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Victorian Aboriginal Child Care Agency (VACCA) submission in response to:

The Royal Commission into Institutional Responses to Child Sexual Abuse

Consultation Paper – Institutional Responses to Child Sexual Abuse in Out-Of-Home Care.

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Introduction

The Victorian Aboriginal Child Care Agency (VACCA) is the lead Aboriginal child and family welfare organisation in Victoria, protecting and promoting the rights of Aboriginal children, young people, families and the community. VACCA provides a range of services to the Aboriginal community particularly children and family services to support their wellbeing, safety and to strengthen Aboriginal culture and encourage best parenting practices. This includes re-unification services to Stolen Generations, and advising government and community services organizations in relation to child abuse and neglect issues affecting the community. VACCA is a statewide Aboriginal Community Controlled organisation whose purpose is to advocate for the rights of Aboriginal children, young people families and the community, and provide them with services premised on human rights, self-determination, cultural respect and safety.

VACCA's planning, program design and decision making processes prioritise the voice of Aboriginal people to ensure our approach and services meet the needs of the Community. VACCA has been operating since 1977, providing culturally responsive, safe and accessible services to the Community. VACCA has significant experience in the delivery of services across the universal, specialist and statutory platforms.

VACCA welcomes the opportunity to contribute to the Royal Commission into Institutional Responses to Child Sexual Abuse, Consultation Paper: Institutional Responses to Child Sexual Abuse in Out-Of-Home Care. VACCA's submission is based on our unique position as an Aboriginal Community Controlled Organisation (ACCO) which provides the Royal Commission into Institutional Responses to Child Sexual Abuse Support Service, as well as services in both the family violence and child protection areas and more broadly to vulnerable community members experiencing disadvantage. Our submission focuses on areas where VACCA believes our knowledge and experience enable us to make a valuable contribution. Our submission offers the following observations, issues, recommendations and priority actions particularly as they pertain to the Victorian Aboriginal community in which we work.

Key messages and recommendations

In addition to our responses to the specific questions included in the consultation paper, VACCA would also like to highlight the following key messages.

Connection to culture and community and the role this plays in healing trauma for Aboriginal children in out-of-home care.

VACCA was pleased to see the Royal Commission acknowledge in their consultation paper the importance of connection to culture and community and the role this plays in healing trauma for Aboriginal children in out-of-home care. Embedding a culture of child safety also means embedding a culture of cultural safety for Aboriginal children. Culture enhances an Aboriginal child's safety and therefore should be a key component of all policies and practices.

Rights perspective

Children's rights need to be asserted and amplified in all areas of life that relate to them. It is the right of every Aboriginal child to have access to Aboriginal specific services. The rights set out in the United Nations (UN) Convention on the Rights of the Child need to be at the forefront of all child safe policy and practice. For Aboriginal children the UN Declaration on the Rights of Indigenous People also needs to be highlighted. Human rights that support self-determination are fundamental to a holistic approach to Aboriginal children's safety.

Empowerment

Children need to feel connected, emotionally safe and culturally safe in their placement. Mechanisms to promote the participation and empowerment of children are incredibly important. Organisations need to foster a climate of transparency and openness as an important component to organisational child safety. Aboriginal children are less likely to engage, participate and tell anyone if they are feeling unsafe or being abused if they do not feel culturally safe. A child who is strong in their cultural identity is more likely to have a voice. A key principle of creating a child safe organisation is to ensure the voice of the child is heard and that children actively participate in the services provided by the organisation. Therefore ensuring children are strong in their identity will ensure they are better able to have a voice and participate in communicating when they feel safe and importantly when they do not feel safe.

Need for Aboriginal specific sexual abuse service

VACCA is very concerned by the lack of trauma informed and culturally grounded services that are available for children, young people and their families to access. The inextricable link of cultural abuse and sexual abuse for Aboriginal children highlights the critical need for culturally safe services to be available. We are disappointed by the lack of any Aboriginal specific services for Aboriginal children who have experienced sexual abuse or are engaging in harmful sexual behaviour and are of the view that until an Aboriginal specific service is funded to provide these much needed services, the healing for our communities is compromised.

Workforce issues

We know what keeps children safe is meaningful relationships with their case managers and carers. What is needed is well-resourced programs staffed by well-trained workforce inclusive of Aboriginal workers.

1. Definitions

The consultation paper refers to *sexually harmful behaviours*. VACCA believes the more appropriate terminology is *harmful sexual behaviours*. The term *harmful sexual behaviours* identifies the behavior as sexual while not limiting the impacts of the behavior to only the sexual domain. In contrast the term *sexually harmful behaviours* implies the harm from the behavior is exclusively sexual.

2. Child sexual exploitation and child-to-child sexual abuse

Identifying and responding to child sexual exploitation and child-to-child sexual abuse

Child sexual exploitation

1. We have heard that current responses to the sexual exploitation of children in OOHC around Australia are inadequate. We are specifically considering:

- **jurisdictions' poor identification of, and reporting of, child sexual exploitation in OOHC**
- **the lack of coordinated and cross-sectorial protocols, procedures and responses particularly among OOHC service providers, child protection and the police**
- **the lack of preventative measures – for example, strategies when children are missing from placement – and the enforcement of social media policies and education by OOHC, the police and child protection**
- **the absence of recording this form of child sexual abuse and the consequential lack of available data to show the incidence and prevalence**
- **the need to address the barriers to children disclosing sexual exploitation in OOHC.**

VACCA, like many providers of Out Of Home Care Services in Victoria agrees that the current understanding of and responses to sexual exploitation of children in Out Of Home Care are inadequate. Our view is that there is little understanding of the dynamics involved in child sexual exploitation, and the power imbalances between the child victims and the adults (generally men) who are able to groom and subsequently engage vulnerable young people into sexual activity that may be perceived as consensual by the adults involved in the child's life.

It is VACCA's stance that any child with a trauma history (and if they are in Out of Home Care they must have a trauma history of some form) even if sexual abuse is not a known issue, are unable to consent to sexual activity with any adult over 18 years of age. This is due to their vulnerability and compromised capacity to understand the power dynamic and be able to give informed consent.

VACCA is interested in working with the relevant systems to see improvements in the identification, reporting, understanding and responding to children who are exposed to or experiencing exploitation in Out Of Home Care.

VACCA is contributing to the development of a Sexual Health Policy for Children and Young People in Out of Home Care and it is envisaged that this will include improved education, understanding and responses to children at risk of and involved in child sexual exploitation.

VACCA agrees there is a considerable volume of work that is required to ensure all systems, ie Child Protection, Police, Out of Home Care Service Providers and therapeutic services are all connected and responding to the needs of these children. There is also work required in how the authorities

respond to the adults who are targeting and exploiting these children. VACCA is very committed to and interested in seeing significant changes in this area of work.

Prevention is always preferable to needing to respond and we agree that there is much work to achieve in this area. While protocols exist regarding reporting children who have gone missing from placement etc, sadly the volume of numbers of children and the overstretched nature of all the systems involved does lead to oversights in protocol adherence and timely responses to children who have left or not returned to their placement.

Our view is that children need to feel connected to, emotionally and culturally safe enough in their placement to be able to explore the dynamics of sexual exploitation and the specific risk to them as individuals. This work requires a degree of specialization that is not generally available within the Out of Home Care service staff. Young people are often disconnected from their placements which make these discussions very challenging for staff to have.

VACCA has been a long term advocate of systematic recording to ensure there is reliable data to inform and improve practice outcomes for Aboriginal children. To that end we believe it is crucial that all data sets include identifying if the child is Aboriginal. We were quite concerned to learn that a recently developed form to refer or register concerns about sexual exploitation of a child or young person in care did not have the Aboriginal identifier included on the form. We have raised this with the DHHS and are hopeful that this will be resolved but it is unacceptable that in 2016, there is not automatic consideration of this.

VACCA has a comprehensive understanding of the range of barriers to disclosure that face children disclosing sexual exploitation (or other sexual abuse issues). Our work in supporting Aboriginal men and women coming forward to tell their stories of institutional child sexual abuse has sharpened our understanding of the range of barriers to speaking out for Aboriginal children. As we have outlined in past submissions, the voice of the Aboriginal child in care is rarely sought out or heard, particularly by non-Aboriginal service providers who are unable to provide the cultural safety required for an Aboriginal child to feel safe enough to speak about their fears and concerns. Shame is an enormous issue for Aboriginal children and young people. The continued impacts of colonisation and intergenerational trauma, the legacy of the Stolen Generations, has resulted in speaking about sexual abuse or sexual exploitation as taboo subjects where a person fears they will not be believed or worse will be blamed for the abuse. This is another example of the inextricable link of cultural abuse and sexual abuse for Aboriginal children and further highlights the critical need for culturally safe services to be available to respond to children at risk of these harms.

Child-to-child sexual abuse

2. We have heard that more needs to be done to better protect children from, and respond to issues of, child-to-child sexual abuse in OOHC. We are specifically considering:

- **the shortage of home-based care for children with sexually harmful behaviours and the inappropriate matching of these children with other vulnerable children in residential and home-based care**
- **the lack of nationally consistent identification and terminology in relation to child-to-child sexual abuse in OOHC and the resulting impacts on data collection and knowledge**
- **the lack of adequate and sufficient treatment responses for children across Australia who display sexually harmful behaviours**
- **the lack of policies, procedures and/or best practice guidance for preventing and responding to child-to-child sexual abuse in OOHC**
- **the lack of adequate nationally consistent accreditation and professional development training for counsellors working in this field**
- **the lack of expert advice and assistance for foster carers and kinship/relative carers**

- **carers being given insufficient information about the child's background.**

VACCA has for some time been very concerned about the issue of child to child sexual abuse and the lack of a comprehensive culturally safe system response to address this issue. Without doubt, the shortage of safe placement options for children engaging in harmful sexual behaviours, the lack of appropriate matching of these children in out of home care placements and the fact there are NO culturally safe counselling services funded to address these behaviours within an Aboriginal service all contribute to this remaining an ongoing issue that is not only damaging to the child involved but all/any other children that comes into contact with the child.

VACCA has begun providing specialist training to its Out of Home Care staff and is encouraging foster and kinship carers to participate in this training with the aim of:

- Improving early identification of harmful sexual behaviours in children
- Ensuring safe responses to both the child engaging in these behaviours and other children impacted by these behaviours
- Building the expertise of staff and carers to appropriately respond
- Ensuring, to the extent we can, (given the lack of culturally safe services) that children engaging in these behaviours are provided with appropriate therapeutic service responses.

VACCA would support the development of nationally consistent identification and terminology in relation to child to child sexual abuse to ensure there is an accurate understanding of the nature and extent of this complex issue. Consistent data will potentially assist in better understanding the contributing factors to the occurrence of this behavior and successful or effective interventions in responding to these issues. Of course, it must be reiterated that the identifier for Aboriginality MUST be part of any data set developed.

VACCA is concerned about the lack of services and treatment responses for children who engage in harmful sexual behaviours. We are also very concerned that still in 2016, there have been no specific Aboriginal services established or funded to provide these services within the Aboriginal community.

VACCA has advised the Royal Commission in previous issues papers about the complete lack of any Aboriginal specific services for Aboriginal children who have experienced sexual abuse or are engaging in harmful sexual behaviours. Unfortunately this is despite the capacity and preparedness of agencies such as VACCA to provide this service within our community.

As VACCA has maintained throughout our advice to this Royal Commission, the issue of cultural abuse and sexual abuse are inextricably linked. Therefore any therapeutic response must consider the child's culture and experiences of cultural abuse alongside all other traumas if it is to be effective. Cultural safety is only able to be provided by an Aboriginal service and therefore until Aboriginal specific services are available for children with issues of sexual abuse in their history or harmful sexual behaviours, effective healing and recovery will be limited.

As previously stated VACCA is very supportive of the need to develop effective policies and procedures and develop best practice guidance for preventing and responding to child-to-child sexual abuse in OOHC. VACCA is committed to ensuring a cultural lens over the development of such policies and will provide any advice or guidance requested by the relevant authorities.

VACCA was invited and participated on a Panel presentation to the Redress Public Hearing which amongst other issues, considered the lack of adequate nationally consistent accreditation and professional development training for counsellors working in this field. For Aboriginal people, the issue of receiving a trauma informed service is not the only concern we spoke of here. The need for culturally informed and safe services was also highlighted. VACCA is fully prepared to provide

further input and guidance in respect of what professional development training and how counsellors can develop their skills in respect of cultural safety and knowing what is required to provide a culturally informed as well as trauma informed response.

VACCA agrees that there is an absolute need to provide guidance and assistance to foster carers and kinship cares/relative carers who are providing care to children who have been victims of sexual abuse and those children engaging in harmful sexual behaviours. VACCA has provided some limited opportunity for carers to attend training on these issues but understand that this issue is a difficult one for many Aboriginal people to discuss. Therefore we need to be very flexible and creative in the range of ways we can provide support to our carers. As with so much of this work, resources are overly stretched and the capacity for our organization within current funding constraints to be able to implement what we would consider a best practice approach is compromised.

Young people coming into care with problem sexual abuse need additional funding. This would allow for appropriate service delivery which may include additional training for care staff and/or an individual care model; initially or ongoing depending on what is required.

VACCA agrees that often carers are not provided with the information they require to make an informed decision regarding their ability or capacity to provide safe care for children who have a sexual abuse history and this is even more the case with children engaging in harmful sexual behaviours. Developing a comprehensive understanding of the range of issues caring safely for these children and ensuring they are being provided with the required therapeutic service response is an area VACCA, like most services providing out of home care is a work in progress. It is an area we are committed to further developing and articulating a model of care and therapeutic intervention that we believe will provide children with safety and the opportunity to heal to enable them to lead safe healthy futures.

3. Data limitations

Improving the quality of data on child sexual abuse in OOHC

We seek your views on whether there should be a nationally consistent approach to the collection of data, including agreement on key terms and definitions across jurisdictions, in relation to child sexual abuse in OOHC.

Following what we have been told, we are considering that the data model proposed below would improve the understanding of the extent and nature of child sexual abuse in OOHC. The proposed data model would enable an informed analysis to develop an evidence base about the safety of children from sexual abuse and the performance of the system in responding to abuse.

Proposed data model

1. All allegations of sexual abuse concerning children in all forms of OOHC should be extractable as a unit record data file with a unique identifier for each child.

2. For each allegation of sexual abuse, data should be recorded in fixed-response fields that describe:

- **the date of the incident**
- **the date of the report**
- **the location where the incident took place**
- **the relationship of the perpetrator to the victim.**

3. Each allegation should include demographic descriptors for the child and the perpetrator, including:

- **disability (including the type of impairment)**
- **mental health**
- **Aboriginal or Torres Strait Islander background**
- **culturally and linguistically diverse background.**

4. Data should be disaggregated by placement type.

5. Data should be used to monitor treatment and support provided, and life outcomes.

6. Data should include police reports, and outcomes of criminal and civil justice responses.

VACCA supports the Royal Commission's proposed national data collection model with the caveat that rather than this proposed model just being a data model for sexual abuse, that it needs to be a model inclusive of all forms of abuse, including cultural abuse. Demographic data also needs to be collected, including the gender and age of the child and the perpetrator, reason/s for the child being placed in out-of-home care, how long the child had been in out of home care and how long the child has been in their current placement.

The Royal Commission's proposed model includes recording whether or not the individual is Aboriginal for both the child and the perpetrator and VACCA believes it is vital that this data is collected and reported on. This is required to ensure practice, policy and research are all informed to meet the needs of Aboriginal clients/survivors.

Having clear and well understood terminology is required in order for all abuse to be identified and responded to. Currently jurisdictions do not have the same definitions of abuse types. We believe that an agreement on key terms and definitions across jurisdictions, in relation to abuse types would significantly improve data collection and strengthen both current and future prevention strategies. In relation to definitions of sexual abuse this needs to include definitions of child-to-child sexual abuse and sexual exploitation. The current system of individual protocols employed by states and territories for data collection means that gaps remain in recording and reporting on different forms of abuse which then significantly limits the usefulness of data for practice, policy and research.

In VACCA's experience working with the Victorian Aboriginal community, seeking records and documentation of time in care has been a major barrier for clients. Often such information has been lost and or destroyed by the institution, which then has compounded client distress, impeded the healing journey, and denied the client much needed closure. VACCA believes that more transparency is needed in the sharing of information with clients and that the proposed model of data collection must be mindful of client accessibility. Further that the proposed model includes appropriate security measures to ensure all data is recorded, kept, and made available to clients and their families who are supported by culturally appropriate services.

VACCA supports the ACT approach outlined in their submission to the Royal Commission Public Hearing 24 – Preventing and responding to allegations of child sexual abuse occurring in out of home care. Specifically the ACT model proposed the following:

The ACT would propose that a model for harmonising State and Territory responses to allegations of sexual abuse in out-of-home care should begin with strategies to achieve:

- *consistency between jurisdictions on how abuse in care is defined and how data is collected and reported;*
- *consistency in relation to how substantiation of abuse in care is defined and reported;*
- *adoption of national minimum standards for carer screening, assessment (including reassessment) and training;*
- *resolution of issues relating to industrial relations to facilitate the introduction of professional foster care and reduce reliance on residential care;*
- *resolution of information sharing issues related to responding to the needs of children; and*
- *harmonisation of legislation to facilitate easy transfer of care orders when children relocate interstate. (p.29 ACT Government Submission o the Royal Commission into Institutional Responses to Child Sexual Abuse. Case Study 24: Preventing, and responding to allegations of child sexual abuse occurring in out-of-home care. Submission – Feb 2015).*

4. Regulation and oversight

Improving regulation and oversight to better prevent and respond to child sexual abuse in OOHC

The regulation and oversight of each Australian jurisdiction's OOHC system differs, although there are some common features. Uniform OOHC regulation and oversight across all jurisdictions may not be achievable, or necessarily appropriate, at this time. However, we are considering whether the safety of children in OOHC would be advanced by greater consistency in some areas of regulation and oversight. Regulation and oversight of OOHC in each jurisdiction could include:

1. accreditation of OOHC service providers, whereby:

- all OOHC providers – both government and non-government – are required to be accredited to a minimum, nationally consistent standard (for example, the National Standards for Out-of-Home Care or equivalent)
- in each jurisdiction, a body independent of the relevant jurisdiction's lead department has responsibility for assessing and granting applications for accreditation
- the accreditation body retains ongoing responsibility for monitoring accredited providers' continued compliance with conditions and standards of accreditation.

2. authorisation of carers, whereby:

- all carers are assessed and authorised according to minimum, nationally consistent standards (including satisfactory probity checks for carers and household members over the age of 16 years, and comprehensive criminal background checks and WWCC)
- all carers are reassessed on a regular basis. This reassessment process would include an opportunity for the child/children in care to provide feedback about their placement.

3. oversight of the OOHC system, with:

- core oversight functions conducted by a body external to, and independent of, the relevant jurisdiction's lead department and all service providers.

We are also considering whether the following regulatory and oversight mechanisms may enhance the protection of children in OOHC:

4. Independent oversight of complaints handling conducted by a body independent of the lead department and all service providers. That is, a ‘reportable conduct scheme’ in each jurisdiction.

5. A carers register in each jurisdiction, containing relevant information about all applicant and authorised carers, accessible by all jurisdictions’ accredited OOHC service providers and appropriate regulatory and oversight bodies.

VACCA supports the Royal Commission in its promotion of culture and strategies that prevent the harming of children. Working with the Victorian Aboriginal community, VACCA believes a key element to such culture and strategy is the provision of Koori mentors – workers that children are able to develop a rapport with over time and subsequently trust to seek out when in need. With the key role of Koori mentors being to develop a trusting relationship with children, such positions must be ongoing to ensure support is maintained throughout the child’s time in care. Such positions would enhance the provision of a culturally safe environment for children and strengthen the organization’s connection with the Aboriginal community(s).

Whilst formal recognition is important, it is vital that services move beyond acts of symbolism and work towards implementing culturally respectful and sensitive programs that are developed in ongoing partnerships with the Aboriginal community(s). The proposed Koori mentor position would not only support Aboriginal children and families on a daily basis, but simultaneously empower community voice in the decision – making processes that affect the welfare of Aboriginal children. In addition, such measures would inform engagement with the Aboriginal community and reduce the probability of re-traumatizing.

We know what keeps children safe is meaningful relationships with their case managers and carers. What is needed is well-resourced programs staffed by well-trained workforce inclusive of Aboriginal workers.

5. Information Sharing

Potential improvements in information sharing to better protect children in OOHC

VACCA believes that the sharing of information is crucial to providing best practice supports for survivors of child sexual abuse. In addition, shared information between the department, institutions, support services and survivors, is integral to developing preventative measures that ensure children in out-of-home care (OOHC) are safe.

1. Institutions’ sharing of information related to child sexual abuse with children in OOHC could be strengthened to:

- **Better inform children about child sexual abuse, especially where they have been or may be directly affected by such abuse.**
- **Better promote children’s participation in decision-making that affects them.**

VACCA would like to reiterate the importance of culturally informed and safe supports being available to Aboriginal children in Out of Home Care. It is the right of every Aboriginal child to have access to Aboriginal specific services, however as previously advised, there are no specific Aboriginal sexual abuse services available for Aboriginal children to access.

VACCA is keen to develop a specific sexual health and education program aimed at demystifying sexual abuse and written in a culturally informed and safe way that addresses the particular issues of shame and other cultural nuances that exist for Aboriginal children, families and communities. . VACCA believes that workers and services in mainstream organisations must be appropriately informed on the impact of transgenerational trauma in the Aboriginal community(s) in order to prevent re-traumatizing survivors, their family(s) and community(s). This requires that staff in these agencies have not only attended cultural safety training but routinely consult and seek cultural advice in regard to addressing the needs of the children in their care.

VACCA believes that empowering our young people to make informed decisions on matters that affect them is vital to producing positive outcomes for those currently in care. As we have articulated previously in submissions, hearing the voice of the child is critical and the voice of an Aboriginal child in care is not generally heard to the degree it should be. This is imperative where Aboriginal children are in Non Aboriginal care and often do not have opportunities to be heard. Children's voices must be heard and their concerns genuinely considered when exploring placement options and matters that directly affect the welfare and safety of the child and their family. When working with the Aboriginal community it is important that Aboriginal specific services are accessible to children and their families seeking support.

The expectation placed to share intimate details whenever engaging with a new service, institution, and or authority remains a major barrier for Aboriginal people and at times can impede the healing journey. Information sharing that ensures the safety and wellbeing needs of Aboriginal children are addressed is critical. It is often in the "how" information is shared, rather than "what" information is shared that is the issue. To this end, being culturally sensitive and informed will enhance the outcomes for Aboriginal children and provide the best chance for healing from both sexual abuse and cultural trauma.

2. Institutions' information sharing of information related to child sexual abuse with carers could be strengthened to better assist carers in:

- **making informed decisions to accept placements**
- **supporting placement stability**
- **providing appropriate care for children who have been sexually abused and for children with sexually harmful behaviours**
- **managing risks to children placed in their care and risks to other children in their household.**

VACCA supports the sharing of information and believes transparency between services is integral to providing best practice supports for clients and families in need. However as identified by the Royal Commission, the sharing of information with carers can pose privacy and confidentiality issues

within the Aboriginal community. As stated above, VACCA believes carers need accurate information to be able to make informed decisions about their capacity to care for any child they are being asked to consider. It is in how the issues pertaining to a particular child are discussed and the respect that is afforded the child and family in these discussions that is important.

If we do not provide accurate information about the abuse and trauma history of a child, including any behavioural challenges including engaging in harmful sexual behaviors, there is a high risk of setting the carer and child up for failure. Many of our children have already experienced far too many changes in placement and it is VACCA's view that full disclosure in relation to these issues is imperative. As mentioned previously it is in the how this is done that is important to respect the child and their family's right to privacy and confidentiality

3. All jurisdictions could have in place nationally consistent arrangements for intra-jurisdictional and inter-jurisdictional exchange of information related to the safety and wellbeing of children, including information related to child sexual abuse in OOHC contexts.

These arrangements could be modelled on Chapter 16A of the Children and Young Persons (Care and Protection) Act 1998 (NSW) to enable information sharing for purposes related to identifying, preventing and responding to child sexual abuse in OOHC contexts.

In particular, these arrangements could:

- **enable direct exchange of relevant information between a wide range of prescribed bodies, including service providers, government and non-government agencies, law enforcement agencies and regulator/oversight bodies, involved in the lives of children in care**
- **enable prescribed bodies to provide relevant information to other prescribed bodies without a request, for purposes related to identifying, preventing and responding to child sexual abuse in OOHC contexts**
- **compel prescribed bodies to share relevant information on request from other prescribed bodies, for purposes related to identifying, preventing and responding to child sexual abuse in OOHC contexts, unless limited exceptions apply**
- **explicitly prioritise safety and wellbeing of children over confidentiality and privacy.**

In relation to the above suggestion, VACCA supports the notion that children's safety and wellbeing should be prioritized over confidentiality and privacy both as this is, in our view in the best interests of the safety issues for both children at risk of being sexually abused and for a child who has engaged or is at risk of engaging in harmful sexual behaviours. Exactly what this model could or should look like will require further discussion and input by agencies such as ours, but in principle VACCA supports the notion of such an arrangement.

4. All jurisdictions and prescribed bodies subject to information sharing arrangements, as proposed at 3 above, could work together to ensure implementation is supported with adequate education and training of those responsible for sharing information. Education and training should promote understanding of, and confidence in, appropriate information sharing to better identify, prevent and respond to child sexual abuse in OOHC contexts.

As previously stated there are a number of professional development, educational and training requirements that VACCA would like to develop and implement with all staff and carers in relation to caring and supporting both children with a sexual abuse history and children engaging in harmful sexual behaviours. Ensuring cultural safety and respect is entwined throughout these developments will be significant in achieving the outcomes we are aiming for.

6. Child safe organisations

Applying the child safe elements to the OOHC sector

- 1. the roles, accountabilities and interdependencies of different parts of the OOHC system (such as government agencies, non-government organisations and carers) in delivering and overseeing the key elements of a child safe organisation**
- 2. the application of these elements in the OOHC system, including whether they should be binding or non-binding**
- 3. whether all forms of OOHC should be required to comply with all of the child safe standards and principles**
- 4. the regulatory, oversight, monitoring and implementation support mechanisms that might be required to support the implementation of child safe standards in OOHC**
- 5. whether there are specific challenges/considerations for the OOHC sector and/or particularly vulnerable groups within the OOHC setting when it comes to implementing child safe standards**
- 6. resources and support mechanisms that might be required for OOHC organisations to comply with child safe standards**
- 7. the best ways to drive continued practice improvement in child safety among relevant organisations within the OOHC sector**

All of the nine elements of a child safe organisation identified in the consultation paper are necessary but not sufficient to ensuring organisations are child safe environments. Having these elements in organisations' policies and procedures for creating and maintaining a child safe environment is important. However what is critical is how these standards are implemented, communicated, understood and trained to on a regular and ongoing manner.

In addition, a further element needs to be included and that is cultural safety. VACCA believes this is a disappointing omission that cultural safety has not been included in the elements identified by the Royal Commission. When sharing their story with VACCA, clients of our Royal Commission support service have stated that past discriminatory practices embedded a fear of not being believed by the institution and therefore influenced their ability to disclose the abuse at the time it occurred.

Cultural safety is relevant to each of the nine elements and should be considered as part of considering all elements of child safety. In addition, cultural safety should be a distinct element of a

child safe organisation. This ensures it is given the prominence required and that monitoring and auditing of the standards will then include monitoring and auditing of cultural safety. Culture is a crucial consideration for organisations to be child safe. For Aboriginal children, an organisation cannot be child safe without also being culturally safe. VACCA's key premise concerns the fundamental need for all people to feel culturally safe. That is, every person needs to feel that their sense of self and sense of identity is valued by the people and environments that surround them. Children that are strong in culture and celebrate their identity and culture have a strong voice and are empowered. Culture must always be at the forefront when working with Aboriginal children. A service system that values Aboriginal culture and is culturally competent is one which can provide safety for Aboriginal children. A culturally-informed policy is required and to this end VACCA has developed a cultural safety framework including recommendations for government departments, the human services sector and Aboriginal organisations and communities. The culmination of this work was a major policy and research report called *This is Forever Business: A framework for maintain and Restoring Cultural Safety in Aboriginal Victoria* and published in 2010.

As supported by the Royal Commission in previous consultation papers, it is important that matters concerning cultural abuse be afforded equal understanding to those of physical and sexual abuse. Acknowledgement of Australian history and its continued impact on the Aboriginal community(s) today is key to establishing trusting relationships with clients and their families. These relationships form the foundation and influence all levels of engagement with the Aboriginal community(s). For Aboriginal children, an organisation is not child safe unless it is also culturally safe.

VACCA strongly believes that the application of these elements in the OOHC system should both be binding and include all forms of OOHC. The elements of child safe organisations should not be different dependent on the type of care provided or the type of organisation providing the care. This means the child safe elements must equally apply to community service provided placements and department provided placements.

Strategies to embed an organisational culture of child safety need to be multi-faceted. The most comprehensive and well considered policies, procedures and guidelines will not keep children safe if they are not known, understood, regularly reviewed and actively implemented on a day to day basis by all in the organisation, regardless of role. Translation and implementation of policies into practice at all levels of the organisation from board members, CEO, managers and all staff is critical so that everyone is aware of and know what policies mean for them in their role within the organisation.

Organisations need to actively foster and demonstrate a culture of open communication. Ongoing conversations are needed at the organisation-wide level, as well as at the team level and in supervision.

Dangers to be alert to are complacency or child safe standards becoming a 'tick the box exercise'. Another barrier to child safety can be that organisations have too many policies, which are too complex and poorly communicated. Policies and procedures should be clearly articulated, unambiguous and use plain language.

As already mentioned embedding a culture of child safety also means embedding a culture of cultural safety for Aboriginal children. Culture enhances an Aboriginal child's safety and therefore should be a key component of policies and practice regardless of setting. Child safety and cultural

safety need to be considered as part of induction, specific training modules, which are re-visited in an ongoing way (rather than once off).

To ensure safety and prevent abuse, vigilance is key and it can only happen in an environment where there is constant discussion about respect for the rights of children. Development of a guide such as the Queensland Government's Department of Communities, Child Safety and Disability Services (2013) Practice Resource: Participation of children and young people in decision making is useful. This practice resource outlines ways to promote participation of children in out-of-home care in planning and decision making processes and includes sections on: engagement; promoting participation, involvement in decision making processes; engaging Aboriginal children to participate in decision making; conducting meetings with children and complaints. Training to and implementation of such a practice resource is also required.

Organisations need to create an environment that gives children a voice, ensuring there are processes for children to be heard, empowered and a visible and active part of the organisation. Multiple opportunities and a range of options for children to provide feedback to organisations should be provided. For Aboriginal children Yarning Up circles can be a culturally appropriate way to seek feedback, and are likely to be better utilised than feedback forms. Also having different options of who children can provide feedback to, is important. These conversations are important and give young people a voice and empowerment and combat a culture of silence. Children's rights also need to be promoted. Children are our most vulnerable in society. The rights set out in the United Nations (UN) Convention on the Rights of the Child need to be at the forefront of child safe policy and practice. For Aboriginal children and for children in out of home care the UN Declaration on the Rights of Indigenous People and the Victorian Charter for children in out of home care also need to be highlighted. Human rights that support self-determination are fundamental to a holistic approach to Aboriginal children's safety.

Mechanisms to promote the participation and empowerment of children are incredibly important. The Bringing Them Home Report (HREOC, 1997) and the Royal Commission into Institutional Responses to Child Sexual Abuse have both highlighted the dangers in children not having a voice, or not being heard and that if children are invisible they are unsafe. Children's rights need to be asserted and amplified in all areas of life that relate to them. Organisations need to foster a climate of transparency and openness as an important component to organisational child safety. Secrecy and closed systems allow for perpetrators to take advantage of vulnerable children and for this abuse to go unreported, unacknowledged and for there to be no healing opportunities for children who have suffered abuse.

Aboriginal children are less likely to engage, participate and tell anyone if they are feeling unsafe or being abused if they do not feel culturally safe. A child who is strong in their cultural identity is more likely to have a voice. A key principle of creating a child safe organisation is to ensure the voice of the child is heard and that children actively participate in the services provided by the organisation. Therefore ensuring children are strong in their identity will ensure they are better able to have a voice and participate in communicating when they feel safe and importantly when they do not feel safe.

7. Prevention of child sexual abuse in OOHC

A national strategy to prevent child sexual abuse in OOHC

We seek your views on whether a national strategy on child sexual abuse prevention education for children in OOHC is required and should be embedded in the existing National Framework. Such a strategy would aim to create nationally consistent policy and practice expectations, to prevent child sexual abuse in OOHC in Australia and to encourage disclosures at the earliest possible time. This strategy requires the development and evaluation of resources and program implementation.

VACCA is committed to supporting any strategy that will enhance children's safety and lead to ensuring the voice of the child is heard. It is arguable whether the existing National Framework makes any difference to Aboriginal children in care and so whether using this platform will lead to any significant change.

A consistent, national education strategy may include:

1. raising awareness about children in OOHC being vulnerable to sexual victimisation and revictimisation, among carers, children in OOHC, practitioners and OOHC service providers

As we have stated above, there is a significant body of work required to ensure the OOHC service networks (services, carers, and children) are aware of the needs of victims of sexual abuse; young people at risk of sexual exploitation and those engaging in harmful sexual behaviours. VACCA would reiterate that the awareness raising, professional development training and guidance in respect of this must be developed and implemented by Aboriginal services to ensure it is culturally safe and respectful for Aboriginal children and carers. This means the current impacts of colonization, intergenerational trauma and cultural abuses experienced by Aboriginal people are integrated into the package so as to ensure its relevance. Merely looking at the issue of sexual abuse will not in our view lead to significant improvements in this area.

2. an education prevention program targeted to children, carers and practitioners in OOHC, which:

- **identifies the necessary elements, drawing on those covered in school based programs identified in this chapter**
- **covers how children can make a disclosure**
- **covers how to support young people when a friend discloses sexual abuse to them**
- **covers all forms of child sexual abuse by different perpetrator groups**
- **is flexible and tailored to meet the individual needs of a child and their history**
- **is delivered in a variety of formats, such as supportive group formats or on an individual basis**

VACCA is supportive of the development of an education prevention program that includes the above with the caveat that for Aboriginal children and young people the package is developed through a cultural lens to ensure the cultural safety and respect as outlined above is afforded to those engaging in such a program.

3. development and distribution of resources that are culturally sensitive and suitable for young people with a range of special needs including learning problems and/or disability

Clearly VACCA supports the development of culturally sensitive resources but would like to draw a clear distinction between culturally sensitive resources and those that may be appropriate to children and young people with special needs. It is culturally disrespectful to refer to these points together and while we accept this would not be the intent of the Royal Commission, it is the continued message for our community.

4. development and distribution of resources that include material for same sex attracted and gender questioning young people

VACCA agrees and supports the development of resources for GLBTG young people and would again highlight the need for culturally safe materials for these young people.

5. development of an education and training framework for all foster, kinship/relative and residential carers and practitioners based on:

- **role clarity, processes and recording practices as set out in OOHC policies and procedures**
- **understanding the importance of enabling a culture of openness, and creating an environment where a child feels safe to disclose abuse**
- **developing skills and knowledge about how to talk to children about healthy relationships and sexuality education**
- **understanding social media policies, with specific reference to pornography and the transmission of sexualised images (sexting)**
- **awareness about the added risk of bullying, exploitation, depression and risk taking for same sex attracted and gender questioning young people**
- **ongoing coaching and supervision of staff and carers, building on their initial education and training as outlined above, to develop their knowledge of and skills in using the resources**

As previously outlined, VACCA is very supportive of and is in the early phases of developing such a framework for all our OOHC programs. Trying to review and develop our current programs and continue providing these services is a challenging juggling act without the required resource to undertake the work.

6. mechanisms for implementing, reviewing, evaluating and improving prevention strategies and their components.

As with all our program and service development, regular review and evaluation is part of a continuous improvement strategy and we are committed to undertaking this to ensure our placements are safe for all our clients and assists them in their healing journeys.

VACCA supports the Royal Commission and the proposed national strategy to prevent child sexual abuse in OOHC with a hope that greater awareness is generated through informed policy and practice. In addition, the reporting of child-to-child sexual abuse and child sexual exploitation is critical to the development of successful prevention strategies – such strategies must first acknowledge the different forms of child sexual abuse in order to affectively address child sexual abuse in OOHC.

It is crucial that the proposed strategies incorporate cultural awareness for work with diverse groups and the Aboriginal community(s). Further that such awareness training and education is not limited to introductory seminars for new employees but rather is strengthened by regular reviews and engagement with Aboriginal specific services.

As outlined in our response to chapter 6 and safe environments, successful prevention strategies empower children to report abuse (and or suspicious behavior) and ensure their voice is heard. Services working with Aboriginal children must be informed on the history of child protection and the Aboriginal Community, and how past government policies and practices continue to influence their relationship today, in order to understand and meet growing needs. This is particularly relevant to child disclosure and reporting of abuse. VACCA's proposed position of a Koori mentor would be instrumental in liaising with child protection and relevant services on the child's behalf, ensuring the child's voice is heard and needs met.

8. A supportive and quality care environment

Improving support for children and young people

We are considering improvements that may be required to better support children who have been sexually abused in OOHC and their carers and families. We welcome submissions with respect to our considerations as outlined below:

Establish a nationally consistent therapeutic framework for OOHC service delivery

- 1. Develop a sector-wide and nationally agreed therapeutic care framework that defines therapeutic care, and outlines the essential elements required.**

VACCA believes that in addition to a defining therapeutic care, it is essential for Aboriginal children and young people that cultural safety is integrated into any framework developed. To this end it is critical to ensure that the cultural components reflect the specific culture of the Aboriginal community it is developed for. What is culturally safe in Victoria is not the same as in Queensland or central Australia. There are 700 nations, not one Aboriginal Australia.

- 2. Embed consistent evaluation of child outcomes and longitudinal research, to inform the development of therapeutic residential care.**

VACCA recognizes the importance of developing a strong evidence base for developing therapeutic residential care with the agreement that research ensures that Aboriginal services are involved in the design and development of any evaluation or research that will inform outcomes for Aboriginal children and young people.

Expand trauma-informed therapeutic treatment and advocacy and support services

- 3. Ensure that children can access trauma-informed advocacy and support services.**

As highlighted numerous times in this response VACCA is very concerned by the lack of trauma informed advocacy and support services that are available for children, young people and their families to access. We are disappointed that there are no Aboriginal specific services funded in Victoria and continue to maintain our view that until an Aboriginal specific service is funded to provide these much needed services, the healing for our communities is compromised.

4. Address the cultural needs of children from Aboriginal and Torres Strait Islander backgrounds and young people who have been sexually abused in care, through appropriate therapeutic treatment, advocacy and support services that, where possible, be provided by Aboriginal and Torres Strait Islander practitioners.

VACCA's work in supporting Aboriginal people to tell their story to the Royal Commission has deepened our understanding of the issues this childhood trauma causes to the individual, their family and community. Our work has demonstrated that Aboriginal survivors of childhood sexual abuse have also suffered cultural abuse and that any effective intervention needs to look at these two abuses and their impacts together. As we have stated many times before, they are inextricably linked and for healing to be effective, culture and the role of reconnection is integral and therefore, can only be successfully provided by an Aboriginal service.

5. Ensure adequate access to therapeutic treatment and advocacy and support that is tailored to a child's individual needs, culture, age and abilities, with particular consideration for children with disability and children from culturally and linguistically diverse backgrounds.

6. Ensure adequate access to therapeutic treatment and advocacy and support for children who live in rural and remote areas within Australia.

VACCA is both aware and concerned about the lack of therapeutic treatment services for children who live in Melbourne, a situation that becomes more significant the further away from the CBD the child lives. In order to address this challenging issue, culturally safe, therapeutic services must be available as soon as a child or young person is identified as in need of these services. Waiting lists in the only available (mainstream) services in Melbourne are at least 6 months. This is very concerning as these children are not getting the required intervention and support they require, and this leads to significant risk of re-victimisation both for child and young people who are victims of sexual abuse or sexual exploitation and increased risk of a child or young person engaging in further harmful sexual behaviour – so the cycle continues.

7. Provide systematic training for carers and practitioners, especially in the areas of therapeutic care, responding to trauma and the impact of sexual abuse. Regular supervision and support is integral to good outcomes, and training should not be a one-off event; rather, it must be part of an overall strategy and therapeutic approach to OOHC.

VACCA would reiterate our absolute support of the need for regular training of carers and practitioners to ensure children are in optimum caregiving environments which in themselves can be very healing to a child or young person. As we have stated numerous times, adequate resourcing to enable the development of a carer and professional development package to resource our workforce through systematic training, supervision and support is vital to enable us to achieve best practice in caring safely for these highly vulnerable children and young people.

Enhance placement stability and reduce the number of 'strangers' in a child's life by increasing the availability of placement options – including professional carer models

8. Develop professional foster care models, in-home care models, and therapeutic family group home models of care.

9. Expand residential therapeutic treatment options for children.

10. Create nationally consistent system for home-based care reimbursements, to address allowances differing greatly across jurisdictions.

The issue of 'strangers' in a child's life should be viewed through a different lens when considering Aboriginal children being cared for by Aboriginal adults. Traditionally, the caregiving role with Aboriginal children was not the sole sphere of the mother. Aboriginal children were raised by aunts, cousins, grandmothers and children were very familiar with the particular connection they had with each caregiver and it in no way was experienced as too many adults in the child's life. In fact Dr Bruce Perry has advised that as humans we need a number of adult caregivers in our lives and that the all too familiar single parent with 2-3 children is the reverse of the optimum arrangement of one child to 2-3 adults in carer roles.

VACCA agrees that numerous adults in a child's life that have no connection to that child, and children being shifted from placement to placement is far from ideal, and would like the opportunity to trial a shared family care arrangement with 2-3 connected/related families sharing the care of a child or sibling group. This would replicate the way many of our families with no child protection intervention structure themselves and in our view is a more culturally and therapeutically safe option for children than any model currently available to our children.

There is a definite need to consider a range of care options for children, as it is evident those on offer are not in a way meeting the needs of very vulnerable traumatised children and young people. Thinking through how this may best meet the cultural needs of Aboriginal children and the various needs of Aboriginal carers is an area of work VACCA would welcome and see as critical to enable us to better meet the needs of children in both the child protection and out of home care services. We know what we are currently able to offer is not leading to the outcomes we wish to see for our children.

Understanding the social and economic situation of many Aboriginal families, and the resources they require to be able to provide care for our children is critical. VACCA has never understood the Department's rationale to make resources (sometimes significant) available to non related carers but do not afford the same funds to related or kinship carers. This situation has been in need of review and change for many years and we would welcome a best practice equitable model that enables our children to be cared for safely within their community.

Provide better workforce planning and development for residential care staff

11. Have jurisdictions agree on a strategy to professionalise and build the capacity of the residential carer workforce.

12. Have jurisdictions establish agreed targets for reducing the use of casual staff in residential care facilities.

13. Establish nationally consistent standards for training and supervising externally accredited residential carers.

VACCA supports all efforts to improve the residential care model, particularly initiatives to enhance the ability for this model to be therapeutic for those children who are suited to this model of care. We would add that any effort to professionalise the residential care model must include cultural

safety and a specific understanding of the therapeutic and cultural needs of Aboriginal children to ensure the healing needs of our children can be met.

Any training to this workforce must include cultural respect and safety training. As the Royal Commission is no doubt aware, Aboriginal children are over represented in the Out of Home Care and residential care systems and often this sees the beginning of the path to youth justice and prison systems as they grow. Intervening to change this trajectory for our young people is something VACCA is committed to being a part of.

Improve protections against child sexual abuse for children in kinship/relative care

14. Develop a 'kin-specific' approach to a culturally safe and appropriate kinship/relative carer assessment and recruitment that is differentiated from foster care approaches.

15. Increase the casework support and oversight for children in kinship/relative care.

16. Promote the engagement of Aboriginal and Torres Strait Islander children with their culture and strengthen the capacity of Aboriginal and Torres Strait Islander community controlled organisations to place and support children in care.

17. Increase the implementation of the Aboriginal and Torres Strait Islander Child Placement Principle, promoting culturally appropriate assessment; implementation of cultural care plans; monitoring and accountability for implementation; and holistic and community-based solutions to the support needs of Aboriginal and Torres Strait Islander kinship/relative carers.

18. Conduct more research to investigate the long-term outcomes for children of kinship/relative care.

VACCA is well aware of the challenges for kinship care recruitment and assessment of our families. As stated above, we would like to see a "shared family care" model of kinship care developed that would provide community care in culture for our children. Funding to Aboriginal services to enable them to provide culturally safe support to families is required. In Victoria, the large majority of kinship care placements are managed by child protection and this is culturally insensitive and ineffective for our families.

VACCA is most concerned that despite legislation in every jurisdiction that enacts the Aboriginal Child Placement Principle, so many of our children are not living in accordance with this. We believe a lot more needs to be done to support our families heal from the ongoing legacy of colonisation and intergenerational trauma to reduce the numbers of children coming to the attention of the child protection and out of home care systems. Where children require placement outside their immediate family, creative flexible models, that are well supported need to be investigated to give children the best chance of living with their kin. Share family care is a model that we believe would significantly enhance the ability to adhere to the Aboriginal Child Placement Principle.

Increase support when leaving care, and in the care leaver's post-care life

19. Government and non-government OOHC service providers develop leaving care plans for all care leavers, and address any current risks to children when they leave care. Arrange access to therapeutic supports and ensure that young people:

- **are educated and supported in undertaking any victims compensation claims for sexual abuse and/or other abuse suffered while they were in care**

- **know the processes involved in making complaints, including referring matters to the police for criminal investigation**
- **have access to supportive environments where they can disclose abuse, both at the time of leaving care and after they have left care.**

20. Consider innovative ways to communicate with young care leavers, such as the internet and mobile applications, so that the leaving care process can be part of the disclosure process for a young person who has been abused in care.

21. Improve recordkeeping and access to care leaver records.

VACCA supports the development of a sector-wide and nationally agreed therapeutic framework. As stated by the Royal Commission, it is important that the proposed framework acknowledges and supports the implementation of Aboriginal specific healing services in order to meet the diversity of needs in the Aboriginal community(s).

VACCA's work with the Stolen Generations has informed the healing practices employed to support community members coming forward to share their story. As the Royal Commission is already aware, trans-generational trauma relating to the forcible removal of Aboriginal children is often inextricably linked with the trauma related to abuse. The ongoing affects of cultural abuse and the separation from family compound the experience of being abused as a child and therefore it is vital that healing services are culturally appropriate as well as trauma informed.

VACCA agrees that a "one off" session of cultural awareness training is insufficient and that support services must regularly engage and collaborate with Aboriginal specific services to develop ongoing programs that are driven by community voice and needs. Aboriginal cultural practices and practitioners must be acknowledged as leading healing supports in the Aboriginal community(s) and afforded equal provisions as that of their mainstream counterparts.

A client's reconnection with self, culture and community has proven to significantly impact the healing process. Healing programs supported by VACCA, such as returning to country, on country learning and cultural practices have empowered clients to take lead on their journey and confidently move forward with improved coping mechanisms and strengthened self-belief.

In regards to terminology, VACCA's experience shows the term 'treatment' or 'therapy' can often imply surface level care that is symptomatic in its approach as opposed to addressing the causes of deep-seated trauma and loss. In addition, and as stated in previous submissions by VACCA, a significant number of clients have expressed discontent with mainstream counseling and or therapeutic services, stating that such services failed to understand the complex needs of the Aboriginal community(s).