

# Submission to the

Protecting Victoria's Vulnerable Children Inquiry



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#### **About the Authors**

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## Introduction



Bravehearts Inc remain Australia's leading child protection advocates in the area of child sexual assault and are recognised as such nationally by governments, media and the community at large. We remain the only registered PBI dedicated holistically and specifically to the issue of child sexual assault.

While we are aware the issues raised in the area of child protection are far wider than those confined to the focus of Bravehearts and that many of our recommendations do have wider implications, we stress that the bulk of this submission is never-the-less centred around the issue of child sexual assault.

Bravehearts notes that the Victorian Government has announced ('Child protection workers get boost', The Age, 8<sup>th</sup> July, 2011) increased support and resources to workers as well as increased percentage of workers directly working on the front-line. It s our position that the Victorian Government needs to not just, as stated in the current Inquiry's Terms of Reference, "plan for future demands" on the system, but should in fact plan to reduce demands and prevent children and families from entering the system in the first place.

#### **List of Recommendations**

**Recommendation 1:** Bravehearts recommend that the Victorian Government consider child sexual assault and child abuse and neglect as distinct forms of child harm, each requiring a distinct response and each requiring adequate resourcing, and that the distinction be incorporated into all policy documents.

**Recommendation 2:** Bravehearts recommend ensuring all legislative and policy responses to child sexual assault include an understanding of the dynamics of offending and the impact on children, particularly in relation to the silence, secrecy and shame.

**Recommendation 3:** Bravehearts recommend the Victorian Government ensure the support of both personal safety curriculum in Victorian schools and resourcing for additional program support.

**Recommendation 4:** Bravehearts recommend that the Victorian Government invest in professional development training for therapists, guidance officers and chaplains in working with children who have been, or are at risk of child sexual assault

**Recommendation 5:** Bravehearts recommend the Victorian Government provide resources to ensure that child protection workers and those working with children are educated on the issues of child sexual assault and are able to confidently and effectively respond to concerns or disclosures

**Recommendation 6:** Bravehearts recommend that, in line with the National Framework for Protecting Australia's Children (Outcome 6.1), the Victorian Government adopt and support the awareness campaign, White Balloon Day.

**Recommendation 7:** Bravehearts recommend ensuring the independence of the Office of the Child Safety Commissioner as a body separate to and responsible for the oversight of the statutory child protection body. The roles of the Office should be clearly articulated to the public.

**Recommendation 8:** Bravehearts recommend that the Victorian Government implement a Community Visitor Program, to be run through the Office of the Child Safety Commissioner.

# About Bravehearts Inc.



Founded in 1997 by Hetty Johnston, Bravehearts Inc. has evolved into an organisation whose purpose is to provide therapeutic, support and advocacy services to survivors of child sexual assault. We are also actively involved in education, prevention, early intervention and research programs relating to child sexual assault.

Bravehearts operates at a National level, from our Head Office on the Gold Coast, advocating and lobbying across the country, with a physical presence in three States: Queensland (Gold Coast, Brisbane and Cairns), New South Wales (Sydney and Shoalhaven), Tasmania (Launceston) and Victoria (Shepparton).

Bravehearts makes a difference in child protection by:

- Assisting children and their non-offending family members to recover from the trauma of child sexual assault through therapy, advocacy and support;
- Raising awareness via initiatives such as the 'White Balloon Campaign' a public awareness and child protection initiative;
- Protecting survivors and providing them with avenues of redress through projects like the 'Sexual Assault Disclosure Scheme' (SADS) – a means for anonymous yet official disclosure of assault;
- Providing and developing effective education and prevention programs (Ditto's Keep Safe Adventure) to empower children and young people and increase their resiliency to child sexual assault;
- Provision of professional training and workshops; including specialised training for therapists and professional development for organisations that work with, or who's core business involves children;
- Advocating for survivor's rights through participation in legislative review and reform (successful campaigns include: the introduction in Queensland, New South Wales, Western Australia, Victoria and South Australia of Continuing Sentences for dangerous paedophiles; the closure of Queensland's Department of Family Services; the introduction of Section 189, the right for children and their families to speak publicly; the introduction of the Amber Alert system in Australia; the instigation of various formal Inquiries; and successful amendments to legislation);
- Proactive involvement in cyber-safety initiatives, including a presence on the Federal Government's Cyber-Safety Consultative Working Group;
- Raising community awareness through participation in public debate and in the accumulation, production and dissemination of relevant research material; and
- Supporting the work of other agencies (government and non-government) and individuals in their work around child sexual assault.

## **Child Sexual Assault**



### **Defining the Problem.**

Child sexual assault is a hidden but significant problem in every community in Australia.

One in three girls and one in six boys will be sexually abused in some way before the age of 18 years (Australian Institute of Criminology, 1993).

Experts estimate that less than one in ten of these children will tell.

Research clearly shows that individuals who are sexually assaulted as children are far more likely to experience psychological problems often lasting into adulthood, including: Post Traumatic Stress Disorder, depression, substance abuse and relationship problems. Child sexual assault does not discriminate along lines of region, race, creed, socio-economic status or gender; it crosses all boundaries to impact every community and every person in Australia.

Research suggests that many adults are unaware of effective steps they can take to protect children from sexual assault (Australian Childhood Foundation, 2009). Most do not know how to recognise signs of sexual assault and many do not know what to do when sexual assault is suspected or discovered.

#### Prevalence:

45% of females and 19% of males have been the victim of 'non-contact inclusive' child sexual abuse and 39% of females and 13% of males have been the victim of 'non-contact exclusive' child sexual abuse. (Goldman and Padayachi, 1997)

Girls and boys of all ages are sexually abused and victims are sometimes toddlers, young children and even babies. (NSW Child Protection Council, 2000)

Research shows a staggering 45% of women aged 18-41 were sexually abused as children by family members (30%), friends or family friends (50%) or strangers (14%). 75% of the abuse involved some contact, most of which was shockingly severe. (Watson, B., Griffith University, Herald Sun, 9<sup>th</sup> October, 2007)

In spite of the high non-disclosure rates and the difficulty in substantiating abuse, during 2008-09 a total of 3735 cases of sexual abuse against children were substantiated. (Australian Institute of Health and Welfare, 2010)

### Disclosure & Reporting:

In 98% of all child abuse cases reported to officials, children's statements were found to be true. (NSW Child Protection Council, cited in Dympna House, 1998)

A 1998 study involving 400 clients of Family Planning Qld, found 55% of all the women in the sample had experienced childhood sexual abuse before the age of 16. Only 36% of

those who had experienced abuse had ever told anyone of those events prior to their disclosure during the study interview. Only 8 victims (3.5%) had taken legal action against their offenders and only five were aware of the outcome of those actions (two offenders were convicted, two had no further action taken and one resulted in a criminal record only). (Queensland Criminal Justice Commission, 1999)

About half of the victims of child sexual abuse never report the abuse to another person and many do not disclose until they reach adulthood. (Queensland Crime Commission & Queensland Police Service, 2000)

169 child sex offenders who admitted having committed at least one sexual offence against a child later disclosed offences concerning 1010 children (748 boys and 262 girls) of which only 393 (38.9%) were reported to have been associated with official convictions. (Smallbone & Wortley, 2000)

One in five parents who were aware that their child had been sexually abused did not report the abuse. (Smallbone & Wortley, 2000)

28% disclose sexual assault to the authorities. (Queensland Crime and Misconduct Commission, 2003)

### Offenders:

International research suggests that sex offenders are generally older than most other types of offenders. The mean age of over 9,000 sex offenders was found to be 36 years. (Hanson, Gordon, Harris, Marques, Murphy, Quinsey & Seto, 2002)

Most children know the perpetrator with studies estimating between 10-30% of offenders were strangers. (National Child Protection Clearinghouse, 2005)

Non-biological family members (stepfather or mother's defacto) are disproportionately represented as sex offenders. For example, Russell (1989) reported that girls living with stepfathers were at a markedly increased risk: 17% had been sexually abused compared with 2.3% of girls living with biological fathers. (National Child Protection Clearinghouse, 2005)

Female sex offenders are responsible for 6 % of all reported cases of sexual abuse against children. (ChildWise study, cited in The Australian, 7<sup>th</sup> March 2006)

### Convicting, Treating & Managing Sex Offenders:

Only about 17% of reported sexual offences result in a conviction, a figure consistent with data from other States and overseas. (Queensland Crime and Misconduct Commission, 2003)

Less than 2% of cases reported to police, where the offender is a female, result in a jail term, compared with 16.5% of cases involving men. (ChildWise study, cited in The Australian, 7<sup>th</sup> March 2006)

90% of reported sex assaults do not end up in convictions. (Fitzgerald, 2006)

Only 17% of reported sex assaults end up in court. (Fitzgerald, 2006)

56% of defendants in sexual assault cases are found not guilty. (Fitzgerald, 2006)

### Cost

A recent Australian study funded by a Criminology Research Council Grant, conservatively estimates the (tangibles) cost to society of child sexual assault to be in excess of \$180,000 per child. (Briggs, 1999)

One in five children will be sexually assaulted before their 18<sup>th</sup> birthday.

The ABS reports the number of children under the age of 18 in Victoria to be 625,906

Therefore (based on the statistic that 1 in 5 will be, are being or have been, sexually assaulted before their 18<sup>th</sup> birthday), 125,181 Victorian children will be affected by child sexual assault.

### Taking Child Sexual Assault 'Out of the Pot'

We strongly advocate that in preparation of the Inquiry's report to the Minister for Community Services, the issue of child sexual assault should be addressed as distinct from other forms of child abuse and neglect. Recognising the differences between these offences against children is necessary to effectively address, respond to and prevent child sexual assault.

Bravehearts long held position is that the issue of child sexual assault and those of child abuse and neglect are discernibly different and require discernibly different responses.

In working with the Federal Governments Working Party in the development of a National Framework for the Protection of Australia's Children, and in what we believe is an International first, Bravehearts successfully lobbied to have child sexual assault recognised as distinct from child abuse and neglect and requiring of a distinct response and specific resourcing. The signing of the COAG Agreement means this distinction will now be echoed across child protection systems in every State and Territory around the Nation. "Protecting Children is Everyone's Business: National Framework for Protecting Australia's Children 2009-2020" (COAG, 2009) will form the basis of child protection agendas over the next decade. Outcome Six of this document outlines the way forward for finally dealing with child sexual assault. Governments across the country are now finally committed to recognising and responding to child sexual assault specifically.

Traditionally, child sexual assault has been 'lumped in the same pot' as child abuse and neglect. However, while all forms of abuse and assault are harmful to children it is important to take child sexual assault 'out of the 'pot' as the dynamics are fundamentally different.

Some of the important differences include:

- Acts of child abuse and neglect are generally unplanned, re-active and are generally aligned with socio-economic and/or family dysfunction issues and are comparatively predominant in areas of social disadvantage.
  - **Sexual assaults** against children are almost always pre-meditated, involving predatory acts of grooming, manipulation, self-gratification and exploitation, and occur widely across the various socio-economic areas.
- Child abuse and neglect more commonly involve the infliction of pain, violence and aggressive force.
  - **Child sexual assault** more commonly involves manipulation, intimidation and sexual contact
- **Child abuse and neglect** are nearly always perpetrated by a parent or primary caregiver (in an estimated 90% of cases).
  - **Child sexual assault** is generally perpetrated by a male (in excess of 90% of cases) and more likely to be perpetrated by someone known to the child or their family (research varies but commonly finds between 85% and 95% of the time). Of those offenders known to the child most commonly the offender is <u>not</u> living with the child (approx 70%).
- Child abuse and neglect offences are almost always intra-familial.
   Child sex assault offences are commonly extra-familial as well as intra-familial.
- Child sexual assault always involves the three S's: Shame; Silence; Secrecy

Understanding these differences is key in understanding and responding to the prevalence of child sexual assault in our communities.

While State and Territory Governments have statutory responsibilities for child protection, generally the overwhelming bulk of funding is directed at tertiary statutory intervention responses. Statutory intervention will occur where the offender is living in the house with the child and/or where there is not a parent or primary carer willing and able to protect the child. Given most child sex offences are committed by people not living in the house with the child (70%), the need for statutory intervention for these victims is void and as such, the offences are not officially counted in child protection reporting.

Reporting to child protection departments is further reduced because, even in cases where the offender is living in the house with the child, most often there is a parent or carer who does act protectively to expel the offender and protect the child. This action creates a desirable positive situation but again, no statutory intervention is required so no official recording of the offence occurs; unless the matter is subject to a criminal investigation. Importantly however, the child and family still require professional support.

As a result, child sexual assault prevalence statistics produced by departments of child protection generally report very low instances of child sexual assault in comparison to child abuse and neglect (see Table below). In addition, and as a result of these low statistical recordings, State and Territory Government child protection funding to this critical area is limited along with recognition, response and acknowledgement of the prevalence and social implications of child sexual assault.

Percentages of children subject to substantiated notifications by Type of harm (2009-2010) (Australian Institute of Health and Welfare, 2011)

Type of Harm	NSW	Vic	Qld	WA	SA	Tas	ACT	NT
Physical abuse	18.9	37.8	21.9	20.4	11.9	13.4	14.0	20.7
Emotional Abuse	31.6	46.9	40.4	21.3	42.6	50.6	45.1	21.2
Neglect	29.4	7.2	31.5	38.3	39.2	27.8	34.4	50.1
Sexual assault	20.2	8.2	6.1	20.0	6.2	8.2	6.5	8.0
Total	100	100	100	100	100	100	100	100

**RECOMMENDATION 1:** Bravehearts recommend that the Victorian Government consider child sexual assault and child abuse and neglect as distinct forms of child harm, each requiring a distinct response and each requiring adequate resourcing, and that the distinction be incorporated into all policy documents.

# Risk Factors and Offence Dynamics



#### **Risk Factors**

Views that children are at risk predominately from strangers have inhibited knowledge that most sexual assault of children occurs at the hands of someone the child knows, trusts and often loves.

We now know the people who most commonly sexually assault children are usually family members or individuals close to the family or child. Research shows that between 70-90% of the time, the sexual assault involves an offender who is known and trusted by the child (National Child Protection Clearinghouse, 2005). Strangers do indeed molest children. However in around nine out of ten times, the offender is not the 'bogeyman' hiding in the bushes. It is instead a parent, step-parent, a grandparent, an uncle, an aunt, a cousin, a neighbour, a family friend, a teacher, a member of the clergy, or someone else who is known to the child or their family. A study in the United States found 96 percent of reported rape survivors under age 12 knew the attacker. Four percent of the offenders were strangers, 20 percent were fathers, 16 percent were relatives and 50 percent were acquaintances or friends (Langan and Harlow, 1992).

Data from a sample of more than 500 clients attending therapy at Bravehearts Inc over a 5 year period indicated that approximately 97% of offenders were known to the victim. Specifically, 40% of offenders were a father or father figure living in the child's primary or secondary residence, 30% were other family members and 27% were known to the child and their family outside the home. Only 3% were strangers. These figures are consistent with existing research showing the majority of offenders to be either related to or closely affiliated with the child (Kogan, 2004)

In order to effectively prevent the sexual assault of children, it is essential that child protection legislation and responses are developed with an understanding of the dynamics of offending. Understanding the processes of grooming and offending, helps ensure the effectiveness of responses.

Child sexual assault is most often not violent. Usually it involves a process of grooming and contrived compliance based on trickery, manipulation and secrecy with a child to whom the offender often has a close relationship (Smallbone & Wortley, 2000). Child sexual assault typically occurs within a long-term, on-going relationship between the offender and victim. Offenders often develop a relationship with a targeted victim for months before beginning the abused

Finkelhor (1984) has developed what is termed the 'four preconditions of sex abuse', which provides a model for understanding how the sexual assault of children occurs. The first precondition is the presence of an individual who has the motivation to sexually assault children. This motivation contains three components (any of which may be present but not all of which are required): emotional congruence, sexual arousal and

blockage (an individual's inability to have a normal sexual relationship). Experience as a sexually assaulted child is a common feature leading to emotional congruence.

The second precondition is what Finkelhor terms internal inhibitors. Most individuals have internal inhibition of any intermittent desires to be sexually involved with children. When these internal inhibitors are absent, there is a greater likelihood of an abusive event. According to Finkelhor alcohol and drugs are the two most common destroyers of internal inhibitors.

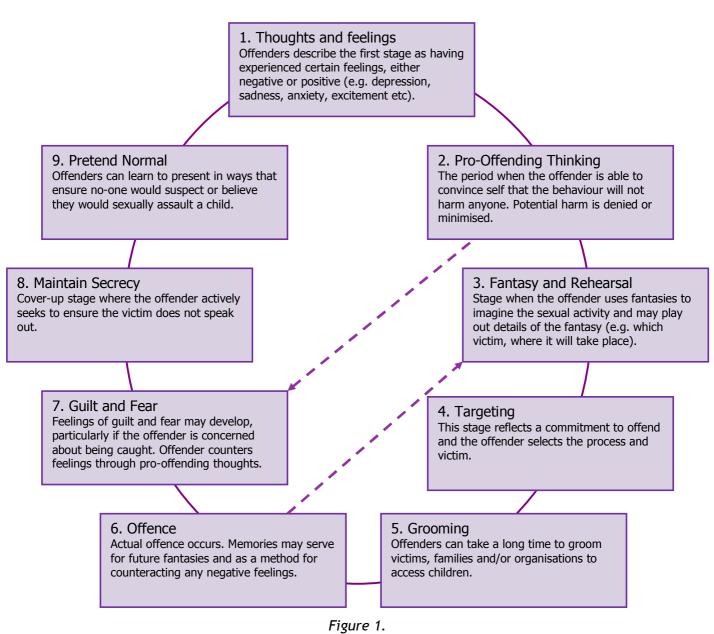
The third precondition for child sexual assault is the overcoming of external inhibitors. In families the major external inhibitor is the presence of a protective parent. If the parent is not present or not protective then an individual with a motivation to sexually assault and no internal inhibitors finds the approach to a child easier.

The fourth precondition for child sexual assault is the breakdown of the child's resistance. Resistance may be taught either by parents or through education programs and include the empowerment and build up of resiliency and protective factors within the child and the child's environment. Overcoming external inhibitors and the resistance of a child are very much the intention of the grooming process.

Child sex offenders use a variety of tricks to 'groom' children or adolescents and often their primary caregivers. Common grooming techniques reported by offenders include (Leclerc, Proulx, & McKibben, 2005):

- Building the child's trust: Using presents, special attention, treats, spending time together and playing games with non-sexual physical contact.
- Favouritism: The offender treats the child as an adult; treating them differently and making them feel like a unique friend.
- Gaining the trust of the child's carer/s: Careful to be 'seen' as a close, caring and reliable relative or friend of the family.
- Isolation (from family, friends): To ensure secrecy and lessen chances of disclosure or belief.
- Intimidation and secrecy: The offender may use coercion e.g. threatening looks and body language, glares, stalking and rules of secrecy.
- 'Testing the waters' or boundary violation: 'Innocent' touching, gradually developing into 'accidental' sexual contact.
- Shaping the child's perceptions: The child is often confused as to what is acceptable and can take on self-blame for the situation, as his/her viewpoint can become totally distorted.

It is widely acknowledged that people who sexually assault children engage in a cyclical pattern of behaviour. While there are variations amongst sex offenders in how they operate, the cycle on the following page depicts a fairly typical pattern for child sex offenders. It is worth noting that this cycle would differ for situational (non-preferential) offenders, as well as for juvenile and female offenders.



The Sexual Offending Cycle
x Offender Management and Intervention Program, Victoria 2

 $(Adapted\ from\ the\ Core\ Sex\ Offender\ Management\ and\ Intervention\ Program,\ Victoria\ 2001)$ 

### Impact on Children: Silence, Secrecy and Shame

The perpetration of child sexual assault relies heavily on silencing the victim; in order to keep offending perpetrators need secrecy. Offenders usually put a great deal of effort into ensuring that a child remains silent. Apart from promises, threats and bribes, offenders also take advantage of the child's powerlessness by presenting a distorted or false view of what is happening. Some of the ways offenders 'trick' children into secrecy include convincing the child that:

- They are somehow responsible;
- Others will blame them;
- They will be punished;
- They will be to blame if the offender goes to jail;
- They will be to blame if the family breaks up;
- They will be to blame if others in the family are upset;
- They are bad in some way and this is why the assault happened in the first place;
- They will not be 'special' anymore; and/or
- No one would believe them if they told.

In childhood, the main factors influencing non disclosure to family and friends are: when the offender is known to the child, when the offender is a family member, or when the child perceives there may be more negative outcomes (e.g. not being believed, family break-up), than positive outcomes (e.g. the abuse stops, safety).

One of the most commonly expressed reasons for not disclosing child sexual assault is a fear of not being believed. Both children and adults report that this fear of non-belief is a major barrier to them disclosing to either trusted others or support services.

It is so tough for anyone to disclose sexual assault. For children who do not have the language or the understanding of what has happened, it can be even more difficult:

- They often feel it is their fault because they let it happen;
- They feel guilty about their body's natural reaction to sexual activity (even though this is beyond their control);
- They feel disclosure may cause family problems or breakdowns;
- The offender may be someone the child/young person heavily relies on;
- They fear they will be blamed, punished or not believed;
- They fear they will be taken away from their homes and their families if they speak out; and/or
- They fear disclosure will cause harm to someone or something they love and care for, such as family members or pets.

In fact, such is the pervasive nature this fear of disbelief, that even if a child has one or more supportive parents this does not necessarily increase their chances of disclosing their abuse history. In the case, as so often it is, where the abuse is from a parental figure, loved family member, or trusted family friend the perceived likelihood of belief of the child is also severely compromised.

All of these factors impacting on the likelihood of a child disclosing need to be understood by those working in the child protection field. Just because a child does not speak out, does not mean that the sexual assault did not occur. Workers need to be trained to understand the dynamics of child sexual assault, the impact on the child and disclosure, and the indicators of child sexual assault.

**RECOMMENDATION 2:** Bravehearts recommend ensuring all legislative and policy responses to child sexual assault include an understanding of the dynamics of offending and the impact on children, particularly in relation to the silence, secrecy and shame.



# Prevention, Education and Awareness

Services providing early intervention and prevention around child protection are a fundamental key to achieving long-term reductions in child protection notifications and providing for the over-all safety and well-being of children. Services need to be targeted not just towards children and families where there has been an identified problem, but also more universally introduced, at a community level, in the early years of a child's life. The resourcing of early intervention and prevention is crucial and budgetary allocations need to be made to funding proven, effective programs that demonstrate best practice. Effective intervention early on is essential in better responding to child protection concerns and minimising the negative outcomes for children and families.

Non-government agencies are perfectly situated to provide service response to meet the needs of children and families. It would be recommended that the Victorian Department for Community Services, engage with non-government agencies that are specialised in the fields of child protection in order to provide appropriate support to children and families in need. Collaborative working relationships between Government and non-government are essential for better delivery of targeted and specialised services.

As an agency that works specifically within the area of child sexual assault, Bravehearts recognise the incredible importance of general prevention and education in reducing prevalence of child sexual assault and child abuse in our communities. Research has incontrovertibly found that one of the greatest tools for reducing child sexual assault in our communities is awareness and education. This includes prevention programs targeted at children and programs targeted to adults.

### **Prevention Programs Aimed at Children**

Public awareness of the problem of child sexual assault has grown to a point whereby concerns have emphasised the need for widespread preventative programs to be implemented. In 1997 the Woods Royal Commission recommended a focus on the "broad community education programs including information on children's rights, empowering children to speak out, to say NO to adults, to understand their bodies and their rights around the touching of their bodies". In line with this, a strong feature of the published research on personal safety programs has been the evidence that suggests that preventative strategies are far more cost effective than trying to fix the problem after the fact.

Accordingly, school-based personal safety programs have emerged increasingly over the last two decades across the US, Canada, NZ, UK and Australia (Briggs & Hawkins, 1994; Browne & Lynch, 1994; Poole & Tomison, 2000). School-based personal safety programs play a vital role in preventing child sexual assault, equipping children with the knowledge and skills they need to identify unsafe or risky situations, and giving them an understanding of their rights to protect themselves and their own body.

The introduction of personal safety education within schools appears to be a logical progression. Not only do schools have the ability to reach large numbers of children at the one time, but their primary purpose is to be a place of learning. In schools children are taught how to stay safe in traffic, how to stay safe from fire, water and electricity; it was logical that schools should progress to also teach children how to stay safe with people. Generally, personal safety education in schools has been a teacher-facilitated process, whereby teachers are provided with a range of safety topics to cover at their discretion; given the choice, however, many teachers report preferring to discuss 'safe' topics such as road safety over other more difficult topics as domestic violence and sexual assault (Whiteside, 2001). Given the sensitive nature of discussing such topics as sexual assault, it is understandable why teachers can feel apprehensive in talking with their students about these issues, and why a substantial minority of teachers choose to not cover any protective behaviour material in their classroom.

Some of the main barriers to teacher's confidence in delivering education material around the issue of sexual assault include being uncomfortable with the program content, unsure of how to respond to potential disclosures of harm by their students, and limited training and support on how to deliver the protective behaviour components. Despite the concerns teachers may have in including protecting behaviours into their curriculum, it is clear that teachers recognise the importance of its inclusion, and in order to teach this material effectively and comfortably, teachers acknowledge the need for adequate training, information and support to do this.

## **Ditto's Keep Safe Adventure Program**

To address the gaps in personal safety education in Australian schools, Bravehearts developed *Ditto's Keep Safe Adventure (DKSA) School Based Program*, an effective, teacher-friendly, child-engaging prevention program tailored to young children from Pre-School to Grade 3. The DKSA school-based program is based on the principles of Bravehearts successful and widely used *Ditto's Keep Safe Adventure CD*, which came to be through a collaborative effort between child protection advocates, psychologists, Queensland Police, the Commission for Children and Young People (Qld), State and Commonwealth Ministers, Crime and Misconduct Commission (Qld) and marketing and advertising experts.

The overall objective of the program is to help educate children in the fundamental principles of personal safety in a gentle, non-confronting way, using language and concepts that children, teachers and parents can feel comfortable using. Consisting of a live 30 minute show which uses songs to link in the key show messages, DKSA – *School Based Program* is fun, non-threatening and focuses on interactively teaching children how to identify a wide-range of potentially unsafe situations, and providing them with the knowledge and skills on how to respond appropriately. The main aims of the programs are to provide teachers, children, and parents with appropriate language to discuss the topic of personal safety comfortably, assist children with the development of resiliency and protective factors, and empower children to disclose information on any unsafe situation.

As well as including existing protection principles already working in established prevention programs, the DKSA school-based program incorporates a set of learning objectives informed by research on disclosure principles and child sexual offender behaviour. The DKSA model covers: differentiating between 'yes' and 'no' feelings (reinforcing children's natural emotional regulation); recognising 'warning' signs (identifies the emotional and physiological responses to potentially threatening experiences); identifying private parts (the importance of teaching children which parts of their bodies are exclusively theirs has been supported by research, as offenders often exploit children's lack of knowledge); identifying when to tell a secret (the inclusion of secrets is considered important as secrecy plays such a fundamental role in child sexual assault); and identifying what to do if they feel unsafe or unsure in situations (gives children the knowledge that they are allowed to tell someone if they are not feeling safe).

The importance and impact of proven, research-based programs can be seen in the results of an independent evaluation of Bravehearts' education. The external evaluation determined that the *Ditto's Keep Safe Adventure* program has the potential to reduce child sexual assault by up to 50 per cent. In 2008 Bravehearts received Federal Government funding to deliver the program to Indigenous children in the Cairns and Far North Queensland regions. The program was adapted slightly and a new character introduced. In mid-2011, the program was introduced in Tasmania.

The promise of child sexual assault and child abuse prevention is that it effects savings in several important areas. The most obvious savings are, of course, in the lives of the children who will not suffer the devastating effects of sexual assault or child abuse. Beyond their benefit, we accrue both tangible and intangible dividends as a society. We benefit when children grow into their potential as full contributors to the life and fabric of society. Finally, through prevention we can save the staggering amounts of money spent annually dealing with the consequences.

**RECOMMENDATION 3:** Bravehearts recommend the Victorian Government ensure the support of both personal safety curriculum in Victorian schools and resourcing for additional program support.

### **Prevention through Professional Development**

Child sexual assault is a hidden but significant problem in every community in Australia. Experts estimate that one in four girls and one in six boys will be sexually assaulted before their 18th birthday. Less than one in ten will tell. Research clearly shows that individuals sexually assaulted as children are far more likely to experience psychological problems often lasting into adulthood, including Post Traumatic Stress Disorder, depression, substance abuse and relationship problems.

Ensuring that there is specialised and effective therapeutic support for survivors of child sexual assault is essential, yet there is a recognised gap in the training of therapists (psychologists, counsellors, social workers) in the area of child sexual assault. With the specific dynamics of offending, and often of the relationship between the victim and the

perpetrator, working with children and young people who have been sexually assaulted requires a specific skill set.

In response to this identified training/knowledge gap and the specialised nature of working with children and young people affected by child sexual assault, Bravehearts developed a Practitioner workshop aimed at training participants to work effectively with victims, and increase both practitioner knowledge and confidence in responding to those affected by child sexual assault.

In 2009, the Federal Government provided funding for Bravehearts to take this workshop across the country, providing training to 250 therapists in each capital city. Identified gaps in training of therapists included:

- Understanding the nature of child sexual assault;
- Strengthening therapeutic approaches to children affected by sexual assault;
- Effective therapeutic interventions with children who have experienced sexual assault;
- Understanding the principles behind psycho-educational tools to teach personal safety messages to children;
- Effective responses to disclosures of sexual assault within the therapeutic environment;
- Supporting parents to respond appropriately and effectively to disclosures, as well as behaviours and emotions often associated with child sexual assault;
- Understanding the toll on the therapist when working in the area of child sexual assault and identifying key self-care and organisational-care strategies to minimise this effect.
- Tailoring therapeutic responses to participants' workplace settings.

**RECOMMENDATION 4:** Bravehearts recommend that the Victorian Government invest in professional development training for therapists, guidance officers and chaplains in working with children who have been, or are at risk of child sexual assault.

### **Child Protection Workers and Child-Focussed Organisations**

Across community services in Australia it is widely recognised that front line child protection staff require regular supervision and professional development opportunities.

Supervision should be comprised of three main parts: administration, case review and professional supervision/counselling. This supervision should occur monthly and should enable the caseworker to plan casework and administrative tasks, debrief and receive emotional support.

In addition to regular supervisory support, child protection workers need to undergo regular training and professional development. Key areas for professional development that should be considered include: legislative requirements, transfer of formal learning

to workplace, skills in engaging and working with children and families, building capacity to respond to child protection issues and specific training based on practice and research.

While positive steps can taken in empowering and building resiliency in our children – lessening their vulnerability to child sexual assault, it is equally as important that these programs are complemented by programs highlighting the responsibility adults play in keeping children safe. Adults should be taking proactive steps to protect children from this significant risk. It is unrealistic to think that a young child can take responsibility for keeping themselves safe. Adults are the ones who need to prevent, recognise and react responsibly to child sexual abuse.

Research suggests that many adults are unaware of effective steps they can take to protect their children from sexual assault (NAPCAN, 2010). Most do not know how to recognise signs of sexual assault and many do not know what to do when sexual assault is suspected or discovered. Adults working with children and young people need to have an understanding of the dynamics of child sexual assault, including the indicators and the barriers to speaking out, in order to properly address concerns or disclosures by children in their care.

**RECOMMENDATION 5:** Bravehearts recommend the Victorian Government provide resources to ensure that child protection workers and those working with children are educated on the issues of child sexual assault and are able to confidently and effectively respond to concerns or disclosures.

## **White Balloon Awareness Campaigns**

Research shows that there is a critical under-reporting of child sexual assault matters more generally. Smallbone and Wortley (2000) found that one in five parents who were aware that their child had been sexually assaulted, did not report. Over 50% of victims never report to anyone, and many who do report do not do so until adulthood (Queensland Crime Commission & Queensland Police Service, 2000). For those children who do disclose the response can be devastating, with a 2009 report by the Australian Childhood Foundation finding that 1 in 3 Australians would not believe children if they disclosed they were being abused, with most not knowing how to recognise the and many do not knowing what to do when sexual assault is suspected or discovered (Australian Childhood Foundation, 2009).

White Balloon Day (WBD) is a Bravehearts initiative, and has been held annually in the first week of September during National Child Protection Week. The 'white balloon' was adopted by Bravehearts in 1997 as a symbol of support for survivors of child sexual assault. It arose following a public meeting in Belgium in October 1996, when 300,000 people gathered with white balloons to show public sympathy and support for the parents of girls who were sexually assaulted and were either missing or murdered at the hands of a previously convicted, and then released, paedophile (Marc Dutroux).

The major purposes of White Balloon Day are to:

- To raise awareness of child sexual assault in our society;
- To send a message of support to those who are suffering in silence;
- To demonstrate a community desire for children to be protected from sexual assault; and
- To encourage survivors to 'break the silence' and contribute to making children everywhere safer.

In 1999, Queensland Police reported that WBD has prompted an unprecedented 514% increase in disclosures. This phenomenal figure indicates that WBD is a highly effective crime prevention campaign.

The National Framework for Protecting Australian's Children, signed by COAG in April 2009, recognised White Balloon Day and as an outcome the Federal Government provided funding for the national campaign (this funding has been repeated for 2011).

**RECOMMENDATION 6:** Bravehearts recommend that, in line with the National Framework for Protecting Australia's Children (Outcome 6.1), the Victorian Government adopt and support the awareness campaign, White Balloon Day.

# **Effective Child Protection Systems**



### Improving Transparency – Protecting kids from systems abuse

There must be clear accountability and transparency at all levels, from decision-making to how complaints are dealt with, to ensure not only that the system is being run effectively and in line with child protection goals (including the best interests of the child) but also to assure public confidence in the system.

A child protection department that is underpinned by a culture of quality and continuous improvement should include the establishment of key performance indicators and the monitoring and compliance against these standards to ensure that the department is accountable and effective. Annual self-assessments and external reviews would help to aid in not only the improvement of the service but the confidence the community has that the department is responding to needs.

External oversight of the department should be clearly articulated as a responsibility of the Office of the Child Safety Commissioner and information about this role articulated clearly to the public to ensure confidence in the independence and separation of the Commissioner in assuring the accountability and effectiveness of the child protection authority and addressing complaints and concerns.

**RECOMMENDATION 7:** Bravehearts recommend ensuring the independence of the Office of the Child Safety Commissioner as a body separate to and responsible for the oversight of the statutory child protection body. The roles of the Office should be clearly articulated to the public.

### **Community Visitor Programs**

Bravehearts recommends that a crucial component of external oversight of the Department of Community Services is the introduction of a community visitor scheme, similar to the program administered by the Queensland Commission for Children, Young People and the Child Guardian and similar to the current community visitor program currently operating in Victoria through the Office of the Public Advocate under the *Mental Health Act 1986*, the *Health Services Act 1988*, and the *Disability Act 2006*.

The Community Visitor Program in Queensland ensures that children and young people in alternative care placements (including, youth detention centres, out of home care, supported accommodation, respite care or foster care) have an external and independent person who can provide support and listen to any concerns. This includes assisting with (www. ccypcg.qld.gov.au/Support/community):

- finding services to help the young person
- allowances and other money issues
- concerns about the place where the young person is residing
- family contact issues

• sorting out issues with child protection workers or other people from other government departments.

These types of external oversight programs increases transparency of the child protection system and provide avenues for monitoring the quality of services (eg. the annual "Views of Children and Young People" surveys conducted by the Queensland Commission for Children and Young People and the Child Guardian).

**RECOMMENDATION 8:** Bravehearts recommend that the Victorian Government implement a Community Visitor Program, to be run through the Office of the Child Safety Commissioner.

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