

Our **Mission** is to provide a coordinated and holistic approach to the prevention and treatment of child sexual abuse.

Our **Vision** is a world where people, communities and systems all work together to protect children from sexual abuse.

26th October 2023

Beaumaris Board of Inquiry
PO Box 18092
Collins Street East
Vic, 8003

**Submission:
Board of Inquiry into historical child sexual abuse in
Beaumaris Primary School and certain other government schools**

To Whom it May Concern,

As an agency that works with, and advocates for, victims and survivors of child sexual abuse, Bravehearts is pleased to provide this submission to the Board of Inquiry into historical child sexual abuse in Beaumaris Primary School and certain other government schools.

It is Bravehearts position that we cannot ignore the immediate child protection issues faced by organisations, such as schools, or the broader child protection issues in the communities in which they operate. It is every school's responsibility to do their best to protect the children who they come in contact with. This is true whether harm or potential harm is internal or external to the school.

The importance of the role of schools in child protection cannot be understated. It has long been accepted that given the nature of harm against children, the responsibility of child protection extends beyond that of parents, carers and families, and that there is a greater responsibility that sits within organisations, such as schools, to ensure that children are protected from harm, or when they have been harmed that the response is in the child's best interests.

Child sexual abuse is a significant but hidden problem in every community in Australia. As revealed by the first ever national Australian Child Maltreatment Study (Mathews et.al., 2023), 28% of Australians experience child sexual abuse (1 in 3 girls and 1 in 5 boys).

Child sexual abuse does not discriminate along lines of region, race, religion, socio-economic status or gender; it crosses all boundaries to impact every community.

The short- and long-term impacts of child sexual abuse are a result of not only the nature and seriousness of the offence, but of the grooming process undertaken by offenders, the silence, shame and secrecy that victims and survivors live with, and the often-complex relationships with offenders (we know that most offenders are known, loved and trusted by the victim and his or her family).

Additionally, these impacts can be exacerbated by ineffective or unsupportive responses from the institution where the harm occurred, and/or from unjust and unfair outcomes (real or perceived) from the criminal justice system.

1. Please describe best-practice, evidence-informed approaches to providing effective support services for adults who have experienced child sexual abuse at government schools.

Ensuring that there are sufficient, accessible, culturally informed, specialised and evidence-based therapeutic and support services for victims and survivors of child sexual abuse is essential.

Trauma informed approaches

Trauma informed approaches to supporting victims and survivors, includes an understanding and consideration of the pervasive nature of trauma and encourages physical and emotional safe spaces for healing and recovery, rather than practices and services that may inadvertently re-traumatise. This approach recognises the presence of trauma symptoms, acknowledges the role trauma, including historical trauma and the impact of colonisation and the stolen generation, may play in an individual's life, and it responds by putting knowledge into practice.

There are 5 key principles (Berger and Quiros, 2016; Conover et.al., 2015; Goodman et.al. 2016) for ensuring an individual's safety:

1. **Safety**: This speaks to the physical and emotional safety for victims and survivors. Feelings of safety may be enhanced when a therapeutic or support person/organisation demonstrates an understanding of the impacts of trauma.
2. **Trustworthiness**: A culture of trustworthiness trickles down into how the individual's needs are addressed. Establishing a feeling of trustworthiness takes a lot of time and effort, but importantly involves transparency and boundary setting.
3. **Choice**: Victims and survivors can feel empowered when making decisions in their treatment or support plan. These choices can include deciding what to work on during sessions, level of care, and length of engagement.
4. **Collaboration**: This is where individuals and organisations actively make that extra effort to encourage clients/victims and survivors to collaborate with them; for example, encouraging suggestions and feedback from clients about how they can meet the mutually agreed goals.
5. **Empowerment**: Therapeutic and support services should be empowering victims and survivors to recognise their existing strengths. They can develop a more solid foundation and healthier coping skills, which they can use in the future. This approach to treatment provides hope among clients that healing is possible. It also promotes resilience. To achieve this, it is important to provide opportunities for victims and survivors to feel as if their voice is valued, that they are validated and affirmed.

Therapeutic and Support Needs

It is important to recognise that individual victims and survivors may have differing support or therapeutic needs. It is critical that effective support for victims and survivors of child sexual abuse is client-centric, individualised to the 'where the client

is at', and is centred on equipping sexual abuse victims and survivors with practical tools and techniques to:

- Process what has happened.
- Reduce impacts.
- Strengthen resilience.
- Repair and build self-esteem.
- Improve coping mechanisms.
- Accept that the abuse need not define who they are.
- Enhance health, safety and general wellbeing.

At Bravehearts, we commonly see the symptoms of child sexual abuse present in the form of depression, anxiety, anger, personality disorders, emotion regulation problems, relationship difficulties, parenting difficulties, and post-traumatic stress disorder in victim and survivors. These issues are often longstanding for many of our adult clients, and their presentation to therapy may be many years since the event and since their first disclosure, or it could be the first time that the impacts of childhood sexual abuse are being identified and addressed.

People who have experienced trauma as a result of sexual abuse can develop a range of presenting symptoms and difficulties. No two people who have experienced the same type of abuse will present in the same manner, and often the severity of the trauma may not be proportional to its effects; some people who have experienced prolonged trauma may present with fewer difficulties than those who have experienced a single-incident trauma, and the reverse can also be true. For this reason, Bravehearts does not propose one treatment as being effective over another.

We provide a holistic approach to therapy that is:

- client-focused, with a family systems approach
- individually tailored
- consultative and collaborative
- evidence-based
- preventative
- strengths-focused
- involves the client's family and wider support systems.

We assist the client to heal from the effects of traumatic experiences in the best way possible for them. This can include one-on-one counselling, family counselling and support, parent-child therapy, parent education, and group therapy.

2. Please share any ideas to improve the effectiveness of support services for adults who have experienced child sexual abuse at government schools.

As noted above, we support a holistic approach to therapy and support that is trauma informed at its core and which embodies an approach that is centred on the client's needs:

- client-focused, with a family systems approach
- individually tailored
- consultative and collaborative
- evidence-based
- preventative

- strengths-focused
- involves the client's family and wider support systems.

Some of the barriers to providing effective therapeutic or support services for victims and survivors of sexual abuse, that need to be addressed to ensure effective support provision, include:

- **Lack of funding to provide services, and the service wrap around needs.** For example, funding often covers wages for therapeutic or support staff with a small percentage allocated to administration costs, but funders (usually government departments) lack an understanding of the true cost of supporting this work. Organisations need funding to support their workers. Working in this sector creates high burnout, funding needs to account for staff self-care, staff professional development, supporting flexible working, and accounting for safety of outreach workers. Additionally, there are few funding opportunities for work with adult victims and survivors.
 - **Cultural competency.** There are very few services that meet the needs of First Nations or culturally and linguistically diverse victims and survivors. Funding and support are needed for cultural healing services. Culturally appropriate services need to meet specific needs for those victims and survivors. These may include basing the service/program on the cultural values of the group, ensuring that strategies that make up the therapeutic or support program reflect the culture (attitudes, expectancies, norms) of the group, and that the service/program components reflect the behavioural preferences and expectations of the cultural group's members.
 - **Lack of services available for male and gender diverse victims and survivors.** Unfortunately, we have seen a lack of focus on the provision of therapeutic and support services to male victims and survivors, as well as gender-diverse victims and survivors. While girls are more commonly victimised globally, in some contexts boys are at higher risk of sexual exploitation, for example, in institutional abuse and online sexual extortion.
 - **Specialised training.** Those working in therapeutic and support services for child sexual abuse, need to have a working understanding of child sexual abuse, the nature of the offending, and the impacts on children, young people and adults who are victims and survivors. Some of the gaps in training of therapists and support workers include:
 - Understanding the nature of child sexual abuse, including the grooming process and how this often extends beyond grooming the victim to grooming parents, carers, and organisations.
 - Effective therapeutic and support interventions with victims and survivors must be client centric and trauma informed. and
 - Understanding the toll on the therapist when working in the area of child sexual abuse and identifying key self-care and organisational-care strategies to minimise this effect.
3. Please describe best-practice, evidence-informed approaches to appropriately support healing for adults who have experienced child sexual abuse at government schools, their families, friends, loved ones, other supporters, and affected communities. For example, a formal apology, memorialisation, or other activities.

Bravehearts advocates that best practice for organisations wanting to support the healing for victims and survivors and their families, is to talk to those impacted by the abuse and ask what they believe would support their healing. Healing may be defined differently by individual victims and survivors and their needs may vary. To more effectively support healing, it is critical that organisations take an individualised approach.

In recognition of the varied and different degrees of impacts of child sexual abuse on victims and survivors, it is necessary that responses and offered support be flexible. The Royal Commission into Institutional Responses to Child Sexual Abuse set a standard of offering not only access to financial recognition payments, but to an apology and access to counselling or support programs, if the victim or survivor wanted these, as well as a memorial site.

From our work with victims and survivors what is most wanted is an act that recognises the harm done, not just at the time but the ongoing impacts on their lives.

A formal and public apology may go a long way for many survivors, others may be concerned this is tokenistic and desire an individual apology from the school. We have seen a low uptake of the personal apology component of the National Redress Scheme, as there is a low trust in institutions.

We have seen churches and other institutions wrongly retaining the status of the perpetrator or alleged perpetrator (for example, school halls named after an individual, their photo on a school wall); it is essential for victims and survivors that any, especially 'positive' recognition of an individual who has sexually harmed children be removed. Organisations have argued (for example, churches) that such acknowledgements are of the 'good work' of the individual; our response to this is that the good work of those who sexually offend against children is the very mask behind which they hide, and that often has 'allowed' them to offend.

Victims and survivors need to see the school or organisation where they were harmed state clearly that they acknowledge the harm done to children, that they unconditionally condemn the actions of the perpetrator or alleged perpetrator, and that they offer support to those harmed.

4. Please share any reflections on the work of previous related inquiries, such as:
 - the Commonwealth Royal Commission into Institutional Responses to Child Sexual Abuse; and
 - the Victorian Parliamentary Inquiry into the Handling of Child Abuse by Religious and Other Non-Government Organisations.

Barriers to disclosure

Victims and survivors face many barriers in disclosing as the case at Beaumaris Primary School demonstrates.

Mathews (2003) notes survey results that found 12% of victims and survivors took 5-9 years to disclose, 16% took 10-19 years, and just under a quarter (24%) took 20 years or more to disclose childhood sexual abuse. Such significant delays in disclosing child sexual abuse is not an anomaly but is a reflection of key characteristics of the offending itself; namely silence, secrecy, and shame.

Victims and survivors of child sexual abuse face enormous barriers in disclosing. The impacts of the harm typically mean that individuals do not disclose until they feel safe to do so, and this frequently does not occur until some time has passed.

In many cases, having been completely disempowered by an offender, the psychological impacts of child sexual abuse have far reaching consequences: shame and guilt can often mean that victims and survivors are unable to disclose until parents have passed away; many victims and survivors are simply not ready to disclose as they may still be processing the psychological trauma and impacts of the sexual abuse; and victims and survivors may experience post-traumatic stress disorder (essentially this means that an individual is aware of the harm they experienced but disassociate themselves from any reminders of the traumatic event, including disclosing).

In addition, many victims and survivors experience negative reactions or inaction when they disclose. As the Board of Inquiry would be aware, one of Grahame Harold Steele's victims, [REDACTED], has spoken about this [REDACTED]. [REDACTED] disclosed to police [REDACTED] without any follow up or action being taken. [REDACTED]

Child safe organisations

In relation to child sexual abuse, we know that the greatest barrier to protecting children and young people is the silence, secrecy and shame that surround this offence.

Establishing a 'child safe organisation' involves a process based on identifying organisational factors that are associated with increased vulnerability for child sexual abuse. Research over the past decade has shown that the following factors increase risks within schools or other organisations:

- Staff being alone with a child: Environments where staff members have the opportunity to be alone with a child or children are high risk.
- Lack of staff accountability: Lack of transparency and accountability (both internal and external) create organisations where there is a high risk of problems and concerns being unidentified and/or hidden.
- Lack of commitment to child safe culture: Staff professionalism standards and professional development should include ensuring integrity and increase compliance with organisational policies.
- Poor policies and procedures: Organisations with no or poorly written policies and procedures, including lack of reporting guidelines, increase the risk of employing high risk staff or harm being unreported.
- Risky physical attributes: Opportunities to harm children are increased in organisations which are closed and create isolation from the outside. The physical structure of an organisation plays an important role in creating 'safe environments' for children and young people.

Bravehearts' believes that underpinning good child safe practices are the following:

- Organisations working with children have a moral and legal responsibility to protect children within their care.
- Organisations working with children have been, are and will continue to be vulnerable to child protection concerns until the issues are brought into the open.
- Strong policy will guide organisations in dealing with difficult situations. When there is a crisis, it may be harder to think clearly. Organisations with culturally embedded policies are in a better position to react in an informed way and avoid accusations of a biased response in any participant's favour or disadvantage.
- Organisations without child protection policies, guidelines and systems are more vulnerable to attracting offenders to their organisation.
- Organisations without child protection policies, guidelines and systems are more vulnerable to false or malicious accusations.
- Organisations without child protection policies, guidelines and systems may be more vulnerable to civil action.
- Rigorous child protection measures in the workplace helps to create 'child safe' organisations: that have an 'aware' culture; that do everything to prevent intentional and unintentional harm to children; where children feel safe; where children can speak out; where children are listened to; and where children and staff are respected and empowered.
- Providing opportunities for ongoing professional development for staff, related to understanding the dynamics of child sexual abuse, recognising signs a child may have been harmed, and responding to concerns a child may have been harmed, or where children discloses.
- Providing children and young people within a school or organisation with personal safety education, empowering them to be safe, building resiliency and reducing vulnerability, providing them with knowledge on what to do if they are feeling unsafe, and ensuring that they know that the school or organisation is committed to being a safe place.

It is clear from the multitude of reports of child sexual abuse within schools and other organisations, that prioritisation must be given to the protection of children and young people from harm.

We take this opportunity to acknowledge the work of the Board of Inquiry and express our appreciation for the opportunity to provide this submission. Please contact us on research@bravehearts.org.au or 07 5552 3000, if any further information is required.

Kind Regards,

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