Royal Commission: Issues Paper 10

ADVOCACY AND SUPPORT AND THERAPEUTIC TREATMENT SERVICES

My name is Caroline Knight, I am a Senior Social Worker at the Child Protection Unit, Children’s Hospital Westmead. My role includes providing crisis and ongoing counselling for child victims of sexual assault. I will often accompany children and non-offending family members to Court.

TOPIC A

1. What advocacy and support and/or therapeutic services work for victims and survivors?

Access to free sexual assault counselling following a sexual assault is always beneficial. Having a service which does not limit the amount of sessions which can be provided is important.

Should the matter proceed through the legal system, having a counsellor or support person with knowledge of the system is useful.

2. What does not work or can make things worse or be harmful for victims and survivors? What do victims and survivors need but not receive?

It is very difficult for families when they are not provided with information about the process following having made a disclosure of sexual assault. Families need concrete and clear information about what is going to happen next. Not being provided with this information can burden the family with unnecessary stress and worry.

The Court process is very stressful for families. The length of time taken from the initial complaint being made to the Trial commencing, in our experience is approximately 2-3 years. This is a very long time for children
to wait, they are then expected to remember in intricate details what happened to them.

Children being cross examined by the Defence can be very stressful and harmful for them. They can be made to doubt their own experiences and often the questions directed to them are in complete contradiction to the messages which have been given throughout the counselling process—ie, you are not to blame, the abuse is not your fault, you were brave to speak with the police etc.

**TOPIC B**

2. **How could the needs of victims and survivors from diverse backgrounds be better met? What should be in place to ensure they receive the advocacy and support and/or therapeutic treatment they require?**

Victims and survivors from different cultural groups may require use of interpreters whilst receiving therapeutic intervention and support. It would be so helpful if the same interpreter could be made available for the family throughout the process. It is difficult for families when every interaction they have with a given service also involves the introduction to another interpreter. This can make the client feel vulnerable in his or her own community as they may feel that a number of people know that they have been sexually assaulted.

Similarly, during the Court process, the use of the same interpreter would be beneficial for the child and his/her non-offending family members who may be witnesses.
2. Given the range of service victims and survivors might need and use, what practical or structural ways can the service system by improved so it is easier for the victims and survivors to receive the advocacy and support and/or therapeutic treatment services they need? What type of service models help victims and survivors to receive the support they need?

Information on how to apply for victims compensation should be provided to victims routinely. I’m unsure whose job this should be to disseminate this information. The compensation which is offered by Victims Services can be so helpful to families, although, routinely, this information is not provided initially, which can be the time that families require assistance the most.

Access to priority re-housing needs to be considered. Often following a sexual assault, the family cannot remain in their current housing due to feeling threatened and unsafe. Having a safe place to live can be the most important factor and it is extremely difficult to secure even temporary housing in a crisis situation in NSW.

Thank you for considering my submission.

Kind regards

Caroline Knight