 and 2015, males comprised 57 percent (n=716) of reports where it was known the person had a mental illness (see Table 6). A quarter of these males (25%; n=177) were aged between 25 and 34 years when they were reported missing, followed by around a fifth aged 35–44 (22%; n=158) or 45–59 years (20%; n=141). The largest proportion of females with a mental illness were aged 13–17 years (23%; n=121).

Table 6: Missing person reports flagged as ‘mental illness’, by gender and age, Queensland, 2011–15

	Male		Female	
	n	%	n	%
0–12	10	1.4	10	1.9
13–17	84	11.7	121	22.5
18–24	93	13.0	66	12.3
25–34	177	24.7	101	18.8
35–44	158	22.1	100	18.6
45–59	141	19.7	106	19.7
60 and over	53	7.4	34	6.3
Total	716	57.1	538	42.9
Located deceased	12	1.7	5	0.9

Source: QPS Missing persons [data collection]

Qualitative interviews with missing persons in the UK revealed that those with a mental illness went missing to relieve the effects of past or recent trauma and/or because they felt unable to cope with their current situation (Stevenson et al. 2013). For some, the act of leaving created a sense of ‘calm and clarity’, even if it was only for the short-term (Stevenson et al. 2013: 40). Ninety-nine percent of missing persons with schizophrenia or another psychotic disorder recorded by Gibb and Woolnough (2007) were found within 12 hours of being reported missing, whereas the same proportion with a bipolar disorder were located within 71 hours. Among the Queensland sample, 71 percent (n=890) were found within 48 hours and another 14 percent (n=179) within a week. Just two percent (n=28) had been missing more than three months before they were located.

However, this group of missing persons may also experience adverse outcomes. A fifth of persons (21%; n=13) with a ‘psychological illness’ reported missing in the UK in 2011 were found deceased and 16 percent (n=10) were not found at all (Perkins, Roberts & Feeney 2011). In Queensland the fatality rate was considerably lower. Just 17 people (ie 1% of all reports flagged as involving a person with a mental illness) were found deceased, comparable with the overall fatality rate for all people reported missing in Queensland from 2011 to 2015. Seventy percent (n=12) of the deceased were male and 41 percent (n=7) were aged 45–59 years.

Some of the missing persons who have a mental illness leave to commit suicide, although the proportion of completed suicides among the population of missing persons with a mental illness has not been quantified and not every suicide is associated with a mental illness. Australian police data suggest variable rates of intent to commit suicide. For example, 18 percent (n=7,812) of missing person reports in Victoria between 2011 and 2015 referred to intent to cause self-harm. This is similar to the 15 percent (n=54) of persons from a New South Wales sample of 357 missing (Foy 2006) and 16 percent of a random sample of 1,008 missing person cases examined from the UK (Tarling & Burrows 2004). However, two percent or less of reports from New South Wales (0.2%; n=115), Queensland (1.8%; n=564) and the ACT (0.2%; n=11) were recorded as ‘suicide’. Some of this variation may be related to whether the record indicates intent to self-harm (Victoria) or actual harm committed.

The majority of missing persons who suicide are male and middle-aged (Newiss 2011) and have a past history of suicide attempts (65%; Foy 2006). This is also apparent among the Queensland missing person population indicated as suicidal. Between 2011 and 2015, six in 10 reports in which the person was thought at risk of suiciding related to males (59%; n=331), of whom 43 percent (n=141) were aged 35 to 59 years (see Table 7). Females at risk of suicide tended to be younger, with over a quarter (27%; n=62) aged 13–17 years and 46 percent (n=106) aged between 13 and 24 years. Two percent (n=13) of this population were found deceased, 70 percent of which (n=9) were male. All male deceased were aged 35 to 59 years.

Table 7: Missing person reports flagged as ‘suicide’, by gender and age, Queensland 2011–15

	Male		Female	
	n	%	n	%
0–12	2	0.6	3	1.3
13–17	39	11.8	62	26.6
18–24	59	17.8	44	18.9
25–34	82	24.8	34	14.6
35–44	72	21.8	51	21.9
45–59	69	20.8	33	14.2
60 and over	8	2.4	6	2.6
Total	331	58.7	233	41.3
Located deceased	9	2.7	4	1.7

Source: QPS Missing persons [data collection]

Children and young people

Children and young people represent a disproportionate number of missing person reports. Previous Australian estimates indicate triple the number of missing reports related to children and young people for every report concerning an adult (Henderson & Henderson 1998; Henderson, Henderson & Kiernan 2000; James, Anderson & Putt 2008). For comparative purposes, two-thirds (64%; n=77,965) of missing person reports in England, Wales and Scotland in 2012–13 related to children and young people, over a third (36%; n=43,310) to young people aged 15–17 years (National Crime Agency & UK Missing Persons Bureau 2014).

Children aged 0–12 represent a high risk category because their age affects their capacity to respond to an unfamiliar situation or environment. A study of missing-murdered in the UK also found children aged 5–9 years ranked third in their risk of being murdered after going missing (Newiss 2004). Among younger children the risk of harm is heightened as the missing event is often involuntary. There is mandatory reporting in Australia of any missing event involving a child aged 0–12 years and in most jurisdictions a missing person report must be generated for children reported missing to the police. In 2015 the Queensland Police Service replaced Child Abduction Alerts with Amber Alerts, an alerting system first implemented in the US. Amber alerts are enacted in ‘time critical situations’ where a child under the age of 18 is suspected of having been abducted or has gone missing in suspicious or concerning circumstances and they are considered at imminent risk of serious harm or death (QPS 2016: np). In 2017, through the coordination of the NMPCC, all state and territory police announced the national rollout of the Facebook Amber Alert system.

In Australia (excluding South Australia) children aged 0–12 comprised eight percent (n=12,459) of missing person reports in 2011–15. The proportion ranged from five percent (n=30) in Tasmania to 13 percent in Queensland (n=3,909) and 14 percent in the Northern Territory (n=159). The incidence of missing person reports about children decreased in New South Wales from 2011 (7%; n=889) to 2015 (3%; n=296) but remained stable in other jurisdictions and nationally. Data from Queensland show that the majority of children reported missing between 2011 and 2015 were located within 48 hours (72%; n=2,818), with 87 percent (n=3,394) of reports about missing children resolved within a week (see Table 8). Two percent of children were located after three months. No child was found deceased during this five-year period.

Table 8: Location time frame, children and young people, Queensland, 2011–15				
	Children (0–12)		Young people (13–17)	
	n	%	n	%
<48 hours	2,818	72.1	10,972	67.7
<1 week	576	14.7	3,012	18.6
<1 month	247	6.3	1,316	8.1
<3 months	87	2.2	374	2.3
>3 months	92	2.4	306	1.9
Unknown	89	2.3	218	1.3
Total	3,909	100.0	16,198	100.0
Located deceased	0	0	4	1.7

Source: QPS Missing persons [data collection]

Young people aged 13–17 are also considered a high risk group, although their personal circumstances and supposed reason for going missing determines the level of risk attached to each missing event. Half of missing person reports in Australia between 2011 and 2015 (49%; n=73,684) related to young people in this age group. As discussed earlier, most young people appear to decide to go missing (Biehal, Mitchell & Wade 2003) and may be classified as ‘absent’ rather than genuinely ‘missing’.

Children and young people who go missing three or more times are considered a high risk group. For example, three in 10 children involved in a study of runaway children in the UK had been reported missing at least three times (Rees & Lee 2005); an even higher 60 percent among missing children living in the Merseyside region of Liverpool, UK (Mervyn 2004; cited in Shalev Greene 2011). Fifty-one high risk missing children and young people living in Oxford included in a study by Shalev Greene (2011) went missing an average eight times (range=3–53) for a total of 419 missing episodes between mid-January 2005 and mid-January 2006. Females comprised 71 percent of this group.

High rates of recidivism are evident among the Australian population of missing children and young people too (Bricknell & Renshaw 2016; James, Anderson & Putt 2008; Henderson & Henderson 1998). More than two-thirds (68%; n=7,516) of missing person reports in Queensland during 2011–15 related to young people who had been reported missing at least once during the period considered. Males (68%; n=3,209) and females (69%; n=4,307) were equally likely to be reported missing multiple times but the number of times they went missing could not be determined from the data provided. However, data from the Northern Territory showed that 42 percent of persons (n=475) reported missing three or more times were aged 13–17 years, or 13 percent of all missing persons in this age group. The number of times a person was reported missing in one year ranged from three to eight episodes.

Child abduction

The missing continuum proposed by Biehal, Mitchell and Wade (2003) delineates children missing following parental separation as unintentional missing and children missing following parental abduction as forced. A parent may take their child because they want more influence over how the child is raised, they are unhappy with the current parenting or custody arrangements, they fear loss of contact or a breakdown in the relationship with the child or to escape family violence (Newiss & Traynor 2013). Parents with children who drift may also intentionally or unintentionally create the situation where the child is considered missing by the other parent.

The number of children reported missing following parental separation or abduction is not consistently recorded by state and territory police and other data collated by advocacy groups cannot be verified. It is probable that reports to police underestimate this type of missing event, particularly where children are believed missing following parental separation, as parents may seek alternative methods to trace their child (see below). Abductions are less uncertain, although some may not constitute a missing event, where the child's whereabouts and wellbeing can be confirmed or it is known the child is with the other parent.

Nonetheless, child abduction by a parent, another known person or a stranger is a rare event in Australia. Police interviewed for the study noted their agency received few missing person reports involving a suspected abduction and there were no discernible trends in abductions handled by police. In New South Wales, 28 missing person reports from 2011 to 2015 (0.05% of all reports) related to abduction, although the ages of the victims were not specified. Of those, five were parental abductions and the remainder abductions committed by a known (non-parent) or unknown person. In the UK between April 2011 and March 2012, parents committed 17 percent of child abduction incidents and other family members committed two percent (Newiss & Traynor 2013). Larger proportions of child abductions were committed by strangers (42%) or someone known but not related to the child (35%). Among the 54 children reported missing in New South Wales since 1980 and still not located, eight were 'probable' stranger abductions and seven 'possible' stranger abductions (New South Wales Police Force personal communication 7 October 2016). More than three-quarters of these 15 children were female with an average age of 11 years. Younger children were taken from or near their home and older children from public locations.

Australia is a signatory to the Hague Convention on the Civil Aspects of International Child Abduction, the primary international agreement relating to international parental child abduction. The convention is administered by the Australian Central Authority (Attorney-General's Department) and provides assistance to parents seeking the return of or contact with children taken to another country without their knowledge or permission. The Australian Central Authority manages applications submitted by parents for children taken from and to Australia. Australia also holds bilateral agreements with Lebanon and Egypt on this matter.

Between 2011–12 and 2015–16 the Attorney-General’s Department received 399 new applications for assistance to recover 599 children wrongfully removed to or retained overseas by a parent (AGD 2016). The number of new applications for children retained in Australia was 306 for a total of 516 children. Most applications related to parents taking children to New Zealand (range=26–42% of applications per year) or the UK or US (range=20–43%). These were described as relatively ‘straightforward’ to resolve, with the average case finalised within two to three months (AGD personal communication 4 October 2016). Two hundred and ninety-six children were returned to their parent in Australia over the same period, and 271 returned to an overseas based parent.

The proportion of Hague convention cases defined as wrongful removal or wrongful retention was not available to the study, although it was noted from initial case file analysis there had been an increase in wrongful removal cases (AGD personal communication 4 October 2016). Younger children were usually removed by parents and older children retained, although in the latter case sometimes with the apparent consent of the child. Retention cases often coincided with children going overseas with the parent during the holiday season (AGD personal communication 4 October 2016). Bilateral agreement cases comprised a much smaller number of cases managed by the Australian Central Authority and were largely retention cases.

Within Australia, children who are taken by one parent without the permission or knowledge of the other parent may be returned on execution of a recovery order. Recovery orders are court-directed orders enacted under section 67U of the *Family Law Act 1975* (Cth) and coordinated by the AFP for all jurisdictions except Western Australia, where they are administered by Western Australia Police. Recovery orders authorise police (or other approved recovery officer) to locate and return a child, or can be used to prohibit a person taking a child, and are effective for 12 months. Between 1 July 2010 and mid-September 2016 the AFP served 3,007 recovery orders (AFP personal communication 20 September 2016). The majority of children were recovered within 24 to 48 hours of the order being served. A small number of cases started as domestic incidents but progressed to the child being taken overseas. Most of the long-term cases involved children taken overseas. According to the AFP, few cases eventuated in an arrest warrant. Matters involving children listed under a recovery order are not necessarily managed from a missing person perspective, in part because the applicant knows where the other parent is in the majority of cases (AFP personal communication 20 September 2016).

Young people missing from out-of-home care

‘Absconder’ is considered by some police agencies as a pejorative term as it suggests criminal behaviour. However, it continues to be a commonly used phrase to describe children and young people who leave out-of-home care (or other care facility) without permission and whose whereabouts are generally known or confirmed. While absconding is not confined to young people, it is considered to account for a significant proportion of missing person reports for the 13 to 17 year age group. In the UK the category ‘absent’ often denotes events where children are otherwise missing from out-of-home care.

Data from South Australia and the ACT suggest large numbers of absconders in the missing person population—36 percent (n=19,803) and 81 percent (n=4,711) respectively between 2011 and 2015. Data from Queensland suggest much lower numbers. Eleven percent of reports (n=1,832) about young people were flagged as involving an absconder. This compares with nine percent (n=367) of children aged 0–12 years and 0.3 percent (n=45) of adults 18 years and older.

Overseas research indicates that children and young people living in out-of-home care are more likely to go missing than their peers residing in family homes (Abrahams & Mungall 1992; Biehal & Wade 2000; Rees 1993). For example, a study of 200 young people (aged 11–16 years) living in out-of-home care in four (undisclosed) local authorities in the UK estimated between 25 and 71 percent of children, depending on location, went missing overnight on at least one occasion (Wade & Biehal 1998). The majority of children who went missing were aged 13–15 years (average age 13 years) and female (Wade & Biehal 1998). A quarter of this group first went missing before 11 years of age and most were absent once or twice during their residence.

Biehal and Wade (2000) described two distinct ‘patterns of absence’ among young people who went missing from out-of-home care. The first group or the ‘friends profile’ were older, more likely to live in foster rather than residential care, and had fewer missing episodes but went missing for longer periods of time. Two-thirds left on their own, almost all (more than 90%) stayed with family or friends and two-thirds returned voluntarily. The second or ‘runaway profile’ group were younger, lived in residential care, had more frequent but shorter absences and were equally likely to go missing with others or take off on their own. Around half were located with family or friends but almost a third (compared with none of the ‘friends profile’ group) slept rough for at least some of the time they were missing.

The reasons for going missing are thought to be different although not unique to either group. Young people who go missing from out-of-home care are largely rebelling against authority, the friction experienced with staff or other residents, isolation or other socio-environmental factors. Young people who run away from home are also rebelling against authority, in this case from parents or other resident adult figures, but also to avoid more serious family conflict and escape family and domestic violence, physical and sexual abuse. Children and young people who go missing have been referred to in the literature as ‘runaways’ and ‘throwaways’, where runaways are those who choose to leave their place of residence and throwaways are impelled to leave. A fifth of missing young people were categorised by Wade and Biehal (1998) as throwaways.

The outcomes for children and young people while missing are variable. Again, Australian data are only available for Queensland, but all children and young people reported missing in this state between 2011 and 2015 were found alive, although the status of their wellbeing was not recorded. The majority of young people were located within 48 hours of being reported missing (68%; n=10,972) but a slightly larger proportion compared with children were missing for up to a week (19% vs 15%).

The experiences of children and young people reported missing from out-of-home care are not available from the data provided to the study, but other research suggests that many are exposed to harm and/or engage in risky or criminal behaviour. For example, 68 percent of children missing from residential care and 27 percent missing from foster care offended while missing (Biehal & Wade 2000) and 86 percent of children and young people in Shalev Greene's (2011) study of recidivist missing had been arrested at least once. Over a quarter of the arrests (28%; n=110) among young people included in the latter study were for battery, assault and grievous bodily harm, 14 percent for criminal damage and 11 percent each for shoplifting and theft.

Missing young people are also at heightened risk of violent victimisation. High profile cases in the UK and investigations by state police reveal grooming networks where young people (mostly female and predominantly from out-of-home care) are subject to sexual exploitation during repeated missing events. The young people are contacted through social media, provided with cigarettes, money, drugs and alcohol in exchange for sex and, according to investigating officers, are unlikely to perceive or report the behaviour as sexual assault (Victoria Police personal communication 6 October 2016). Police noted the substantial challenges faced by partner agencies to manage the large numbers of young people reported missing from out-of-home care, in particular the habitual or recidivist missing, and protecting them from further exposure to physical and sexual abuse. A number of jurisdictions (for example, Victoria and Queensland) have since initiated whole-of-system responses to the issue (see, for example, Queensland Family and Child Commission 2016).

Other vulnerable groups

Discussions with state and territory police explored vulnerabilities associated with other population groups. Persons with dementia are the fifth of the five high risk groups identified by police and the literature, but the data provided to the study did not specify the number of missing persons reports about this group. State and territory police interviewed for the study suggested more males than females comprised the missing population with dementia. Most were found within 48 hours, although a few (in the larger jurisdictions) died while still missing, due to the environmental conditions they were exposed to. The Safely Home Program in New South Wales and Queensland, a collaboration involving police and Alzheimer's Australia, provides bracelets to dementia sufferers with an inscribed personal identification number and toll free telephone number. Police considered the program had probably assisted in reducing the number of reports and the length of missing episodes. However, they also noted that the program's success relied on dementia patients being registered, which sometimes occurred only when or shortly after the missing report was made.

Indigenous people

Little if any literature has examined missing rates among Indigenous people, other than reports on the high numbers of First Nation women reported missing (and presumed murdered) in Canada, which is the subject of a government inquiry (Canadian Government 2016). Aboriginal and Torres Strait Islander people may represent a distinct group of missing, as a naturally more transient population and one potentially less inclined to report an absence to police. Among the Indigenous community an absence may be just that—understood by the person ‘missing’ and their family as time elsewhere—but in some instances may mask a genuine missing episode. Similarly, there may be reluctance about engaging with police, or cultural mores about public identification of community members, that delay reporting a missing person event to police or contributing to missing person investigations. Instead, there may be a preference to rely on personal networks to locate a missing family member or friend.

Data were available on the Indigenous status of missing persons for New South Wales, Victoria, South Australia and the Northern Territory. The proportion of missing persons reports related to an Aboriginal or Torres Strait Islander person was 27 percent (n=16,315), three percent (n=1,490), 16 percent (n=8,401) and 51 percent (n=580) respectively. Unit record data from the Northern Territory revealed some differences between the Indigenous and non-Indigenous missing population. Indigenous missing persons were less likely to be categorised as lost compared with non-Indigenous missing persons (9%; n=52 vs 14%; n=57) and slightly more likely to be categorised as voluntary missing (91%; n=526 vs 86%; n=349). Fatality rates were the same, at two percent of the Indigenous (n=12) and non-Indigenous (n=10) missing population.

Anecdotal information from Northern Territory Police (personal communication 30 September 2016) noted a trend in missing persons reports about people arriving in town centres (specifically Darwin) for cultural or healthcare obligations but not returning to their communities when expected. Absconding from hospitals and other health clinics was particularly conspicuous, proposed to occur because absconders were away from family support for lengthy periods of time and chose to leave the healthcare facility before the episode of health care had been completed. In the majority of these cases the missing person was eventually located but the length of time until location tended to be longer than average (NT Police personal communication 30 September 2016).

South Australia Police also observed delays in reporting to police, with the Indigenous community often turning to family members to help locate someone thought missing before seeking assistance from the police. This sometimes resulted in delays in reporting of up to three or four months. Transience among community members further complicated the assessment of whether an individual absent for a few days or weeks was genuinely missing or had travelled elsewhere. Police cautioned against the risk of stereotyping periods of absence as usual practice but also the converse risk of treating every absent episode as a missing person event. Consultation with family may then be particularly critical to ascertaining the normalcy of a person’s absence in such episodes.

Family and domestic violence

Family and domestic violence is an indicator of potential harm in missing person risk assessments applied in New South Wales, Victoria, Queensland, South Australia and the ACT. Five percent (n=2,012) of reports in Victoria between 1 January 2011 and 31 December 2015 related to a person involved (either as victim or perpetrator) in family and domestic violence, compared with 1.5 percent of reports (n=901) in New South Wales and 0.5 percent (n=122) in South Australia. Due to the aggregate nature of data provided by these jurisdictions, information on the age, gender or victim/perpetrator status of the missing persons was not available.

State and territory police had not observed any change in the number of missing person reports related to family and domestic violence and the data from New South Wales, Victoria and South Australia indicate no change in incidence over the five-year period to 31 December 2015. However, while the number of reports flagged as family and domestic violence related is small, such cases, according to police, had a higher than average chance of resulting in a fatality—either the victim being murdered by an abusive partner or the perpetrator suiciding.

Discussion

Over the last two decades the profile of persons reported missing in Australia has been largely consistent (Bricknell & Renshaw 2016; Henderson & Henderson 1998; James, Anderson & Putt 2008). More males than females are reported missing except among young people aged 13–17 years, where females predominate. Young people continue to account for around half of the missing person reports received by police in Australia, many of whom are reported missing multiple times. Children represent less than 10 percent of reports. The rate of reported missing has declined for children since the late 2000s but remained constant for young people. Increases, however, were evident among some adult age groups, in particular adults aged 18–24 and 25–34 years. Most reports were resolved within 48 hours and almost all resulted in the person being found alive. Adults were more likely than children and young people to be found deceased or not located at all.

In the same period the population groups identified as particularly vulnerable to missing episodes have remained the same—that is, children aged 0–12 years, persons with dementia, mental illness or an intellectual disability, persons experiencing suicidal ideation and some categories of young people. Vulnerability is primarily associated with a higher risk of being harmed, either because age or cognitive/mental impairment affects competence to respond to an unfamiliar environment, there is intent to self-harm or current circumstances promote risky decision making. Among some high risk groups vulnerability also reflects high incidence, in particular among young people and those with a mental illness.

Data collated for the study provided some insight into the prevalence of missing episodes among high risk groups but data quality issues, as reported in previous Australian studies, restricted the depth of examination. There were no data on persons with dementia and information about other groups was limited to reporting rates, with some additional detail from Queensland and the Northern Territory on outcome indicators.

The prevalence of mental illness among the missing person population was considerably lower than those found in other studies and highly variable across jurisdictions. The fatality rate for missing persons with a mental illness (in Queensland) was also much lower, comparable with the fatality rate for the whole missing person population. Very low fatality rates (again in Queensland) were also recorded for persons who went missing with the intention of committing suicide.

Children comprised less than 10 percent of reports and (in Queensland) three-quarters were located within 48 hours and all found alive. The reported rarity of abduction suggests that most children voluntarily or unintentionally go missing, the latter in situations of parental separation, although it is debatable whether these represent genuine episodes of missing. Young people had characteristically higher rates of multiple missing episodes, with 42 percent of young people reported missing in the Northern Territory falling within the high risk category of going missing three or more times in 12 months. The majority of young people were still found within 48 hours but higher proportions compared with other age groups were not located for up to a week.

Risk assessment tools applied by state and territory police provide a potentially more nuanced mechanism to relate risk to intent and predicted outcomes. While findings were limited to one jurisdiction, a comparison of the gravity of individual risk factors against reported occurrence showed that higher vulnerability held some correlation with higher incidence. Infirmary, impairment, age (young or elderly) or mental health problems characterised up to half of missing person reports in Victoria and the likelihood of causing self-harm or attempting suicide was described in a fifth. The disappearance from care placements, an indicator of at risk or absconder populations, contributed to a third of reports. Each of these factors is linked to one of the high risk groups recognised by police. The findings suggest that these groups are not just vulnerable to the consequences of going missing but vulnerable to the propensity, intentional or unintentional, to go missing.

The findings also suggest Australians usually go missing intentionally or voluntarily— to hurt themselves, to abscond from a care placement, to lessen the impact of personal problems, to escape family conflict or violence, or due to the effects of mental illness or alcohol and drug dependency. Less clear is how many become lost, specifically those whose personal circumstances increase the likelihood of unintentionally going missing. Some in this group are safeguarded by preventative measures (eg Safely Home bracelets) and emergency responses (eg Amber Alerts) but their safety is ostensibly more dependent than other missing populations on being identified and located quickly. Australians who are forced missing, due to abduction or other violent means, are the minority. While they are the group at highest risk of harm, they made up less than one percent of reports in Victoria and none in the Northern Territory between 2011 and 2015.

Two demographic groups emerged from the study as particularly vulnerable to adverse outcomes. The first was middle-aged men among the missing population with mental illness or the intent to commit suicide. This group comprised over half of missing person reports in which it was known whether the person reported missing had a mental illness, and the majority of fatalities in which the person was known to be suicidal at the time they went missing. The second was young females aged 13–17, who were more likely to have a mental illness or suicidal ideation than other females and the most inclined to recidivism. Anecdotal information revealed that young females in at least one jurisdiction had been exposed to sexual exploitation while missing and the offending and victimisation consequences for this group were heightened by their circumstances.

Recommendations

Risk assessment

Australian state and territory police agencies operate different risk assessment frameworks in missing person incidents and it was not the purpose of the study to critique these frameworks. Evaluations of missing person assessment tools are, however, generally lacking. Of the small number of reviews, most suggested the theoretical utility of such tools but noted problems around validity (Fyfe, Stevenson & Woolnough 2015; Hedges 2002; Newiss 2004; Tarling & Burrows 2004). There were also issues with lack of compliance with assessment tool guidelines and practices, a propensity to fall back on reasoning that was not informed by formal assessment of risk, and lack of clarity around decision making (Bayliss & Quinton 2013; Smith & Shalev Greene 2015).

The twin functions of missing person risk assessment—to identify appropriate and proportionate responses—are contingent on the application of risk factors that can ‘clearly discriminate between different outcomes in missing person cases’ (Tarling & Burrows 2004: 25). However, the small number of missing person incidents that result in harm, and the apparent absence of a ‘distinctive’ pattern of outcomes that can be statistically correlated with a discrete combination of circumstances and risk factors, affects the certainty of risk prediction (Tarling & Burrows 2004).

Vo (2015) and others suggest the need for further research to improve evidence-based policing on missing persons. Missing persons research, particularly in Australia, is incomplete and a firmer basis of knowledge could assist in revising and refining predicted risk categories and predicted outcomes. It would be equally useful to examine risk categorisation and decision-making processes among police in jurisdictions operating risk assessment frameworks of varying sophistication. This would be done to measure uniformity and proportionality of response, classify subsequent outcomes for high, medium and low risk incidents, and address the need for standardisation of risk assessment across the eight police services.

Data quality and recording

This and previous Australian studies on missing persons have noted the effect of data quality on the presentation of national and jurisdictional trend data on missing persons. Data quality relates to the comparability of data currently collected, specifically data definitions and jurisdictional variation in the range of data items recorded in different police systems. The NMPCC use a data collection form to collate rudimentary data on missing persons from state and territory police. Data collected for this study using the NMPCC form demonstrated some of the inconsistencies in the data recorded by state and territory police, which affected compilation of trend data and, critically, national data on key variables. It also affected the capacity for police services to provide different aggregations of data depending on the analysis required.

In recommending improvements to the collection of missing persons data, it is also recognised improvements can only be made where resources are available and with the agreement of police data providers as to the purpose and benefits of the exercise. With these considerations in mind, it is recommended the NMPCC establish a Data Working Group within the PCGMP to further assess the current status of missing persons data collected in the jurisdictions, with the aim of developing a Missing Persons Minimum Dataset administered by the NMPCC. The Minimum Dataset would comprise a practical set of agreed data items and data definitions that support the standardised collection of national missing persons data, which can be used by the NMPCC to disseminate annual and trend statistics on its website and in annual bulletins. These data may be provided in aggregate form (as currently done) to simplify NMPCC data collation but with the option to develop a unit record data collection, where practicable and where the need is stated. The latter would permit the type of analysis proposed for this study but which could not be completed and could include a unique identifier for each individual reported missing and for each missing event.

As a minimum the dataset should include:

- demographic information on the missing person—age, gender, Indigenous status, country of birth and marital status;
- information on the missing event—jurisdiction reported missing, jurisdiction located, time frame missing, location status (alive, deceased, not yet located), method of location;
- recidivism status—first time missing, recidivist missing, number of times missing; and
- absconder/absent status.

Preferably the dataset would also include information on known risk factors. This is complicated by the different state and territory police approaches to risk assessment and the risk factors recorded. The inclusion of this data would contribute to better interpretation of risk factors associated with greater incidence of missing events, changes in the association of specific risk factors with inclination to go missing and, in combination with the standard data items, increase understanding of particular demographic groups at greatest risk of harm while missing.

Data items may include:

- health and disability status—mental health, disability (physical or intellectual), dementia; need for essential medication;
- intent to commit self-harm/suicide;
- alcohol/drug dependency;
- care and protection orders;
- family and social mediators—victim/perpetrator of family and domestic violence/other significant family conflict or abuse; education, employment and/or financial problems; violent, racist or homophobic victimisation.

Conclusion

Preventative, operational and support responses for missing persons and their families were described in detail by James, Anderson & Putt (2008) and Wayland (2007) and not repeated here. However, future evaluations of these responses may be enhanced by fine-tuning the definition of risk, and in particular the documented, not just the predicted, outcomes for different groups of missing persons. Fyfe, Stevenson & Woolnough (2015) noted the complexity of missing person events and the 'moral ambiguity' of investigative processes. Conventionally recognised groups of vulnerable missing persons are based on expert observation but may still miss other groups whose outcomes are equally, if not more, grave or who experience longer periods of being missing (see, for example, Stevenson, Parr & Woolnough 2016). Most Australians reported missing are eventually found or returned within short time frames. Correlating the known risk indicators with individual outcomes, through the creation of better data, will assist the assessment of vulnerability, and in addition help identify currently invisible or less obvious groups subject to adverse missing events.

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