

Response to Child Abuse Royal Commission 2015

Topic A: Victim & survivor needs & unmet needs

1. When abuse is reported: Firstly the need to investigate & acknowledge that child abuse has occurred and actions are taken to ensure that those responsible whether it be the perpetrator or by those who chose not to do anything and ignore allegations, they need to be held accountable.
2. Therapeutic services which include treating PTSD have been shown to be very successful but also being adaptable to meet the needs of the client to use different approaches ie. Constructive Self Development Theory (CSDT), The Self Trauma model as well as Survivor Therapy to name but a few.
3. Lack of understanding of the life long impacts of child sexual abuse can exacerbate the feelings of helplessness and worthlessness in survivors. Understanding that some survivors may need extended therapeutic sessions where as others will not require the same amount.
4. Reducing red tape to access services, ensuring access to said services is easy and not reliant on referrals from other services. Ensuring appropriate funding to provide holistic services to those in need.
5. As adult survivors of child abuse there is a need to include all the family in the therapeutic practices, including parents of the adult and to include child minding options.
6. With children who experience abuse there is a great need for Schools, Long Day Care & Family Day Care to be given educational materials/training to assist staff with the developmental needs of the particular child whilst in care. This ensures that any therapies that are being undertaken with the child are constant, ensuring continuity of care

Topic B: Diverse victims and survivors

1. Most services are mainstream services and often the need for interpreters is forgotten. As this is such a sensitive area there is a great need for interpreters who are specially trained in child abuse, family & domestic violence and counselling methods etc. Interpreters are integral to service provision when working with culturally & linguistically diverse (CALD) clients. An evidence base to demonstrate when services have employed interpreters to work with CALD clients.
2. As some of the new and emerging languages arrive to Australia it is imperative that possible interpreters are assisted in gaining qualifications to assist in allied health arenas, especially counselling.

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Topic C: Geographical considerations

1. There is always an issue of transport; there is a need for services to be mobile with all the conveniences of an office to provide services for those who are unable to reach services. Being accessible is one of the biggest hurdles clients have once the decision has been made to contact someone to assist them.

Topic D: Service System Issues

1. Hub models where victims can access a range of services in one area/building without having to travel to different services, this reduces possibility of clients missing appointments and allows for following the victims journey.
2. Ensuring all practitioners & workers have relevant qualifications and experience in said fields. All agencies including government are audited including files to ensure best practice case management is followed and that referrals are followed up, including all intervention work to be documented and has evidence demonstrating robust case management practices are in place. All agencies etc to demonstrate cultural awareness and how being culturally aware is implemented throughout all activities/therapies.